

# A Brace of Orthodontists



# **A Brace of Orthodontists**

**The story of the Australian Society of  
Orthodontists**

**David T Taylor**

First published in 2010

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# Foreword

I am honoured to have been asked to contribute this foreword. The invitation has challenged my memory of the past 53 years; in 1956 R.Y. Norton invited me to join his practice as an orthodontic preceptor. To date I have been privy only to excerpts from the text which follows, but, my appetite has been whetted to read the finished volume which should be published in time for the 22nd ASO Congress, to be held in conjunction with the 7<sup>th</sup> WFO International Congress and the 7<sup>th</sup> Asia-Pacific Orthodontic Congress in Sydney, February 2010.

The old adage, “give a busy man the task you need completed” has again been proven. David, son of Arthur and Vera Thornton Taylor, has more than lived up to the traditions set by his father. You will learn, as you read this history, that Dr A.T. Taylor was instrumental, with his colleagues, Drs Wilkinson, Seward, Wunderley, Campbell and Begg, in establishing the A.S.O., and, he Arthur, was the lynch pin in revitalising the Society post WWII.

David’s impressive C.V. testifies to his extended service to the ASO, (recognised with Honorary Life Membership), and, to the community in diverse fields. His experiences as a Research Consultant Australian Archives, and Convenor of Training (2005–7) Australian War Memorial guides, exemplifies his attention to detail and particular interest in history. With such a volume of papers to review (his father’s, the accumulated files from “the Shed”, and, records held by the Secretariat), so many personal interviews and communications; nothing has been overlooked in compiling this history.

Dr P.R. Begg, in referring to his concept of dynamic occlusion commented, “the only constant is change”. How true this observation has proven in the field of occlusion and history.

We have come from “Gestetner to Google”, and, as the internet threatens to take over our journals and newsprint I, for one, strongly favour the “hard copy” to readily supply information from the past.

When Dr Alton Moore, from the University of Washington (David Taylor’s alma mater) visited the Sydney Dental School, I was embarrassed to show him the

school, then furnished with 1938 equipment. His comment to me was that “the student’s attitude was the important quality to develop and this was not governed by equipment which may have been classified as ageing”.

Our patients have been afforded the best, due to the attitude of our forebears e.g. the establishment of graduate schools with their chairs in Orthodontics providing modern teaching, and, encouraging progressive research projects, the relationship with the R.A.C.D.S and special streams, research and further education through our Foundation, improved clinical standards from the creation of the A.O.B., not to mention long time fluoridation of our water supplies, now, almost universally accepted.

Lately the profession has suffered the agonies of increased litigation, but, this negative can be minimised in the future if we read and learn from the past; I know, as I have been fortunate to have lived and enjoyed my professional life under the influence of the post WWII revitalised ASO.

May I recommend to everyone D.T. Taylor’s history, which will endorse my judgement.

W.J. Mackie

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# Introduction

*“Historians are prophets looking backwards.”*

*“The future is in the past.”*

*“How can we understand our present or glimpse  
our future if we cannot understand our past?”*

*“How can we know who we are, if we don’t know  
who we were?”*



These and many others are views recorded by the British commentator and media personality, Steven Fry, in an article promoting a study of history, printed in *The Observer*, Sunday 9 July 2006. The reader may find these views somewhat presumptuous, even precious, but Fry does contend that there really has been an exponential growth in the public appetite for history. He wonders if history has become a “sitting down version of golf”. Or does one write history, in the words of the late Sir Edmund Hillary, simply “because it’s there”.

I began to write this history because I was interested and because there was a groundswell of opinion that it was time. Hightime. I began out of respect for those many orthodontists, particularly my father, whose contribution was so huge; whose legacies have profited us so much. Some showed vision, some leadership, some had energy, some great organisational ability. Many proved Woody Allen to be right and simply turned up!

Histories of the development, worldwide, of Dentistry in general and Orthodontics in particular, abound. Several histories of Dentistry in Australia have been written and some are included in the references to this text. To date, however, a comprehensive history of the Australian Society of Orthodontists has not been written.

I grew up with Orthodontics. I remember my father during the early stages of World War II, squeezing wax into a metal mould, ultimately to be cast in metal and then cut up into a number of brackets, to be soldered to small strips cut from a larger gold ribbon and finally fabricated into orthodontic bands. I remember the office smell on his clothes, as I raced up the street to give him a ‘welcome home’ hug. I remember the tornado of clean up activity around the house, when a meeting of orthodontists was due in Sydney. The excitement when Father came up with a pithy phrase ideal for a lecture that he was to give. Father loved his work and had a very satisfying career. I well remember that too.

This is a history of the ASO from its very beginnings until about the 2006 General Meeting. Initiatives begun after 2000 and considered not to have reached fruition are not included. Some matters occurring subsequently, which bear on activities already discussed are included. My successors will have ample opportunity to record recent events. My own view is that the work becomes progressively weaker as it approaches the present day.

This is not intended in any way to be a discussion of orthodontic treatment in Australia, either of its public health considerations or of particular therapies. Nor is it a discussion of the personalities involved. There were, and still are, many individuals, contributors to the Society, whose fascinating personal stories would add much colour, but this history is composed of their contributions only as they affected our Society. However, I have included brief thumb-nail sketches of some of those whose efforts have made the ASO what it is today.

The work has divided itself into four parts. The first is a chronological treatment of events up to the mid eighties, after which the threads become too tangled. This is followed by nine chapters, which follow events in particular areas like the Journal, the Foundation (ASOFRE), ASO Congresses and the Orthodontic Boards.

Included in this part are discussions about the growth of postgraduate education, our relationship with the RACDS, moves towards a permanent secretariat, Honours and Awards and something about the Begg Society. All these took place somewhat independently from the growth of the Society.

A section dealing with the activities of the major committees follows. The last part starts with a précis of Council activity from the late eighties, then discusses the Council itself, changes to the Constitution and Membership and finishes with some general comments looking towards the future.

I do not presume this to be a scholarly work, such that it would enable future historians to have ready reference to all its material. Where possible, references to matters of fact, written material or personal communications have been recorded. Where the reference comes from the archival material; that is so noted.

This history has been prepared for the 26<sup>th</sup> Orthodontic Congress, which is to be held in conjunction with the 7<sup>th</sup> International Orthodontic Congress and the 7<sup>th</sup> Asia-Pacific Orthodontic Congress, a boost for Australia, a great coup for Australian Orthodontics. I hope readers will find it of interest.

I am grateful for the enormous amount of help that I have received during the preparation for this work. Uniformly I have received courtesy and help. Interviews have been conducted with Michael Adamson (Sir Kenneth's son), Theo Baisi, Peter Barnard, Darryl Bowden, Richard Case, Jim Curtain, Gerry Dickinson, Terry Freer, John Fricker, Keith Godfrey, Jim Hawkins, Dick Hay, Bob Henry, Michael Harkness, John Heath, Phil Kinsella, Peter Lewis, Jim Mackie, Alan Parker, John Reading, Wayne Sampson, Tony Scarff, Laurie Smart, Rex Wallman, Ian Watson, John Wilkinson and Michael Woods.

Unfailing in their response to my requests have also been many mentioned above and Dick Abbott, John Armitage, Camillo Bonanno, John Cameron, Dick Cook, Ted Crawford, Ali Darendelilier, Craig Dreyer, Simon Freezer, Shane Fryer, David Fuller, Bob Gates, Mithran Goonewardene, Pat Hannon, Bill Harvey, Sven Kuusk, Igor Lavrin, Mike Loader, Barry Mollenhauer, Mark McLachlan, Helen McLean, Stuart McCrostie, Rick Olive, Tony O'Meara, Ted Peel, Mike Razza, Bob Rickleman, Jane Spark, Elsdon Story (the II), Colin Twelftree and Geoff Wexler. Contributions to the actual text have been made by Terry Freer, David Fuller, Keith Hoole and Peter Lewis. Help has also been received from Jean Cannon, Bob Gates, Fred Geard, Basil Phillips, Bill Harvey and Don O'Donoghue.

I acknowledge total support from the ASO Council and Executive Secretariat, from Dee Sanson and from Peter Barnard who has helped me with some ADA records. I have found the personal contact, with all those mentioned and many more, to have been the most pleasurable part of this task. It made me realise how wonderful our community is and what support we can draw from each other.

At all times I have been conscious of and thankful for the rock-like support of Grant Keogh, who has read every word of this text, made countless suggestions but at all times has given me my head. Scott French has also proof read almost the entire work and I am grateful for his skill in that area. My friend Sandy Paine who has devoted most of his professional life to technical writings has used vast quantities of green ink. Dr John Seymour helped with the last section.

I will forever be grateful to Rowena Robinson, who came in after all the typesetting and went through the entire text, which is much better for her efforts.

## The Developments to Date

This history was always going to happen. Movements towards this end have been on the ASO agenda since its inception. Visionaries like Ian Watson and Rick Olive have been demanding it. As is so often the case, New Zealand has beaten us to the punch. John Peat published his very fine work “A History of Orthodontics in New Zealand in the Twentieth Century” in 2002.

During the time of the Melbourne Executive in 1956, ASO President K.T. Adamson contacted Robert Halliday<sup>1</sup> pointing out to him the “desirability of appointing an Historian at this stage of the Society’s development” and requesting he accept the nomination. His interest in History was well known. He had co-authored with A.O. Watson a “History of Dentistry in NSW 1788 until 1945” published in 1977. This was based on research Halliday had started years before. The 2<sup>nd</sup> Newsletter of Adamson’s Executive<sup>2</sup> recorded that Halliday “readily acceded to this request”. He suggested that the History “be contained in a loose leaf folder so that additions to appropriate sections can be made”. Author’s comment looking around his study—“I wish!!”.

The newsletter goes on to say:

Sections could comprise:

1. The formation of the ASO
2. The formation of the State Branches
3. General activities of the ASO
4. Officers of the general executive
5. Officers of the State Branch Executives
6. Titles of papers and clinics given
7. Alphabetical list of members and dated of joining
8. ASO Constitutions

Halliday was asked to prepare material for the Adelaide General Meeting in 1959, but, although reminded on a couple of occasions, did not present his work until the following meeting during the 1<sup>st</sup> ASO Congress in 1961, at which he was also Social Director. His last reminder, on 6 April 1961, asked for a brief version to be included in the Congress brochure (reproduced below) and for “a more complete report for circulation to members”. Halliday’s report was accepted at the General Meeting, and his work was published in the ASO Bulletin Vol 3 No. 7 in January 1964. In working on the material, apparently he was surprised at the depth of the contribution made to the Society by A Thornton Taylor. He wrote to R.Y. Norton suggesting something should be done to recognise this. Prior to the 1964 meeting, Halliday asked to be changed to corresponding membership as he was going to live in England for an indefinite period of time. He lived there for some time and returned later to live in Tasmania but made no further contributions.

W.J. Mackie was appointed to Halliday’s place. He was not asked to furnish any particular reports for a long time. There is reference to a letter from E.T. Klein<sup>3</sup>

## THE AUSTRALIAN SOCIETY OF ORTHODONTISTS

THE Society was formed by a meeting of eight orthodontists on the 26th August, 1927, during the 6th Australian Dental Congress in Melbourne. The foundation members present were G. J. Campbell, R. G. Morris, J. T. Seward, W. S. Wilkinson and J. Wunderley of Victoria, E. C. Gates and A. T. Taylor of New South Wales, and P. R. Begg of South Australia.

The office bearers elected at this inaugural meeting were Dr. Wilkinson, president, and Mr. Wunderley, secretary-treasurer.

The second general meeting of the Society was held in Brisbane on the occasion of the 7th Australian Dental Congress in July, 1930. Dr. E. C. Gates was then elected president with Dr. A. Thornton Taylor as secretary-treasurer.

During these early years the functions of the Society were limited to constitutional matters and to the establishment of accreditation through component societies throughout the world. Little else could have been expected with so small a number of widely scattered specialists. To add to these difficulties, two major world events took their toll on the progress of the Society, namely the economic depression and the second World War. With the suspension of congresses during this latter period, the Society went quietly into recess.

At the first post-war congress in Perth, initial steps were taken to revive the Society, and, three years later, the Society was reestablished during the 12th Australian Dental Congress in Sydney on the 23rd August, 1950. Officers elected were: A Thornton Taylor, president; R. Y. Norton, secretary-treasurer; K. T. Adamson, V. P. Webb and R. W. Halliday, councillors.

The reformed Society started off with sixteen members, and over the last ten years the numbers have swelled to 47 full members and 71 associates.

During this period important amendments were made to the constitution, affiliation was granted by the Australian Dental Association, and a regular Bulletin was produced and distributed to members. The President's Award and the Case of the Year Project were also introduced.

The formation of State Branches opened up a vital and successful avenue for clinical meetings, lectures and discussions. Branches were established in Victoria in September, 1951, New South Wales in November, 1951, South Australia in May, 1955, Queensland in November, 1955, and Western Australia in February, 1956.

Since its inception thirty-four years ago the Society has emerged through grave difficulties and growing pains now to stand firmly upon the threshold of a new order. The First Australian Orthodontic Congress is the shining herald and at last fulfils the vision, courage and aspirations of our founders.

ROBERT W. HALLIDAY,  
*Honorary Historian.*

to the effect that the AAO was establishing an orthodontic museum and asking if the Executive could "solicit the interest of ASO members in providing material". The response was to the effect that the Executive was also endeavouring to collect material and suggested that they would appreciate reciprocity. There is a reference<sup>4</sup> to V.B. Webb, on his retirement as ASO president, sending his records to the Historian. There was also an attempt to create a record of some of the cases shown at that 1966 Congress.

During the lead up to the 1977 Congress, the Executive sought to produce a brochure outlining the role of the ASO and the services it could provide to its membership. It felt the necessity to do this, because of the uncertainty created in the minds of many, caused by the rapidly changing membership requirements of the Society. New orthodontists seeking to establish themselves were particularly affected. As 1977 was the 50<sup>th</sup> anniversary of the founding of the ASO, the brochure, produced by John Moffatt, recently retired as AOJ editor, was entitled 'The First Fifty Years' and included some historical material and became the quasi historical record of the Society for some time.

In July of 1977 the Executive resolved to write to W.J. Mackie asking him officially to accept the position of the Society's Honorary Archivist after he had advised them of material in his possession. Mackie saw his role as an archivist, not an historian.

At the Perth meeting in 1980, a motion was moved "that this Society approves the appointment of an Historian to the Society". Having had one for nearly 25 years, such a motion seems somewhat superfluous, but the reason may well have been that no one had really offered their services in this role. The recently retired A Thornton Taylor had just written to the President, offering to the Society his extensive collection of orthodontic journals. In thanking him for that collection, President G.I. Brown, asked him to accept the position of Historian as "he would be the ideal man to write such a history"<sup>5</sup>.

He was in one way very well equipped for the task, as he had kept vast quantities of records from his lengthy period of service. In fact, in the research for this book, his material was a major source. Secondly, in addition to about 50 contributions to the literature and a large number of presented papers, Thornton Taylor, in his retirement, had enjoyed writing as a hobby. He was an enthusiastic member of his local chapter of the Fellowship of Australian Writers and had had some of his work published. He mentioned typing would be a difficulty. Brown promised that the Society would bear all the costs related to the project and suggested a word processor.<sup>6</sup> He set to work. The Society's archives contain a multiplicity of random notes he jotted as he began his task. Perusing these, it becomes immediately obvious that the task, sadly, had become beyond his fading capacities. He was 80 in 1981. Within two years he had written to Geoff Brown, with apologies asking to be relieved of his task, citing Moffatt's by no means exhaustive contribution, as the work having already been done. Brown's kindly acceptance included an apology that none of the Executive remembered the earlier work.



The Shed

When he became President, R.G. Henry was planing to store historical material in the space the Executive had rented.<sup>7</sup> Instead, Mackie became yet again the man

in charge. He collected, and was known to be collecting the Society's records, all of which were stored in his SHED, a small garage in the extensive grounds of his home. When the author collected the material remaining after Mackie had thrown out what (he felt) was not important, late in 2007, he asked for a photograph of this important repository. The following year, the sad news came that the edifice was no more, having become victim of the redevelopment of the property. Fortunately, Mackie was able to retrieve a photograph, which had been used to support the Development Application needed to gain approval to build his new home.



The Begg Museum

After P. Raymond Begg died, his colleagues in South Australia decided that much of the material, which recorded his life and work, needed to be preserved. They succeeded in gaining approval and the necessary funding to create the Begg Museum at the Dental School. Much of the funding for this came from the South Australian Sesquicentenary Fund. The receipt of some public funding allows one to be aware of Begg's reputation, beyond the confines of his specialty. So this vital part of our orthodontic history remains safe as long as that space can be preserved. It is filled with Begg memorabilia, including records from his childhood, his education, an original torquing key made by Angle himself, case records of his treatments at different times, and most of his many Honours and Awards. This may have honed the minds of others, as more and more frequent references began to be made to the need to conserve all available material. There was also included on the ASO website, a small piece on ASO history. For quite some time this was current only up to 1977, having been taken from Moffatt's work. It was finally updated in 2007.

A meeting was planned for the Canberra Congress in 1998. Jim Mackie was asked to take the chair. At that time, Grant Keogh, who reported that his interest in such matters had been stimulated by Milton Sims, was carrying out some research in NSW. Sims was keen for Keogh to do a Master's degree in History, and hoped that this would ensure that the ASO's history would not be lost. Keogh had prepared

two posters for the meeting; one dealing with the history of the Journal and the second devoted to Arthur Thornton Taylor. To the meeting, Mackie invited all who he thought might be interested. With the invitation, he listed a number of items for possible discussion. Twenty eight people attended that meeting. Decisions were:

- to collect, catalogue and store all ASO archival material, and
- to form a “Historic Committee” comprising J.F. Reading W.J. Mackie and D.T. Taylor, and
- that there would be future meetings at Congresses of Senior Australian Orthodontists.

The sordid matter of costs received due attention. State liaison officers were appointed. This author accepted the role of secretary, now that his ASO Executive responsibilities were almost complete. R.F.H. Rickleman was to convene the next meeting. The following year it was resolved that a budget of \$2000 per year for five years be allocated for the ASO archives.

At the next meeting, the results of some archival searches (mainly in SA) were reported, together with the offer of Grant Keogh’s house for some storage of documents only there being insufficient room for artefacts. He thought the website would be a sound means of collecting information as to the whereabouts of worthwhile items.

Keogh had also done some basic research on the strategy of selection and the handling of archives.<sup>8</sup> A plethora of opportunities were discussed. In acknowledging his effort thus far, the committee announced that Keogh had been appointed Chairman, as some continuity was needed. Although the more senior men were generally the most interested, they could not necessarily be relied upon far into the future. The committee recommended to Council that it should become permanent. Although the name “Geriatric Liaison” had been mooted, it was decided to accept the more prosaic title “The Archival Committee of the ASO Inc”.

Keogh proceeded to some serious background research and presented a paper to Council entitled; “Establishing and Managing the ASO’s Archival Collection.”. Features of the report are that there is the imperative to “formulate a clear statement of the purpose of the collection and establish guidelines to ensure all decisions are consistent with that purpose”. Regarding the items discovered, various options were canvassing from simply documenting the material, to taking possession, to attempting storage in a museum. He asked: “what would be an acquisition policy?” “Would the criteria be a mix of historic, aesthetic, scientific, social or spiritual?” Modifiers of the main criteria were provenance, representativeness, rarity, condition and interpretive potential. “What place Biographies?” “What place for patient records?” He finished with a list of resource and support organisations. A very comprehensive report.

The reality is that in the foreseeable future, the ASO will not be able to afford the space to hold and display a significant collection. Electronic recording holds a hope for important documents and minutes, just as all back issues of the journal can be accessed that way. At the time of writing, the Dean of Dentistry at the University

of Sydney, Prof. Eli Schwarz is endeavouring to spark interest in having important historical records stored digitally.

Keogh also tackled the difficult job of taking oral histories from senior orthodontists before it was too late and found out that this was extraordinarily difficult and time consuming, just as John Jenner had found when he attempted the same thing with the PR Begg memorabilia.

At the conclusion of his first Presidential Report Ian Watson wrote: "It would be wonderful to have our history recorded officially. If any member or friend/acquaintance should be interested...". He even hinted at an M.A. (Hist). He was also anxious to collect biographical data on senior members for mentions in the Newsletter on their retirement and after they had passed away.<sup>9</sup>

As happens so often in human endeavour, Keogh found that initial enthusiasm is often only just that, and that real help was soon in short supply, so at the 2006 meeting reluctantly he offered his resignation. At the same meeting this silly person indicated that he would like to try and write a more comprehensive history of the ASO. And so the resignation was withdrawn. The feelings of Olive, Watson and Harkness went a long way towards provoking this offer. Harkness said: "if we don't collect it, we will loose it". His suggestion was to employ the services either of a professional historian (as had been done by the Queensland Dental Board) or a postgraduate history student.<sup>10</sup> If only! By that time, Keogh had sorted through Arthur Thornton Taylor's records and added much from other sources. This now shares the clutter in my study with the ASO minute books, which together are laying the Foundation for this history.

John Reading had always maintained an interest in the ASO's history and had written a most comprehensive history of the Foundation up to 1996. His work has informed the much condensed chapter on the Foundation in this book. Much of the material on which this history is based, relies on work Reading has done or has instigated.<sup>11</sup> His beautiful prose casts mine into shadow, but has been an inspiration for this work.

Overwhelming, the material on which this history is based has come from the archives or the Minute books. Most of this is in a sense unpublished in that it exists nowhere else. Where the text refers to an item in the archives, where possible the year is given. That is generally the way they are filed. There is also a substantial gap in the record between 1986 and 1989.

I have interviewed many of the people whose efforts have helped forge the Society and these interviews are referred to. Sadly, memory is a rather fragile thing, so there is really very little material other than the minutes. Something must be done. With modern technology records can be kept very cheaply. There was a plea<sup>12</sup> to keep one set of the AOJ in another safe place away from the secretariat. Fortunately the Journal is now held digitally and this will doubtless happen to minutes of the Executive and Council and hopefully all the committees. At the very least, the Executives should have their records digitised.

All history is a work in progress and hopefully the ASO's history will be revisited in future years: added to and reinterpreted. By then, hopefully also the ASO archival

material will be safely conserved. There has been too much valuable work done by a plethora of far-sighted and dedicated orthodontists for it to be otherwise. This work has attempted not only to record, but to analyse the steps by which the Society has arrived at today. It is therefore at times quite subjective. It has entered, on occasion, territory which could be thought uncomfortable, even unnecessary. Many of the participants are still alive.

Every part of this work has been reviewed by others and I am grateful for all the suggestions they have offered, but that does not always mean that nuances they feel have been included or even made known to me. It is my hope that it will be read in the spirit it was written: that it is fair; as accurate as possible; that it is not the last word and wherever it verges on the uncomfortable, it does so only because the story would otherwise be incomplete.

## Endnotes

1. Minutes Executive Meeting 9/1956
2. 1957
3. Minutes Executive Meeting 7/1964
4. 6/1966
5. 20/6/1980
6. 29/7/1980
7. Minutes Council Meeting 11/1986
8. Presented to Councillors and Representatives Meeting 3/2003
9. Minutes Council Meeting 3/2003 and 8/2003
10. Minutes Council Meeting 10/2003
11. Reading J.F., Some random recollections on the growth and development of orthodontics AOJ Vol 9 No.1 March 1985
12. Minutes Executive Meeting 6/2003

# Part 1

## The Early Years



## Chapter 1

# Laying the Foundation

It is often thought by the general public that orthodontic treatment is a new phenomenon. This is far from the truth, as all orthodontists well know. There is no need to chronicle this, as the early developments of the practice of Orthodontics internationally have been well recorded by numbers of authors.<sup>1</sup>

Not so for Australian Orthodontics. In its earliest beginnings, Dentistry was not a regulated profession nor indeed could it be considered a profession in any real sense. The same can also be said for Medicine, the development of which included Dentistry up to the mid-nineteenth century. Indeed, the separation of the two is relatively recent. Anyone could offer one's services to the general public without any requirement to prove to any authority, qualifications of any sort. A frequently used method of education was apprenticeship to one already practising. This approach came under some regulation towards the end of the nineteenth century and agreements between master and pupil began to occur as a matter of course in Dentistry, as well as many of the presently recognised trades. Sometimes the teacher was extremely conscientious and at other times grossly rapacious. The distinction between dentist and dental mechanic, or one who made dentures, was often blurred and depended upon the individual dentist's preferred scope of practice.

Associations of dentists, practising in Australia began to occur late in the nineteenth century. Associations were formed for a number of reasons and their eventual amalgamation into the one association, to present a united voice, was tortured and prolonged, as were movements to regulate the practice of Dentistry and dentists. A British Dental Act was passed in 1878, about 20 years after a similar

Act for Medicine.<sup>2</sup> In New Zealand a Dental Act came into force in 1880.<sup>3</sup> Agitation for something similar in the colony of Victoria occurred in the 1880s. In 1882 a bill to regulate the practice of Dentistry was introduced into the Victorian Parliament, was debated but later shelved.<sup>4</sup>

Two years later, a group of Victorian dentists established the Odontological Society of Victoria to agitate for the introduction of an Act to bring about the registration of Dental practitioners. Three years later, that Act became a reality, the first in Australia. It laid down educational requirements for those wishing to register and practice Dentistry. This Act brought into being the Dental Board of Victoria.<sup>5</sup> Its first registrar was Ernest Joske, a lawyer who maintained this position and a seminal role in the development of organised Dentistry in Victoria for many years to come. His term of office lasted 51 years, a feat never likely to be replicated. He was followed in that position by his son, Percy, who crops up later in this story.<sup>3</sup>

The first course of institutional training in Dentistry was in Melbourne at the Australian College of Dentistry, formed in 1897 by a John Iliffe, who had overseen the establishment of a Dental Hospital seven years before.<sup>6</sup> Its students in 1898 included Thomas Adamson and later, Elsdon Story in 1904 (both of whose sons were to play an important part in the growth of the ASO) and William S. Wilkinson in 1907.<sup>7</sup>

A course in ‘mechanical Dentistry’ was started at the Sydney Technical College in 1885 and another course was begun in 1896 by a Dr Peach, who had trained at the University of Pennsylvania. He grandly called it ‘The NSW College of Dental Surgery’.<sup>8</sup>

In 1902 the Dental Board of Victoria registered the first 13 successful candidates who had fulfilled the requirements of the Licentiate of Dental Surgery issued by the Australian College of Dentistry. Dental education had begun.<sup>9</sup> NSW was not long in following. Their Dental Act came into being on 1 January 1901, the same day George V proclaimed the Commonwealth of Australia.<sup>10</sup> It would provide a “licence to practice for dentists who presented evidence of their qualifications to the Board established by the Act”. Other states established their Boards within two years. South Australia was the last state to “exercise statutory control”.<sup>11</sup> Later that year the University of Sydney accepted 17 students into a three-year curriculum leading to a Licentiate in Dentistry. The Bachelor course was begun in 1905 and in 1910 a Doctorate similar to that in Medicine was established. A separate Faculty of Dentistry came ten years later. It was not until the 1930s that those seeking registration had to possess a university qualification.<sup>12</sup>

In NSW there were a plethora of Dental Societies formed for various purposes in these early years. Halliday records six separate Associations. The Commonwealth Dental Association was one of these. It comprised those Dentists who continued, despite the ethical restraints generally advocated, to advertise their practices. An Odontological Society came into being in each State more or less independently. One formed in NSW in 1898 and flourished for 20 years until it was amalgamated with the two graduates’ societies, to form the Society of Dental Science in 1921. This was a ginger group to encourage the eventual formation of a nation-wide Association.

Many dentists belonged to more than one Association. The alumni of the University of Pennsylvania were sufficiently numerous to form their own Society in 1905, but this was primarily for study purposes. The two major organisations were the Dental Association of NSW and the Dental Graduates Society, which as the name implied could be joined only by university graduates. The former was formed in 1892 by the same Dr Peach who had begun his own private school. Two of his students were E.C. Gates, who was elected the ASO's second President and Cecil Norton, whose son was to play such a major role in the ASO. The avowed purpose of the Dental Association of NSW was to get a bill for a Dental Act through the Parliament. It represented all registered Dentists. It lapsed as a result of internal friction and reformed again shortly after the turn of the century. Considerable tension existed between these organisations. Both were dissolved in 1930, subsequent to all the States finally agreeing with NSW to the formation of a national Australian Dental Association with State Branches. Both Victoria and NSW continued to produce their own journals for over 20 years.

Similarly Societies in conflict were being formed in other states.<sup>13</sup> In South Australia, which did not have a faculty until 1921, the first Society was the Odontological Society formed in 1907. A (cooperative) Dental Graduates Society of S.A. began in 1912 and a Registered Dentists Association four years later.

A State Dental Society of South Australia resulted from the merging of the Odontological and Dental Graduates Societies in 1922 and this became the sole accredited South Australian member of the National Dental Association of Australia. An amalgamation was effected between the State Dental Association of South Australia and the Dental Association of SA under the name of the SA Dental Association in March 1927.<sup>14</sup>

Meetings of dentists became quite regular. As well as their scientific and clinical component, attempts were made to form an Association structure. A series of Australian Dental Congresses had begun under the auspices of the National Dental Association of Australia, which would give accreditation to represent its interests to bodies developed in each State. The third such one occurred in Brisbane in 1912. The next was scheduled for 1915 in Adelaide, but was deferred because of the outbreak of WWI. The business of the National Dental Association was carried out in South Australia for the next nine years at which time the 4<sup>th</sup> Congress was held, also in Adelaide. The Federal Council of the National Dental Association met at the 5<sup>th</sup> Congress and there they decided to reorganise the body at the following Congress, planned for Melbourne in 1927. Out of this emerged a movement, which culminated in a meeting in Canberra (28 June 1928) at which the Australian Dental Association was formed with its six State Branches.<sup>15</sup>

In this day and age, we take specialisation for granted. But this was not always the case. Over the years, many have decried the process whereby people learn more and more about less and less and thereby, possibly lose judgement and balance. Dentistry was originally part of Medicine and many of its leaders built on their general backgrounds as they developed their skills and experience. This was more the case in England and even more so in Europe, where students had to enrol in the medical faculties and later branched into Dentistry.

This was not the case in the US. By contrast, we know that E. H. Angle wanted to divorce Orthodontics from Dentistry completely. He believed that the development of Orthodontics was being restrained by its inclusion in mainstream Dentistry. However, he was not purely driven by mechanics. He included elements of the humanities and particularly the arts in his curriculum as it developed.<sup>16</sup> A complete separation was never achieved in his lifetime but later, The University of California developed a 'Curriculum 2', which split from general Dentistry after the second year and specialised in orthodontic instruction thereafter. This programme continued until the 1960s when the American Dental Association's Council on Dental Education forced its closure.<sup>17,18</sup>

De facto specialisation in Orthodontics and Oral Surgery in Australia had occurred from the earliest days of the twentieth century.<sup>19</sup> In Australia the first dentist to specialise in Orthodontics seems to have been a W. Oscar Paul. He had studied in the US and according to Halliday<sup>20</sup>, possessed a DDS from Philadelphia and a DMD from Harvard. It is not clear whether specific training in orthodontics was part of this. He commenced Orthodontic practice in 1908. The following year, he was appointed examiner in Orthodontia and Mechanical Dentistry by the Dental Board of New South Wales. His contributions to organised Dentistry included acting as Honorary Secretary of the Odontological Society of NSW (1910–1919)<sup>21</sup>. Franki and Halliday both refer to him as being listed as Secretary of the newly formed Society of Dental Science, already mentioned. He also took a conciliatory role in a major argument between the Society of Dental Science and the National Dental Association.<sup>22</sup> Perhaps these imbroglios bothered him. Arthur Thornton Taylor, who spoke very highly of him, said much later, that Paul did not want to become involved in the politics of his profession. He was never to participate in the specialty's governance. In this he was unlike his elder brother Sir Norman Paul who was a very prominent dermatologist in Sydney.

Paul is quoted in the Commonwealth Dental Review, a privately owned dental journal in 1916–7, as contributing to clinical discussions at meetings. His point was frequently to promote orthodontic treatment by specialists and he tended to support treatment regimes recommended by Angle. He seems to have commenced Dental practice in 1904 and for most of the time practiced in 'Wyoming' in Macquarie St, which became home for so many of the Sydney Orthodontists over the years. He lived most of his last years at the Australia Club, just a few doors from his old office, before he moved to the central NSW coast and died in 1970. His colleagues thought highly of him and wanted him to accept Honorary Membership of the Society when it was reformed after WWII. He must have been quite successful and was a man of considerable taste. He bequeathed much of his collection of art and furniture to the nation. The National Gallery of Australia has many pieces<sup>23</sup> and the Australiana Fund has placed several pieces in Government House, official residence of the Governor General in Canberra. The National Library has a collection of his letters (165), which include correspondence from many of Australia's most famous artists. His art collection, which was donated to the National Gallery of Australia, also includes works of many famous artists.

In 1909 Cecil Moxham also commenced practice in Sydney as an orthodontist but after four years, returned to Dental practice. Franki was not able to find a

relationship between him and Sir Harry Moxham, one time ADA President. In Melbourne, the first practitioner of note was Dr W. Stanley Wilkinson, whose stellar career is well recorded and will be referred to later.

## The Society is Formed

### Orthodontia Section, Sixth Australian Dental Congress

**M**R. ROLAND MORRIS, Dr. J. T. Seward, and Mr. J. Wunderly, with Dr. Stanley Wilkinson, will conduct a study class in "Orthodontia in General Practice" at the Congress. It is expressly organised to be of assistance to those practitioners who treat the simpler types of malocclusion, and will include the following technical procedures:—

The separation of the teeth; the fitting of bands to molar and incisor teeth, using Angle's newest technique; the soldering to bands of various attachments, including spurs and staples; the intermaxillary plane and spur; the alignment of the light round arch; arch bending; attachments to the arch by means of hard and soft solder; the use of various types of ligatures; methods of retention.

Members of the class must come provided with the following, which should be obtained from their own depots, as very limited stocks are available in Melbourne:—

Bench vice, with jaws to open 3 inches; orthodontic blowpipe with tubing—Grunberg recommended; band holding and forming pliers, S.S.W. Nos. 155 R and L, if unobtainable bring band holding No. 144 and band forming No. 123; 2 pairs fine pointed solder tweezers; 1 pair band soldering pliers, No. 125; 1 pair straight scissors—short blades; 1 pair wire cutters; 1 pair small snipe nose pliers; 1 pair How's pliers, S.S.W. 110, serrated beaks; 1 blade burnisher; 1 button hook, short handle; 1 jeweller's pillar file, 5 or 6 inch fine cut; 1 hatchet amalgam plugger, Black's Set No. 4; 6 sandpaper discs; 1 straight wrench; 1 borax slab and borax; 1 sable brush (Windsor and Newton's No. 0); 2 clamp bands with curved tube for light arch—Large, No. 340 Y, two ditto Medium, No. 336 Y; 1 expansion arch, light, gold-platinum preferred, No. G390YA—if unobtainable, bring nickel silver No. 390YA; 1 tube S.S.W. solder discs, gold, No. G415, 1 ditto No. G416; 1 coil nickel silver band material, C or F; 1 coil silver solder wire; 1 pair intermaxillary hooks for light arches, No. 351X; 1 bottle soft soldering fluid (nitro-muriate of zinc); 6 inches gold platinum wire, .022 inch diameter; brass ligature wire and grass-line.

Several classes will be held, each of which will be limited as to numbers. In order to facilitate the organisation, members proposing to attend are requested to notify the undersigned as soon as possible. Membership is open to all without charge.—W. Stanley Wilkinson, 156 Collins Street, Melbourne, Chairman, Section Orthodontics.

In anticipation of the 6<sup>th</sup> Australian Dental Congress, which was to be held at the Anatomy School at the University of Melbourne, a notice appeared in the July 1927 edition of *The Dental Science Journal of Australia*, (also *The Dental Summary* of that month) that the Orthodontia section was to conduct a “study class” in Orthodontia for the general practitioner. This was to be conducted by Mr R.G. Morris, Dr J.T.L. Seward and Mr J. Wunderley, under the chairmanship of Dr Stanley Wilkinson. It was suggested that several of these classes may be provided according to demand and applicants were required to bring an extensive array of materials and equipment for fixed appliance manipulation.

In his draft notes, when beginning to record the ASO history held in the archive, A. Thornton Taylor records that foundation members also were G.J. Campbell and P. Raymond Begg. Begg is mentioned as discussing impression technique. It is well recorded that these four men, together with Arthur Thornton Taylor, determined to form an association of Orthodontists at that meeting on 22 August. According to Dr Thornton Taylor’s account, the decision was taken over coffee underneath a tree during a break in the course. Jack Wunderley said “let’s form an Orthodontic association” and Stanley Wilkinson strode inside and said to the assembled gathering: “I have the honour to announce the formation of the Australian Society of Orthodontists”.

Thornton Taylor also records that at the closing ceremony of the Congress, Stanley Wilkinson rose to make a similar announcement. He would have been moved to do so at that ceremony, because on the agenda for that meeting were movements towards the eventual formation of an Australian Dental Association, as we know it today, from its already existing but no longer feuding component societies.

Thus was born the Australian Society of Orthodontists. The Australian Parliament opened in Canberra that same year. It was the first year Anzac Day was celebrated in all states. Slim Dusty was born. It was the year Charles Lindbergh made the first Trans-Atlantic flight. After 19 years, production of the Model T Ford was discontinued. 1927 was also the year the Australian College of Surgery and the Australian Council of Trade Unions were founded.<sup>24</sup> The ADA eventually came into being the following year and the American Board of Orthodontics a year later.

It is natural for humans to form themselves into all sorts of alliances for their own support, protection and advancement. It is also a fact that in cooperation with fellows, sometimes progress can be made that is otherwise unattainable. What had our forefathers in mind? Precedents were there in abundance. Orthodontic societies were well established elsewhere. The American Society of Orthodontists began life in 1900 (renamed American Association of Orthodontists—AAO in 1937<sup>25</sup>) and within ten years there were similar associations in Great Britain and Germany. The European Orthodontic Society had been formed in 1907.<sup>26</sup>

The New Zealanders had almost beaten us to the punch. D.V. Donaldson was asked to attend the first International Orthodontic Congress held in Philadelphia in August 1926, representing the NZ Dental Association. He raised the possibility of forming a New Zealand Orthodontic Society with Dr. William C. Fisher, American Society of Orthodontists President, who “warmly approved the idea”. Peat records “The NZDA approved his proposal to form an Orthodontic Society and this

was announced in the May 1927 issue of the NZDJ.” Resulting from this, the formation of the New Zealand Society for the Study of Orthodontics occurred in November 1927. It was to follow similar lines as the British Society for the Study of Orthodontics (BSSO).<sup>27</sup>

Stanley Wilkinson also attended that Philadelphia meeting as part of a world tour, which included a return visit to the Angle School.<sup>28</sup> Of that meeting Shankland reports “Meanwhile at the 7<sup>th</sup> International Dental Congress, and the First International Orthodontic Congress, Albert Ketcham presented some preliminary observations on root resorption”.<sup>29</sup> These Congresses were probably juxtaposed like the first two Congresses of the ASO. The Australian Journal of Dentistry reprinted, over several issues, a travelogue from Wilkinson as he toured through western US and South America. No mention is made of his time in Philadelphia. It also appears in the same journal<sup>30</sup> that Wilkinson was made an Honorary President in the section on Orthodontia at the International Dental Congress (W.J. Tuckfield held the same position for Prosthetics). On the same page it was recorded that Kenneth Adamson’s father had broken his arm playing tennis. “Tennis enthusiasts sometimes are more vigorous than discretion demands”. Wilkinson was required to represent at the 7<sup>th</sup> International Congress, the Australian Federal Government, the Dental Board of Victoria and the state Dental Society of Victoria. There is no mention of any plan to form an Orthodontic group in Australia.

## William Stanley Wilkinson

Besides his most important contribution, which was the actual founding of the Society and his two donations, which brought the Foundation into being, W Stanley Wilkinson was not very involved with the Society. It was however the standing he held throughout dentistry, which provided the essential support for the ASO in its early years.

He was 21 when he graduated in dentistry in 1910. After gaining his DDS from Pennsylvania, where so many Australian dentists had studied, he did some postgraduate study in orthodontics at that institution. In 1912 he returned to general practice in Melbourne and shortly became President of the Alumni Society of the Australian College of Dentistry.

He saw war service on the Western Front between 1916 and 1918 and after demobilisation he became the first dentist to specialise in Orthodontics in Victoria. He was a student at the Angle School in 1921.

He was appointed lecturer in Orthodontics in 1919, a post he filled until 1930 and by 1923 had become Dean. Most accounts record this as occurring in 1925, but according to the Australian Journal of Dentistry in January and June 1923, he was appointed for 1923. At that time appointments were for 12 months only. The same publication (1 January 1922) referred to the well known, W.J. Tuckfield, being made Dean for 1922.



Dr W Stanley Wilkinson

During a frenetic ten years, as well as being Dean, he became President of the Australian Dental College (1924) and of the Melbourne Dental Hospital, President of the state Dental Society, and a host of other activities, including taking the first dental team to the outback of Australia. It was during this time that he provided the inspiration for the founding of the ASO. He was the obvious choice to be its first President.

In short he was a man of considerable gravitas and as such would have raised the profile of his specialty. During WWII, he chaired the Dental Advisory Committee (man power) and it was in this role that he was able to achieve for Dentists what had been one of his greatest wishes, that is to achieve parity in rank with medical officers.

He went on to become President of the ADA from 1945 to 1950, after three terms as State President. Oddly enough, during the pre-war years, after he finished his term as President, the archives contain no correspondence from, or reference to him. There were a number of contributions to the literature he made during that time. Perhaps he saw that the ASO was in good hands and felt his part was played.

He made two substantial donations to the ASOFRE, the last in 1965. Although he declined membership of the ASO when it was reformed in 1950, saying he was on the point of retirement, his public life was far from over. He was heavily involved with the Royal Flying Doctor Service and was its President from 1954 to 1957. He worked hard to include dental services amongst its functions. It was largely as a result of his efforts that the first travelling dental clinic was established in the Kimberley district.

Legacy was another of his interests. He was president of the Atheneum Club in 1962. He was the first Honorary Life Member of the ASO and was also made an Honorary Life member of the ADA four years later. He represented the ADA on the NH&MRC.

He died after a long period of ill health on 31 March 1969.

Was the new Society to be a self-serving association of the practitioners looking out for their own special interests or a means of advancing and sharing knowledge? The British Society for the Study of Orthodontics and the NZSSO, on which it was modelled, would suggest the latter, whereas the American Association of Orthodontists and the ASO, more the former. Is there a conflict? Commentators would take differing views. Are such groups, professional trade unions or organisations devoted to knowledge, its creation, sharing, dissemination and use? Subsequent events may help to compose a view. Suffice to say that both have a role and elements of both can clearly be seen as the Society has grown over the years.

As Thornton Taylor records: “Naturally Wilkinson became the founding President and Jack Wonderley supported him as Honorary Secretary of the fledgling Society”. According to Thornton Taylor’s notes: “E.H. Angle and Sir Frank Colyer were nominated and accepted positions as Honorary Presidents of this new Society, a fitting tribute to their status and influence in the Dental Profession”, The author has seen no correspondence to verify this, nor has Sheldon Peck, who is acting as editor of a history of Angle.<sup>31</sup> Colyer is not so well known these days and he may have been included so that the Society would not seem totally wedded to the US. He was a very distinguished British academic who played a major role in the Royal College of Surgeons and had written a book on Orthodontics: ‘Notes on the treatment of irregularities in the position of the teeth’ London Dental Manufacturing Co. 1900. He also was on the programme for that 6<sup>th</sup> Congress.<sup>32</sup>

Shortly after the first announcement made to that 'study class', there occurred a tremendous dispute as to whether this newborn should be a Society entirely of specialists or whether the general dentists present could be admitted as Associate Members. It is not recorded but seems entirely probable that this discussion was initiated by the general practitioners attending that particular course. It seems ironic that emerging from an occasion designed to assist general practitioners with their orthodontic endeavours, a decision was taken to exclude them from a group designed to foster that branch of Dentistry. Discussions relating to the right to Associate membership of the Society for those interested in, but not specialising in the subject, continued for many decades to come.

Four of the original seven members had studied with Angle (Begg, Seward, Thornton Taylor and Wilkinson). In fact, records included in the four volume work: 'The World of Edward Hartley Angle: His Letters, Accounts and Patients', recently published by the Angle Society, list three other Australians as graduates amongst his 198 students. Watkin W. Morris, Ernest W. Vickers, both from 1904 and Cecil George Moxham (1908). Moxham was a member of the first graduating class in Dentistry of the University of Sydney and is known to have returned, after a short time, to general practice.

The focus of their thought was towards the North American approaches and ideas, as was the focus throughout Dentistry in Australia at that time. Travel across the Pacific was quite common, as the existence of a Pennsylvania Alumni Society would testify. In fact, as well as spending considerable time with Angle, Stanley Wilkinson had done the last year of the general dental course at the University of Pennsylvania and so was entitled to the courtesy doctorate. American degrees were highly sought after and not uncommon throughout Australia until well after the end of WWII. The American view prevailed. Years later, in discussing this decision, Stanley Wilkinson said: "Arthur Taylor was right and I was wrong" so it would appear that at the time, Wilkinson's view regarding the nature of the infant Society had prevailed.<sup>33</sup> The Society was clearly to be the preserve of specialists.

The formation was on 26 August 1927. A receipt book begun shortly thereafter and now in the archives, records the annual subscription of five shillings having been paid by Wilkinson, Wunderley, Morris, Thornton Taylor and a G.J. Campbell. Dr J.T. Seward paid a subscription in November, and P.R. Begg and E.C. Gates the following January. Shortly thereafter a Constitution was prepared. The available records show drafts, which have pencilled in the margins, various comments as to possible amendments. It would appear that this Constitution had been "borrowed" from another place or indeed from a variety of sources. On 27 October 1927 Wilkinson wrote to Dr. William Fisher, who had been President of the American Society of Orthodontists as well as the 1<sup>st</sup> International Orthodontic Congress, advising of the formation of the ASO and requesting copies of the Constitutions both of the National organisation and New York Society of Orthodontists. I suspect that Joske was also asked, because some typographical errors in the draft suggest that there was strong Australian input. As the document originated in Victoria, Joske, still the major source of legal input in that State, might well have been involved.<sup>34</sup>

In what seems to be the original draft it is stated: “The object of this Society shall be the study of Orthodontia and its establishment as a distinct dental specialty”. There were to be three categories of membership: Active Members, who were in the exclusive practice of Orthodontia; Associate Members, who upon the nomination of a ‘Board of Censors’ could be elected as members if they were in general practice with a view to specialisation. They could be elected for a period not exceeding three years. A further category of Honorary membership was available to “members of the dental and medical professions and students of collateral sciences whose work may contribute to the advancement of the science of Orthodontia”. No mention is made of a category of member interested in the subject but not planning to restrict their practice. Associate and Honorary Members could participate in scientific discussions only and had no voting rights. It was therefore to be a Society of specialists. A very confident move with so few specialists and such great distances! All members had to be members in good standing of the Australian Dental Association. Debates were to be conducted according to the rules of the House of Commons. Ethical matters were not neglected. A member may be impeached for breaking the rules of the Society.

At that time, the description ‘Orthodontia’ was in general use throughout the United States and the British Society for the Study of Orthodontia was also so called. According to G. Stuart Taylor,<sup>35</sup> the Reverend Dr Sir James Murray, the Oxford philologist, was asked to determine if the suffix was acceptable. Murray set out various objections to the use of an ‘a’ to terminate a word of Greek origin. He suggested an “ending in C or even a CS for euphony, would be more desirable and accurate”. The term ‘Orthodontics’ was then used for the British Society and came slowly into standard use thereafter. ‘Ortho’ is certainly Greek. According to the Oxford dictionary ‘dont’ also comes from the Greek ‘odous’ meaning tooth, whereas ‘dens’ is Latin in origin.

Meetings of the fledgling Society were planned to occur in conjunction with the triennial meetings of the Australian Dental Association. This is interesting, as formation of the ADA did not take place until 1928. The first draft of the new Constitution clearly presupposed its formation. The new Constitution outlined, under ‘By-Laws’, the duties of the two office bearers, President and Secretary/Treasurer and also the ‘Board of Censors’ a term in frequent use by professional societies at that time.<sup>36</sup> It was stressed that papers read before the Society would become the property of the Society. Alterations to the Constitution had to be by unanimous vote of those present. A second and later copy of the Constitution, signed by Thornton Taylor and Gates, contains some suggested amendments. Most relate more to typographical errors in the borrowing of the wording from another source. A significant alteration precluded fee-splitting; an addition which seems to have been proposed by the Secretary, with the comment that something had arisen in Victoria quite recently.

At that 1927 meeting Dr Thornton Taylor read a paper to the members of the newly formed Society on ‘Treatment and Retention’, which later became the subject of concerns regarding plagiarism. As he was discussing Angle’s teaching on the subject, having just returned from two years at the Angle School, he would unlikely have been discussing the teaching of anybody else.

Later that August, Thornton Taylor wrote to Wilkinson saying that E. C. Gates was interested in membership and that he had not yet had time to see Oscar Paul. In October, Wilkinson officially wrote to Gates and Paul requesting them to join the Society, describing it as a “specialist Society”. In the letter to Dr Paul, Wilkinson mentioned that at present time there are “seven members and I am writing to ask if you will honour the Society by joining us and as the pioneer of this specialty we feel that your moral support will be most valuable and I sincerely trust that you will become a member”. He went on to say: “that there were five men in Victoria who were practising Orthodontics and for this reason the office bearers for the time being happened to the Victorians”. Oscar Paul, obviously unimpressed with this, wrote back to Wilkinson in November of that year<sup>37</sup> wishing the new Society well, but declining to join as it appeared to him to be “more of a local matter”.



Arthur Thornton Taylor with Angle

This was a classic example of the long-standing interstate rivalries, which have existed on the Australian mainland ever since, and even before, Federation and which continued for a very long time thereafter, if indeed they have entirely disappeared today. Paul had been earlier involved in the Society of Dental Science, the avowed intention of which, was to move away from past parochialism and it is possible that this may have influenced his decision.

In June of the following year (1928) the President sent a letter to all members saying that copies of the proposed Constitution would soon be sent out to obtain the member’s views regarding what was to become a recurring problem to the new specialist-oriented Society. Due to unforeseen circumstances, and probably related to the Depression which was closing its grip on the entire world at that time, a member of the ASO had to discontinue practice purely as a specialist. The letter contained a questionnaire as to what should be done. The questions were:

1. Should such a member be deprived of membership of any kind in the ASO
2. Should he be allowed to become an Associate Member without the right of voting.
3. If he be allowed to become an Associate Member, should the continuance of such membership be reviewed periodically by the Full Members.
4. If 3, be answered in the affirmative, at the end of what intervals should the reviews be made.
5. Have you any other suggestions to make?

Almost all the members replied to the questionnaire. The predominant feeling was that the member should not be deprived of membership but that he should be allowed to become an Associate Member and that this should be periodically reviewed, probably annually. This clearly indicates a degree of ambivalence about the exclusive nature of the Society.<sup>38</sup> In the same letter the President mentioned that in 1926 there were 450 Orthodontists in the United States, 22 in Canada and nine in the rest of the world, not including Australia. At that time there were eight specialists in Australia.

In April of 1929 Edmund Gates wrote to Wunderley returning a copy of the proposed Constitution with the comments that he had “read it through and everything seems okay”. This is possibly the result of discussions, subsequent to the first amendments, which the NSW Orthodontists had suggested.<sup>39</sup>

In December of 1929, the Secretary General of the 2<sup>nd</sup> International Orthodontic Congress to be held in London in July of 1931, wrote to the Australian Society of Orthodontists, extending to the Society a very cordial invitation to become one of its component Societies. He also suggested that they send in the names of two members suitable for election as Honorary Presidents and another one for election as Honorary Vice-President and also the name of a representative to take a place on the governing committee should the Society desire to have one. It also sought the names of members who might be invited to present papers. The letter was signed by the President, Vice-President and two Secretaries General. Clearly the infant Society was becoming internationally recognised.<sup>40</sup>

The long distances, which affected Australian Orthodontics so much in the early days, soon began to take effect. It seemed that not many members of the ASO were going to be able to attend the next ADA Congress (7<sup>th</sup>) to be held in Brisbane. Thornton Taylor contacted the ASO Executive saying the ASO should be represented at Brisbane and that he was prepared to go and had signified his intention of contributing to the program. He suggested that the ASO might meet in Sydney a few days previously, so that members not proceeding to Brisbane may have the opportunity of getting together. He had discussed this with Gates and offered his rooms for the occasion. Wunderley accepted his offer but Gates did not think it politic to have a meeting in Sydney, as there were to be two orthodontists from Sydney and two from Melbourne attending the Congress in Brisbane.<sup>41</sup> So a letter was sent to the members of the Society indicating that the next meeting of the ASO would be held in Brisbane. The report of the Proceedings of that Congress<sup>42</sup> records that there were five presentations on ‘Orthodontia’ including from Thornton Taylor and Wilkinson and one from J.R. Heath entitled ‘Practical Methods of Treating Malocclusion for the Masses’. The sectional committee in charge of Orthodontia was B.L. Rosenstengel and three others, none of them ASO members. The President of the Congress, W.R. Parker, mentioned that some research work was being done at the University of Melbourne, by a Mr Adamson, holder of a Fred Knight Scholarship.<sup>43</sup>

ASO records include a copy of the first Secretary’s annual report prepared for that meeting. Wunderley also forwarded a separate Treasurer’s report. There exists only a hand written version of the minutes of that meeting held on the tenth of July at

the Brisbane Grammar School. Only two members were present: Wilkinson and Thornton Taylor. The Secretary's and Treasurer's report were received and accepted and the Constitution, as circulated, was adopted. Gates was elected as President in his absence and Thornton Taylor as Secretary/Treasurer. The Censors were to be Begg, Wunderley and one other indecipherable name. The next meeting was to be in Adelaide in 1933. The last four lines of the record are difficult to decipher but seem to report that the President and immediate past-President were to be nominated to the previously offered Honorary Positions for the 2<sup>nd</sup> International Orthodontic Congress.<sup>44</sup> Gates appears to have declined the Presidency. Certainly, in notes written much later, this was mentioned by A. Thornton Taylor. There is no record of any action being taken by Gates.

In 1930 a subscription payment was made to an International Congress and the summary of that year records that Wunderley made a donation of 5/5d to allow the books to balance. A minute book was purchased for £2. This rather expensive investment seems to have been lost. The receipt book, which served until 1961, would have cost but a fraction of that. There is no record of affiliation with any other dental organisations.

After the Brisbane meeting, Thornton Taylor wrote to Wilkinson concerned that the copy of the Constitution sent to him as Secretary/Treasurer from the previous Executive, did not contain the suggested amendments as to the frequency of meetings that he and Gates had suggested earlier, nor was there any reference to the earlier questionnaire related to the specialist members whose circumstances had changed. This had now also happened to a second member. The Depression was taking hold. Wilkinson replied that he felt that the questionnaire and its results did not need to be referred to, but was happy for the other amendments to be included. Wunderley had suggested the amendment regarding fee splitting, which was a contentious issue and Wilkinson's advice was that it should be included without comment.

Accordingly, the amended Constitution was circulated in April 1931 with a covering letter saying that two new members, K.T. Adamson and R.W.F. Gates (a relation of E.C. Gates) had joined the Society. There was no provision within the Constitution for Full memberships to be ratified between meetings, so they could only become Associate Members until then. This appears to have annoyed Adamson a great deal. A request was also made for payment of the outstanding subscriptions with the suggestion that, to reduce postage, a three-year subscription of 15/- be paid.

Over the next few years the initial burst of energy dissipated. Very little happened. In 1932 the Secretary saw fit to write to the Registrar of the Dental Board of New South Wales, complaining that Orthodontics was not included among the subjects for the examinations for registration as a dentist. He stated that the orthodontic profession believed that this subject was one of the most, if not the most, fundamental departments of dental science and at least an elementary knowledge of its fundamentals should be required of all candidates for admission to the dental profession. The Registrar of the University of Sydney, which conducted the examination on behalf of the Board responded and advised the Society that

Orthodontia was to be included. The examiner for the subject was a Doctor L.A. Carter, who was not listed among the members of the ASO.<sup>45</sup>

Gates and Wilkinson were nominated for appointment as Honorary Vice-Presidents of the 2<sup>nd</sup> International Congress. Thornton Taylor was invited to speak. At this meeting a decision was taken to hold the third such meeting in Montreal in 1938. Thornton Taylor prepared a form of secretarial report for the proposed 1933 meeting in Adelaide, outlining some of the problems which faced such a small Society, namely that because membership was restricted to specialists or those proceeding in that direction, there was insufficient numbers to maintain interest and the current economic conditions, the Depression being in full flight, was reducing members capacity for involvement. He also suggested that the ASO had a role in public and patient education and that at the forthcoming meeting in Adelaide, many of these ideas could be discussed. Begg replied that he had been thinking along the same lines and that he was looking forward to these issues being raised in Adelaide (his home town). Although he presented a paper entitled "The problem of the child" at the Adelaide conference, there does not appear to have been a meeting at that time.

Thornton Taylor continued to act in the role of Secretary/Treasurer for quite some time. In 1937 E.C. Gates tendered his resignation as a member of the ASO to the Secretary, not mentioning any role as President. What had caused him to send such a curt letter, less than 10 words in length, is a mystery.<sup>46</sup>

In 1937 the ASO was informed that although the decision to hold a 3<sup>rd</sup> International Congress in 1938 had been ratified at two meetings of the American Society of Orthodontists in 1933 and 1935, the organising committee for that Congress decided that without considerable support from the United States, the Congress planned for Montreal would not be a success and that accordingly it was not to be held. With this advice came a cheque for two pounds being a refund of the original two guineas, which had been sent over to support the London Congress. The letter stated:

The officers charged with setting up the organization of the third Congress, convinced that the support of the majority of the members of the American Society of Orthodontists was essential to the success of the Congress held in North America, after considerable discussion recommended that the initiative for such a third Congress should rest with the American Society of Orthodontists. This suggestion was concurred in [sic] by the American Society Orthodontists at its meeting in St. Louis in April 1936.<sup>47</sup>

And so the 3<sup>rd</sup> International Orthodontic Congress had to wait for another day. It was to be quite some time.

There is a hiatus in the receipt book thereafter until 1950, when 16 men paid their subscription. The ASO essentially had lapsed after the August 1930 ADA Congress in Brisbane when only Wilkinson, Gates and Thornton Taylor turned up. It was a long way from Melbourne. Thornton Taylor records only meeting in a "fragmented fashion" in 1930. The reasons for the poor turnout would have been many and varied but may well include the Depression and the turmoil involved in

organised Dentistry. There was an 8<sup>th</sup> Australian Dental Congress held in Adelaide in 1933 and a 9<sup>th</sup> in Sydney in 1937.

The practice of Orthodontics continued apace. The four Australian Orthodontists who had studied under Edward Angle for varying periods played a major role as clinicians and were joined later by Kenneth Adamson. Nobody is recorded as having studied in Germany, the other centre of orthodontic excellence at that time, although Thornton Taylor published an article in the German literature in 1938.<sup>48</sup> Doubtless the inexorable rise of Nazism played a role, as would have language.

There were a number of contributions to the literature and to the ADA Congresses in the 1930s and much travel by Australian orthodontists, mainly to the US. During that decade, Dental registration became mandatory and later, at times which varied between jurisdictions, a University degree became the basic requirement. Specialisation was not referred to. One might voluntarily restrict one's practice and refer to oneself as a specialist, but there was no regulation. As a subject in the dental curriculum, Orthodontics was taught in all five schools, Dr E.C. Gates teaching at Sydney from 1922 until 1943. He had commenced specialist practice in 1924.<sup>49</sup>

The degree of Master in Dental Science for clinical studies was established by Melbourne University in Victoria in 1938.<sup>50</sup> By contrast, Victoria did not create a register of Dental Specialists until 1978.<sup>51</sup> Both the Universities of Sydney and Melbourne had been issuing doctorates for research work for quite some time. Thornton Taylor continued correspondence with Orthodontists locally and overseas and began to arouse interest for the rejuvenation of the Society in 1946. Very early in 1946, continuing to assume his role as Secretary/Treasurer to which he had been elected over 15 years before, he responded to the production manager of the Orthodontic Directory of the World (ODW) in Kansas, sending a list of names of Australian Orthodontists. ODW had sent a similar letter to other Orthodontists, including Begg and had also asked for names in Asia and the SW Pacific, which could not be supplied. The list contained 20 names of which two were reported as retired (W.O. Paul and R.L. Donnan).<sup>52</sup>

## The Society is Reformed

Orthodontics was a 'reserved' occupation during the WWII and so its practitioners did not suffer the same interruptions as general practitioners who were subject to conscription because so many dentists were required to keep Australia's troops fit for active duty. Organised Dentistry greatly reduced its activities during hostilities, and only slowly emerged from this interruption. A Dental Congress was organised for Perth in 1948. With this in the offing, in May of 1948, after paying the courtesy of seeking Wilkinson's approval for such a step, Thornton Taylor wrote to those men, known to be in practice, to ascertain their interest in the reforming of the ASO. He wrote: "a questionnaire was circulated to former members as well as to orthodontists who had entered the field during 'the long sleep' after the abortive Brisbane meeting almost two decades previously".

## Arthur Thornton Taylor

Arthur Thornton Taylor was a founding member of the ASO in 1927 and was appointed as Secretary/Treasurer in 1930. Unlike Wilkinson, the majority of his service to Dentistry was with the ASO. After an apprenticeship, he was registered as a dentist in 1922 and received his BDS two years later. He became interested in Orthodontics almost immediately and commenced work with E.C. Gates and began as a demonstrator in Orthodontics in 1925, before being accepted into the Angle School in 1926. He received his doctorate in 1934.

He was the foundation Secretary of the St George Dental Association in 1923 and a member of the Dental Health Education Committee of the NSW ADA from 1931 to 1952. He did briefly serve on the ADA State Council and performed an important function during WWII, as Chair of the Rehabilitation Committee, set up to smooth the passage back into civilian life for serving dentists. He was President of the Dental Alumni Society of the University of Sydney where he inaugurated the Fairfax Reading Memorial Prize, which he was later awarded.

He is best remembered for being the driving force behind the re-establishment of the Society in 1950 and for bringing into being all the State Branches. He held the Presidency for two consecutive terms, 1950–56, and the Executive which he led saw the Society through its infancy. He was anxious for it to have a substantial profile within the profession and attempted to ensure it was well represented in the dental literature by having Orthodontic supplements to the Australian Dental Journal.

He inaugurated prizes to help lift the profile of the young Society and made many contributions of his own, both to the literature and throughout Australia and abroad, both at ADA and ASO Congresses, and Society Meetings. He was, at different times, President of the ASO Foundation and the Australian Orthodontic Board. He was made its second Honorary Life Member and was also a Life Member of the BSSO. Although his dental profile pales in comparison to Wilkinson, his contribution to Orthodontics possibly was of greater moment.



He planned an informal meeting towards that end for members attending the Perth meeting to test the level of interest. Norman Benson, who was teaching Orthodontics at Sydney University and who had begun his orthodontic career with Thornton Taylor, replied<sup>53</sup> saying: “my adherence to Christian principles makes it impossible for me to be in any association” and wishing him success in “putting the association in running order again”.<sup>54</sup> R.L. Donnan wrote advising of his retirement in 1942. He was prevented from going to the Perth Congress by ill health. There were six positive responses including one from E.C. Gates.<sup>55</sup>

There was no official meeting in Perth, but the general consensus during informal discussions was positive. Thornton Taylor mentions in his notes that this meeting,

like the first one when the decision was taken to form the Society, was held in the open air, and indeed that it was very “blowy”. According to J.F. Reading, a dossier was kept of the replies. The circular produced below was sent out in May 1950. This included a more extensive questionnaire which produced 13 responses. These were clearly in favour of restarting the Society. The circular had suggested a meeting early in the Congress week to determine if the time was ripe.

QUESTIONNAIRE

Please strike out as indicated and return at your earliest convenience.

1. I shall be able to attend the meeting during Congress Week.	Yes. <del>No.</del>
2. I shall be unable to attend, but agree to the renewal of the Society's activities.	Yes. No.
3. I desire (to renew) membership in the A.S.O.	Yes. <del>No.</del>
4. I consider the A.S.O. should, as before, be restricted to practising orthodontists.	<del>Yes.</del> No.
5. I consider that provision should be made for general practitioners interested in orthodontics (similar constitution to B.S.S.O.)	Yes. <del>No.</del>
6. I consider that there <sup>should</sup> <del>will</del> be some form of pre-specialist membership.	Yes. No.
7. I consider that component groups might be established in each Capital City (with certain minimum membership requirements.)	Yes. <del>No.</del>

REMARKS: \_\_\_\_\_

\_\_\_\_\_

(Signed) *John A. Adams*

A Postgraduate Committee in Dental Science was established by the Dental Faculty at the University of Sydney in 1947.<sup>56</sup> A more or less informal study or journal group had been formed in NSW under the auspices of that Committee on 16 November 1949. Its purpose was “to gather orthodontists and those interested in Orthodontics to help them keep abreast by scanning and discussing orthodontic literature” and it had functioned well. In a speech accepting the Fairfax Reading Memorial Prize from the Sydney University Dental Alumni Society, A Thornton Taylor said: “we first mustered two or three men as a reading group (Bob Norton was one of them)”. It included A. Burgess, R.W. Halliday, R.P. McKinnon, W.S. Douglass, R.G. Henry, R.Y. Norton, R. McGrath and J.F. Reading. It was not

the exclusive province of specialists. Further, as Reading had studied in the UK, it was not so North American in its focus. The formation of this group was seen as an interim step prior to the reformation of a proper Society. A similar group had been gathered around Adamson in Melbourne for the same purposes. There was no lack of interest in the subject or in reforming the Society.<sup>57</sup> A meeting was planned to take place early during the next (12<sup>th</sup>) ADA Congress to verify interest and a further meeting later in that week, officially to complete to process.

Just prior to that Congress Halliday, one of the newer orthodontists, wrote a thoughtful letter to Thornton Taylor regarding the importance of the creation of State Branches. He felt they “should become the dynamic power behind the ASO”. He was clear-sighted enough to suggest that interested general practitioners should be eligible to join in all activities without necessarily having voting rights. In the letter, he also referred somewhat disparagingly to the Sydney Study Club. He claimed responsibility for “initiating this group” but was quite dissatisfied. It had come to be presided over by a “self-appointed chairman” and that “a most disconcerting undercurrent of conversation violated the whole proceedings”.<sup>58</sup>

Adamson wrote apologising for a previous engagement, which prevented his attendance at the planned meeting. (He was becoming a senior office bearer of the ADA and so had a multitude of duties at that Congress) and mentioned his concern about the small number of full-time practitioners, particularly in the less populated states, and the resultant difficulties of maintaining viability.<sup>59</sup>

Ultimately the Society was reformed at the 12<sup>th</sup> ADA Congress on 18 August 1950. At the meeting, 16 members were enrolled, but in Thornton Taylor words “because of inexperience, caution or a reluctance to assume office”, no records were kept of that meeting. The office bearers elected were A. Thornton Taylor, President; R.Y. Norton, Secretary/Treasurer; Councillors—K.T. Adamson, V.P. Webb and R.W. Halliday. The titles ‘Councillor’ and ‘Censor’ were used simultaneously during the early years. The 1950 meeting took place under the pre-existing Constitution from 1927, as amended by the suggestions from Gates and Thornton Taylor. The main object was getting started again and to increase numbers. The law could wait. Subscriptions were increased from five shillings to half a guinea—a 110 per cent increase in 23 years. At that 1950 meeting a resolution was carried, amending the document to provide for postal voting which had been allowed in the ASO’s earlier existence but was never specifically referred to in the Constitution at that time. A copy of the Constitution from 1950 held in ASO archives contains a note referring to “suggested amendments” to the effect that Article 3, Section 2, which discusses Associate membership, might have added to it: “or who maintains an active interest in Orthodontics.... Such membership to be reviewed at each regular meeting”.

The Society immediately wrote to Robert Harris, Secretary of the ADA, informing him of the event and that the reformed Society was commencing operations and enclosed the list of the office bearers.<sup>60</sup> The Society also wrote extensively to orthodontic societies worldwide and other interested parties, along the same lines. A mailing list was created to advise dental organisations locally and orthodontic societies internationally of the reformation of the ASO and for future correspondence. Several of these responded with good wishes.

The first business meeting of the new Executive occurred on 28 November 1950.<sup>61</sup> At that meeting, it was decided to ask Oscar Paul and E.C. Gates if they would accept invitations to become Honorary Life members. J.T.L. Seward was to be notified that his name would be submitted for election as an Honorary Member at the next full Meeting of the Society. Also, it was decided that a request be made of the Editors of the two Dental Journals currently published in Australia to have all the orthodontic papers delivered at the 12<sup>th</sup> Congress bound into one volume. The Australian Journal of Dentistry published by The Dental School of the University of Melbourne and the Dental Journal of Australia published in Sydney were finally merged in February 1956 to become the Australian Dental Journal.

The timing of future meetings was raised for discussion. Recognising the requirement in the Constitution to have Society General Meetings occurring at the same time as ADA Congresses, the issue was raised of “The possible advisability (or necessity) to hold additional meetings and sessions of the Society at or about ADA Congress time, to be devoted to material of interest primarily to the specialist”. That this should be discussed on the very first opportunity, suggests the direction the Society was always destined to follow.

Members of the Sydney Study Group were to be approached as to their intention of entering the specialty and recommending that they apply for membership. The President also suggested a ‘Case of the Year’ project, both “as a means of keeping the Society before the profession, as well as stimulating members towards ever improving standards”. The chosen case was to be reported in the Journal under the name of the Society, not of the orthodontist who performed the treatment, to avoid “self aggrandisement” although the Society members would be made aware of the winner.<sup>62</sup>

Shortly thereafter Stanley Wilkinson wrote, declining membership of the newly formed Society, as he was on the point of retirement. He suggested that it would strengthen the prestige and influence of the Society, if Oscar Paul and he were made Honorary Members.<sup>63</sup> He would not have been aware that Paul and Gates, both already known to have retired, had already been so proposed.

A. Thornton Taylor later wrote to all the new financial members with a list of names of members and a list of those societies and organisations which had been advised of the event. The letter to Harris was apparently mislaid. A first Bulletin was published in February 1951. It listed 16 members, presumably all being ‘financial’. The important role of the ODW is illustrated by a report in that Bulletin that the edition of that Directory, published in 1950, listed in their geographic areas 20 practitioners in exclusive practice and 15 in non-exclusive practice.

## A Conflicting Association

At about the same time John Heath, an Orthodontist from Melbourne had formed the ‘Australian Orthodontic Association’ with R.S. Gargett, who was later to deliver a Stanley Wilkinson Oration, as Vice-President and C.V. Hill as Secretary. Hill had been trained by Heath, then taught at the Eastman in London and became the Foundation Professor of Orthodontics at the University of Baghdad (that university

had four Australian Professors in the Dental Faculty at the time. Another was George Christensen, an Oral and Maxillofacial Surgeon and a one time Associate Member of the ASO<sup>64</sup>). Later, Hill was to become Chair of the ASO's Foundation for Research and Education. Heath had been practising as an Orthodontist for 20 years and had for many years taught the subject at the Melbourne Dental School and written and lectured widely. He had been a student of, and was greatly influenced by, Sir Frank Colyer who had, as mentioned previously, been asked to be an Honorary Member of the ASO at the time of its founding.<sup>65</sup> Heath had also served on the Victorian Dental Board.<sup>39</sup> He was more in the mould of British orthodontists at that time and his vision of a Society was more general practitioner oriented and his articles in the journals had emphasised this. There was considerable antipathy between Heath and some of the other Melbourne orthodontists.

In April 1951 Heath advised Thornton Taylor that "Some of us have initiated action to bring into being an Australian Orthodontic Association based on the Constitution and Code of Ethics of the ADA". He went on to say: "I think it is correct that I inform you of this.... The present idea is to first form the Association asking you to join us on the Council and after this is formed and not before (author's underlining) to inform all the interested parties throughout the Commonwealth...". He finished the letter... "For the present will you regard this information as private?"<sup>66</sup> The response was immediate, to the effect that already "an Orthodontic Society has been formed in this country" and that at the next ADA Congress in Sydney, its activities would be recommenced. Nonetheless, a notice was included in the February 1951 issue of the DJA to the effect that the Australian Orthodontic Association had recently been formed, listing its office bearers. Full Membership was confined to orthodontists, with Associate Membership available to those undergoing postgraduate training. Subsequently, Heath wrote to Thornton Taylor inviting him to attend (and therefore give credence to) the scientific sessions of the first annual conference of his own Society scheduled to take place on 3 July 1951.

John Heath had gone ahead and formed the Australian Orthodontic Association. This move merely recapitulated the divisions, which had plagued general Dentistry a generation before, when several versions of a dental association had been formed at around the same time. A letter had been sent from Donald Spring on 11 May 1951 mentioning no names but warning of this movement. It must have been extraordinarily difficult but, despite all the activity surrounding the event, Thornton Taylor had obviously honoured John Heath's request for confidentiality. Adamson wrote to his close friend, the President, pointing out that as he lived so far away (in Sydney), he could not "realise the full implication of what is going on". By this he meant in Melbourne. He mentioned that the Constitution at that time prevented including interested men who may not be in exclusive practice (and this included some on the teaching staff at the hospital). He went on to say: "That if we do not collect the young men within our fold, H. will get them". Adamson also wanted to form State Branches as a way of countering what he clearly saw as a threat to the ASO.<sup>67</sup>

Harold Chapman, President of the BSSO wrote that he had heard of the recommencement of the ASO and of another Orthodontic society (unnamed). He went on to say that the BSSO started in 1907 with about 50 members and at that

time (1950) had over 350 members.<sup>68</sup> Shortly thereafter<sup>69</sup> the Hon. Secretary of the BSSO wrote to R.Y. Norton congratulating the Society on its reformation and its ability to resume its activities. He added that “we are gratified to note that the President, Secretary and one of your Council members are Corresponding Members of our Society”. This was the acceptance that was needed. On 19 November 1950 The Southwestern Society of Orthodontists, a component of the AAO, did the same. The Australian Orthodontic Association ceased activity in 1953.<sup>45</sup>

## Associate Membership

Many, like Adamson and Halliday, were convinced that the Society would suffer the same fate as before, if Associate membership was not made more freely available. A postal vote to provide for such a category was hastily organised. In May 1951, members were sent a letter regarding “Extension of membership” proposing a change to Article 3, Section 2 which allowed Associate membership to a dentist who maintains “an active interest in Orthodontics”. Included with the ballot paper was a copy of a letter from John Wilkinson, in which he asked for an official ruling on the Article in question:

We wish to know whether an Associate Member could be re-elected after an initial membership of 3 years. We are desirous of forming a Victorian Branch of the ASO but do not think it would be a success unless we get some of the younger men interested, and the majority of them will never be full-time orthodontists.

A month later, a memo was sent to the Board of Censors advising them that the results of the ballot were that of 16 papers distributed, 15 had been returned, all in favour of the change.<sup>70</sup> As a result, Associate Members who had no intention of restricting their practices, but who were interested in the subject, could at last enjoy membership. This allowed for a huge increase in numbers and confirmed the viability of the Society. According to the Constitution, the result of the postal vote had to be ratified at the next General Meeting and strictly speaking, memberships could not be accepted until that time.

The Executive Committee announced that it wished to encourage the formation of Study Groups in each state. The already existing Melbourne Orthodontic Study Group was advised, as a courtesy, for they would have been fully aware of the fact that ASO membership had been opened up to encourage some of its members to join as Associate Members. John Wilkinson asked Adamson to find out from the Sydney Executive what should be the subscription, how could members be elected between meetings and “if and when” our study group becomes “affiliated with the ASO”, would papers delivered before our Society have to become the property of the ASO?<sup>71</sup> Norton responded outlining the practice adopted of accepting members upon “unanimous agreement by the full Board of Censors” and confirming ownership of papers by the ASO, adding “if this is considered by any sub-group to operate harshly, the rule could be varied when the Constitution is being re-drafted”.<sup>72</sup> Even as early as this, the ownership of papers delivered to an ASO meeting was an issue.

Having had no response from the ADA and concerned to establish the credentials of the newly formed ASO with the ADA, in May the following year, R.Y. Norton rewrote the letter, now to Norman Edney, the new Honorary Secretary with the same advice as had been sent to the previous Secretary, R. Harris, the preceding August. He explained that the previous letter must have been lost. Edney responded, saying that he would report the information to the ADA Council and asked for a copy of the Constitution. The Society also wrote to the DJA along the lines that the newly reformed ASO was, and had always been recognised as being, the authentic representation of organised Orthodontics in Australia, providing a detailed history both of the original formation and the recommencement the previous year. This letter was published in the July–August 1951 edition of the DJA. They also contacted the ADA again seeking affiliation. The Secretary of the ADA advised the ASO Secretary on 7 November 1951 that the requested affiliation had been granted, subject to five conditions:

1. That the ASO not enter into any political activity or press announcements except through the ADA
2. The Constitution of the ASO shall specify, as a condition of membership, membership of a branch of the ADA
3. The annual nominal roll of ASO members shall be submitted the ADA
4. The ASO shall advise of any change in the Constitution
5. This affiliation may be terminated in the event of any divergence of policy.

No good wishes, no welcome aboard, but still, mission accomplished. Norton responded<sup>73</sup> accepting the conditions, saying that no mention had been made of the necessity of Honorary Members to be also ADA members and attaching the membership list. He finished: “My Society wishes to congratulate your Association on its far-sighted view in granting affiliation to our specialist group and it is hoped that other specialising branches in Dentistry will follow the example”.

A note was received from the Secretary of the New Zealand Society for the Study of Orthodontics, congratulating the ASO on its new activities and requesting “some sort of liaison with you both for the exchange of useful materials (such) as films and in the event of visits by members of the two societies”. It was signed by J.F.A. Harding, the father of the current (at the time of writing of this history) NZAO President, Dr Winifred Harding.<sup>74</sup>

The first Executive published at least three Bulletins. Most of their activity revolved around the newly formed State Branches in NSW and Victoria. Bulletin #3 Dec 1951 included some practical clinical hints and extracts from a paper delivered by Alan Grainger, an eminent conservative dentist.

The subscriptions were doubled for 1953 for NSW and Victorian Members but remained the same for members where no branch existed. NSW and Victoria had slightly different fees for Associates. It was 2/6d cheaper for Victorian members.<sup>75</sup> A meeting was planned in Sydney to discuss the question of laboratory orthodontics.<sup>76</sup>

## The 1953 Meeting: Constitutional Changes

Included in the June 1951 memorandum, the President foreshadowed a new Constitution, which was to be presented in its entirety, saying that there were too many changes proposed simply to utilise amendments to the existing document. In actual fact, the alterations were quite modest. A further memorandum accompanied the Draft Constitution when it was circulated in 1953, in preparation for the General Meeting. As well as the recent granting of affiliation by the ADA and the formation of the first two Branches, it mentioned that the achievements of the young Society might have been better, in particular, the “Case of the Year” project, which had “not received the expected support or reached the high standard necessary to launch it through the Australian Dental Journal. A very high standard of case reporting must be achieved if we are to do our Society credit”.

A program including Orthodontics, Pedodontics and Preventive Dentistry lasting three and a half days, including nine papers on orthodontic subjects was prepared for the 13<sup>th</sup> ADA Congress. V.P. Webb was the organiser on behalf of the ADA. He advised Norton that he had set aside two hours free from lectures on Orthodontics for an ASO meeting, but wondered if that much time was required.<sup>77</sup> Webb had asked about contributions from overseas. Norton had hoped that sufficient material could originate locally but wondered if Harvey Jenkins (who was a Queenslander working in Canada) might be asked.<sup>78</sup> Members were advised of a meeting in two parts, (similar to that which occurred three years before) the former to consider the Constitution and the latter, a regular General Meeting.<sup>79</sup> In the end some of the papers were prepared by international experts like Oren Oliver and Clifford Ballard and read by local members. Also, there was an appropriately heavy emphasis on the social.<sup>80</sup>

At that Congress, the new Constitution was duly accepted and three days later the General Meeting took place. Included with the Notice of Meeting was an update of Society activities, which repeated the request to the Editor of the DJA to have reprints of the papers read at the Congress, bound in one volume.

To further stimulate interest and encourage members to contribute, the President had offered a prize for the most noteworthy paper presented during each Executive term. This initiative was viewed as an incentive for younger members, specifically those who had been in practice less than 15 years.

This Prize was first won by Elsdon Storey, for a paper he co-authored with R. Smith, a lecturer in Metallurgy at the University of Melbourne, entitled “The Importance of Force in Orthodontics. The Design of Cuspid Retraction Springs.”<sup>81</sup> This and a supplementary paper, published in April the following year, were to have a profound influence on the progress of Orthodontics in Australia and for a time, in fact, world wide. They became the theoretical basis for a mechanotherapy, well into development at that stage, by an ASO member, P.R. Begg.

The Minutes of the General Meeting, only a hand-written copy of which exists today, reveal the previous Executive was returned to office. The one and only occasion when this has happened. Eleven members were present. Honorary Membership was voted to five. The four originally honoured were re-elected. Mr R. Smith was the fifth.

Some of the Constitutional changes suggested were as follows: A separate Treasurer was included among the office bearers; the dated title, 'Censor' was changed to 'Councillor' and these together with the President, Treasurer and Secretary became the Executive; Robert Halliday, whose wise counsel had helped in forming the Branches and bringing in Associate Members, was elected to the newly created position; the new Councillors were Adamson, Webb and D.F. Spring. As a result of a suggestion from Webb, Orthodontia became Orthodontics<sup>82</sup>; Active Members became Full Members; the rights of Associate Members were further defined; a quorum was established at five.



Elsdon Story

The new Constitution was forwarded to the ADA<sup>83</sup> for approval, as required of an affiliated Society. This was subsequently returned with the request for changes concerning the process of affiliation and to some financial arrangements. Once these were incorporated, the document was again forwarded to the ADA. Approval was reported by K.T. Adamson the following year<sup>84</sup> and so the document became the official ASO Constitution and was circulated as the 1955 version. It moved from a four to a six page document. Affiliation with the ADA was mentioned, together with the possibility of granting affiliation to other bodies. The membership rules remained. Most of the other changes were simply procedural.

State Branches were mentioned for the first time. These could be formed, as a result of an "application by five members resident in that State, at least two of whom must be Full Members". The function of these Branches being to further the aims of the Society and to act on any problem of a purely local significance. The office bearers of the State Branches were to be three: a President, a Secretary and a Treasurer or a Secretary/Treasurer and a Councillor. One of these had to be an Associate Member. Associate Members were given voting powers for the election of office bearers of the Branch.

An interesting anomaly in this version of the Constitution failed to escape the eagle eye of the Secretary of the ADA, John Wark. An ever so slightly sarcastic letter drew the Secretary's attention to the fact that one of the By-Laws stated that Associate Members could take part in all discussions, scientific and otherwise, but were not entitled to vote or hold office. However, a clause in the Constitution proper had provided for amendments "without notice by a unanimous vote of those present". Any member could raise an objection causing the matter to be deferred and so placed on the subsequent meeting's agenda. Giving Associate Members such a power in constitutional matters seemed to Wark at odds with the By-Law, which refused them a vote on normal business. No doubt this caused considerable embarrassment within the ASO Executive. A caustic note about this ADA office bearer appears in later correspondence from the ASO Executive. Relations between

the specialist Society and the ADA have always exhibited appropriate obeisance but have not always been tranquil. This Constitution served for a while, but before long, substantial amendments were again thought necessary.

## Formation of State Branches

John Wilkinson (Stanley's son) had written on behalf of the Melbourne Orthodontic Study Group seeking an official ruling on the interpretation of Article 3, Section 2 of the Constitution. In response the Executive initiated a postal vote. The voting was unanimous that Associate Members did not have to be planning to specialise.

The Victorian Branch was duly formed on 5 September. About 20 interested people turned up at the meeting at the invitation of John Wilkinson. The meeting took place at his home as did numbers of the early meetings.<sup>85</sup> The meeting was also attended by Arthur Thornton Taylor, ASO President. C.R. Newbury was elected President and J. Wilkinson Secretary/Treasurer (in one version<sup>86</sup> in the archived records D.F. Spring was recorded as Treasurer).

At the AGM of this Branch on 4 December 1953, new office bearers were elected. Adamson, President; Spring, Treasurer; and Parker, Secretary and councillor McIntyre. Ailsa Hyland, the first female orthodontist in Australia, became a Full Member of the Victorian Branch in 1953. She is listed as an Associate the year before. She was the Secretary of the Branch in 1959 and 1960 in the lead up to the first Congress. Jean Cannon, also from Victoria, was the second, she was listed at the same time but her Full membership was much longer in coming (1979). She served a term as Branch Secretary somewhat later. Branch activities were recorded in the Federal Bulletins published NSWby Adamson's Executive. These centred mainly on the material presented at the meetings.

Richard Case was elected President in 1956. The following year the Branch had nine Full and nine Associate Members. This compared with NSW which had 11 Full, but 32 Associate Members.<sup>87</sup>

Shortly after the Victorian Branch formed, under the ASO letterhead, Norton, as ASO Secretary wrote<sup>88</sup> "Following the recent inauguration of the Victorian Branch of the ASO and clarification of the scope and character of the Orthodontic groups centred around Sydney" inviting members of the Sydney Study Group and other interested people to attend a meeting on 8 November 1951 at the Law School near to the site of most of the orthodontic practices in Macquarie Street. This meeting brought the NSW Branch into being. "For convenience" the Office Bearers were the same as for the parent Society. Membership of the group was expected to be in the vicinity of 20–25. A clinical paper was also read by W. Alan Grainger, a senior conservative Dentist.

In South Australia, there were only two Full Members, Begg and Brian Crisp, and no Associate Members, at the start of 1955. Accordingly, in March these two men proposed six practitioners as Associate Members. The Executive ratified these nominations in April. Thornton Taylor wrote to Brian Crisp<sup>89</sup> outlining all the Constitutional steps which had been followed and asked him "to be kind enough

to select the best hotel for the cocktail party part of the celebrations". Permission to form the Branch was given on 10 May. The Branch was formally inaugurated on 16 May. Again, to lend weight to the occasion, Thornton Taylor attended, by invitation of P.R. Begg, with whom he was invited to stay. Also, he proposed to present a paper. Included in the Associates at that time were R.F. Wallman and J.D. McKinnon, both of whom were to have long and successful careers in Orthodontics and a M.R. (Milton) Sims, whose name will pop up constantly in this narrative. Two others, P. Reade and J.B. Leach, were to go on and make valuable contributions, over lengthy periods, in other fields of Dentistry.

The Queensland Branch came into being as a result of an application on 30 November 1955 from two Full Members: Webb and B.L. Rosenstengel and Associate Members A.R. Erwood, P.G. Andrews and A.T. Meyers, seeking approval for the formation of a Branch listing three Full and three Associate Members. Earlier, Webb and Rosenstengel had nominated for Associate Membership, a practitioner interested in Orthodontics who lived in Cairns, a distance of over 1500 kilometres from Brisbane. Thornton Taylor was later to write to Rosenstengel, congratulating him on the service the Queensland Branch gave to its distant members. The actual date of the formation is not recorded. There is a letter from Thornton Taylor in the archives<sup>90</sup> which says: "the Queensland Branch is now assured and I expect to go to Brisbane in the third week of January to attend their inaugural meeting". He later wrote to K.F. (Kevin) Henderson in reporting that the Queensland Branch had been launched "last Monday". The presumed date would therefore be 17 January.

Western Australia also went through the process in 1956. The first orthodontist to practice there was K.F. Henderson, who commenced practice in 1946. He was later joined by R.S. Gargett. Henderson wrote to the ASO President, seeking permission to form the Branch in an undated letter marked as having been received 18 February 1956. In this letter, Henderson offered his congratulations on the growth of the Society to Thornton Taylor "because I know it is your drive which has done it". This came with a covering letter dated 14 February 1956, which explained that he was not sure that the three nominations for Associate membership had already been approved. In the situation that they had not, the application would have been contrary to the provisions of the Constitution. A rather frantic exchange of telegrams assured Henderson that they had indeed been approved. Thornton Taylor replied to Henderson on 17 February to the effect that the application for Branch Formation could proceed and that to "clinch matters", if he were to gather all six members in his rooms, "I could have a phone call put through to you just as a personal touch to establish the Branch". And so the President read out an Inaugural Message.<sup>92</sup>

It is with great pleasure and a deep satisfaction that Orthodontics in Australia has progressed, and its organisation has been developed, to the stage when Branches in all States have now been established. I wish you all personal enjoyment and deep professional satisfaction, and I wish your Branch steady and harmonious development.

And so the Western Australian Branch was added to the growing stable.

## To Work

The first issues of concern to the Society were not long in surfacing. The ASO, like every other organisation ever created, exists in part, to look after the perceived interests of its membership. And over its life, the ASO has been involved in its share of confrontations. Some may be seen as worthwhile only through the eyes of its own members. Not all or indeed many of these will be discussed in this volume. However, two controversies say much about the Society in its early days.

Exception was taken to the form of a silent clinic at the 13<sup>th</sup> ADA Congress and to a commercial organisation which was promoting the use of an appliance using diagnosis by 'mail order'. So incensed were some of the members about the silent clinic that a motion was moved and passed at the General Meeting in 1953, seeking some sort of control of advertising and self aggrandisement. This of course proved to be something of a conundrum, because the Society, on the one hand, was encouraging its members to present material to create a greater awareness of Orthodontics and also of the newly formed Society, while at the same time attempting to censure what they perceived as self promotion. Obviously, one had to draw a fine line, particularly if one had offended some of the hierarchy. The ADA<sup>93</sup> promised to look into the situation, and the following year, after deciding that the ASO case had merit, published alterations to the requirements for such silent clinics.

The more serious matter of the Norsk 'mail order' appliances, which the ADA agreed was in need of attention<sup>94</sup>, was regarded as something that could only be dealt with at State level. This was an appliance designed to stimulate jaw growth generally and forward growth of the mandible in particular. The aid of the ADA was enlisted. They had analogous issues with general dental laboratories offering services, which went well beyond the mechanical. This issue festered for some time, then went away, but remained unresolved to resurface in the 1980s. Then it was to occupy the attention of the specialty for a considerable time.

In that year, 1954, Orthodontics received a considerable boost when Dr Alan Brodie, considered by many to have assumed the "mantle" from Dr E.H. Angle as intellectual guru and at that time the Dean of the Dental School at the University of Illinois, came to Melbourne to give a series of lectures sponsored by the Victorian Dental Board. This included the prestigious Ernest Joske Memorial Oration. This was a major coup for Orthodontics and although not officially involving the ASO, considerably increased the profile of the specialty. As well as the Joske, he gave ten presentations in eleven days, including three of special interest to Orthodontists and two to Dental students. A lecture on the mandible was given in three country areas. The Victorian Board obviously was determined to get their pound of flesh.

## The Executive Returns to Victoria

And so the Society made ready for the next ADA Congress. One of the Executive, possibly seeing how things were to develop, saw the ASO involvement as "an ASO meeting within a Congress". The programme was limited to 15 lectures but allowed for 150 table clinics. A message was sent: "The Congress Commission has

made a very generous allocation of time for specialist sessions". All members were encouraged to contribute and topics were suggested. General practitioners were welcome at the specialist clinical sessions.

In his Presidential address, prepared for the 1956 meeting,<sup>95</sup> A. Thornton Taylor was able to record with satisfaction that State Branches of the ASO had been formed in all mainland States, except Western Australia, and that would happen soon. He stressed the need for orthodontic material to be published. "Now that Australia has only one Dental Journal, it should not be difficult to direct contributions regularly to it." He continued to promote the 'Case of the Year' as an excellent vehicle for promoting Orthodontics. He noted the developing activities of the Branches and suggested that consideration should be given to developing library facilities, on a state rather than a federal basis. His work in establishing the ASO as the official representative of Orthodontics, with a life assured into the future was now complete. He would continue, throughout his long career, to provide service to the infant child he had fathered, as it proceeded towards adulthood.

In gratitude for his support and for his excellent administration, Thornton Taylor made a fine gesture in giving his Presidential Award, not for a paper, but to R. Y. Norton for his sterling support and efficiency. In his formal reply, Norton said the Award was a great surprise and one "he will cherish in his 'Orthodontic memories'". He praised the work of his friend in building the Society and expressed the view that the ASO would soon be able to stand on its own feet and hold its own Congresses. The author admits to some bias, but his feeling is that, as far as the ASO was concerned, this was a partnership made in Heaven.

Membership numbers at that time were Victoria, 17; NSW, 21; SA, 7; Qld, 7; and WA, 6. All members paid the same capitation fee to the Federal office of a half guinea. This began to be paid to the Federal Executive on behalf of each member by the State Branch. Branch fees were a similar amount except for Associate Members in NSW, who were to pay 7/6. At this time the Society had a healthy asset base of approx £50. For the General Meeting, notice was given of a motion to change the Constitution deleting all reference to time or intention to specialise, in the election of Associate Members. This was rejected.<sup>96</sup>

At this meeting<sup>97</sup> the Executive did change and became Melbourne-based with K.T. Adamson being elected President (he was at that time also President of the ADA) and D.F. Spring Hon. Secretary, Roland Morris, a member at the original formation was elected Hon. Treasurer, with A. Thornton Taylor, Kevin Henderson and Renton Newbury appointed as Councillors. During his term of office, Adamson was also re-elected President of the ADA. (Renton Newbury, an Adamson preceptee and the first President of the Victorian Branch was also to achieve that high office). The enormous workload involved in this office, must have placed enormous strain on his energy. Perhaps this might explain why this Executive could be considered as one more of consolidation. Whereas A. Thornton Taylor could be seen as a visionary who was helped by a high energy Secretary/Treasurer, the Melbourne-based Executive was more experienced in organisational matters. This can be seen in the Bulletins they published and the very structured way they went about rewriting the Constitution. One of their first steps was to write to Dr Ronald Tonkin requesting closer liaison with the NZSSO.<sup>98</sup>

## Sir Kenneth Adamson

Son of a dentist, Adamson graduated with Honours in 1926, and received his Doctorate only three years later. He went to the US after Angle had passed away and studied under Robert Strang who had been one of Angle's pupils and who operated a private school from his office for some time. He returned in 1932, sought to join the ASO and was incensed that Full membership could not be granted other than at a General Meeting. Adamson did take up a teaching role and became senior lecturer in 1935, a role he continued for 30 years. He began postgraduate teaching in 1946 as senior lecture-in-charge with a six month course which included night classes in theoretical subjects at his own home. Adamson continued to attract



students to the University of Melbourne, until his place was taken by Victor West in 1968. He was Honorary Dental Surgeon to the Royal Melbourne Hospital, the Alfred Hospital and the Royal Children's Hospital. For 13 years he served on the Australian Dental Journal Board.

Other than his role as teacher, Adamson's main contributions within Dentistry were to the ADA. Adamson was highly supportive of the re-establishment of the ASO but he wanted to include Associate Members, being of the view that the Society needed the added numbers to be viable. His involvement in ADA matters prevented his attendance at the meeting which re-established the Society in 1950. He was ADA Federal President for six years, the longest continual period of service as President of that organisation. (Sir John Hall Best did two separate four-year terms) His term as ASO President 1956–59 overlapped this. He was the first Chair and long-time Trustee of the Foundation and Secretary of the Australian Orthodontic Board for the period 1966–69. He was one of the six subscribers to the initial Constitution which began the Australian College of Dental Surgeons, a councillor from its inception, until retirement in 1976 and President in 1969–70.

Adamson's ADA roles clearly impacted his ASO Presidency, but it was nevertheless a time of consolidation and together with a very well organised team (his Secretary Don Spring was State ADA President) the Society maintained its progression.

His main legacy was succeeding in completely rewriting the Constitution into a more up-to-date format.

Adamson's extensive service to his profession was ultimately recognised when he was made a Companion of the Order of St. Michael and St. George in 1963 and later a Knight Bachelor in 1968. One of only four knighthoods given for service to Dentistry before imperial honours were discontinued in 1975.

Like Wilkinson, the status he held in the broader dental community, helped the ASO's profile immeasurably. A gifted clinician, he and many of his former students continued their allegiance to the Edgewise appliance throughout the time the Begg technique was making such an impression. He conducted a short course in the use of the

Edgewise appliance for the ASO in 1968 and was one of the foundation members of the Australian Edgewise Study Club in 1972. On his retirement, his colleagues decided to have his portrait painted and an appeal was conducted throughout the profession. The wonderful support of the profession was such that a balance of over \$2000 remained after all expenses had been met.

It was Sir Kenneth's wish that this amount be equally divided between the Melbourne Dental Alumni Research Fund and the Australian Society of Orthodontists Foundation for Education and Research. The painting shows that he was already suffering from the sickness which finally took his life. He was a keen golfer and fisherman and played the piano, organ and violin.

Although much effort continued in promoting Orthodontics within the profession generally, it became obvious that members would not be able to produce sufficient material of a high enough standard, either for an orthodontic supplement to the ADJ or for a Journal of their own. 'The Case of the Year' project failed to arouse the imagination of the members, to the extent that the Victorian Branch had indicated that they might withdraw their support for it.<sup>99</sup> R.G. Henry from the NSW Branch had already won it twice. Victorian Branch members, however, continued to submit entries and after 1956, usually won. Efforts were being made to keep all presentations made to the Branches, in a form suitable for publication.

The orthodontic body was drawing breath for its next big rush into its future. What does seem evident at this time was the energy within the Branches. A comprehensive report of the activities of each Branch became a part of each successive Bulletin. By 1957 membership reached 100 with Full Members being just over one third of the total. Twenty-four Associates joined in 1957 alone.<sup>100</sup> The large proportion of Associate Members was a concern to the Executive.<sup>101</sup> Thought was given to maintaining an appropriate ratio of Associate to Full Members. The Western Australian Branch was against this proposal, feeling that the large Associate membership in NSW occurred as a result of the success of the 'short' and particularly the 'long' courses conducted there. They suggested that, "some satisfactory method of establishing the bona-fides of proposed Associates be established".<sup>102</sup> On the other hand, the NSW Branch was much more supportive. In a paragraph in their September 1957 Newsletter, under a heading entitled 'Franchise for Associate Members' they suggested giving them a vote on Society matters. They proposed "that the Federal Executive be requested to examine the possibility of Associate Members in good standing for five years being granted Full Membership".<sup>103</sup>

The ASO logo first came into use by the Executive early in 1958, even though at that stage, it had not been officially approved. Three designs had been obtained. A contemporary design had been rejected in favour of a more conservative one. The Secretary's report for the 1959 General meeting said: "the fact that there had been some unfavourable comment had not surprised us".

The Executive continued the practice of publishing Bulletins. In all, five were published. No.4 in 1958 extended to nine foolscap pages. In his President's report,

Adamson drew the attention of members to the upcoming General Meeting in February 1959 and the opportunity for the State Branches to discuss together the areas of common interest where differing views existed. This was again to be held in conjunction with an ADA Congress. Adamson was hoping that time could be set aside at that Congress, for matters of specialist interest. He also encouraged members to prepare material, which would be appropriate for general interest as well. He also mentioned, like Norton, the possibility eventually of holding meetings of the Society separate from ADA Congresses. Much of the content of the Newsletter, in fact all five of the Newsletters, came from the Branches, which had begun to develop comprehensive programmes of their own. In 1958 at the suggestion of J.F. Reading, the NSW Branch had begun a Clinical Day for country members and in a move hailed as a breakthrough, had been allocated the first clinical meeting of the NSW Branch of the ADA for that year.

For the 1959 General Meeting, the comprehensive Secretary's report makes interesting reading. It noted that Adamson had been awarded a Fellowship of the Royal College of Surgeons for his services to Dentistry. It added that at that time, three of the ADA State Branch Presidents and one President-Elect were ASO members. Membership was 117, 42 being Full Members. Halliday had been asked to accept the position of Historian and the back files had been passed to him. Following requests from NSW and Qld for the inclusion of another position, that of a Vice-President in the Federal Executive, it was decided that the time had come to revisit the Constitution.

The General Meeting was attended by 20 Full (half the total) and four Associate Members. The very first item of the agenda was an attempt to increase fees paid by the Repatriation Department for orthodontic treatment of people for whom it had responsibility. This was another example of the Society seeking to act in its members' interests and will be discussed further. The Treasurer reported that the financial affairs of the Society were in order, with a credit balance in excess of £38, soon to be increased by another £20 after payments for the Orthodontic Directory of the World. The Historian's report had not yet been received (this author has sympathy!). Most of the meeting was taken up with Constitutional matters. In preparation for this a document, which was substantially different from the 1955 version, was circulated to each State Branch, so that suggested changes to any of its clauses could be received. The Society's accounts refer to the typing of a new Constitution having occurred twice, suggesting that an intermediate document was produced only to facilitate discussion. All States responded and differing amendments were suggested many times for some parts of the document. These responses were collated and all suggestions were inserted into the original document. This was recirculated prior to the February 1959 meeting in Adelaide, to be used as the basis for discussion at that meeting.

The meeting must have been a nightmare to chair and probably even to maintain one's concentration. Seventeen separate resolutions needed a vote. Many of these were of a fundamental nature. The procedures for changes to the Constitution itself were altered. The period involved in training could now be included in the time requirement to become eligible for Full membership. Reference to Associate

membership “with a view to specialising” was deleted, thereby wiping away the final remnants of the purely specialist Society. A Vice-President was added to the Executive, the idea being the holder of this position would be the President-Elect. This began the practice of ensuring a degree of prior experience among ASO office bearers.

By-Laws were eliminated altogether and matters previously referred to by that means were brought into the main body of the document. This change was later reversed and still later replaced, as successive legal advice was received. There had also been some reorganisation of the structure of the document. A membership application form became part of the document. The changes agreed to at that meeting were subsequently ratified by postal vote.

The Presidential Award originally instituted by A. Thornton Taylor went to R.G. Henry, for an article recently published in the *Angle Orthodontist*. (S. Seward received this award in 1961. It does not appear to have lasted further, suffering the same fate as the Case of the Year<sup>67</sup>). Discussion regarding a separate Congress was inconclusive and the matter was left to the new Executive. The same result occurred with the logo, which was referred to as a letterhead. Subscriptions were increased to five guineas, a five fold increase. Costs had defeated the notion of an orthodontic supplement to the ADJ.

The President declined re-election. P.R. Begg expressed the opinion that the Federal office should be located in the State where the next Congress was to be held and so for the most part, the new Executive should comprise members of the NSW Branch.<sup>104</sup> Thus began the practice, now enshrined in the Constitution, to ensure that that happens and thus ended the practice of choosing the Executive at, and not before, General Meetings. Although the Constitution was not yet endorsed, a provisional Vice-President was elected. He was Kevin Henderson from Perth, where the ADA Congress following the one planned for Sydney had already been scheduled. The meeting took well over three hours. Adamson and his Executive received a vote of acclamation for the successes of their term of office, not least being the successful outcome of that last meeting. Five hundred copies of the new document were ordered. Although there were four further lots of Constitutional changes over the next eight years, reprinting the document was not required. The 1959 Constitution represents the culmination of the efforts of the Founding Fathers to create a viable Society.

The Society was nearing the completion of its first decade. Four General Meetings had occurred, all in conjunction with ADA Congresses. Significant contributions had been made by ASO members to the scientific programme, as well as to the running of the parent association. The profile of the speciality was thus markedly enhanced. A succession plan for Executive officers had begun to take place. Branches had been formed in all mainland states. All were viable, with active memberships averaging about twenty. The ASO had a membership not quite of that number, indicating that it was possible to be a branch member and not be on the Federal books. There was a growing membership and the Society was rightly considered the official embodiment of the orthodontic speciality even if

that specialty, and indeed what actually constituted a speciality, needed further definition. There was a clear understanding on membership.

The Society had come of age.

After the 1959 meeting the Executive returned to Sydney. Robert Norton was elected President; John Reading, Secretary; both highly experienced and equally highly respected and Neville Cox, a relatively new member, was elected Treasurer.

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## Chapter 2

# The Sixties

*'If you can remember the sixties, you weren't really there.'  
Attributed to Comedian Robin Williams*

Orthodontists made application for membership, not to the State Branch but to the Federal body, although members in that state were given to opportunity to voice their disapproval. Only the Federal Executive had to approve applications. This became state based in 1959 although after receiving the application from the State Council, the Executive could still refuse to elect the candidate.<sup>1</sup> Doubtless there have been some applications which met with less than universal endorsement, however the archives seem to contain only one instance. A member let his reservations be known and then protested to the President when these were ignored. The President responded "There is no section in the Constitution which covers the possibility of one or more dissenting votes being cast in the election of new members. The ASO is a democratic body".<sup>2</sup> Black balling was out.

In the early days the greater part of the ASO activity occurred in the Branches. The first records available to the author are the minute books of the NSW Branch, starting in 1959, under the chairmanship of Keith Godfrey.

The large number of Associate Members in most Branches were essential participants. In 1958, in New South Wales, John Reading instigated a "clinical day" designed primarily for the benefit of country practitioners for whom a long distance journey for a single evening lecture was impractical. Forty members attended. With the exception of 1961 when the 1<sup>st</sup> ASO Congress took place<sup>3</sup>, these clinical days continue to the present. W.J. Mackie reported that Associate Members were to bring along a case, usually one that was not going so well, so as to receive some advice.<sup>4</sup> The 50<sup>th</sup> meeting took place in May 2009. All retired orthodontists from that Branch were invited. The notion has been adopted by each of the other Branches and is one of the premier events in their calendar.

The NSW Branch inaugurated a study group in September 1962. This had a second meeting the following year but seemed to wither thereafter. The Branch itself acted very much along the same lines, so the tandem organisation was unnecessary. In that year six meetings were held with an average attendance of 18 members as well as guests.<sup>5</sup>

South Australia went one step further.<sup>6,7</sup> Even though their numbers were so small they divided into two groups whose members would progressively rotate from one group to the next. They met at lunch time. This created small conversation groups and may have been less threatening to the timid, although in South Australia, from the author's experience, the timid appear to have been in short supply.

It was at the branches that the Associate Members played their greatest role and possibly also drew their greatest benefit. In 1966 the New South Wales Branch decided to require Associates to present one case per year to maintain their membership.<sup>8</sup> Whether this was a method of providing them with an opportunity or to discourage membership of all but the committed is uncertain. All members were required to table one case for the 1967 Clinical Day.<sup>9</sup> In 1970 they further resolved that new Associate Members be asked to present a case within six months of joining the Society. This Branch also made a point of inviting Student Members to attend their meetings so as to encourage them to join Society. The New South Wales Branch also decided not to require state membership dues from the students.

Perusing the early Bulletins and the State Branch newsletters, one is struck by their energy. Initially meetings in most branches occurred almost monthly and attracted significant attendances. There was a lecture programme in each Branch, many delivered by Associate Members. Extensive lecture programmes were developed to satisfy the interests of a cross-section of the membership and later on this extended to inviting lecturers from interstate and subsequently even from overseas.

Newsletter #20 from the Queensland Branch is something of an eye-opener. Fifteen pages. Quality articles including two from Associate Members. The editor of the Journal, indeed the Federal Executive itself, went to considerable trouble to ensure that orthodontists Australia wide were made aware of the programme in each state.

The South Australian Branch continued to be particularly vital. Meetings included presentations and article reviews. In 1973 they discontinued case reporting because of increased numbers at meetings. Instead two papers were presented at each meeting.<sup>10</sup>

## Repatriation Fees

One of the first main concerns of the new ASO Executive was in the matter of repatriation fees. So recently after the end of WWII, there were many dependents of ex-servicemen and women, for whose healthcare the Repatriation Department had accepted responsibility. The Department was obviously keen to restrict any growth in expenditure to the extent possible. The professional bodies sought at least to maintain parity with inflation and the ever-increasing costs involved in

running a practice. Although the Department came into being at the end of WWI, orthodontic treatment was not made available to beneficiaries of Repatriation Benefits until the period 1954–5.<sup>11</sup>

This issue was the first item on the agenda of the 1959 General Meeting. The ASO Executive was obviously anxious to maintain an appropriate fee level for these treatments and had sought this through the ADA. Included in the general discussion was a motion that the maximum fee for full fixed appliance treatment be increased to 125 guineas, and also that the consultation fee be increased.

There had been little response from the government to the resolutions from the 1959 General Meeting. In addition, John Wark, for many years a senior Executive of the ADA and President from 1962–4, who had carriage of this issue, was, at least in the view of Adamson and Norton,<sup>12</sup> somewhat averse to specialists' interests. The orthodontist's position was not advanced as forcefully as the Society would have liked. According to Norton,<sup>2</sup> the normal Repatriation fees were 2/3 to 3/4 of routine fees, with the differential being markedly less for general practice fees than for those of the orthodontists. Norton, in early 1961 had, of his own volition, carried out a fee and overhead survey. He compared the situation in 1956 with that pertaining five years later, to support the case for a fee increase. This survey did not attempt to include all ASO members. Only 16 were selected and it may well not have been a representative sample. It was the first such survey to be carried out by the ASO.<sup>13</sup> Norton's submission went to the ADA although there were some, P.R. Begg<sup>14</sup> notable among them, who felt that the ASO should attempt to deal directly with the Repatriation Department. Norton had found that overheads had increased from 37 per cent to 51 per cent over the five years and that the usual fee for a full case "had increased from 110 guineas to 180 guineas".<sup>15</sup> In this instance, the ADA promised to present the orthodontist's argument. One of the interesting features was that many of the senior ASO people were also senior office bearers of the ADA and were frequently accused of having difficulty with their two hats. Adamson, who at that time was ADA President, advised Norton to request a 25 per cent rise in fees.

The Repatriation Department response was that, while their maximum allowable fee had not increased in the last four years, the average fee paid had increased by 60 per cent. The Department was not happy with a 'fee by negotiation' approach and wanted more a 'fee for service' system.<sup>16</sup> Negotiations were being undertaken between the ADA and the Repatriation Department. ADA President Gordon Rowell had suggested a division into four categories: one or two arch treatment and a further division between fixed and removable appliances. The ASO executive had suggested the use of only three categories (only one for removable appliances whether for one or both arches). This was defeated but must have been debated hotly, because the minutes record that 18 members spoke. This has developed into a 'Schedule of (Dental) Services' over which there has been considerable debate.

This item was again first on the agenda of the next General Meeting in 1961. Records of this issue make up a large proportion of ASO archival material from that time. The Department advised a 20 per cent increase in the maximum allowable fee the following year.<sup>17</sup> McGibbon immediately advised all branch secretaries.<sup>18</sup>

Ever since, Repatriation fees have continued to be an issue with the Council, which continued to lobby for fee increases, mainly to keep in line with inflation. Mostly this was done through the ADA. A decade later, R.H. Abbott was concerned to verify that a recent fee rise for orthodontic treatment, advised by the Department was equivalent to that for other treatments.<sup>19</sup> A request for an increase of over 26 per cent was made by the ADA in 1974.<sup>20</sup>

The Department became known as Veterans' Affairs in September 1976. As recently as 1999 a member drew the Executive's attention to the low level of fees, which had remained unchanged for many years. At that time the Executive decided to seek the assistance both of the Australian Council of Dental Specialists and the ADA.<sup>21</sup>

The ASO also attempted to flex its muscles on another issue. There was considerable concern about two advertisements appearing in the February 1960 issue of the Australian Dental Journal. Mirroring concerns expressed eight years previously, one of these related to some mail order orthodontic appliances. This time, these were being promoted by a highly respected general practitioner. At this time, Adamson was the ADA President and he protested to Dr (later Sir) John Hall Best, Editor of the Journal. One advertisement was altered, but the other advertiser could not be persuaded to change and therefore the advertisement was withdrawn. This situation was reported in Vol. 2/3 of the ASO Bulletin, drawing considerable ire from Hall Best, who felt that such discussions, as had occurred, were confidential in nature. He felt that comments such as this might lead to the view that such representations could be a matter of course. He commented that the "inference is clearly present, that the ASO ...is the guardian of the ethical standard.... While such candid claims may be pleasing to members of the ASO, there are wider implications....".<sup>22</sup> This little vignette serves to illustrate that the Society was beginning to pack a punch but there was a feeling that it should do so with some care.

## Bulletins

The new Secretary, John Reading, formalised, even further than the Victorian Executive, production of the ASO bulletin. He had them numbered as part of a volume, for which he had forwarded to each member a folder into which all issues could be inserted. These bulletins were about 20 pages in length. He could clearly see a growth towards a permanent publication.

His first issue contained minutes of the preceding General Meeting and also announced the ratification of the Constitution as a result of a unanimous acceptance by postal vote, of the resolutions from that meeting. This made official the position of Kevin Henderson, as Vice-President. It reported that the Executive held four meetings in 1959. It outlined new conditions for the Presidential Award instituted by A. Thornton Taylor, which was now to be for a contribution to the literature from someone in practice less than 15 years and set out the requirements for the "Case of the Year" competition, which ASO Executives had been heavily promoting without overwhelming support, since the notion was first floated. It included detailed news of the past and planned activities of each State Branch.

This first issue also included a supplement to the ASO membership directory, which had been prepared for and included with, the agenda papers for the recent General Meeting. Even now, nearly 50 years later, perusing this newsletter, it has to be admitted that it was an impressive piece of work.

The three subsequent issues together paint a very accurate picture of the nature of the Society at that time. The Queensland Branch would clearly have won the prize for the best organised. Their report mentioned newsletters, numbering up to 18. Both Queensland and NSW used their newsletter to keep in touch with their large number of Associate Members from country areas. On the other hand, NSW President Keith Godfrey complained of poor support: “There are city members, both Full and Associate, who for obscure reasons retain financial affiliation... but take no part in its activities.” In 1961 the NSW Branch had 14 Full Members and 45 Associates. John Reading included details of the case presentations from Queensland and congratulated them for their detailed reporting. Many sets of branch minutes were included verbatim. There seemed to be a level of excitement in the air around the Society.

The Sydney Executive thought the letterhead designed by the previous team was somewhat garish and elected to be “conservative”. On their stationary was printed only the names of the office bearers and the name of the Society, making no use of the logo at all. The problem seemed not the logo itself, but the heavy highlighting of the Society’s name, clear across the top of the page. The logo was not used either on the folder or the bulletins. Although subject to repeated criticism and even an alternate suggestion from Western Australia, the logo, first designed during the term of the Victorian Executive in 1957, was to serve the ASO for nearly 50 years. The circle with the entwined letters ASO under the Southern Cross seemed a fitting emblem.

## Subscriptions

In the lead up to the 1961 meeting, the Victorian Branch<sup>23</sup> suggested that the funding arrangements be altered. “Is it incumbent upon each branch to levy its members two guineas per annum, if such finance is not required for branch activities?” The Federal subscription at that time was three guineas. Victorian members asked for an item to be placed on the agenda, that consideration be given to the establishment of a separate Federal subscription, to be paid by members through their State Branch and that any additional subscription for the branch itself be a matter of internal policy, decided at state level.<sup>24</sup> In the same letter, it was also suggested that Dr P.R. Begg be made an Honorary Life Member.

The executive response to the query about subscriptions was that the States should continue to collect the amount prescribed and if they chose not to deduct the suggested amount, that was their affair.<sup>25</sup> The Executive had advised all branches<sup>26</sup> that capitation fees of three guineas were required from five guinea subscriptions and half that amount from three guinea subscriptions. NSW and Victoria sent in differing amounts for their Associate Members. Victorian Members were required to pay the full subscription. Brian Lee, resident in Tasmania, but an Associate

Member of the Victorian Branch, was only required to pay the lesser amount. The year before,<sup>27</sup> the Executive confirmed that renewal of Associate membership, which originally was to be reviewed after each General Meeting, would be automatic “except when an adverse report was received from the State Branch”.

At the 1961 General Meeting it was decided “that the subscription to the Australian Society of Orthodontists be four guineas per member”. Not spelled out, but implicit in this wording was that this was the Federal Subscription and the States were free to set their own. By December the NSW Branch chose to raise their subscriptions to three Guineas.<sup>28</sup> State Branches have been free to set their own subscriptions ever since.

There was a suggestion, that, rather than the Branches collecting all the subscriptions and forwarding the capitation fees to the Federal Executive, all subscriptions should go in the first instance to the Federal Executive. This was attempted in 1962 during the following term, but without any Constitutional support. The Federal Secretary wrote to the Branch Secretaries:

You will probably be pleased to know that this year the Federal Subscriptions will be paid directly to this office instead of being collected by Branch Secretaries. Account forms and receipt books have been printed and all members of the Society will receive their individual accounts in the near future.<sup>29</sup>

This would have been a rather momentous change in the workings of the Society and would have strengthened the position of the Federal body. It must have come “out of the blue”, because W.J. Harvey, NSW Branch Secretary, replied the following week to the effect that already he had circularised his Branch with their dues and already 15 had paid. Even Western Australia, where the President and Secretary were located, was in the same boat. The archives (1964) contain what appears to be a draft addressed to the “Executive Officers of the ASO” and annotated by President Henderson “Not sorted but discussed during trip”, in which he states “it was tacitly agreed that collection by Federal Office would be worth considering.... I have taken the opportunity as President of the Society to accept the responsibility. Certainly at the end of 1963 the position will not arise. It will not occur again.”

Collection of annual subscriptions remained the duty of the State Branches until 1977 when the Constitution was changed and the relevant clause (9.1) came to read:

The Council may determine the amount of the Annual Subscription for membership or any special assessment....The Treasurer shall be at liberty to require State Branches to collect from members of the State Branches the amount of any such subscription or assessment.

State Branches continued to collect the subscriptions until 1986.<sup>30</sup> At the subsequent General Meeting (1964), there was an addition to the wording of Clause 13 about resignation, which said that Membership would cease if fees were not paid in advance but reinstatement would be automatic if paid within three months. Other than that, no alteration was made to the handling of subscriptions and they continued to be collected by the states.

In 1974, the South Australian Branch decided to levy its members an extra \$12 to replenish their depleted coffers.<sup>31</sup> Subscriptions vary considerably from state to state depending on the inclusions. South Australia includes the cost of some functions to dragoon a greater attendance. This seems reasonable because all South Australian members of this branch live in Adelaide. However Orthodontists who live in the Northern Territory must also belong to the South Australian Branch. One such (of two) Mark Leedham complained to the Federal Executive that this was a severe impost to travel so far for a dinner meeting. This was viewed sympathetically. The ‘tyranny of distance’ applies within Australia as well.

## The First Congress

The new Executive (1959–61) very quickly decided to go ahead and hold its own Congress, somewhat independently of that of the ADA. Although they did look at the issues surrounding a complete separation, it was decided that the right time and place was immediately before the ADA Congress in August 1961 and sought and received the blessing of the ADA President (not altogether surprising: it was K.T. Adamson) and the scientific director of the Congress, Earle Bastian.

As time drew near, thought began to turn to the approaching General Meeting of the Society. Norton wrote<sup>32</sup> to Adamson floating some new ideas. He had just spent five months overseas. Although he had made this trip before and had earlier completed Dr Tweed’s course, this trip clearly made a big change to his overall thinking. The most far-reaching of his plans began with the thought that most Dental Registration Boards at that time had no standard by which they could evaluate a specialist. His suggestion was that the ASO should set up an Orthodontic Board so that after an examination, people could obtain a Diploma “which could become a standard of specialist proficiency”. He also wanted to further Graduate Training. Although he recognised that this was a University function, he felt the Society did have “connections” and was able to exert some influence. In reply, Adamson<sup>33</sup> bemoaned the inconsistency of attempts by Dental Registration Boards at specialist regulation and thought as a consequence such an Orthodontic Board would be worthwhile. By coincidence, he said that he had just been looking at material related to the American Orthodontic Board and commented that it was “aiming high”. An alternate suggestion from John Reading was for the creation of a Specialist Board (for all specialties). Support from the Councillors was sufficient to include it on the agenda.

The forthcoming Congress created considerable interest in New Zealand and many NZ orthodontists indicated willingness to enrol. R.C. Tonkin wrote to Norton<sup>34</sup> making the point that the New Zealand Association of Orthodontists (NZAO) had many General Practitioners among its members. This was being reappraised, but the feeling was that they had insufficient numbers for a fully specialist Society. Both G.F. Walker, NZAO Secretary, and Tonkin<sup>35</sup> floated the idea of an Australasian Orthodontic Society during 1961 and suggested the idea be discussed at the forthcoming Congress. This idea was passed to the Council. Norton was not persuaded, but promised to “place it before the Council Meeting” in August.<sup>36</sup> He felt that the ASO could get adequate support from New Zealanders as corresponding

members. This was not possible under the current Constitution but such a category was under consideration. Norton did note that we should “keep the door open for them” to participate in the Orthodontic Board he envisaged. How prescient!

In the agenda papers for the Council Meeting to be held immediately before the General Meeting, he raised the issue saying “there may be some advantages and if your initial reaction is favourable, we might have some preliminary talks on the subject when we are in Sydney”. Nothing happened but Tonkin continued to advance this idea especially before the 1972 Congress.

1961 represents a profound watershed in the life of the ASO. It was in a sense a coming of age. The General Meeting began several processes, which defined the Society’s course for years to come. A Congress devoted solely to Orthodontics had been a dream for many years. Certainly this one was only piggy-backed onto the Congress of the Australian Dental Association in the manner of the 1927 thinking. But this one was different in that it was held immediately before the larger one and it had an entirely separate organisation. It was a runaway success.

The Constitution of the time required that a General Meeting of the Society be held “at the time and place of each Congress held by the Australian Dental Association”. It said nothing about scientific gatherings. The plan was to hold the Congress immediately prior to the ADA meeting. But to keep to the letter of the law, the General Meeting was originally scheduled during the ADA Congress.<sup>37</sup> The Victorian Branch Secretary wrote,<sup>38</sup> requesting an earlier date to allow interstate members to return home, if they did not plan to attend the ADA meeting. He suggested an immediate postal vote to alter the Constitution. Norton wrote to his Councillors immediately, saying that he had been advised by his solicitor that the phrase ‘held at the time and place of’ was “somewhat open to interpretation” and that it could be construed to mean a few days before or after. Norton’s comment was that “our Society functions because of its spirit of application” and asked for support from all members of the Executive to hold the meeting during the Orthodontic Congress, reminding them, that “they had elected a Vice-President on a provisional Constitution”.<sup>39</sup> He received the necessary support. The meeting went ahead at the later date.

Presentations had been invited from all Full members and there was a full programme of speakers. R.G. Henry, the Scientific Director, informed all Full members, splitting his infinitive to perfection, that they were expected “to actively participate and prepare a silent clinic—even if it is in the form of a case report”. The programme included two and a half days of papers and 24 silent clinics or table demonstrations. All eight lecturers were ASO members. There was a directed panel discussion after each presentation and two symposia on the last afternoon.

There was a broad invitation list. Japanese orthodontists were also included, with Dr Kei Enoki from the Nippon Dental College attending, representing the Japanese Orthodontic Society. He had noted that the invitation to the Opening Reception referred to a “black tie” and he sought advice as to whether this referred to a swallowtail morning suit, tuxedo or a plain suit with a black tie.<sup>40</sup> In any event, he and a colleague, Dr. K. Motohashi, accompanied by their wives attended in traditional dress and Enoki read in unforgettable style, a message to

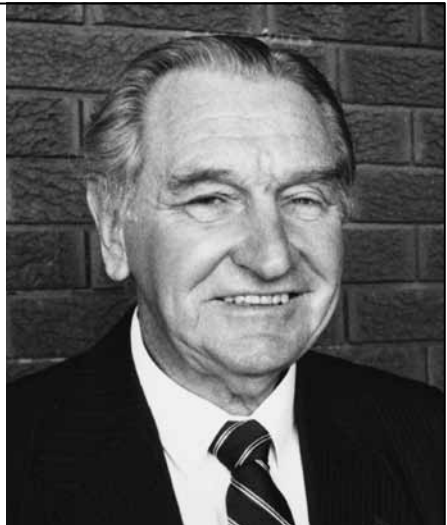
the ASO from his President, Dr S. Takahashi. The gathering assumed it to be one of congratulation. It was the highlight of the evening. Enoki and Motohashi then progressed to Adelaide, where they spent time with P.R. Begg, thereby beginning their country's love affair with Begg's brainchild. Orthodontists also visited from India, Hong Kong and there was a large contingent from the US.

The Congress was well attended both by Australian and overseas Orthodontists. Nearly 100 in all. The organisers had expected about fifty. It also had a full social programme and was hugely enjoyed by all concerned. Probably for the only time, a member was able to ask the entire gathering to his home, as R.W. Halliday did for the closing occasion. In fact, Australian Orthodontists and the ASO have ever since been rightfully proud of their Congress as being an excellent blend of the scientific and the social. Their relatively small scale, compared with those overseas, gives them an intimacy denied the others. International lecturers of note have always been happy to come. Henry was authorised to collate the material produced at the Congress and publish it in the form of Transactions. Such was the custom of the BSSO. He said that there was no restriction on members publishing their papers elsewhere, if they so desired, but requested reprints.

### **Robert Yorke (Bob) Norton**

Also the son of a dentist. Probably no one person has played a more important role in the Society's growth than Bob Norton. A big hearty sole, gifted sportsman, of huge energy, it was natural that he would become a leader of men. He began his association with orthodontics with Arthur Thornton Taylor. The two men got on really well together and Norton's drive and energy were a great help during the first Executive in 1950-56, when he was Secretary. Like Adamson and Wilkinson before him, he was probably more involved with the ADA than the ASO throughout his long career.

Unlike the other two, his work with the ASO involved virtually every one of its facets and moulded its course. His vision laid the groundwork for the Society, as we know it today. He became President in 1959 when the Executive returned to Sydney, where it had been decided to hold the first ASO Congress. Norton had played no small part in this groundbreaking move. He brought the Congress to a highly successful reality. It was Norton who conceived of the idea of a Stanley Wilkinson Oration, to be the focus of the Congress. He went overseas for six months in 1960, during which time he had the opportunity to reflect on the changes taking place within the specialty. It was he who felt that the ASO needed something like the American Board of Orthodontics to establish the standards of training and experience necessary for specialisation and for specialist recognition within the community. It was Norton who caucused his Executive to gain their support and it was Norton who had the membership give support to the



Robert Norton

formation of a committee to commence the process. This ultimately failed, but gave birth to moves which established the necessary elements. ASO archival records are replete with long letters from RYN to a series of ASO executives about the majority of items currently on their Agendas. These showed he had thought clearly and deeply about all manner of issues and their ramifications. Mostly he used tapes, which sadly have been lost.

He was the 'can do' man of the Society applying himself practically to all matters whether it was performing a fee and overhead survey to support negotiations with the Repatriation Dept. or liaising with the Tariff Board to lessen the sudden impost of high tariff on imported orthodontic materials. It was his idea to ask both P.R. Begg and K.T. Adamson to conduct a course in their techniques for local orthodontists.

His period of service with the ADA began in the 1940s when he was elected to Council and became State President during Adamson's term as ADA Federal President. He subsequently rose to the ADA Presidency. If that was insufficient, he served on the NSW Dental Board for a quarter of a century and was President of the College in 1983-4. It was often said that his ADA hats reduced his focus on orthodontics.

But his involvement in the community went far beyond Dentistry and involved Legacy, Rotary and the Masonic organisation, all of which saw him take major roles. His service to Dentistry was recognised in 1977 with the Award of an OBE.

One of my clearest memories of RYN, involves his preference for giving the first lecture after lunch at Congresses, a time slot most lecturers avoid like the plague. He would deliver his talk as he walked around the theatre. It was hard to snooze with 184 centimetres of pure energy standing directly over you.

The success of the 1<sup>st</sup> Congress can be viewed, in retrospect, as quite the most significant event to have occurred in the life of the Society since its inception. One of the highlights was the first Stanley Wilkinson Oration, which immediately followed the President's opening address. Dr P.R. Begg was chosen to deliver the Oration and he spoke generally about the direction in which he saw the specialty heading. His remarks were reported in the media and were thought to be somewhat controversial. C.R. Newbury voiced his concern at the political nature of the media reports, reminding members that an oration was always to be considered a public event and the remarks made were not to be construed to be the opinion, or the Policy, of the Society.<sup>41</sup> While it was at this Congress that the generous donation of Stanley Wilkinson was made public, these events were not connected. The oration was the brainchild of Norton and plans had been in train for some time.<sup>42</sup>

The General Meeting occurred in conjunction with, but because the necessary Constitutional change had yet to take place, not as an integral part of the 1<sup>st</sup> Congress. It was announced separately although a time slot in the programme had been preserved. The meeting was attended by 35 Full Members, 13 Associates and 4 visitors. It discussed a range of issues with consequences, which gave direction to the Society for its future. Resolutions, for which proper notice had been given, were passed to provide for a category of Corresponding membership of the Society and for the necessary Constitutional change, partially breaking the nexus existing between the ADA Congresses and meetings of the Society. This was

deemed necessary to allow for a reasonable juxtaposition and for a General Meeting to occur as an integral part of the ASO Congress.

G.F. Walker, NZOS Secretary, had earlier suggested to his counterpart, creating a category of Corresponding membership, in the event that a combined Society did not come to fruition.<sup>43</sup> In addition, the President brought up a motion, discussed at the Council Meeting days before, but not included in the published agenda, that required a period of not less than eight years in exclusive practice, or in the case of someone who had completed “acceptable” training, not less than five years, before Full membership could be granted. A ‘grandfather’ clause was included, which allowed for existing Full Members to maintain their pre-existing rights. The grandfather clause, however, did not extend to Associate Members, many of whom had already restricted their practices. Provisional membership was not yet in existence. This huge increase from three to eight years in exclusive practice was really sprung on the meeting. There seems to have been no mention of it in the papers from the lead up to the Congress, held in the archives. It was part of Norton’s well-known wish to raise the overall standing of the infant group. Such was the force of his personality, the meeting voted its agreement. Associate Members in full-time specialist practice, who might have expected soon to become Full Members, now saw five years added to their wait.

At the same meeting, the proposal for the establishment of the Foundation for Orthodontic Research and Education was passed. The Foundation set to work and developed a separate entity of its own, which to a large extent it has retained ever since. This is discussed in a separate chapter.

The Honorary Historian’s report was accepted. This report became the basis of an article published in Volume 3/7 of the Bulletin. A précis was included as part of the Congress programme. After a constant battle to engender interest, it was decided finally to abandon the ‘Case of the Year’ project. For this Congress year there was only one entry and that from Arthur Thornton Taylor, who had championed the competition since its inception. It must have been submitted at the last minute, after he found out there were no other entries, because it was thought not to contain adequate information about the techniques employed, and was not accepted by the five judges. This project had been seen as a great opportunity to advance the profile of Orthodontics and to be a stimulus to the membership to raise standards. Norton’s view was that it was “a dead duck—was it ever alive?”<sup>44</sup> L.M. Smart, who was asked to write a report on the competition on behalf of the Society, noted that, “the competition, by its title and nature has an air of naivety” and contrasted it with the possible response for a similar competition involving obstetrics.<sup>45</sup> The competitive nature of the project never really took hold and finally it could be pushed no further. Later there were other, more successful, initiatives along the same line.

According to Halliday,<sup>46</sup> membership at this time was 47 Full, 71 Associate and 3 Honorary Members, making a total of 121 with 54 from NSW, 24 from Victoria and 20 from Queensland. South Australia, Victoria and Western Australia had more Full than Associate members, and the ratio between the two levels of membership was definitely changing.

At this stage, the first request for a change in branch came when B.W. Lee moved to Victoria. This was found, not to be provided for in the Constitution, and Lee had to resign his ASO membership from one branch and then reapply.

## The Perth Executive 1961–64

There is perhaps another reason for considering this occasion as being of such importance. Up until this time, the affairs of the Society had always been heavily influenced by a small number of men. Men from NSW and Victoria. Wilkinson, Taylor, Adamson, Spring, Norton; men with energy, drive, foresight, reputations and egos to match. They made the running and to an extent, what they said carried the day. All this changed when the Perth-based team took over after the 1961 meeting.

The new Executive contained K.F. (Kevin) Henderson, President, J.F.S. (John) McGibbon, Secretary and E.A. (Ted) Barham, Treasurer. None had large national profiles. V.B. (Vic) Webb was Vice-President and therefore President-Elect. The five councillors were Norton, A.G. Parker, R.F.H. Rickleman, L.M. Smart and J. Wilkinson (Stanley's son). John McGibbon was a fairly dour fellow, but energetic, far sighted and well-organised.

Australia is a large country and Western Australians at that time, felt somewhat cut off from the more populous eastern states. In fact, when interviewed for this history, Ian Watson, a South Australian, whose contribution to the Society ranks with that of Norton, Bowden and Thornton Taylor, mentioned his concern that the more populous states tended to have more than their fair share of influence. At the opening ceremony of the 17<sup>th</sup> ADA Congress to which the ASO 2<sup>nd</sup> Congress was appended, the keynote speaker stated categorically that, in the West, they were Western Australians first and Australians second. As this is written with the West's vast mineral resources being the economic engine room of the country, to an extent these feelings remain. At that time there must have been a feeling that the West must, and could, show its mettle.

The Executive had gained the approval of the NSW Branch of the ADA, for all ASO members to use their recently begun Package Library. A collection of articles on Orthodontics had been one of the first to be put together. A comment came in later, that this facility had been used only by orthodontists from NSW, all of whom, as ADA members, could have been using it anyhow. Thornton Taylor had pointed out some time before, that library facilities were more appropriately based in each state.<sup>47</sup> It was resolved therefore at the 1961 General Meeting to commence a scanning panel to review current literature. A list of articles thought to be of special interest, could be included in the Bulletin for the guidance of members. K.G. Godfrey, Senior Lecturer in Orthodontics at the University of Sydney was appointed convenor.

The main task was to bed down the initiatives from Sydney and plan the next Congress. McGibbon wrote<sup>48</sup> to all the Councillors to reach consensus as to the continuing nature of any nexus between the Congresses of the ADA and the ASO. He felt that if the Congresses were held conjointly, then it may be possible to

receive some help in inviting an overseas lecturer. “On the other hand we may lose some autonomy and be obliged to accept some direction from the ADA Congress Commission.” Should they be held conjointly, simultaneously or be completely separate? Should ASO members be required to enrol for the ADA Congress? Should all ADA members be welcome to the ASO meetings? The ADA Secretary John Newton was asked if a simultaneous meeting constituted any breach of affiliation. He saw none.<sup>49</sup> His view was that it was in the interests of all, for affiliated bodies to have their meetings at approximately the same time as the ADA Congresses “for to hold their meetings at a time apart ... would surely divorce the affiliated body from the Association” and he suggested “possibly from the experience gained, your Council may be prepared to submit some suggestions”. The decision reached was that the Congresses should be juxtaposed, as had been the case in Sydney. The programme for the 17<sup>th</sup> ADA Congress mentions meetings of the Periodontic, Prosthodontic and Oral Surgical Societies but makes no reference to the ASO meeting.

A further issue was the attendance of non-ASO members at an ASO Congress. Representations were made on behalf of one non-member who wished to attend. As before, members of other orthodontic associations were welcome. It was resolved that: “as Congress is for ASO members, all those attending must be members of the Society or, if overseas visitors, members of similarly affiliated organisations and further: that Honorary members or specific guests may be invited at the discretion of the Executive”.<sup>50</sup> Attendance was expected to be approximately 40 Full and 30 Associate members. The organisers were budgeting for a loss of £300. Attendance of 75–80 was needed to fund Ballard’s expenses of £500.<sup>51</sup>

John Reading’s Orthodontic Registration Board Committee (ORBC) had begun its work, ultimately to fail, but producing important by-products, perhaps more far-reaching than the Board proposal itself. This is discussed fully in the chapter dealing with the Board. The progress of this initiative had wide-ranging relevance because it related so closely to the evolving process of specialty recognition, graduate education and membership requirements; all matters which were suffering their birthing pains in this decade.

M.R. (Milton) Sims, recently returned from his Masters programme in the US, where at the same time, he had lectured widely on the Begg technique, indicated that he felt members should take a more active part in the presentations at Congress. The outcome was a resolution requiring every Full Member to bring records of two treated cases to each Congress. A further resolution directed the incoming Executive to give consideration to defining the standard of the presentation.

Arthur Thornton Taylor was nominated for Honorary Life Membership. Stanley Wilkinson wrote<sup>52</sup>: “The present flourishing state of the ASO is in my opinion entirely due to your own valiant determination and unflagging persistence”. Wilkinson was unable to attend the Congress being, as he said “in the hands of the surgeon”. W.J. Mackie was appointed Historian to replace Halliday, who had announced that he was moving to the UK. Members were kept informed by regular bulletins. McGibbon had wanted them to be more readable, approaching the time when they would become issues of a fully-fledged Journal.

There were some constitutional amendments. By-Laws establishing the publication were introduced:

A periodical shall be published under the name of the "Australian Orthodontic Bulletin" issues to be made at least quarterly.... The price of 7/6d per issue to be included in the annual subscription ... and separately accounted for in the Annual Balance sheet.

Subsequent to Norton's last minute amendment at the 1961 General Meeting, (extending membership qualifying times) W.J. Harvey, the normally very mild-mannered NSW Branch President had written an aggressive letter to McGibbon, saying the Branch demanded an early postal vote to amend the Norton resolution, as it so badly affected those who had already restricted their practice, but were not yet Full members. He received a more balanced response from the Executive, reminding him that only individuals, not branches, could move such motions. It suggested further that the matter needed to be discussed at a General Meeting. It would possibly suffer defeat without a presentation to members of the arguments for and against.<sup>53</sup> This discussion took place and the 'grandfather' clause of Norton's controversial amendment, requiring a period of eight years in exclusive practice before the granting of Full membership was modified to allow Associate members as well as Full members to maintain those rights held at the time of the amendment. It was also resolved to subject to ratification by postal vote, a successful resolution to reduce that controversial period before Full membership rights could be acquired, from eight to five years, or from five to three, in the case of a member with a postgraduate qualification. Thus the quite extraordinary change introduced by Norton was brought back to some level of reasonableness.

Also at the meeting, it was agreed in principal, to complete the breaking of the nexus between the ADA and the ASO Congresses and to introduce a category of Provisional membership for those planning to restrict their practice to Orthodontics, so completing a distinction from those simply interested in Orthodontics who continued in general practice. This also required constitutional change. A postal vote was shortly arranged<sup>54</sup> to ratify all the changes approved in principle at that Meeting. This passed overwhelmingly.

Prof. Clifford Ballard had been asked to speak at the Congress. He was also to speak to the ADA Congress. This news had been greeted with enthusiasm by the large number of Australian Orthodontists, who had received their training in the UK. At least one Councillor in the Eastern states was reported to be angry that little time had been allowed for any consideration of alternatives. Where the suggestion arose that issuing invitations to speak was the prerogative of more than the Congress Committee, is uncertain.

At about the same time, the Trustees of the Foundation had invited Dr R.M. Ricketts, then at the height of his influence, to tour Australia and present at the ASO conference and also to speak at the Branches. They did this without consulting the ASO Executive. This unbelievable arrogance must have rocked the men from the West, although no records seem to exist containing any protest. Correspondence at the time and subsequently, however, did indicate a degree of disquiet. Norton made some references to it in his correspondence with President Henderson at

the time. There was a view that the resistance to Ballard's invitation came from within the Victorian Branch and that they had used the Foundation to create some sort of ideological balance. Norton felt that Adamson was not a party to this rival invitation. It was an example of the large egos existing in the profession at that time, egos perhaps necessary to permit the ASO to have travelled so far, so fast. The Executive did say that, had they known Ricketts was coming, they would not have issued an invitation to Ballard at that time.<sup>55</sup>

Nevertheless, having two such learned men together gave rise to a wonderfully creative tension. This was brought up frequently in the discussions with retired members, conducted in preparation for this History. Ricketts, being by nature somewhat more aggressive than the academic Ballard, strode once too often into a discussion, following a paper given by Ballard. Ballard vigorously protested. Ricketts revealed his inherent decency, because he was deeply and repeatedly apologetic when he realised where his enthusiasm had led him. A good, indeed memorable, time was had by all those present. The men parted on better terms. However John Heath remembers some coolness when sitting between them at a dinner in Melbourne some days later.<sup>56</sup> Stanley Wilkinson's impressions were different. In a letter to Thornton Taylor,<sup>57</sup> he was to say: "We had a lovely evening with Ricketts and Ballard-about 20 at dinner. Good talk and altogether most stimulating." As well as presenting to both the ADA and ASO Congresses, the Foundation had organised Ricketts to give lectures to the orthodontists and the dental profession in each state including WA. The ADA Congress organisers vigorously protested against this and the Perth segment was withdrawn. The presentations in the other states, however, were very well patronised. They were at a level beyond the comprehension of many, including numbers of orthodontists in the audience. One of the general practice wits, an Associate Member, John Noble, was heard to report that the audience sat like "stunned mullets".

## Queensland 1964–66

A Queensland-based executive was elected with V.P. Webb becoming the new President. J.B. (John) Moffatt was elected Secretary; P.G. Andrews, Treasurer. L.M. Smart from Adelaide was made Vice-President and therefore President-Elect. The Executive set out to rationalise the operations of the Foundation with those of the ASO, subsequent to the recent debacle and of course again to prepare for the next Congress.

Other than the major constitutional changes already discussed, Webb had a comparatively quiet time in office. In fact, in his Presidential report, he made an apology that his Executive Meetings were not attended by the out-of-state Councillors during his term. He explained that in his view: "little of importance" had occurred and the cost of bringing everyone together could hardly be justified.

One of the major issues was the membership's agitated response to Sims' motion that members should bring case records to the Congress. Webb had attempted to amend the original motion in Perth and was at that stage, unhappy with the compulsion involved. In April 1965, the Executive circulated guidelines on case

### V.P. (Vic) Webb

Not so well known as some of his contemporaries, Vic Webb belongs in the list of those whose efforts started the ASO on its way. He was registered as a dentist in 1935 and practiced in Western Queensland. He enlisted in the Army and served overseas as a Dental Officer. After the war, he completed his BDS and then a DDS at Toronto and then a Diploma in Orthodontics from the same institution, arriving home to commence specialist practice in 1948, being the first in Queensland to limit his practice.

He taught at the Dental School from 1950 to 1962. He was a foundation member of the ASO's reformation in 1950 and became a Councillor in the first Executive, eventually progressing to a successful term as President from 1964–6. He helped start the Queensland Branch of the ASO and served twice as its President, and held office in the local ADA Branch.

Vic lectured extensively and was the first orthodontist chosen to lecture to the College of which he was a great supporter. His efforts were a great assistance to the ASOFRE both as a trustee and fundraiser. He was nominated as an Honorary Life Member of the Society in 1970 and retired from practice the same year. He passed away in 2002.

presentation, including a sample cephalometric tracing and superimposition method; a simple method of articulation of models (using rubber bands to keep the models together so that they would not get separated) and which included the use of a folder for organising other material.

Webb, "having been informed that Sims' motion had attracted considerable resistance and may act as a disincentive to attendance at Congress", circularised the membership regarding the reporting of cases to be shown at the Queensland Congress. Cephalometric measurements were a particular concern. The NSW Branch formed a working party, comprising Alan Burgess, Keith Godfrey and John Reading, to formulate recommendations for the standardisation of the reporting of cephalometric data. Late in 1965, they produced a format with the definition of landmarks and measurements to be used and sent it to the Executive.<sup>58</sup> They wanted NSW members to use this format for their presentations. Webb and Moffatt had asked R.F.H. Rickleman to take charge of this aspect of Congress. He was given the task of preparing a "minimum record requirement". Rickleman had been particularly impressed with L.M. Smart's presentations in Perth, so Smart was contacted for further information and according to Rickleman, "that is how the minimum standard requirements had their birth".<sup>59</sup>

Adamson had written<sup>60</sup> that four senior Melbourne orthodontists may not be attending, not wanting to bring cephalometric measurements, when these were not part of their general procedures. Nor indeed were they in anything like general use throughout Australia at that time. Ironically, there was only one orthodontist whose x-rays got mislaid during the Congress. It was Adamson.<sup>61</sup> One Melbourne orthodontist wrote in protest<sup>62</sup> and said he may show his resistance to the rule by not turning up, even though there was other material he wanted to present. Both Webb and Norton were now strongly supportive of the compulsion. Norton said he planned to bring a case that was a failure.<sup>63</sup> Webb decided the emphasis should not be on case recording as such, but rather on what principles the treatment experience had conveyed and that the theme would be "Interesting Features".

It was eventually made clear that no one was to be put back on the aeroplane, if they did not bring their cases.<sup>64</sup> In Victoria, where there were protagonists on both sides,<sup>65</sup> the Branch decided to hold a meeting, where members presented case histories along similar lines as set out for the presentations at Congress. A sort of full dress rehearsal.<sup>66</sup>

The scientific programme relied heavily on Dr Hal Perry from the North-Western University School of Dentistry, who was required to give two lectures each day. A report to the President<sup>67</sup> after the Congress, favourably commented on the lecture programme, especially Perry and also A.L. Ware from the Commonwealth Bureau of Standards. This latter contact was thought to bode well for the future, as there was considerable interest in the properties and treatment potentials of the new materials coming into use.<sup>68</sup> In the planning for this Congress, the organisers felt “the time opportune to issue invitations to the President of each Branch (with the exception of Queensland) to act as chairman for one day”.<sup>69</sup> This practice continues.

The case presentations, despite forebodings, were quite a success and were well patronised throughout the meeting. Seventy five ASO members attended, giving the lie to any feared rebellion. It was decided to continue the requirement to present cases “but there should be nothing mandatory concerning the presentation of such records which could prevent a member from attending congress”.<sup>70</sup> Arising from this, the General Meeting resolved to form a permanent subcommittee “for the purposes of standardising the presentation of cephalometric records in a form suitable for minimum reading”. It was also decided to collect the best of the case presentations and exhibit them at the 18<sup>th</sup> Australian Dental Congress. The Society had just broken the nexus between their Congresses and those of the ADA, but interestingly enough, the President of the next ADA Congress, due in Melbourne the next year and its Scientific Director, were both orthodontists. They had sought the involvement of the Society in a programme of Orthodontics, designed specifically for the general practitioners. The meeting was not in favour of this, but agreed “wholeheartedly that Orthodontics should not be divorced from any ADA Congress”. It was decided not to hold a specific meeting of the Society during that ADA Congress. The chasm was widening.

The annual Federal subscription was increased from \$6 to \$12 but not to provide additional support to the Foundation as Webb had originally suggested in 1965,<sup>71</sup> but to support the Bulletin.<sup>72</sup>

## **The Orthodontic Registration Board Committee Report**

As part of their brief, John Reading’s ORBC produced a report on orthodontic education, both undergraduate and for specialist training. The Council on Orthodontic Education of the American Association of Orthodontists had just produced a report on the subject, referred to as the American Association of Orthodontics: Principles and Practice (AAOPP). Reading’s committee recommended following US practice at the undergraduate level, as described in that document. They also included special comment about the need for continuing education at both the general and specialist level. There is an interesting anomaly in this

part of Reading's report, which it says was unchanged from the ORBC's 1964 recommendations for registration, although a clause allowing for preceptorship, which remained still a recognised method of entry in the US, had been added:

This method of training is considered as one of expedience only until such time as a full training course is available

### *Preceptorship*

At the end of three years the Preceptee shall be required to:

Present 5 cases with full records treated by the Preceptee.

Pass oral and written examinations showing a knowledge of the basic fundamentals of Orthodontics with special reference to the literature of the last 15 years.

Present a critical review of some subject approved by the Board.

As far as full-time courses were concerned, there was the confident expectation that most, if not all, of the universities would be conducting full-time courses in the near future and again here the AAOPP should be the guide in setting standards. A two year full-time course, or its part-time equivalent, had been part of the ORBC report two years before.

Reading's committee report was adopted as ASO policy, together with a recommendation which had previously been suggested to Council by the South Australian Branch<sup>73</sup> that as soon as possible, there be a meeting of the teaching heads in Orthodontics from all the Australian Universities, "to discuss, to report and to consolidate the requirements for orthodontic teaching". Milton Sims was to be the Convenor.

The General Meeting of 1966 was in fact dominated, not by this important discussion on education, but by the discussions surrounding that part of the Reading committee's detailed report dealing directly with the proposed Orthodontic Registration Board. This report contained a draft Constitution for the Board and suggested mechanics to allow proper setting-up of such a Board. It further went on to outline 'Competency Standards for Specialists' to practice Orthodontics, which such a Board might require. Reading used the word 'Competency' but he was really referring to training and experience. In this they followed closely and also included as an appendix, guidance issued recently by the NSW Dental Board on Specialist Description. This guidance in turn, had been informed by earlier discussions with the ASO's NSW Branch. The differences from the 1964 ORBC report on this matter were slight. The NSW Dental Registration Board now required not one, but two years be spent in general practice. It was not as specific as Reading's proposal regarding the required courses of study, having regard to the range of specialties it had to consider. A period of four years experience in the field was added. All of which the ORBC had accepted.

The Executive suggested some changes to Reading's draft Constitution, before submission to the General Meeting. The Articles were then debated one by one. With only minor amendments, mostly to clarify meaning, the entire report was adopted. The eventual proposal was that initially the Board was to comprise the

five Honorary Life Members of the Society and that this Board (really a board of Directors of the Orthodontic Board) would return to the next General Meeting with proposals to commence the involvement of the rest of the profession. To this end, three Honorary Life Memberships were proposed and accepted. They were for K.T. Adamson, P.R. Begg and B.L. Rosenstengel.<sup>33</sup>

## Bernard Rosenstengel

First registered as a dentist in Queensland in 1910 and in 1917 graduated DDS from Pennsylvania after which he became a preceptee of F.L. Stanton, orthodontist of New York. On his return to Queensland he did not immediately specialise. He was a foundation member of the Queensland Branch of the ADA in 1928 and chaired the Orthodontic section of the ADA Congress held there in 1930, and, after continuous service, became an Honorary Life Member of that Branch in 1971.

For a long while, he was the sole orthodontist in Queensland and was lecturer in Orthodontics at the University of Queensland for over 20 years. He specialised in 1950 and was Foundation President of the Queensland Branch after it was formed in 1956. He served another term in 1966 when Queensland hosted the 3<sup>rd</sup> ASO Congress at which meeting he was made an Honorary Life Member of the Society. Moffatt reported that he did much to promote the specialty by contributing papers and silent clinics at ADA Congresses and also encouraged other dentists to take an interest in Orthodontics. Bernie retired from practice in 1970 and passed away in 1979 aged 88 years. I can do no better in painting a picture of this man than to include a letter recently received from Keith Hoole.

It is nearly 40 years since I was Bernie Rosenstengel's associate and subsequently bought his practice, so a lot of water has passed under the bridge.

It is with deep regret that I did not appreciate at the time the historical implications of having him as one of my mentors but as an enthusiastic orthodontic neophyte I was somewhat shocked at the time warp I seemed to have entered.

Here are some of my memories:

The waiting room was small and dingy. The main chairs, badly in need of upholstery, were a three piece ensemble. How inappropriate for an orthodontic waiting room. I still have these chairs. They are extremely comfortable and have not deteriorated at all—a tribute to Bernie's family as I think they were constructed by a famous furniture maker Ed Rosenstengel.

The surgery chair was a double hydraulic pump up barber-type chair with a special seat and foot rest for children. No patients ever complained of it being uncomfortable and remember, all procedures were done standing, and this, about 80 year old trail blazer, would take up to six hours to fit his full fixed masterpieces.

In the "laboratory" I remember searching for a R.M. Spot Welder. To my dismay I discovered that what was being used was a gas blow torch fitted to a foot bellows. Fortunately Bernie's assistant, Margaret Phillips, was able to direct a delicate flame by blowing into a rubber tube. With this she managed to solder the edgewise attachments to the metal blanks [no torque or angulations built in]. With years of practice she was very neat and surprisingly efficient.

Study Models were trimmed with a small hand saw and were masterpieces created by Margaret under Bernie's watchful eye.

The molar bands were designed by Bernie to easily crimp when fitted to the teeth. Anchorage, when a problem, was solved by soldering a vertical tube

on the molar bands distal to a “brass” mesial tag. This would hold and yet enable quick release of the round stainless steel wire.

One of Bernie’s inventions was a sliding friction stop made of banding material. This was in some ways a forerunner to R.M.Locks and later Damon friction stops.

Tooth separation, both anterior and posterior, was with brass separation wire.

A feature of the day’s schedule was lunch. Up with the picnic table, in the surgery. Margaret would always place a white starched tablecloth followed by silver utensils and china plates. We would all sit down and Margaret would tell the stories of Bernie generating electricity by tidal waves in Moreton Bay.

The innovative and creative genius of my mentor was an experience I will always cherish and it was my privilege to have been associated with this orthodontic pioneer.

## Foundation

In his report regarding the Foundation, Thornton Taylor praised the assistance ASO President V.P. Webb had been able to make.<sup>33</sup> At this stage, the Foundation had not yet heard from Dr Cecil Steiner who, as a result of the tumult surrounding Milton Sims’ proposal, had been asked to conduct a cephalometric course around the capitals. A series of Technical Liaison Officers for the cephalometric lectures in each venue was appointed. How such a series was contemplated, so close to a Congress, remains a mystery, particularly having regard to Webb’s expressed concern and the past history of the Ricketts visit.<sup>74</sup> In the event, Steiner’s visit did not eventuate. However, the Trustees and indeed many senior men in the ASO were conscious of the unfamiliarity with cephalometric analysis of many of the membership. This was viewed with concern, not only as far as case presentations, but also demonstrated a lack in the general knowledge which might be expected of a body of orthodontists at that time. The Foundation saw its role clearly in this matter.

After Steiner’s withdrawal and arising out of the Queensland Congress and the proposed visit to Australia the following year by Dr Alton Moore, a series of cephalometric workshops was planned. Presenters were taken largely from orthodontists recently trained in the US and included S. Seward, R.H. Wallman, D.J. O’Donohue, and D.T. Taylor. B.D. Bowden, although not trained in the US, was known to be highly experienced in the process from his work with the Melbourne Growth Unit and was also included.

A get-together was first held in Sydney in March 1966 and the first of the workshops were planned for April and May. Thornton Taylor stressed that the series of workshops was an attempt to “establish cephalometry on a sound and reasonable basis in this country”. A.S. Burgess was asked to undertake an attempt, decided upon at the last General Meeting, to standardise the measurements used. He could never accept using the time-honoured anthropological (and pre-radiology) reference known as the Frankfurt plane.<sup>75</sup> As the original cephalometric analysis proposed by Downes<sup>76</sup> (which relied heavily on Frankfurt) was strongly supported, especially by Seward<sup>77</sup> and by Wallman<sup>78</sup>, he was never able to get

the necessary general agreement. The Downes analysis was eventually accepted.<sup>79</sup> Burgess' idea was that the standardised measurements were to be used for case reporting only, where consistency would make viewing easier and were never a prescription for diagnosis. It was probably a naïve expectation that such a thing could ever be standardised, even for a short while. This was probably part of the reason Sims' case presentation requirement withered almost as soon as it was planted. Dr Moore's visit went ahead with excellent attendance and to a generally favourable response. The NSW Executive<sup>80</sup> proposed to inform the Foundation that in their opinion, the workshops had not been a success.

L.M. (Laurie) Smart became the new President; G.I. (Geoff) Brown, the Secretary and B.C. (Brian) Crisp the Treasurer. R.C. Case was elected Vice-President and so was President-Elect. During this administration, a fee survey, the first to be official, with all members included, was carried out with the results being made available to the members. The general membership needed a couple of prompts to produce a satisfactory response.

The Executive decided, yet again, that the ASO crest, that is, the 1950's version, was unacceptable. They resurrected some designs that John McGibbon had organised in 1959 as alternatives. These had been found by ASO Historian W.J. Mackie, when going through the ASO archives, such as they were at the time. Moffatt shared the negative opinion and offered to add to the mix, by sending a new design to the President. This, in spite of the fact that he was using that crest on the Journal letterhead, which he had designed himself and for which he had gone to the trouble of obtaining Executive approval. However, nothing happened and still the Southern Cross twinkled on ASO documentation.

For the next Congress in Adelaide in 1969, Smart suggested to the ADA, that as they had never before sponsored an orthodontist to lecture, they should ask Charles Burstone, the keynote speaker, to tour the country speaking to general practitioners. It was ADA policy not to have overseas lectures speak around the country on subjects of specialist interest and so adversely effect numbers at Congress. Burstone's visit occurred with the ADA sharing costs.<sup>81</sup> He has been to Australia many times since. Also, there were moves<sup>82,83</sup> to make arrangements for cost sharing with the NZAO paying a quarter of the costs of travel. Internal costs would be borne by the respective countries.

## Specialisation, Graduate Education and the Board

During that time, as well as discussions around the Foundation and the Board, the overriding focus of activity involved Graduate Education in all its ramifications. This necessarily included the qualifications required for recognition both as a specialist and also as a Full member of the ASO and more fundamentally the nature of speciality itself. Specialisation was then very much a focus throughout Dentistry.

At the previous General Meeting, the Executive had been directed to hold a meeting of the teaching heads of all the orthodontic departments. The Foundation was asked to provide the funding. Also, the Deans were contacted and they agreed

that a meeting of teaching heads could take place at the time of the upcoming 18<sup>th</sup> Dental Congress in Melbourne. Little progress was made. Sims advised that he had been unable to organise such a meeting to coincide with a Dental Health meeting planned in Canberra<sup>84</sup> and in 1967, it was resolved to write to the teaching heads for information, present and future, regarding the training of Orthodontists.<sup>85</sup> This produced the finding that whereas all schools hoped to start graduate programmes eventually (Sydney's had started in 1964), only Adelaide was actually planning one in the near future.

The following April, K.G. Godfrey, signing himself as Senior Lecturer in Preventive Dentistry, unburdened his soul to the President in a long and rambling letter he actually intended for publication.<sup>86</sup> He began by saying that at the University of Sydney they had "broken the ice" but they were still surrounded by "icy waters". He described many of the difficulties which confronted him. So contorted was this letter that Smart felt it necessary to glean the thrust of the letter, list its points and pass them onto his fellow Councillors, so that the issues could be discussed. This had the effect of alerting the profession to the difficulties inherent in maintaining a viable programme. In a subsequent letter, Godfrey said: "I for one can only express personal view points for I have no knowledge or authority to speak for this Department, this Faculty or the University". Not exactly the ideal position for the person charged with the running of a post graduate programme. This exchange, which included a thoughtful addition from the Journal Editor to whom Godfrey had copied his cry, produced a Presidential letter to the membership designed to "promote thought and discussion".<sup>87</sup> The thrust of Smart's message was that constraints on the number of teaching personnel and on University finances would, in the short term, interfere with the development of graduate education programmes in Australia. Many would therefore continue with preceptorship training subsequent, or in addition to, gaining higher academic qualification such as College Fellowships, as a way of entering the speciality. Such was the case in Oral Surgery.

In June of 1968, the Executive resolved to form a subcommittee to consider the training of Orthodontic Specialists.<sup>88</sup> Godfrey, McGibbon, Sims, Adamson, C.F. Winzar, and the President were to form that committee. In calling this committee together, Smart outlined its objectives:

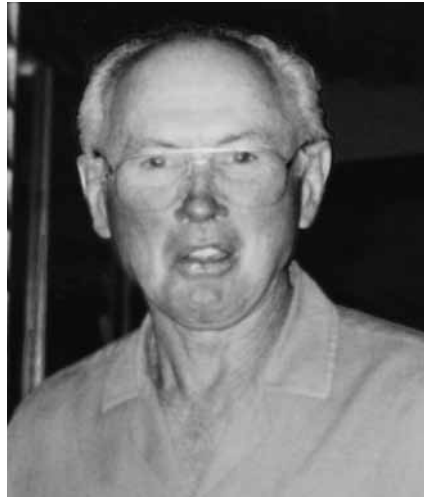
To attempt to come to some agreement as to the best method of training orthodontic specialists in Australia, now and into the foreseeable future...  
and

To state this in the form of a Society blue-print for training to be presented to the General Meeting

Was it to be full-time graduate programmes or preceptorship?

All accepted their invitations and planned to confer by correspondence, with the next meeting to be held shortly before the upcoming Congress in Adelaide. The committee was called, firstly, the Graduate Orthodontic Education Sub-committee. Although renamed on a couple of occasions, this Committee still functions and over time has been quite the most influential committee within the ASO. Although this

Committee stood down briefly after its first major task was complete, it can be considered to be the first Standing committee of the ASO. Norton later accepted appointment to what was at that stage called the Graduate Education Committee (GEC). Later still, T.J. Freer, in charge of Orthodontics at the University of Queensland, was added.



Laurie Smart

The proposed meeting finally occurred in Adelaide in February 1969 and was attended also by Professor A.M. Horsnell, Dean of the Faculty of Dentistry at the University of Adelaide and Professor Thonard from the same Faculty. Horsnell's field was Preventive Dentistry; Thonard was a microbiologist. Their report was presented to the Adelaide General Meeting and represented considerable advancement

on the sturdy foundations laid by the work of Reading's Committee three years before. Interestingly enough, in the light of the furore about the proposed Board, acceptance of this report was moved by P.R. Begg and seconded by the recently knighted Sir Kenneth Adamson, who was a member of the Committee.

The report read:

*Report of the Graduate Education Committee of the A.S.O.*

This meeting recognises the increased need for trained personnel to provide an adequate orthodontic service throughout Australia. This recognition is based on:

1. the high incidence of malocclusion, with its adverse effect on dental health, creates a great need for orthodontic treatment;
2. there is an there is a rapidly increasing demand for orthodontic services;
3. there is an increasing demand by dental graduates for specialist orthodontic training.

The long-term planning of such a service may well be based upon rapidly changing socio-economic factors and would appear to be outside the terms of reference of this meeting. The immediate needs (i.e. within five years) for postgraduate orthodontic education would appear to be as follows:

1. The acceptance by the profession of a specialist register for the following reasons:-
  - i. protection of the public,
  - ii. protection of the dental profession,
  - iii. protection of the specialty as a group and individually,
  - iv. to establish the status of the specialist in any negotiations between the profession and other bodies.

2. The admission to such a specialist register of all those who fulfil the conditions as laid down by a national body constituted for the purpose. The conditions should be as follows:
  - i. He must be a graduate of an approved University.
  - ii. He must have 12 months experience in general dentistry.
  - iii. He must attend, for a minimum of two years, full-time training (or its part time equivalent) at an approved institution. This training should cover:
    - a. basic sciences
    - b. orthodontic theory
    - c. technical and clinical training.
  - iv. He must be in possession of an acceptable postgraduate qualification.
  - v. Notwithstanding anything contained in the above, no one shall be registered as a specialist within four years of graduation as B.D.Sc or its equivalent.

This report was one of the most significant documents ever produced by the ASO. Its timing was fortuitous as the nature and role of specialties was under discussion universally. From this report emerged the ASO's Rules for Membership, the required post graduate qualifications and a firm 'Policy on Specialisation'.

Much of the discussion, which followed, centred on concerns about the willingness of Universities to provide the necessary training positions. Thonard expressed the view "that the Universities could not accept the sole responsibility for training specialists". Previously, Robert Harris had written to the ASO, informing it that the College was considering conducting examinations at a specialist level. These matters are discussed in the chapter devoted to the College. This was the first time that the College's ambitions came to the notice of the Society. Most of this meeting was taken up with a very hostile discussion regarding the Orthodontic Board proposal. This is discussed in that chapter dealing with the Boards. This took so much time, that several items which were on the agenda, had to be postponed. One was an extensive set of Constitutional changes proposed by members from NSW. The movers of the proposals agreed to the deferment, in part because the report of the GEC impacted on several of the changes.

## The Victorian Executive 1969–72

Richard Case was elected President, John Heath (Jr), Secretary and Alan Parker, Treasurer. John Reading was the Vice-President. Mackie was re-elected Honorary Historian. Alan Docking and Alex Roche were re-elected Honorary Members. The meeting also recommended that the GEC be re-convened at the earliest possible time to formulate a more detailed statement on specialist orthodontic training. It gives some idea of the importance attached to this issue that it was decided to wait until this second report was furnished, to decide whether an additional General Meeting of the Society might be called. As well as the normal General Meetings taking place every two years at Congress, the Executive had resolved, not long before, to begin to hold meetings annually, by scheduling two-day Clinical

Meetings including a General Meeting of the Society, at the time and place of each ADA Congress.<sup>89</sup> This reversed the decision made at the previous Congress not to meet at the 18<sup>th</sup> ADA Congress.

The ASO's affiliation agreement required the scheduling of ASO Congresses to be oriented around times not to interfere with meetings of the parent body. J.R. Heath wrote to all members of the Executive<sup>90</sup>: "The three Executive members in Victoria (these were the President, Secretary and Treasurer) do not consider that it would be either expedient or courteous for the Society to hold a two-day meeting in Brisbane in May." This was when the next ADA Congress was scheduled. During this and the previous decade, there had been no official administrative executive, as opposed to a full Council. The reality however, was that the President, Secretary and Treasurer always lived in the same city. This was, after 1959, the one where the next Congress was planned. These three office bearers became a *de facto* central executive. The text uses both terms interchangeably until the Constitution was amended in 1971.

John Reading took exception to this view and wrote to Heath<sup>91</sup> vigorously advocating yearly meetings, "as a Society I don't see that we can make any worthwhile progress unless we meet annually", for which he could see no restraint in the Constitution. L.M. Smart wrote with the same message.<sup>92</sup> It was not long before the ADA decided: "An affiliated Society may hold a scientific meeting at the time of an Australian Dental Congress if specific permission is granted by the Congress Organising Committee and the Federal Executive."<sup>93</sup> In fact, General Meetings of the Society between Congresses were not to occur for a long time.

The GEC met again and produced an extensive report of its meeting<sup>94</sup> and also a separate set of recommendations which came from that meeting. These were sent to Council in April 1970, the delay being caused by the need to revise much of the material. This was an extension of the report adopted in Adelaide. All aspects of the earlier paper were re-examined. This report confirmed the earlier suggestions, except for the time spent prior to undertaking postgraduate training. It reaffirmed the need for a student to attend, for a minimum of two years, an institution approved by an authority established for the purpose. This could be an Australian Orthodontic Board, which was still at that time under consideration. In addition it laid out in general terms, the scope of subjects, which should be dealt with during the course. Unlike the ADA specialist policy, it felt no need to be specific on the matter of hours or of details of the method of instruction. It recognised that the emphasis would vary between Universities.

They also discussed requirements for preceptorship, which included attendance, during the early stages of the preceptorship, at a series of short courses, which could be organised by bodies such as Post Graduate Committees in Dental Science, or the Australian College of Dental Surgeons. This could be followed by a series of five-day courses, every two months or at similar periods. Further additional courses could also be provided, as in the preceptorship programme of the American Association of Orthodontists. Both the preceptee and the preceptor would attend a university department for one session per week, "in order to have the facilities and opportunity of enlarging the scope of the type of treatment being undertaken by

the preceptee". Such a programme could lead to a certificate of proficiency granted by a body such as the Australian Orthodontic Board, which would also accredit the programme, as well as the candidates.<sup>95</sup>

In a covering letter, Reading suggested that these documents be circulated to the branches for comment so that their comments could eventually be incorporated in a final recommendation for the Policy on Specialisation.<sup>96</sup> Case circulated these documents together with the College's proposals to all Councillors prior to the next Council Meeting in Brisbane. The recommendations from that meeting were again circulated to the branches.<sup>97</sup> Further discussions were held at each Branch.<sup>98</sup> This tortuous process occurred in response to branch concerns. The Victorian Branch had met in June 1969 and had published its conclusions.<sup>99</sup> It was anxious that the GEC have their reports discussed and approved at a General Meeting of the ASO, before any report was circulated to other bodies.<sup>100</sup>

The thrust of these recommendations were incorporated in the second GEC document which was accepted by Council on 26 November 1971 and subsequently slightly amended and ratified by the membership at the General Meeting the following year. The Council instructed<sup>101</sup> the Committee to attempt to co-ordinate the teaching requirements of the various postgraduate departments with reference to the newly agreed Policy on Specialisation. All departments were consulted and all confirmed that their programmes were in accord with the Policy in general terms. Apparently, there was no thought given to checking these replies. Accreditation was a long way off. The Council also instructed the GEC to convene a meeting of the Heads of the Orthodontic Departments to endorse the new Policy on Specialisation and to co-ordinate the teaching requirements within Australia. This was planned for Congress week. The GEC had done an enormous amount of work between the two General Meetings.

## Specialisation

Although these days we tend to take such issues for granted, there were many elements to the broader aspects of specialisation, which needed consideration at that time. What is a specialty? What differentiates a specialty from any specific clinical interest? How, by whom and to what extent must it be regulated and who thereby draws benefit? When is it needed? And so on. Both the ADA and the ASO saw the need to develop policies in this area. The ADA policy was helped in its development by the wide acceptance of the Fédération Dentaire Internationale (FDI) document of 1964 entitled: Principles of Specialisation in Dentistry.

This lengthy document contains the following, which is included to help explain the thinking at that time.

### *Purpose of Principles*

The purpose of these Principles is to provide recommended standards on the definition, recognition, education and organisation of specialists in dentistry. They may also provide guidelines for the orderly growth of specialisation in countries, which wish to develop or expand a formal program.

### *Use of the term specialist.*

The use of the term “specialist” does not have universal acceptance in the dental profession. The claim to professional superiority, which is implied in the word, has caused a search for an equivalent, which would not appear to reek of hierarchical values among those who render dental health service. The general recognition by the public of the term “specialist” however may suggest its continued use until more acceptable terminology is available and accepted to popular and professional usage.

The dental profession should determine as early as possible in its national programme, the term by which it wishes to identify those who fulfil the functions of those who are presently termed specialists.

The basic objective of a programme for specialisation in dentistry is to identify, to the public and to the profession, the practitioner who has special competence in rendering an exceptional service to the patient. A programme of specialisation may also be useful in stimulating organisation, education and research in a particular area of dentistry.

Specialisation should not be utilised to foster a reduction in the educational requirements and responsibility of the general practitioner. Nor should it be used to provide better status for the practitioner, or to facilitate economic benefits which exceed the value of the service rendered to the patient.

### *Recognition by legal statute.*

Recognition by legal statute provides immediate means for discipline and enforcement in the area of specialty practice. Legal recognition may not always be entirely consistent with the wishes of the profession and may be more difficult of amendment to meet changing needs. Administration and enforcement are subject to the control of the legally established agency, which may not always be wholly aware of the professional problems that are involved. Under the statutory method of recognition, the areas of special practice, the requirements for specialisation and modes of enforcement are set down by law and administered by an appropriate governmental or academic agency to which the authority is assigned.

To be recognised as a specialty, six criteria were required:

1. The area should have importance to the protection of the health and welfare of the patient.
2. The area should be one in which the general practitioner has frequent need to refer patients in order to provide an exceptional service to the patient.
3. The area should be one that calls for special knowledge and skills requiring extensive study and extended clinical and laboratory experience beyond undergraduate dental training in order to perform services of a difficult or unusual nature.
4. The area should be one in which there is evidence that there is a need for the full-time services of the specialist to meet the particular public need.

5. The area should be one in which a sufficient number of educational institutions provide formal courses which will qualify practitioners in the special area.
6. The area should be capable of a precise definition of its limits so as to establish the qualifications required for practice in the special area and to restrict the specialist to rendering services in a well defined field.

A commentary on this FDI document had been prepared for the ADA by John Wark. It was entitled: "Principles of Specialisation in Dentistry: Application of FDI Memorandum to Australia." This and the FDI document was widely circulated. One point Wark made was that Australian Dental Faculties were not in a position to "extend their activities far into the postgraduate sphere for many years to come. This problem was foremost in the mind of the Council when it attempted to sponsor a Faculty of Dentistry within the Royal Australian College of Surgeons."

During the discussions at the 1969 General Meeting, Norton had reminded the meeting that the ADA was "just as concerned with the problem of specialisation as is the ASO" and had recently formulated a policy document applicable to all specialities. The ADA, after reviewing the FDI document and seeking advice from the specialist societies and others, had published its specialisation policy in 1968 and slightly reviewed it the following year. The views of the ASO had been canvassed in detail for this report. As the discussion developed, the ADA asked the ASO for a definition of Orthodontics. The following was given, as used by the American Association of Orthodontists and as accepted by the American Dental Association, decided at the Executive Meeting 18 August 1964:

Orthodontics is the specific area of dental practice that has as its responsibility the study and supervision of the growth and development of the dentition and its related structures from birth to dental maturity, including all the preventive and corrective procedures of all dental irregularities requiring the repositioning of teeth by functional or mechanical means to establish normal occlusion and pleasing facial contours.<sup>102</sup>

It may seem something of an oxymoron to outline definitions for the practice of Orthodontics but all dental specialties had to be taken into account both by the ADA and also the registering authorities.

The ASO responded to the ADA request for comment on the FDI document and Wark's commentary. They reiterated the recommendations in Reading's 1964 ORBC report. Points they wanted to emphasise were that:

A specialist was allowed only one special field except in isolated cases. Recognition by the ADA should be uniform and so provide a basis on which the various state Dental Boards could operate. In the instances where no University training was available, training courses should be under College auspices. An Australian Orthodontic Board will be the best authority to advise on the requirements for specialisation in Orthodontics.<sup>103</sup>

Much of the debate seemed to centre on whether there should be professional or statutory control. In building their policy, the ADA had wanted to know specifically how long, in the ASO's view, should be the minimum period spent in general practice. They felt that the description of an approved course should include the total number of academic hours and the portion applied to each subject. Description of the type and amount of clinical supervision and an idea of what sort of alternative the Society might accept if the ideal situation was not attainable, was also requested. As far as clinical experience was concerned, they wanted an ideal requirement ignoring the existence of training posts or opportunities, which may have been available at that time. The ASO Council<sup>104</sup> found the ADA policy regarding 'specialisation in dentistry' to be acceptable in general terms but it did make one recommendation: Under "Recognition", the original ADA policy read:

The initial recognition of specialties shall lie with the Association or an agency established by it for that purpose, and such recognition shall be at a national level. The ultimate recognition shall be through legal statutes administered by the state Dental Boards. The common basis for an initial and ultimate recognition of specialties is essential and continuing consultation should be established between the Dental Boards and the Association in order to achieve this end.

The ASO had recommended to the ADA<sup>105</sup> (unsuccessfully) that there should be a 'grandfather' clause and that it should read as follows:

The initial recognition of specialities shall lie with the Association acting in conjunction with the affiliated specialist societies and such recognition shall be at a national level. On the introduction of a specialist register, all persons practising a speciality exclusively at that particular time shall be registered as a specialist in that particular field.

They also wished the requirement to have spent time in General Practice in 4(b) to be a minimum of one year or its part-time equivalent and that it could be spent in private practice, hospital or other institutional practice, a public health service or the Armed Services.<sup>48</sup> Fortunately, there turned out to be general agreement between the ADA and the specialist societies on Specialisation Policy.

## The ASO Specialisation Policy

In mid-1970 President Richard Case wrote to the membership. Inter alia he said:

at a recent meeting of the Federal Executive, a "pilot policy" for specialisation was formulated as a basis of discussion by the Society. Since the last General Society Meeting in Adelaide, the ADA has sought comment on its specialisation policy and the Australian College of Dental Surgeons has requested the opinion of our Society on its proposal to institute a Diploma. Meanwhile the Graduate Education Committee appointed by our Society recently completed its recommendations for specialist recognition and training.

As the Executive can only act authoritatively after an acceptable policy has been adopted by the Society, this becomes a pressing issue and all

State Branches had been asked to arrange meetings for early discussion. The enclosed “pilot policy” is a combination of the Graduate Education Committee recommendations and the ADA specialisation policy together with some modifications by the Executive. Relevant copies of correspondence have been included for information including a letter relating to the ACDS proposed Diploma. The acceptance of the ACDS as an examining body could enable this body to act as a coordinating agent at a national level for all specialist bodies affiliated with the ADA.

In addition, since the greatest future problem is likely to be that of providing postgraduate training, the ACDS may on request provide a part time or alternative to the full-time post graduate training recommended by a Graduate Education Committee and (already) adopted as the policy of the South Australian and Victorian branches of the ASO.

All ASO members were again circularised, this time with the ADA policy, the recommendations of the College of Dental Surgeons on specialities and the one prepared by its own Graduate Education Committee. It is interesting to note the recognition given at this time by the Executive, to the views of the College in this matter, especially considering the rejection, soon to be voiced by the membership. This was discussed by the Branches, which then presented their resolutions to Council. All states supported the two year requirement. There was considerable opposition to the continuation of preceptorship and even more opposition to the involvement of the College in specialist recognition.

The NSW Branch resolved that “orthodontic education should be confined to universities most of which have recently introduced courses, until sufficient time has elapsed to assess the capabilities of these courses to meet the demand. It would, in the opinion of this Branch, be premature for another body, such as the Australian College of Dental Surgeons, to enter the field, particularly on a part-time basis.”

The South Australian Branch, the only other specifically to mention the College, thought “the ACDS be asked to set up a sub-committee of orthodontists to initiate a syllabus and examination, for consideration by the ASO, leading to a national postgraduate orthodontic qualification”, adding “provided that the Diploma syllabus comprises clinical and theoretical training, carried out in institutions approved by the ADA in conjunction with the ASO”. This seemed to be a minority view.

A consensus of the branch views was incorporated into the official ‘Policy on Specialisation’ in September 1970. This was ratified by the membership at the General Meeting in 1972.

The specialisation policy finally achieved by the ASO had three elements:

The ASO recommends the recognition at a national level of orthodontics as a speciality in the practice of dentistry.

It is therefore considered advisable that all State Dental Boards establish a specialist register in orthodontics. Initially, all persons restricting their

practices to orthodontics for a period of five years shall be recognised and registered as specialists in that field.

Subsequently each applicant for specialist recognition and registration shall:

- Be a registered dentist in that State in which he wishes to practice.
- Have completed a period of one year in the practice of dentistry
- Have successively gained a post graduate qualification in orthodontics acceptable to the ASO as a result of completing a course of study in orthodontics of at least two years full-time study, or its part-time equivalent, at a teaching institution approved by the ASO.

Notwithstanding anything in the above, it is recommended that no one shall be registered as an orthodontist within three years of graduation as a B.D.Sc or its equivalent.

The decision taken five years before (1966) to accept the NSW Dental Registration Board's preference that there be a period of two years, not one, in general practice, before commencing a post graduate course, had been reversed. This reduced from four to three years the total period since graduation mentioned in the first report and presented to the meeting. The significant part of this policy was that it required a qualification, which could only be achieved after a period of two years full-time study, or its part-time equivalent from an approved institution. It was hoped that this policy would be helpful to State Registration Boards as they considered specialisation. Not all State Dental Boards had by this time a form either of specialist recognition or registration, but those that did were in general conformity. The first Dental Board to include a consideration of specialties was NSW, which recognised specialist qualifications as early as 1957. Sadly as Franki reports,<sup>106</sup> NSW Dental Board records are virtually non-existent. The Queensland Dental Board had recognised specialists in its legislation since 1959.

Even today (2009), while the government considers making issues related to the delivery of health subject to Federal, not State legislation, not all Dental Boards are in full agreement about which specialties they will recognise. All have some form of recognition and a list of requirements, before they will allow one to call oneself a specialist.

## Constitutional Changes

At the 1969 General Meeting, a raft of Constitutional changes, developed by Mackie and Gates, were also on the agenda. These were discussed at some length, but because of the significance of the report from the GEC and the furore over the Board, discussion was deferred. Following requests from the NSW Branch as to the action which had been taken by the Federal Executive concerning these matters, the Executive:

felt that quite a few other aspects of the Constitution needed to be reviewed and updated. A committee has been appointed to carry out this work and is now ready to receive recommendations from State Branches, for consideration and possible inclusion.... It is suggested that State

Branches each appoint a committee to report to State executives so that direct recommendations can be sent to the Federal Council.<sup>107</sup>

In addition, a Constitutional Review Consultant, with power to co-opt, was appointed to shepherd this process through. The one chosen was D.F. Spring, highly experienced in matters both ADA and ASO. The distillation of this lengthy Constitutional process was finally put to a postal vote and all but one of the 16 changes were adopted (three to By-Laws) and came into effect in August 1971.<sup>108</sup> The net effect was to make major changes in the manner in which the ASO Council operated. To give effect to the recommendations of the GEC report, for the first time new applicants for Full membership had to have a higher qualification/degree in their speciality from a teaching institution approved by the ASO. All Provisional Members accepted up to that point needed only five years of experience in full-time practice, but after that an approved qualification was mandatory.

At this stage the ASO 'Policy on Specialisation', which called for a two year full-time (or part-time equivalent) course, had not yet been incorporated into the Constitution and so was not yet part of the requirements for Full membership. So, any degree obtained after part-time study, was still acceptable. It was to be some time before the Specialisation Policy of the Society and its constituted requirements for Full and Provisional membership were to be brought into harmony. In the interim, Council decided that Master's degrees from all the Australian Universities were to be accepted as higher degrees for Provisional membership and that that rule was to operate until the next Congress.

Major changes were also made in the administration of the Society. The Executive was renamed the Council and its three principal members President, Secretary and Treasurer became the Executive. Elections continued to take place at General Meetings during Congress. The members of the Executive were to be domiciled in the place where the subsequent Congress was to be held. By then, the venues for Congresses had become fixed in their clockwise progression around Australia's mainland capitals. This alteration was to allow for a more regular meeting of an Executive, which became and continues to be, the central administrative agent of the Society. The composition of the Council was unchanged.

Honorary Life Membership had been referred to in the previous Constitution. This time, a separate category of Honorary Life Member was added to the section on Honorary Membership and the 1966 decision that the nomination should come from the Council was included. The quorum for Special Meetings was increased to thirty. These were meetings which could be called at the request of any five Society members. No such alterations were made to the quorum of ten applicable for regular (or Congress) General Meetings. These latter meetings were required by the Constitution to be held at the time and place of each Congress. The By-Law governing the operations of the Foundation was altered to allow for longer terms, with one Trustee remaining until replaced at the fifth subsequent meeting.

And so all was in readiness for the 5<sup>th</sup> ASO Congress and the General Meeting, which was held as an integral part.

## Endnotes

1. Clause 4(b)
2. 5/11/1962
3. The Branch minute book records the 3<sup>rd</sup> meeting in 1960 and the 4<sup>th</sup> in 1962
4. Lecture to ASO NSW Branch 50<sup>th</sup> Clinical Day
5. NSW Branch ASO Secretary's report 1962/3
6. Minutes SA Branch 25/4/1961
7. From Hussey to McGibbon 16/12/1961
8. Minutes NSW Branch Meeting 10/1966
9. NSW Branch 1966–67 Programme
10. Presidents Report 1973 G. Brown
11. ASO Executive report 6/2/1956
12. Norton to Henderson 6/6/1961 in Archives
13. Archives
14. Begg, PR. to Norton 3/5/1961
15. Norton to Rowell G, President ADA. 25/5/1961
16. Adamson to Norton 27/7/1961
17. ADA Secretary Newton to McGibbon 17/7/1962
18. From McGibbon to Vic Branch Secretary, Neil Armstrong, and to other branch secretaries 31/7/1962
19. Minutes Executive Meeting 4/1974
20. Minutes Executive Meeting 5/1974
21. Minutes Executive Meeting 7/1998
22. Hall Best to Adamson 17/1/1961 A
23. Neil Armstrong, Hon. Secretary 7/5/1961
24. From Neil Armstrong 25/7/1961
25. Minutes Executive Meeting 5/1961
26. 17/3/1960 and 22/4/1960
27. Minutes Executive Meeting 5/1960
28. NSW Branch Newsletter Dec 1961
29. 19/11/1962
30. Treasurer's report to 1986 Council Meeting
31. Minutes SA Branch Meeting 2/1974
32. 24/4/1961 Archives
33. 25/5/1961
34. 14/6/1961
35. To Norton 14/7/1961
36. Norton to Tonkin 20/7/1961
37. 16 of August
38. 7/5/1961
39. Norton RY, Memo to Councillors 5/1961 Archives
40. 7/7/1961
41. Minutes General Meeting 1961
42. Letter to Henderson 26/6/1963
43. Walker G to Reading 9/3/1961
44. Norton to Henderson 30/5/1960
45. 8/8/1961
46. ASO Bulletin Vol 2 No.7
47. Presidential Report 8/3/1956
48. 29/5/1962
49. Newton, J 4/7/1963
50. Minutes Executive Meeting 11/1973
51. Minutes Executive Meeting 5/1964
52. 9/6/1964
53. Minutes General Meeting NSW Branch 7/1963
54. 6/8/1964
55. Henderson to Case 3/5/1963
56. Personal Communication 28/8/2008
57. 1964 Archives

58. Neville Cox to ASO secretary 25/10/1965
59. Rickleman R, Personal Communication 5/10/2008
60. Adamson 26/8/1965
61. Personal Communication; J Mackie 16/4/2009
62. 7/7/1965 Archives
63. Norton to Webb 19/8/1965
64. Webb to Norton 20/8/1965
65. Heath, J. 7/9/1965
66. ASO Circular to Branch Secretaries 6/4/66
67. Unsigned and undated. Marked 'confidential' 1966 Archives
68. From ASO Executive 23/9/1966 Archives
69. Minutes Congress Committee 1/66
70. Minutes 1966 General Meeting
71. Webb to ATT 7/5/1965
72. Minutes General Meeting 1966
73. 8/10/1964 from Minutes of Orthodontic Registration Board Committee. Motion read " This branch requests that the Federal Executive of the ASO gives consideration to the formulation of a policy on Orthodontic Education in Australia"
74. Minutes Executive Meeting 8/1964
75. To Smart 11/1/1968
76. Downes WB. Variations in facial relationships: their significance in treatment and prognosis. Am J Orthod. 34: 10. 812-840
77. Seward to A. Thornton Taylor 15/3/67
78. Wallman to A. Thornton Taylor 15/3/1967
79. Smart 9/2/1968
80. Branch Minutes 11/1967
81. Minutes Executive Meeting 7/1968
82. Minutes Congress Committee 7/1964
83. Minutes Executive Meeting 21/10/1968
84. Minutes Executive Meeting 8/1967
85. Minutes Executive Meeting 9/1967
86. Godfrey to Smart 4/1968
87. Memorandum from Chairman to members Graduate Orthodontic Education Sub-Committee 22/7/1968
88. Minutes Executive Meeting 6/1968
89. Minutes Executive Meeting 2/1969
90. 28/4/1969
91. 4/6/1969
92. Smart to Heath 14.10/1971
93. ADA Federal Council 10/1973
94. 13/8/1969
95. Report of Meeting of Graduate Education Committee 13/8/69
96. Reading to Case 22/4/70
97. Circular 9/6/1970
98. AOJ Vol2 No2 1969
99. Branch Reports AOJ Vol2 No2 1969 pp72-3
100. Letter to Federal Secretary 11/8/1969
101. Report of Graduate Education Committee 12/1971 in Notice of Meeting for 1972 GM
102. Moffatt to Newton 28/8/1964
103. Moffatt to Newton 14/12/1964
104. Minutes Council Meeting 5/1970
105. Minutes Executive Meeting 5/1970
106. Franki Op Cit pp 154-5
107. Undated Memorandum to all State Secretaries from the Federal Secretary Referred to in Minutes Executive Meeting 5/1970
108. Federal Council Report for 1972 General Meeting

## Chapter 3

# The Seventies

### *'The Me Era'*

The General Meeting, now that it had ratified the 'Policy on Specialisation' and the educational requirement it implied, finally closed down movements to found an Orthodontic Board. The feeling was that any corporate function of such an entity had ceased to be an imperative. The meeting also put a brake on the College's anticipated plans to play a greater role in providing specialist qualifications.<sup>1</sup>

And so the ASO entered the next decade with some great initiatives having been achieved. Firstly it had a growing membership. Still with a preponderance of Associate Members but a solid core of highly experienced orthodontists committed to the specialty and to the Society. It had its own Journal and a regular programme of Congresses as the main feature of the Society's activities. These had been divorced from the ADA Congresses. It had a newly approved Constitution. A working structure had been laid down for the conduct of the Society's affairs, with General Meetings programmed at Congresses and an Executive structure, with representation nation-wide and an Executive located in the state where the next Congress was to be held. Active Branches operated in all mainland States. Functional liaison existed between the Branches and the Federal body. The Annual General Meetings of the Branches became co-ordinated, when the NSW Branch changed their's to November.<sup>2</sup> This made things easier for the Federal Executive and for publishing reports in the Journal. With this firm foundation in place, the Society could confidently look forward to its future and to the advancement of its ideals.

The Melbourne Congress, held in March of 1972, was again a professional and social success. Prof. Elsdon Storey opened the Congress and Prof. Gustav Nossal, Head of the Walter and Eliza Institute, later to become Australian of the Year, gave the Stanley Wilkinson Oration. Both speeches were printed in the AOJ.<sup>3</sup> It was

at this Congress that the Presidential Jewel was worn for the first time. Moffatt was known to have an interest in the ASO's corporate identity and the Executive asked him<sup>4</sup> to investigate suitable designs. This was duly prepared and at its next meeting<sup>5</sup> it was announced that the Melbourne members had all approved of the design. Moffatt was asked to proceed and promised to keep the cost under \$100. Norton had suggested, and this met with general agreement, that the past Presidents would pay this cost. Not everyone agreed, feeling that these members had already done their share. At the 1972 General Meeting Arthur Thornton Taylor presented to the President a cheque, being the contribution from the surviving six past Presidents, to that cost. Stanley Wilkinson had passed away in 1969. Moffatt suggested that a special presentation of the Jewel be made to President Richard Case, since most members had not seen the Jewel or even knew of its existence. Furthermore, he felt that the Jewel should be officially handed over to the newly elected President at the Dinner Dance, which was to close the Congress. Thus began another tradition.

The old Executive handed over to J.F. Reading, the new President. R.G. Henry was elected Treasurer and W.J. Mackie, Secretary. At the time of writing, all still alive (2009<sup>6</sup>); all helpful in the preparation of this history; all very experienced in the ways both of the ASO and the ADA. As were the rest of the Council. Compared to the seminal changes just completed, they had a fairly quiet time. Nonetheless, many of the bread and butter issues which occur in any organisation began to be dealt with. Instead of using the Journal as a means of disseminating information, in addition they began to produce an ASO Newsletter, three in 18 months. Some overseas associations and libraries, subscribers to the Journal, asked for copies. The official policy was that newsletters were published solely for the information of members and regardless of the promotional value, these requests were denied. Newsletters have continued to be published, not always with Teutonic regularity, as well as the AOJ. The next two Executives also produced three issues each.

As a result of a resolution from the Melbourne meeting, that regular surveys of fees and orthodontic practices should be conducted at least every three years, an Economics Committee was formed. Henry, as ASO Treasurer, was to be Convenor with R.H. Abbott and G.J. Hinrichsen as members. They produced a survey in 1972 and another in 1975. Unlike Norton's informal one of 1960, these surveys were sent to all ASO members. The first one had been carried out by Smart's Executive; 77 per cent of members had returned them. This was the highest rate of response ever to occur. Surveys have continued to be a function of the ASO and have provided much useful information for members. The Fee and Practice survey was tabled for the Executive<sup>7</sup> and then circulated to the membership.

At this time, third party providers were beginning to make their presence felt in Dentistry. In the past, the Repatriation Department and a few smaller organisations had been the only ones to get involved in payment for dental treatment. Now the main health funds, which came into being when the national health benefit system was privatised, saw a market in Dentistry and began providing benefits. The ADA was immediately involved, to ensure equity and insist on their input into the host of administrative details such a scheme entailed.

The ASO saw fit to write to the ADA in an attempt to ensure that orthodontic treatment not be excluded from those services which might attract benefits. The Executive felt, at the very least, if it was to be excluded, the reasons, including a cost analysis, should be provided to the Society.<sup>7</sup> The advantages of these benefits were heavily promoted but in reality, it frequently appeared that they caused more headaches to the orthodontists than they did real benefit to their patients. Stringent and tedious reporting requirements and low rebates were part of the problem.

In response, the ADA sponsored a rival benefit organisation called Australian Dental Plans (ADP) as the profession's answer. Both however, tended to place a low priority on orthodontic treatment. Even the ADP had a very low ceiling on rebates for orthodontic treatment, which they saw as principally cosmetic. Later they began to consider higher rebates for treatment of more serious cases (classified as disfiguring or disabling). Abbott drew up a questionnaire and Council asked the Committee to survey 20 practices initially<sup>8</sup> and later a further 19 practices<sup>9</sup> to provide further information for ADP. One of the advantages of Abbott's surveys was the information they gave to the ADA, to assist in its negotiations with the funds and the ADP. Abbott was to continue to serve the ASO for ten years in a wide range of functions including a series of surveys of practice trends and fees.

Medical benefit organisations in Australia are very often state-based and this meant the Federal Executive frequently had to leave it to the State Branches to conduct the negotiations. Branch executives worked very hard to ensure their views were understood by the major funds at all times. Not always did this produce major shifts in fund administration, but it was not for want of effort. These matters began to take more and more of the Executive's time.

At the same 1972 meeting, it had been decided to compile and circulate to members, as a supplement to the Journal, a list of members in all categories. This was to include the addresses of all branch practices. And so came into being, the ASO Directory. Since then, it has been regularly updated, first by R.E. Gates who produced his first two in 1973 and 1974 and then periodically until 1982. This was continued by D.R. Hellstrom until the Secretariat took over the role in 1991. Up until then, membership lists had regularly been published,<sup>10</sup> but not with full contact details, so as to make it a working document for members. This is amplified elsewhere. The ASO continued with its efforts to build an Audio Visual library, both for general and student use, mainly from the AAO. Later the Foundation also became involved in providing educational material of this type.

The more stringent requirements for Full ASO membership mandated the use of a new application form and the South Australian model was chosen for universal use.<sup>11</sup> A standard patient transfer form was produced, to assist in the introduction of patients to their new orthodontist, so that their treatment could be continued more readily. The previous Executive had asked R.J. Masson to present at Congress on this subject.<sup>12</sup>

Reading had been concerned for some time about the difficulties involved in planning and conducting Congresses and the desirability of retaining the corporate knowledge accumulated during that process. He had asked<sup>13</sup> for this to be part of the previous Executive's attention, but the Victorians seemed not particularly

interested in anything so formal and ongoing. They did offer, at the same time, all the help Sydney would need when their time came. For his part Reading, knowing that the Congress subsequent to the one which concluded his term would take place in the anniversary year of the ASO's Founding, nagged the Queensland Vice-President to set in motion a committee to plan that meeting and ensured preparation of a "Red Book" which recorded all the procedures involved in the conduct and the planning of his own.

## An International Congress

A 3<sup>rd</sup> International Orthodontic Congress was planned for 1973 in London. The previous one had taken place 40 years before. Norton had been appointed ASO Liaison Officer<sup>14</sup> and had proposed an organised tour for the anticipated large number of interested Australian delegates.<sup>15</sup> Reading and Moffatt were appointed to represent the ASO officially and furnish a report.<sup>16</sup> In addition, as there was so much discussion at that time about dental benefit funds, while there, they were asked to look at that situation in Europe, particularly the UK. As both the President and Vice-President were to be away for a considerable period of time, the immediate Past-President, Richard Case, was appointed as acting President for an eight week period in August and September. That had never occurred before or since.

Reading produced a detailed report of the workings of the British Dental Service and the part orthodontic treatment played within it. He included the numbers of children treated annually, the training involved and the proportion and quantity of costs involved. On a much lighter note, he concluded his report with a précis of the 'Silver Mill', a competition which is a traditional feature of meetings of the European Orthodontic Society (EOS), under whose auspices the International Congress was conducted. On this occasion, the competition consisted of a series of races in various forms of wheeled contraptions. He reported that the "Australian team distinguished itself but a charming Italian lady carried off the prize." It was also after lengthy consideration, Council decided to ask the President of that Congress, Prof. W. J. Tulley, for an opinion regarding the possibility of the next or some future International Conference being held in Australia.<sup>17</sup> Borrowing from the title of Geoffrey Blainey's 1966 work, Tulley was of the view that the "tyranny of distance" was likely to cause considerable difficulties. It had been 40 years since the previous International Congress and another may be a long way away.

Of his own volition, Arthur Thornton Taylor had produced a "Presidential Medallion" to be given to the President of the EOS at that Congress. He received a letter from Professor D.P. Walther<sup>18</sup>: "I was delighted to hear that the Presidential Medallion has now been completed and is safe and sound under lock and key. It would be very nice indeed if you could present this to Jack Tulley at the beginning of the opening business meeting which has been arranged." Thornton Taylor later wrote<sup>19</sup> to Professor Tulley: "I did appreciate your obvious pleasure over the medallion and as I said at the first meeting, I was very happy that you were the first to "wear" it. I got a tremendous kick over the way you, with David Walter's help, decorated (Dr) Markovic as the incoming President; let him wear it for about 60 seconds flat and then took it back for a little more "usage" by yourself. That to

me, was worth a trip to London". Tulley asked him to move the "vote of thanks" at the end of the Congress. The Medallion is still in use.<sup>20</sup>

Closer to home, even though international interest in our Congresses, particularly from Japan, were increasing to the extent that interpreter services were being considered, the Council had resisted, as impractical, on a number of occasions, the invitation from the NZOS to conduct some joint official activities. The NZOS were particularly keen for some sort of international cooperation, so much so that their 1971 meeting was officially designated as being held in conjunction with the First Pan Pacific Basin Orthodontic meeting. The ASO members were highly supportive to the extent that 24 members attended. The NZOS acknowledged this with a gift in the form of a Kotiate, a traditional Maori weapon, prized on the battlefield for disarming opponents.<sup>21</sup> The next NZOS meeting was not so international. It was to be another 20 years before international and regional considerations resurfaced.

The Graduate Education Committee, which had submitted its resignation after completing its brief at the 1972 General Meeting, was reconvened under V.C. West. There was a representative from each orthodontic department and each State Branch. It was asked to conduct and publish a survey of the graduate courses on offer throughout Australia. The resulting table also included the number of students currently undertaking coursework, both full and part-time, at all Australian Universities. This provided an excellent resource as the ASO surveyed all educational opportunities currently in operation. John McGibbon, in reviewing this information, found it "most disturbing". He noted that students in Adelaide received only half the stipend of those in Perth and commented, regarding Sydney and Brisbane, that "everything is being done to discourage dentists from taking any interest in Orthodontics".<sup>22</sup> The Committee was asked to contact hospital boards to see if some opportunity could be provided to students to earn some salary while training. Keith Godfrey had just published a report of the progress and accomplishments of the Sydney course<sup>23</sup>. After some time the standardisation of cephalometric readings in case reporting, which this Committee had been asked to look at, could not be advanced and the Executive suggested it be dropped as a 'dead issue'.<sup>24,25</sup>

An Australian Society for Dentistry for Children was formed in 1973. Several members from Western Australia thought that orthodontists should join that Society en masse. McGibbon was not in favour: "I cannot see myself being a member of two organisations with apparently the same aims and objectives. I can see a situation in which my loyalties would be conflicting."<sup>26</sup> There was some concern about possible rivalry. Gradually this Society changed to be more representative of Paediatric Dentistry and developed a parallel existence.

## **Putting the Policy on Specialisation into practice. Negotiations with Universities and Boards**

In a Presidential message in the Journal, Reading<sup>27</sup> referred to the newly enunciated Policy on Specialisation, which had been produced, in part, for the guidance of state Dental Registration Boards. He hoped it would provide a starting point for the

establishment of a national specialist register under the aegis of a General Dental Council of Australia. His time in the UK had awakened him to the potential of such an organisation modeled on their GDC.

Difficulties contingent on the adoption of the new Policy on Specialisation were not long in emerging. The document had been disseminated generally and all the boards acknowledged this and recorded their appreciation. The Queensland Board responded<sup>28</sup> reminding the ASO that: “Unlike most, if not all, of the other states, Queensland has had for many years a Specialist Register and has recognised the specialty of orthodontics”. They had a new Act, 1971, which required “adequate experience in that specialty ... for a period of not less than 5 years” and that a specialist “shall have conferred upon him a degree, diploma or certificate, obtained after due examination, recognised by the Board”. This was more stringent than the ASO.

The South Australian Board also responded<sup>29</sup> that their newly elected Board would be looking at the issue of the “Registration of Specialties and the problems associated with alterations to the SA Dentists Act”.<sup>30</sup> In 1973, that Dental Board began plans to incorporate a specialist register and sought comment generally, including from the Society.<sup>31</sup> They were also keen to receive information on which institutions were approved by the ASO. The ASO Secretary had some difficulty with this request and it was not immediately responded to. The Board repeated the request.<sup>32</sup> Its concerns probably arose because there existed a second avenue of training in Orthodontics at the Royal Adelaide Hospital.<sup>33</sup> They needed to know if they were both acceptable. Sven Kuusk had already written to the ASO to verify that the course, he was doing, would entitle him to Full membership.

Some time later the Victorian Board contacted the ASO<sup>34</sup> about the status of the MMS degree from Dundee. The letter also mentioned that the Board proposed to introduce specialist registration in the near future, but that they could not accept the ASO Specialisation Policy as a basis for their registration. The Federal ADA replied that they found the ASO policy in substantial agreement with their own and forwarded a copy. The ADA also requested a description of Orthodontics.<sup>35</sup> The standard definition was again forwarded.

The Universities also responded to receipt of the new Policy. Professor N.D. Martin, now Dean at Sydney, wrote to clarify the criteria whereby the ASO would “approve a teaching institution”.<sup>36,37</sup> Although it is reasonable to assume that he was being just a little facetious, the ASO Secretary had difficulty with this question, just like the question from the South Australian Board and sought help from the AAO.<sup>38</sup> Martin’s letter also included reference to “a move to set up a national registering body and this has been recommended by Professor Davies”. Thirty five years later this move is still the subject of intense discussion by all the health professions.

During correspondence with the AAO, designed to assist in the process of providing recognition for acceptable courses, Secretary/Treasurer John Aldrich explained that the AAO was not involved in the approval of courses, but does work with the American Dental Association in establishing rules and procedures. He also mentioned that newly adopted regulations coming into effect in 1974, required all

applicants for active membership to take a written exam and present cases.<sup>39</sup> This extra hurdle was never actually erected.

Council wrote to each State Branch enclosing a synopsis, provided by the Education Committee, of all courses currently available. They were asked if there were any other postgraduate training facilities in their State.<sup>40</sup> To assist his deliberation, Mackie also wrote to all State Secretaries<sup>41</sup> asking that they forward details of the courses conducted in their State, to verify if there was compliance with the new rules. The purpose again being to advise of the existence of any inadequate scheme (and also eventually to provide an answer for the South Australian Board.) Council chose the curriculum at the University of Sydney as their model.<sup>42</sup>

After some correspondence, Mackie felt able to advise the South Australian Board<sup>43</sup> that the full-time courses currently running at Sydney, Melbourne, Queensland and South Australia “would be considered suitable qualifications”. A further review was needed before the Western Australian course could gain approval.

The ASO’s eventual response to Kuusk, was that only the course conducted at the University of Adelaide could be considered acceptable and therefore a hospital-based curriculum, as he had just completed, was not. This required him to repeat the course.<sup>44</sup> An aspiring member, resident in Western Australia, who also had an MMS qualification from the Dental School in Dundee, was informed that his qualification “did not measure up to the requirements of our specialisation policy” and was not acceptable. The Dental School at Dundee was so informed. This appears to be the first time an overseas qualification had been subject to the new criteria.<sup>45</sup> The Education Committee continued to keep records of overseas courses for a long while thereafter. The Western Australian Branch, where the registration had been sought, was also informed. They replied that this qualification was registrable by their Board as a specialist qualification and pointed out the anomaly existing.<sup>46</sup> Council’s response<sup>47</sup> was interesting in that it informed the Western Australian Branch of the ASO that if it wanted to have the anomaly corrected through a Constitutional amendment, this could be considered at the next General Meeting. They even listed the references in the Constitution by which this change could be made.

Having worked so hard to achieve the new standards, it seems incomprehensible that such an offer could be made. Whether this comment was solely for that Dundee qualification or whether it was designed so that the Western Australian Board could be persuaded to change its criteria, is not clear. As it turned out, over time, the rules were further tightened and no amendment appeared from the West.



ASO Secretary Jim Mackie

The Western Australian Branch also forwarded details of the new MDSc course planned in that State. These were initially approved by Council<sup>48</sup>. Later a letter was sent to the Dean,<sup>49</sup> pointing out that the ASO Policy on Specialisation recommended that the ideal course was of two years duration, full-time. As this proposed MDSc course was to be part-time, it would need to be reviewed, to ensure that it was equivalent. The Dean, Professor K.J.G. Sutherland responded, setting out details of the course and the manner in which the students were required to work. He also mentioned that a new orthodontic clinic was included in the plans for extensions to the dental school and enclosed the University's regulations and the Dental Board's requirements regarding specialist practice. A series of communications followed after some Councillors pointed out that deficiencies existed. The initial approval was subsequently reversed and Sutherland was informed of the inadequacy of the course with regard to clinical training and supervision. This is further described in the chapter on Graduate Education.

In 1975 negotiations occurred with Queensland regarding a proposal for a part-time course but of four years. The Council approved of this although one Councillor (Wallman) wondered why the requirements were altered to suit the convenience of students.

## Student Membership

An increasing number of Student Members, a new category introduced with the large number of 1971 amendments, were reporting unwillingness to maintain full ADA membership, which included a significant cost for professional indemnity insurance. Because the requirements of affiliation with the ADA demanded all members of the ASO also be members of the ADA, this would jeopardise their ASO membership status. It was resolved<sup>50</sup> that a letter be written to the ADA suggesting that an addition be made to the Restricted membership classification of:

a Member who is undergoing full-time graduate study, for a period not exceeding two years. Such an addition, to the Restricted membership, would assist the graduate student who probably was not in receipt of remuneration or if so, to a very limited extent, and enable him to accept Student membership of the ASO, an affiliated Society.

The June 1973 Newsletter records that:

the subscription for Student membership of the Society will also be reduced from \$22 to \$15, the same as for corresponding membership. The ADA has considered our submission for a similar category (student) of membership for our affiliated parent body but so far has not been able to extend this concession for a two-year period to its Members—or prospective Members—who have undertaken full-time graduate studies as a partial requirement for specialisation.

The ADA later decided that Restricted membership would be offered for two years for \$7.00.<sup>51</sup>

The ASO Council, having succeeded in negotiating with the Federal ADA to allow the students to become Restricted Members, then asked the State Branches, to whom dentists must first seek membership, if the concession applied there. This is an early example of the strict adherence of the ASO to their obligations under the affiliation arrangements with the ADA. Student membership was only allowed for full-time students. Part-timers could be Associate Members only.

The use of the courtesy title of 'Doctor', then being advocated by the ADA, was approved for use unless members had expressed the wishes to the contrary. Acceptance initially was not universal.<sup>52</sup>

Reading, who had always wanted a yearly meeting of the Society, had hoped to have a General Meeting of the Society during the 20<sup>th</sup> ADA Congress, which was held in conjunction with the 61<sup>st</sup> Annual session of the FDI. He was buoyed by the strong attendance of orthodontists at the previous Congress in Brisbane. He was sure this meeting would attract even more. Most specialist Societies were also to hold meetings at that time. A luncheon was planned for ASO members and for visiting orthodontists from overseas. A General Meeting was planned to follow the lunch<sup>53</sup> but a quorum could not be achieved.

## Committees

It was at this time that the ASO began to be more outward-looking and form standing committees and develop policies on matters of concern. Council decided that it should have a Policy on the provision of Orthodontic Services within School Dental Services. At that time, School Dental Services played a major part in the dental care of the young, especially in Queensland, South Australia and the ACT. A draft policy was prepared which suggested that a School Dental Service should include provision for orthodontic care; school dental therapists should receive training in the recognition of problems for referral and that dentists employed should have available extra training in the recognition of malocclusion and simple treatment options. More complex treatments would be provided by a specialist on a sessional basis or by referral. Universities should receive extra funding for the training of more orthodontists and Postgraduate students should receive assistance during their training and could work for two years following registration in a School Dental Service. This was a somewhat utopian set of proposals. At the same time, Council decided also to formulate a policy on the use of auxiliaries in orthodontic practice.<sup>54</sup> The ADA was active in both these areas. At this stage, it had a Policy on the use of operative auxiliaries which included provision both for dental therapists and dental hygienists, the latter quite usual world-wide, but not utilised in Australia. The Policy also included an innovative auxiliary called an Expanded Duty Dental Assistant (EDDA).

Council decided, in the first instance, to develop a policy on the use of qualified auxiliaries in private practice as opposed to government service. To progress this, Councillors were to report on the current situation in their State. By now, much of the Society's activities were devolved to these committees and these matters are further discussed in the chapter dealing with those committees.

## Constitutional changes planned for 1974

After the major constitutional changes passed by postal vote in 1971 and the Policy on Specialisation passed at the 1972 General Meeting, the new Executive had appointed Ray Miles (who also lived in Sydney) to be their new Constitutional Consultant (they used the phrase ‘compiler’), replacing the vastly more experienced Victorian, D.F. Spring.<sup>55</sup> The ADA had developed a new Constitution and his first task was to produce a report on any consequent changes required of the ASO Constitution, to ensure satisfaction of its affiliation obligations.<sup>56</sup> He was also asked to address the alignment of the new Policy on Specialisation with the Society’s Rules for Membership and to present amendments to the requirements for Provisional membership and for quorums at meetings.<sup>57</sup> All the Councillors were asked for their views on these same matters. This produced a series of recommendations for amending the Constitution, which were included in the ‘notice of meeting’ for the 1974 General Meeting. One of these had not really been discussed before, namely that Full members must be in active practice, or else they would have to forfeit membership.<sup>58</sup>

The thrust of these changes addressed the incompatibility now existing between the ASO’s Policy on Specialisation and the requirements for Full and Provisional membership. The nub of this problem was that Full Membership required:

a higher qualification in orthodontics approved by the Australian Society of Orthodontics from a teaching institution approved by the same body

and the ASO’s Specialisation Policy required:

a post graduate qualification in orthodontics acceptable to the ASO as a result of completing a course in orthodontics of at least two years duration or its part-time equivalent at a teaching institution approved by the ASO.

The critical difference being that the time requirement was spelt out. Why it could not be established that after a certain time, approval by the Society could only be granted after completion of a two year course, was never discussed. The real problem was the number of aspiring orthodontists caught up in the changes. For this issue the proposed change read:

### *Membership*

Candidates for Full, Provisional, Associate, and Student membership must be members in good standing of a branch of the Australian Dental Association. A person elected to membership shall retain his membership in the Australian Dental Association. If any member of the Australian Society of Orthodontists ceases to be a member of the Australian Dental Association, such member shall automatically and without any further action on the part of the Australian Society of Orthodontists, cease to be a member of the Society. Full and Provisional Members shall remain in the full-time practice of Orthodontics or forfeit membership in the Society, except that a Full Member retiring from practice may, if he desires, retain his Full membership by paying his full dues. An applicant upon applying

for membership must sign a pledge to adhere to the Constitution and the Code of Ethics of the Australian Society of Orthodontics.

An ASO Code of Ethics did not exist at that time.

The amendment to the requirement for Full membership was that:

the applicant must have been in the exclusive practice of orthodontics for not less than three years, after having successfully completed two or more years of advanced education in orthodontics, leading to a higher qualification in a programme approved by the Australian Society of Orthodontists at an institution approved by the Australian Society of Orthodontists.

In addition, it being progressively more difficult to keep track of all Society business, many clauses were added to the duties of office bearers, particularly the State Branch Secretaries. These included that the Executive should be advised of the programs of state meetings, including guest speakers and that any study groups affiliated with the ASO should submit their calendar of dates. Also, where invitations were extended to overseas lecturers, this should be communicated to Council in order that their services may be utilised by other State Branches. Manuscripts of all papers presented to the State Branch meetings were to become the property of the Society and a copy of these manuscripts was to be forwarded to the Executive. Up-to-date lists of branch members must be maintained and forwarded to Council. Notes should be kept of Provisional Members' entry to full-time practice and when their elevation to Full membership is due, the Federal Secretary should be advised, so that the necessary change in records can be made and the member advised. All minimum fee schedules should be referred to Council. Close liaison should be established between the ASO State Branch Secretaries and the ADA State Branch offices, in order that matters pertinent to Orthodontics were referred promptly to the ASO Federal Council.

There was a slight hiccup when the required 'Notice of Motion' for all these changes was found to contain a number of printing errors and Council decided at the last minute, on a further amendment, to add a second Vice-President to their number. At the General Meeting, the foreshadowed amendments appeared to have been passed. Something of a bombshell exploded, when a further amendment to this series, relating to membership, was moved at the meeting by R.Y. Norton without any prior notice having been given. His idea was to allow the Council "in its absolute discretion to admit to membership, one who did not fully satisfy these requirements and to lay down further conditions which the applicant must fulfil to safeguard their standards". Norton was concerned that the new requirements could end up being too restrictive. This was not the first time Norton had sprung a surprise on the General Meeting and such was the strength of his personality and his record of service, that he was used to getting his own way. This amendment appeared to have been passed on a show of hands. However a full head count was not taken, so the required three quarters majority could not be confirmed. There was a further 'point of order' in that Norton's amendment substantially altered the intent of the original motion and therefore needed confirmation by a postal vote.

The Council finally agreed that the amended resolution needed to be put in its entirety to a postal vote for confirmation.

The proposed changes to the duties of office bearers passed without controversy. The further change that the Council be augmented by an extra Vice-President, who had to come from the state where the successive Congress was to be held, was discussed. The idea was that the added Councillor would eventually be the Congress Chairman. This added to the retention of experience within the governing body. The amendment also stated that all officers were to be elected at each General Meeting of the Society, and would hold the position until the next Congress. The purpose of this amendment was to take into account the likelihood of more frequent meetings of the Society. There had been a late alteration to this motion, so that it too was included in the planned postal vote for eventual ratification.

Alterations proposed to the By-Laws affecting the appointment and terms of office of the Trustees of the Foundation, having also been varied at the meeting, were also subject to a 'point of order', in that prior notice had not been given and this matter was also deferred for a postal vote. Not totally satisfactory! The quorum issue was not addressed and no minimum period in general practice was included among the list of requirements necessary for Society membership, although it was listed in the Policy on Specialisation.

Eighty seven members attended the meeting. Full membership had now climbed to 106, from 45 ten years before. Associate membership had fallen from 90 to 51 over the same time, indicating the direction towards which the Society was moving. Corresponding membership had doubled. The finances were in a healthy state, with accumulated funds nearly \$10,000. This was well in excess of a year's expenditure and the profit from the Melbourne Congress had been nearly \$3,000. This meeting took place at the 6<sup>th</sup> Congress in Sydney, which was under the chairmanship of R.Y. Norton, who had been ASO president at the time of the first Congress. Thus completed a full circle of venues for the ASO Congresses. Comprehensive minutes were kept of all the meetings of the Congress organisers to be included in the Congress record. (The 'Red Book' was actually green). Sir Herman Black, Chancellor of the University of Sydney, and a very well known commentator on current affairs, agreed to give the Stanley Wilkinson Oration.

The Congress was a huge success, with a comprehensive lecture programme and excellent silent clinics. The closing dinner was called the 'Changeover Dinner' for the first time. The Congress concluded with an opportunity to hear Dame Joan Sutherland sing at the newly opened Opera House. The author vividly remembers that gala occasion.

Moffatt and Norton were made Honorary Life Members of the Society and Alex Roche was confirmed as a Federal Honorary Member. John Reading had been looking for further ways to recognise Honorary Life members.<sup>59</sup> A medallion was his choice.<sup>60</sup> Honorary Life Membership medallions were presented to Sir Kenneth Adamson, Dr P.R. Begg, Dr A. Thornton Taylor and Dr R.Y. Norton. The new President R.F.H. (Bob) Rickleman subsequently presented, at a dinner party at his home, medallions to J.B. Moffatt, B.L. Rosenstengal and V.P. Webb, all from Brisbane, who were not present at that meeting.

## The Queensland Executive 1974–7

After that meeting the Executive moved to Brisbane. In addition to Rickleman, D.E. Robertson was made Secretary and D.J. O'Donoghue, Treasurer. John Moffatt had been the Vice-President in the previous Executive (nominated by Bob Rickleman) and would normally have assumed the Presidency. However he chose not to stand, possibly due to his health. J.F.S. McGibbon and G.D. Kirkness were elected First and Second Vice-Presidents. For the first time a Conjoint Meeting of the new and retiring Councils was held to smooth the transition. This has since become a fixture in the calendar.

Rickleman felt that he had been left a real mess to clean up.<sup>61</sup> He decided to make the Economics Committee a standing committee of the ASO,<sup>62</sup> suggesting that Dick Abbott compose it as he saw fit but to include the Treasurer and Dennis McDonald as the Victorian Representative. They were charged with examining the possibility of a nation-wide fee schedule after completion of the fee survey.<sup>63</sup> At the next meeting,<sup>64</sup> the Orthodontic Services Committee (OSC) was formed.

## The 1977 Constitutional Changes

Subsequently, G.I. Brown<sup>65</sup> and R.H. Wallman<sup>66</sup> argued that as Norton's amendment did not have a substantiated three quarters majority, it should not even be included in the postal vote. Brown complained that Norton's late amendment would have negated the thrust of the motion about the membership requirements and undone all the work of the previous administration. Wallman also said he would be happy if the amendments to the Constitution were presented without Norton's last minute addition.

The postal vote was carried out promptly and the membership amendment, which included Norton's 11<sup>th</sup> hour addition, was defeated, while the other alterations, that is, the changes to Council and the Appointment of Trustees for the Foundation, passed comfortably.

So the Society found itself still in the embarrassing position of having its Policy on Specialisation totally at odds with its own Constitution. Specialisation was occupying the attention of the ADA, the College, the Registration Boards, to say nothing of a lot of aspiring orthodontists. To make matters worse, the Constitution was about to be rewritten to conform to the Act under which the Society was soon planned to become incorporated.

Raymond Miles, the Constitutional advisor for the previous Executive, had been required to operate almost on his own. He received only occasional direction from his Executive, whose meetings he was never asked to attend, even though he lived in the same city. This may well have contributed to the imbroglio. Rickleman, on the other hand, appointed Brian Crisp to review the Constitution.<sup>67</sup> He was helped by Basil Phillips and Ian Watson, the latter beginning to ascend the administrative ladder within Dentistry, and later also by R.H. Wallman. In the brief which the Executive sent to Crisp several opinions, garnered from a range of sources, were included to ensure Crisp's Committee was fully apprised of all the potential issues.

The new Committee sought advice from Miles, who began his response<sup>68</sup> “before you become too disappointed with this” and other than draw attention to a few of the current problems, was not able to provide much help. Miles had previously prepared a ‘Code of Ethics’ for the NSW Branch and added that he felt the time was overdue for one for the ASO. He was also against the concept of Provisional membership, as was Rickleman<sup>69</sup>.

Crisp prepared a detailed report for the Executive in June 1975<sup>70</sup>, in which he said that membership was the most important issue. There were problems, both because the Society’s Policy on Specialisation was not included within, and was also still at variance with, the Constitution. There was difficulty in assessing the acceptability of postgraduate qualifications and there was uncertainty about the starting date when the new rules would become applicable. Some applicants for membership had been accepted after courses lasting only one year and others had been rejected. There was an uneven application of the rules. He did suggest that there should be a cut-off date, which he suggested should be the date of the application for membership for those applicants somewhat in limbo. There had been suggestions<sup>71</sup> that difficulties could be solved by the Council exercising a degree of discretion in the application of the membership rules. He was against the Council having any such discretion in the matter, which he saw as the Council having to “interpret the Constitution”. Instead, he suggested that there should be a “right of appeal”, both to the Council and also to a General Meeting by any disaffected applicant.

Crisp appended to his report a summary of the legal opinion he had received, which was to the effect that the ASO’s Policy on Specialisation was not legally binding and that the Executive did currently hold discretionary powers when considering applications for Membership. This advice added a further complication: “Where discretionary decisions on policy are made by Council, these are not necessarily binding on subsequent Councils.” Crisp’s report included consideration of the entire Constitution, not just the membership issues. For instance, he thought that the Journal Editor should not be an ex-officio member of Council, feeling he already had enough to do. He suggested the Education Committee should continue oversight of postgraduate courses, using the Sydney course as a bench-mark (he was probably unaware of K.G. Godfrey’s 1968 pleas for help, but would have read his thought-provoking article in the 1972 AOJ) and that this would be particularly useful in the case of orthodontists migrating to Australia. He was happy to use the wording from the 1974 proposals for membership.

Unlike membership, Crisp saw specialisation more as a Registration Board issue, but felt that the Society could provide direction and a suitable definition. In forwarding Crisp’s first report to Council, Rickleman added much interpretive material of his own to assist in their consideration.<sup>72</sup> Council then prepared a ‘statement of advice’ for the general membership.<sup>73</sup> This was sent out the following month. Its suggestions for membership were unchanged from the 1974 suggestions other than to have provision for a ‘right of appeal’ added to it. In addition, the Branches were to acquire all pertinent details regarding applications (and local objections if any) and forward these to the Federal Executive for decision. The Council’s decision should be specified as to whether it was unanimous or simply a majority.

In circulating its 'statement of advice', the Council was seeking the reactions of the members before any changes were actually put to a vote. Many responses were received. Sir Kenneth Adamson was totally opposed to allowing disaffected applicants the right to take their cases to a General Meeting.<sup>74</sup> Richard Case reiterated the history of the development of the Specialisation policy confirming that it was not to be seen as part of the Constitution, but a platform for negotiation with other bodies, such as the Boards and the College. A form of intermediate membership was advocated (by Queensland) to allow for some rights, while fulfilling further requirements. This would replace Provisional membership, which was seen as "having served its usefulness".<sup>75</sup>

The following October (1975), Crisp produced an interim report (his second report), including all the views which had come back from the Branches and from individual members.<sup>76</sup> Ironically, his own state, South Australia, was a little late in providing its comment and an addendum was required. They were concerned that a Full Member, who may not satisfy the new rules, may inadvertently neglect to pay a subscription, thereby lose all rights and so be ineligible for Full membership on reapplication.

Rickleman again made many comments of his own, resulting in a supplement to Crisp's interim report. The interim report included that there should be no avenue of appeal to a General Meeting: only to an appeal committee; there was no reference to an approved institution (Freer reminded Council that it was really not the institution being approved, only the course being conducted,<sup>77</sup> a point Professor Martin had facetiously alluded to two years previously). The requirement for previous experience in general practice was again eliminated, or more probably, overlooked. It was no longer required that one member of the State Executive had to be an Associate, but Associate Members remained eligible.

The proposed appeal clause read as follows:

### *Right of appeal*

Notwithstanding the provisions of clause 5 (1) hereof the Council may resolve to adjourn any application for membership until it has received the report of the Appeal Committee. The Council may refer any application for membership to the Appeal Committee and an applicant for membership who is refused election by the Council, may within 28 days after notification of such refusal, request in writing that the Council refer his application to the Appeal Committee whereupon both the applicant and the Council shall have the right to each make a written submission to the Appeal Committee....

The Appeal Committee shall be comprised of the President of the Society (who shall be Chairman), the chairman of the Orthodontic Education Committee, and three other Full Members of the Society who shall be appointed by Council and who shall hold office until the next General Meeting of the Society.

At the end of the next month, the Council wrote again to Crisp<sup>78</sup> and returned his 'interim report' covered in annotations. This was yet again discussed generally and

a further draft Constitution was prepared and printed.<sup>79</sup> This finally addressed the quorum issue, so that all meetings required a quorum of thirty. Some members, particularly from the West, had considered increasing it further. It was no more than three days later when Rickleman wrote back to Crisp<sup>80</sup> complimenting him that the draft was “very well put together”, yet adding another four pages of further suggestions, after opinions received from his own legal advisor. Much of Rickleman’s comment related to the different types of Honorary Members. He felt Honorary Members, nominated by States, should not have voting rights at meetings. In fact, now that there was a category of Retired Member, he felt that having two types of Honorary Members was rather “cumbersome”. His view was that there would be less confusion if there were only one category.<sup>81</sup> Most of the many suggestions, which Rickleman apologised for not picking up, were of a minor nature. Many thought the document was becoming too long-winded. Rickleman said he was a bit apprehensive about attending a forthcoming clinical day of the Victorian Branch, where he expected “all the bush lawyers are apparently going to get stuck into me”.

Crisp and his team settled down and yet another new draft was prepared. Most of Rickleman’s alterations had been accepted. This draft had eliminated reference to the non-existent ‘Code of Ethics’ which Crisp had wanted to retain, feeling, correctly as it happened, that one was not to be long in coming. Time spent in general practice was still missing. And there was no reference to any sort of regular meeting to occur between Congresses. Crisp, at that point, agreed that Honorary members should not have voting rights.

This altered draft was finally<sup>82</sup> presented to members for a vote. The new document had to be accepted in its entirety, as the changes were so comprehensive. The Membership rules were no longer in question, but this Constitution allowed Honorary Life Members, as well as state nominated Honorary Members, no voting rights at all. In fact the explanatory notes, which accompanied the document and ballot paper on this point, were contradictory, in that in one clause (4), it is explained that Honorary Members had no voting rights whereas in another (11) the explanation incorrectly said that “it was felt that these members should have this right”.

A. Thornton Taylor wrote<sup>83</sup> to the Secretary saying that, while he felt he could not vote against any document the Council presented, he could not vote to disenfranchise himself. Therefore he must abstain. The Council acknowledged the error and apologised to its HLM’s. The reason for this error had to do with the need to define the rights of Honorary Members and the desire to include both levels of Honorary member together in the document. In preparation for this History, Rickleman<sup>84</sup> said that “the truth is that the printer left a whole section out and we were all so heartily sick of the damned thing that we posted it out without a thorough proof-read. My fault ... all hell had broken loose”. To err is human!

Less than two weeks later, the returning officer who was the Queensland ADA President, reported that the new Constitution had been supported overwhelmingly, sixty seven to eight.<sup>85</sup> And so it became the law. The new document was

circulated to Boards, Universities, the ADA, the College and the overseas training establishments, which had been corresponded with previously. Within days, seven typographical errors had been noticed and shortly thereafter, the omission of the requirement to spend a certain amount of time in general practice. Crisp did not think it wise to attempt to alter the Constitution yet again, just for that matter. He thought the Executive would be quite right in applying that requirement, as the majority of members had accepted this four years previously in the Specialisation Policy. It could be included as part a description of an acceptable course, to be included in a planned handbook.<sup>86</sup>

## Incorporation

The next consideration was the matter of Incorporation, which had been recommended by the ADA, who had just accomplished it and also by the ASO's legal advisors in South Australia<sup>87</sup> and the President's legal consultant in Queensland.<sup>88</sup> John Reading had suggested this as long ago as 1971.<sup>89</sup> V.C. West was at this time studying law and voiced some concerns.<sup>90</sup> He had received an opinion that recent changes to the 'Trade Practices Act' might possibly change the ground rules. The matter had been deferred during the major changes just completed. The ASO solicitor, Christopher Winnell, subsequently advised that no change had occurred which might alter his advice. How much better had Incorporation been included in the process just completed?

The Executive decided to gain approval from members for the Society's Incorporation at the same time as proceeding with other alterations. A postal vote, divided into three ballots, was carried out in September 1976. This included rights for Honorary Life Members, the correction of some seven typographical errors and the requirement to have at least one year as general practice experience before being eligible for Full or Provisional membership.

In his very clear explanatory letter accompanying the ballot, Rickleman outlined the advantages of Incorporation. In general terms, at that time, they were that:

1. The Incorporation of the Association creates a separate legal personality with perpetual succession capable of acting through its directors or Federal Council as a separate legal entity.
2. The incorporated Association can enter into contracts in its own name and in the same manner as an individual or a normal trading company. This ability to enter into contracts in its own right rather than the Council or Executive contracting as an agent for all on behalf of all members is the greatest advantage particularly as the question of proving to the authority, expressed or implied, of the Executive or Council to so contract, is obviated.
3. The incorporated Association can enforce legal obligations without the necessity of having a representative appointed by the court to sue on behalf of the Association.
4. The incorporated Association can hold land or property (leasehold or freehold) in its own name, which would obviate the necessity of

the appointment of trustees for the purpose and the drawing up of appropriate trust deeds.

5. The liability of members in the event of winding up the Association is limited by guarantee, in our case, to the annual subscription.

The disadvantages were that:

1. A public officer resident in the ACT (or in any other State where incorporation takes place) must be appointed. This is usually a solicitor who, for a nominal sum, lists the name of the Association outside his offices.
2. A copy of the balance sheet and audited accounts may have to be submitted to the Registrar of Companies through the Public Officer each year but exemption can sometimes be sought.
3. Any changes in the Association's rules must be advised to the Registrar.
4. Costs of incorporation will have to be met. The Council did not anticipate these to amount to a major consideration.

Rickleman apologised to all the Honorary Life Members "by virtue of our failing to pick up the printer's error", that they would not be able to take part in this vote. However he has to be forgiven, realising the extent and density of the detail which confronted both the Executive and Crisp and his Committee. All this was put to a postal vote in September 1976. Again, this passed overwhelmingly; again with about 80 members voting.

Further legal advice was that altering the Constitution to include Incorporation, provided that it had been approved by the membership, did not of itself require a further ballot.<sup>91</sup> This must have been greeted with a general sigh of relief. However the lawyers did point out a few consequences of Incorporation. Provision for an Annual General Meeting was required in the Constitution and the phrase "Congress General Meeting" did not suffice. Further, control of the Society's assets was improperly handled by the existing document.<sup>92</sup>

The Constitutional Committee reconvened in March 1977 and in its report, optimistically hoped they would not have to meet again, after the upcoming Congress. Councillors studied the documents and suggested further alterations, many of which were of a technical and/or minor nature. Crisp compiled all these and wanted to add some new provisions. These included that each State Executive should include a Federal Councillor and inexplicably that 1<sup>st</sup> and 2<sup>nd</sup> Vice-Presidents be referred to as 'Senior' and 'Junior'.

There was considerable debate as to the ethics of slipping in the proposed change to the Branch Councils. Legal opinion was in favour<sup>93</sup> but Crisp's Committee was not. Other typographical alterations were not argued. The Executive originally decided against the inclusion<sup>94</sup> but the full Council was in favour and so eventually, the suggested change to the composition of the Branch Councils was included.<sup>95</sup> It was decided to go ahead and publish the Constitution in that form. The document had now grown to 20 foolscap pages. The newly printed Constitution was tabled at the Council Meeting just before the General Meeting.<sup>96</sup>

The advice was that the Incorporation could occur in any jurisdiction and the suggestion was that it should occur in the State with the most members, that is, NSW. To avoid any suggestion of interstate favour, the ACT was selected. At that time, the ACT did not charge stamp duty on transactions and a cottage industry had developed in Canberra and many entities became incorporated there. The ADA had done so and the same firm of solicitors was asked by Crisp to proceed. This was promptly begun, although it took until well into 1977 before it was complete. This process required a Public Officer to sign official documents. Usually, for a fee, someone from a legal firm was employed, but in this case, P.A. Hiddins, a Canberra orthodontist was asked to take the responsibility.<sup>97</sup> The Executive instructed him to come to terms with the requirements of his new role and to acquire a copy of the Associations Incorporation Ordinance of the ACT. A local orthodontist is still utilised, as Public Officer.

Fortunately the Society's archives, available to the author, contain a comprehensive file of the accomplishment of this profound Constitutional change. Rivalled only by the Society's response to the growth of third party programs, (in which Rickleman was again a major player) it represents the greatest piece of administrative work ever carried out by the Society's office bearers. It could only have been accomplished by an extraordinary mutual respect of the contributors. Both Rickleman and his friend and colleague, solicitor George Deeb, worked extraordinarily hard. Deeb's fees were nominal. Reminiscing about this with Milton Sims in 2001, a transcript of which is also in the ASO archives, Crisp was to say: "this was a job I could do in the background and at my leisure.... And I got a lot of pleasure out of doing it. It was one episode in my life that I thoroughly enjoyed".

During this lengthy procedure, which lasted the entire 33 months of his Presidency, other matters also progressed. Some to operate in tandem with the developing Constitution, others of a different nature. R.E. Gates was asked to prepare another directory for publication and for this publication, to include a complete list of all office bearers and committees. The Education Committee (GEC) was reconvened, revamped really. It was now called the Orthodontic Education Committee (OEC). Now it was to be headed by a senior academic, initially Gordon Kirkness, with the Chair to rotate between the states. It also included a Councillor from each State as well as all the Department heads. Notable by his absence from the report to the 1977 General Meeting was K.G. Godfrey. He had by then been restored to Full membership of the ASO.<sup>98</sup> Kirkness went on study leave in December 1976. His place was taken by T.J. Freer. The Committee firstly collected information on all the courses operating in Australia



Brian Crisp  
Painting by Ivor Hele

and New Zealand. This was a progression on W.J. Mackie's consultation with the ASO Branch Secretaries during the term of the previous Executive. Later there was a distribution of another questionnaire to the orthodontic departments of the various Australasian schools. This was necessitated by confusion between scheduled (rostered) and unscheduled hours in some replies to the original questionnaire and serves to indicate the detail thought to be necessary.

Also they were charged with evaluating foreign orthodontic programmes, to determine if they could fulfil the ASO's requirements. This would simplify the handling of applications from overseas-trained orthodontists. The OEC was to provide guidelines to Council on the academic requirements, contingent on the constitutional changes for Membership. This was an advisory function. The final arbitration on any contested application would be made by the newly formed Appeal Committee. This was virtually an impossible job, but having regard to the fact that the majority of contested applications were from the UK where much information had already been collected, the task was a little more reasonable. Thus began the monitoring of overseas graduates by a Committee originally set up to foster graduate education in Orthodontics in Australia. This would create a potential conflict of interest, although the assembled group was perhaps best qualified for the task. This Committee became very powerful.

During this three-year period, there was no real progression in specialist recognition by the Dental Registration Boards. The Victorian Board informed the ASO that specialist recognition was still not possible under their Act as it was written. They did say that some form of recognition was under consideration, but that it could not accept the ASO Policy on Specialisation, something they appear not to have done when first advised. No progress was made in South Australia. The subsequent Executive, although realising that they could not dictate their wishes, contacted all the Registration Boards, recommending that they follow ASO policy concerning the Registration of Orthodontists.<sup>99</sup>

The Rickleman Executive proved to be highly efficient and set a benchmark for other Executives to follow. He reported that he had visited the Western Australian Branch and had talks with the two Vice-Presidents, as well as the general membership.<sup>100</sup> He recommended that it should be policy that Presidents should visit the Branch where the next Executive resided. Like his predecessor, he visited all States but South Australia (where an intended mid-term full Council meeting was cancelled for lack of pressing business). Meetings of the Executive were held every two weeks from August 1976.<sup>101</sup> Communication was maintained at a high level: three newsletters were published as well as a very clear and full explanation accompanying each of the long series of Constitutional changes.

The 'Notice of Meeting' for the 1977 General Meeting began to take the form into which it has since grown, in that each Committee provided a succinct report of its activities since the last General Meeting. In addition to the Executive reports (Federal Council and President's report and the Treasurer's report), there were eight reports from Committees. These were the Journal and Foundation reports, which had been a feature of previous notices and added to these were reports from the Committees for the Constitution, Congress, Orthodontic Education,

Economics, Orthodontic Services and Membership Directory. This illustrates how the operations of the Society had responded both to its increased workload and its widening range of functions. The Foundation's accounts were also included as integral to the Society's financial statements.

The Treasurer, D.J. O'Donoghue, in making his report, drew members' attention to the fact that the President had provided, without charge to the Society, "a couple of rooms adjacent to his surgery for use as an ASO office which had proved useful for storage of the Society's records and particularly as a Congress organisation office". To this he had affixed a sign and so for the first time the Society had, if only temporarily, a real home.

The Society was in a very sound financial position, so much so, that Council decided to make a donation to the Foundation of \$10,000 feeling that their promised annual contribution of \$500 was inadequate. For its part the Foundation was asked to clarify how the Research Awards were to be decided.

The Begg Light Wire Study Group (BLWSG) had wanted a lecturer at each Congress co-sponsored by that Group and the ASO.<sup>102</sup> This was brought up at a Council Meeting just before Congress. There was sufficient support for this to have been passed at a full meeting of the Society but the move was pre-empted by a motion from the South Australian Branch that there should be a National Research award in Orthodontics, set up by the ASO. By this time motions originating from Branches rather than individuals were acceptable. When this changed from the 1962 point of view is unclear. This motion had resulted from a request from BLWSG members in South Australia, and had been brought forward by the President of the South Australian Branch, G.J. Moore, to recognise Dr Begg's contribution to Australian Orthodontics and to the Society. R.H. Wallman also claimed to have conceived the idea.<sup>103</sup> The meeting resolved that a National award be set up with the intention of fostering research in Orthodontics. A Committee was formed comprising the President of the Society, President of the Congress Committee, and the Chairs of the Foundation and the BLWSG. At the following Council meeting,<sup>104</sup> it was decided that the award was to be known as the 'Australian Society of Orthodontists P. Raymond Begg Research Award' and that the ASO would add \$5000 to the \$500 contributed by the BLWSG and that donations be sought to increase this to a target of \$8000. The NSW Branch also contributed \$1000 to the fund.<sup>105</sup>

It was decided that:

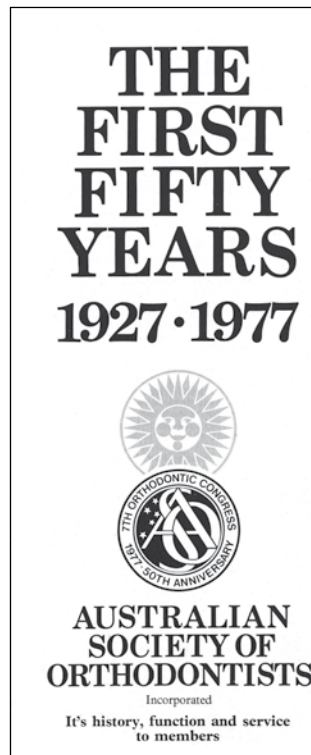
The manner in which the applications shall be made and general conditions of entry shall be left to the Foundation Trustees and the successful candidate will be expected to read a paper describing 'his research and findings' at the next ASO congress after the Award is announced.

This became known simply as the 'Begg Award', still administered by the Foundation and remains the highest accolade the Society can bestow.

The recent changes in the membership rules required an Appeal Committee to be elected at each General Meeting. This was to include the President and the Chair of the Orthodontic Education Committee as ex-officio members. Mackie, Rickleman and Parker were elected as the additional members. The first Committee report

mentioned 11 cases under review.<sup>106</sup> Over the next few years very little in the way of argument against its decisions occurred. Membership had doubled in the last 15 years and was reported as 248 with Full Members now outnumbering Associates by two to one. Abbott suggested a further survey (this time not including income). He thought, and the meeting concurred, that it should be yearly in the light of the entry of the medical insurance funds into the provision of dental benefits.

Compared with the previous several General Meetings, few issues evoked high emotion. A tribute to the Executive. Ninety members attended. Needless to say, the Congress itself, held again on the Gold Coast, was a huge success. It also made a substantial profit. This Congress had been delayed for and celebrated the 50<sup>th</sup> Anniversary of the Founding of the Society. To mark this occasion, J.B. Moffatt was asked to prepare a brochure called “The First Fifty Years”. This had the dual role of commemorating the occasion and also to provide information about the Society and its operations.<sup>107</sup> All the uncertainty surrounding the multiplicity of recent changes had created in the minds of intending orthodontists a considerable unease, even a lack of confidence. This little document, which had been originally designed solely for the commemorative purpose, was also to return that confidence. Professor Peter Barnard was at the same time gathering information for a publication on a general outline of Dentistry in Australia. He requested information on the ASO’s past history and policies. Moffatt’s brochure was sent to him.<sup>108</sup> Moffatt’s other notion, of a Past President’s badge, was shelved, the initial feeling being that at \$50 for each badge, it was too expensive. Ian Watson was later to bring this to fruition.



## John McGibbon

T.Y.W. Lam and P.F.B. Dignam were elected as Secretary and Treasurer to assist McGibbon. Both worked at the Perth Dental Hospital. Together with Kirkness, a full-time academic, this was an Executive with very little experience in private practice. The Conjoint Meeting of the old and new Councils was held immediately after the General Meeting. The first meeting of the new Council was held at that Congress. Darryle Bowden followed that example two terms later. Studying the minutes it seems to have been very productive. Realising that there was a possibility that Dental Boards may continue to register orthodontists not satisfying the new requirements, even though “we could not dictate Dental Boards’ policies”, the meeting decided to write to all Dental Boards advising the new changes to the requirements.

They advanced the arrangements for the Begg Award. Council resolved to prepare a generic 'Society Policy' similar to the ADA Policy Document. Although during this period most of the ASO Policies came into being, such an overall Policy was not progressed. What an over-arching policy statement document separate from the Society's stated objectives, could accomplish, seems something of a mystery. Instead of forming a separate Practice Administration Committee, Council decided to set up a combined Economics and Practice Administration Committee. All Convenors of the Standing Committees were re-appointed.

The new Executive began work immediately in McGibbon's customarily efficient and organised style. A meeting was held almost as soon as the Executive returned home, which dealt with the mechanical issues of moving, including the setting up of a new ASO office with signage, this time both external and internal, and all the paraphernalia of running a business. The Certificate of Incorporation arrived shortly thereafter. Subsequently, to be precise, the Society ought to be referred to as the 'Australian Society of Orthodontists Incorporated'. This History has not conformed to that practice, preferring to think of the Society as a living, not simply legalistic being.

Their brief from the recent General Meeting included:

Attempting to lessen the three year interval between meetings.

To examine the liability of the newly incorporated Society including indemnifying councillors and committee members and obtaining necessary insurance.

To create a committee to investigate the certification of archwires in accordance with the Australian Standard 1964.

To review the ADA's rules for affiliation.

Holding the next Congress in 1979 was made difficult by the fact that 2 May 1979 was the 150<sup>th</sup> anniversary of the arrival of Captain James Stirling on HMS *Parmelia* and the Founding of Western Australia. Much of the accommodation was thought already to be booked out. Indeed, lengthy celebrations must have been planned. So the Executive had to settle for the longer interval. Accordingly, the dates for the next Congress were set down for March 1980. The decision was taken that, after the meeting in Adelaide at the end of the next Executive's term, meetings would be held no less than every two years. Perhaps, had planning been commenced at the start of the previous term (as recommended by John Reading and as had occurred for the meeting just past), this situation would not have arisen.

G.D. Kirkness had been made second Vice-President in 1974 and would have expected to be Congress Chairman. He let it be known at the General Meeting, that he would like the position, but McGibbon assumed that role initially. Perhaps there was some ill-feeling between them. The first newsletter published by this Executive in September lists McGibbon as Congress Chairman and Kirkness as Scientific Director, which was a post for which he was well suited, being a full-time academic.

As the ASO and particularly the BLWSG maintained a serious interest in materials, an Orthodontic Archwire Standards Committee was formed. R.A. Miles was appointed Convenor. It included R.J. Masson and C.C. Twelftree and had two co-opted members from the Commonwealth Bureau of Dental Standards. One, P. Brockhurst, was still involved ten years later.

McGibbon had wanted to set out precise 'Terms of Reference' for the burgeoning list of standing committees that were developing, almost as ad hoc responses to the issues constantly confronting the Society. This was a process which was to take much longer than anticipated.

Mercifully, Constitutional activity died down. During Western Australia's entire term, the only two amendments made were to the benefits available to Honorary Life Members and a further addition allowing Council to make a change to the Constitution, by creating a specific By-Law and thereby make it immediately operational. Any such change was subject to ratification at a subsequent General Meeting. Passage of a By-Law required the agreement of three quarters of the Council, unlike a General Meeting, when only three quarters of those present were needed for a Constitutional change, provided always that a quorum was present. HLM's no longer had to pay either for ASO functions or for their membership.

Abbott's expanded Committee continued its fee and practice surveys. Over the years, information from this Committee was to prove invaluable to members, as was the work Abbott did with the continuing and multiplying issues surrounding third party providers. ADA President, W.D. Heffron, had agreed to the Society's wish to have someone acting as an official Liaison Officer with the ADA Council.<sup>109</sup> Although Abbott had been informally acting in this role, this position was made official in September of 1977, at the request of the Federal ASO President. B.D. Bowden had actually suggested two Liaison Officers, one to support the other, in dealings with the ADA. The main purpose of Abbott's first meeting was to stress dissatisfaction with the unilateral action of the ADA in their dealings with health funds, where matters concerning Orthodontics were discussed.

## Affiliation

ASO office bearers historically have been extraordinarily conscientious in fulfilling all obligations attached to their affiliation with the ADA. McGibbon must also have been a particularly strong supporter. One of the first things he did in office was to obtain copies of the Rules of Affiliation and the ADA Policy Document.<sup>110</sup> A meeting of the affiliated societies was proposed by the Secretary of the ADA.<sup>111</sup> Actually, two were held during this time. The first took place on 16 February 1978.<sup>112</sup> In preparation for this meeting, Rickleman suggested that McGibbon should contact all the other specialist societies "outlining the problems broadly with (a) third party programmes and (b) ADA affiliation, so that the ideas could be collected in the two areas for a joint submission".<sup>113</sup> The ADA had suggested a number of topics for discussion at the meeting including the one of major interest, namely rebates for specialist fees in third party programmes. They also requested comments on the principle that ADA membership is a mandatory requirement for membership of any affiliated Society. This is interesting, considering the situation which occurred

20 years later when third line forcing was outlawed. The ADA had decided to have Liaison Officers for all the Specialist Societies. They wanted all to be “Sydney-based because of ease of communication.”<sup>114</sup>

Council was particularly concerned at the proposed visit to Australia by Prof. Joseph Sim, a pedodontist from the US.<sup>115</sup> The ADA, as part of their Continuing Education Programme, had invited Sim in 1977. The ASO had only been informed just before the tour was to take place.<sup>116</sup> ASO members had been asked to provide help for his presentations.<sup>117</sup> Most branches refused. Victoria initially agreed reluctantly to comply with its affiliation obligations.<sup>70</sup> Even during this furore, President McGibbon was encouraging members to co-operate with the visit to honour the terms of the affiliation.<sup>118</sup> The tour was eventually cancelled, for which Heffron thanked Sim.<sup>119</sup> The ASO suggested that lectures on orthodontic subjects should be presented by orthodontists, not pedodontists and the ADA promised in future to consult the specialist body involved, when specialist material was to be presented. Nonetheless, Sim did visit the following year.<sup>120</sup> Despite this, Abbott was able to report that the relationship between the ASO and the Federal ADA had reached a point where it was highly unlikely that the ADA would take any action or issue statements involving Orthodontics, without consulting the Federal ASO President.

During this time, the Executive had a staff training manual prepared. It was designed to be adaptable to the particular approaches of each practice, to help in the never-ending problem of maintaining competent staff in a field where ‘on the job’ training was the only option. Also, at the suggestion of Barry Mollenhauer, an ‘Estate Details’ brochure, modelled on one prepared by the AAO, was also prepared. This issue, more likely to be thought the responsibility of practitioners’ financial advisors, had frequently become the profession’s concern when a member died ‘in harness’. A couple of cases occurred about this time, causing concerns for the ongoing care of the patients and the financial issues involved. This was a peculiarity of Orthodontics, where the treatment and any contract under which it was conducted, was for a long term. Interestingly, one of the first things McGibbon had done as Secretary<sup>121</sup> in 1961 was to write to Thornton Taylor and Norton asking them to “draft a memorandum relating to the estates of deceased orthodontists”. This issue had surfaced again in 1964 after the deaths of L. R.(Les) Mobbs and A.J. Cunliffe and the issues surrounding the winding up of their practices.<sup>122</sup> And was to do so again.

Even though there continued to be discrepancies between the policies of the various Dental Registration Boards and that of the ASO, the OEC continued its work to support the new membership provisions of the Constitution. Correspondence was conducted with several institutions in the UK and as well as the University of Otago. The Chair of the Committee was maintaining a liaison with the NZOS. The ASO was to continue to provide advice to the Dental Boards in an endeavour to bring about uniformity. It was to be a slow process, as the Boards had not only Orthodontics to consider and were in no way persuaded that any initiatives from other jurisdictions must be slavishly copied. A biennial meeting of the Chairs of the Dental Registration Boards began in the late sixties. Very frequently this

became little more than a forum for the exchange of information on the positions held, with no movement whatever towards uniformity.<sup>123</sup>

This period was dominated by the continuing negotiations with the ADA and third party providers on the one hand and by the death of the incumbent President on the other. John McGibbon died suddenly on 16 April 1978. Although the first portion of the WA term had been highly successful, this was tragically interrupted by the President's sudden death. In recognition of his enormous contribution, "the members of the Western Australian Branch agreed that John's memory be perpetuated in the form of a prize awarded annually to an undergraduate, for excellence in some form of Orthodontics ... to be known as the "J.F.S. McGibbon Award".<sup>124</sup>

McGibbon's death was followed by a total change in the Executive. Lloyd Trotter was the only nominee for President and Council ratified his appointment.<sup>125</sup> Although he had been President of the Western Australian Branch of the ADA, Trotter, in accepting the position, admitted that "he was somewhat unfamiliar with the current affairs and problems of the Society but he was assured that with the assistance of the Council, he would be able to do his utmost to serve the Society". He also paid tribute to the late Federal President.

After some health issues, Lam who was on a leave of absence, resigned in February and was replaced by P.A. Heagney. Dignam also resigned as Treasurer in April, also because of ill health. His position was filled, in an acting capacity, by R.G. Cook, with the President assuming responsibility, as Cook was not yet a Full Member. Shortly after, he was elected to Full membership. All these new men worked in the same practice. Heagney and Cook were the men whom Kirkness had originally wanted on his Congress Committee. Certainly, Cook as Treasurer was an inspired appointment. He went on to become ASO President and was eventually made an Honorary Life Member of the Society. Contacted frequently for this History, his responses were uniformly both instantaneous and helpful.

The regular pattern of monthly Executive Meetings had been severally interrupted. The McGibbon Executive's last meeting was in April 1978. There was a special meeting of a new Executive, designed specifically to transfer the site of the Federal office to Trotter's rooms and also to recognise the late President's contribution to the Society.<sup>126</sup> This Executive met again in August 1978. At this meeting a Memorandum was discussed, which had been sent the previous month to all Convenors of Committees<sup>127</sup> "regarding the feasibility of submitting to Council their Terms of Reference and Responsibilities". Council met in September over two days but there are no records of further meetings for another ten months, by which time the Executive had been totally replaced. The regular process recommenced at that time.

The work of the Society was naturally interrupted, but the Committees continued with their work. President Trotter, following the example of his predecessors, Reading and Rickleman, succeeded in visiting each Branch during his short time in office. During the next Executive, G.I. Brown reported on his visits to the Branches as being of "great benefit in keeping members informed and assisted in keeping

the Society united". He recommended two visits between each Congress and that each State Branch partially fund the visits. He thought they could coincide with the Branch's Clinical Days. Council thought one visit might suffice.<sup>128</sup>

At that Council meeting in September 1978, as well as discussing the date for the next Orthodontic Congress in Adelaide, it was agreed that it was desirable to hold General Meetings of the Society more frequently than once every two or three years. This would conform with the Associations Incorporation Ordinance under which the Society had become incorporated. It was resolved that the ASO Foundation be consulted to ascertain if it would be feasible to schedule a General Meeting with the Foundation lectures in 1981.

It was also resolved, at this late stage, that Kirkness (the only nominee) be appointed Chairman of the 8<sup>th</sup> Australian Orthodontic Congress Organising Committee. The composition of that Committee was submitted for approval at that meeting.<sup>129</sup> In this report, he said that the Committee: "has continued along the same lines commenced under John McGibbon and none of the decisions previously made have been rescinded. It should be made clear that this Committee considers that it is charged with organising the 1980 Congress in Perth on behalf of the ASO and therefore feels autonomous to do that without interference or handicap.". He went on to indicate that six overseas lecturers had been invited and he felt that the cost of between \$6,000–\$6,500 would be money well spent and that this is preferable to making a large profit. Council was not so sure. Innovations would include a religious service on the Sunday evening.

Kirkness, possibly in response to the July 1978 request regarding 'Terms of Reference', had written to Council, enclosing what he proposed as the Terms of Reference and Responsibilities of the Congress Organising Committee. In the covering letter to the Secretary<sup>130</sup>, Kirkness said:

I attach a copy of how I see the duties and responsibilities of the Congress Committee. I trust that the Council will find these ideas acceptable. It has just occurred to me that I have never received formal recognition from Council as Chairman of the Congress Committee. If this is correct, I should be pleased if you would seek approval for the appointment from the Council.

His paper was entitled: 'ASO 8<sup>th</sup> Congress Committee: Terms of reference and responsibilities'.

### *Preamble*

The Congress Committee is unique in that it is made up of members from one branch only and no member continues on this committee after the Congress is over. This means that this Committee invariably exhibits a parochial nature rather than national characteristics. Inevitable as this may be, it is not considered to be entirely detrimental as such things as state pride, isolation and friendly rivalry might well contribute to raising the standards of successive Congresses.

### *Terms of Reference*

The Congress Committee, appointed by and acting on behalf of the ASO is responsible for planning, organising and running of the National Orthodontic Congress that is held in the third year following the previous Congress....

### *Responsibilities*

Responsibility must confer the right of decision-making and therefore the Congress Committee must become an autonomous instrumentality, within the framework of the ASO Constitution. The Convener and Committee accept the responsibility for mounting a satisfactory Congress and ultimately this Committee is responsible to the Society as a whole.

Kirkness went on to outline the various aspects of the Congress organisation. He concluded: "I trust that the Council will regard them as sufficiently comprehensive to form the basis of a delineation of accountability."

Such comprehensive attempts to define a working relationship between the Council and its Committees had never previously been made. Not surprisingly, Council disagreed with the thrust of Kirkness's heavy-handed suggestions. They felt that the Committee should be responsible to Council for all the proposed activities of the Congress. Accordingly, that degree of autonomy could not be granted.<sup>131</sup> Therefore, it was resolved at that meeting that all Committees of the Society shall, in accordance with the Constitution, be appointed by the Federal Council and shall be responsible to the Council for their delegated activities and that these Committees should make regular reports of their progress. It probably cannot be concluded that this established, beyond all doubt, the ground rules. More realistically, it simply demonstrated the difficulty existing within the organisation, as to its overall management.

There was particular concern over the cost of inviting six overseas lecturers to that Congress. In November 1979, the Congress Committee held what it reported as its 22<sup>nd</sup> meeting, chaired by Kirkness. There was no lack of planning. The Congress, in the end, failed to attract a sufficiently large number of delegates. They had budgeted on 150 delegates, including 110 with partners, and in the end only 113 delegates attended. Higher than budgeted costs made up at least half the deficit, but the treasurer R.G. Cook was unapologetic about maintaining a high standard of presentation, even when the higher than budgeted costs became obvious. To have dropped standards, he felt, would have caused repercussions into the future. The main problem was probably distance. The Congress made a substantial loss.

Resulting from the death of an incumbent President, the Society had to consider its approach in the event of death or resignation of its office bearers, surprisingly something that had not occurred previously (nor with one exception, since). There were several suggestions. Two were considered carefully. One was to have three Vice-Presidents. Another was that instead of a Treasurer, there would be a position of Deputy President/Treasurer who could become President in the event of death or resignation.<sup>132</sup> The short term answer took the form of a By-Law which confirmed that Council had, and always had had, the right to appoint members to fill vacant

positions and that their terms would conclude at the same time as the office bearer they were replacing. This was after all what had just taken place when the new President had been appointed.

At this meeting a suggestion was made, by A.J. Armitage from Victoria, of having the Executive based in the place where the next but one Congress was to be held. The reasoning behind this suggestion was a desire to share the workload. The situation pertaining at that time meant the Executive would always be involved in the organisation of Congress, whereas their normal duties were quite onerous enough. Other advantages were seen as the ability of Council members to gain experience. This would also have helped had an office bearer died in office. This idea failed to convince the membership. The current composition of the Council is very similar to that which Armitage had in mind.

At the General Meeting in 1980, 55 Full Members were in attendance. Guidelines for the Begg Award were tabled and the retiring Chair of the Foundation said that recommendations for the administration of the Award would be forwarded to Council. The Appeal Committee had been operating, apparently successfully, for three years. Eleven appeals were lodged during that term. Three had been approved on credentials and another two on presentation of cases. It had been decided that all intra-committee correspondence be kept separately and only correspondence between the Appeal Committee and the Executive be minuted.<sup>133</sup> It was decided to destroy all correspondence related to membership applications which had been successfully passed by the Appeal Committee or by Council.

Milton Sims wished to know the reasoning behind the destroying of documents and there was also the question of the legality of such an act. The President explained that, whereas all members had the right and duty to object to applications under certain circumstances, for this to remain on file would be a disincentive to make such objections. In future, these may be able to be seen by the person involved. It was finally decided "that all correspondence re membership, finalised in favour of the applicant by the Council and the Appeal Committee, be destroyed at the end of that term of office and that only the original application for membership card be retained". This was to be subject to legal opinion not being to the contrary. The Committee suggested that those with appeals pending should be encouraged to take up Associate membership.<sup>134</sup>

Current membership was five Honorary Life Members, and one Federal Honorary Member, 144 Full Members, 32 Provisional Members, 86 Associate Members, 20 Student Members, 27 Corresponding Members: a total of 315.

A By-Law was added to the Constitution further defining the rights of Honorary Life Members. It read:

### *Honorary Life Members*

Those persons so elected in terms of clause 4(H) of the Constitution

1. Honorary Life Members shall not pay subscriptions.
2. Honorary Life Members shall receive a copy of each issue of the Australian Orthodontic Journal, the annual report and balance sheet, newsletters and such other documents as the Federal executive may from time to time determine.

3. Honorary Life Members shall be entitled to attend Congresses of the Society and shall not be required to pay an enrolment fee.
4. A register of Honorary Life Members shall be kept.
5. Honorary Life Members shall rank in order of precedence immediately after Federal Councilors, unless otherwise entitled, for formal Society functions. Invitations to such functions shall be complimentary and include spouse wherever applicable.

The meeting decided to adopt the Orthodontic Services Committee's (OSC) report to ASO Council on orthodontic treatment for those with cleft lip and/or palate. And it was resolved that this should become the official ASO policy on that matter. It was also suggested that the incoming Council give consideration to producing an ASO 'Code of Ethics' especially with respect to information that might be fed into databanks. Why the use of information should be singled out from all other ethical issues is uncertain. Up to this point, although reference had been made to an ASO Code, none existed. That of the ADA was thought to suffice.

During the election of office bearers G.I. Brown was made President and B.D. Bowden First Vice-President. For the position of Second Vice-President, there were, for the first time, two nominations; G.R. Dickinson, nominated by W.E. Chalmers and E.C. Crawford and Barry Mollenhauer, nominated by R.A. Oxley and Rickleman. Rickleman was not a Victorian. Mollenhauer, as Victorian Branch President, asked for and was granted permission to speak. He advised that the Victorian Branch, as was customary practice, held "informal elections for President and Vice-President and Bowden and Dickinson were the first two names, in that order". This second nomination required that a secret ballot was held and Mollenhauer, probably because he was so well known through his involvement with the BLWSG, was elected. Victoria was the State which had the most orthodontists practicing the Edgewise technique and it may have been a Begg versus Edgewise issue. This is the only time in the Society's history that a Council position has been contested at the election. Doubtless, there have been issues within the Branches during the selection process for Executive positions. By and large, nominations have been obvious, based on past service for the Society and the willingness of people to throw their hats into the ring. Conflicts were not recorded, so evidence will be mostly hearsay. There clearly had been differences during the time of the Western Australia Executive.

G.I. Brown, as Secretary on the previous rotation, was the obvious choice for President. He wanted Sven Kuusk to be his Secretary.<sup>135</sup> This may not have been accepted by the majority of members from South Australia, more allied with the Begg philosophy, but was supported by Wallman, who as Vice-President in the previous Executive, would have been Congress Chair had he been able to fill that position. Wallman was impressed with Kuusk's military service (he was a Colonel in the Army Reserve, having achieved that rank independent of his earlier service in the Dental Corps.) Kuusk's excellent organisational skills were a counterbalance to the President's more laid-back approach. Kuusk, who as mentioned elsewhere, did in effect two Master's courses, was not accepted as a Provisional Member until mid-1977<sup>136</sup> and so there may have been a case against his appointment

as Secretary. He became a Full Member in January 1980, two months before his appointment.

The retiring Executive's recommendations to the incoming Council were:

- That applicants awaiting the outcome of an appeal be offered Associate membership, at the discretion of Council.
- That as a result of the previously unforeseen possibility of contested elections for Council positions, a By-Law be produced covering the type of ballot to be held at General Meetings for the election of office bearers.
- To proceed with the affiliation of the BLWSG with the ASO.
- That the incoming Executive budget to employ a part-time clerical assistant to the Executive and the Congress Committee.
- That future Congresses may be run by a professional congress organiser.

R.Y. Norton recommended that once all current documents of policy were completed, all such Policy Statements should be compiled into one booklet for the convenience of members. The next Executive had 350 copies of the ASO Policy Statements printed.<sup>137</sup>

And so ended an important decade, which put into practice many of the plans laid down the decade before. It would be difficult to prioritise the successes but high on the list must be the establishment of a graduate orthodontic education programme at all Universities. It saw the confirmation of the education qualifications to be an orthodontist. There now existed a functional Constitution, which ensured proper requirements for membership with an example for all Dental Boards to consider, as specialist registration (or at least recognition) became the general rule. There was a regular pattern a meetings, Federal and State. There was an operating committee structure, through which the Society still functions to pursue the aims of the Society and a vast corporate knowledge to tackle the issues which confronted it. Those who had been the Society's mentors in the early days were no longer active, but their ideals were ever-present. An air of confidence permeated the still small group.

## Endnotes

1. See Chapter on the College
2. Minutes Executive Meeting 3/1973
3. Vol3 No1
4. Minutes Executive Meeting 2/1969
5. Minutes Executive Meeting 7/1969
6. John Reading passed away June 2009
7. Minutes Council Meeting 4/1972
8. Minutes Council Meeting 7/1972
9. Minutes Executive Meeting 3/1973
10. 1956,1959,1961 and others
11. General Meeting 1974
12. Minutes Executive Meeting 11/1971
13. 19/11/1971
14. Minutes Council Meeting 8/1971
15. Notice of Overseas Meeting AOJ Vol 2 No 7 p317
16. Minutes Council Meeting 6/1973

17. Minutes Council Meeting 6/1973 and Minute Executive Meeting 10/1973
18. 18/7/1973
19. 11/10/1973
20. Personal Communication Susan London EOS 29/12/2008
21. Maori Weapons Website
22. McGibbon to Mackie 6/3/1973
23. AOJ Vol2 No.7
24. Minutes Executive Meeting 4/1974
25. Mackie to West 30/4/1974
26. McGibbon to Robertson 22/11/1974
27. AOJ Vol3 No3
28. 8/9/1972
29. 5/10/1972
30. From Mackie 10/1973
31. Noller, D.L. Registrar 7/12/1973
32. Dental Board of SA 7/2/1973
33. S. Kuusk 24/7/1973
34. 27/11/1975
35. 14/9/1972
36. 9/11/1972
37. Minutes Executive Meeting 11/1972
38. To Aldridge JE 5.3.1973
39. Aldrich, J.E. Secretary/Treasurer AAO 12/3/1973
40. Minutes Council Meeting 6/1973
41. 14/6/1973
42. Mackie to Noller Feb 1973 (exact date in question)
43. 31/8/1973
44. Mackie to Kuusk 23/10/1973
45. Minutes Executive Meeting 10 & 11/1973
46. Minutes Executive Meeting 11/1973
47. 11/1973
48. Minutes Executive Meeting 2/1974
49. Reading to Sutherland 1/3/1974
50. Minutes Council Meeting 4/1972
51. ADA Council Meeting 26-7/10/1973
52. ASO Newsletter 6/1973
53. ASO Newsletter 6/1973
54. Minutes Council Meeting 5/1974
55. Minutes Council Meeting 6/1972
56. Minute Executive Meeting 9/1972
57. Minutes Executive Meeting 10/1972
58. Minutes Executive Meeting 3/1973
59. Minutes Executive Meeting 6.1974
60. Minutes Executive Meeting 7 1974
61. Personal Communication 5/10/2008
62. Minutes Executive Meeting 8/1974
63. Minutes Executive Meeting 10/1974
64. 9/1974
65. 27/9/1974 to Rickleman
66. 30/9/1974 to Rickleman
67. 20/12/1974
68. 10/2/1975
69. To Crisp 12/2/1975
70. Preliminary Report to the Federal Executive ASO from the Constitution Committee undated
71. Reading J.F. and Norton R.Y., General Meeting 8/1974
72. Noted as posted 19/6/1975
73. ASO Directed to All Members Undated but stamped 17/7/1975
74. Adamson to Vic. Branch Secretary Jacobs, S. 13/8/1975
75. Rickleman 1/9/1975
76. Interim Report to Federal Executive 31/10/1975
77. 18/12/1975

78. 28/11/1975
79. 19/3/1976
80. 22/3/1976
81. 22/3/76
82. 9/4/1976
83. 6/5/1976
84. Personal Communication 5/10/2008
85. 28/4/1976
86. Crisp to Rickleman 28/5/1976
87. Winnell CC 13/8/1975
88. 27/7/1976
89. Executive Minutes 11/1971
90. To Crisp 4/8/1976
91. Rickleman Memo to Councillors 14/4/1977
92. Richard Refshauge to Rickleman 21/1/1977
93. Rickleman Memo to Councillors 14/4/1977
94. Executive minute 4/1977
95. Rickleman Memo to Councillors 27/4/1977
96. Minutes Council Meeting 5/1977
97. Rickleman 1/11/1976
98. Minutes Executive Meeting 5/1977
99. Minutes Council Meeting 6/1977
100. Minutes Executive Meeting 5/76
101. Minutes Executive Meeting 8/1976
102. Resolution December Meeting BLWSG reported by Hawkins Chair BLWSG to Rickleman 1/4/1977
103. Wallman to McGibbon 29/11/1977
104. 2/1978
105. Letter from Peel E 27/2/1979
106. For 1980 Gm
107. Executive 3/1976
108. Minutes Executive 2/1977
109. 26/8/1977
110. Executive Minutes 7/1977
111. Executive Minutes 7/1977
112. Minutes Council Meeting 9/1978
113. Rickleman to McGibbon 23/8/1977
114. Minutes Council Meeting 9/1978
115. Council Report to 1980 General Meeting
116. Robertson to Wall 24/2/1977
117. Minutes Executive Meeting 3/1977
118. Minutes Executive Meeting 2/1978
119. From Heffron 7/12/1977
120. Minutes Council Meeting 1978
121. 31/10/1961 A
122. Executive Minutes 8/1964
123. Author's recollections
124. Kirkness GD 11/19/1978
125. 6/1978
126. 6/6/1978
127. 14/7/1978
128. Minutes Council Meeting 7/1981
129. 29/8//1978
130. 16/9/1978
131. Minutes Council Meeting 9/1978
132. Minutes Council Meeting 9/1978
133. Minutes Executive Meeting 8/1977
134. Report to 1980 General Meeting
135. Kuusk S, Personal Communication 4/2009
136. Minutes Council Meeting 6/1977
137. Minutes Executive Meeting 1/1982

## Chapter 4

# The Eighties

The Treasurer's report for 1980 was decidedly bullish. \$15,500 had been donated to the Foundation and although there had been some rundown (\$2000), the coffers were far from empty just prior to receipt of annual subscriptions.<sup>1</sup> The Executive had reported at the start of their tenure that by careful pre-budgeting, they had been able to restrain the increase in subscriptions to 20 per cent. This brought them to \$18 or \$30 including the Journal subscription.<sup>2</sup> The Perth Congress however, made a significant loss and before long it was obvious that the Society was in financial trouble. In June 1981 the Treasurer's report states<sup>3</sup>: "Many possible solutions were explored. One possibility was for the Society to be declared bankrupt. As this was not considered acceptable, funds had to be raised...it was decided to raise a levy on members."

Later, the State Secretaries were advised: "the ASO Inc now lacks the funds to operate for the remainder of the year". The Executive resolved to raise an "assessment on all members to cover the loss" and asked all State Branches to collect the assessment and forward it within three months. This aroused the considerable ire of some members. What guarantee was there, that this would not happen for the next Congress? Why not employ a Congress organiser? Resistance to this idea was shown by many people, mainly from the Eastern states.

The Treasurer was moved to write a memorandum to his Councillors<sup>4</sup>: "In view of the furore over the \$50 assessment, mainly from NSW and Victoria, I will now send the full report and balance sheet of the 8<sup>th</sup> Congress". Some refused to pay, including people like N. J. Cox<sup>5,6</sup> who had held senior ASO positions in the past and felt that this was not a sound response to mismanagement. He suggested that the Foundation, which only recently had received substantial donations from the Society, could lend sufficient money to tide the Society over its embarrassment.<sup>7</sup> Associate membership suffered a significant reduction, 16 out of a total of 67 were lost to the Society. None-the-less, the financial crisis had been averted.

Compared with the situation a decade before, when everything was in the process of momentous change, the Society could be seen to be moving towards stability as it entered the eighties. Many of the original Orthodontists whose efforts had nurtured the Society had retired or passed away, leaving newer blood to take over. A meaningful interaction with the ADA involving the major issue of the time, third party programmes, had been established. The President was able to inform his Councillors “The ADA always informs the ASO Federal President of anything affecting the ASO prior to any meeting”.<sup>8</sup>

Uniformity in specialist recognition remained an issue. Slowly the gaps between the ASO’s requirements and those of the regulatory authorities were beginning to narrow. The Dental Boards were continuing to define their rules, but again at differing rates and in differing ways. Variations continued as much as for any other reason, because the Boards had to take into account all the different specialties, some of which were still very much in their infancy. At this stage only South Australia had no specialist recognition in its Act, but it was considering it. Both Victoria and NSW were prepared to recognise specialists under certain conditions, but not specifically to create a specialist register.

In Medicine, the definition of what could be considered a specialty became the province of a separate committee, which would examine submissions and decide what should be ranked as a separate specialty.<sup>9</sup> No similar organisation exists in Dentistry. Although the ADA maintained its own list, different jurisdictions recognised similar but not identical lists.

The South Australian Executive, under G.I. Brown, was aware that the rules concerning the requirement to have spent some time gaining experience in some form of general practice, were still somewhat out of kilter with the other bodies. The NSW Dental Board was planning an increase to four years from 1984.<sup>9</sup> All the others and the ADA had a two year requirement. The ASO required only one. It was proposed that this be increased to two at the next General Meeting in 1982. The State Branches had agreed to this concept. And so the requirement, which became known as the ‘2.2.2 rule’, came into being. This meant that there should be a period in general practice of at least two years before postgraduate studies could be commenced. These studies had to be at least of two years duration and at least two years of subsequent experience in specialist practice was required before Full membership was granted. The total elapsed time since the original graduation increased from three to six years. This was included in the ASO’s amended ‘Policy on Specialisation’. Like most rules, it was honored far more in the breach than in reality. The ASO continued until 1996 to require three years of specialist experience before a Provisional Member could be elevated to Full membership. That period of experience, after completion of Postgraduate studies, was then reduced to two.

The NSW Registration Board published its position on the requirements for specialisation,<sup>10</sup> thoughtfully giving over four years notice of the altered requirements. They had been demanding possession of a higher qualification since 1974. Now they added some requirements for clinical experience. In cases where the specialist qualification was achieved not as a result of completion of a full-time course (which would have to be of two years duration followed by

two years of clinical experience), the Board required this part-time qualification be supplemented by four years of clinical experience. At the end of each year, evidence of the clinical experience gained was to be presented to two Consultants, who had to be recognised specialists in that area.

The NSW Board then began to review these new rules over the next couple of years.<sup>11</sup> It maintained constant consultation with the ASO and other interested parties and in fact, on occasions, invited the Society to nominate a representative to act as a consultant in this matter.<sup>12</sup> The wording of their draft, which still did not require a two year full-time course in all cases, and the unfortunate coincidence of the probability that the Sydney MDS course would not be taking students in 1983, together with the support the Faculty was giving to the part-time MDS course, aroused suspicion within the NSW Branch. This is discussed in the chapter which deals with the development of the Orthodontic Boards. Graduates who had an MDS in Orthodontics obtained after the production of a treatise, without any structured learning, were required to have gained four years of specialist experience, one more than MDS candidates, before their specialty status could be recognised by the Board.

Later, a residency-type programme was commenced at the Westmead Dental Clinical School. Participants were also required to spend a further year in supervised practice before being eligible to registration as a specialist with the NSW Board. This did something to mollify the concern of the local orthodontists, if not the ASO federally. This problem arose in no other jurisdiction and is further discussed in the chapter on Graduate Education.

## Changes to Appeals

Other Constitutional matters requiring immediate attention from Council, related to the Appeal process, the composition of the Council and the governance of the Research Awards. As directed by the previous Executive, aspiring members under appeal were offered Associate membership. This would simplify administration and keep a connection with the Society.<sup>13</sup>

The Society's solicitor, Chris Winnall, was concerned that the Appeal Committee had limited, even deficient, powers to recommend Full or Provisional membership to those who did not fully meet the requirements of the Society.<sup>14</sup> The solicitors from Queensland, who had helped Rickleman, disagreed<sup>15</sup> but all operations of the Appeal Committee were stopped, until this could be corrected. The June 1981 newsletter advised members that the Appeal process was under review. This left a number of orthodontists, aspiring to Full membership, to linger a little longer in their limbo. The advice of the Constitutional Committee was to "abolish the Appeal Committee and to leave the decision with Council, but to empower the Education Committee with an advisory function, to be carried out whenever Council so requests".<sup>16</sup> This was not favoured at the time, or by the following Executive (Bowden)<sup>17</sup>, but that is what was to occur ten years later.

There had always been uncertainty about the mechanics both of granting membership and upgrading it. The 1980 General Meeting had resolved that a By-Law be added to the Constitution:

### Alterations of membership category.

All applications for alterations in membership category shall be directed to the Secretary of the appropriate State Branch except where a Provisional Member applies for Full membership in which case his application shall be directed to the Federal Executive in the first instance.

Provisional Members were reminded that it was their responsibility to contact the Federal Secretary to apply for Full membership when the time was right. This had been part of the 1977 Constitutional changes and was fully discussed around the time of the previous General Meeting in 1977. The procedure was: "As soon as the Federal Secretary realises that a Provisional Member is due for change to Full membership, he will inform the respective State Branch, in which case his application will be directed to the Federal Executive in the first instance."<sup>18</sup> Instances had occurred when members had not been informed that they had become Full Members. Many years previously, J. K. Hawkins had threatened to do something about the clumsy method of finally achieving Full membership.<sup>19</sup>

For Full or Provisional membership the process continued to be quite tortuous in that three quarters of all those entitled to vote (the Council) had to approve the application. This meant that the papers had to be seen by all Councillors. This round-robin sequence was very time consuming, so it was decided that a simple majority of Council was all that was required for Associate and Corresponding memberships.

As early as Rickleman's term, the rationale behind the maintenance of the category of Provisional Member was in question. ASO Treasurer D.J. O'Donoghue argued for its abolition.<sup>20</sup> This became something of a torrent but no recommendation reached a General Meeting. This took another 20 years. In fact the 2:2:2 rule had the effect of confirming the need to spend some time as a Provisional Member.

## Structure of the Council

A motion was presented to Council as follows: "The ASO Inc (South Australian Branch) recommends that Federal Council consider the possibility of the Second Vice-President (who was expected to become Congress Chair and not be on the Council) maintaining his position on Council, when the new Executive assumed office." Several of the Councillors were either confused or unhappy with this suggestion. This motion had a twofold purpose: firstly, continuity in the advent the death of a President and secondly, that the corporate knowledge within Council would be better preserved with the Second Vice-President maintaining a position on Council for two terms. As a result of this, at the General Meeting in 1982, amendments were successfully proposed to the composition of the Council, mandated in part by the recent experience. The introduction to the motion stated:

The aims of the amendments are:

1. To utilise the knowledge and experience of the Second Vice-President of the preceding Council.
2. To ensure co-ordination of the Congress Committee with the general running and interests of the Society.

3. To ensure continuity in the organisation of the Society's affairs.

Clause 6(1) was changed to read

the Council shall be comprised of a President, a Secretary and a Treasurer (who shall collectively constitute the Executive) and who reside in the State responsible for organising and hosting the next succeeding Orthodontic Congress, a first and second Vice-President, each of whom shall reside in the State appointed to organise the subsequent Orthodontic Congress (and who will except in exceptional circumstances be respectively the President and the Chairman of the Congress in the next succeeding Council), and one Councillor representing each of the remaining Branches.... Council members shall be elected at each Congress General Meeting of the Society, or may be appointed at any other time by a unanimous vote of the Council (nominations having been made by the appropriate Branches) in which case the appointment must be ratified by the Congress General Meeting of the Society and shall hold office until the conclusion of the next succeeding Orthodontic Congress. The immediate past President of the Society shall not be eligible to hold office in the newly elected Council.

The clause in parenthesis and underlined being added to ensure a place on the Council for the retiring Vice-President.

## Rights of Associate Members

Concern had been expressed at the composition of some State Branches, there being a preponderance of "other than Full Members. When sensitive issues were discussed, unfortunate decisions could be made".<sup>21</sup> The Secretary advised that Clause 13 (3) of the Constitution set out the voting rights of Full Members of the Society.

In summary, the interpretation was that all matters originating at the State Branch level can be voted upon by all Branch members. All matters originating at the Federal level (referred to in the Constitution as "the conduct of the affairs of the Society") could only be voted upon by Full Members. Council therefore resolved that in preparation for the General Meeting in Hong Kong, State Branches be asked to comment upon all sensitive issues, restricting the voting to Full Members only. At that meeting, Provisional Members were also included. This reading of the Constitution, which appears not to have been questioned, further reduced the contribution that Associates could make to the Society. To what extent this influenced the exodus of Associate Members from the Society, reported as a result of the imposition of the levy, is also not certain. It did, however, prepare the path for the 'House of Delegates' system to be introduced two years later.

At the General Meeting, the Constitution was altered to read "Associate and Student Members shall NOT be entitled to vote at meetings of the State Branch". Notwithstanding this, Associate Members were still not constrained from working for the Society. "All Members shall be eligible for election as a member of a State Council."

The timing of Congresses was dependent upon many things, in particular the demands resulting from the affiliation with the ADA, which did not want Congresses of its affiliates to impact negatively upon its own. Generally speaking, ASO Congresses had always been held at times a reasonable distance from ADA Congresses. This became cogent when it was the turn of the South Australian Executive to conduct their Congress. The dates had been set three years in advance, but it transpired that these conflicted, not only with an upcoming conference in New Zealand, but also with the Adelaide Festival, an important feature on the South Australian calendar. There would be no accommodation available in Adelaide. Therefore, for the first and only time, the decision was taken to move the Congress offshore. Hong Kong was chosen. The ADA was concerned that this would negatively impact upon the ability of delegates to achieve taxation deductions for their expenses. This was of great concern but in the end, after seeking legal advice<sup>22</sup> (Winnall said it was “ludicrous”), turned out to be an irrelevancy.

Many of the members protested, both from the point of view of tradition and also the added costs that would be involved. The outcome, however, was that the Hong Kong Congress was a runaway success, created a huge profit, which contrasted sharply with the loss from the preceding one. The post-Congress trip through China, particularly emphasising dental educational facilities, was highly appreciated.

R.H. Wallman, who as Second Vice-President in the preceding term would normally have become Congress Chair, declined the position. It was taken by B.W. Phillips with B.I. Watson appointed as his Secretary. This created a team, which together with M.A.C. Nugent, Treasurer, became the Executive the next time around. The death of the previous President, created uncertainty about the transference of past Congress records. The previous Executive felt that they had become lost, but Sven Kuusk reported actually holding them.<sup>23</sup> In fact, records collected and kept by John McGibbon have been an enormous help in the preparation of this History. A beautiful record of the planning of the Hong Kong Congress was made and is still held in ASO records.

At this Congress, B.D. Bowden was elected the new President, E.C. Crawford, Secretary and G.R. Dickinson, Treasurer. Bowden already was Editor of the Journal, a highly regarded researcher and an innovative member of the OSC, where he had done a large body of work on third party provider issues and the development of Society policies. Shortly, Barry Mollenhauer, who as Second Vice-President on the previous Council, had already been working on the Congress, had to retire because of ill health. In October 1982, Dickinson took over the running, returning the situation to that originally planned by the Victorian Branch. J.V. Wilkinson, who was looking after the books of the Journal, now also replaced Dickinson as Treasurer.

At the Conjoint Meeting of the old and new Councils, as usual the Foundation's Trustees and the Public Officer were determined and arrangements were made for the normal handover of records. The new President advised that arrangements for the 10<sup>th</sup> Congress were well under way and suggested that the new Vice-Presidents begin organising for the 11<sup>th</sup> Congress as soon as possible. Sven Kuusk

recommended the establishment for the first time, of a list of the Society's assets. This was for stock control, but mainly for depreciation purposes, should the Taxation Department ever require it.

In addition to the Conjoint Meeting, Bowden called a Council Meeting for the following day. He, like McGibbon, obviously planned to hit the ground running. Bowden gave each of his Councillors separate responsibility for a number of portfolios during the time of his Executive, so that the activities and views of the standing committees could be better presented at Council. This had never been tried before or indeed since. McGibbon had tried to delineate the duties of the committees and the Council, under Trotter, had attempted to define the relationship between the burgeoning committee structure and the Council. This was a further attempt. In the author's opinion, it has yet to be sorted out fully and given that personalities will always play a role, is probably a little utopian.

Bowden's division was as follows:

**R.G. Henry (1<sup>st</sup> VP)**

ASOFRE He had just been appointed a Trustee. Future budget forecasting of Society finances.

**W.J. Mackie (2<sup>nd</sup> VP)**

Appeal Committee; liaise with President to facilitate Constitutional legality. 11<sup>th</sup> Congress progress reports (being the proposed Congress Chair).

**G.J. Moore (SA)**

Education Committee, particular reference to immediate liaison enabling the Society to adopt a policy on "Orthodontics for the general practitioner".

**P.A. Heagney (WA)**

Orthodontic Services Committee. Policies on Manpower and "Employment of GPs and postgraduate students in specialist practice".

**N.J. Goodrick (Qld)**

Practice Administration Committee. Manpower.

The President recommended that the committees again be requested to consider their terms of reference, in particular their aims and function within the Society. These were to be communicated to Council within three months. Sadly that took another 15 years. When it did come, it was from the President and not the committees themselves.

Councillors endorsed the necessity for a meeting to be held approximately six weeks prior to a General Meeting of the Society to allow sufficient time to debate and properly organise the agenda. The President advised that two additional mid-term Council Meetings would be desirable, as well as the one during the Congress itself. He also raised the possibility of a General Meeting to be held in conjunction with the Foundation lectures planned for Canberra in August 1983. This was a long held hope. The mid-term meeting, discussed for 1981, could not be arranged. The Foundation lecturer only gave a one-day presentation. Monthly Executive Meetings and the plethora of correspondence continued as ever.

Bowden stressed the importance of ensuring indemnification of office bearers of the Society, in particular the Executive, against any loss caused by their actions. This matter had been first raised five years before<sup>24</sup> when the Society was being incorporated and was part of the recommendations to the incoming Council.<sup>25</sup> It was resolved that the Executive consider the implications of the additional entity and if necessary a legal opinion be sought.

Reference to the Society indemnifying its office bearers was first included in the 1959 Constitution, but the mechanics of this had never been discussed and as office bearers of an incorporated body, their liabilities were uncertain. There was no insurance policy to cover the Society. The Executive decided to ignore the instructions within the Indemnity Section of the Constitution, for the present, on account of the cost factor.<sup>26</sup>

After a thorough correspondence extending almost over Bowden's entire term, it was finally decided that indemnity of all the Society's office bearers, in actual fact, still existed as a result of their own professional indemnity cover. Bowden had discussions with the Medical Protection Society (Vic).<sup>27</sup> They offered protection through ADA membership in all states except NSW, which ran its own scheme. Originally it was thought that protection did not exist in that State but further investigation had revealed that this was the case. The ADA did not specifically indemnify its office bearers, but the Medical Protection Society and the NSW ADA professional indemnity fund extended cover into this area.<sup>28</sup>

A decade later, 'Office Bearer' Indemnity Insurance was finally taken out.<sup>29</sup> As Directors, Officer Bearers were required to pay 10 per cent of the premiums themselves. This probably came about as a result of a legal opinion obtained by V.C. West, that no indemnity is assured for members of the Governing Boards of commercial enterprises and this would apply to the Appeal Committee. By this time the ADA was also taking out separate cover.

The report of the ADA liaison officer, R.H. Abbott, was discussed in full. Abbott recommended that future liaison with the ADA, being so important, be done through the Federal President. Failing that, the one tasked with this function should live in Sydney where the ADA Federal office was located.<sup>30</sup>

R.G. Henry, President-Elect, became the liaison officer. Abbott also retired as Chair of the Economics Committee, his place being taken by R.F.H. Rickleman, well versed in the intricacies of that position.

Council went on to discuss the membership of all committees. J.K. Hawkins was asked to take over the chair of the OEC from G.D. Kirkness. He was not a department chairman, nor even a full-time academic. He accepted, hoping "to do something worthwhile for the Society in an area that is going to require strong leadership and clear thinking" but soon had to decline.<sup>31</sup> The following year, after reference over several months that a search was in progress, Milton Sims took over this Committee.

## Annual Meetings

A desire for more frequent General Meetings had been the subject of discussion for a long time. As already discussed, attempts to hold a regular mid-term General Meeting had already failed on a number of occasions. L.M. Smart had proposed this at the 1972 General Meeting. Surprisingly, Robert Rickleman had opposed the idea at the time. There were 40 ASO members at the 1971 ADA Congress in Brisbane<sup>32</sup> and so John Reading decided to hold a Special General Meeting in conjunction with the 20<sup>th</sup> ADA Congress in July 1973, where even greater numbers could be expected.<sup>33</sup> Sadly that meeting lapsed for want of a quorum. A meeting had also been planned to coincide with a Foundation Meeting in 1981 but eventually could not be arranged.

There was a slight Constitutional impediment in that Clause 7.1 stated that there should be a General Meeting held during each Congress and Clause 7.2 added "... that other General Meetings could be called upon the request from five Full Members to the Executive". Inclusion of this provision had begun with the very first 1927 Constitution and was really a mechanism to safeguard the rights of all members. It had always been a requirement of Constitutions needing compatibility with Incorporation Ordinances. This Clause also required that meetings were to be held in "the State in which the President resided". Special Meetings could also be called for any purpose and were referred to as such in the Constitution until 1977. Such meetings were presumed to be included with General Meetings thereafter.

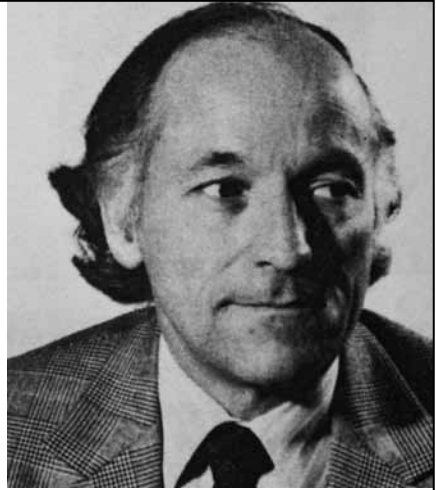
Reading and others had advocated the use of the Foundation Meeting as a method of increasing the frequency of General Meetings as early as 1969 and as the format of the Foundation meeting matured, this is what came to pass. In addition, Henry had mentioned the possibility of a meeting taking place in Canberra, residence of Prime Ministers, but not expected to be home for ASO Presidents. The question was fairly simply resolved by deleting the words from Clause 7.2 "in the State in which the President resides". These alterations allowed for meetings of the Society to be conducted at venues deemed most appropriate for that purpose and attractive to members. The basic intent of Clause 7.2 remained unaltered. At the same time, the minimum number of members required to request such a meeting was increased from five to ten and the quorum for this type of meeting was increased from 30 to 50. These changes passed overwhelmingly.

The first General Meeting held between Congresses took place in Sydney in 1983. This subsequently has become the regular procedure. The positions of all office bearers still fell vacant only at the regular Congress meetings.

Bowden's Executive became innovative in a number of ways. Recognising that the issues facing the Society were increasing, both in number and complexity, Council accepted the suggestion that an AAO 'House of Delegates' type of system should be tried.<sup>34</sup> In January 1983 the Federal Council formed a Sub-committee of Henry and Mackie to report on the matter. In a sense, even though the imperative was somewhat different, this had been foreshadowed for the 1982 General Meeting, where all matters likely to be brought up were to be discussed beforehand at the Branches. The idea was floated in the new Executive's first newsletter.<sup>35</sup> Norton

## Boyce Darryle Bowden

Graduated from the University of Queensland in 1954 winning the prize for the highest academic achievement in his final year. After a stint in general practice, Darryle moved to London where he completed the requirements for the Fellowship in Dental Surgery at the Royal College of Surgeons, after which he took a post as Senior House Officer in the Orthodontic Department of the Royal Dental Hospital. It was here that he developed his life-long interest in the care of those with gross skeletal abnormalities. He then did two years as Registrar at the Eastman. After this he was awarded a Scholarship to the Tweed Foundation, where he did the Tweed Course and then travelled extensively to the major orthodontic departments in North America.



Returning to Australia at the start of the sixties he divided his time between research at the Melbourne Growth Unit and clinical work, firstly in association with Donald Spring and later in his own practice. For a long time he was Consultant Orthodontist at both the Royal Melbourne Hospital and the Craniofacial unit at the Royal Children's Hospital.

He served on the Orthodontic Department in the Dental Faculty, as demonstrator and examiner and later with the Anatomy Department at the University of Melbourne, where he first worked on the basic anatomy course for undergraduate and post graduate dental students, rising to Senior Lecturer in Charge-Child Growth Unit, where he directed, both the research activities and the administration. He had an appointment as visiting Consultant at the Centre for Human Growth and Development at the University of Michigan.

He has lectured extensively both overseas and throughout Australasia, including giving a series for the ASOFRE and being invited to give the prestigious Mershon Memorial Lecture in 1978 to the AAO, and he has also made many contributions to the literature.

His extensive service to the ASO began with the presidency of the Victorian State Branch. This was followed by eight years on Council, culminating in his Presidency from 1982-4. In addition he served as Editor of the Journal 1979-1983.

These bare statistics fail adequately to recognise his contributions as Chair of the Orthodontic Services Committee and the companion role of working on the Society's response to the burgeoning onslaught of the third party providers nor the many innovations brought to fruition during his Presidency.

Many of the policies of the Society were developed at his instigation. Most of the functions of the ASO have his stamp on them.

Darryle's lengthy career has therefore embraced elements of teaching, research, clinical practice and a wide range of Society contributions. He was made an Honorary Life Member of the Society in 2003.

Darryle and Vonny raised three children, Patrina became a dentist and her two brothers an engineer and a surgeon. Vonny passed away in 1985. Darryle married Toots some years later. They play golf.

had suggested a not dissimilar plan 12 years before.<sup>36</sup> Norton's view, coloured by the unfortunate recent Adelaide meeting, was that "the increasing number of members of the ASO and the biennial frequency of General Meetings are combining to produce meetings which are unwieldy, not always productive and of unreasonable length". The feeling was that time constraints at General Meetings did not allow individual members time for involvement in discussions and this was interfering with the process of crafting Society policies and discussions on important matters of business.

This idea was presented to the Victorian Branch, which initially rejected it,<sup>37</sup> suggesting the existing format be maintained. But Bowden persisted and the idea was eventually accepted the next month by most branches.<sup>38</sup> And so, for the 1984 meeting, before the Congress, a trial meeting took place.

This meeting, which became known as the 'Councillors and Representatives' or more simply 'Reps' meeting, was to be attended by the entire Council, by the Presidents of each of the State Branches and the Chairmen or Conveners of the growing number of standing committees. The idea being that matters listed on the agenda for the General Meeting (notice to be given three months in advance) could first be debated at branch level. Then the views from that Branch could be represented by its President at the new meeting. Consensus, if achieved at this meeting, could be announced at the General Meeting as each item came forward. This gave further voice to the Chairmen of each of the committees, many of whom had carried out significant roles in the preceding two years and had much to report. A system of proportional representation at this 'Reps' meeting was discussed, to enable the views from the more populous States to have increased weight, but this was shelved as impractical. For a while, each State Branch was to have two representatives at this meeting.

The end result of this procedure, which became successful over time, was that the General Meetings became much more manageable; were completed much more quickly and could be more easily fitted into the increasingly crowded Congress schedule. The downside was that the general membership came to feel somewhat disenfranchised. Individuals were less likely to raise real issues of concern in front of the larger gathering. At the 1988 General Meeting, continuation of this practice was questioned. S.B. Bajada, President of the South Australian Branch, queried his role at one such meeting.<sup>39</sup> Could State Branch Presidents express personal views in contrast to the views of the State Branch? In as much as not everything on the agenda would have been discussed by the Branch and a definitive position established, this was a real issue not previously broached. President Cook advised that personal viewpoints were acceptable, unless the representative had been specifically directed by their Branch.

## Appeal Committee

The Appeal Committee, set up in 1977, had begun to assess the skills and expertise of those aspiring orthodontists who had become caught up in the change of membership rules. Brian Crisp continued to be Chairman of the Constitutional

Committee and he continued to be advised by Chris Winnall, a solicitor in Adelaide. As has been mentioned, Winnall became extremely concerned at the operation of the Appeal Committee and suggested a large number of alterations to the Constitution to further support the Appeal Committee in its operations. He was concerned that the Appeal Committee was recommending members for Full membership without proper constitutional authority to do so and also that there was an unsatisfactory means of including, within the provisions of the Constitution, a classification of Full membership achieved by this means. Council decided to accept Winnall's suggestions<sup>40</sup> and resolved that:

- a. The power of the Appeal Committee to be "global" and (to allow for) the implications of this in the event of a legal challenge;
- b. Winnall's guidelines be accepted;
- c. The Appeal Committee be given power to assess the clinical ability of the applicant.

Council wanted this situation cleared up as a matter of urgency and resolved that the proposed alterations to the Constitution affecting the Appeal Committee, resulting from Winnall's recommendations, be implemented, subject to the inclusion of specified rules and guidelines for its operation. The new Appeal Committee was to be given the task of formulating these rules and guidelines. The changes were presented to the Council Meeting in October 1982, slightly reworked and then submitted to a postal vote, which also included a number of other issues, in March 1983.

The first of these changes affected the 'Rules for Full and Provisional Membership' and included the addition of two categories:

4.4 a B (ii) Full membership could be granted to a registered dentist who has completed a course and gained a qualification in orthodontics provided that the applicant can demonstrate (to the Appeal Committee) that he has advanced in clinical expertise to a level equivalent to that of a graduate of a two year full-time course approved by the Council. Such clinical expertise must be verified by a statement from an authority which is acceptable to the Council. And the applicant shall present orthodontic cases to such examiner as the Appeal Committee shall from time to time appoint.

Or

4.4 a B (iii) Has been Full Member in good standing of a comparable overseas orthodontic Society and who also satisfies the Appeal Committee as to clinical expertise as in B (ii) above, provided that the Appeal Committee shall, in cases it considers appropriate, have power to dispense with any clinical examination which the applicant might otherwise have to undergo.

Identical clauses were added for Provisional Membership. In order to ensure that current Full members who had achieved their membership through the actions of the Appeal Committee since 1977 were in fact legally admitted, the section went on to say:

notwithstanding any interpretations of the Constitution to the contrary it is hereby resolved that all members of the Society at the date hereof shall be deemed to have been properly admitted, in accordance with the Constitution of the Society, and that this resolution shall have the status of an amendment to the Constitution of the Society when passed by the required majority of Members of the Society.

The changes included details of the how the Appeal Committee would function. Two referees were to be appointed and the appellant was required to present three cases, representing three different types of malocclusion. From today's perspective, such a sparse 'logbook' would convince no one, but the system produced little criticism. However, there remained a conflict of interest, in that the President of the Society was still a member, in fact Chairman, of the Appeal Committee. The Council as well as the applicant was able to make submissions to this Committee. Such conflict of interest was eventually eliminated. The postal vote occurred in March 1983 and all sections were passed by a large majority.<sup>41</sup> Bowden contacted Alan Parker to reactivate the Appeal Committee as a matter of urgency. About nine applicants had their cases before the appeal process suspended over this time.

At the 1984 General Meeting the section regarding the Appeal Committee was varied again so as to read:

The Appeal Committee shall be comprised of the President of the Society (who shall be the Chairman), the Chairman of the Orthodontic Education Committee and five other Full Members of the Society (being one full member from each of the New South Wales, Queensland, South Australia, Victoria and Western Australia State Branches) who shall be appointed by resolution of a simple majority at a Congress General Meeting of the Society, and the same five members shall hold office until the next succeeding Congress General Meeting of the Society.

This represented an increase in the size of the Committee by two members. More and more applications began to be received from those with overseas qualifications. Assessing these had previously been a role for the OEC but fell to the Appeal Committee after it was formed. This group began to complain that it was not really their role.

## Affiliation

Amendments had been considered over a considerable period of time, to provide for the affiliation of organisations with the ASO, along the same lines that the ASO enjoyed vis-à-vis the ADA. The Begg Light Wire Study Group (BLWSG) had let it be known that such an affiliation would be of interest to it. In initial discussions, two conditions were laid down: firstly that all members must be Full or Provisional ASO members and secondly, that scientific meetings could only be held with the permission of the ASO.<sup>42</sup> The matter was discussed at the next several meetings of the Executive. It was thought a real possibility that broad interest in BLWSG meetings might reduce attendances at ASO meetings. There was a suggestion that affiliated groups should not even have to limit their membership to orthodontists.<sup>43</sup>

The Constitutional Committee, in its deliberations, imposed requirements for any affiliated group thought to be more stringent than for the ASO. Since these were unacceptable to the Begg group, no progress was made.<sup>44</sup> None-the-less, Council proceeded, and provision for affiliation became part of the Constitution in the group of changes presented at that 1983 postal vote.

The changes introduced to allow the Society to grant affiliation read as follows:

*Affiliation*

*Entitlement:*

Any body or Association of orthodontists established in the Commonwealth of Australia or its Territories may be admitted to affiliation with the Society, subject to the approval of the general Council and to the following conditions:

*Financial obligations:*

The Society shall undertake no financial obligations to such body or Association or to any member or constituents thereof.

*Membership of Association:*

Orthodontists who are members of the affiliated body or Association shall be Full, Provisional, or Corresponding Members of the Australian Society of Orthodontists, and the affiliated body shall forward to the Federal Secretary, in February each year, a list of the names and addresses of all members of that body, and a list of its Officers.

*Constitution to be lodged:*

A Constitution of the affiliated body shall be lodged at the office of the Australian Society of Orthodontists Inc. The affiliated body shall notify the Federal Secretary within sixty days of any amendment to their Constitution.

*Conformity with Association:*

In the event of the affiliated body embarking on any activity, the object of which is contrary to the policy and welfare accepted by the Australian Society of Orthodontists Inc, the affiliation may be terminated by the Society.

By this time the BLWSG appeared to have lost interest in becoming an affiliated with the Society. It was by then, a very active and powerful organisation, that on balance clearly played a positive role in the orthodontic community. No other organisation took up the opportunity.<sup>45</sup> It was not until 1998 that any affiliation was sought and then not from the (renamed) Begg Society, but from the proposed Australasian Society of Lingual Orthodontists, which sought affiliation both with the ASO and the ADA. The Executive<sup>46</sup>, in considering the matter, came to the view that there was no process to allow this to happen.

The minutes read that the Executive proposed to ask the Constitutional Committee to draft By-Laws for this purpose, even though the By-Laws approved by the 1983 postal vote were still in place. This is a classic example of the likely consequences of a general lack of 'corporate knowledge'. Council indicated it would be happy to

examine the request following establishment of the Society. At the next meeting, R.H. Olive said that the By-Law needed to reflect the ADA requirement that affiliated bodies do not hold meetings to conflict with their own. He also felt and was able to persuade Council, that the ADA model, requiring a proposed affiliate to have at least 50 members (less than one per cent of its membership, but well over ten per cent of that of the ASO), ought to be followed. This group, when formed in 1999, had only 30 members. This modality is now taught in three of the Postgraduate departments and Stuart McCrostie<sup>47</sup>, who has been the strongest advocate, says membership is growing and may reach the magic (and perhaps unrealistic) number soon.

## Other Changes

Very early in his term, the President indicated the need for the Society to adopt a 'Code of Ethics'. The OSC and the Constitutional Committee were asked to develop one. A copy of the AAO Code was included with the request for consideration.<sup>48</sup> Some years before, the NSW Branch had produced an Ethics Committee Report<sup>49</sup> based on the existing ADA Branch Code and the Dental Board Rules. This Report suggested adoption of a 'Code of Ethics' which was to be "additional to that of the ADA Branch". Supporting the introduction of this Code, the Chair, R.A. Miles, argued that increasing numbers of orthodontists were graduating from the Universities and they had the right to expect a level playing field at the commencement of their practice. The Branch never adopted this Code.<sup>50</sup> The OSC produced its recommendations in May 1983. Bowden succeeded in producing a 'Code of Ethics' based on the OSC recommendation and the Code of the AAO and had it accepted by Council in Sydney in July 1983. It was adopted at the General Meeting in 1984. It read:

It shall be the duty of every member of the Australian Society of Orthodontists to:

1. Observe the Code of Ethics of the Branch of the Australian Dental Association of which he/she is a member.
2. Obey all Federal and State laws applicable to the practice of dentistry.
3. Serve his/her patients by performing the highest quality orthodontic service that is within his/her power to perform and to show the same dedication and attention to this orthodontic care to each patient.
4. Neither tender nor accept "rebates" or "split-fee".  
The terms are rebates and split-fees are defined as the division or agreement to split or divide the fees, or the anticipated fees, received for orthodontic services, with any person or corporation, in return for bringing or referring a patient.
5. Endeavor to improve the quality and availability of orthodontic care and to offer his/her services, where and when ever practicable, to charitable or educational institutions devoted to such purposes.
6. Ensure that no person associated with his/her practice is falsely represented as an orthodontist.
7. Make reasonable arrangements for emergency care of his/her patients. The orthodontist shall be obliged when consulted in an

- emergency by any patient, to make reasonable arrangements for emergency care for that patient.
8. When transferring a patient, provide any information and all copies of appropriate records that will be beneficial to the future treatment of a patient.
  9. As a primary obligation, give his/her honest opinion when agreeing to act as a consultant, either for a patient or another dentist.

A tenth clause that members should follow and try to promote ASO Policies was rejected.

Bowden had the Constitution, updated by the 1983 postal vote, reprinted. It was printed only on one side of the page and placed in a folder in such a way, that subsequent amendments could be pasted in, so that the one document would serve for quite some time.<sup>51</sup> He requested also that approval be given, to revamping the booklet of policy statements, produced as a result of Norton's suggestion in 1980, in terms of improvements in printing, paper and presentation. He had also suggested, that all the Policies of the Society should be incorporated, within the Constitution, by means of a By-Law.<sup>52</sup> His idea was that such a move would give all Society Policies formal status within the Constitution, and so greatly increase their importance. In the form of a By-Law, alterations could be made by Council, whenever new policies were adopted or amended. Later they would need to be ratified by the membership. Council passed a By-Law to that effect. When this was presented to the Members for ratification, as required, it failed to gain support. But when it was suggested, at that same meeting, that the document could be part of the planned Constitution folder, this met with agreement and, by consent, the policies were included in the Constitutional folder, as an appendix. The newly accepted Code of Ethics was also included.

At that stage the ASO had adopted five policies:

1. Specialisation. Adopted 1972 and amended 1982;
2. Delivery of Orthodontic Services within the School Dental Services. Adopted July 1975;
3. The use of auxiliary personnel in orthodontic practice. Adopted August 1976;
4. Third party Orthodontic Programmes. Adopted February 1978; and
5. Treatment for Cleft Lip and Palate Patients. Adopted February 1980.

During Bowden's time, policies on continuing education and the employment of general practitioners and postgraduate students in specialty practice were added. These policies serve to define the attitude of the Society to the raft of issues which confront it. What effect they have had outside the ASO is uncertain.

Also, the folder was designed to contain future 'Notices of Meeting'. These included all the Executive and Committee reports and the balance sheets. Bowden suggested that at least this way, members should know where everything was and they would be more likely to bring them along to the meetings. A highly commendable idea!

Although today it is accepted as the norm, information technology in the early 1980s was very much in its infancy, but Bowden saw its potential as a great facilitator. He prepared a template for the future recording of the minutes of all General and Executive Meetings, requiring only the filling in of gaps in a 'word processor' (as they were then referred to) document for completion. Bowden felt it was time to invest in a word processor or computer and thought \$7,000 (well over \$20,000 in today's money) would suffice.<sup>53</sup> They were soon to find out that a significant item in the overall cost was the employment of a specially trained operator.

Generally speaking, over time, ASO Executives have worked well together. However, after John McGibbon died, there was a complete spill. Probably Lloyd Trotter felt better able to work with those who replaced McGibbon's team. Bowden was a very forthright President who wanted to make some changes he saw as vital. At one time, the Secretary on his Executive threatened to resign, feeling that Bowden would not listen to his Council.<sup>54</sup> Bowden remembers it as a traumatic time.<sup>55</sup> This is unique among previous Presidents. Other Presidents confirmed that their memories are overwhelmingly positive.

At the mid-term Council meeting held in Sydney in July 1983, Bowden requested permission from Council for his term of office to end after the Congress General Meeting.<sup>56</sup> Council members expressed the view that traditionally and as indicated by the Constitution, the President (and Council) hold office until the completion of Congress. They wanted to see no change in this arrangement.<sup>29</sup>

He was strongly of the view that the ex-officio members of Council, that is the Editor of the Journal and the Congress Chair, should speak only on matters related to their portfolio. His opinion was that those officers were included in Council for their input regarding their specific portfolios and as a way of keeping them informed of Council deliberations.<sup>49</sup> The remainder of the Council differed, feeling that ex-officio members should be able to express their views and vote on all matters on the agenda. A stand-off ensued. Bowden challenged the Council members to move a 'motion of dissent' from his ruling. No such motion was moved.<sup>57</sup> Interestingly, in 2001, these ex-officio officers (other than the Congress Chair) did lose their seats on Council. Shortly thereafter, so too did the Congress Chair.

Bowden also made it known that he had strong views about the running of the Congress. His membership on the Congress Committee was ex-officio, but unlike his attitude to the other ex-officio on Council, he saw no restrictions on his input. He also wanted the guidelines which he had established, to be used as a format for future Congresses. The Sydney representatives thanked Bowden for the guidelines, but expressed the view that they would be "used for information and not necessarily as a formal precedent". Quite early during his tenure there was discussion as to the role of the Congress Committee with respect to Council and the President. The President had reminded Council that section 6.4 of the Constitution stated "the President shall be responsible for the general supervision of any committees appointed by Council". He let it be known that he had "witnessed extensive personnel animosity" as a result of this interpretation and it depended how narrowly one interpreted the words "responsible for the general supervision". As a result, he requested Council's permission not to have to attend Congress

Committee meetings.<sup>58</sup> Council advised that the President was obliged to attend these meetings and resolved that the Congress Committee was to be allowed to act autonomously but it should continue to refer major decisions to Council. Later he repeated his request for the same reasons.<sup>59</sup> This time Council granted his wish “in view of increasing problems and in view of the fact that Congress arrangements were now well underway”. Bowden eventually resigned from this Committee.

Although undoubtedly there were periods of angst during his tenure, hindsight allows for a much more positive assessment. Bowden had already made a prodigious contribution to the functioning of the Committees in the early stages, particularly the Orthodontic Services Committee and in cooperation with the Economics & Practice Administration Committee; in third party funding and with regard to the establishment of ASO Policies, to say nothing of his service to the Journal. During his term, the pattern of meetings followed today was begun. The move for a permanent home and for progressive use of information technology was also begun. Most of his many innovations, served the Society well for a considerable period of time. Members of his Executive and Council have continued to play a major role in the Society ever since.

## Later Executives

Successive Executives have different characters, often but not necessarily mirroring their President. At the 1984 meeting R.G. Henry was elected President, P.W. Kline Secretary and D.P. Kinsella, Treasurer. Henry had accrued enormous experience in a variety of roles. His executive term was of a much lower key. He was not persuaded that the time had come for a permanent home and disregarded his directions towards that end. The Executive Meetings were held at his home, convenient, for the other two on the Executive and appeared to be over in about half the time taken by their predecessors. Both Henry and Kinsella, who were interviewed for this history, recalled it as a very pleasant time.

Other than forming a Public Relations Committee, an idea originally proposed by the previous Executive, again modeled on that of the AAO, few innovations occurred. Council wanted more Newsletters, perhaps two a year. Further meetings of the Council were to be in September 1985 at a Foundation Meeting, another in mid-1986 and at the Congress in March of 1987 when a Diamond Jubilee Congress would be held.

One of the characteristics of Henry’s Executive was a high level of co-operation with the other arms in Dentistry. Discussions with the College occupied much of his attention, as did an attempt to hold a joint meeting with the ADA. Henry, always a supporter of the College and its aims, was keen to see the establishment of some form of ‘Special Field’ qualification. He saw this as a worthwhile additional achievement for orthodontists. He also believed a Foundation Meeting could be piggy-backed onto an ADA Congress, so that the Foundation lecturer could also be a keynote speaker for the ADA. After discussions lasting most of his term, the ADA eventually withdrew from the arrangement. This was unfortunate, as it was always Henry’s wish to draw closer to the ADA and its other affiliated societies.

The proposed lecturer, Robert Vanarsdall, was well suited, being doubly qualified in Periodontics and Orthodontics.

It was during this term, that J.W. Truitt began visiting Australia and the AAOO was formed.

Philip Kinsella, the Treasurer, reported that the addition of the Congress levy had made it harder to collect subscriptions. He suggested a change, wherein the Federal Executive would collect the dues and then rebate the amounts owing for the State subscriptions.<sup>60</sup> This was a return to the arrangement Kevin Henderson had wanted 25 years before and did not require any changes to the Constitution, which contained amendments first planned when the Executive was last based in NSW, which read: “9(1)... The Treasurer shall be at liberty to require State Branches to collect from members of the State Branches the amount...”. Nonetheless, a constitutional change was included in the 1993 version. This has remained the method of collecting the subscriptions ever since.

The Executive then moved to Brisbane. Whereas the Sydney Executive was highly experienced, none of the Brisbane Executive had previous experience on Council. To make matters worse for the ASO, no members of either the Sydney or Brisbane Executives, after their term had expired, continued to play major roles in the Society. This was a lost opportunity to retain necessary corporate knowledge for the future. Sadly there is very little archival material from this five year period 1985–1990.

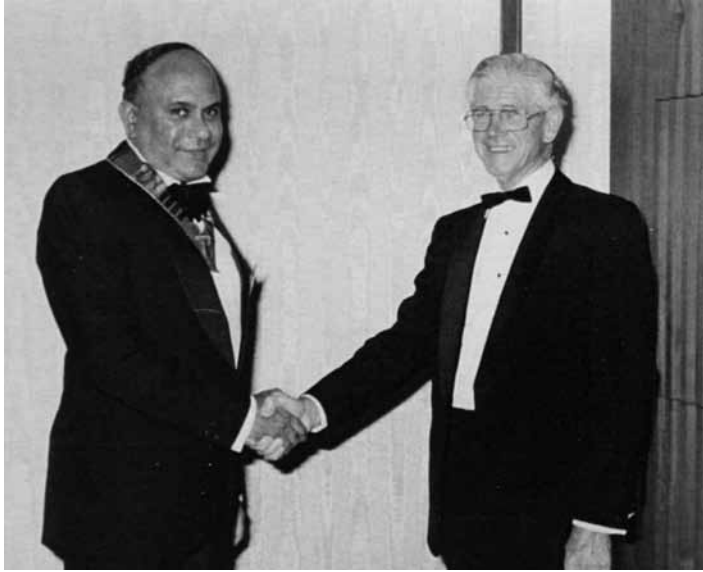
By this time the activities of the Society ranged over a number of fairly discreet areas and will be further discussed that way. It is hoped that this will be easier on the reader. It became essential for the writer.



*The writing is on the wall!*  
Bowden passing the mantle to Henry



Robert Henry worked hard to maintain a close contact with the profession, photographed here with Mrs Henry, ADA President Spiros Halikis and Mrs Halikis.



The changing of the guard.  
John McGibbon and Stan Paul commence their terms

## Endnotes

1. Treasurers Report to 1980 GM
2. Minutes Executive Meeting 11/1977
3. ASO Newsletter 6/1981
4. 18/12/1980
5. Kinsella, P. Personal Communication 27/8/2008
6. Hay to Kuusk 15/2/1981
7. Cox to Brown 21.11.1980
8. Minutes Executive Meeting 5/1980
9. AMC Specialty Recognition Advisory Committee est. 2002 AMC Website
10. Adopted by the Board 26/9/1979
11. Dental Board Registrar to R. Hay 11/10/1982
12. Dental Board of NSW to Hay, R.H. 11/10/1982
13. Recommendations To Incoming Council 1980 General Meeting & Minutes Executive Meeting 6/1980
14. Crisp to Executive 23.3.1981
15. Executive Meeting 7/1981
16. Constitutional Committee Report to 1982 General Meeting
17. Minute Executive Meeting 4/1982
18. Minutes Council Meeting 6/1977
19. 16/12/1968
20. O'Donoghue to Rickleman 10/2/1975
21. Minutes Council Meeting 7/1981
22. C. Winnall 30/9/1980
23. Minutes Executive Meeting 5/1980
24. Minutes Council Meeting 6/1977
25. Minutes 1982 General Meeting
26. Minutes Executive Meeting 6/1982
27. Minutes Executive Meeting 3/1983
28. Minutes Executive Meeting 7/1983
29. 10/1992
30. Minutes Council Meeting 3/1983
31. 23/8/1982
32. Minutes Executive Meeting 11/1971
33. Minutes Executive Meeting 6/1973
34. Minutes Council Meeting 10/1982
35. August 1982
36. Mentioned in letter Reading to Heath 19/11/1971
37. Minutes Vic Branch Meeting 5/1983
38. Minutes Executive Meeting 6/1983 Campbell 1/6/1983 Mewing 27?5 Roberts 26/5/1983
39. Minutes Councillors and Representative Meeting 3/1990
40. Minutes Council Meeting 7/1981
41. Minutes Executive Meeting 6/1983
42. Minutes Conjoint Meeting 3/1980
43. Report from Federal Councillor for NSW (Ray Miles) 1980
44. Minutes Council Meeting 7/1981
45. Minutes Council Meeting 7/1983
46. Minutes Executive Meeting 10/98
47. Personal Communication 3/2009
48. Minutes Executive Meeting 4/1982
49. 17/11/1971 Miles, R., Chair
50. Miles to Crisp 10/2/1975
51. Minutes Executive Meeting 11/1983
52. Minutes Executive Meeting 12/1982
53. Minutes Executive Meeting 4/1982
54. Personal Communication 4/10/2008
55. Personal Communication 4/2008
56. 4/3/1984
57. Minutes Council Meeting 7/1983
58. Minutes Council Meeting 10/1982
59. Minutes Council Meeting 10/1982
60. Treasurer's report to 11/1986 Council Meeting

# Part 2

## A Pot Pourri of Activities



## Chapter 5

# The Journal

A desire to record the proceedings of meetings and papers delivered before the Society became obvious from the very beginning. Article 1.4 of the By-Laws of the first Constitution stated that: "All papers read before this Society shall become its property and shall be delivered to the Secretary immediately." This anticipated the time when the proceedings of the new Society's meetings might be published. This clause remained in the Constitution until 1990, although at the General Meeting in Hong Kong in 1982 it was realised that its enforcement would mean that overseas lecturers may not be willing to visit our shores to present papers.

No sooner had the ASO been reformed in 1950 than R.W. Halliday wrote<sup>1</sup> to the secretary, suggesting that the Society "publish Transactions of its proceedings at appropriate intervals". Halliday felt that such a publication would be a great stimulus to the new Society.

A table clinic prepared for the 1998 ASO Convention held in Canberra stated that:

... under the 2<sup>nd</sup> Executive of the reformed ASO, which was based in Victoria, that, thanks to the careful administration of the Secretary, Dr Donald Spring, a numbered series of bulletins was published which recorded association activities, minutes of Executive Meetings, reports from office bearers and occasional news items.

In fact, the first series of publications began on 13 February 1951, during the time of the first Executive.<sup>2</sup> The first Bulletin was not numbered and a handwritten note on one of the remaining copies suggests the circulation called for 20 copies. It discussed the intentions of the new Society under a heading entitled 'Projects', which included:

That to stimulate greater interest in orthodontics, a newsletter should be prepared containing abstracts from articles and comments on various aspects of practice management not usually found in Journals.



Three AOJ editors celebrating the 40<sup>th</sup> birthday of the Orthodontic Journal

The ultimate hope was that these newsletters could be published “from each capital city in turn”.

The second Bulletin was published on 11 April 1951, and was edited by A.J. Cunliffe, the only occasion until the time of John Moffatt when an editor is specifically mentioned. It was not confined to association news and contained some clinical material. The third appeared on 11 December 1951. This bulletin also contained some clinical ‘aids to practice’ together with a report of a paper given to the NSW Branch, formed that evening, by Dr W. Alan Grainger, a senior conservative dentist and former President of the Australian Dental Association. At the same time another avenue was being pursued. R Y. Norton, the Secretary/Treasurer of the Society wrote to the editor of the *Dental Journal of Australia* inquiring as to the possibility of publishing annually a case report under the Society’s name, not of the member who had prepared it, in the hope that by doing this in the same issue each year it could become a feature of the Journal.<sup>3</sup> A fourth, but unnumbered, issue of the Bulletin came out in October of 1952, some six months before a new Executive was to due to takeover at the General Meeting of the ASO to be held during the 13<sup>th</sup> Australian Dental Congress. This issue was almost all clinically oriented and contained very little association news.

The Executive did not change at that General Meeting in June 1953 held in Brisbane, although a Treasurer was added, so the first series of bulletins continued. The last issue of the Bulletin was a single page sent out with the latest copy of the Constitution, which had been ratified at that Brisbane meeting.<sup>4</sup> There are no further bulletins in the archives from that Executive.

Item 7 on the agenda for the second meeting of the newly elected Federal Executive of the Australian Society of Orthodontists was ‘Bulletin’. The minute read:

Discussion took place on the level that the Bulletin was of advantage providing it was representative of the Society’s thoughts. The hope was expressed that a closer relationship be affected between State Branches and the Editor.<sup>5</sup>

The second Executive, under Kenneth Adamson, which served from 1956 to 1959, as mentioned previously, produced a numbered series of bulletins during its term of office. These fully outlined the association's activities with reports from federal office bearers, news from State Branches and new membership details etc., but kept an almost complete silence on clinical matters.

In Bulletin #2,<sup>6</sup> at the request of the New South Wales Branch in November 1956, the *Australian Dental Journal* were asked if the journal could produce an orthodontic supplement and possibly a separate orthodontic journal. The cost of the latter was thought prohibitive, but the idea of a supplement was thought worthwhile, and was to be brought up at the next Congress. In their reply to the NSW Branch, the Executive felt that, "... cooperation received (so far) from various State Branches would make it extremely difficult to obtain sufficient material". This was probably a bit harsh, as three of the branches had only just been formed. It went on to say:

... unofficial discussion has taken place and it was pointed out, (by the editor of the *Australian Dental Journal*,) that an orthodontic supplement would entail additional pages of printing over and above the present format of the Journal, and, since this would not be of interest to all members of the Association, the additional expense would have to be borne by the ASO.... We have been given to understand, however that the ADJ is willing to include a brief report from the ASO from time to time...

It seems from these early bulletins that the NSW Branch was the prime mover for change within the Society. Not willing to give up on this idea at its next meeting<sup>7</sup>, the following February, a motion was passed that 'the Federal Executive be asked to approach the Editor himself of the *Australian Dental Journal* to consider devoting one issue to orthodontic material'.<sup>8</sup> Later in this bulletin it was reported that the printing cost for *Appolonia*, the journal of the Sydney University Alumni Association, was about £250 for 1200 copies. At this time the *Transactions of the European Orthodontic Society* cost £2. A duplicated publication of 50 pages and 10 pages of illustrations would therefore cost about £1 per issue.

In Newsletter No. 8 dated 25 March 1958 published by the clearly well-organised Queensland Branch, Dr George Christensen, an Associate Member (later to become an eminent oral surgeon) suggested that an approach should be made to have a sectional editor appointed to collect articles for publication in the *American Journal of Orthodontics*. He stated that other specialities had similar schemes.

Bulletin No. 4 in April 1958 contained the Executive's considered response under the heading 'Separate Orthodontic Journal'. It read:

Having obtained the attitudes of the State Branches, one or two selected articles chosen to bear the recommendation of the ASO would be forwarded to the Editor of the ADJ for publication each year. Other articles would be summarised in the Orthodontic Bulletin.

This effectively ended the Society's plans to have the existing Dental Journal become a publishing vehicle for the Society. In all, the Melbourne-based Executive produced five bulletins; the last one in October 1958. Branch news was the principal focus of these publications. After the next General Meeting, the ASO

Executive returned to Sydney, and in December 1959 produced Bulletin Vol 2 No. 1. Apologies were given for late publication, due to the difficulty of finalising the new Constitution.

The Honorary Secretary of the Society was then John Reading and as usual the Secretary was responsible for publication of the Bulletin. One can see a new confidence in these issues. More attention was paid to formatting and presentation. All the issues followed a standard sequence of association and branch activities, but without articles of a scientific or clinical nature. They were produced on a roneoed format, unbound, with a special cover provided with the first issue. Reading claimed this idea was later taken up by, amongst others, the NSW Branch of the ADA and the FDI<sup>9</sup> and the style was copied by Darryle Bowden when he was President. In the last edition, it was reported that the cost of printing the bulletins averaged £30 for the 43 Full and 76 Associate Members.

Reading had, up to that time and for a long while subsequently, made a large number of contributions to various elements within the profession. His attractive prose always to be admired. His most recent contribution being a history of the ASO Foundation for Research and Education finished in 2006.

The Executive, in 1961, had stated: "It is hoped to make the Bulletin a true medium of expression, as the day of a separate Orthodontic Journal, Supplement or Transactions seems a little far off." Volume 2 contained four editions, the last one in July 1961, just prior to the 1<sup>st</sup> Congress of the Society. In 1961 the President of the New Zealand Orthodontic Society, Jack Davies and the Honorary Secretary/Treasurer, Geoffrey Walker wrote to Reading, suggesting the possibility of producing a 'Australasian Transactions of Orthodontics'. Concerning costs, which took up most of the letter, they discussed quotes for 200 to 300 issues. They also mentioned that some New Zealand members also wished to become members or Corresponding Members of the ASO.

When the new Executive from Western Australia took over, the new Secretary, John McGibbon, also assumed editorship of the Bulletin, and produced Volume 3. A series of changes were introduced aimed, in his words, at giving the production an "attractive form" and making the contents more readable. In seeking an article from Elsdon Storey, he said he was "trying to change the format...which in the past, has been rather uninteresting".<sup>10</sup> McGibbon wrote to the Branches suggesting that branch minutes, routinely forwarded by State Secretaries to the Federal Body and reproduced virtually verbatim, ought to be replaced by a précis written by each Branch President.

Space was also to be provided for letters from members on matters they saw as important. He further suggested that "consideration be given to the inclusion of original articles in addition to the usual contents".<sup>11</sup> He maintained an active correspondence across the Tasman, to encourage inclusion of a 'NZ report' as part of the Bulletin. This was to be reciprocated. In as much as both societies had a long way to go and much to learn from each other, this was clearly worthwhile. The Bulletins now came with a blue cover and were not designed to be placed in a folder.

In his first edition in February 1962, McGibbon mentioned the change in format which “we hope, will prove to be a further step in its gradual evolution into an Orthodontic Journal”. John McGibbon’s highly organised approach had raised the bar yet higher. The Secretary of the New Zealand Orthodontic Society praised the new format<sup>12</sup> commenting it was “most impressive in its transition to an Orthodontic Journal”. The editor of the New Zealand Dental Journal wrote in similar vein.<sup>13</sup>

Attempts to develop a package library for the use of ASO members were begun. Keith Godfrey had been writing reviews and abstracts of articles for a package library on Orthodontics, for the Hardwicke Memorial Library of the NSW Branch of the ADA. This involved bundling together as many references and as much material as possible, devoted to a particular subject. Something similar devoted to Specialised Orthodontics was deemed worthwhile. In January 1962, McGibbon wrote to Keith Godfrey asking if he would be the convenor. When this was found to be impractical, the Hardwicke Memorial Library was asked if it would make its orthodontic packages available to all ASO members and the ASO effort was put into a literature scanning service. Early Bulletins contained lists of articles, which the scanning panel recommended of interest to ASO members. Again, Godfrey was asked to head up this service. He continued to do this for a long time.

The President, Kevin Henderson, had decided that the Bulletin should be published quarterly, necessary to be registered as a periodical, for the purposes of reducing postal costs. He apparently was not concerned about lack of material because he intended “to publish the papers delivered at the last ASO Congress”. In all, seven issues were produced, with the last being a combined January and April issue due to the proximity of the 2<sup>nd</sup> Congress, which would close their term of office. Clinical articles and reviews were added to the reports of association activities in the Bulletin, which began the format into which the journal grew in years to come.

The controversial amendment to the Constitution that required eight years of practice as a requirement for Full membership, which was passed in 1961 at the Sydney meeting, came up for reconsideration. A postal vote, for its possible amendment, was demanded, particularly by members from NSW. As part of that postal vote the Executive included the first of the By-Laws to the Constitution associated with the Society’s ancillary functions.

One was “A periodical to be published under the name *Australian Orthodontic Bulletin*. Issues to be made at least quarterly and all copies posted to the private addresses of members. The price of 7/6d per issue to be included in the annual subscription ... and separately accounted for in the Balance Sheet and be duly audited”. This By-Law included a realisation that the *Bulletin* had to be separately funded and accounted for and such funding would be automatically included in the membership. The amendment passed unanimously.

To publicise the Bulletin, both nationally and internationally, McGibbon contacted the *World Orthodontic Literature Index* and sent copies of the Bulletin. The Editor, Dr Cervera, responded by requesting back copies from 1957 and he also sent a copy of his *Index* saying ‘and herewith allow myself to request you to make an exchange of my publication with your esteemed Bulletin’.<sup>14</sup> McGibbon, probably because there were so few copies, felt unable to accede to the request for back copies.

As well as advising all Australian Dental authorities, he must also have advised most orthodontic publications because in the records there is a response from Dr Arthur Lewis of the *Angle Orthodontist*. The Editor of the *British Dental Journal* wrote seeking an exchange of Journals.<sup>15</sup>

John Moffatt became the next Editor of the Bulletin, when the Queensland Executive took over after the 2<sup>nd</sup> ASO Congress in 1964. In a report prepared for the General Meeting of the Society at Surfer's Paradise in 1966 at the end of his term of office as Federal Secretary, Moffatt referred to the format of the Bulletin as 'designed for the purpose of a gradual transition to an *Australian Orthodontic Journal*'. He reported on the content of the Bulletin during his term of office. As well as 13 articles of clinical relevance, there were abstracts, branch reports and minutes of meeting. The membership register was published twice. The registration as a periodical had reduced the cost of postage and an application for exemption from sales tax had proved successful. The copy run was increased from 160 to 200, which caused a deficiency in the Statement of Accounts of the Society. Not for the last time was the cost of producing the publication to prove a concern.

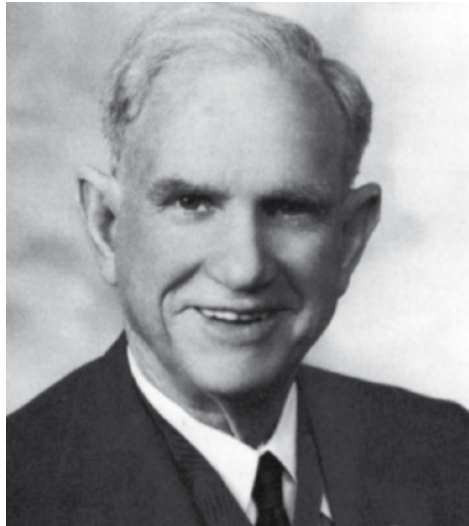
John Moffatt recommended that serious consideration be given to the establishment of an *Australian Orthodontic Journal* within three years and that a special committee or 'Journal Board' be appointed to plan such establishment. The new Executive took note. At the Executive Meeting, held in May 1966, it was decided, due to increased production costs to recommend to the upcoming General Meeting that the journal element of the subscription be increased "to provide scope necessary for its transition to the status of a Journal". Also at that meeting, Leave of Absence provisions were included in the Constitution and, consequently subscriptions were to be reduced to 25 per cent. This was to defray the cost of producing the Journal. No option was provided for those who might have felt that they could do without the publication altogether. After the General Meeting, a postal vote was carried out to pass an amendment, agreed in principle at the meeting, increasing the journal levy and also to provide for the introduction of decimal currency, to \$1.50 per issue.

After seven issues of Volume 4, the quarterly sequence was interrupted and Volume 5. No.1 was printed in October 1966, with a second issue the following January. In April the following year, the amendments both to the Constitution and the By-laws, providing for the birth of the Journal were passed. The 1967 Constitution carries these amendments and, on the back cover, a brief history of the development of the document.

In June of 1967 Volume 1 Number 1 of the *Australian Orthodontic Journal* finally saw the light of day, with John Moffatt, quite naturally, appointed as editor. The last words of L.M. Smart's Presidential message in that first issue say it all: "Congratulations to the Editor on his creation—the *Australian Orthodontic Journal*."

In his first Editorial, Moffatt linked the History of the ASO to that point with the gestation of the Journal, beginning with the roneoed sheets from the first Executives. And he added, 'Surely must it grow in size and strength as other members accept the torch ... its success will depend largely upon the contributions

of the members themselves'. Actually the first issue of the Journal was little different from its predecessor. Same size and print style, same printer, four pages shorter, same price \$1.50, and almost identical notes from the editor, promising three, not four, editions yearly. For the first time there were three pages of advertisements. Nothing really had changed, certainly not the vision. Viewing all the early Bulletins together, one is struck by the continuum of development as each Executive made its contribution. This added weight to Moffatt's words—the Society and its publication did indeed grow in tandem, the one nourishing the other.



John Moffatt

Fees for the production of the Journal were doubled to \$12 annually for 1970. Neil Armstrong was appointed assistant editor and J.K. Hawkins, R.H. Wallman and G.D. Kirkness, subeditors in 1972. Keith Godfrey continued scanning articles for the Journal.

His position was placed in jeopardy when he had a 'difference'<sup>16</sup> with the ADA, which prompted his resignation from that organisation. This meant that his ASO membership was forfeited. He still wanted to continue his scanning service. Henry proposed, and Reading seconded, that he be made an Honorary Member of the ASO to allow him to continue this work.<sup>17</sup> This had to be refused because such a recommendation had to come from a branch not an individual. A similar tactic, this time successful, had to be employed much later to secure the services of a new journal editor.

Moffatt continued to produce the Journal for eight years, the need for contributions became the greatest problem of his time as Editor. In preparation for his report to the Executive,<sup>18</sup> Moffatt had written to the US Director of *Library Services Literature Index*, to ascertain if the Journal's standard was adequate for listing. The reply was that it was of a high standard compared to the ADA journal/publication and that it was indeed considered worthy of listing.<sup>19</sup> At this meeting, Moffatt's difficulties with rising costs were discussed. Council felt the matter should be dealt with as 'an emergency'. He presented a further report to the Executive in 1973,<sup>20</sup> in which he outlined the current situation and listed the material in the three issues of Volume 3, which included 15 articles, mainly from presentations to Congress or State Branch Meetings. He mentioned that he had felt the need to appoint a Business Manager and suggested J.V. Wilkinson. Because there were enough funds available at that time, he saw no reason to increase the Journal component of the subscription before the next General Meeting in mid-1974. He did not go so far as to say the Journal was on secure financial grounds, because production costs were due to rise. He was concerned that advertising revenue was affected by the fact that all

ASO members also received the ADJ, which, because of its much larger circulation was more attractive to the Dental Houses, which were the main advertisers. His last edition was number 5 of Volume 3, produced in February 1974.

By this time external subscribers had reached 16, and the Journal had been recognised by the Bureau of Library Services of the American Dental Association. The 6<sup>th</sup> Orthodontic Congress was to take place the following August in Sydney. With the usual change over of all Executive positions, this time, there also came a change in the editorship. At the General Meeting in 1974, Moffatt reported to the membership that he had had for varying reasons had to cancel two editions and so Volume 3 had been only five editions, not seven as required. This Volume contained 11 papers presented at the last Congress, 15 contributed articles as well as literature reviews etc. The financial affairs of the Journal had been well handled by the new Business Manager, John Wilkinson. Moffatt was made an Honorary Life member of the Society on this occasion. Later in the minutes, it is recorded that a “suitable message of concern and appreciation” was to be sent. He must already have been in poor health. He retired from practice at the same time, but continued to serve the Society and wrote the Pamphlet ‘The First Fifty Years’ which became, by default, the only record of history for a long time. He died after a long illness in 1985.

The new Editor was another Queenslander, an academic from the University of Queensland, Terry Freer. His first major decision was to publish only twice yearly. He changed the format from two columns per page to only one. He also changed the system of appointing subeditors, so that one would be appointed from each State Branch after consultation with the Federal Councillor from that State.

In 1977 there were 249 subscribers, and the fee remained \$12 per year. For the 1977 General Meeting, Freer was able to report that he had published five issues. There had been an increase both in external subscribers and of articles submitted from overseas. He had been working hard to increase advertising revenue. Advertisers had taken advantage of the colour printing now being offered. He paid tribute to the work of John Moffatt, his predecessor, and of John Wilkinson, the Business Manager.

Over the preceding 30 months, the Journal funds had fallen by about \$500. For some time it had become apparent that the Journal component of the members’ annual subscription had become inadequate. The rise in the subscription was not to become effective until the New Year so an issue had to be deleted. In spite of this, in September, the Editor reported to the Treasurer that the deficit was still mounting. Advertising revenue was not thought to increase, so a special grant from the Executive was provided.

Terry Freer indicated, at the 1977 General Meeting, that he would continue as editor only for a few more years and relinquished his position in March 1979. Council in reviewing the situation resolved that the Journal either be improved or discontinued.

Darryle Bowden, the new Editor, was, according to the Federal Treasurer<sup>21</sup> charged by the Council with elevating the Journal to ‘top status’, whatever that might mean. Most of the editions during his stewardship contained thoughtful editorials, which

went beyond the day-to-day issues facing the Society. They included a plea for more precise methodology to be employed when researching clinical material for publication, the pressing need for a permanent home for a secretariat and also the need to review the graduate orthodontic educational experience to include a more meaningful contribution from the immediate postgraduate years.

He proposed a change to the A4 format, which was becoming standard in scientific journals, and was better liked by advertisers. This eventually occurred in 1982 with Volume 8 and remains in use today. He reverted to the use of two columns each page. One of his immediate problems was the increase in printing costs of the new format, necessitating an increase in the Journal subscription. The Executive was supportive, wanting a high quality presentation.

Bowden reported to the General Meeting in 1982, that the formation of an editorial board to share the workload had lightened his own burden but, on the negative side, the expected increase in advertising revenue anticipated with a new format had not happened. He asked Council to approve a sizable increase in members' contributions.

In 1981 the Journal had indeed made a real loss of about \$2000 and the Journal component of the subscription was increased to \$25, making it over half the Federal component. There was concern that more cost increases were likely to occur in the near future. Bowden became Federal President in 1982 adding immeasurably to his workload.

The following year, at the Society's General Meeting, he tendered his resignation as Editor and, in no uncertain terms, unleashed his frustration on the membership for the lack of manuscripts. Referring not only to himself but the whole of his journal team, he protested, that "all our combined efforts have been betrayed". Even the State Liaison Officer had resigned out of frustration at 'the lack of State Branch cooperation'. Of particular concern to him was the decision taken at the preceding General Meeting in Hong Kong, rescinding the motion that all papers read at Congresses were the property of the Society and that speakers should provide a copy for publication. Because such a clause was a disincentive for overseas lecturers, the decision was that this was not to be enforced. The 9<sup>th</sup> Congress report read:

Due to an oversight, right to publication of all lectures was not made a condition of acceptance of lecturers. This was fortunate as all three principal lecturers said that such condition would have barred them from participation in the Congress. A change to the Society's Constitution seems to be due in that regard.

The result of this was a steep decline in the amount of copy presented to the editor. E.C. Crawford, Federal Secretary, wrote to the Council,<sup>22</sup> to the effect that the viability of the Journal would continue only if the replacement editor has the experience and capability to continue publication of the Journal and, more importantly, if support is forthcoming from members in the form of original articles and publishable material. 'The alternative is for the Society to seriously consider terminating' the Journal. He went on to say that no papers had been received, as

required by the Constitution, since March 1980. On the other hand Wilkinson, the Business Manager<sup>23</sup> reported two years later, "On the brighter side manuscripts are coming in for publication ... noted a diversification of papers presented and a continuing high standard of scientific articles". When interviewed for this history, Bowden denied that he received insufficient copy.<sup>24</sup>

Bowden's resignation was to take effect after the publication of the last issue of Volume Seven. John Wilkinson retired, at that time, having just been appointed ASO Treasurer, his position being taken by David Ellett. The Council had difficulty in finding a suitable replacement for the Editor. Bowden suggested that unless this could be done quickly, the Journal should be wound up. He again cited the difficulty in obtaining sufficient material. At this stage each issue of the Journal contained three articles of a scientific nature as well as book and thesis reviews and reports from the branches. Recent articles from other Journals were also reviewed. All told about 50 pages. Bowden continued as editor for two further issues in Volume 8.

He was finally succeeded by Barry Mollenhauer, who had been producing, for some time, a Newsletter for the Begg Light Wire Study Group. His first issue contained a very nice tribute to the departing Editor, who he stated, as well as holding down this difficult post, was simultaneously the President of the ASO, director of the University of Melbourne Child Growth Unit and a frequent contributor to the literature as well as maintaining his own private practice.

Barry Mollenhauer, as Editor, departed from the previously, and more generally, used format of including editorials in each issue. Instead he included a 'clinical newsletter' covering a wide-ranging number of topics, not always with an identifiable theme. On assuming the position there was a backlog of issues. He caught up quickly. At the Council Meeting in November 1986, he was congratulated for so doing, and for the quality of the publication.

Mollenhauer, over the length of his stewardship, continually introduced changes in the technology he employed; changes, he said, designed to make for considerable savings both in time and printing costs. He was perhaps a little too ready to embrace the multitude of technological advances which computer technology was bringing to the process of printing at that time. These clearly held a fascination for him. An illustration of this was the highly technical nature of his reports to Council, and the number of new items he was able to persuade the Society to fund. He declined to apologise for his 'fetish' citing the argument that the Oxford University Press had folded, precisely because it had ignored technology.<sup>25</sup> Looking at that Institution's impressive list of current publications causes this author to wonder at the authority of this argument.<sup>26</sup>

At the same time, he found it necessary repeatedly to change the printing companies, whose responsibility it was finally to produce copy from the electronic data he provided. At one time four consecutive issues had a different printer. All resulting in delays. Mollenhauer was able to report that Margaret Seward, Editor of the *British Dental Journal*, had written to him, complimenting him on the standard of the *Australian Orthodontic Journal*. 'We have been to a couple of technological

conferences on computerisation in publishing and I was so grateful to have your journal to show the experts. They were impressed and so was I.<sup>27,28</sup>

Towards the end of his term, he also reported to Council, that he was able to have some of his own material reprinted in the American Journal of Orthodontics. This included one of his clinical Newsletters and might also include, in the future, an editorial he had written on 'Chaos Theory and Fractal Geometry', a subject of considerable general interest at that time and which Mollenhauer opined "will undoubtedly have tremendous repercussions in clinical theory and research". He was of the view that an increase in overseas subscriptions would result.<sup>29</sup>

It seems he was not particularly good at delegating some of his editorial functions, refusing for a long while to employ an editorial assistant, which the Council had suggested for him.<sup>30</sup> He cited the comparative ease he experienced, performing the same function for the Newsletter of the Begg Light Wire Study Group. This was despite the fact that he reported that his role required the minimum expenditure of 20 hours weekly, rising to 40 in the month of publication.<sup>31</sup> Mollenhauer at one stage actually took over the typesetting completely himself.<sup>32</sup>

The inevitable result was that editions were considerably delayed. This, as well as upsetting his local contributors, eventually resulted in the almost complete elimination of overseas subscribers, which he had reported numbered above 70 in the early stages. Nonetheless during his stewardship, the journal component of the annual subscription remained unchanged, even though the content was increased to six or seven articles and the size to about 80 pages. The auditors had recommended that it be raised, but Mollenhauer resisted this.<sup>33</sup> The ASO maintained its commitment to the Journal to the extent that an amount of \$50,000 was handed over to maintain its operations.<sup>34</sup>

Mollenhauer's last edition, after seven years, was Volume 12 Number 2, scheduled for publication in October 1991. In his last issues, he included tribute to the members of the editorial team, who he said had been such a help to him, and who had served the journal for such long periods of time. These included David Ellett, longtime Business Manager, David Fuller who had done most of the book reviews, Hugh Aitken (recently deceased), Peter Scott and Stanley Jacobs.

Unlike his predecessors, there was never a complaint about lack of copy. Mollenhauer claimed in the report referred to above that the AOJ was one of the 'Top Ten'. Nevertheless the reality was that all small society journals, and the AOJ could never be considered more than that, suffer from the desire, all authors have, of seeing their work in the more prestigious productions. For most of the life of the *Journal* there have been three overseas journals, which clearly hold those leading positions.



Barry Mollenhauer

Mollenhauer advised of his intention to resign and a new editor was due to be appointed at the 1991 General Meeting. Mollenhauer asked that his resignation take effect after the publication of the October 1991 issue, so the announcement of the new appointment was delayed.<sup>35</sup>

His place was eventually taken by Brian Lee. There had been only one applicant. He wrote a letter in support of his application, which was published in the ASO Newsletter in August 1991. As well as listing his many qualifications and the support he would be able to use, he added:

I would see that any problems with late publishing are overcome, as they are resulting in criticism from both contributors and advertisers... contributors may be able to obtain earlier publication overseas... this is lamentable, as it is very important for Australian Research to be identified clearly in an Australian Journal.

He maintained the previous format, with the difference that each page had three not two columns. After his appointment, it was discovered that Mollenhauer actually had four journals due to be published before October 1991.<sup>36</sup> Mollenhauer asked to be allowed to finish his work, and promised to publish all four before mid-1992.<sup>37</sup> The frustrated Council decided to set a date, beyond which Mollenhauer must forward all material to the new Editor. There was actually a motion moved at Council that would force him to do this, but it was withdrawn when Lee assured Council that he would be happy to work with Mollenhauer.<sup>38</sup> Liz Swaby, attending her first Council meeting, was alarmed at the hostility of the general discussion and wondered just what she had got herself into.<sup>39</sup> Despite such acrimony, Mollenhauer was honoured by being given the accolade 'Editor Emeritus' by Council on his retirement.<sup>18</sup>

Lee's first editorial is in stark contrast to the wordy ramblings of his predecessor. Barely two-thirds of a page in length, its emphasis was that the Society must have a policy supporting Australian research. He decried the fact that 'government policy has led the Therapeutic Devices Branch of the Commonwealth Department of Health to be moving away from dental research. Once a strong supporter of orthodontic research, it would only offer its services on a 'user pays' system, making it prohibitive to most young researchers. Another problem, which beset the researcher, was a "lack of a forum... Orthodontists have been encouraged to publish overseas... by the lack of regular publication of this journal. It is up to us to remedy this situation...".<sup>40</sup>

In his first report to Council<sup>41</sup> Lee expressed his gratitude to Professor Freer for "passing on the benefit of his experience as an editor" and to his editorial team, for their help to the "new-to-editing editor". He emphasised his commitment to getting the journal back on time, and to try and rebuild circulation. The following year<sup>42</sup> he was able to report that publication was now on time.

He also claimed that the scientific content and standard of writing had been raised significantly. He praised the new format, which he felt was much more attractively designed. He had wanted to incorporate more colour into the Journal. It was a very up-beat report. Overseas subscription quickly returned to 140.<sup>43</sup> At the same

General Meeting in 1993, Michael Nugent, the Society's Treasurer, looking at the situation from a differing perspective, made the point abundantly clear that "the real run down in ASO funds has been caused by problems associated with the *Australian Orthodontic Journal*". The Executive reported that they had recently paid the previous Editor \$40,000. He said the Journal levy was nowhere near the real cost of production. Each issue actually cost as much as \$50 per member to produce, although advertising offset this to some extent.<sup>44</sup> Council felt they had no alternative but to increase the levy from \$30 to \$100. This and subsequent increases made the Journal self funding right through Lee's editorship even though costs increased hugely during that time.

At this stage 700 copies were printed. Thought was given to sending a copy to all ADA members. This would cost \$20,000 for 5000 extra copies and doubt existed that extra advertising revenue would be achieved.<sup>45</sup> Lee asked a colleague, Geoffrey Hall, to take fresh look at the possibilities. Hall felt that to circularise all ADA members was not feasible, but that Asian orthodontists and postgraduate students in North America might be a better target.<sup>46</sup>

It was very difficult for the Executive to maintain a watching brief over costs for such an on going enterprise. Income and the bills come in irregularly. No amount of forward budgeting seemed to have a restraining influence. One was well aware that the Editor is really giving a tremendous amount of his time, at what is really a very nominal cost. Lee was to report that he gave a day each week to the task. Remuneration for the editor was discussed.<sup>47</sup> He had worked without recompense for the last three years. Council decided that a figure of \$4000 per issue, beginning with the issue just published, would be appropriate. This could be afforded within the budget. Armitage reported that Lee had given an undertaking, that subeditor's fees would remain constant.

All reports from the Victorian-based Executive (1993-96) mentioned that the Journal was self funding, In his last Treasurer's report (1996), Armitage even mentioned that the levy could be reviewed. To produce the Journal cost \$23 per issue aside from all the related costs.<sup>48</sup> Lee had reported that the AOJ was the most expensive of all comparable publications.<sup>49</sup> (The only comparable publications are other small society journals and the costs are similar, many struggle to survive.<sup>50</sup>)

The Journal has always published its own discreet set of accounts. This author has had access to all those balance sheets and has studied carefully the accounts (and can well remember doing the same thing during his term of office) and is still unable accurately to assess the complex nature of the ever-rising costs and their effect on the bottom line.

During this time the main concerns were held for the rapidly escalating costs for subediting which had not been a function of earlier productions. In 1997 some of the Subeditor's fees equalled the honorarium paid to the Editor.<sup>51</sup> Lee's contention was that due to this attention to prose, the quality of the articles was much enhanced. The fact that the Subeditor was a close personal friend of the Editor was no help to the Treasurer or the Executive.

A 'new look' format was begun with Volume 15 (10/1997) which produced much favourable reaction. One of Lee's first improvements was to require that all articles be fully refereed before they were accepted for publication. Although this process could lengthen the time before authors saw their work in print, it did allay the concerns of many of his local contributors, who were aware that other Australian dental journals were by that time fully referred. He did this very quickly, appointing a large team of referees who were assigned to articles, where the subject matter matched their experience. The Executive recommended that a course be held for referees to ensure consistency. A breakfast meeting was arranged at the 1998 Congress.

Lee reported after a few years, that he had sufficient copy for a third issue each year. In 1996 he had 21 articles in hand and at two issues per year this meant a delay of 18 months before an author could see their work in print. This was a positive disincentive for authors to submit their work.<sup>52</sup> A third issue seemed sensible and was approved for 1997, but actually occurred the following year. How would advertisers react to requests to place advertisements in the extra issues? Advertising revenue had been lifted, since Samar Amari assumed the role of Advertising Editor in 1993, and made up a significant (about one-third) proportion of the revenue.

Lee closed down his Geelong office and moved the Journal office to the ADA premises, which he felt would lift the status of the journal. The rent factor was not really a consideration being about \$2500 yearly. A change of printer in 1998 proved unsuccessful and a new one had to be used, with the Subeditor also involved in the typesetting.<sup>53</sup>

Lee worked hard and travelled extensively to get high quality copy and to raise the profile of the Journal. Associate Prof. Michael Harkness agreed to become an editorial consultant, thereby commencing his association.<sup>54</sup> With Council's blessing an Editorial Review Board began to be formed.<sup>55</sup> Lee wrote to Dr Tom Graber for advice on appropriate candidates,<sup>56</sup> and recruited some international experts. These included Drs V. Kokich, K. Takada as well as Dr Harkness. Lysle Johnston was also approached and he said he would be delighted to assist.<sup>57</sup>

The Journal became involved in a dispute involving one of the Foundation's awards. These awards had as a requirement that they be in a form, suitable and available, for publication in the Journal. The reality was that there existed, for the postgraduate departments, an overriding imperative for publication in the most prestigious overseas journals with high ISI ratings. Funding for future research was highly dependant on this attainment. Lee was able to demonstrate that, in recent history, no publication of an award winning article had



Brian Lee

taken place or indeed been received. He must have been referring to the first Research Award because both Simon Freezer and Christopher Ho, recent recipients of the Begg Award published their material in the AOJ.<sup>58</sup> The Foundation had recently changed the rules governing these awards. Lee was concerned that any issues affecting the *Journal* ought to be discussed with the Editor before becoming official policy of the Society or any of its parts. He recommended that winners of Foundation awards be obliged to prepare a paper for publication in the *Journal* before any prize money is given. He was backed up by ASO President Olive, who took a very hard line in the matter.<sup>42</sup>

A tension will always exist between the desire on the part of researchers to see their material published in the journals with the highest repute, and the Society, which supplies much of the funding for that research. The current practice of giving the second half of the award only after publication of the material in the AOJ has seen the situation improve.

Additionally, the practice of attempting to have the same or similar articles published more than once in different journals was of concern. Lee actually suggested that the WFO publish, on its website, up-to-date lists of orthodontic articles worldwide, to prevent this happening. He went to a symposium for editors of orthodontic journals in 2000, held in conjunction with the joint International Orthodontic Congress and AAO meeting in 2000. The AOJ had a booth to more widely advertise its product. Lee was asked to chair one of the sessions. This spoke volumes as to the status of his work. The ASO paid for his fare, but the incidentals amounted to much the same figure.<sup>59</sup> This is now a biennial meeting and the editor's attendance is included in the budgeting.<sup>60</sup>

He reported extensively, in a subsequent editorial, on that meeting. It was attended by representatives of 31 of the 80 orthodontic journals published worldwide. He explained why many articles were submitted to several journals, how editors dealt with this problem, how the ISI rating system worked and how important it was for departmental chairs to have their work published in the more highly rated journals. Only two orthodontic journals had an ISI rating, out of 16000 scientific journals published worldwide.

At the present time, this has become to be referred to as Impact Factor (IF) and is a measure of the citations, in other scientific articles, of articles published in that journal. This was developed by Eugene Garfield, Founder of the Institute of Scientific Information, and now administered by a firm of publishers called Thomson Reuters. At this point in time, the AOJ does not have an IF, in part because it is not published frequently enough. This 'catch 22' situation is something the ASO will have to accept.

According to the current Editor, the IF is very biased, but unfortunately some university administrators and funding agencies, that don't understand the system, use the IF for funding and promotions.<sup>61, 62</sup>

Lee considered putting the *Journal* online, and increasing each volume to three issues yearly. Costs prevented this from continuing for more than the first year. He reported that half of the articles submitted to the *Journal* were coming

from overseas. Each issue contained eight articles and included abstracts of articles published in the other English speaking journals.

He requested that his fee be increased from \$4000 to \$7000 per issue in line with recent changes to the *Australian Dental Journal*, which continued to serve as a model. Council agreed to this request.<sup>63</sup> To offset this and other rising costs the subscription was increased to \$180 a year or \$90 per issue. In 2001 Lee again wanted to publish a third issue. This was calculated to require a \$70 extra call on members who opted against the idea.

Lee advised that he would resign in 2002 after 10 years at the helm.<sup>37</sup> For his last report, he paid tribute to his Advertising Editor, Ivor Lavrin, who was to go on and do so well on the Executive. Advertising revenue had increased to \$40,000 for each issue. Colour was used in some of the articles. There was a greater international awareness probably because the Journal was by then listed on PubMed, the publication of the US National Library of Medicine, which carries citations of biomedical articles worldwide. In this, it was to an extent a rival of the Thomson organisation.

He also praised Gillian Dunk, the Subeditor, for her superb grasp of the language and the way this had improved the articles and Dee Sanson, Editorial Assistant, who continues to work for the Journal today. Sadly, Journal funds had rapidly become depleted, yet again, so that by the time Lee resigned, a deficit position had again been reached.

There were two applicants for the position. Within the Council, views were evenly divided. Initially the President declined to record a casting vote. Council eventually decided that Dr Michael Harkness, already part of the Editorial Review Board, was the preferred applicant.

He had been an academic his entire professional life and had been Head of the Department of Orthodontics at the University of Otago for nearly 20 years, during which time he was involved in a wide range of research, both basic and clinical, and had published widely. An impeccable CV. The problem was that Harkness, as a Corresponding Member of the Society was restrained by the Constitution from taking the position. This was overcome simply by making him an Honorary Member of the Society and deleting from the Constitution that clause which preventing Honorary Members from holding office. The changeover was very smooth.

Harkness has continued the work of his predecessor. He published one journal in 2002. Copy was in short supply, so in 2003 the first issue was delayed a month. Unforeseen problems arose when he found out that the intellectual property residing within the artwork, on the cover, was owned by the daughter of the previous Subeditor. Extra costs were involved in its further use.

All was not bad news because it was found, during a visit to Taipei by President-Elect Ian Watson, that authors from that general area were keen to have articles published in English. More articles were submitted. He established a Journal Editorial Committee, which quickly attracted 10 members. The abstracts section was changed to concentrate on evidence-based Orthodontics. Changes to the timing of publication were made so as always to have six months between issues.

Harkness wanted eventually to publish quarterly. But this was contingent on copy. Changes were slight and incremental.

The amount of copy gradually increased with an expanding mix of original articles, a greater concentration on abstracts, including those from our own Congresses, book reviews, details of articles in other journals and thoughtful editorials. The thrust was towards the academic and the clinical and it mattered little that the amount of Society news, included in the Journal, was negatively affected by the success of the Newsletters produced first by John Fricker and then by David Fuller. As a result of Council's direction, these became more frequently produced. In fact Harkness referred to it as a godsend as this type of material acts as a disincentive for international authors.<sup>64</sup> The number and quality of the articles, which the Journal receives, is higher than ever. Authors the world over submit an ever increasing range of material.

Equally as impressive is the huge difference, made by the new Editor in the matter of finances. Applying basic cost-cutting measures, almost miraculously, the Journal's finances have had a complete turn around within 18 months.

According to the published accounts, for the last three full years of Lee's term the Journal made accumulated losses of \$87,195 and for the first three full years under Harkness, the profit was \$119,348. To this must be added the repayment of a \$50 000 loan from ASO funds to keep the Journal afloat. That's a turnaround of a quarter of a million dollars. It could well be said, that this says almost as much about the capacity for sound governance on the part of successive ASO executives during the 1990s, as it does about the editors.

Consideration was given to a once only elimination of the Journal levy, or the publishing of an extra copy. By then there was sufficient material for two more issues. The levy was in fact reduced to \$160. In order to further involve the Asia-Pacific nations, it was decided to send copies to the Presidents of the Asia Pacific Orthodontic Societies and to the graduate departments in that area. One hundred and fifty extra copies were printed. Very good feedback was instantly received.

Electronic publishing was also considered.

Unlike the *Australian Orthodontic Journal*, which is largely owned by its members and subscribers, the majority of scientific journals are printed and managed by one of the major publishing houses. More and more scientific journals are being published electronically, with some of the costs frequently borne by the authors or the institutions where the research is conducted. Generally these online publications are available only on subscription. Some journals have adopted the technique of only putting journals onto the internet two years after initial publication.



Michael Harkness

Harkness felt that there were a multitude of problems in this, and that our Journal was really too small. He was also concerned that the *Angle Orthodontist* had got into such severe financial difficulties, as a result of going online, that it was nearly abandoned. It lost so many subscribers. This *Angle Orthodontist* is one of the few orthodontic journals with little advertising, boasts that it is the only major Orthodontic Journal without a commercial publisher and now makes all its articles, since inception in 1931, available free of charge. This was underwritten by a major donation from the Angle Society.<sup>65</sup> Some years before, several of the Journals (AJODO, JCO EOJ) had begun to publish using CD Rom. This updateable method had many attractions, but was originally rejected on the basis of cost.<sup>66</sup> At the time of writing the AOJ has a CD-ROM with all issues up to November 2005 available to members and libraries.

The AOJ is now 'online' but only for ASO members. Placing a journal online for all readers imposes a serious financial risk. One of the potential problems is archiving. Whereas, printing on acid-free paper has a lifetime of 200–500 years, electronic information must be migrated to new platforms and formats each time the technology changes.<sup>67</sup> Another is copyright.

The AOJ has a readership, collectively, which represents a significant market and so is attractive to advertisers, who in turn make a significant contribution to the production costs of the Journal (about \$50,000 per issue). The current Editor feels that the attitude of advertisers to publishing the journal online is unknown, but having the same amount of advertising, as is currently included in the printed issue, in an online publication would look tacky.<sup>68</sup>

It has required much faith and perseverance over the years to maintain the essential support required by the Journal. Many times serious questions have had to be asked about its viability and the role it plays within the Society.

Blessedly, those who could see far ahead were proved in the end to have been right and that faith has been repaid. The AOJ is now the face of the Society throughout the world. It publishes a constant stream of material from a wide area, provides our graduate departments and students with a vehicle to present their wares and the orthodontists of this nation with constant review of their work and knowledge base.

## Endnotes

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17. Minutes Executive Meeting 3/1969
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19. Minutes Council Meeting 26/11/71
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22. Minutes Council Meeting 11/1983
23. Report to 1982 General Meeting
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26. Oxford University Press Website
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28. Minutes Council Meeting 11/1986
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30. Minutes Council Meeting 15/3/1987
31. Report to General Meeting 1990
32. Minutes General Meeting 1989
33. Minutes Council Meeting 3/1991
34. Minutes Executive Meeting 6/1990
35. Minutes General Meeting 8/9/91
36. Minutes Councillors & Representatives Meeting 9/1991
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39. Personal Communication 2008
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47. Minutes Council Meeting 3/1993
48. Minutes Conjoint Meeting 3/1996
49. Minutes Council Meeting 3/1995
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52. Minutes Council Meeting 9/1996
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61. Kurmis AP 2003, *J Bone Jt Surg* 85:2449-54.

62. Harkness' comments "Extension of the impact factor to cross-discipline journal comparison is also inappropriate. The impact factor, a simple mathematical formula reflecting the number of citations of a journal's material divided by the number of citable materials published by that same journal, has evolved to become one of the most influential tools in modern research and academia. The impact factor can be influenced and biased (intentionally or otherwise) by many factors. Extension of the impact factor to the assessment of journal quality or individual authors is inappropriate. Those who choose to use the impact factor as a comparative tool should be aware of the nature and premise of its derivation and also of its inherent flaws and practical limitations".
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64. Personal Communication 6/2008
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67. Switch to online journals under attack University world news.com/article
68. Personal Communication 24/4/2009

## Chapter 6

# Congress

Congresses are the life blood of the ASO. The Society was formed at one. It came of age by holding its first. It has had most of its General Meetings at one. Congresses have long since ceased to be the central tenet of continuing education for orthodontists. It could fairly be said that it's the social glue, which is the important element. The first one in Sydney in 1961 has already been discussed in detail, as have the next few. The General Meeting of the Society was not officially part of that first Congress and not included in its original programme. That situation was a quirk of the existing Constitution.

W. Stanley Wilkinson had given approval the year before, for an oration bearing his name to be given at each Congress, saying that "he was thrilled". He also approved of P.R. Begg being the first Orator. "Your choice of Dr. Begg to deliver the initial Oration is indeed a splendid one, as he is undoubtedly a world figure in Orthodontia."<sup>1</sup> This oration, which was open to the public, took place after morning tea on the first session. A news reporter was present and recorded his impressions of some of the comments made. C.R. Newbury was very concerned that some of the Orator's comments had been made public and could have been construed as views of the Society as a whole.<sup>2</sup> Norton commented to his successors in his Congress evaluation, that the Oration "could do with some further consideration—we don't want a repeat of the Begg act. While acknowledging that an oration must allow the person the usual freedoms, any entry into political fields ... must be avoided.". The first Oration appears not to have been published.

In the lead up to the First ASO Congress, there was considerable concern at the apparent failure of the Federal Executive based in New South Wales to invite contributions from orthodontists living in Victoria.<sup>3</sup> No Victorian orthodontist received the invitation, reported to have been sent by Robert Henry, the Director of the scientific programme. It turned out that contributors from Victoria had not been sought through the Branch but had been contacted on an individual basis.

John Binns had a similar concern for the 3<sup>rd</sup> Congress.<sup>4</sup> The Branch decided that those members speaking at the Congress should make presentations to the Victorian Branch prior to the Congress.<sup>4</sup> In the end this worked out very well. The Victorian contribution to the Congress was highly praised by A. Thornton Taylor in a summary he wrote of that meeting. They also wanted future invitations to contribute to future ASO Congresses to be made through the State executive.<sup>5</sup>

The review after the 1<sup>st</sup> Congress was compiled by the three members of the Executive.<sup>6</sup> Opinions were divided about disassociation from ADA Congresses in future. Some saw dangers that this could represent Orthodontics moving and being seen as moving too far away from mainstream Dentistry. Close connections with the parent body were very much in the long-term interests of the Society. Others took a more pragmatic view, that it was simply impossible to make time to attend all meetings and this had to be accepted. Reading over the records of ASO meetings, with their constant reference to affiliation with the ADA, one is struck by the lack of discussion at the time of the consequences of this separation. Other comments were that lecture summaries should be provided in the Congress programme. More time should be allowed for a discussion of the papers presented. Lecturers should present their material to their State Branch for appraisal beforehand (as had happen in Victoria). The silent clinics were thought excellent and should be further encouraged. Twin projection should be encouraged and moreover, practiced beforehand. Each state should provide a monitor for each session and there should be a session devoted to the monitor's reports.

There was a modest profit of £320. As was commonly the practice, it was proposed to publish the material presented at the Congress in the form of 'Transactions'. Shortly, R.G. Henry, charged with the task, reported on its greater than expected cost.<sup>7</sup> Henderson replied, offering three alternatives, which were to have the Society subsidise the loss, drop the project and publish the best articles in the Bulletin, or a third, which was to devote the funds (from the profit) to some other purpose, such as bringing a top-line lecturer out for our future Congresses.<sup>8</sup> Having regard to the small print run of 100 copies, Henderson was of the opinion that publishing the papers in the Bulletin was the best choice. He mentioned also that they had already invited Ballard to the 2<sup>nd</sup> Congress.

Congresses have always been open to members of the ASO and other bona fide orthodontic societies. Other dentists have been able to attend under special circumstances at different times. Those attending the 16<sup>th</sup> ADA Congress, who were not members of the ASO, were welcomed at the 1<sup>st</sup> Congress. Having regard to the fact that the ASO was in effect subsidising the Congress costs, a surcharge to the non-member to the value of a year's subscription was considered appropriate and was applied. This decision, in the view of Norton, writing to L.M. Smart in the lead up to the Adelaide (4<sup>th</sup>) Congress and to Geoff Brown on another occasion,<sup>9</sup> was never minuted, nor written into the Constitution. In as much as there were 97 delegates out of a total ASO membership of 121, it seems highly probable that there were quite a few non-members attending that first Congress.

The first time this issue was raised officially was in Perth, in the lead up to the 2<sup>nd</sup> Congress, when a specialist who was not a member wished to attend.

The Executive was of the view (quite wrongly) that there had been no non-members at Sydney. Initially, this request was declined by President Henderson,<sup>10</sup> citing the ADA's rules of affiliation as they applied to attendance at their own Congresses. This caused some disagreement. After a further inquiry of all Council members<sup>11</sup> which failed to produce consensus, attendance was allowed, for ADA members, only on condition that a year's subscription was added to the attendance fee, as for the previous Congress.<sup>12</sup>

Overseas visitors, who were members of their own orthodontic societies, were naturally welcomed. This has been revisited on a number of occasions. In 1969 and 1974 it was reaffirmed that non-ASO members could attend Congresses if they paid the one year's Federal Subscription as well as the normal enrolment fee.<sup>13</sup>

R.L. Taylor, Director of the Scientific Division for the ADA Congress, wrote to ASO President Kevin Henderson<sup>14</sup> "It is proposed to vary the programme from that of previous Congresses to provide for specialists as well as general practitioners." A meeting of the representatives of the specialist societies with the programme committee was planned. John McGibbon attended. Taylor was planning to include contributions from the various specialties to "balance out the programme". Most of the specialist groups held meetings attached to that ADA meeting. As a result of that meeting, Taylor wrote to McGibbon, seeking details of the proposed ASO Congress. Was it to be held conjointly; what facilities would they need; how long was it planned to be?

McGibbon wrote to all Councillors,<sup>15</sup> reporting that the members of the Executive in Perth wanted the Congress held about the same time as the 17<sup>th</sup> ADA Congress planned for Perth in May 1964. He wanted to ascertain their attitudes to issues around the timing. Should our Congress be held conjointly with that of the ADA, or at the same time or be completely separate? If at the same time, should members be required to join the ADA Congress? Should attendees at that meeting be admitted to the ASO lectures without restriction? Not surprisingly there was a diversity of opinion, but the majority supported the Executive and felt that there should be no compulsion to enrol for the general Congress. They felt most would attend both meetings. Norton had always thought that ASO Congresses should be half way between the ADA Congresses<sup>16</sup> but recognised the circumstances behind the decision. Kevin Henderson found himself in some difficulty because he was simultaneously Secretary of the ADA Congress.

The lecturers for the ASO's first Congress had been all local. For the second Congress, international lecturers took centre stage but there were several local contributions as well. Professor Ballard, the noted English academic, was invited in October 1962. The invitation included an offer to make a contribution to the travel expenses but requested that sources of funding in the UK might also be used. What would present-day orthodontists on the world lecture circuit make of that? Ballard replied that he might restrict his travel the subsequent year, so as to have more funds available. Eventually the ASO offered £500 towards the costs. Doubtless the ADA, who also invited Ballard to speak, made a contribution.

Ballard only found out six months later that R.M. Ricketts from California had also been invited by the Foundation to lecture at the Congress. Having two such

important lecturers required an extension to the proposed programme. McGibbon said that had they known of Ricketts invitation “we would probably not have asked Ballard”.<sup>17</sup> The Foundation also planned an extensive itinerary for Ricketts, involving lectures not only at both the ASO and ADA Congresses but also in the other capital cities. The local branch ADA Secretary protested to ADA President, John Wark that this would “materially affect attendances at Congress” and added “this Branch strongly urges the Federal body to use whatever influence it may have to arrange cancellation of the tour at that time”.<sup>18</sup> Small changes were made. Even today, 45 years after the event, those present at that time, remember the interaction between these two men. It made for a very stimulating discussion.

There had been no Patron for the first Congress but for the second, Professor Kenneth Sutherland, Dean of the Faculty in Perth, was invited<sup>19</sup> and accepted the accolade.<sup>20</sup> This practice continued for the next three Congresses. Milton Sims, newly returned from overseas, offered to give a lecture, but the programme was full. However, he did make a very significant contribution in suggesting that all attendees ought to bring some of their cases to future meetings. There were seven local lecturers. Financial assistance was offered by some trade houses and was accepted. Rocky Mountain Dental Products Co., as they had done for the previous meeting, paid for the printing of the programmes.<sup>21</sup> Support from ‘the trade’ has become a fixture of meetings ever since. Attending both conferences made for a long absence. Eight days of lectures placed a strain on one’s powers of concentration. For better or worse, this was the last ASO Congress piggybacked, as it were, on that of the ADA.

The Webb Executive formed their Congress organising committee almost immediately they took office in July of 1964. It was chaired by the ASO President, V.P. Webb and included E.J. Andrews, C.F. Winzar, R.F.H. Rickleman and J.B. Moffatt. Professor George Davies was asked to be Patron, Arthur Thornton Taylor to deliver the Oration.

The programme for the 3<sup>rd</sup> Congress relied very heavily on the principal overseas lecturer, Dr Hal Perry, who was asked to give nine lectures in a sixteen lecture programme. He was allocated 1½ hours for each but this was to include discussion time. The request was that 50 per cent of his material be clinical in focus. Although Perry was well received, this extensive programme was something of an imposition. The committee decided to appoint supporting lecturers to ensure balance in the overall programme. Eight Australian Orthodontists responded to the general request for papers. A forum designed for general discussion of all the papers was to close the programme. This received favourable comment in the post-Congress evaluation compiled by Webb. Presidents of the State Branches chaired the sessions. This Congress was held at the Gold Coast, somewhat remote from the homes of the local branch members in Brisbane, so home entertainment was not possible. All subsequent Queensland Conferences except one have also been held there.

In the early days, when there was more formality at functions generally, the Opening Ceremony was preceded by a procession in academic dress. This time there were to be twelve in the academic procession. As many of the members who

cared to, were encouraged also to bring academic dress. Attendance at the Stanley Wilkinson Oration set the tone for the meeting and was 'black tie'. There were usually three Social events. Home entertainment was normally part and parcel of the Social Programme. The final dinner, the Congress dinner, was an all male black tie affair.

The President of the Japan Orthodontic Society had written to L.M. Smart as Convenor of the first two Begg Courses, thanking him for permitting six Japanese orthodontists to attend the Second Course and also thanking him for the invitation to the 1<sup>st</sup> Congress back in 1961. He also invited ASO members to their Annual Meeting in 1965. The Executive responded with an invitation to Japanese orthodontists to attend the Queensland meeting. This did not happen but visits were promised to future Congresses. None-the-less the attendance was pleasing. Despite the concern that the requirement to bring cases may have been a disincentive, the meeting was a success. It made only a small loss of \$320.<sup>22</sup>

Although the trade houses had provided financial assistance to the Congresses already and were offering more (including fully set up typodonts to be used in the Begg courses), at the 3<sup>rd</sup> Congress, there was only one exhibit from a trade house. How this came about is unknown. Norton advised that J. Jennings from a well known supply house had canvassed most of the dental firms. None had expressed great enthusiasm for the heavy financial commitments, preferring to concentrate on the ADA Congresses. Norton had offered to arrange a table clinic, displaying a range of orthodontic supplies. This was welcomed by the Executive. In the post-Congress report, the comment was that this method of presentation was preferable to individual firms giving a trade display.<sup>23</sup> The same report commented on the value to the Society, of the contact made with the Commonwealth Bureau of Dental Standards through Albert Ware, who lectured at the Congress. Congresses make a forceful vehicle for valuable liaison.

After the Perth meeting, both Ballard and Ricketts went on to New Zealand. Perry was likely to follow suite, allowing the NZSO to obtain overseas lectures at what the ASO perceived as very low cost. It was decided to ask the NZSO to make a greater contribution to the costs. This met with a less than enthusiastic response. The matter was not pursued, when it was pointed out the major support that was given by New Zealand orthodontists to ASO Congresses.

J.C. Binns from Victoria complained that in the lead up to the Congress, there had been no consultation in the selection of overseas lecturers with the branches, only with their Councillors.<sup>24</sup> The same sort of complaint had occurred five years before, suggesting that Councillors did not always maintain the fullest communication with their branches.

For the Adelaide meeting in 1969 (the 4<sup>th</sup>) the number of trade exhibits increased to seven and so this meeting could be considered to usher in the start of the Trade (later referred to as Industry) Exhibition, which has become so much a part of present day meetings. No charge was made for the space used by these exhibitors but the recommendation was that this aspect required more planning in future. No ASO representative was asked to officiate at the opening of the Trade Exhibit. The exhibitors received no official invitations and therefore had no idea of the

formality at the official functions or that dinner suits would be required on two occasions.<sup>25</sup>

The first four Stanley Wilkinson Orators were all orthodontists. The chosen Orator for Adelaide, R.S.D. Gargett, the first orthodontist to practice in Western Australia, had to write and explain that as he “was a product of the old diploma days” and therefore had no university degree, and so had no right to academic dress. Whether he did wear some is uncertain, memory being so fragile. Professor A.M. Horsnell accepted the position of Patron. The practice of appointing patrons was shortly discontinued.

Dr Perry provided advice about possible overseas lecturers after, in short succession, Charles Tweed, Reed Holdaway and Howard Lang declined invitations. Tweed, who at that stage was over 70 years old and in poor health, was asked to deliver seven lectures, each of 90 minutes. Eventually the choice of a much younger man was made. He was Charles Burstone. The ADA offered to pay half his expenses, so that he could give lectures to a general audience in several venues throughout Australia. This arrangement, which was also attempted on some future occasions, allowed the Congress to run at a slight profit.<sup>26</sup>

In preparation for his lectures, Burstone sent a series of notes to be circulated to the delegates. Apparently, he was expecting some homework from his audience. The notes were very detailed and were designed to assist in understanding the complex nature of the mechanics Burstone had developed. Burstone, who was asked to give five lectures, offered advice about scheduling presentations to maintain a theme throughout the programme. He was supported by three other principal lecturers. Two were from South Australia, Dr Tasman Brown, an anatomist, later to become Patron of the South Australian Branch and P.R. Begg. Albert Ware from the Commonwealth Bureau of Dental Standards was asked to speak again, reinforcing the Society’s connections with the Bureau. Seventy two delegates attended. Delegates were asked again to bring two interesting cases, but there was no suggestion of compulsion. There was a two-week Begg course immediately preceding the Congress. Pre- and/or post-Congress courses have since become regular fixtures.

Many of the papers from the planning of previous Congresses remain on file, but a specific post-Congress report was written to help those Congress organisers who were to follow. The preparation of post-Congress reports became an established practice, and these have been an excellent source of information concerning the development of Congresses. Points which were mentioned included that discussion leaders (a suggestion from the 1<sup>st</sup> Congress) served little purpose, in fact tended to “inhibit discussion”. Silent clinics were considered very useful. It was important to invite contributors personally. Only one American Supply House had been invited and this should be increased. It was recommended that the morning of a middle day be reserved for the General Meeting, to be followed by sport in the afternoon.

The final dinner, previously restricted to members and therefore really an all male affair as there was only one female Full Member at that stage (Ailsa Hyland), was changed to a dinner dance, to include more participants and their partners. L.M. Smart, who did not like the male dinner format, said “he may have had

something to do with that".<sup>27</sup> However, the wives complained that no arrangements were made for any day time entertainment.<sup>28</sup>

R. Moyers and W.R. Proffit, the latter on sabbatical leave in Adelaide and making the first of his many subsequent visits to Australia, were the principal lecturers for the next Congress. Also, this was the first occasion when the Orator was chosen from outside the orthodontic fraternity. The orator chosen was Professor G.J.V. (later Sir) Gustav Nossal, Head of the prestigious Walter and Eliza Research Institute [and] who was to become "Australian of the Year". Since then, Orators have come from all walks of life and there have been only two further orthodontists (Norton and Sims). By now the social programme had been standardised with one evening set aside for an informal occasion. This one was held in a wool shed, most in keeping with Australian Tradition. Lectures were delivered by the first three recipients of grants from the Foundation.<sup>29</sup>

A seeding fund of \$1000 was given to the organisers for expenses incurred during the planning. This practice also became standard. The 5<sup>th</sup> Congress made a profit of \$2,700, even though a promised Japanese contingent did not arrive. Prof K. Enoki had indicated his interest in bringing some colleagues and had wanted to present a paper.<sup>30</sup> A report from the 5<sup>th</sup> Congress was prepared and added to that of the previous Congress, but could not be found.

For the next Congress in Sydney, despite frequent prodding from the President-Elect during the previous term, the 6<sup>th</sup> Congress Committee was not set up until quite late.<sup>31</sup> R.Y. Norton was chosen to be Congress Chair and W. J. Harvey Chair of the Scientific Committee. P. Kinsella and N.J. Cox were directed to investigate possibilities for an overseas lecturer. The principal lecturer, chosen on the advice of Dr T. Graber, with whom he co-edited his well-known text, was Dr B. Swain, a devotee of the Begg technique. At that time it appears there was considerable pressure for such a lecturer to be invited. He was to give four lectures. The obligations on the lecturers at that time were that three copies of their material were to be supplied. Publication was up to the ASO, otherwise within 60 days, ownership reverted to the author. The practice was continued of having State Branch Presidents chair the daily sessions.

The decision was taken to have a five day meeting, with the General Meeting on Wednesday in the morning, followed by sport in the afternoon. The Trade Exhibition and the silent clinics would be open on Thursday which had been set aside for golf. On the Wednesday there was to be a cruise on Broken Bay, followed by a seafood dinner at Prince Alfred Yacht Club on the shores of that bay, rivalling the shearing shed chosen for the previous Congress.

It was Norton's decision to call the final dinner, the 'Changeover' dinner, and it was to include some dancing and the presentation of the newly finished 'badge of office' to the new President. Home entertainment had been an integral part of the social programme. This could be expensive. As the available numbers varied, it was decided, as all states had been responsible for the staging of a General Congress, that the costs of this entertainment should be included in Congress fees, rather than being a burden on local State Branch Members. All the orthodontic postgraduate students were offered free membership of the ASO. This was a

prerequisite for Congress membership. The decision had been taken at the previous (1972) General Meeting that students would only have to pay 25 per cent of the normal subscription.

The Sydney Opera house had opened the previous October and the organisers were keen to make as much use of that glorious building as possible. It was found out that there was not a full range of facilities suitable for the planned 250 delegates at an opening ceremony. The Great Hall of Sydney University was chosen instead and all delegates were encouraged to wear academic dress. An article in the Journal advised that:

In Sydney's winter, the stone-walled and tiled floor Great Hall will make the wearing of a gown or hood a seasonal comfort, as well as adding to the colour of the occasion.<sup>32</sup>

As well as that promotional article in the AOJ, President Reading also wrote a piece he asked to be published in the ADA Bulletin, which emphasised the ASO's affiliation with that ADA, briefly described the operations of the Society and giving details of the programme planned for the upcoming Congress. The Chancellor of the University of Sydney, Sir Herman Black was selected as the Stanley Wilkinson Orator. Despite the fact that the Opening Ceremony had to be held elsewhere, the Opera House was shown off to great effect. Dame Joan Sutherland gave concerts that week and nearly 100 delegates chose to attend. A fitting finale to the Congress.

Notwithstanding Reading's letter to the ADA Bulletin, the matter of non-ASO members was raised again, with approximately the same decision. There was a request along the same lines as in 1964 from the Congress Committee to John Reading for a ruling as to who is eligible to attend.<sup>33</sup> A By-Law had been included in the Constitution in 1971 which provided for Congresses. It included the siting of the venue, which was to be co-ordinated with the movement of the Executive. However, this included no specific direction about attendance. It did say that:

The objects of the Congress shall be to provide facilities for scientific discussions, lectures, addresses, scientific matters and generally for the meeting together of members of the Australian Society of Orthodontists throughout Australia.<sup>34</sup>

The Executive decided that only members of the ASO and similar societies could therefore attend Congresses. Further persons may attend Congress if invited by the President or ASO Council. In the end, the decision as to whether non-members of orthodontic societies could be allowed was left to the Executive. This issue surfaced again in 1997 when the Australian Dental Industry Association requested information on the ASO policy on non-specialist ADA members attending Congress. The buying power of such a large number of people interested in Orthodontics was not lost on the industry.<sup>35</sup>

There was thought given to allowing general dentists to attend on the sports day, to visit the silent clinics, the table clinics and the Trade display. However, the representatives from the Trade were more interested in participating in the sports day. A large area for the trade display of 3000 sq. ft had been set aside. It made a considerable profit, completely paying for the hire of the Wentworth Hotel.

The overall profit nearly came to \$6000. Congress had reached such a size that the Australian Tourist Commission wrote requesting details. As for the previous Congress, a large contingent from Japan was expected and consideration was given to the provision of interpreter services. As for the previous Congress, the Japanese orthodontists did not turn up. However as always, excellent support came from New Zealand.

Phillip Kinsella, the Congress Secretary, advised that a Congress manual was to be prepared; that the reports of the previous two Congresses be included and forwarded to the organisers of the 7<sup>th</sup> Congress. The report prepared by Kinsella took the form of the complete minutes of the 17 meetings held by the Congress Organising Committee and post-Congress reports from all the sectional committees which constituted the various sections. The Adelaide report was pasted inside. The lost report from the 5<sup>th</sup> (Melbourne) Congress was referred to as being very helpful.

In the report, Norton recommended a composition for a Congress committee which should include a Chairman, Secretary and Treasurer, a Director of the scientific programme, a Director of the social (to include sporting) programme and one for the commercial exhibits. He also felt the ASO President should be an ex-officio member. The organising committee would lay down the guidelines, which then would be implemented by the various teams. He made the point that liaison with the President was essential because certain functions, the Opening and Closing ceremonies and the President's reception, were the President's responsibility.

They were concerned about deficiencies in the registration form and composed an improved one. Details about advertising in Journals including a press conference and proposals for administration were included with the suggestions. He suggested that representatives of overseas orthodontic societies should be afforded VIP treatment. Integration of the Trade Exhibit into the mainstream of events was thought important. Norton felt it should be introduced as an integral part of Congress from the Rostrum, following the first morning session. All these things eventually came to pass. Not for the first time, the value of the Silent clinics was mentioned. This post-Congress review extended to 14 typed foolscap pages.<sup>36</sup>

The Constitution had been changed in 1971 to create a position of Second Vice-President, who was to be from the State where the next Executive was based. The holder of this post was to be Congress Chairman and so had two full terms to carry out the necessary planning. This, added to the practice of forming a special Congress Committee and the preparation of post-Congress reports, appeared to set in concrete a sound organisational base for future Congresses. The report from the next Congress to be held in Sydney (the 11<sup>th</sup>) mentioned that all but one of sub-committee Chairmen had been involved in the 6<sup>th</sup>.

The timing of the next Congress (7<sup>th</sup>) was delayed so as to coincide with the Golden Anniversary of the Society's Founding. In this instance, ASO President Rickleman seems to have taken on the roles both of a Congress Secretary and Chairman, although the 1975 Directory lists Clyde Winzar, who was the Scientific Programme Director, as Convenor. The Committee, finding very poor cooperation from the designated airline (Ansett), acted as agents for the accommodation requests and so received commission from hotels, which helped their bottom line to the

extent of \$1,600. In the very comprehensive post-Congress report on this matter, Rickleman departed from his normal business-like approach by saying “but boy oh boy did this give us some headaches”. They reported that the 5<sup>th</sup> manual and 6<sup>th</sup> minute book were invaluable and added their reports and minutes to assist subsequent organisers.

Prof. George Davies, Dean of Dentistry at the University of Queensland, who had been Patron on the previous rotation, gave the W. Stanley Wilkinson Oration. It was not to be very long before he became somewhat less in the favour of the ASO, after suggesting that the orthodontic needs of the Nation could not be met solely by specialist orthodontists and that others could be trained to perform those functions (referred to in the section on third party providers).

There were four overseas lecturers, including Robert Ricketts and Raleigh Williams. During the planning, it was mooted that there be a specially appointed ‘Begg’ lecturer at each Congress, with half the cost to be borne by the Australian Begg Light Wire Study Group. The format, scientific and social, was essentially unchanged. Again there was to be no private entertainment because the Gold Coast was again selected as the venue. The Congress had over 170 delegates and made a profit of over \$10000, allowing the Executive to accept D.J. O’Donoghue’s suggestion to pass \$10,000 to the Foundation.<sup>37</sup>

Gordon Kirkness, in charge of the graduate programme in Perth, had been elected as Second Vice-President. He had also let it be known that he was interested in the role of Chairman for the 8<sup>th</sup> Congress, to which his position was supposed to lead. He wrote to the Executive<sup>38</sup> that he had accepted the position and advised that he had appointed P.A. Heagney as Secretary and R.G. Cook as Treasurer. No progress had actually been made by the time the new Executive took over. Contrary to the Constitution, the new President John McGibbon actually was made the Congress Chairman in the first instance, although this passed to Kirkness after McGibbon died. Because of this and the late start, the new Executive found itself in difficulties. It had wanted to hold the Congress two years after the one previous. However, it had to be a year later because 1979 was the 150<sup>th</sup> Anniversary of the first settlement of Western Australia and the feeling was that accommodation would have already been booked out. None-the-less, much good work was finally done. Kirkness went to considerable trouble to lay down a working relationship between his Committee and the Council. This was something that had not been thought through before and, other than by the Melbourne Executive (1982–4), not since. His suggestions, discussed elsewhere, were considered to allow too much autonomy to the Congress organisers and were rejected by Council.

The imaginative brochure for this meeting called “the 8<sup>th</sup> Edition” included many sketches from and references to Angle’s writings in his famous 7<sup>th</sup> edition. Angle’s 8<sup>th</sup> edition had reached draft form but he passed away before it could be finished.<sup>39</sup> The whole thing looked very professional. Kirkness had chosen a large offering of lecturers from overseas to be the principal attraction for this meeting. The lecturers, six in number, were limited to two papers each.

Kirkness arranged for a non-denomination church service with which to open proceedings. In arguing for this, he mentioned that it was standard for similar

meetings in medicine and law. There was another innovation, in that a series of discussion groups was organised as an integral part of the programme. Attendees were asked to decide which was of most interest to them. It was hoped that this would work better than attempting guided discussions of the delivered papers, which had to date, seemed unsuccessful.

There was a large Japanese contingent. This included a huge coterie of photographers who accompanied a Japanese lecturer, not one of those originally advertised. The committee had offered him an interpreter to translate and read his paper, but this was refused. It turned out he was almost impossible to understand and the hall was virtually empty when the lecture finally finished. The large contingent disappeared immediately after that.

Social considerations aside, the 8<sup>th</sup> Congress was not a success and made a large loss. Other than the delayed start to the planning, the reasons were twofold. Attendance, always a problem in the West, was much below expectation. There were 30 double bookings below that estimated, although single bookings exceeded expectations. Travel costs must have been an issue. Also, the budgeting proved to be way below the cost estimates provided by the contractors and suppliers as the event drew closer. Cook refused to compromise on quality, arguing probably quite wisely, that to drop standards would adversely affect this and future Congresses. In the final analysis, the loss was of the order of \$7000. The following August, the Federal Secretary was obliged to write to all Branch Secretaries that “the ASO Inc. now lacks the funds to operate for the remainder of the year.” To prevent a repeat of the occurrence further weakening the Society’s financial footing, a levy, referred to as the Congress Levy, was imposed,<sup>40</sup> to be added to the yearly subscription. This would have the effect of providing added incentive always to attend Congresses, the central feature of the ASO’s life, members having already partially paid their subscription for it. It remains in place to this day although overwhelmingly Congresses do run at a profit. The ASO has also continued its practice of providing seeding finance to the organisers. Congress finances are always separated from general ASO funds and this sum is always returned to the accounts in the wash-up after Congress, to allow for correct auditing. ASO President G.I. Brown stressed that to ensure proper financial control, the Congress Treasurer and the ASO Treasurer should be one and the same.<sup>41</sup> Brown complained that Congress organisers, past and present, had tended to become overenthusiastic and overlook the fact that their committee was subservient to the ASO Council.<sup>42</sup> In the lead up to the next Congress, as it became apparent that a healthy profit would ensue, thought was actually given to returning the levy to those who were attending. This did not happen.

Great difficulties were likely to occur if the next Congress was to be held in Adelaide, normally expected to be the host city. Appointments to the organising committee were late, probably due to the lack of continuity, caused by the death in office of the previous President. Timing was another issue. The dates that had been chosen conflicted with the Adelaide Festival of Arts, so that again all the accommodation would have been taken. The ADA objected to a later timing, as it would conflict with their Congress planned for Perth in May. An earlier time would have brought it nearer to the school holiday period and the very hot Adelaide summers.

The Constitution said that the Congress should be in South Australia, or one of the other states listed in the Constitution in a clockwise sequence, adding as a proviso, that “such sequence shall be maintained subject only to such variations as the Council may from time to time determine”. Despite this clear instruction, Hong Kong was chosen as the venue, much to the delight of the Hong Kong Tourist Association. They had lobbied hard when an offshore venue was first mooted. Many members,<sup>43</sup> the author included, were hostile to this movement off shore. It was the Australian Congress and it should be held in country. The reasoning behind the decision to look elsewhere which now seems so compelling was lost on those who resisted the move offshore. We missed an absolutely marvellous occasion.

The experience was very completely recorded by the organising committee. The practice of maintaining complete records of the organisational path of Congress seemed to have been lost in the West, after much of McGibbon’s records were thought lost. In actual fact, well organised files compiled by McGibbon, as well as those of Rickleman, stand out as some of the few clear and comprehensive records of the Society’s activities. Kinsella was surprised to find that his Minute book had survived. As had the records of the 7<sup>th</sup> in Queensland.

R.H. Wallman, who was Second Vice-President in the preceding Council, declined the Chairmanship (he was not able to attend the event) and it was accepted by B.W. Phillips, with B.I. Watson becoming his Secretary. This was a combination, which had already worked together on the Constitution under B.C. Crisp and who were to serve the ASO so well on the next rotation as President and Secretary.

The Hong Kong tourist authorities were at that time very anxious to promote their rapidly modernising city as a tourist and convention destination. The airlines were similarly inclined. Someone in the Adelaide team must have been born with superb negotiating skills. The airlines were persuaded to waive the fares for the three principle lecturers and the wife of James McNamara, who as well was to run a post-Congress course on the Frankel appliance. They also flew the organisers to Hong Kong on no less than four occasions. The hotel where the convention was to be held similarly waived accommodation charges. The target for delegates was 150 and in the final analysis 229 enrolled, with the total number attending exceeding 400. Part-registration for local delegates was permitted. There was an impressive list of lecturers.

There was a post-Congress tour to China as part of the organisation. This involved visiting a number of Dental Schools. Travel extensions for vacation purposes had frequently been arranged as part of Congress but other than a course conducted by Begg in his home town in 1969. MacNamara’s course was the first course to be arranged in conjunction with a Congress, a practice which has since become standard. The Congress made an excellent profit of \$44,000 of which \$20,000 went straight to the Foundation.

At the end of his Congress report, the clear winner to date, both in length and in detail, Secretary Ian Watson made a prophetic statement: “I feel the time has come for the ASO to relieve its Office Bearers of such demands and consider the use of

an Executive Director, machines, Congress convenors etc. It is time we stood up and paid for what we demand.”

During the General Meeting in 1982, the Constitution was changed again, to include in the governing Council, the Chairman of Congress as an ex-officio member. It made little sense that one should be a member of Council for one term, but excluded during the term when the Congress was actually taking place. This was also a way of ensuring the retention of more corporate knowledge for Council, as well as to provide for a four year lead time in planning Congresses. This had been the purpose of the change to the Constitution ten years before.

The Organising Committee for the next Congress, this time had begun their work early, well before the Hong Kong Congress. B. Mollenhauer had been elected Chairman. Not long into his term however, he had to resign, citing ill health. His place was taken by G.R. Dickinson, who at that point was Treasurer on the ASO Executive and also Congress Treasurer. This allowed a return to the situation originally planned by the Victorian Branch.

B.D. Bowden was a very hands-on ASO President and made full use of his ex-officio membership of the team, until he resigned nine months prior to the Congress. The occasional angst of his otherwise most successful tenure is discussed in the chapter dealing with that time. For this Congress, a professional Congress organiser, International Convention Management Services, was enlisted. The principal, Barry Markey, was well known in dental circles due to his organising of a yearly meeting of a dental group almost as interested in skiing as in their Dentistry. His firm has also been appointed to manage the 7<sup>th</sup> IOC in Sydney 2010. Employment of a conference manager greatly relieved the burden on the local orthodontists. Congress organisers tended to make less necessary the practice of preserving the organisational records of previous Congresses. Professional groups felt they had all the expertise necessary and were generally totally disinterested in this record. The author well remembers taking the comprehensive record, E.C. Crawford had kept from the 15<sup>th</sup> Congress, along to the group recently contracted to manage the 16<sup>th</sup>, only to receive the suggestion that it might better be taken home. The employment of Congress organisers is now accepted as normal practice. It's a sound business.

Bowden made it known that he had strong views about the running of the Congress. He clarified beyond all doubt, that the Stanley Wilkinson Oration and the President's Reception were the responsibility of the President and the Executive and not that of the Congress Organising Committee. Although he was happy for the “day-to-day arrangements” to be left in the hands of the Social Director. He felt that the Society was on show during conventions and he wanted everything done according to the highest possible standard all the way to ensuring who would be included and in what order they would take part in the academic procession.

He called together a special meeting of the Executive, Congress Committee and its Social Director,<sup>44</sup> to go through all the issues. Peter Horkin, Social Director, made it known that he was very unhappy with the duplicitous arrangements suggested by Bowden, who replied that there was already another Victorian member quite willing to take over the task. In the end, the meeting reached positive decisions. The minutes do refer to Bowden not being in favour of Academic dress, although

the rest of Council disagreed. Academic dress had always been worn at Congresses. The ASO tended to copy the ADA and in particular, the College practice of having a procession in full academic dress at the official Opening of the Congress, which usually included the Oration. This presented difficulties for the distinguished guests from overseas who had to include this bulky item with all their other luggage, including the ubiquitous boxes of slides. Melbourne is probably the most formal city in Australia and such protocol was considered important. Academic dress continued to be a feature of Congresses, but with progressively fewer in the official party wearing it. Towards the end, it became only the Executive. The practice nearly died out at the 1998 Congress when for reasons probably due to a lack of communication, the orator Sir Zelman Cowen came to the function dressed in a dinner suit but with no academic dress. The Chairman of Congress and the ASO President felt that it was inappropriate for them to wear their's and appeared on stage to a relatively shocked audience without their academic dress.

Delegate numbers were again high (180). On this occasion, the Stanley Wilkinson Oration was delivered by the Hon. Justice Michael Kirby CMG, at that time Chairman of the Law Reform Commission and recently retired (2008) Judge on the High Court. Well known for his extraordinary work ethic and his detailed research, for his topic he choose to advocate the registration and use of Dental Hygienists, the only time an outsider has ventured into the mystic world of dental politics. He was largely preaching to the converted.

It happened that the Congress coincided with Moomba, a yearly festival in Melbourne. The team promoted 'that March, Melbourne, Moomba, merriment and mirth were synonymous'. The format was by this time well established. A panel of overseas lecturers, one of whom presented a pre or post (in this case post) Congress course, a smattering of local talent, silent exhibits and a trade display. Added to this was a couple of formal functions and one less so: an afternoon off for sport. A comprehensive programme for partners and post-Congress tours.

The Congress levy resurfaced during the period of the next Executive. The comment was made that the Congress Organising Committee felt they had a constitutional duty to incorporate the cost of the scientific programme into the annual subscription thereby ensuring adequate funds for Congress. A close reading of the Constitution fails to support that contention, but the Congress organisers and Council saw no difficulty in supporting the necessary resolutions. It was decided<sup>45</sup> that: "Future membership subscriptions will include a Congress Component to meet the cost of staging the Scientific Programme of Congress." The figures from the previous meeting were to be used as a guide.<sup>46</sup> An amount of \$130 was arrived at. This funding began to be called the "scientific levy" and despite some resistance<sup>47</sup> has been part of the annual subscriptions ever since. It was increased to \$145 during the next Executive where it stayed until 2003 when it was increased again to \$180.

The 11<sup>th</sup> Congress was the beginning of the next rotation around the State Capitals. As soon as he had been appointed ASO President, Bowden had begun badgering the Sydney team to begin their planning. They had decided to hold their Congress in April 1986. In February 1984, the Chair of the Congress (W.J. Mackie) wrote to the President seeking approval for new proposals in order to facilitate the advertising

of a change of date and venue of Congress. The Regent Hotel, the chosen venue, was unfinished at the time it had been selected and when finished, was found to be inadequate. The Opera House was adequate for the functions chosen, but unavailable on the selected dates. In searching for a new date, attention was drawn to the fact that 1987 was the Diamond Jubilee Anniversary of the Founding. Mackie argued: "This would simplify the choice of colour schemes and logo involved in advertising the Congress". Therefore, they sought approval for a change of date to March 1987. Bowden replied immediately, saying it was Council's decision, not his to make. He went into much of the history and the general concern that there should be a Congress every two years. He promised to contact Mackie as soon as he had received the Councillors' responses. He finished his letter "I formally include this in the ASO archived correspondence again as background matters of precedent and hope, on reflection, you understand my motives". He had retreated into this somewhat pedantic mode on previous occasions, when he was dissatisfied with arrangements. Exactly what was in his thinking is uncertain, but he would rightly have been angry at the delay, having just begun the holding of annual meetings of the Society. So there was another three year wait until the next Congress.

The 1987 meeting in Sydney saw the first Arthur Thornton Taylor Memorial Lecture. The NSW Branch indicated that it would like to recognise his contribution<sup>48</sup> and had donated a sum of money. Council had accepted this.<sup>49</sup> The idea had originally been proposed by R.G. Henry. Council's action was ratified at the subsequent General Meeting.<sup>50</sup> The lecture was introduced by the author in the presence of his mother and extended family. Sadly Arthur Thornton Taylor had passed away just months before. Actually, it was a lecture in two parts, the first given by Beni Solow; the second by Bjorn Zachrisson (who also delivered this lecture in 2008). The donation from the NSW Branch funds a presentation to the Lecturer.

Since that time, two more named lectures have been added to the programme. The Victorian Branch provided funds and recommended that there should be a memorial lecture acknowledging the service of Steven Seward. This first took place at the Perth Congress in 1991. The P. Raymond Begg Memorial Lecture was included in Adelaide Congress in 1993. This had originally been proposed in 1977 to commence at the 8<sup>th</sup> Congress. Quite detailed plans had been worked out at that time. The lecturer was to be selected by a committee of three, comprising Begg himself, the Chairman of the Begg Light Wire Study Group and the President of the Australian Society of Orthodontists. The expenses incurred in bringing the lecturer to the Congress were to be born 50 per cent by the ASO and 50 per cent by the Begg Light Wire Study Group. Additional requirements were that the lecturer must:

- a. Practice the Begg light wire technique according to Dr Begg's teachings.
- b. Be a member of a recognised Begg Society.
- c. Be able to illustrate his lecture with cases classically treated.

This suggestion was temporarily pre-empted by the inauguration of the P. Raymond Begg Research Award in 1977.

This meeting saw the innovation of a poster display and manned table clinics. The NSW Branch donated a prize for the best clinic presented by either a student

or Provisional Member. The person in charge of posters, who stressed how space saving they were, suggested a similar prize in future for a poster display. Again this team produced an excellent report, which discussed among other things the need to establish parameters with the Congress organisers. There was almost total agreement that the employment of professional Congress organisers had become an imperative, although some felt there was to a degree, some loss of 'the personal touch'. Their charge of \$10,000 was considered value. Most of the comment included reference to a permanent secretariat, very much in the wind and their possible role in organising Congresses. There had been dissatisfaction with the level of service at the Convention hotels and the feeling was that this was something a Congress organiser ought to have been able to prevent.

The pattern from the previous Congress in Melbourne had been followed and most section heads mentioned how helpful their comments were. They took the decision "to make Sydney's meeting more friendly". Really they were just getting used to outside help. By this time, principal lecturers were offered far greater incentives than had been accorded Clifford Ballard. A first class air fare (which could be commuted to two cheaper fares to include their spouse, an honorarium of \$1,500, a per diem allowance and high quality accommodation. Lecturers for this meeting were again informed that the Constitution required all lecturers to submit their papers for publication in the AOJ, but added the rider "Certainly the Society does not wish to impose rigid restrictions in this field, but the Editor, Barry Mollenhauer, would be delighted to receive suitable material for publication."

The 12<sup>th</sup> Congress was held again on the Gold Coast. Overseas lecturers were Alex Jacobsen, Michael Schwartz and Lysle Johnston, the latter becoming a frequent visitor. There were eight local orthodontists contributing, including Simon Freezer who based his lecture on the work for which he received the P. Raymond Begg Research Award. By this time, the Congress or Scientific levy allowed ASO members to pay a subscription \$415 less than non-members.

## Increasing Congress Profits

The 13<sup>th</sup> Congress in Perth this time attracted an excellent rollup. The report to the General Meeting said that over 200 were expected and a profit assured.<sup>51</sup> In actual fact 232 delegates enrolled and there was handsome profit exceeding \$25,000. Subsequent to this, there was a change in the Congress accounting, such that the funds collected by the levy were immediately transferred to the Congress accounts. At the time the accountants noted:

As a result of a change in accounting policy, details of which are stated..., a retrospective adjustment of \$150,438 has been made to the Accumulated Funds at 1/1/1990. This amount represents surpluses arising from the Society Congresses held prior to 1/1/1990. Whilst we have been able to verify the existence of this surplus at 1/12/1990, due to lack of proper accounting records and information, we are not able to determine whether this amount represents the total surpluses arising from previous Society Congresses<sup>52</sup>.

In 1992, it was decided that Associate Members need no longer pay the Congress levy as part of their annual subscription, but they should pay an amount equivalent to the levies that Full and Provisional Members had paid plus the normal Congress fee should they wish to register.<sup>53</sup>

The 14<sup>th</sup> Congress, this time held in Adelaide, attracted nearly 300 delegates and produced a huge profit of \$127,000<sup>54</sup>. \$50,000 went straight to the Foundation. Significant changes occurred for the 15<sup>th</sup> in Melbourne. An auxiliaries programme was instituted for the first time. Over 200 registered. Inclusion of such a programme, always part of AAO Congresses, was first suggested by Noel Eberhardt<sup>55</sup> and had been considered by Council for the previous Congress but rejected.<sup>56</sup> Presentations by a well known management consultant were the backbone of this programme.

A request had been made by the Executive to the 15<sup>th</sup> Congress Committee to work with a zero budget to reduce costs to members. When this had been put to the Congress committee, they requested that the ASO underwrite the Congress by \$25,000 in case it should make a loss. Despite this decision, the profit was still nearly \$50,000. Three years worth of levies made up part.

It was in the lead up to this Congress that the Australian Dental Industries Association attempted to assume responsibility for the industry display. This had become big business. Their idea was to act as a type of sub-contractor, relieving the Congress committee of much of the administrative work and even more of the profit. M.W. Shearer advised that this move should be and was being resisted. R.J. Pedley found the same pressure in Canberra two years later.<sup>57</sup> They also contacted the ASO<sup>58</sup> requesting information regarding attendance of ADA members at ASO conferences. They clearly saw this as an opportunity to expose general practitioners to the range of orthodontic supplies available. At this stage, general practitioners were being encouraged, through short courses, to undertake quite complex orthodontic treatments.

A tandem lecture programme was also instituted, to include such things as a Manufacturers forum, Research abstracts and Free papers in which overseas respondents had expressed interest. Staging simultaneous programmes was standard practice in most major orthodontic meetings world-wide and was considered worthwhile for the ASO. It was not an overwhelming success and was used only on one day at the next Congress, although it was tried again in 2006. Attendances were at record level. Many overseas orthodontists enrolled. This according to Congress Chair E.C. Crawford, greatly helped the bottom line.

## A Successful Format Refined

By now the style and format of the ASO Congresses was established. Like Topsy, they continue to grow. Over 1000 people are now involved and the budget approaches \$1,000,000. Numbers have been greatly increased by the addition of the auxiliaries programmes. These programmes were initially heavily subsidised by the general Congress. For the 16<sup>th</sup>, the number of Orthodontists attending was equalled by the Auxiliaries. T.J. Freer argued that the auxiliaries programme should be self funding.<sup>59</sup> He was also concerned the lunches were a waste of time.

Congress organisers argued that having lunches in the Trade exhibition had some financial advantages and exhibitors were happy because it brought delegates into the exhibition. There were complaints about the lack of seating.

There have been alterations in the days on which the Congress is held. Views have varied, from those who said it should be conducted on the five week days, to those who wanted to leave the working week as uninterrupted as possible by using all or part of the weekend. There were also those who wanted to compress the Congress into as few days as possible.

Exhibitors are no longer confined to those supplying orthodontic goods. So also with sponsorship. Automobiles have been a conspicuous addition. In Canberra, all delegates were encouraged to test-drive a new Lexus.

The real action starts several days before the first lecture, with an extended series of committee meetings, the Councillors and Representative Meeting and the Council Meeting. The Industry display has become quite huge, being a central meeting place for delegates and the venue for breaks, lunches and the occasional Happy hour. The original formality has gone. Sadly, participation by local orthodontists has become the far lesser part of the scientific programme. Opening lectures do not always adhere to an orthodontic theme. At the Opening Ceremony for the 16<sup>th</sup> Congress, delegates were highly entertained by someone who could best be described as a motivational speaker. This was preceded by a children's choir. The choirmaster, well known to the author, having taught his children, suggested his audience could be described as "a brace of orthodontists". He was pleased to give permission for this to be used as the title for this History.

The organisers of the 20<sup>th</sup> Congress received rather a shock, when the Grand Prix motor race which Melbourne had recently stolen from Adelaide, was set down for the same week. Several of the hotels where the Congress organisers had made bookings, reneged on their commitments. Legal action was begun against one hotel group. The Congress Committee realised that the city of Melbourne would side with their prized Grand Prix. Fortunately, suitable arrangements could be made for the following week. ASO members generally were unaware of this situation.

The role of the Congress levy was continually under review. Watson<sup>54</sup> suggested it be increased to cover the entire cost of registration. There were varying attitudes in Council but generally it was felt that the Congress subscription should be set at a level not so much to raise funds for the Society, but to avoid making a loss. Owen felt<sup>60</sup> "there was an unwritten management protocol that a Congress should not be seen as an income earner and should only budget for a minor surplus". The levy was simply a means to encourage attendance because the members already made a significant contribution. It was increased to \$180 for 2003 and \$200 for 2006.

This attitude has had to be discarded, having regard to the imperative to underwrite the upcoming International Congress. Recognising the significance of this event, the 19<sup>th</sup> Congress was addressed by Dr Jim Coveney, President of the AAO. When the ASO was awarded the right to hold the 7<sup>th</sup> IOC, it was realised that a considerable amount of money would be required to stage this major event. Using information from the Paris meeting in 2005, a figure of \$750,000 was chosen as the necessary

seeding fund. From 2004, it was decided to apply a special levy, called the WFO (World Federation of Orthodontists) levy. In addition it was realised that each Congress up until 2010 needed to produce a profit of at least \$80000, otherwise the WFO levy would have to be increased. Fortunately Congress profits continue to increase. Adelaide made a profit of \$120000, which was doubled by Melbourne.

The planning suggested that the Paris meeting (2005) which had working capital of \$US1.5M, would make a healthy profit. The Ophthalmologists had held an international meeting in Sydney and the results from this were encouraging to the organisers, both in terms of attendance and profitability.<sup>61</sup> A new dimension has been added. Holding this major meeting has placed a large responsibility on the ASO and its members. Up until now the international meetings have been profitable but this is not guaranteed. After returning the amounts contributed from the levies and the seeding funds provided by the WHO, the remaining profit will be divided equally between the WFO and the ASO. The Seventh International Orthodontic Congress Committee (SIOCC) is doing everything in its power to ensure a reasonable return. The tradition of successful Congresses should give them confidence.

Regrettably, the Annual General Meeting is now a rather a sad assembly, where vigorous debate no longer exists and the procedures are continued only as the law requires. The real action takes place in the meeting rooms before and even during the lecture times. Old timers find a sea of unfamiliar faces but still the numbers are small enough so that the family feeling remains.

## Intellectual property

The very first Constitution contained a clause that any paper delivered before the Society became its property. Subsequently, this became part of each Constitution and was never really questioned. In the early days, the Editor of the Journal always attempted, not with complete success, to have papers that had been presented at Congress published subsequently in the Journal. The matter was raised first just before the 1982 Hong Kong Congress when it was pointed out that enforcement of this rule could possibly restrain or prevent overseas lecturers from presenting their material. It was decided that this rule would not be enforced, resulting for a while in a reduction of the amount of copy which was presented to the Journal.<sup>62</sup> The issue was revisited the next year. The Executive felt the phrase 'may be published' allowed for sufficient flexibility. What was not taken in to account was that this rule was part of the clause referring to the 'Rights and Duties of Members' and so may not refer to invited lecturers.

In actual fact, while the Constitution was amended in 1983, that clause remained unaltered:

All papers read before the Society or its Branches shall become the property of the Society and a copy of each paper shall be delivered to the Federal Secretary as soon as possible there after. Notwithstanding the provisions of this paragraph any such paper may be published in any scientific journal provided that a suitable references made on the paper to

the fact that it was first presented to a meeting of the Society or a Branch of the Society

W.J. Mackie, Chairman of the 1987 Congress, informed the guest Lecturers of the Constitutional requirement but added “the Society does not wish to impose rigid restrictions in this field” This was briefly altered in the 1993 draft of the Constitution removing it from the section ‘Rights and Duties of Members’ and requiring that the paper be delivered to the Journal Editor rather than the Federal Secretary. This requirement was not referred to after 1996. There are no records of any action being taken to enforce these clauses.

The Society inaugurated two awards in 1980–82, which were administered by the Foundation but were ‘owned’ by the Society itself. The conditions of entry in 1982 required that “the entries should be presented for examination in a manner to conform to requirements for publication and be available for publication in the Australian Orthodontic Journal”. Subsequently, members of the Council came to the view that winners of these awards had some obligation to the Society, which was in many cases the funding source and that greater pressure was placed for their publication. Up to that point in time, there had been only limited deference to that requirement by winners of the awards. The question of ownership of the material and the intellectual property of which it is composed, over which the Society, so blithely, claimed possession, had never really been tested.

The issue came to a head from a slightly different point of view in the aftermath of an unsuccessful application for one of these awards which subsequent to 1996 had become under the auspices not of the Society but of the Foundation. A Melbourne orthodontist, a part-time clinical tutor at the University of Melbourne, had collected long-term records of a large number of his treated cases and provided these records to the University for study. This author well remembers seeing the plaster records of these cases laid out on the elegant dining table at his home and wondered if the tutor’s wife played any part in this decision. Four theses had been written by postgraduate students using this material.

The orthodontist who had carried out the original clinical work had drawn from the material in these theses and had presented a paper to two smaller groups and had been invited to make a similar presentation to the National Congress. Approximately two months before this presentation was due, the Dean of the Dental Faculty, Professor Eric Reynolds, wrote to the tutor making him aware of intellectual property considerations involved. A discussion occurred between the tutor and the Head of the Orthodontic Department. He was satisfied that a reasonable compromise had been achieved, whereby a proper attribution would be made to the Department and to the individual postgraduate students. It was also decided then that the Head of the Department would make an introduction. The tutor/presenter, the Chairmen of the Scientific Committee and the Congress Committee were satisfied that this represented an appropriate consideration of the intellectual property. It turned out that the Head of the Department was not completely happy and this issue became a festering sore for some time and multiplied greatly his deeply felt concerns over an unsuccessful application for the higher of the Foundation’s prizes, the Begg Research award.

Most orthodontists have sat through countless presentations in which the work of other researchers has been included as part of the logic in developing the points under discussion. The University of Melbourne, which has obviously and quite rightly spent considerable time and effort in protecting the intellectual property rights of the University and its researchers, has developed an elaborate protocol. It is extremely likely that all those involved from the Society were, in their naiveté, completely unaware of much of this detail. They were also quite confident that the discussions held prior to the presentation took account of and adequately addressed the issue. Although members of Council and indeed the Trustees of the Foundation were all extremely anxious to achieve a correct and fair result as far as the unsuccessful award application was concerned, they were determined to support the decisions of the Congress Committee in the matter of the disputed intellectual property.

This author claims no expertise in intellectual property and has not fully read the University of Melbourne's protocol in this matter. Nonetheless the requirements of Regulation 17.1.R8—Code of Conduct for Research—Publications, which was the section referred to by the Dean during the discussions, seems to have been fully addressed. Also, he has read much of the material from the files of the Foundation and the Council and can nowhere find any consideration of the intellectual property involved in the case material originally provided. The tutor had presented to the graduate students a rare and priceless collection of clinical material. He would have been proud of his work and proud to allow graduate students to analyse data from it for their theses and subsequent publications. Knowing that proper mention would have been made of the source, I doubt that any consideration of the matter of intellectual property would have entered his consciousness.

The ASOFRE has now developed a superior method of encouraging publication of prize-winning material and the Constitution now contains no reference to the ownership of material presented at its meetings. The Department Chairman, in discussing this matter for this history, indicated that the issue of intellectual property rights will have constantly to be given due consideration.

## Endnotes

1. Wilkinson to Reading 23/9/1960 (in Congress Archive)
2. Minutes General Meeting 1961
3. ASO Bulletin Vol.2 No.3
4. Minutes Executive Meeting 10/1964
5. Neil Armstrong Vic Sec to Reading 25/7/1961
6. 17/10/1961
7. Henry to Henderson 25/10/1962
8. 1/11/1962
9. To G.I. Brown 2/8/1968
10. To Councillors 11/2/1964
11. 20/12/1963
12. Henderson to Heath 14/4/1964
13. Minutes Executive Meeting 2/1969
14. 23/2/1962
15. 29 May 1962
16. To McGibbon 11/6/1962
17. To Richard Case 8/5/1963

18. 24/1/1964
19. 19/11/1963
20. 12/1963
21. Martin Brusse, President Rocky Mountain Dental Products Co. to Norton
22. Brown to Norton 20/12/1966
23. 1966 Archives
24. Minutes Executive Meeting 10/1964
25. Report of the Fourth Australian Orthodontic Congress prepared by the organising committee
26. AOJ Vol.2 No. 1 June 1969 p.37
27. Personal Communication 8/5/2008
28. Post Congress Report
29. Prof Elsdon Storey, Masaaki Nakamura and David Roder
30. Letter from Milton Sims. Minutes Executive Meeting 8/1971
31. July 1972
32. Reading, J.F. (1974) AOJ, 3:5
33. Minutes Executive Meeting 11/1973
34. By-Law 3: Orthodontic Congress
35. Minutes Executive Meeting 4/1997
36. Report from 6<sup>th</sup> ASO Congress
37. Minutes General Meeting 1977
38. Minutes Executive Meeting 12/1976
39. The Author has family records, which show that Angle had asked him to review some chapters.
40. ASO Newsletter 6/1981
41. Minutes Council Meeting 3/1982
42. Minutes Council Meeting 7/1981
43. R. Masson Letter to the Editor AOJ Published AOJ 1981
44. 21/6/1983 Minutes—included in Federal Minute book.
45. Minutes Executive Meeting 4/1985
46. Minutes Council Meeting 8/1985
47. Minutes General Meeting 1989
48. Letter from R. Hay to Executive 16/7/1986
49. Minutes Council Meeting 8/1986
50. March 1987
51. Congress Report to General Meeting 1991
52. Auditors Report December 1990
53. Minutes Council Meeting 9/1992
54. Treasurers Report to 1993 General Meeting
55. Minutes of Councillors and Representatives Meeting 9/1991
56. Minutes Council Meeting 6/1992
57. Minutes Executive Meeting 6/1995
58. Minutes Executive Meeting 4/1997
59. Minutes Council Meeting 9/1998
60. Minutes Council Meeting 3/2002
61. Minutes Council Meeting 3/2003
62. Minutes Council Meeting 11/1983

## Chapter 7

# The Orthodontic Board

It is uncertain when or where the first idea for an Australian Orthodontic Board came from or what the intention of the original proponents might have been. But it must be assumed that the existence and significance of the American Board of Orthodontics played a considerable role. A. Thornton Taylor had written in 1938, seeking information as to how he might achieve that status.<sup>1</sup> The American Board was established in 1929. Its stated role was to “examine applicants, and if they are found proficient, issue a certificate of fitness”. This Board was patterned after two existing institutions in the USA for ophthalmology and otolaryngology.<sup>2</sup>

When the Board was first formed, university-based dental education was in its infancy and advanced postgraduate education in the specialties simply did not exist. There was no way one could substantiate any claim to competency. An examination process, which included a demonstration of one’s clinical skills, was a substantial means of providing such proof. One of the founders of the American Board, Albert Ketcham, was to say: “Its certificate has no legal standing but it is a powerful psychological factor in stimulating specialists to acquire increased knowledge and skill”.<sup>3</sup> The process that was used, served to create a de facto definition of the field of study and the standard to be acquired to ensure the right to practice it.

The first reference in ASO records appears in the ASO Bulletin in December 1960, in the section “Your President Says”<sup>4</sup> which is entirely devoted to the subject. At that stage, the concept for, and the role of, an Australian Board of Orthodontics, appears uncertain. The thinking appears a little confused as to its potential roles, which seemed to involve ASO membership, standards of education required for

specialist recognition, as well as individual self-improvement. Robert Norton's principle vision (he was President at that time) was for the Board to be an examining authority to issue Diplomas, which would become the standard for specialty recognition. In this it was to be similar to the American Board in its earliest days. Norton drew attention to the growth in specialisation and the fact that bodies like the American Dental Association saw the need for a degree of regulation over the definition of a specialty and those who could claim appropriate qualifications. "The House of Delegates of that organisation had seen fit to name areas of specialty practice and has under consideration a method for the uniform and standard recognition of specialists."

Originally, individual specialty boards in the United States, including the Board of Orthodontics, had bitterly opposed such outside jurisdiction. This insular attitude was entirely analogous to that exhibited by the original 'Establishment' Board, which severely compromised the Society's first attempts to create an enduring authority. However, in 1960 the American Dental Association succeeded in exerting their primacy and resolved that from 1965, all dentists who wished to announce themselves as specialists were required to hold a certificate from a national certifying Board approved by the ADA, or a state licence in one of the areas approved by the ADA. There were at that time diplomates in seven Boards with over 500 in Orthodontics and over 400 in Oral Surgery. Each board required over five years of practice before certification could be achieved.

Norton felt that "Boards have made a great contribution to raising the standards of the specialists in their training, in respect by the profession and their position in the community". He went on to suggest that the establishment of an Orthodontic Specialty Board in Australia might occur in the not too distant future. In short, Norton felt that the imperative for change must come from within the specialty, not the general dental community and the principal focus of this change must be the collective, more so than the individual.<sup>4</sup> It must be pointed out that this is a duplication of the avowed role of the Society itself, as laid out in its Constitution.

In a letter to Adamson<sup>5</sup> in the lead up to the 1<sup>st</sup> Congress, Norton deplored the lack of a standard by which Dental Registration Boards might evaluate a specialist. He suggested that if a Specialty Board was set up, "people could then obtain, after suitable examination, their Diploma which would then become a standard of professional proficiency". Adamson, wise in the ways of organised Dentistry, in reply<sup>6</sup> mentioned the difficulty created by the multiple registration authorities and the consequent total lack of uniformity. Nonetheless he agreed with the thrust of Norton's suggestion and supported the establishment of an Australian Board of Orthodontics.

Thus it can be seen that the incentive for the formation at that stage, of something similar to the US experience, was the need more for a standard of education at a specialist level and less a vehicle for personal professional advancement. Included with the agenda for the Executive Meeting, which was to precede the 1961 General Meeting, Norton had added considerable detail in support of his proposal, including the nature of a grandfather clause, he thought essential and the eligibility of candidates for examination. He felt the grandfather clause should

apply to those who had been in practice for fifteen years or for seven years, if they also had a higher qualification. The Board would hold examinations at least every two years and would take a “form, which would be feasible for anyone in private practice”. An item listed for general business at the General Meeting in 1961, was “Australian Orthodontic Board”. The minutes from that meeting record that the Society resolved to approve in principle, the establishment of such a Board and that a committee be formed for the purposes of:

- a Establishing a graduate training scheme and
- b Preserving orthodontic standards.

Compared to the extensive vision which underpinned Norton’s earlier remarks, this was a little underwhelming, but a process had started.

In a handover letter to the new ASO President Kevin Henderson,<sup>7</sup> Norton says of progress towards the specialty board: “nothing of importance of an immediate nature. I feel this one will require a lot of time.... It may cause a few heart aches but in the end it will be worth it.”. How right he was!

In progressing the resolution, McGibbon in his role as Society Secretary wrote to NSW and Victoria to find out the current status of postgraduate orthodontic training. He also formed a committee of senior ASO members. The members asked to serve were R.Y. Norton, A.G. Parker and K.T. Adamson; the President of the Society was an ex-officio member. John Reading was asked to be Chairman. This committee was called the Orthodontic Registration Board Committee (ORBC).<sup>8</sup> The Executive gave to this committee its terms of reference:

1. To investigate the basis under which a board might operate in Australia.
2. To propose qualifications for registration.
3. To ascertain the attitudes of the Dental Boards and Dental Faculties to the proposal and
4. To report progress to the Executive and submit recommendations for submission to the next full meeting of the Executive.

These instructions were much more along the lines Norton would have had in mind and would have given the committee a clear direction in which they might proceed. The committee had no meetings in person and conducted all its discussions by phone or mail. It continued to use the title ‘Registration Board’ until there was a change in focus five years later. It produced a report for the next General Meeting (1964)<sup>6</sup> which after discussion, was adopted.

For item 1 in their terms of reference the Committee saw as possible roles for a Board:

- a. The accreditation of graduate and postgraduate courses that met with the Board’s approval;
- b. The accreditation of individual orthodontists who, in the Board’s opinion were sufficiently well qualified and well prepared to practice the speciality of orthodontics;
- c. The appraisal of the suitability of an applicant for specialist status on receipt of a request from a state Dental Board.

In the matter of qualifications to practise (Item 2), they went on to support the recently published proposals submitted to the NSW Dental Board by the NSW Branch of the ASO, which were:

To be recognised as a specialist, the applicant should:

- a. possess a qualification to practice dentistry which is recognized by the state Dental Board;
  - b. have completed at least one year in the general practice of dentistry either in a hospital, teaching institution, the armed forces or in private practice;
  - c. have given an undertaking to limit his practice exclusively to that of the recognized specialty;
  - d. either
    - have completed full-time graduate study of at least six academic terms in a course approved by the Board (Board—in this context refers to the Australian Orthodontic board) at a recognized University teaching institution or dental hospital;
- or alternatively
- have completed full-time graduate study of at least three academic terms in a course approved by the Board (AOB) at a recognized University teaching institution or Dental Hospital and subsequently has spent one year in the practice of orthodontics under supervision in a recognized University teaching institution or dental hospital;
  - e. have attained a higher qualification in the specialty approved by the Board.

Nothing in the above recommendations shall deprive any accepted specialist of his rights and privileges.

Regarding item 3, the attitude of the Queensland Board had been defined in their recently amended Dental Act which makes provision for the recognition of dental specialists. The report noted that the Dental Board of New South Wales had approached the specialist societies and the Australian Dental Association for their opinion as to the requirements for specialisation. “The attitudes of this Board will not be known until it has considered the replies from all specialist sources including the ASO referred to above and any information available to this committee is unofficial at this stage”. There was no official recognition of specialists by the Victorian Dental Board. In essence, Reading found a variety of attitudes but some positives. The attitude of the dental Faculties was considered to be most cooperative. The two-year course and the regulations of the MDS degree in NSW had been established through the combined efforts of the Faculty and the specialist Society.

This example could well be repeated in other states. Again it is suggested that an Australian Orthodontic Board would be the best body to advise Dental Faculties of the educational requirements for specialisation. In short, the conclusion was that both the Registration Boards and the Faculties were likely to view favourably, movements to create more formality in the processes the AOB was trying to progress. The final recommendation from that meeting was that “an Australian

Orthodontic Board be established with the objects referred to in to paragraph 1 of the terms of reference of the committee. At no time did Reading mention his idea that there should be a Specialty Board on a national level not restricted to Orthodontics, which he had discussed with the university authorities in 1962 and was to promote again 10 years later.<sup>9</sup>

Reading, feeling that his task was fulfilled, wrote hopefully, to the new Secretary: "I would feel that a lot more work would have to be done in this connection and in this case it may be worthwhile setting up a new committee".<sup>10</sup> This was never going to happen and he was asked to continue his role as Convenor.<sup>11</sup> On being advised of this he recommended the same personnel be asked to continue the work and also requested that R.G. Henry who, like Reading and Norton lived in Sydney, be added to the team "so that a working committee can be more easily arranged for discussions".<sup>12</sup> Reading and Henry were more intellectual than the visionary Norton.

Someone had obviously done some 'politicking' because shortly after this Registration Board Committee reconvened, both the South Australian and NSW Branches wrote to the ASO Secretary with identical requests: "That this Branch requests that the Federal Executive gives consideration to the formation of a policy on Orthodontic Education in Australia."<sup>13</sup> Perhaps the view was that the task allocated to Reading's Committee was too restrictive or possibly that to discuss an AOB without any real means of achieving the envisaged goals was a fruitless exercise. The effect was that the Executive added this request to their task. This small group of men now virtually carried the entire aspirations of the embryonic Society in their grasp. The full committee had at least two formal meetings<sup>14</sup> and conducted a great deal of correspondence.

The ASO Bulletins were totally silent on the issue until the next General Meeting. At that meeting held during the following Congress in 1966, John Reading summarised the report of the Committee. Reading prefaced his remarks saying that to the extent possible, the Constitution for the proposed Australian Orthodontic Board was based on the model of the American Board of Orthodontists.

The report began with a suggested draft Constitution for the Board and went on to discuss the "Competence of Specialists to practice Orthodontics" and added as a supplement the recently published report from the Dental Board of NSW on the requirements for Specialisation. It has already been mentioned that this had been formulated after discussions with existing Specialist Societies and the ADA. In the draft Constitution, Article I said that the Board shall be known as the "Australian Orthodontic Board" and is "created and sponsored by the Australian Society of Orthodontists" and that "The Board shall be elected by the Australian Society of Orthodontists".

Article II of the draft Constitution enumerated the Objects of the proposed Board which were:

- a) To stimulate and keep alive the spirit of research and self improvement among students and practitioner of orthodontics.
- b) To establish the competence of specialists to practice orthodontics
- c) To give advice, if requested, on courses in orthodontic education at

- graduate and postgraduate level and to give the accreditation of the Board to such courses as the Board sees fit
- d) To arrange, control and conduct examinations, if necessary, for the purpose of testing the qualifications and to confer certificates upon those who meet the established requirements of the Board.

The remainder (III–VII) had to do with the mechanics of setting up the Board on a permanent basis. Central to this was the appointment of five Directors.

The report made no mention whatever of any process by which an orthodontist may achieve a membership other than the reference in Article 11(d) above. It did not envisage a ‘grandfather’ clause. In discussing the necessary “Competence of Specialists to practice Orthodontics”, the Committee noted that the NSW Dental Registration Board had completed its deliberations and accepted the recommendations previously made by the ASO (NSW Branch) in all respects, save for the requirement of time spent in general practice, for which they required not one but two years. Reading’s committee accepted that alteration. In addition, the NSW Board could not, or felt it could not, insist on possession of a higher qualification, as their requirements had to apply to all specialities. Its attitude was:

As the Board is aware that such courses are not presently available in all specialties, the satisfaction of the requirement that an applicant has gained special skill may also be met, for the time being, if such applicant has been engaged exclusively in the clinical practice of that specialty for a period of not less than the equivalent of four years full-time.

However, Reading’s report made it clear that the requirements the ORBC enunciated two years previously were to apply to Orthodontics as soon as full-time courses became available. The Committee concluded its report by recommending that an Australian Orthodontic Board be formed with the objects as mentioned above. The full ASO Executive had accepted the ORBC report at its first and only meeting on 21 May, but realised that some amendments would be required before the General Meeting due in six days time. So it took the precaution of recalling the Committee to complete these changes after which the membership was circulated with the suggested alterations and amendments.

The initial composition of the Board, which was to start the ball rolling, was to be five of the most eminent members of the Society. Although ASO records use the word “Board” to describe all stages of this tortuous process, out of compassion for the reader, the terms Board of Directors and Establishment Board will be used to qualify the stages through which this notion processed.

It was hoped that the various Dental Boards might welcome guidance from a recognised specialty. Reading felt that this was one of the main reasons for recommending the establishment of an AOB. Since the Committee had been established, the Federation Dentaire Internationale (FDI) had adopted<sup>15</sup> a paper entitled “Principles of Specialisation in Dentistry”. This report informed much of the Committee’s considerations and the Committee recommended that the principles in this paper be accepted by the ASO as a basis for the recognition of specialists. This report turned out to be particularly important for dental organisations worldwide

and informed the ADA's efforts in defining the nature of specialities. This seminal report of the FDI will be referred to when discussing the time when the ASO was establishing its own 'Policy on Specialisation' and Full membership finally came to require a postgraduate qualification.

The ORBC now saw its role as complete and felt different personnel were necessary to carry on the development. This differed from the later and ultimately successful attempt at establishing a Board which was sponsored and in fact nurtured through its entire gestation by the Education Committee, a soon to be formed, (although subject to a series of name changes) standing committee of the Society. Such a committee structure did not exist at that time.

Notwithstanding this ready acceptance of Reading's proposal, discussions around the proposed Orthodontic Board were to occupy the Society's attention and create much angst for the next six years. Over the entire ten years, the Board was under discussion, a deep chasm developed between two possible broad roles a Board might have. Norton's and Reading's original concept saw the Board more as a body to set a standard for the recognition of a specialist, to provide advice to Dental Associations, Registering Authorities and Educational institutions on that standard and to give recognition to courses of training and instruction which could achieve it. Such a Board could be specifically orthodontic or more universal within Dentistry. Subsequently individual Board membership seemed to become the focus. Reading's 1964 report was all about the former as were the Executive's communications with the ADA in the interim. Later discussions by this Board (of Management), the present version of the Board and indeed all such Boards around the globe are all about the latter. The justification is that striving for Board Membership raises standards in the specialty generally, in the same way that demanding completion of high level postgraduate courses and determining rigid requirements for Full membership also keeps the 'bar' high.

This represented the point at which John Reading finished his decade-long effort, which as surely as Stanley Wilkinson began the task, laid the foundations for the Society as we know it today. The report of the ORBC with its last minute amendments was debated at length and with some considerable heat during the 1966 General Meeting. It was decided to debate the articles of the Board's Constitution proposed in the report, clause by clause. Except in one instance, subsequent amendments were largely procedural and once each Article had been approved individually, a motion to accept the Constitution of the Board as a whole was carried.

The original suggestion was that the Board was made up initially of five Directors elected by the ASO. This was altered to become the five Honorary Life Members of the ASO, several of whom, had been appointed at the same meeting for just that purpose. How they felt about being used in this way is not recorded. In essence all that had been accomplished was that the issue had been aired again; a Constitution had been adopted, the Board as such with a Board of Directors (the only members) had come into existence and somewhat separately, the requirements for one to be called an orthodontist had been further defined. The Constitution together with a brief historical introduction was included in the next issue of the ASO Bulletin, coincidentally to be also the last.<sup>16</sup>

## J.F. Reading

Most ASO members of 2010 will be surprised how indelibly the finger print of John Reading has shaped the Society. Not in the mould of an Adamson or a Norton but his thorough work in a raft of complex fields has done much to lay the foundation on which the Society today stands. Others may have fired the bullets but John Reading saw them to their targets.

From the late 1940s before the reformation of the Society until he could see relations with the College restored to a degree on normalcy, JFR was always there. He continued to maintain his interest in the Society long after he retired from clinical practice, still invariably turning up for meetings, especially so the NSW Clinical day which was his brainchild. The 50<sup>th</sup> such meeting took place in 2009.

He has been a major help, support and inspiration for this work.

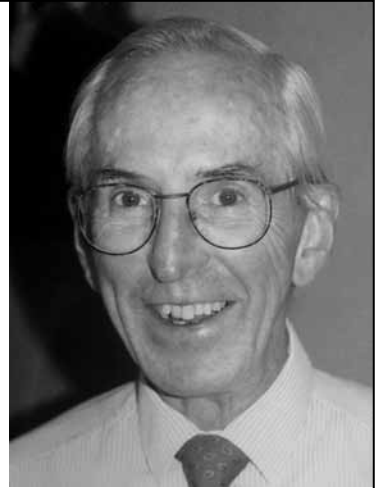
He was a force in the NSW orthodontic study group formed in 1949, from which came the NSW Branch of the ASO. John was awarded a scholarship to the Institute of Dental Surgery at the University of London and gained his Fellowship from the Royal College of Surgeons in 1952 and a Diploma in Orthodontics from that same institution two years later.

While overseas he was the London Correspondent both for the Australian Journal of Dentistry and Appollonia. Made Secretary of the ASO in 1959, his skill in, and love for, writing vastly improved the ASO newsletter and set it well along the way to become the Australian Orthodontic Journal. For a long while he edited "Appollonia" the Magazine of the Sydney University Dental Alumni Society.

The first of his two major contributions to the Society began with his chairmanship of the Orthodontic Registration Board Committee created in 1961 to look into the possibility of setting up an Australian Orthodontic Board. He saw the Board as the ideal vehicle to define the qualifications necessary to become a specialist orthodontist. Ultimately and through no fault of his own, this failed. But out of his extensive work emerged a committee, of which he was the Chair, which laid down the central tenets for Postgraduate Education in Orthodontics in Australia and simultaneously established for the ASO a 'Policy on Specialisation' designed to provide guidance to the ADA and the Registering Authorities. In tandem with this, was the establishment of the requirements for membership of the Society.

While this effort was in its earliest stages, John's influence was brought to bear in shaping the first full-time Postgraduate course in Orthodontics in Australia at the University of Sydney. He was instrumental in changing the concept, from a diploma of 12 months duration to a two year degree course with a research component. This subsequently became the standard for all specialties throughout the nation. When his work was finished in 1972, there existed, throughout Australia, post graduate orthodontic programmes offering Master's degrees, a recommended curriculum and an ASO Policy on Specialisation, which required completion of such a degree.

As ASO President, many of the initiatives, now so much a part of the ASO were begun. The regular surveys of orthodontic practices, the formation of standing committees, the



writing of official ASO policy statements, compilation of the membership directory, all these had their beginnings on his watch.

John was a strong supporter of the ADA and wanted always to ensure that the ASO was very much part of the larger team. Perhaps from his UK experience, he was also always a staunch supporter of the Royal Australian College of Dental Surgeons right through the bitter differences that existed with ASO. Ironically, it was in support of a Master's degree as the basic qualification for specialist recognition, which he had done so much to achieve, that the membership found their greatest argument with the College. This resulted in the sanction against ASO Members becoming examiners for the College, a decision which so upset John. He must have been mightily relieved when this turmoil finally subsided.

He served as a teaching fellow both on the undergraduate and postgraduate programmes for a generation. He was involved in the graduate education of over 100 students. John was an inaugural Member of the Australian Begg Light Wire Study Group and received its Begg Medallion in 1986. His last major contribution was to write the History of the ASOFRE up to 1996. He passed away in June 2009.

In response to that part of their brief on education, the ORBC again recommended acceptance of the proposals submitted by the NSW Branch of the ASO to the NSW Dental Board, with the two amendments mentioned above, to form the basis for the necessary qualifications. Orthodontic education, although part and parcel of the Committee's report, was discussed separately at the General Meeting and the recommendations specific to education were adopted. To this was added a recommendation that a meeting should occur of all the teaching heads of Orthodontic Departments from all Australian Universities, to consolidate the requirements of orthodontic teaching in Australia. Ultimately it was this virtual afterthought, which was to prove so crucial in the advancement of the ideals, which the Board was designed to advance.

Nothing was heard from this Board until just before the next General Meeting. They reported difficulty of meeting in person and made mention of their regret that Stanley Wilkinson's grave illness (he was shortly to pass away) had "prevented him from helping us as he would have liked". In early 1969 Adamson, acting as Secretary of the Board, sent minutes of a meeting at which details had been thrashed out. These were accepted and approved by the Executive.<sup>17</sup> However, the Executive cautioned "that in view of the present evolutionary state with respect to all factors relating to specialisation in Dentistry, the Board should defer any further action until such time as this situation has been clarified". Adamson was also on the Graduate Education Committee which was to produce its ground breaking report at the same meeting. How it was that so experienced a person could not see that the thrusts of the two processes were likely to clash, is hard to understand. One can only assume that he was focussing on what was being done rather than why.

The Board (of Directors) seems not to have been dissuaded and duly reported their plans to the next General Meeting in Adelaide in 1969. At the outset, they admitted that their report had been written before the meeting of the Graduate Education Committee and that there was "some overlap". An understatement. Tribute was

paid to the work “long, thorough and arduous” of John Reading as Convenor of the original group. In discussions in the preparation for this history, John Reading mentioned his disappointment at the way things panned out.

The Directors had seen their role strictly as an interim body and resolved to “work towards the creation of a more functional and enduring Board” Accordingly, they had already chosen 13 of those who they considered to be among the most senior and best qualified of the current orthodontists in Australia to become ‘Foundation’ members of the ‘Establishment’ Board. They were C.J. Armstrong, A.S. Burgess, B.C. Crisp, R.G. Henry, M.R. Sims, C.R. Newbury, R.C. Case, V.P. Webb, J.F. Reading, D.F. Spring, R.Y. Norton, A.G. Parker and J.V. Wilkinson. The Establishment Board Chair said: “Appointing these 13 men was not to be seen to imply”, “that other members would not also deserve certification”. He mentioned that membership of the Board would be seen as an “honour badge”, indicating the esteem in which members were held by their peers. Adding that “this was not in any way to be considered a right to practice as a specialist which the various Dental Registration boards had already taken in hand or begun to address”. Further, that “Our longer term planning implies involvement in advisory capacities for postgraduate teaching programmes and recognition of and acceptance by, state instrumentalities regarding education and registration of specialists”.

The Directors included their own resignation as part of their report. So for the second time the personnel were to change, but little else. No plans for an assessment procedure. No standards to be achieved. Some were of the view that the current ADA enquiry into specialisation may have superseded most if not all of the functions of the Board. There was a suggestion that implementation of the report might be delayed and the original Board (of Directors) remain. The Chairman of the Board testily responded to the effect that the ASO membership could not discuss the legality of their actions in certifying new members and the Board was “in no way subservient to the Society”. His arrogance was justified in his opinion by their Constitution, which the ASO had already adopted. P. R. Begg later wrote to Thornton Taylor<sup>18</sup> “you and Ken (Adamson) and I agreed while we were all in Adelaide last year, that the ASO has no constitutional power to sack the members of the Australian Orthodontic Board” and later in the letter “I think we, the Board, should seek legal advice...”.

Darryle Bowden<sup>19</sup> stated that he had obtained a legal opinion to the effect that the original Constitution of this Board had been so poorly drafted as to have “limited legal reference” and that as constituted, the Board could not be appointed without the endorsement of the Society. Subsequently, he wrote to Secretary John Heath to seek a number of amendments to the minutes to include this reference.<sup>20</sup> Heated debate followed. Probably at no other time in the ASO’s experience has so much angst been demonstrated. It was suggested by B.G. McLean that “nothing was to be gained by segmenting (author’s emphasis) the Society. This seemed to be a widely and strongly held view. Rickleman, in responding to a questionnaire on History sent out by Grant Keogh years later, was to say: “A debacle-collapsed due to lack of communication. A two tier system is not the Australian way”

The outcome was that the original Board (of Directors) offered to remove that portion of their report that contained their intention to resign (except in so far as the normal rotation requirements from its Constitution were concerned). The Board also stated that they would take no action until the next General Meeting. Finally the report was adopted. The ideals behind the creation of a Board were not in question, only the mechanics employed. No mention whatever was made during the argument of any role in education or registration, which in Reading's view, widely shared by those who had entered the debate, had been the principle purpose for the Board in the first place.

Arthur Thornton Taylor wrote a letter to each of the 13 who had been asked to join the Board to the effect that:

it is with pleasure, tinged with some embarrassment that at last I am able to forward to you your interim Diploma of the Australian Orthodontic Board.

You will already know that the board has been asked by the outgoing council of the Australian Society of Orthodontists to refrain from further action pending a review of its place in Australian Orthodontics and, for that reason I, in my capacity as 'Establishment' chairman, am obliged to ask you not to use this Diploma professionally, nor in any other way, pending further notice. Nothing, however, can take from you the honour of being among the first diplomats of the Board, for whom it is hoped a new, more functional and enduring Board may be created when its form, its status and its function become more clearly established.<sup>21</sup>

The Board was asked to report back to the next AGM. What had been accomplished thus far was that there remained a Constitution for an Orthodontic Board, with the original 'establishment' members remaining as the sole members and a considerable degree of antagonism. L. Smart, who as President chaired that meeting, said when interviewed<sup>22</sup> that even he, as President, felt "suspicious" about the motives of the protagonists. Why they had not fully discussed the ramifications of their decisions with the ASO Executive is a testament to their indifference to the attitudes of the rank and file.

All the 13 men asked to become the Establishment Board, had agreed to do so and had sent cheques for their initial subscriptions. These were never banked. These men had received an "interim" Diploma accompanying the letter from the President. For the record, Thornton Taylor wrote up the passage to date in a piece called "Notes on the Australian Orthodontic Board".

The following July, Richard Case, the new ASO President wrote a detailed letter to the Board, outlining the current situation as the Executive perceived it and mentioned that the current Board Constitution was very "confusing". He enquired "is it really the intention of the Board to establish which specialists alone are competent to practice orthodontics?" He outlined various options including the possibility that, due to the work of the Graduate Education Committee, the role of the Board is "no longer required". The ASO Executive agreed to meet administration expenses of the Board, accrued thus far.



There was considerable progress on Graduate Education and the development of a Policy on Specialisation in the months after that meeting. The Council decided:

that in view of the developments in post graduate training in universities and the proposals of the Australian College of Dental Surgeons, the Australian Orthodontic Board take no further action until the question of Specialisation Policies and Registration Requirements are resolved.<sup>23</sup>

Members of both the NSW and the Victorian Branch had moved at their branch meetings that the AOB proposal not be progressed. The Victorian Branch requested a notice of motion for the next General

Meeting to the effect that the ASO withdraw its support for the Board and that it be dissolved.<sup>24</sup> The matter was discussed at length during the Council (there was by this time both a Council and an Executive) Meeting leading up to the General Meeting at Congress, at which “it became apparent that the Council did not have a firm policy regarding this matter”. The Graduate Education Committee (GEC) had suggested that perhaps the Board could play a part in providing advice to the Federal Council, and particularly the GEC, and in being the body to grant approval for courses of instruction. However, in the end it was decided that the President would move to dissolve the Board.<sup>8</sup>

A motion from the Victorian Branch, moved by Gordon Hinrichsen, was passed: “That the ASO withdraw its sponsorship of the AOB and that the ASO recommends the dissolution of the AOB.”. Although he had been a Director and at one time held the view that the Board was in no way subservient to the ASO, the seconder of the motion was P.R. Begg, who spoke at length in support of the ASO’s right to have charge of its own affairs. During his slightly rambling discourse, the lack of any academic or professorial rank in any Australian University and its consequent lack of influence was stressed. The written resignations of the five Directors were accepted with regret.

And so ended, with barely a flutter, the first but not the last attempt to inaugurate an Australian Orthodontic Board. Its intended roles in graduate education, defining the requirements for specialisation and generally supporting the infant specialty, those roles stated in its Objects, played little part in the drama. These had already all been materially progressed through the Graduate Education Committee. In the end, it seemed all about paternalism and ego.

## New South Wales Orthodontic Board

Another incarnation of the Orthodontic Board notion occurred in NSW in 1982. This was precipitated by two things; the NSW Dental Board had begun to review their requirements for specialisation and the University of Sydney's MDSc course ran into some difficulties.

It soon became apparent that the educational requirements for specialisation under the NSW Dental Board's new rules published in 1979 were incompatible with those of the Society. The NSW Dental Board could recognise somebody for specialty status without them having any possibility ever of becoming a member of the ASO. They choose to increase the requirement of time spent in general practice to four years. Also, where a two-year course had not been completed in the acquiring of a postgraduate qualification, four years in full-time specialist practice would be sufficient to be recognised as a specialist. There was no actual registration.

In addition to this, the MDSc course conducted for almost the last twenty years by the University of Sydney had been quite successful and there was considerable pressure for places on the course. This had caused some discontent, such that the University authorities wished to promote their MDS degree as a possible alternative. The MDS had no clinical component, nor the requirement to include original research. The NSW Branch members did not see this degree as being anywhere near the same standard and certainly not suitable for specialist recognition. Complicating this was the possibility that the MDSc course would not be conducted in 1982 and perhaps beyond, due to a proposed sabbatical leave being taken by Keith Godfrey and also general staff shortages. All the hard-won gains of the previous years could be lost.

Accordingly in June, a motion was moved by W. J. Mackie and seconded by R.G. Henry, who was ASO Vice-President at that time, (hardly maverick types) "that the Executive should investigate the wisdom and the mechanics involved in setting up a NSW Orthodontic Board". In supporting his argument, Mackie referred to the Orthodontic Certification Board of the United Kingdom and the American Board of Orthodontics. He furnished the examination requirements of the former as an example to follow. In furthering this, a proposal was produced to the effect that a NSW Board be established and all relevant organisations be advised. The inaugural membership would be all the Full Members of the ASO NSW Branch. The existing members of the Board would be charged with setting up an examination, testing the clinical competence of a candidate registrable by the NSW Dental Registration Board, but not otherwise eligible for Full ASO membership.

The NSW Dental Board had begun to review its specialisation regulations almost as soon as they were published and to that end, had sent a number of drafts to interested parties including the Australian Society of Orthodontists.<sup>25</sup> Discussions occurred between the Society and the Qualifications Sub-committee of the NSW Dental Board. The Dental Board invited the Society to submit names as Advisory Consultants to help in determining the standards to be maintained. The Society refused, saying that:

if the Dental Board of NSW persists in preserving a double standard then this would be placing the ASO members who might serve as ‘advisory Consultants’ in the invidious position of possibly accepting the clinical expertise of say an MDS. Sydney University graduate and yet refusing him Full or Provisional Membership<sup>26</sup>

The examination, proposed by the NSW ASO, would entitle a successful candidate to become a member of the NSW Orthodontic Board and by inference sufficiently qualified for Full Membership of the Society. Although no thought of the necessary changes to the ASO Constitution had been given, plans were included for the drawing up of a Board Constitution, a Board of Examiners and other organisational details. The idea being, that if successful, eventually this Orthodontic Board would become Australia-wide. The first examination was planned for February 1983. The financial responsibility for inaugurating the Board would be undertaken by the NSW Branch. Not all the branch members were in favour of the idea.

The then Dean of the University of Sydney, Professor N.D. Martin was, by tradition, the Patron of the NSW Branch and also by tradition, he had made a practice of attending the annual Clinical Day held yearly around June. The President, J.D. Lockyer, had invited him to speak and warned him that there would be considerable discussion regarding the MDS course. Martin was also a member of the NSW Dental Board. He naturally defended the proposal, and said that the University’s role was to provide a range of educational opportunities for dentists and that if it turned out that such an education did not provide, or could not provide an avenue for specialisation, then this was not the concern of the University. He also called into question the legality of such an Orthodontic Board, compared with the legislative backup, which the NSW Dental Board could bring to bear. Henry and Mackie formed the opinion the Sydney University was “not sympathetic to the view that this type of orthodontic education is unsatisfactory for the graduates to aspire to specialist status”.

The Federal ASO Executive was quite concerned about this move and had received much background information in a detailed letter from Branch Secretary, Richard Hay, to the Federal Secretary, E.C. Crawford.<sup>27</sup> Crawford pleaded that nothing substantive be done until Council had had the chance to discuss the matter. The matter was discussed comprehensively at the Council’s meeting in October. They felt that the setting up of a Board may not solve the problem. The President suggested the application of political pressure in the form of an ‘Independent Inquiry into Orthodontic Education in Australia’, which could result in Accreditation of suitable courses. He suggested Dr Alton Moore, from the University of Washington, as an appropriate arbiter.

The protagonists attempted to convince Council, firstly, to form a committee to report on the desirability of a Federal Orthodontic Board. When that failed to gain approval, they requested permission for the NSW Branch to investigate the possibility of forming, if necessary, a NSW Orthodontic Board. That too failed to gain Federal approval. In fact, there appears to have been very little sympathy for this provincial proposal.

B.D. Bowden, the President, put forward the suggestion that the Society could direct its members not to take part in the MDS programme. (This was rather ironic because this was the same person who ignored the Society's ill-considered sanction against its members acting as examiners for the College Special Stream examinations a decade later.) No action along these lines was taken.

A motion was moved to the effect that the ASO draws the attention of interested parties to the fact that the MDS course in Sydney as presently structured, does not fulfil the requirements for Full or Provisional membership of the ASO, nor the requirements as laid down in its Specialisation Policy. It would prefer that the Registering authorities bear this in mind when considering applicants for Specialist Registration. This motion received unanimous acceptance.

Fortunately, the MDS course did recommence accepting students in 1984 and the Board proposal was subsequently dropped. Another MDS course, this time an intern-type of training also proceeded at Westmead Dental Clinical School during this time and is discussed elsewhere. The prospect of the formation of a Board, which had created such antipathy a decade before, could still be the subject of considerable disagreement. The matter was dropped. Briefly.

## Success at last

Gordon Hinricksen, as Chairman of the Education Committee, in reporting to the General Meeting in 1989, finished by saying "there has been a suggestion that orthodontic standards of excellence could be increased with the development of an Australian Board of Orthodontics along the lines of the American Board of Orthodontics. Accordingly, an initial approach has been made to the American body for their Constitution and a Statement of Objectives". At that same meeting, during a later agenda item involving the RACDS second stream entry, T.J. Freer foreshadowed that during a subsequent and quite unrelated item on the agenda, he would bring up the matter of a Board. As a result of Freer's proposals, the next Federal Executive was directed to draft constitutional changes for presentation to the next Congress, to set up an Australian Orthodontic Board with the following guidelines:

1. That the Board be responsible for accreditation of specialist orthodontic courses, degrees and educational standards, and
2. That all current Full Members of the ASO be granted automatic Board accreditation.

It happened that after an interval of seven years, Freer was reelected Chairman of the Education Committee. A.W. Pollard also became a member. The Education Committee Report for the next year's meeting was, in reality, a working paper prepared on the basis of that Executive direction. This report had been circulated prior to the meeting and there had been a considerable amount of informal discussion on the issue. Generally, discussions were in favour of the proposition, but had revealed disquiet at the idea of the 'grandfather' clause. The feeling seemed to be that its removal would improve the "standing of diplomates". Freer's view was that the 'grandfather' clause, as originally envisaged, was not tenable and

he proposed an alternate notion, that during the first three years in the life of the Board, members of five or more years standing would only have to fulfil the third of the three basic requirements. This was the presentation of cases. He made the point that the ASO “through the establishment of the AOB, will have a body with the necessary expertise to influence educational standards within and outside the Society”.

Also made clear was the absolute necessity for members of the Society to be given the opportunity to discuss and examine all aspects of the proposition. He hoped that State Branches would examine the proposals and suggest appropriate modifications. He thought that a postal vote was the best method of reaching a decision. With his report, he included a copy of the latest information from the American Board of Orthodontics. However he warned “it should be remembered that the American Board is now sixty years old and slavish implementation of its Constitution is hardly likely to succeed.” Further he cautioned that “in Australia, unlike the situation in North America, there is not yet one full Professor of Orthodontics or one separate Department.” The development and support of orthodontic education at all levels should be the priority of the Australian Orthodontic Board.

As Freer saw it, echoing the ideals of 1964<sup>28</sup>, the Objectives of the Board were:

1. To stimulate and promote the spirit of self improvement and research among the students and practitioners of orthodontics.
2. To encourage and promote the continual review and elevation of standards of orthodontic education and treatment.
3. To conduct examinations for the purposes of evaluating the qualifications and skills of practicing orthodontists and conferring certificates upon those who meet the established standards of the board.
4. Promote display and publication of the case records. Not only would this set standards for treatment, but also set guidelines for case presentations for all members at Congress.
5. Encourage the Dental Schools in Australia to liaise on undergraduate and postgraduate educational objectives in orthodontics and sponsor consultation between university teachers on a regular basis under the auspices of the ASO, or the proposed board.

He recommended that a Board could function with six directors, five appointed by the State Branches and one by the Federal Council. These will become the AOB and will be entitled to use the title ‘Diplomate of the Australian Orthodontic Board’ as will all successful candidates in the future. This harkened back to the Establishment Board of the unfortunate first version. He went on to delineate the process by which other candidates might become diplomates.

In summary, he stressed:

the ASO should avoid confrontation with other educational institutions. Our main objective should be educational standards for their own sake. It will be a welcome consequence if we can gain a higher level of co-operative consultation within our educational establishments at the same time. The ASO is a strong forward

thinking Society and through the establishment of the AOB, it will have a body with the necessary expertise to influence educational standards within and outside our Society.

The report had been discussed at length at the Representatives Meeting the day before in the normal manner. Reservations had been expressed, both from the New South Wales and South Australian Branches. Both branches felt that more details were required before a proper decision could be reached. They passed a resolution that a further discussion paper be prepared on the purpose and implementation of the Board, to be followed by a questionnaire sent to all ASO members based on one already sent to members from NSW and Victoria, before any ballot is held.

There was at that time, no mention of a time period for re accreditation. The focus was much more on the collective, on setting standards rather than their attainment. The proposal came up again at the General Meeting in Perth in September 1991. Freer had considered comments produced by the questionnaires. He reported "the emerging concept is one of assessment by comparison. Participation is the central element of the proposal. Standards will be set by the member's own comparison with other cases."

The format was modified and considerably fleshed out. In the first instance the intending Board applicant had to nominate five cases and submit them for assessment (this was referred to as Accreditation), then submit a minimum of two of those cases after treatment, after which Certification was granted. It had been decided to include postgraduate students. Applicants were also required to demonstrate commitment to an active continuing education philosophy by attendance at courses and lectures, and accumulate a number of 'points' for continuing education over a period of three years. To underline the importance of research, credits could also be earned by participation in research and publication. Freer and Pollard were adamant that the process was to be seen as a rewarding professional pursuit, not so onerous so as to act as a disincentive. Later at that 1991 meeting, Freer also emphasised, that the AOB required a great deal more work, before it could be presented to members. He said the proposition is part of the wider educational issue to be considered by the Education Committee.

The new proposals for the Board had the added requirement, unique at the time, that board Certification would need constantly to be updated. Initially this had to be every four years. This meant that the process needed to be recommenced within two years. Because of the importance and complexity of the proposals, no proposal for a motion had been included in the report. It called for a postal vote to ratify the new proposals. The meeting unanimously passed a motion of support. Surprisingly, the subsequent postal vote to ratify the necessary Constitutional changes, narrowly failed to receive the necessary 3/4 majority. What could Freer have thought?

The formation of the AOB was eventually put to the Society at the Adelaide General Meeting in 1993, after a further report to Council for that meeting which included the required notice of a motion: "That the Australian Society of Orthodontists shall establish an Australian Orthodontic Board which shall be defined in the

Constitution and By-Laws and its ultimate control shall be vested in the federal Council.”.

In support of the idea this time, Freer alluded to events outside Orthodontics, even Dentistry. He quoted the Victorian Dental Board, which had recently made the following point: “There is a need to identify deficiencies in patient care and their causes, and to devise practical remedies to improve patient care.”. Freer warned “It seems highly likely that Government will require implementation of standards assessment procedures in the near future.”. The AOB could do just that. In fact, in the ensuing 15 years such threats have not eventuated although the need to remain “up to date” is universally recognised. There are at present continuing education requirements to maintain registration only in Victoria and the ACT.

This time the motion passed overwhelmingly with only five out of 104 members dissenting. It was fortuitous that this matter was placed early in the agenda that day, because before long, the necessary quorum was no longer present. President Basil Philips was thanked for his continual and considerable support.

During the preceding four years, Freer’s proposition had undergone a considerable metamorphosis. The first suggestion was very much along the lines of the 1961–72 version which was Society oriented. By the time 1993 came around, the input from his colleagues had changed Freer’s thinking to a Board which was far more ‘member centric’, containing a process whereby orthodontists might be rewarded with Certification by the Board. Doubtless the feeling became that by change to the individual, the Society would thereby be strengthened. The Board has been unwavering in this direction ever since. Its Objectives were modified marginally and were written as:

1. To provide the incentive and means for Full Members of the Society to improve and develop their expertise during the period of active professional practice.
2. To provide a co-operative environment of review which encourages participation of all Full Members.
3. To co-operate with the ASO in promoting excellence in Orthodontics.
4. To encourage excellence in the performance of postgraduate orthodontic students in Australian Dental Schools with suitable performance awards.
5. To liaise with University Dental Schools in developing the teaching and research opportunities for teachers in Orthodontics.

The first four of these objectives have been faithfully followed ever since. The fifth is less certain.

Considerations then shifted to the organisational. How was this newborn to be nourished? It was decided that initially, the Education Committee would continue to foster its development. The protocol to become a member of the AOB was determined and published in 1995.<sup>29</sup> A booklet outlining in detail, the workings of the Board and how one might begin the procedure, was prepared for the 1996 Congress.

The ASO promised to conduct the administration for the Board and provided seeding capital. After sufficient numbers had achieved Certification, the Board was to take over its own administration. Freer was able to announce in his 1998 report that the stage had been reached when the board could become “self directing”. A.J. Sutton became the first AOB Chairman in 1999. In 1998 the Board’s current account was reported as modest but sufficient. It took quite some time for the Board to take over its own administration.

The By-Laws for the Board were added to the ASO Constitution in 1996. The preamble to the objectives read:

The Australian Orthodontic Board is essential to the long term evolution of orthodontic education and treatment standards at a national level. The aim of voluntary participation should be a rewarding professional pursuit for Full Members wishing to provide the highest standards of professional care. The concept is one of assessment by comparison of case presentations and further, members seeking accreditation shall be required to demonstrate a commitment to an active continuing education philosophy.

The composition of the Board will initially comprise members of the Education Committee until sufficient candidates are available then the board will comprise a chairperson appointed by Council and five members, being one nominee of each State Branch accepted by Council.

The Board became, to a degree, State based. The State representative on the Education Committee was recruited as a non-assessing chairperson of each State Assessment Committee. The State Branches were to remove any fear of “Big Brother”. Two assessors for each applicant would be selected. One was to come from a different state.

In the early years progress was reliant, in Crawford’s words, on Terry Freer’s vision and on the strong organisational skills of Alan Pollard. They were determined that the entire experience was to be non-threatening. Pollard called it “an inclusionary model”.

After an initial flurry, which included a significant number of Queensland members, by 1997 only 40 orthodontists had committed themselves to the process. New South Welshmen seemed not to rally to the call. Those in charge determined to pursue a more proactive role in stimulating interest. President-Elect Ian Watson became worried for the future and according to the outgoing President’s report<sup>30</sup> proceeded to research ways whereby “we can reenergise our faith in the principal of the Board”. The membership was 10 per cent of the total ASO membership, similar to the US, but less than expectation.

In May 1999, there was concern that there had been no income,... “due to the fact that there had been very few new candidates wishing to join the Board, which is extremely disappointing”.<sup>31</sup> It showed “signs of withering on the vine of member apathy”.<sup>32</sup> At the request of ASO President Watson, E.C. Crawford succeeded to the Chair in 2002, when he became Vice-President of the Society. This was to become a regular progression and gives some indication how important the ASO Executive

sees this function. Crawford was totally committed to the concept and ramped up activity. He conscripted several of his colleagues (D.J. Fuller and A.J. Armitage) to assist. Their ambition was to reach a participation rate approaching 40 per cent of the ASO membership. They saw this as the ‘critical mass’.

The first major change had actually already happened. Sutton announced that Council had approved a change to the recertification timetable, such that it had to be recommenced within five years not two as originally laid down.<sup>33</sup> In addition, he introduced the indelicately, but not necessarily inaccurately, titled “Old Bastards” category, which allowed retention of Certification after two cycles for members over fifty five.

One of the other problems had been that Dental Registration Boards were unwilling to permit the advertisement of AOB membership and the use AOB logo on letterheads and elsewhere. The Queensland Board thought the phrase “accredited” was confusing, as these people had not yet “passed”. Victoria and Western Australia would not allow it. In early 2002, the Queensland Board did give their permission.<sup>34</sup> By November, Crawford had succeeded in persuading all Registration Boards that the accolade was not really confusing and that the words “Certified Member of the Australian Orthodontic Board” could be used, together with the Logo.

Other ideas to provide incentive to join up were added. Badges for both stages of the progression were minted. Steps were taken to ensure that AOB Certification was clearly recognisable at all gatherings of the orthodontic community. Board Membership became listed in the ASO directory and the website by 2002. One of Crawford’s innovations had been to publicise Board Membership principally in ADA newsletters both Federal and State. Some branches, NSW and particularly WA, were not altogether happy about this. They had voiced reservations several times at Council meetings. The concern was that others could form a view that the only ‘true orthodontist’ had Board membership. Shades of Maclean’s segmentation!

To encourage early involvement in the AOB, it was decided to allow final year postgraduate students to present cases treated during their training period. These would be assessed for a Provisional Board Certification. Candidates for Provisional Certification would have to commit to the normal Certification procedure within four years of graduation. All Department heads have strongly supported that student pathway. To further encourage postgraduate students, an element of competition was instituted. An award for clinical excellence of a treated case was inaugurated by a supply house (TP). \$1500 worth of product would be given to the winning student. A sort of modern day “Case of the Year”. The case reports were to be published in the AOJ. This prize was first awarded in 2000 at the 17<sup>th</sup> Congress.

Another company, 3M Unitek, offered a biennial award for orthodontic departments. They would nominate four of their students (who must be ASO Student Members) who were candidates for Provisional Membership to present cases. The prize of \$4000 was to be used to fund a clinical research project. Crawford was able to report that all current postgraduate students were in the process of becoming accredited.<sup>35</sup> Later, some Queensland members became disturbed at what they considered this preferential treatment of students.

The passing of the private sector amendments of the Privacy Act (1988) in December 2001 cast a brief shadow over the Board. These amendments required permission from the family before cases could be shown publicly. Similarly, the operation of the requirement that informed consent be given prior to the undertaking of any procedure was interpreted at one time to mean that permission could not be obtained retrospectively. Owen bemoaned "One person's opinion on the question of Informed Consent has caused the Board to stop activity." This too was eventually solved. An informed consent protocol was developed for those whose records were to be used and this was approved by Robert Butler, Executive Director of the ADA. The ADA had been proactive in this field.

The NZAO wrote in 1997, to see if orthodontists from New Zealand might avail themselves of the opportunity of obtaining Board membership. They had decided not to set up their own. The Executive supported this move and asked Freer to write a position paper on the matter.<sup>36</sup> Constitutional Committee Chair, Patrick Hannan prepared the necessary changes to the By-Laws. These were voted on only after a Council member joined by telelink to ensure a three quarters majority vote. The vote was unanimous.<sup>37</sup> The NZAO was advised of the outcome and booklets outlining the process and the By-Law changes were sent. The change became operative the following year. As cooperation across the Tasman grew in this matter, Council endorsed a further By-Law change and the Board became the Australasian Orthodontic Board in 2006. There is now a New Zealand Convenor. R.Y. Norton had envisaged this nearly 40 years before.

The first members were certified in 1999. By 2000, 17 had been certified and 23 were accredited. By 2005 the combined number had grown to 175 and now exceeds half the ASO membership.

Whether the requirements for Board Membership are sufficiently rigorous is a matter for conjecture. Both Freer and Pollard remain unconcerned. Their view of their inclusionary model is that "assessment by comparison" will ultimately correctly adjust the level. This cryptic remark, made in 1991, gathers meaning with the passage of time. Possibly, the incentives for postgraduate students have made the process for them too easy, because recently it was noted that of 24 members whose AOB certification had lapsed, 20 had been students when treating the cases they presented.

The ASO found itself in the interesting position of having to change its membership rules. Since 2000, only permanent residents of Australia or those permitted to become so, can be Full Members of the Society. To be a member of the AOB has the same requirement. Therefore, a Corresponding Member could not maintain certification of the AOB. Anxious to retain the involvement of graduate students, who had returned home after their course, a new category of "Overseas Member" had to be created.

The U K began with its Board "The UK Certification Board" in 1997. It saw itself primarily as an examining board. One could get an exemption from the written element by furnishing details of existing qualifications. Applicants presented ten treated cases and were given an oral examination based on those cases. A European Board also commenced operation in 1997.<sup>38</sup> There are similar Boards in

France, Germany and Austria.<sup>12</sup> In 1999, the Indian Orthodontic Society contacted the Secretariat, asking for advice on the setting up on a Board of its own.<sup>39</sup>

A/Prof. Mithran Goonawardene had spoken at the AAO conference in San Francisco in 1995 and reported a tremendous amount of interest in the continuing educational aspect of the Australian proposition. Ten years later, the American Board announced that it would change its format and after a set period of time, all American Diplomates would also have to go through the process of reaccreditation, every ten years to retain their status.<sup>40, 41</sup> To what extent the Australian experience influenced the decisions of the American Board remains unknown.

The Australasian Orthodontic Board has become an integral part of the Society. And it has done so in a relatively short period of time. It is now overwhelmingly accepted by the membership as an accolade, definitely worth striving for. Its existence will always be a monument to the foresight of its early advocates, R.Y. Norton and J.F. Reading and to the vision of Terry Freer, whose energy and tenacity brought it to fruition.

## Endnotes

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## Chapter 8

# The Foundation

The Foundation (ASOFRE) commenced its life with a letter send by W. Stanley Wilkinson to the ASO Executive.<sup>1</sup> The letter stated that he and his wife would like to see the Society establish a Foundation for education and research and that he would contribute £1000 towards this, if the Society were to approve. His letter went on to set out in precise terms just how he saw its operation, even to the extent of providing an opinion from the Taxation Department as to the deductibility of contributions made to the fund. As he saw it, its objectives were clear: “to promote research into the prevention and treatment of malocclusion and the establishment of lectures to the Society and to the public by world authorities on recent advances in the science of Orthodontics”.

The matter was first recorded early in 1961:

Resolved to set up a committee to examine the question of a Foundation and to discuss with Dr Wilkinson the method of establishment.<sup>2</sup>

A committee consisting of D.F. Spring (Convenor) K.T. Adamson, A.G. Parker and J.V. Wilkinson (WSW’s son) was set up and asked to report to the next Executive Meeting. This duly occurred in May. That report set out Objects for the Foundation:

1. The promotion of research into the prevention and treatment of malocclusion of the teeth and facial deformity in children.
2. The establishment of lectures to members of the Society and to the public by world authorities on recent advances in the science of Orthodontics.

It recommended that there should be four Trustees. Application of the “corpus and income of the funds” was to be at the discretion of the Trustees provided a minimum of £5,000 be maintained. The Committee added a recommendation that “every endeavour be made to increase the corpus by £1,000 per year and would

suggest that members donate a minimum of £25 per year". The Executive discussed it at length and also corresponded widely. Obviously they were delighted to agree.

Norton<sup>3</sup> was of the view that eventually, trustees from outside the specialty could become involved. His point was that some from business circles might be persuaded to contribute. Nothing was done in this direction at that time although the ADA (NSW Branch) was using this approach to magnificent effect and received generous support from the community for its Foundation for Dental Health Education and Research. This had been started at the same time. (30 years later the South Australian Foundation for Dental Education and Research also sought and received wide support). He also saw the immediate need to consult the Taxation Department further to ensure favourable tax treatment.

Subsequently, Stanley Wilkinson, satisfied with the Executive's response, did make the promised donation of £1000 (about \$25,000 in 2008 currency<sup>4</sup> or according to Norton's figures from his 1961 survey, about the cost of six to eight full orthodontic cases) to, as it were, start the ball rolling. Wilkinson may have been influenced to make such a generous donation by learning of the bequest in the will of the late Professor J. Reid Burt, the first Professor of Orthodontics at the Otago Dental School and Foundation Vice-President of the NZSOO. The terms of Burt's will directed that the funds were for the purposes of "the development of Orthodontic Science and for Research Work in Orthodontics". The capital amount was to be invested and the interest was to be used for the stated purposes.<sup>5</sup> Wilkinson had a different idea and was happy for the donation to be spent immediately to bring out a lecturer or in some other way. Apparently his idea that it be considered a spending fund was not generally supported. The general feeling was along the lines of using this gift as a nucleus to promote further donations. This would create a fund from which the interest could be drawn for the fund's purposes. Spring's committee was of the view that the Trustees should try to achieve donations of £1,000 a year, so as to grow the fund to £5,000 and use the interest from this to fund the Foundation's activities.

Stanley Wilkinson was strongly opposed to coercing members to make donations, feeling that it should be entirely voluntary.<sup>6</sup> Adamson was somewhat more sceptical but felt he had no choice but to go along with Wilkinson's wishes. There was concern that at the upcoming General Meeting, when the matter was to be discussed, both Wilkinson and his son, John, would be present and the speakers would be obliged to promote Wilkinson's vision, not their own.<sup>7</sup> No real Trust Deed was made at that time, but the Honorary Secretary's report for the General Meeting included the report of the Spring Committee, which had grown somewhat since it was first presented to the Executive. This document defined the Objects of the Foundation: that it be used to bring lecturers out to Australia; create travelling scholarships and to assist research and included, among other things, that there would be four Trustees appointed by Council, with two retiring every three years. They were to be "practicing members" of the Society and should be the persons "most suitable, irrespective of the places of residence". There had been the suggestion that prominent business people could be included among the Trustees or that a committee of such persons could be formed, but there was no suggestion

whatever that an academic, who might be able to adjudicate on research merit, would be included.

At the General Meeting, the President publicly thanked Stanley Wilkinson for his generosity saying that it was in keeping with the character he had shown throughout his entire life. In response, Wilkinson paid tribute to the early members of the Society and singled out A. Thornton Taylor especially, for his support of the principle of Associate Membership (a principle Wilkinson had himself not originally supported). The recommendations of the committee were accepted and four Trustees were appointed: R.Y. Norton, A.G. Parker and A. Thornton Taylor, with K.T. Adamson appointed Chairman. Alan Parker was to assume the role of Secretary/Treasurer.<sup>8</sup> A postal vote to include a By-Law into the Constitution providing for the Foundation (and also the ASO bulletin) was shortly after successfully carried out. The American Association of Orthodontists' equivalent was formed at about the same time.<sup>9</sup>

The first meeting of the Trustees occurred the following week during the ADA Congress. Decisions were taken to contact the Taxation Commissioner. They decided to ask the ASO Executive to pay the Foundation's expenses and that minutes of their meetings be forwarded to the ASO President. They also discussed how they might use their funds.

The next meeting of the Trustees was held at the Australian Club in Sydney with Adamson sending his apologies. It was agreed that all the Presidents of the State Branches be asked to contact all Members, Full and Associate, for donations which could be spread over time. Parker had contacted the taxation authorities<sup>10</sup> to ensure tax deductibility for donations. In support, he stated the two-fold aims of the Foundation:

1. To promote and fund research and
2. The establishment of lectures to Society members and members of the public by world authorities on advances in the field of Orthodontics.

He finished his letter by saying "Orthodontics is a young profession, and is very much in need of the stimulus we believe a Research Foundation will provide. A ruling in favour of the above request would greatly increase our expectation of receiving adequate support"

The Taxation Department replied<sup>11</sup> that it was important, to ensure that donations would be tax deductible, that the Foundation be accepted as "an approved research institute" under the terms of the Act. The response went on to describe the conditions which would allow for such approval. No mention whatever was made about the second goal of education. The thrust of the requirement was that a research committee be set up to direct the research and that only qualified people were to undertake the research. Grants could also be made to already approved institutions. The Taxation Department indicated it may be prepared to accept the current Trustees as the body responsible for directing the research. Details of the qualifications of the Trustees for that task were requested. Departmental approval was given the following year.<sup>12</sup>

It was decided to ask either Coenraad Moorrees or Robert Ricketts to the 2<sup>nd</sup> Orthodontic Congress in Perth. The next meeting of the Trustees was in Melbourne and this time A. Thornton Taylor was absent but Kevin Henderson, Federal President, was present as an observer. The difficulty in achieving full attendance made the Trustees consider whether it might be better if all were from the one state.<sup>13</sup>

Future plans were to:

- a) Import lecturers from time to time.
- b) Send a selected person from Australia to study and carry out research overseas.
- c) Give financial assistance to a person wishing to carry out research overseas.
- d) Make a grant of £250 at the end of 1964 to a suitable candidate under certain conditions.
- e) The compilation of a library, in each state, of complete records of treated cases.

After two years, only three additional donations had been received from NSW and six from Victoria.<sup>14</sup> Dr. Robert Ricketts had by then accepted the invitation to be the first lecturer. The plan was to lecture to the ADA Congress due in 1964 and also the ASO Congress which was immediately to follow. It was also planned that Ricketts would lecture at additional venues throughout the country. No indication of this had been made to the Western Australian Executive, which had already issued an invitation to Professor Clifford Ballard from the Eastman Clinic, to be principal Lecturer at the ASO's 2<sup>nd</sup> Congress. Ballard had trained quite a number of the newer Australian orthodontists. Documents available to the author do not scream out in frustration at this extraordinary lapse on behalf of the Foundation, but Norton, in a letter to Henderson<sup>15</sup> suggested to him that Adamson had not been involved and that it was partly because one of the Foundation's Trustees (whom he named) was upset that insufficient time had been given to ASO Council members to approve the proposed principal lecturer. Norton suggested that 'sleeping dogs' should be allowed to lie. The Executive minutes politely state "It was generally agreed that a better liaison with the Congress organising committee would have made matters easier but the Society would benefit from the visits of two overseas lecturers."<sup>16</sup>

The Foundation had agreed to pay all Ricketts' travelling expenses (Ballard only received an allowance). It is interesting to note that the programme prepared for the delegates to this second Congress makes no mention that Dr Ricketts was visiting under the auspices of the Foundation. The Foundation had planned an extensive itinerary for Ricketts involving lectures not only at both the ASO and ADA Congresses, but also in all the capital cities. The Western Australian Branch ADA Secretary protested to ADA President John Wark that this would "materially affect attendances at Congress and this Branch strongly urges the Federal body to use whatever influence it may have to arrange cancellation of the tour at that time".<sup>17</sup> Both the President and Secretary/Treasurer of the Western Australian ASO Branch protested to Alan Parker about the itinerary.

At the General Meeting in 1964, there was a foreshadowed motion which would have altered the composition of the Trustees, such that there be four Trustees, one the Federal President and one other, a Federal Councillor. Vacancies were to be filled from the Executive. This would have brought the Foundation much more under the control of the ASO Executive, but did not find favour with the meeting. Instead, the current ASO President was added as an additional ex-officio Trustee. Trustees were appointed for six years, two retiring every three years. Alan Parker mentioned that future plans would depend upon the level of donations. Ricketts' visit had been expensive and more than swallowed up the donations for 1963 (£1172 by the end of 1964).<sup>18</sup>

The fund had only increased by donations of £350 the previous year and now stood at £1868/5/4. Obviously there had been a less than overwhelming response from the general membership, despite active tail twisting. Twenty five NSW members had contributed £408/2/0 and 10 Victorians £376/10/0. No donations were forthcoming from the other States<sup>19</sup>. A personal approach to members by office bearers from their own State was considered worthwhile to increase donations. L.M. Smart from South Australia had made the suggestion that the canvassing for new funding should be undertaken by a group other than the Trustees and that there should be liaison in each State which did not have, as it were, its own Trustee.

The Trustees meet in February the next year in Melbourne. Adamson retired as Chairman, his place being taken by A. Thornton Taylor. It is interesting that this occurred as part of the three-year rotation plan and not at a time of an ASO General Meeting. The Trustees to a large extent continued to be self-regulating. The Executive felt that the Foundation should take into account their views concerning the financing of future visits by overseas lecturers and these should more closely follow the practice of the Postgraduate Education Sub-committee of the ADA.

V.P. Webb, as the new ASO president, wrote a detailed and personal letter to Thornton Taylor as the Foundation's new President in May 1965.<sup>20</sup> He said we (meaning, presumably, the Executive) have been giving thought to placing the Foundation on a firm financial footing and were to propose to the next General Meeting that the ASO subscription be increased and 50 per cent of this go to the Foundation's coffers and that all donations be regarded as capital. His calculations suggested an annual income of \$1,100 (anticipating the introduction of decimal currency). He approved of the suggestion currently being discussed, of Cecil Steiner as a future lecturer but wanted to know the costs. Ricketts's visit, including his extensive travel, had resulted in a considerable loss to the Foundation.<sup>12</sup> Webb was looking for a more measured approach.

Donations were being sought widely, but Thornton Taylor was unsure how to approach P.R. Begg, knowing of the funds that would accrue to the ASO as a result of the courses in his technique, currently taking place under the partial auspices of the ASO. Webb suggested the time to approach Begg was only after the profits from his courses had been distributed and more importantly, had been appropriately acknowledged. Subsequent correspondence from Begg casts doubts on this plan.<sup>14</sup> Wilkinson had suggested to Thornton Taylor that he approach Begg

for a donation and indicated that if Begg were to make a substantial donation then he, Wilkinson, would write another cheque. This subsequently aroused considerable antagonism from Begg, who replied to Thornton Taylor<sup>21</sup> that the 1963 course and the two courses planned for May and June 1965 would produce large profits, which eventually would accrue to the ASO. He had taken no fees from these courses and in fact had not even received full reimbursement for his costs in conducting courses in the US, some of the profits from which had been returned to the University of Adelaide. This Institution, which had been given a Treasurer's role in Begg's Adelaide courses, had sought to have him accept some payment for his services, for which he had no intention of charging. He angrily responded to the publishing of a list of donations to the Foundation, which showed donations as coming only from Victoria and NSW. He contended that indeed more funds had gone into research from South Australia than all the other states put together. He complained about carping criticism of him by people who had not done his course and said that if the 'Wilkinson' Foundation would bring to Australia someone whose approach was 'suitable', by which he meant, more in sympathy with his own, then he may make a contribution.<sup>18</sup>

Some men may like the so-called convex faces but this love of unstable convexity disobeys the principles of physiology, mechanics and art. However, if in the future I am informed about an orthodontist or orthodontists who may be brought to Australia by the Wilkinson Foundation, I may make a contribution if such person or persons are capable of making a constructive contribution to Australian orthodontics.

Most of those lecturers who were invited in the early years came with more traditional treatment philosophies, with which Begg had little sympathy.

Later Stanley Wilkinson wrote that he "had invited Ray (Begg) some months ago to join me in some further support to the fund but received no reply. Accordingly I have acted independently and have dispatched a cheque to Bob Norton."<sup>22</sup> This was also for £1,000. Further efforts were made toward fund raising in that year. Records show that Thornton Taylor and Norton divided the NSW orthodontists alphabetically, to seek donations and efforts were made using the new state liaison officers to contact every Australian orthodontist.<sup>23</sup>

The Trustees were anxious not to repeat what they referred to as 'the mistakes of the previous year', although both the orthodontists and the ADA were pleased with Ricketts' presentations. They wanted also to have approval for the proposed visit of Cecil Steiner and for its timing not to impact negatively on Congress. It is recorded elsewhere in this book that having both Ballard and Ricketts on the same programme produced some memorable incendiary results.

By late 1965 the first project, that of making of a £250 research grant, was about to begin with a suitable candidate under consideration. (D.M. Roder, Senior Dental Officer-Research School Dental Service Adelaide.)<sup>24</sup> The next major project was to invite a lecturer who could address the use of cephalometrics as a clinical tool. The view of the Trustees was that cephalometrics, already established as an integral part of proper diagnostic and treatment evaluation procedure, was poorly understood in Australia. Their first choice had been Dr Cecil Steiner who had been

sounded out in 1965 and negotiations were commenced. Steiner's itinerary was very complicated because he had been asked by a small group in South Africa to go there and also wanted to visit Japan, possibly New Zealand and the Philippines. He asked for a surprising degree of help.<sup>25</sup> Thornton Taylor was eventually able to advise the other Trustees that Steiner had accepted the invitation.<sup>26</sup> The timetable began to look a little close to the Queensland Congress. Ultimately, negotiations broke down before any announcement could be made.

At the General Meeting at that 1966 Congress, Thornton Taylor was able to announce that the fund had grown to \$7,071 (decimal currency having been adopted), which represented almost a twofold increase in the last two years. This occurred partly as a result of a recommendation from the previous General Meeting that there be state liaison officers for the Foundation and also because the Federal President was now an ex-officio Trustee. President V.B. Webb was singled out for special praise. In June of 1966, a grant of \$500 was provided to Professor Elsdon Storey for employing and training a research assistant.<sup>27</sup> Applications from Alex Roche, who was an Honorary Member of the ASO and John Chapman, were not supported. In the case of Roche, the rejection was because the amount was beyond the Foundation's means. Chapman's submission was to be reviewed over the ensuing two years.<sup>28</sup>

So, Dr Alton Moore, Head of the Graduate Programme at the University of Washington, accepted the Foundation's invitation to give a series of two-day courses in Australia in late 1967.<sup>29</sup> Moore visited each Orthodontic Department as he toured Australia. This was thought essential to provide background information on the standard of our teaching at that time. In preparation for Moore's visit, a series of cephalometric workshops was designed to complement the lecture series. These were conducted in the capital cities by local orthodontists who had been trained abroad in the use of this tool and occurred in March/April 1967. An enormous amount of planning went into coordinating the presentations of the five different lecturers. Overall the courses were well attended and appreciated. To what extent it prepared the attendees for Dr Moore's course was never really analysed. His visit cost the Foundation \$2243.<sup>30</sup> At the next General Meeting (1969), the Chairman reported that the Trustees had decided to continue the current practice of sponsoring overseas visits at times other than Australian Orthodontic Congresses. He said also the ASO Executive had come to the same conclusion. It took nearly a further 15 years (1983) before a General Meeting of the Society was scheduled at the same time. At that Meeting it was announced that the capital base exceeded \$10,000, giving promise that the Foundation could operate entirely on interest earned from its capital base in the "foreseeable future". A further Grant of \$800 to David Roder was announced.

After Dr. Moore's tour, the Foundation wrote to Dr Tom Graber, who had visited Australia in 1962 on a more or less private tour. They asked him to deliver a two-day lecture series across the country, using material of his own choosing. This came to pass in November 1970. In 1969, Darryle Bowden had presented a series of one-day lecture courses on "Longitudinal Growth Studies and the Orthodontist". The plan at that time was to alternate an Australian lecturer with one from overseas.

Two research projects were being supported: the original one of Dr Roder which was to be reported in the Society's Journal<sup>21</sup> and one by Masaaki Nakamura from the University of Adelaide which was presented at the 5<sup>th</sup> Congress. Also there were discussions for a planned symposium relating to the fostering of a team approach in providing treatment for the cleft palate patient.

The raft of Constitutional changes which came into force in 1971 brought the Foundation more under the umbrella of the ASO by including provisions related to the terms of office of the Trustees. These were to the effect that, at the next General Meeting (5<sup>th</sup>), there was to be a new Trustee who would retire at the 9<sup>th</sup> and after that, Trustees would retire in the order of Adamson, Parker and Norton who would retire at the 8<sup>th</sup>. In fact, that did happen, although the provisions in the Constitution did change over that time. Thornton Taylor retired at the 1972 meeting and the new Trustee was L.M. Smart, no longer an ex-officio Trustee. Alan Parker became Chairman. Adamson was next to retire. The ASO committed to donate \$500 yearly for the next three years at that 1972 meeting thus beginning more substantial support than simply the payment of administration expenses. The following Executive repeated the pledge. The Foundation also received over \$1000 from the Sir Kenneth Adamson Portrait Fund, which was oversubscribed. Sir Kenneth expressed the wish that the surplus be divided equally between the Melbourne Dental Alumni Research Fund and the Foundation.

Dr Donald Woodside's courses in 1973 attracted 140 attendees, causing Adamson wistfully to wonder "with almost 100 per cent attendance at the Foundation's lecture programmes, is it too much for the Trustees to expect a 100 per cent response to their appeal?"

A meeting promoted by the Foundation entitled "Cleft Lip and Cleft Palate Seminar", designed to foster the team approach, also took place in March of 1973 and attracted 85 people to Adelaide. "The broad objective was to establish the type of organisation and methods used in each state and to consider what action should be taken to promote future developments in cleft services."<sup>31</sup> A Plastic Surgeon and an Orthodontist from each capital city, most closely associated with the management of Cleft Lip and Palate treatment were invited, together with all the other relevant specialties. Forty Orthodontists, 18 Plastic Surgeons and 11 Speech Therapists (referred to now as Speech Pathologists) were among the attendees. The meeting took the form of a workshop with delegates divided into two groups. One tackled the team approach and the relative importance of research, while the other surveyed the methods of applying a complete service. The groups found the team approach was being used in most states but the organisation left something to be desired. There was no uniformity in the use of pre-surgical orthopaedics. The concept of a Cleft Palate Society was rejected, this being left to the lay population. This meeting, organised by L.M. Smart and his colleague, Surgeon Mr Don Robinson, was an enormous success although it cost the Foundation nearly \$1000.<sup>28</sup>

The tours around Australia of Graber, Woodside and later Shelley Rosenstein, increased Australian Orthodontists' exposure to eminent leaders in the field. Grants for research seemed the lesser part of the function. The financial base for the

Foundation gradually increased, as did the support for the biennial programmes they sponsored. Some however cost the Foundation quite a lot of money. Examination of the Foundation's financial statement do not show the proceeds of the first four visitors but it appears from the differences between donations and disbursements that no effort whatever was being made to recoup the visitor's expenses, which included first class air fares. For the very well attended Woodside course the Secretary/Treasurer's report says, "It might be of interest to members to know that such a visit costs the Foundation in the vicinity of \$4000.... The generous donations made by some branches from profits made at these courses is appreciated by Trustees."<sup>23</sup> It was to be nearly 10 years before this drain on funds was arrested and these presentations were made self-funding. In the 28 months ending at the 1974 General Meeting, donations and interest on capital contributed nearly \$9000; only one grant to Nakamura of \$750 is recorded but the total funds increased by only \$3,000.<sup>32</sup>

At the end of the first 15 years of its operation the Foundation had received donations of \$34,200 and had disbursed \$18,231. Of this, only about \$5,000 was for research grants and the rest for the overseas lecturers.<sup>33</sup> Adjusted for bank interest and general expenses, the balance had reached \$21,000.<sup>34</sup> Serious grant applications began to be attracted to the Foundation's commitment to its goals.<sup>35</sup> Grants were made to T.J. Freer and A.J. Sutton of \$5000 and to B.D. Bowden for \$3,000.

For the 1974 General Meeting of the Society, the Report from the Foundation's Trustees contained a donation slip hoping to encourage further donations. In 1974, alterations to the Constitution were presented which would have added an annual contribution to the Foundation to ASO members' annual subscription. After considerable debate about the legality, it was decided that this should be voluntary. Over the next few years, much to the chagrin of the Trustees, less than half the membership availed themselves of this opportunity. Other suggested changes included, that funds shall be separately accounted for and duly audited and that a Trustee may be reappointed on three but no more than three occasions and that there should be no rotation policy. This was a contradiction to the change brought in three years before. This latter clause was rejected by the membership in favour of ensuring a degree of continuity within the group of Trustees: "at least two of the retiring Trustees shall be reappointed to ensure continuity". The Foundation was still mentioned only in the By-Laws of the Constitution.

It was also decided by Council, that Trustees would be appointed at the recently instituted Conjoint Meeting of the new and retiring Councils. This requirement, that changes to personnel on the Board of Trustees could only take place at Meetings of Council, subjected the Foundation, a little further, to the watchful eye of the Society.

Included in the major 1977 Constitutional changes, was an alteration to the investment policy of the Foundation, which up to then had been required to invest only in "Trustee Securities of Australia". This is a term no longer in use, but was a high class of investment security permitted of Trustee Organisations, just one step below the possession of the backing of the Government. This change was

brought about by the feeling that the Trustees were indeed sufficiently responsible to safeguard the donated funds. And so the requirement became that “the corpus and income of the Trust fund shall be invested in such manner as they shall in their sole and absolute discretion determine”. In actual fact, the Trustees had been ignoring this requirement. In the early years, Foundation funds were audited, in an honorary capacity, by Ray Newland,<sup>14</sup> who was the CEO (then called Secretary) of the NSW Branch of the ADA. He noted that several of the investments could not be classified as of “Trustee” status and provided a degree of investment advice.<sup>36</sup>

At the 1977 General Meeting A.G. Parker retired as Trustee and as Chairman. He had given service to the Foundation since its inception. Years later, Parker was to receive recognition for this service, not only by the Society, from whom he received a Distinguished Service Award, but also by receiving an Order of Australia award. For the first time there had to be a ballot between five nominees for his replacement. C. V. Hill was elected to join Henry, Norton and Smart.

Two important grants were announced. A further \$500 to add to a similar amount already given to Oral Biology Department of the University of Adelaide, to help with the restoration of their collection of human crania and a grant of \$729 to Milton Sims to complete his work on the periodontal membrane.<sup>37</sup>

Sheldon Rosenstein’s visit in late 1975 had been followed by a two-day course of lectures given by Rex Wallman and Geoff Brown, allowing those attending comparison of the approaches and results of the Begg and Edgewise appliances. This was the last occasion when Australian Lecturers were the main speakers. Prof. R. Reidel was to be the next visiting lecturer in late 1978. The Trustees decided to reduce the demands on the lecturer.<sup>38</sup> Rather than be forced to tour the entire country, he was to speak only in Sydney and Adelaide. Thus began a change, which finally resulted in the Society’s current calendar of events. A pattern had been set such that the Foundation sponsored a lecture series in the years between Congresses, which were held mostly at two-year intervals. For the first time a donation was reported from someone outside the profession.

## The Begg Award

At the 1977 General Meeting the ASO Treasurer recommended that funds, surplus to requirement, be donated to the Foundation and so \$10,000 was committed. In addition, as a result of a suggestion which included a gift of \$500 from the Begg Light Wire Study Group, in 1977 Grahame Moore, President of the South Australian Branch, proposed to the ASO Council that a national research award be inaugurated by the ASO as a way of honouring the contribution Dr P.R. Begg had made to Australian Orthodontics.<sup>39</sup> The ASO advanced a further sum of \$5,000 and decided to use the combined funds to inaugurate the P. Raymond Begg Research Award. They hoped further donations, specifically for this award, would come from State Branches and other professional organisations. As the funds were to support an award, not a grant for research, donations could not be tax deductible, as were donations to the Foundation itself. A separate fund was established and further donations were sought. It is interesting that the Society’s By-Laws relating

to these awards made it quite clear that they are awards made by the ASO, not the Foundation. The Foundation had agreed only to their administration.<sup>40</sup> The ASO had responsibility for advertising the Award and the Journal was used for this purpose.

The successful candidate was to receive a prize, a medallion and in turn was expected to read a paper at the subsequent ASO Congress. Ten medals were struck in sterling silver, at the then not inconsiderable cost of \$1581.<sup>41</sup> Even though the By-Laws state that it is the Foundation which selects the examiners, advice was sought from the ASO Council regarding the selection. They were to receive an Honorarium of \$200, similar to examiners of Master's theses. Norton had let it be known that the Foundation was not going simply to be a "bookkeeper in this matter". He was determined that the award would have the Foundation's stamp on it.

The first winner was Milton Sims. Brian Lee and Steven Seward also submitted entries.

The request to administer the prize, including the selection of examiners was repeated by the next Federal President. This continues to the present day with the (now) audited fund accounts being included with those of the Foundation. A further donation of \$5000 for the Research Award and at the same time a separate donation of \$15000 direct to the Foundation was made as a result of the highly successful 1982 Hong Kong Congress.

Initially there was to be only one award and it was to open to world-wide competition.<sup>42</sup> Subsequently, the decision was taken to divide this award into two and the First Research award was created to encourage younger orthodontists to publish their research. This was modelled on the AAO Council on Research, which had a Milo Hellman Award and a Harry Sicher First Research Award. The idea of, as it were, a senior and junior award was first mooted in 1980 but initially rejected.<sup>43</sup> They were first offered together in 1982. By-Laws for these biennial awards to be incorporated into the Constitution were created in 1982 and passed the following year. A suggestion of R.G. Henry<sup>44</sup> that the First Research Award be named after A. Thornton Taylor did not succeed.

The rules stated that the P. Raymond Begg Research Award:

will be awarded for an outstanding research paper representing an original investigation of significance to orthodontics. This award may be an unpublished paper or a previously published work, significantly revised and submitted as a new essay, and should not merely be a copy of a thesis, but should be prepared in the usual conventional format for scientific papers, including introduction, material and methods, findings, discussion, conclusions and bibliography. The entry should be presented for examination in a manner to conform with the requirements for publication and be available for publication in the Australian Orthodontic Journal.

It was further stated that one of the three copies presented:

shall be retained by the Australian Society of Orthodontists, which reserves the right to use the material of the winning entry for publication in the Australian Orthodontic Journal. An indication of intent to publish must be given by the editor to the author within two months of the Congress at which the award was presented.

Milton Sims wrote<sup>45</sup> concerned about rewriting published material, in that there could be no altering of the results and that there would be copyright issues if any illustrations were involved. The Foundation responded through the ASO President Darryle Bowden<sup>46</sup>: "We felt it should be appended in the back of the entry in its existing form... The thrust ... was to prevent a thesis or similar paper written 10/20 years ago...submitted for an award as a thesis...and not updated either in literature survey or added work."

During the years immediately following, the Trustees were disappointed at the lack of interest in the awards. Wallman had to write to the Orthodontic Departments reminding them of the availability of the Awards.<sup>47</sup> Milton Sims was again the recipient of the Begg award in 1984.<sup>48</sup>

In 1978, the ASO Council took the decision to hold a General Meeting at the same time as the Foundation's two-day course of lectures. This would allow for the long-awaited yearly meeting to take place, as was required by the soon-to-be-established incorporated status of the Society. Lysle Johnston toured in late 1981 giving only one-day presentations, which made the inclusion of a meeting difficult. The first occasion where a General Meeting was held in conjunction with a Foundation meeting was not until 1983.

A second Cleft Palate meeting was organised in Sydney (Sept 1979) by R.G. Henry and his colleague, Plastic Surgeon David Dey and attended by 118 delegates. Many letters of appreciation were received, suggesting that the Foundation should organise another conference in three years time.

Smart retired in 1982 and his place was taken by D.J. O'Donohue, who beat John Reading in a ballot. C.V. Hill was elected President. That same year, the Foundation received a generous bequest of \$20,000 in the will of Donald Spring who had made so many valuable contributions to the fledgling Society in his lifetime. The Trustees of the Foundation decided, because of this generous donation and his significant contributions to Orthodontics, that the first lecture at Foundation Meetings would be called the Donald Spring Memorial Lecture. It was also decided that Foundation Lectures were to be self-funding and not be a drain on Foundation funds as had occurred hitherto.<sup>49</sup> Profits from these meetings began to make significant contributions to the Foundation's coffers.

Awarding of Travelling Scholarships to enable newly graduated Orthodontists to travel overseas to a "centre of excellence" and thereby gain knowledge and experience, not readily available in Australia, was also mooted.<sup>50</sup> The initial idea was for a scholarship to support six months of study and would involve \$5000 to be awarded every two years. This proposal was later dropped because the Australian Dental Trade Association, which had been approached to help with funding, had already made an arrangement with the ADA about such scholarships.

An Orthodontic/Surgical seminar was planned for 1983 in Canberra. This eventually took place in Sydney and was the first Foundation Meeting at which the ASO held a General Meeting. For this meeting, the Foundation entered into a cooperative arrangement with the Gnathological Society. W.R. Proffit had accepted an offer from that Society to visit Australia. Initially the Gnathologists had offered to make Dr Proffit available for one day, if the ASO would contribute half of his fares. This not overly generous offer, on negotiation, was increased to include a second day.

W.J. Mackie suggested that the Foundation should follow the example of the NSW Foundation for Dental Health Education and Research, in promoting Orthodontics particularly by supporting more orthodontic education for general practitioners and the public.<sup>51</sup> The Foundation received notice that it would be receiving a request from Grahame Dunn, Chairman of the newly created Public Relations Committee, requesting funds for a public education programme.<sup>52</sup> Although this had been envisaged by Stanley Wilkinson at the outset, this was the first endeavour of the ASO into that arena. The notion was supported in principle. Later, Dunn was to seek an interest-free loan to produce a pamphlet entitled "The 7 Most Frequently Asked Questions About Orthodontics.". Money was to be repaid by the sale of the product. The Foundation also trialed some Audio-Visual cassettes from the AAO at a Foundation Meeting and when this proved successful, ordered some for a library.<sup>53</sup> Material from the AAO had been examined by the ASO Executive, as early as 1969.<sup>54</sup>

Henry reported in 1986 that there had been no applications for the Awards and precious few requests for research funding.<sup>55</sup> Members of Council were also asked to examine the rules for the Research awards in the light of the AAO method and possibly rewrite the requirements for the First Research award so as to accept an MSc thesis on the undertaking that the applicants are prepared to write an article for the Journal and lecture at Congress. An appropriate change was made in 1987. It read: "it is expected that such essays should be a Master's Thesis, prepared as part of graduate education programmes. If the successful entry is submitted in a thesis format, the author should feel obliged to submit a second manuscript in the form of a paper for publication in the Australian Orthodontic Journal.". For some time V.C. West, in charge of the Melbourne programme, had required this of all his students. It added another category of recipient: "individuals, who had not previously published research in orthodontics or related fields, may submit original papers not prepared as part of an advanced training programme in orthodontics".

During the 1980s, interest rates, world wide, were historically high, climbing towards 20 percent for borrowers and over 15 percent for lenders. The Foundation profited greatly by this situation and its coffers were thereby hugely embellished. The downside was the high (over 10 per cent per annum) inflation, which inevitably accompanies such high interest rates and is really its cause. Research costs increased. To take advantage further of the higher interest rates on offer for larger capital sums, in 1987, those funds earmarked for the Awards, totalling over \$12,000, were transferred to the Trust's general funds, so requiring a different method of accounting. According to Reading,<sup>35</sup> this decision was reversed the very next month with a slightly reduced sum being returned to the quarantined Begg

Award account. At that time the total assets neared \$20,000 (plus the die for the medallions).

## Assessment of applications

In 1983, Sims wrote to Wallman suggesting they fund projects on a two or three yearly basis<sup>56</sup> to assist in planning research. The response was to the effect that part only of the available funds would be used in this way.

At the 1987 General Meeting, Sims congratulated the Foundation on its work and for its awards. Without the Foundation, he said, there would be very little research in Orthodontics. He did suggest, however, that there be more flexibility in its operations; that the Chair should be rotated to ensure a change in stimulus and that somebody connected with research, who had at least a Ph.D, should form part of the grant awarding process. In fact none of the Foundations Trustees have ever really been in possession of such qualifications. Further, the approach has never been similar to that used by organisations like the National Health and Medical Research Council (NH&MRC), which makes a practice of forwarding applications to known workers in the relevant field, whose expertise could inform the decision process. The Australian Dental Research Fund Inc. uses a list of experts compiled by the ADA, as independent assessors.<sup>57</sup>

G.J. Moore, when he was Chair in 1996, reported that he would take the research applications to his summer cottage and work on them for a week, in preparation for the meeting at which the funds were allocated. Requests for funds for Ph.D. theses always received favoured treatment. New equipment was less favoured. Attempts were made to apportion the grants fairly between the Orthodontic Departments. At their meeting in March of 1987, the Trustees announced that the Foundation had received contributions of \$8,600: slightly less than the year before and that they had received requests for funds in excess of \$50,000 but had been able to grant only \$20,000. The historic norm for funds awarded was about half the funds requested. The capital base was then \$164,000. This provided an impetus for further attempts to be made in 1988 to attract donations and a special appeal letter was sent to all ASO members. It included an appeal to the generosity of members and also reminded them about tax deductibility. A yearly donation from each member of \$100 was suggested. That same year the auditors saw fit to recommend to the Trustees that they should improve their book keeping records and that grants and awards should be decided at meetings and be properly minuted.<sup>35</sup>

Wallman became Chairman the following year (1988). He reported<sup>58</sup> that he found the decisions to make grants difficult, as his friend and colleague, Milton Sims, from the same city, always made one of the major requests. It was noted that South Australia and Queensland were the largest recipients of awards, but its members the least supporting. No consideration was ever given to make the process more "at arms length" or professional. This remains the case to this day. So, from both sides, the process of determining Foundation grants was not without deficiencies.

To boost the capital base, the notion of a compulsory levy as part of the yearly membership subscription paid by members had been mooted in 1974. The initial

idea was modified that it should be voluntary and the amount was set at \$30. This was later raised to \$50 but over time fewer and fewer contributions accompanied the yearly subscription. Changes to the Taxation Laws meant that the tax status of the Foundation was in question. It had originally been listed as an approved body and this was now no longer the case. So voluntary donations were no longer tax deductible but a levy was.<sup>59</sup> A levy finally became a firm requirement in 1989.<sup>56</sup>

R.G. Henry had worked hard to organise a cooperative effort between the Foundation and the 25<sup>th</sup> ADA Congress.<sup>60</sup> Robert Vanarsdall came to Australia in 1988, originally to lecture both to the 25<sup>th</sup> ADA Congress and to the Foundation, with the agreement that each body would pay half the costs. A very long-term negotiation was required to reach this point. The principal idea, which originated from the ADA, was that cooperation such as this would help cement the bond between the various affiliates and the ADA. ADA involvement required that the venue again be in Sydney, although it was originally thought that Foundation Meetings would also use some system of rotation for its venues. The ADA unilaterally withdrew from the commitment, but Vanarsdall's visit proceeded. However, the Society continued to support the principal of inviting a lecturer to give a presentation at both ADA Congresses and to the Society.

In 1988, the Foundation provided its first grant to an applicant from NSW. The recipient, Mark Cordato reported that Milton Sims was involved in his grant application and that his department Chair, Associate Prof. K.G. Godfrey, had always had adequate access to funds from within the University. Godfrey confirmed<sup>61</sup> that he had never "bothered" to seek grants from the Foundation. At that stage, no grant applications had been received from the Melbourne or Perth Universities.<sup>59</sup> The latter took no students from 1984 to 1990. Since then, all Departments have applied for research grants for their students from the Foundation and a range of other sources. The Foundation is not able to supply the majority of the research funds used by the Departments.

## Sam Bulkley Travelling Fellowship

Although the travelling scholarship idea was not progressed when first mooted, an additional award came into being in 1986. Rocky Mountain Orthodontics (RMO), who supplied orthodontic materials to the profession, wanted to create something to commemorate the contribution of the late Sam Bulkley. Although based in Honolulu, he had been their first representative in Australia<sup>62</sup> and had become very highly regarded by the Australian orthodontic community. They made a donation of \$3,000 proposing the founding of the Sam Bulkley Travelling Fellowship, which would help fund overseas travel for study and research purposes undertaken by a recent postgraduate student.<sup>63</sup> ASO council accepted the proposal and asked the Foundation to administer it. The Trustees had no experience for this and no guidelines had been set down. The first award was made to Dr Neofitos Douvartzidis from South Australia, who was at that time studying at the University of North Carolina. Concerns were expressed that the recipient was already overseas when the application was made. The Trustees maintained the right to exercise their discretion in this matter. Wallman, with whom Douvartzidis had held discussions

regarding future employment, had refrained from voting. Denise Lawry, recently graduated from Melbourne, was the second recipient.

As in the case of the Begg Award, recipients were expected to publish a report on their experiences. Not all of the recipients, including the first one, responded to this obligation and Trustees were concerned that in the first years, two had not done so. Concern continued until 1993 when the Trustees decided that, if after six months a recipient had failed to produce a report, they “would be informed of their moral obligation to refund the money they had received”. This award was made yearly until 1997 when applications became less frequent, probably due the increasing costs involved in overseas travel. Later, RMO kindly consented to increase the value of the award to \$5000 to ensure more interest.

In 1987, again because of a lack of applicants, the value of the Begg award was increased to \$1000 with an additional \$400 for travel expenses to Congress.<sup>64</sup> That year it was awarded to Simon Freezer from Adelaide.

It was decided to distribute \$35,000 for 1989.

In 1988 the Trustees asked ASO President Stan Paul to refer to Council, the question of the format for the Foundation meetings between Congresses. Henry had said<sup>65</sup> that “he could see the day when our Foundation lectures would become a mini Congress.... Gone are the days when one person can come from America, or wherever, and speak to us for two days and keep fresh....”. Included in the discussion was the inclusion of local lecturers in the programme and it was resolved to provide for this. Also discussed was the type and site of venue, so there could be a rotation around the country along the lines of the Congresses. Venues as far away as Darwin were mooted, but the Trustees were concerned that attendance may not always be adequate.

Lennart Weislander was the lecturer in 1990. Canberra was chosen for that meeting at which D.J. O’Donoghue was re-elected Chair and the position of Secretary/Treasurer was split. In 1991, O’Donoghue retired after nine years and William Weekes was elected to the Chair. It was then decided that the Foundation should maintain a capital base of \$300,000 and distribute the rest. This left \$80,000 for grants. This was the first and only time that a conscious decision was taken to stabilise, rather than grow, the capital base. The compulsory Federal Levy had relieved the Trustees of concern about inflation-proofing their capital.

Not all Foundation meetings were well attended and financially successful. That at Hamilton Island made a substantial loss of \$13,000, roughly equivalent to the profit from Canberra meeting two years before. Although the venue was very attractive, it was a long distance to travel for a short meeting. This justified the reticence of the Trustees to include Perth amongst the proposed venues.

In 1993 Weekes, after six years and Roberts, after four years, tendered their resignations. In that year, it was reported that over the preceding five years, grants to the amount of \$171,000 had been made. Of these, most still went to Adelaide, followed by Queensland. No awards had yet been made to WA. (Figures published in 2009 showed that for the 10 year period from 1996–2005, \$505,000

was distributed, with grants to the University of Sydney being double that awarded to any other University).

The Foundation's auditors had taken steps to establish the Foundation as a bone-fide Research Institution. This was confirmed late in 1991, when the Tax Department approved the application for tax-exempt status and waived the obligation to submit income tax returns. This returned the Foundation to the situation it had enjoyed since inception but which changes in the law had altered. The question of the legal status of the Foundation was then raised. Attempts were made to locate a Trust Deed. After a lengthy search, it was eventually determined that none had ever been prepared. Ruth Inall was of the view that the 1962 decision from the Department of Taxation meant that none was required and at that time this may have been so. But the tax position had since changed and after some time, with the Society's solicitor's encouragement, it was decided that a Trust Deed should be prepared. A second legal opinion sought the following year considered that a deed was not required as the favourable tax position had been confirmed and that all that was required was a set of rules and regulations.<sup>66</sup> However, a Trust Deed was requested.

During the lengthy discussions taking place at that time around the proposed changes to the Constitution, the relationship between the Foundation and the Society was raised. Questions were raised about the autonomy exercised almost as a matter of course by the Trustees. Olive was of the view that the Foundation should act more as a committee of Council.<sup>67</sup> This attitude was to surface again shortly. On the other hand, the Trustees always felt that the tax laws required them to operate 'at arms length' from the Society's general operations.<sup>68</sup> The Constitutional changes were not really bedded down until 1996, by which time the final draft of the Trust Deed was also ready for the President's signature. Essentially, the changes these new documents brought with them were that mention of the awards had been removed from the ASO Constitution altogether and they had become part of the Foundation's new Deed. Grahame Moore became Chairman. Dickinson continued to receive all reports and minutes. There was virtually a complete turnover of Trustees at that time and they determined to make some changes they saw as necessary. ASO Councillors were of the same opinion.

To place the Foundation on a more businesslike footing, a "Manual of Procedure and Action" was prepared and adopted together with the creation of a permanent filing system, containing both the Trust Deed and the Procedures Manual, together with all the Foundations records. It was also decided that a history of the Foundation be prepared. The history was to be written by John Reading. His work proved to be a great boon to the shortened version written here.

Although the advice had been given over six years previously, the Foundation's financial records were first included as part of the overall financial reporting for the Society in 1995. Prior to that, it was the Foundation that provided its own reporting. The Journal's finances had always been reported with the Society's accounts. Chairman Moore reported to the 1996 meeting that, in addition to the Trust Deed, new documents outlining the guidelines for Research Awards and research grant application forms and assessment guidelines had been produced.

He said “These documents now provide the baseline for the conduct of business by the Foundation involving organisation of meetings, research funding and the Research Awards.”

Concern was expressed about the need to improve surveillance of the use to which the Foundation funds were put. This had never been a serious consideration previously, although some minutes do note that reports on the progress of supported research had been requested from the recipients as far back as 1980. It was decided to contact the Australian Dental Research Fund Inc. to obtain guidelines for the supervision of research grants. R.G. Cook offered to produce draft guidelines of the supervision required. These were to accompany a standardised application form. This never eventuated but accountability for expenses came to be required by the mid-1990s.<sup>69</sup> Guidelines for the grants were appended to the Trust Deed. A meeting with the AAO Foundation Chairman was arranged to see if any ideas existed which might be of use locally. This provided good background information for the Trustees. Certainly, the AAOF documentation was very detailed and precise.

In 1996, the Trustees decided they needed to take professional advice for the management of their ever-increasing asset. A company, Mondo Financial, which had been providing advice for the partnership to which the Secretary belonged, was retained. Although the firm has had a change of ownership, they have continued to provide management and advice until the present. This has enabled the Society to understand how the Fund is performing as economic conditions change. It was decided to allocate funds to support storage for and future study on Steven Seward’s case records. Sadly this was never progressed.

The following year, the Society found itself in a favourable financial position and decided to donate \$100,000 to the Foundation. There was a slight proviso in that, in order that the ASO be seen to be somewhat at arms length, funds were to be set aside from this grant for the upcoming programme for the accreditation of the graduate Orthodontic Departments. The recent round of accreditations of the undergraduate programmes conducted by the Australian Dental Council (ADC) had cost around \$50,000, so a figure of \$15,000 was suggested. These funds were to defray the costs of the peer review or evaluation visits to each Department. This peer review was to become an integral part of the ADC’s accreditation process. Later it was decided to budget \$20,000 for the visits.<sup>70</sup>

The next year the Trustees sought an increase in the annual membership levy from the \$50 set nearly ten years before to \$75, but the Council refused. The general subscription was being increased at the same time, because the large donation made to the Foundation by the previous Executive had caused unforeseen repercussions for the succeeding Treasurer.

The Foundation had never sought to guide the research focus of award recipients but it did become concerned in the late 1990s, when there were requests from three different applicants, from different Postgraduate Departments, for funding for demographic surveys of the public’s attitudes to aspects of Orthodontics. The Departments were contacted to see if some rationalisation could occur but in one case the survey had already been carried out professionally and in fact paid for. The three surveys did not deal with exactly the same material and A/Prof. Woods from

Melbourne, wanted to continue and expand the project. The exchange of letters reveals his frustration particularly at the time taken to respond to his requests:

What I really wanted was some indication of whether we should continue this professional data gathering process. We sent a full long-term proposal with likely future directions for this study ... because it's the response to that proposal which I was told would come after the Canberra meeting. As for the money, I just wanted the Trustees to realise that in most of these cases I will be picking up the difference between the costs and the funding we receive from anywhere. I have no choice.<sup>71</sup>

Not only did the Trustees encounter difficulties in the process of awarding grants, but the administration of the Begg and the First Research awards also were to prove to be extremely difficult. For a considerable period of time the Foundation had appointed the same two assessors for its awards. Of their own volition in 1996, these two assessors recommended some changes in the award conditions. These had been accepted by the Trustees. Later, the Trustees decided to tighten up on the 'Conditions of Entry'. They stated that award winners "may be required to modify, or write a second paper based on their winning paper, for the purposes of publication in the Australian Orthodontic Journal". The laudable feeling, of course, being that the recipients of the grants owed something to the providers of much of the funding, in reality the Society itself. The ASO Executive was also anxious that this material be printed in the ASO's Journal.<sup>69</sup>

In response to this, early in 1999, letters were received by the Foundation from two senior people at the University of Melbourne (Louise Brearley Messer, the Elsdon Story Professor of Child Dental Health and the Dean, Professor Eric Reynolds<sup>72</sup>) and also from Milton Sims<sup>73</sup> drawing the attention of the Foundation to potential problems from these recently promulgated alterations. The Melbourne academics, writing in support of their Head of Department, Michael Woods, whilst recognising the assistance the Foundation gave to the Departments and adding that Woods was committed to the local Journal, said that he had a number of projects on which his students were working, that in their view, needed to be published overseas. Woods was concerned that by doing that, he might be breaking the Foundation's rules and so rendering his students ineligible for ASO Awards.

Sims made the point that it was vital to get articles published overseas. He listed no less than ten what he called "adverse ramifications" from the Foundation's directive, starting with that it "placed a heavy responsibility on the Journal to get its act together" and continuing that overseas publication was a prerequisite to establish academic credentials, to secure promotion, to compete for funding and was a stimulus to postgraduate research, enhances Ethics Committee approvals and so on. He finished his list by saying that these restrictions are not imposed by other Australian Funding Bodies (which was not entirely correct and is referred to below). Sims' attitude was coloured by the fact that had submitted a paper to the AOJ for publication the year previously, which was delayed to the extent that he had had to resubmit it elsewhere. Sims said: "Clearly, the Foundation could make an even more significant contribution to the future of Australian orthodontic research and education, by modifying these stringent conditions, suddenly imposed

for 1999 and subsequent years.” At the Trustees meeting the year before, it had been noted that Sims was “by far the largest recipient of Research Funds from the Foundation and it was some years since he had published an article in the AOJ”.<sup>74</sup>

“If the Trustees do not wish to speak at the AGM to the points that I have made in respect to this matter, I would like to have the opportunity to address this subject at the meeting.” The normally mild-mannered Sims saw no reason to leave anyone in the slightest doubt about the depth of his feelings and the importance he attached to the issue.

Adj. Prof. J.K. Hawkins, the Chair of the Foundation at that time, took the concerns on board and suggested further alterations along the lines of the practice of the Australian Dental Research Foundation which allowed some latitude in the matter and would in special circumstances, give their permission for publication in an overseas Journal. Hawkins suggested that if there was to be publication in an overseas Journal, that due acknowledgement to The Foundation be given in the article and that an extended abstract suitable for publication in the Journal, must be lodged with the Editor. To help clarify the situation, the AOJ<sup>75</sup> included an extensive report on the activities of the Foundation. It included information on the recently altered conditions for the awards and a detailed report from Craig Dreyer of his experiences as the recipient of the Sam Bulkley Fellowship. Underneath the portion describing the awards was an Editor’s note to the effect that “contrary to published rules that work can only be submitted once, a submission had indeed been twice rejected. The first time, on the basis that it was not contemporary and the second time that it lacked merit.”. He commented that there was no mention of contemporaneity, in the recently rewritten guidelines.

The new ‘Conditions of Entry’, published in March of 2000, contained an additional clause “entries should be in the form whereby the identity of the entrant is anonymous. A separate cover sheet with the name, address and telephone number of each entrant should be included.”. The hope was that both the applicant and the assessors could remain totally anonymous throughout the whole procedure. However the relatively small research community within Australia would make it extremely difficult for the applicant’s work not to be known.

B.W. Lee, the Journal’s Editor weighed in, when asked, as was usual practice, to print the Foundation’s announcement concerning the Elsdon Story First Research Essay Award. He said that no award-winning articles had ever been submitted to him, nor could the Foundation list any award winning article submitted to the AOJ since the Foundation was established:

Neither the award winners, nor the Foundation, nor the Society had taken steps to submit articles.... I do not want this vague and nebulous situation to continue. If the Federal Council does not feel that the Foundation owes something to the Society through the Journal by making publication obligatory, then the whole idea of publication in the Australian Orthodontic Journal should be dropped.

The Foundation sought the views of all parties. The Departments noted that historically there had not been an overwhelming response from researchers to

submit material for the awards. The Trustees responded by asking permission from Council to increase considerably the value of the awards and requested that ASO Council contribute 50 per cent of the value.

In September the following year (2001), the conditions of entry were altered yet again. On this occasion drafts were sent to each of the Orthodontic Departments for comment and several alterations were made as a result. The size of the Begg Award was increased five fold but the second half would be forwarded to the successful candidate only after final submission to, or publication of, the paper in the Australian Orthodontic Journal. The First Research Essay award was renamed the “Elsdon Story Research Award” in 2001 in honour of Prof Storey, whose research laid the basis for much of Begg’s treatment approach. It was increased at the same time to \$3000. Clauses were added to accommodate the possibility of multiple authorship, where related theses were merged for publication. The clause which required the winner to modify or write a second paper based on their winning paper, for the purposes of publication in the Australian Orthodontic Journal was amended to the effect that should the author decline publication in the Australian Orthodontic Journal, an abstract must be prepared for submission to the Journal. Clearly, this was to address the concerns so forcefully enumerated by Milton Sims.

The matter had become serious, following an application for the Begg Award in 1999. Initially, the application was rejected on the grounds that it did not comply with the published guidelines. The applicant had submitted an extensive compilation of his previous research. The assessors for the Foundation’s awards had already indicated a desire that any submissions not be too lengthy and be appropriate for Journal publication. The Trustees permitted a resubmission of portion of this extensive work. The assessors did not feel this amended work should receive the Award. They gave their reasons which partly had to do with adherence to the ‘Conditions of Entry’ and partly about aspects of the work itself. The applicant had placed great store in the attainment of this award and during the ensuing correspondence drew the attention of the Trustees to flaws in the procedure. A major part of his concern related to ambiguities in the conditions of entry. Subsequently, he wrote to the Foundation, asking “on what basis was my subsequent entry considered to lack sufficient merit to be considered for the award (especially when unopposed). Professor Woods had another issue with the Society at the same time. This had to do with intellectual property and is discussed in that section. The fact that these two issues occurred simultaneously, added exponentially to the seriousness attached to each.

On one occasion during the lengthy discussions regarding this matter, at a Council meeting,<sup>76</sup> several of the Councillors mentioned the apparent autonomy of the Foundation and wanted clarified its relationship with Council. This was not the first time that this had been raised.<sup>55</sup> A general feeling within the Council appeared to be that the Foundation did its own thing independently of the operations of the ASO and this was so, even though the President was, ex-officio, a Trustee and therefore aware of all matters. Some Councillors complained that they were not aware of what the Foundation was doing. Accordingly an attempt was made to have the Chairman of the Trustees added to the Council. This did not succeed.

Woods asked for the reasons for the rejection to be given to him. The senior assessor was contacted and he was reported as saying that some examiners would have been happy with the work and that he would not mind if his comments were seen. Lee participated in the discussion. It was his view that the controversy would not have arisen had the assessors of the paper given their reasons for rejection in much the same way as reviewers of articles to the Journal would provide comment to the author in the lead-up to publication. Communication deteriorated further so that Woods resigned from the Society and even further when, despite two years of effort by Council to avoid it, he threatened legal action against the Society: “to try and obtain some acknowledgement that there were issues concerning the application for and subsequent failure to obtain a PR Begg award”.<sup>77</sup>

The Council<sup>78</sup> had acknowledged that Woods had raised some valid concerns. In an endeavour to create a resolution several on Council were of the view that the work could be resubmitted to alternate assessors. Others felt that the reasoning behind the rejection should be provided. This, the Foundation felt it could not do. Reading the copious files on the issue, it is quite obvious that Council made a considerable effort and was desperately keen to satisfy both parties. A written apology from the ASO President was finally accepted. The issue was resolved absolutely when, in 2003, James Curtain, who had been filling in until the matter was resolved, gave up his position on the Education Committee in favour of Prof. Woods. The Society’s response to the resignation of one of its most significant members tells us much about the ASO. In a bigger group, this may have been largely ignored. In a more tightly run organisation, it may never have happened. The determination to produce a satisfactory solution, at the cost of an inordinate focus of attention, demonstrated that the ASO has remained a people-centred organisation, where personalities count.

In retrospect it must be accepted that there was fault on both sides; that the Foundation had begun to act or had continued to act a little too independently; that in this issue it was a little bloody-minded. Certainly the conditions of entry have since become much sounder and the methods of assessment also underwent a change. All involved were profoundly influenced by a comment made by Professor Wayne Sampson who said that he would really like, one day, to win a Begg Award but if people of the quality of Michael Woods could not win it, what was the point? Indeed in the 25 years since its inception there have only been three winners (one twice).

After twelve years of service, Hawkins announced that he would step down. For the first time there was concern about the continuity of Trustees’ governance and that a progression needed to be set up at least for a period of eight years.<sup>79</sup>

The Society began to use the acronym ASOFRE in referring to the Foundation. This has probably become the correct description; however it is not so used in this text.

The fund raising activities for the Foundation were ramped up after 2000. The Trustees sought to incorporate current ideas successfully used to encourage giving elsewhere and began a programme called “Foundation for the Future” in May 2001. A target to raise \$1,000,000 for this fund was announced. This being

the amount the Trustees thought was essential to provide adequate support for orthodontic research in Australia. They followed the practice of the AAOF, in that several levels of donation: Patron, Benefactor, Sponsor could be recognised publicly with presentations made to the donor. The donations were regularly published. A long way from Stanley Wilkinson. By the end of 2001, more than \$350,000 had been promised. This was very satisfactory because at the same time three of the State Branches were also in the process of seeking funds. In NSW this took the form a “Case for the Future” programme whereby people or families who were having treatment gratis or at reduced cost were to be asked to make an equivalent donation. This idea had originally been suggested for the Foundation by Darryle Bowden in 1982, but had never been instigated.

Since that time the Foundation’s vision has become much more ambitious again with a goal of creating a fund of \$15 million. Today there are many more postgraduate students whose research itself is becoming ever more costly and needs support. The practice had begun of the Foundation providing an automatic grant to each postgraduate student in their first year. Wayne Sampson commented<sup>80</sup> that this had produced a problem in that some of the students began to think of this grant as their own. In reality it is seeding funding for the Department’s research, from which theses would be written.

In 2002 the Trustees decided to create a second level of Awards entitled “Special Research Grants” designed to support research carried out by ASO members at a different level to the postgraduate research topics. The research did not have to be confined to clinical material. Trustees have noted that there has not been an overwhelming response to this from the practicing orthodontists. The academics have not been so reticent.

## Milton Sims Award

Milton Sims was made an Officer of the Order of Australia (the second highest level) in 2003. It was suggested that the ASO should also do something to recognise his contribution. A working party consisting of Simon Freezer and the current Chair of the ASOFRE, was tasked with producing a proposal.<sup>81</sup> This was announced in 2004 and took the form of an additional award by the Foundation. It is to be awarded biennially at each Congress and goes to the student who has completed postgraduate studies in the preceding two years and who is considered both in theory, research and clinical work to have been the “most meritorious”. Guidelines were prepared, but the Heads of Departments were unhappy that they were asked to make the selection, feeling that there could not but be some conflict of interest.<sup>82</sup> A system whereby the students initially nominated themselves and those nominees were assessed externally (including by past winners of Foundation Awards) was put into place to general satisfaction. The first winner was Eugene Chan. It must have been a thrill for Milton to be part of that Award. Sadly he passed away in 2006.

## Endnotes

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61. Interview 5/6/2008
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74. Minutes Meeting of Trustees of ASOFRE 2/1998
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## Trustees of the Foundation

Year	Chairman	Secretary/ Treasurer	Trustee	Trustee	ASO President  ex-officio
1961	KT Adamson	A Thornton Taylor	RY Norton	AG Parker	Trustee Ex-officio
1964	KT Adamson	A Thornton Taylor	RY Norton	AG Parker	VP Webb
1965	A Thornton Taylor	RY Norton	KT Adamson	AG Parker	VP Webb
1966	A Thornton Taylor	RY Norton	KT Adamson	AG Parker	LM Smart
1969	A Thornton Taylor	RY Norton	KT Adamson	AG Parker	RG Case
1972	AG Parker	RY Norton	KT Adamson	LM Smart	JF Reading
1974	AG Parker	RY Norton	RG Henry	LM Smart	RFS Rickleman
1977	RY Norton	CV Hill	RG Henry	LM Smart	JFS McGibbon
1978					LA Trotter
1980	RG Henry	CV Hill	RF Wallman	LM Smart	GI Brown
1982	CV Hill	RF Wallman	RG Henry	DJ O'Donoghue	BD Bowden
1984	RF Wallman	CV Hill	DJ O'Donoghue	PA Heaghey	RG Henry
1987	RF Wallman	DJ O'Donoghue	PA Heaghey	W Weekes	S Paul
1988		W Weekes appointed			S Paul
1989	DJ O'Donoghue	W Weekes	GL Roberts	GJ Moore	RG Cook
		Secretary	Treasurer		
1990	DJ O'Donoghue	GL Roberts	W Weekes	GJ Moore	RG Cook
1991	W Weekes	GL Roberts	GJ Moore	RG Cook	BW Phillips
1993	GJ Moore	RG Cook	H Wasilewsky	JK Hawkins	GR Dickinson
1996	GJ Moore	JK Hawkins	H Wasilewsky	RG Cook	DT Taylor
1998	RG Cook	JK Hawkins	H Wasilewsky	GR Dickinson	RH Olive
2000	JK Hawkins	GR Dickinson	H Wasilewsky	S Prove	JR Owen
2000	Dr Prove resigned as Trustee—replaced by P Hanrahan				
2000	JK Hawkins	GR Dickinson	H Wasilewsky		
2002	JK Hawkins	GR Dickinson	H Wasilewsky	P Hanrahan	
2003	GR Dickinson	R Hanrahan	H Wasilewsky	J Curtain	BI Watson
2004	GR Dickinson	J Curtain	P Hanrahan	E Peel	EC Crawford
2004	By-laws changed this year to allow an extra trustee			H Wasilewsky	
2006	GR Dickinson	J Curtain	P Hanrahan	E Peel	AM Shields
2006				P Myles	

## Sam Bulkley Rocky Mountain Orthodontics Travelling Fellowship

### List of Fellows

1st Award 1987	Neofitas Douvartzdis	University of North Carolina, Chapel Hill
1988	Denise Lawry	Washington University, Seattle
1989	Lesley Short	(accepted then declined for health reasons)
1990	Robert Schwartz	Tuft's University, Boston
1991	Anthony Collett	University of Michigan
1992		
1993		
1994		
1995	Vicky Vlaskalic	University of California (San Francisco)
1996	Kath Arneman	Harvard University
1997	Neil Pinto	Cranio-facial Centre, University of Illinois
1998	Craig Dreyer	Guys Hospital, London, UK
1999	Gavin Lenz	University of Toronto, Canada
2000	Rhonda Coyne	Cranio-facial Centre, University of Illinois
2001	Charles Sheridan	Louisiana State University
2002		
2003		
2004		
2005	Donna Lim	Eastman Dental Hospital, London UK
2006	Sivabalan Vasudavan	The Hospital for Sick Children, Toronto, Canada The Children's Hospital, Boston
2007	Elaine Lim	University of Southern California Orthodontic Dept. and the Centre for Craniofacial Biology
2008	Alwyn Wong	New York University

## Eldson Storey Research Essay Award

(Originally called the First Research Award and Changed for 2001)

### First Advertised 1982

1983	No Award
1986	
1987	Dr Glen Staples
1990	Dr Garth Brice
1993	Dr David Lee
	Dr Maureen Parlange
1996	Dr John Cameron
2000	Dr Jonathan Ashworth
2001	Dr Howard D Holmes
2002	Dr Teriko Rex
2003	Dr Daniel C S Ngan
2004	Dr Deb Harris
2006	Dr Laura Barbagallo
2007	Dr Crofton Daniels
2008	Dr Sheryn Deane

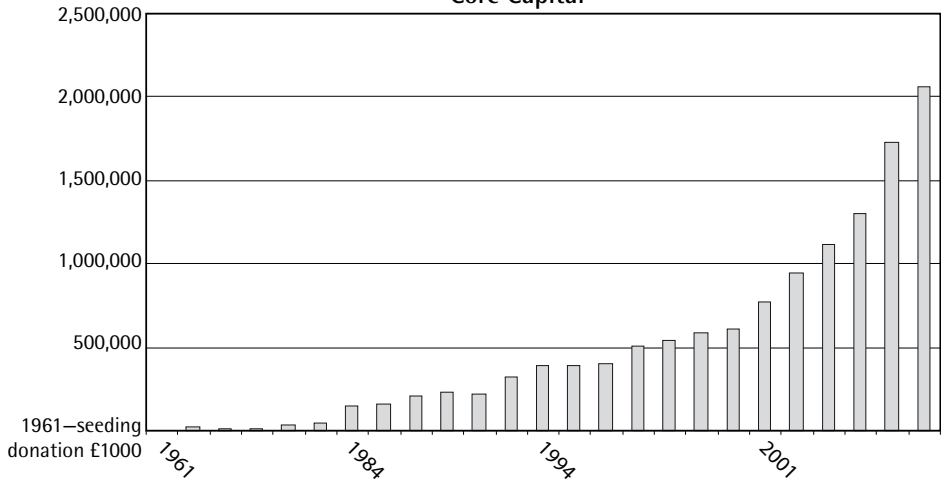
## Special Merit Award

2000	Dr Rhonda Coyne
2002	Dr Eugene Chan
2003	Dr James K W Choi
2008	Dr Elaine Lim

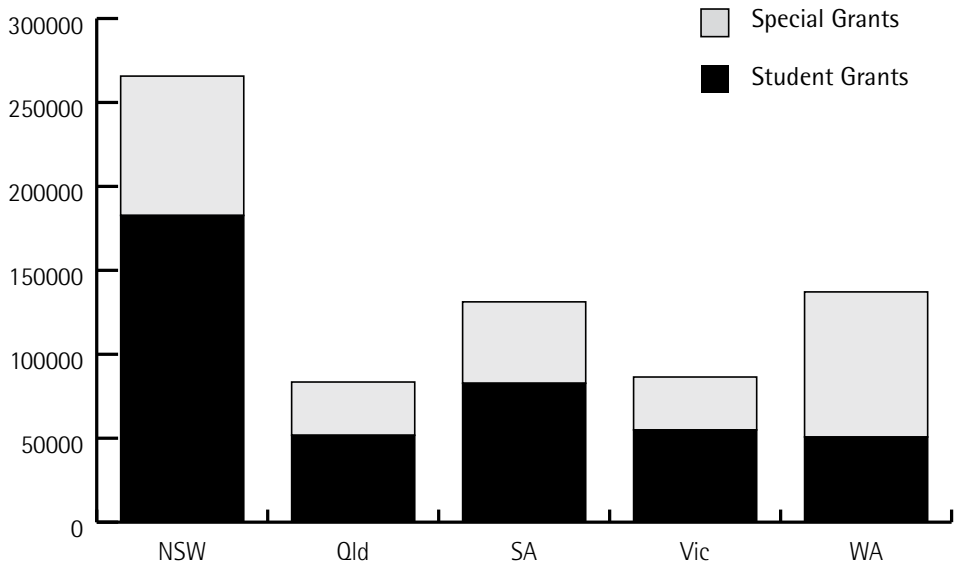
## P Raymond Begg Research Award

1980	Prof. Milton R Sims
1984	Prof. Milton R Sims
1986	Dr Simon Freezer
1993	Dr Christopher C T Ho

**A.S.O. Inc.  
Foundation for Research and Education  
Core Capital**



**Grants 1996–2008**



## Chapter 9

# The History of Graduate Education in Orthodontics

Originally, there were no educational requirements for the practice of any form of Dentistry or even medicine for that matter. In Australia for the majority of the 19<sup>th</sup> century, one had only to advertise one's intention and then begin to offer one's services. The first organised method of dental training was by apprenticeship to one already practising. The author has in his possession the apprenticeship agreement between his father and the dentist who employed him. It was for a four year term, beginning when he was just fifteen. It included "that nothing herein contained shall oblige the said ... to instruct the said Arthur Taylor in any branch of his profession other than Mechanical Dentistry....". It was pretty much a one-sided document but was regulated by Industrial Law and the Apprenticeship Boards. This remained an established method to achieve registration until the mid-thirties when the various registering authorities throughout Australia began to require a degree from a recognised University as the basic requirement.

A similar form of apprenticeship, which became known as preceptorship, but often without the control of any independent authority, was the original method of training orthodontists. General practitioners have always had the right to practice all forms of Dentistry. Nowadays the only limitation takes the form of a 'duty of care' sanction, which serves to discourage people attempting treatments where it might be demonstrated they are working beyond their competence. As treatment regimes became more precise and powerful, the need for greater understanding became

generally apparent. Individual practitioners began to offer courses outlining their methods, often with an opportunity to gain some practical experience. The role Edward H. Angle played in this development is well known. This was principally done within the practice of the experienced orthodontist but Dr. Angle went a step further and created his own private school. Seven Australian dentists spent varying times at that School. They and one other, K. T. Adamson, who entered into a similar arrangement with one of Angle's students, Robert Strang, were to become the foundation of Australian Orthodontics and the Society which represented it. Strang realised the limitations of this method of induction into the speciality. He regarded Adamson as one of his best students<sup>1</sup> and continued a lengthy correspondence full of talk of technical innovation.<sup>2</sup> In one of these letters he said: "I have given up the long course as I feel that the Graduate course at the University of Illinois under Dr Brodie is the proper place for men to go, who are preparing to take up Orthodontia."<sup>3</sup>

After some time, there developed in the US a more or less organised programme of preceptorship requiring prior approval and some monitoring from the regional Orthodontic Society, before Full membership and/or subsequently registration from a state authority could be granted. This system waned as graduate education in universities became more generally recognised and available. It was entirely superseded, when a full-time university course became the basic requirement. Preceptorship remained an acceptable substitute and was recognised by the AAO until 1967. The American Dental Association announced at its October 1960 meeting that, from 1 January 1965, anyone announcing themselves as a specialist, had to hold a certificate from a national certifying board approved by the ADA or a state licence permitting announcements in one of the areas approved by the ADA<sup>4</sup>. A regulated form of preceptorship did not ever develop in Australia, although John Reading's Orthodontic Board Registration Committee made some firm recommendations towards that end.<sup>5</sup> Preceptorship was still discussed as a viable alternative to the insufficient number of placements in postgraduate courses as late as 1970.

Recognised dental qualifications from teaching institutions were first offered in Australia to graduates of the private Australia College of Dentistry in 1897 in Victoria. The University of Melbourne began its first course leading to a degree in 1904.<sup>6</sup> In Sydney, a course was first mooted in 1897, but it was not until the passage of the first Dentists Act in 1901, that the University of Sydney considered the time was ripe. It offered a three-year course leading to a Licence in Dentistry from 1901 and a four-year degree course from 1905.<sup>7</sup>

Universities, mainly in America, offered their graduating degree, which was a doctorate, to overseas graduates who had done the last parts of their degree course (at least 12 months). The desirability of having this higher qualification was well established, as was the advantage of the courtesy title. So many Australians took this opportunity at the University of Pennsylvania that a Dental Society restricted to its graduates was formed.

In 1910 a Doctorate in Dental Science similar to the Doctorate in Medicine was commenced at the University of Melbourne. Sydney followed not long after.

The University of Melbourne was the first to offer a higher qualification for clinical Dentistry, as opposed to research, when a Master's programme was begun in 1938.<sup>8</sup>

A large number of Australian dentists travelled to Great Britain in the years immediately following World War II, often attracted to the National Health Scheme. Many took advantage of postgraduate training offered there. The Royal College of Surgeons of England had inaugurated in 1954, a Diploma course in Orthodontics under the direction of Professor Clifford Ballard. Among those who took this qualification were J.F. Reading, L.M. Smart, J.D. Mckinnon, N.J. Cox and later R.H. Abbott and T.J. Freer (to name a few). After the end of WWII, only a trickle went to the US. S. Seward, (son of T.J.L. Seward, one of those who studied under Angle) and R.H. Wallman were the first in the 1950s.

Orthodontic postgraduate education in Australia really began in the Orthodontic Departments of the Dental Hospitals in the capital cities. These institutions all had relationships of various kinds, usually quite convoluted, with the University Dental Faculties. In all states, except Queensland, the process followed along the same general lines. This involved, more or less sequentially, the employment of dentists within the department; appointment of personnel charged with a teaching function, initially undergraduate, in the Dental Faculties, and ultimately the awarding of University Master's degree to those personnel. This could be obtained after a course of study, completion of a treatise and a period of time spent in the Department, to gain the necessary clinical experience. Sometimes the clinical experience was gained through a form of preceptorship with an established practitioner.

As both the Orthodontic Society and the Registration Boards defined their rules and increased their requirements, the preceptorship and the residency-type programmes were replaced by full-time degree courses conducted entirely within Postgraduate Departments of the Dental Faculties. This transition was in general completed with remarkable smoothness.

The Dental Hospitals developed reasonably active Orthodontic Departments. George Catton was the first full-time orthodontist at the United Dental Hospital in Sydney starting about 1939.<sup>9</sup> Later Burgess, Henry and Godfrey and later still Gates, Lopez and Hawkins were among those who worked with Ronald McGrath, the head (from about 1947<sup>7</sup>) of the Orthodontic Department at the United Dental Hospital in Sydney.<sup>10</sup> The UDH and the Faculty shared the same facility. This was universal throughout Australia at the time.

In Sydney, a part-time course, originally of one year's duration one morning a week, was commenced in 1949. Initially it was conducted by Norman Benson and James Grosse. Later Norton replaced Grosse. And this course, which became a training ground for many who later were to specialise, continues to this day. Keith Godfrey, who was placed in charge of the postgraduate programme in Orthodontics at Sydney, was in the second intake. He reported that he was docked £1 of his £12 weekly salary for attending this course.<sup>7</sup> These aspiring orthodontists also studied for their part-time Master's degrees. A course of this duration is always going to be more successful than a more concentrated one, because it allows participants to follow patients through their treatments. Benson was also in charge of the

undergraduate programme and in this was initially assisted by R.W. Halliday and R.G. Henry. Henry took over from him in 1958. An orthodontic study club also operated at the Dental Hospital, again with Benson taking the lead.<sup>11</sup> In the 1962 Orthodontic Directory of the World there were listed four full-time Orthodontists at the United Dental Hospital.<sup>12</sup>

## The MDS is born

Professor A.J. Arnott, Dean of the Faculty, had for some time according to Norton,<sup>13</sup> been hoping to start a Graduate department and provide Diploma courses. Discussions regarding the first full-time course for the training of specialist orthodontists began at the University of Sydney in 1961. As a result of funds made available from the Universities' Commission, Arnott wanted to start courses in several fields including Orthodontics, Periodontics and Public Health Dentistry.<sup>14</sup> He announced at the Opening Ceremony of the first Orthodontic Congress, that the University was considering a Diploma course.<sup>15</sup> Early in 1962, a syllabus for a twelve-month Diploma course was drawn up and referred to the NSW Branch of the ASO for comment.<sup>16</sup>

The Branch's initial response (undated, but written by President John Reading) was that the proposed Diploma should be of a standard sufficient for specialist training and that in accordance with experience world-wide, it should be of at least of two years duration. In this it differed from that proposed for Public Health Dentistry, under Peter Barnard, which was neither of these things, but which over the years attracted a large number of students mostly from overseas, sponsored by various official agencies.<sup>17</sup>

In his remarks John Reading added:

1. The New South Wales Branch of the Australian Society of Orthodontists welcomes in principle, the establishment of a Diploma course and it looks forward to such a course providing adequate instruction for graduates to enter the specialty of Orthodontics.
2. This Branch also recognises that the standards required for graduation from the Faculty of Dentistry, University of Sydney, are at least equal to those required by the best overseas schools; accordingly, it regards as most important, the quality of the requirements for the issue of a Diploma in Orthodontics by the Faculty of Dentistry, University of Sydney.

He went on to make the point that this Diploma would set a precedent for other branches of Dentistry and for other Australian Universities. Further, establishment of this diploma course could lead to a revision by regulating authorities of the requirements for specialisation and also for the establishment on a national level of a Speciality Board to examine the qualifications of individual applicants to the various specialities. The comment concluded that the Branch members, all of whom were graduates of the University of Sydney, had confidence that the Diploma would reflect credit on the Faculty. They pledged their wholehearted support in the establishment and conduct of the course. At this point in time,

Reading was already working on the ASO's proposal for the establishment of an Australian Orthodontic Board.

John Reading, in his Presidential message to the Branch in June of that year, stated that:

it is now certain that the University of Sydney will be the first in Australia to inaugurate a full-time postgraduate course in Orthodontics leading to a Diploma. This is a move that will be greeted with enthusiasm by our Society, which has, as you know, offered its co-operation to the Faculty in the organisation of such a course. As a Society we feel well qualified to offer such assistance as, not only have some amongst us observed the functioning of such institutions overseas, but others have received their specialised training at these schools in both the United Kingdom and the United States.

Looking at the broader issue of recognition:

One might speculate that the requirements of the Dental Board, in relation to specialisation, may mean that it would be necessary to have obtained the D. Orth (Syd) and subsequent to this, it would be obligatory to devote a further period, say another 12 months to full-time clinical experience, under faculty supervision, unless of this condition were written into the requirements of the Diploma.

Reading added more in a paper entitled "Principles of Diploma Orthodontic Course"<sup>18</sup> He made a number of points:

1. The course should begin with basic sciences.
2. Lectures in orthodontic subjects should begin only after the basic science course was finished. The clinical content should extend over a period of 18 months. The course would require two years.
3. Opportunity for a research project should be included as a part of a Master's degree. In the second year, candidates should be given time and assistance to prepare a research project, which could be submitted to the Faculty for consideration for a Master's degree.
4. A staff/student relationship of 1/3 or 1/4 would be required.
5. The ASO members offered their help in the planning of the course.
6. The programme should be guided by a full-time postgraduate Director.
7. This Society would be pleased to discuss details and arrangements of the course of study with the Faculty of Dentistry.
8. At the conclusion of the two-year course the candidate should be prepared to sit for the final examinations for the Diploma in Orthodontics of the University of Sydney and to submit a thesis for the degree of Master of Dental Surgery. There would be no obligation for the candidate to sit for either or both of the Diploma and the Master's degree.

It was John Reading's view, shared by Keith Godfrey,<sup>15</sup> that what was really required was a course, leading not to a Diploma, which was the British model,

but to a degree. As well as his President's role in the Branch, he was ASO Federal Secretary at the time, so his words carried weight. Some months later, he reported<sup>19</sup> that he and Godfrey:

attended a meeting of the standing committee of the Faculty, where the submission and principles previously circulated were considered. As a result, the previously prepared By-Laws concerning the Diploma course were discarded and a sub-committee of that standing committee would now prepare new draft By-Laws in accordance with the recommendations of this Branch. The earliest date for the implementation of the proposed By-Laws is forecast to be 1964 and it is ensured that the Diploma course would cover two academic years.

An interesting comment was made during this meeting by B.G. McLean, speaking in dissent. He felt that it would be better if "such postgraduate orthodontic training be organised on a Federal basis so that available finance would secure the best possible teaching personnel". This same attitude was echoed at the first Orthodontic Teachers Meeting in 1994 by G.J. Moore who questioned the imperative of having five separate postgraduate courses with the consequent dilution of talent, both student and teacher. Milton Sims countered that the only way to attract the excellence necessary to teach Orthodontics well, was to allow the department head also to have graduate students.

Reading's detailed and thoughtful responses must have attracted general Faculty interest, for the University of Sydney was approached by the new Dean, Prof. N.D. Martin and less than 16 months later, a set of regulations for the Degree of Master of Dental Science was published by the University of Sydney. This provided the opportunity for, as well as the established method of presenting a thesis to gain a Master's degree (MDS), also to:

engage in a course of advanced study and research as approved by the Faculty in some branch of Dentistry in the University of Sydney for not less than six terms

This would be rewarded with an MDSc. To receive a Master's degree in Engineering had the same requirements.<sup>20</sup>

The NSW Dental Board was consulted every step of the way. There were several Faculty representatives on the Board. Up to that point in NSW there had been no requirement for any form of specialist registration. Most of those who had restricted their practices were listed or recognised as such. Only Queensland had provision in its Act for the registration of appropriately qualified specialists.<sup>21</sup> In Western Australia there was no registration of specialists. That Board could permit one to exhibit the name of the specialty provided the practitioner restricted their practice and sought approval from the Board.<sup>22</sup> South Australia had just had a new Dental Act introduced, but had not succeeded in including any provisions for specialist recognition, although moves had begun to provide a specialist description and recognition. The NSW Dental Board consulted the ASO (among others) and published their requirements in 1964. Reading referred to these in his reports to the ASO on the Orthodontic Registration Board and Orthodontic Education.

At that time Orthodontics, together with Pedodontics, was part of the Preventive Department built up by Noel Martin before he was made Dean. Even today, Godfrey insists that he was happy with that arrangement and that he always wanted to be considered a preventive dentist or at least to have a preventive approach to his work.<sup>7</sup> Martin was a charismatic figure with a large public profile earned as a result of his untiring, substantially researched and ultimately successful promotion of the fluoridation of the public water supply. Keith Godfrey, a retiring, perhaps shy man at the time, only recently promoted to Senior Lecturer (1959), was placed in charge of the new programme. After graduating in 1949, he had been awarded an MDS in 1952 and had worked at the United Dental Hospital from 1950, when he did the part-time course mentioned above, until 1957. He had experience working at the Children's Hospital, after Dr. S. Tout who had been working there for some time, died



Keith Godfrey

suddenly and Godfrey was asked to take his place. Tout, also for religious reasons, was unable to become an ASO member. Essentially, Godfrey was self-taught, but was well thought of, had been President of the NSW Branch and had begun to write for the ASO Bulletin doing literature reviews and directing a scanning service of current articles, thought worthy of the attention of members.

Intakes did not occur in every year. Initially two students were accepted and later this was increased. The first students were Philip Black and John Sandilands and in the second intake were Philip Kinsella and Stanley Paul, both of whom were to play major roles in the Society. Finding a local orthodontist to accept a full-time position to help in the Department proved more than difficult. Godfrey was assisted by Ives Lopez, recently awarded an MDS, who returned from India to accept the position.<sup>15</sup> Local orthodontists Benbow, Cox, Mackie and Reading served as clinical tutors and were given a fairly free hand. Benbow was on the staff of the United Dental Hospital.

When interviewed for this history,<sup>23</sup> Keith Godfrey reported how very fortunate he felt that he always had Martin's encouragement and was allowed to develop his own ideas and put them into practice. However not having charge of his own Department must have limited his scope for its operations. Four years later, by which time only the University of Adelaide had also begun to consider a course, Godfrey admitted his course was in difficulties. In a heart-rending letter to the ASO Federal President, L.M. Smart,<sup>24</sup> he recorded the enormous difficulties he had faced in bringing the programme into being. He said "we have broken the ice" but we are still in "icy waters". So contorted was the letter ("I found your language a little

confusing”<sup>25</sup>), Smart listed the points Godfrey had made and added his comments before passing the letter onto the Executive.

One point Godfrey did make with chilling clarity:

what at first thought seems incredible is that from the beginning this graduate work was not taken as a particular general concern by the Faculty (it certainly scotched the supply and demand theory) but merely a departmental matter with orthodontics being but one of the three divisions within that particular department—and could any Faculty concerned with the general education of dentists prostrate itself before the educational needs of one special discipline at the expense of the rest?” “However, too much has been taken for granted: perhaps the most important is the belief that things could flow on smoothly by employing the traditional part-time model of clinical teaching as foisted onto the undergraduate students. This has not worked well with more discerning and critical graduate students.<sup>20</sup>

It seems that Martin, as Dean and of a bent far more academic than clinical, fell well short of providing the backing this new programme demanded. In fact, he did not regard Orthodontics as having the import of a genuine preventive service. Peter Barnard, whose Public Health Dentistry course started at the same time, confirmed that both he and Godfrey had to struggle hard to have their ideas accepted and achieve anything like adequate support.<sup>26</sup> Kinsella said that the course operated on a “shoe string”. The ASO, after the euphoria attending the establishment of the first courses had been replaced by this cold reality, formed a Graduate Orthodontic Education Committee to see what could be done to progress the situation. The work of this committee is discussed in the chapter on the sixties decade.

The NSW Branch was not always happy with the operations of the postgraduate training programme. Probably more than in any other state, members felt it necessary to raise their voices about various aspects of the course. They were also concerned at the attitude of the Dean in not acting in the best interests of Orthodontics and of Godfrey, in not standing up against this perceived indifference. W.J. Mackie<sup>27</sup> also recalled that Godfrey spent an enormous amount of his energy working on a variety of projects for the good of the institution, but at the possible cost of his focus on the department. Mackie said: “He was a most dedicated public servant.” Godfrey was made an Associate Professor in Preventive Dentistry in 1976.

In 1972 Godfrey was planning to take sabbatical leave and had an arrangement to visit the University of Iowa. In the end, the sabbatical was delayed somewhat because it transpired that the invitation had come from the Pedodontic department. Darryle Bowden, who had been visiting the United States, made it known that such a visit was politically unsound. Seeing a letterhead from a Pedodontic department would not have concerned Godfrey who was still attached to the Preventive department. Godfrey did go six months later and worked in the Oral Biology department. He was largely left to his own devices and worked with the Engineering department. He reported that it produced an excellent experience.<sup>8</sup>

## Milton Sims

Milton was born the year the Australian Society of Orthodontists was founded and died 'in harness' 78 years later. His career is an interesting one because it spans the years when the Begg technique was the subject of so much interest and also virtually the entire time span of the development of graduate education in Orthodontics in Australia.

He graduated in 1950 and worked at the Royal Adelaide Hospital for the next 10 years except for two lengthy periods when he was incapacitated as a result of contracting poliomyelitis and also subsequent to spinal surgery. Interested in Dentistry for children, Milton applied for and was accepted to a post as junior dental house surgeon providing orthodontic treatment unavailable at the Dental Hospital [part of the Royal Adelaide Hospital] prior to that. It was here that he came into contact with Dr Begg.



Milton was a foundation member of the South Australian Branch of the ASO in 1955. He was awarded a Fulbright Scholarship and traveled to the United States in 1960 to undertake postgraduate training at the St. Louis University. By this time he had become quite experienced in the use of the Begg technique, which at that stage was attracting major interest worldwide. Dr Harold Kesling who developed strong commercial interests in the technique encouraged him to share his experience. So Milton was called upon to make frequent presentations on this new technique, in addition to the demands of his postgraduate course. In the end the Master's degree was finished at Boston University.

He returned to Australia in 1963 and offered to give a lecture to the second ASO Congress the following year. The program was already full but his major contribution to that Congress was to succeed in having accepted, a resolution, requiring all delegates to future Congresses to bring the records of two treated cases along with them. This was not greeted with uniform enthusiasm.

He was also instrumental in having the ASO organise a meeting of the Heads of all the Orthodontic Departments in Australia in 1968. From this came the formation of the Graduate Education Committee which laid the foundation for the educational requirements for Full membership of the Society and the ASO's Policy on Specialisation.

He was appointed reader in Orthodontics in 1964 and, by 1969, he had established the MDS program in Orthodontics, always subject to extreme difficulty as a result of the University's reluctance to provide adequate funds.

This course has in a way set a standard for orthodontic research by postgraduate students. Milton and his students have published widely. The principal research interest has always been the periodontal membrane. Compulsorily retired from the University of Adelaide in 1992 because of age, he took a temporary posting as Professor and Head of Orthodontics at the University of Sydney and produced major changes to the programme in that institution, until that position was taken by Prof. Ali Darendelilier. Milton continued his research activities almost without abatement, even to the extent of obtaining, in 2004, a DSc to add to his PhD (1985).

During this long involvement he was awarded the Milo Hellman Research Award by the American Association of Orthodontics and the ASO's Begg Research Award (twice). Again his influence on the Society came, not from the offices he held, but from his reputation as a teacher and researcher and by the influence he could bring to bear and timely remarks he could make at meetings. Knowing the importance of the availability of research funding he attempted to make the granting process of the Foundation more professional. The community recognised Milton's extraordinary contribution in 2000 when he was made an Officer of the Order of Australia. The ASO has established the Milton Sims Medallion to inspire future Postgraduate students to pursue the highest goals of clinical, academic and professional excellence.

## South Australia

In South Australia, P.R. Begg had been in charge of the undergraduate teaching of Orthodontics. There had been almost no orthodontic treatment available in the hospital environment until Milton Sims began his work at the Royal Adelaide Hospital in 1951.<sup>28</sup> For quite some time, Begg had been convinced that South Australia was not in need of additional numbers of orthodontists and so had not encouraged graduate education. Sims went to the US in 1960 to do a Master's course at St Louis. He also spoke widely on Dr. Begg's treatment methods, about which there was considerable interest following Begg's articles in the *AJO* a couple of years before. Sims returned in 1964 and was promoted to Reader in Orthodontics.

South Australia commenced its graduate orthodontic programme under Milton Sims in 1969. Peter Chang was the first student. It involved a substantial amount of course work, but a greater emphasis was to be placed on research. At the 1972 General Meeting the Society had laid down rules for membership and established its 'Policy on Specialisation'. Part of this was to seek from each department, details of their course to confirm that it satisfied the Society's requirements. In response, Sims reported to ASO Secretary Mackie:

under the new University of Adelaide regulations, a student must pass the Honours examination at the end of the first year (for which he receives an Honours degree) before being allowed to proceed to the MDS during the following 12 months. Both the Honours and the MDS examinations require the completion and presentation in "thesis" form of a research report based upon an original investigation.

The clinical component was 50 per cent of the course. He finished diplomatically, by saying "As you will appreciate, every effort has been made to base the course upon the recommendations of the Graduate Education Committee report."<sup>29</sup>

Also, briefly there appears to have been a parallel course run at the Royal Adelaide Dental Hospital's Orthodontic Department. A student on that course had submitted details to the Federal Executive.<sup>30</sup> It included a thesis and two years of supervised clinical work. This closely paralleled the historical situation in Sydney, Melbourne and Perth. The academic component was completed under the University's rules for Masters' degrees and was not subject or specialty specific. Several of those

heading towards Orthodontics, Keith Grave, Michael Schultz and Sven Kuusk, wrote their theses under Professor Tasman Brown, an eminent Oral Biologist, who at one stage was the Patron of the South Australian Branch of the ASO and an Honorary member of that Branch. The clinical part of their training was carried out as part of their employment in the Royal Adelaide Hospital and was supervised by J.D. McKinnon and also by L.M. Smart. These tutors came only once a week, so the supervision was not full-time. The theoretical element was provided by the Faculty.

This avenue and Sims' course were somewhat in conflict. As the requirements of the ASO, subject to their newly adopted 'Policy on Specialisation' became clearer, Sven Kuusk wrote to the ASO for clarification. K.A. Mezger did the same in Western Australia. A complicating factor was some ill will which existed within this tiny community of orthodontists. Whatever might be said of the overwhelming good that came from the work of Begg, he was a polarising influence. So the South Australian orthodontists could be seen as dividing, on some issues, into three camps: the followers of Dr Begg himself, which included Sims; McKinnon and Smart and others who used methods based on their English training and a third smaller group, including R.H. Wallman who was American-trained and fairly rigid in his approach. The records are intriguing. When the ASO wrote to James Scollin, Dental Superintendent at the Royal Adelaide, to find out the details of the Hospital course, he sent back the same curriculum as had Sims and only acknowledged the existence of Sims' students.<sup>31</sup> The ASO, after investigation, had to say that only the course run by the University of Adelaide, supervised by Milton Sims, could be regarded as acceptable.<sup>32</sup>

It became obvious to Kuusk that, whereas the earlier students would be able to achieve Full membership because of finishing prior to 1972, he would be disadvantaged. So he accepted Sims' offer to redo the Master's course entirely and thereby satisfy ASO rules. According to Kuusk, Sims honoured his commitment to allow him to finish the course although there were occasions when Sims suggested that Kuusk might leave. He already had his degree, so a second Master's was impossible and Sims never actually "signed him off". After the ASO made it quite clear to the South Australian Dental Board that only the full-time course would be acceptable for Full membership, no further students attempted any training based at the Royal Adelaide Hospital.

Wayne Sampson, currently the Begg Professor of Orthodontics at the University of Adelaide, comments that Sims "had to fight hard to have the programme accepted by the University and at various times thereafter had to defend it. Thank goodness he was persuasive and it has continued with evolutionary steps..."<sup>33</sup> Sampson believes that much of the resistance came from the use of university resources for "vocational training" and for people perceived to be in a favourable financial environment. Sims remained Reader during his entire tenure despite his prodigious output of research and impressive teaching record.

## Victoria

In Victoria, the senior orthodontists trained most of the early people by preceptorship. K.T. Adamson was awarded a Doctorate in 1929 and began teaching undergraduates shortly thereafter. He became Senior Lecturer in Orthodontics in 1936 and continued as part-time Head of the department for over 30 years.<sup>34</sup> John Heath Snr. had also been involved in teaching the undergraduates from 1932, but stopped around 1950. Alan Parker was a Demonstrator from 1937 (when he was the first) until 1969. He practised with K.T. Adamson from 1946–51.<sup>35</sup> Donald Spring was on the Faculty for over 20 years, as well as representing Dentistry on the Convocation of the University of Melbourne for about the same period.<sup>36</sup> Renton Newbury was working in the department at the same time<sup>37</sup> and helping Adamson in the teaching.

Adamson, as Senior Lecturer-in-charge, began to offer a six-month course in 1946 which was advertised as being available to ex-servicemen. So shortly after the end of World War II, all the universities in Australia were making enormous efforts to incorporate ex-servicemen back into their communities. This course included lectures in theoretical subjects in the evenings in the dining room<sup>38</sup> of his own home.<sup>39</sup> Brian Crisp was one of these students. The Master's degree at Melbourne (established in 1938) required a two-part examination with the parts separated at least by two years. The first part of the examination was common to all areas; the second part slightly more specific. Aspiring orthodontists also had to present records of treated cases.<sup>40</sup> For many years, Adamson continued to conduct the programme at the University of Melbourne, whereby people were either employed by the Dental Hospital, more or less as interns, or by working as preceptees to established practitioners. They received their instruction at weekly sessions from Adamson and the practitioners he had already trained or whose help he had enlisted. Jean Cannon records it thus:<sup>41</sup>

In 1950 an orthodontic course was given by Ken Adamson. There was one lecture in the evening each week. One patient per student was treated.... At the conclusion of the course the Victorian branch of the ASO was formed...

Adamson complained:<sup>42</sup> “we struggle to educate two men a year in the Edgewise technique but we have no real department for them to work in and the training is done under great difficulty”. He went on to say that “oral surgery has preference, for they have access to a ward with beds”.

Also at that University was Elsdon Storey. He took charge of the Malocclusion Department at the Dental Hospital in 1948. Shortly after he became a Demonstrator in the Orthodontic Department (of the Faculty).<sup>43</sup> Storey later held an NH&MRC post in the Department of Pathology at the University of Melbourne; later still as Professor of Conservative Dentistry. This was one of three Chairs in the Faculty. It included Paediatric Dentistry and Orthodontics and as his son reported,<sup>44</sup> best fitted his interests. Later, he moved across to the newly created Chair of Child Dental Health and served two terms as Dean. Basically, he was interested in research and supervising candidates whose research led to postgraduate qualifications.<sup>45</sup> It

was he who added a research component to the Master's course in Melbourne.<sup>46</sup> It is uncertain what part he played in postgraduate education in preparation for specialisation. He was known not to be so interested in full-time postgraduate courses. Gordon Hinrichsen, an assistant lecturer in Orthodontics and later to be Associate Professor at Dalhousie, Nova Scotia, was one of his researchers.<sup>41</sup> For a time, Hinrichsen also headed the Education Committee of the ASO.

Later, the Head of the Orthodontic Department at the Dental Hospital was Neil Armstrong and he was followed by an Englishman, David Huggins, from 1978 until the 1990s. Huggins had a limited role in the postgraduate teaching but, as head of the hospital department, supported the programme in many ways and in the view of Michael Woods "held it together".<sup>47</sup>

As in Sydney, Orthodontics did not exist as a separate department in Melbourne, being still part of Conservative Dentistry. Initially the orthodontic department at the Melbourne Dental Hospital was an annex at the rear of a building in Spring Street. Subsequently, in 1963, a new dental hospital was built across the road from the Royal Melbourne Hospital. At this time, the Hospital Orthodontic department was placed in the basement of the new building and the University Orthodontic department was on the second floor. Later this was called the Sir Kenneth Adamson Wing. The creation of a separate orthodontic clinic within the University allowed consideration of a full-time postgraduate course.<sup>35</sup>

After Adamson stood down, V.C. West was the only applicant for Head of the department, but was not appointed to the position immediately. Subsequently, about 1968, the University did appoint West as a Senior Lecturer.<sup>25</sup> He had completed a Master's degree at Melbourne University, but was also UK-trained. West also became Secretary of the (very important) Graduate Education Committee in 1969. At that time Senior Lecturers in Orthodontics were being appointed at all the Universities throughout Australia. In 1969, West said that "in Melbourne, he would welcome the participation of outside clinicians in any postgraduate training programme" suggesting one was being considered, but had not yet started.<sup>48</sup> Early in 1970, Richard Case wrote to the ASO Council to the effect that "the Melbourne Dental School has already provided facilities within the Hospital for full-time salaried positions for postgraduate students to work in the Hospital Orthodontic department, while completing a lecture course for the Master's degree". Richard Case claims to have been instrumental in the commencement of the full-time course.<sup>49</sup>

West began the postgraduate programme in 1971. He was assisted by Tony Scarff and Neil Armstrong as part-time tutors.<sup>25</sup> Bowden and Seward were two talents not used. Both became associated with the Child Growth Unit of the Department of Anatomy at the University. This unit was headed by Dr Alex Roach, who had worked with Holly Broadbent at the Fels Institute, where he continued as a director. Roche had brought back to Melbourne a cephalometer, which motivated detailed growth studies of the head and neck.<sup>50</sup>

One of the first students was James Robson, who had gone halfway through the earlier Master's programme but had interrupted this for an overseas trip. He was required to recommence the entire programme on his return. By 1972, Melbourne

had five full-time and two part-time students, with an expected intake in the subsequent years of two students each year. The length of the course, excluding vacations, was 72 weeks of which approximately 50 per cent was devoted to clinical treatment. Postgraduate students holding a trainee appointment with the Hospital received an annual stipend of \$3,550. Others were unpaid. The Faculty provided one honorary and one part-time clinical supervisor for one session per week.<sup>51</sup>

Concerns were expressed to the Executive, by Bowden in 1977 that the Department had begun to offer a part-time course. What really happened was that two students, after their first year, began to work in private practices. They attended the Department only part-time, while continuing as per a preceptorship with a local practitioner. One actually wrote to the ASO Executive outlining the situation. The Dean was also asked for details. His comment was that the overall requirements would be unaltered. This situation was not repeated. On another occasion Prof. Storey refused to allow a postgraduate student to pass because of frequent absences. The student subsequently succeeded in obtaining the degree by threatening to sue the University.<sup>25</sup>



Victor West

Unlike Adamson, who was very proud of his considerable technical skills, West was more a theoretical and conceptual orthodontist, who was anxious to have his students think deeply about the work they were doing. He became very interested in the approaches of Robert Ricketts and these became the foundation of his clinical teaching. Since the earliest days, Melbourne has remained adherent to the Edgewise technique. West was the only department head to require his students to present their theses also in a form suitable for publishing in the Journal.

West was required to retire because of age in 1993. The position of his replacement was advertised as a Director/Professor, which really was a hospital position and not a real professorship. The University authorities were unable to find anyone to accept that position. Eventually a first-year graduate of the course was appointed to the position.<sup>52</sup> Again, this can only be construed as Faculty's lack of regard for the specialty. This appointment failed to satisfy either the Society or the Dental Board, so Professor West stayed on, providing oversight to the stand-in Director.

The usual intake into the course had been four, but for the class of 1995 only two were accepted. Those accepted for the following year were advised that they might be wise to try elsewhere, as the programme could be closing. Naturally, most orthodontists in Melbourne wanted the programme to continue. In 1993 funds had been collected to help finance a Chair for the department. Eventually Michael Woods, who had held a part-time position in the Department since 1990, was able

to persuade the authorities that his offer, which was that he would take over the Department of a half-time basis as an Associate Professor, should be accepted. He commenced work officially in February 1996, although he had been on deck more or less throughout the summer.<sup>36</sup>

Woods has made a considerable difference to the programme, greatly widening its scope and raising its standard. Up to that point there had been serious reservations, nationally, about the programme. Melbourne was the last course to move to a three-year programme. Up until 1998, it had been advertised as a two-year course. At this time consideration was being given generally, to extending the course to three years, but the University of Melbourne's rules regarded a Master's programme as being of considerably shorter duration, so a Graduate Diploma was added to build out the duration of the course. Subsequently, the creation of a professional doctorate, the D.Clin.Dent. satisfied both the ASO and the University. This is now the degree which the graduates from the programme obtain.

## Western Australia

Graduate education began in WA with a slightly different approach, more along English lines. McGibbon wrote:<sup>53</sup>

I have just attended a sub-committee meeting of the Dental Faculty of this state, which was convened to discuss requirements for the MDSc examinations. The question of postgraduate education in Orthodontics received, for once, the attention it deserved and I was able to make recommendations, which will be submitted to a full Faculty meeting later this month. With luck, this should ensure that provision will be made for the appointment of a Lecturer in Orthodontics before the beginning of the next triennium.

Aspiring orthodontists were to be employed part-time, by the Orthodontic Department of the Perth Dental Hospital and work on their Master's thesis at the same time. Gordon Kirkness was appointed as full-time Senior Lecturer in September, 1970. The general survey conducted in 1972 indicated that there were two part-time students at Perth and that no graduate students would be taken on in 1973. Ninety per cent of their work was reported as clinical and was conducted without Faculty supervision. Kirkness<sup>54</sup> had described the situation to West, which required the students to sit for three examinations in the first two years, "usually in Oral Pathology, Anatomy and Materials Science". Unlike the other subjects, Oral Pathology was not elective. Despite Prof. K. Sutherland's insistence that this subject was the basis of all dental science, President John Reading<sup>55</sup> questioned its relevance. They were granted five hours a week to pursue their studies and had "little contact with myself as their supervisor, yet they do work in the Orthodontic Department in the company of qualified orthodontists. The present arrangement is one that has evolved over the years and really is most unsatisfactory, as the Faculty has little or no control over their training."<sup>49</sup>

K.A. Mezger<sup>56</sup> contacted the ASO to see if graduates from this programme in which he had just enrolled, would be eligible for Full membership of the Society. Up

to that point, the ASO had accepted Eric Yui and according to Wallman<sup>57</sup>, one other. Having not reviewed the WA course since that time, they felt obliged to continue with that approach. However, they determined that they should enquire more deeply into the course.<sup>58</sup> This they did, in rather subservient mode. “We have received from the South Australian School, a detailed curriculum of their two year full-time course. We trust you will not think us too presumptuous if we ask you to provide similar information ... and the amount of supervised clinical training.”<sup>59</sup> Prof. K Sutherland, Dean of the Faculty, responded (or in the view of John McGibbon, had Kirkness respond<sup>60</sup>) promising full co-operation and supplied a copy of the University’s regulations, the relevant clauses in the WA Dental Act and details of the course. Mention was made that new facilities were soon to be available and this would allow for an orthodontic clinic to be located in the Dental School. At first, this appeared to satisfy the ASO requirements, but after further analysis, approval was eventually denied. Doubt about the degree of clinical supervision was the stumbling block.

John Reading, who had visited the Department in early May 1974 on what could be thought of as the first accreditation visit by the ASO, in a letter dripping with diplomacy, advised Sutherland that “Because of these assurances, we are pleased to continue to accept the existing MDSc course as a basis for Full membership of our Society. However, this would have to be reconsidered should further students be accepted for the course in its present form.”<sup>61</sup> It is interesting that when the Australian Dental Council first conducted its accreditation of the undergraduate courses at this institution, the same chain of events occurred.<sup>62</sup>

Gordon Kirkness gave a paper in 1974 entitled ‘Orthodontics in Western Australia’ in which he detailed the plans afoot for the full-time postgraduate programme. A new building would enable the Dental School to “occupy clinical facilities that will allow the implementation of a new Graduate course”. He promised the programme to be of two years duration adding, with the merest speck of sarcasm, that it would be “so demanding and exacting that it would fulfil the requirements of the AAO and perhaps even the ASO”. And so the Western Australian course came to join those of the other states, acknowledged as providing acceptable training for the purposes of specialist registration and Full membership of the ASO. No students were accepted into the course after 1983. Greg Brudenall and John Owen were the last of Kirkness’s students. Mithran Goonewardene recommenced operations in 1990, using a three year curriculum. Since then there have been intakes every second year.<sup>63</sup>



Mithran Goonewardene

## Queensland

New regulations governing the MDSc degree to be awarded by the University of Queensland were presented to the Graduate Education Committee early in 1969.<sup>64</sup> T.J. Freer had been appointed Lecturer in Orthodontics in 1965 and Senior Lecturer in 1968. The programme began development in 1970. Freer was involved from the very beginning.<sup>65</sup> Robert James, Congress Chair in 2008, and Barry McKenna were the first students. Clyde Winzar, Department Head, reported that they took no students in 1973 as they felt the need to “completely review the curriculum both for full- and part-time students”.<sup>66</sup> The latter were discouraged because of heavy undergraduate commitments. He explained: “We discourage the part-time course because of organisational difficulties and I doubt whether we will ever offer it again.”<sup>67</sup> However in 1974, the ASO received details of a proposed four-year part-time course, together with a letter from the Dean, Prof R.R. Stevens, asking for approval of the course.<sup>68</sup> Kirkness, Convenor of the Education Committee, wrote back approving the part-time course.<sup>69</sup>

A part-time format was chosen for much the same reasons as in Western Australia. Queensland had then and perhaps continues to have, the most extensive public dental care programme in the country. Practitioners wishing or chosen to provide orthodontic services in the State Dental Service had to continue in employment, for any tuition fees to be paid by their employer. Hence their education could only be part-time.<sup>70</sup> Others went into the programme on a full-time basis. The Graduate Education Committee was advised of this. They advised that the ASO Secretary could write to the Dean of the Faculty, advising that the course content had met with approval and confirming the desirability for complete supervision of clinical time. They suggested the appointment of part-time clinical tutors, if necessary, as used in other states. Postgraduate students continued for some time taking their courses part-time. Freer had recommended that any change in attitude towards part-time courses should take place slowly.<sup>71</sup> Council eventually decided it wanted to eliminate all part-time postgraduate programmes in 1981.<sup>72</sup> All along, Department Chairmen were made aware of the Society’s ‘Policy on Specialisation’. There was never any problem with compliance, once the issues around part-time study were resolved.

## Challenges

Once a course existed or was due to start in each state, the Executive was anxious that there be standardisation across the programmes. The President proposed that there be a meeting of the teachers and that it should be held during at the upcoming 1972 Congress. The Graduate Education Committee wished to investigate the possibility of co-ordinating the teaching requirements of the Postgraduate Orthodontic departments of the Australian Universities. All department heads were contacted. Not surprisingly, the universal response was that the courses complied in general terms with ASO guidelines, but no details were given to support this claim.<sup>73</sup>

A review made by that Committee in 1972–3 showed that in 1972 Sydney had eight full-time students; Melbourne five; Adelaide three and Brisbane one. Sydney had five part-time students; Melbourne, Adelaide and Perth two each. Brisbane had no part-time students. None of the courses could be seen as being well funded or adequately staffed with academics. On the other hand, there has never been a shortage of experienced practitioners willing to act as clinical tutors.

The Sydney course had not been without its problems. Godfrey contributed an article to the Society's Journal in 1972,<sup>74</sup> outlining the course in terms of content, requirement, duration, costs etc. Typical of Godfrey, the article was also a piece designed to stimulate thought within the specialty: "It is commonplace to commence a review of an educational programme by setting out the objectives of the programme. But even with the best of intentions, it is difficult not to make such objectives appear fictional or platitudinous." He also stated: "I believe that the specialty of Orthodontics in Australia has also been too insular with a generally too equivocal attitude towards education of Orthodontists. There seems to be no clear idea as to what kind of educational product is required."

He outlined the course and the clinical requirements (18 full cases and a similar number of miscellaneous treatments). Clearly, he was far from satisfied. Neither was the profession in NSW. In 1976, a motion was carried at the NSW Branch: "that this Executive meets with the Dean to express concern with the direction in which the graduate education course at the Sydney University is progressing, e.g. selection of students".<sup>75</sup> Students were being accepted into the course in the order of their application, rather than being selected on their ability. There was a view that this was University policy. Mackie reported<sup>76</sup> that his information at the time was that, if indeed it was policy, it was widely ignored and further that Godfrey would welcome a change.

The course fell into difficulties in the early 1980s and it appeared as if it would stop taking students. Prospective orthodontists would be encouraged to take the MDS alternative, encouraged by the University. The NSW Branch responded by attempting to form an Orthodontic Board. A sub-committee on Training and Services in NSW was formed in 1983 and arranged a meeting to include Noel Martin, Godfrey, Peel, Campbell and Mackie. The outcome was that the Faculty did recognise the need for the MDSc course. Five candidates were to be enrolled for the 1984 recommencement and these would be selected from the 15 potential candidates by examination. The MDS course (specialist) was to be phased out.

A significant change initiated by Godfrey was to take orthodontic treatment to the government rural dental clinics. This idea which originated with the NSW Director of Dental Services aimed to provide orthodontic services to country indigents. The postgraduate students were rostered a week each month to three clinics throughout the state and Godfrey would cover vast distances to supervise the treatment of their patients. Some of the students were salaried, others not. They all received income from these country visits. This is a classic example of Godfrey's attitude to his teaching and of his broader vision.

In 1981, Godfrey was also appointed Head of the Preventive Department at the Westmead Dental Clinical School, affiliated with the Sydney Faculty. At Westmead

the new Dean, Professor Keith Lester, wanted to begin a three-year intern-style programme, of which Godfrey did not approve. Nonetheless it went ahead. Godfrey supervised the academic component. By 1988 there had been three graduates from this programme and more students were being accepted. These graduates were not immediately eligible for Full membership of the ASO as there were concerns about the nature of the supervision of the clinical training. The Executive felt that they would have to pursue their applications for membership through the appeal process. Changes, brought about in 1984, meant the NSW Dental Board required these people to do a further one year of supervised clinical work beyond the two years required of MDS graduates, before the Board would recognise them as specialists. This was to be supervised by someone ratified by the Board. Only then would the Dental Board agree to register them as orthodontists. The ADA (NSW Branch) Executive recommended to the NSW Branch of the ASO that they examine this and asked that these MDS graduates be accepted when they became registered as orthodontists. The NSW Branch agreed to this, but the proposal was rejected by the Federal Council.<sup>77</sup>

Robert Henry objected saying that “Our Constitution says that we must have a degree acceptable not to the Council but to the ASO” so he moved a motion that “these students who have completed their MDS degree, have satisfied the Dental Board and been registered as orthodontists, be accepted as Full members of the Society”. After lengthy debate, this motion was defeated by a single vote.<sup>78</sup> The minutes are confusing on this matter. Whereas the discussion appears to be referring to the three members who had completed the course. When clarification of Henry’s motion was sought, it appeared that it referred not to all those doing the Westmead course but only to those three, who had started their training prior to 1988. Certainly, more MDS students than the original three were accepted into that programme. All had to go through the appeal process to achieve Full membership.<sup>79</sup> This occurred only in NSW. In the end, all the Westmead graduates did succeed in becoming Full Members.<sup>68</sup>

## Chairs in Orthodontics

Up until 1990, there were no Professorial Chairs in Orthodontics in Australia. John Moffatt, in an editorial about graduate training said, as early as 1968, “Can the facilities for this training increase to any great extent while there is no Chair of Orthodontics at any Australian University”.<sup>80</sup> The NSW Branch must have felt the same way. In 1969 they resolved to investigate “Postgraduate education within the state at this time, with particular reference to the desirability of having a Chair in Orthodontics at the University of Sydney”.<sup>81</sup> At the 1972 General Meeting, when speaking on an entirely different matter, P.R. Begg had compared the situation internationally with that in Australia. He reported that countries like Japan and Holland had large numbers of Professors of Orthodontics. New Zealand had one and until recently, two. Australia had none. It made Australia a “laughing stock”. Begg claimed to have offered to endow one in Adelaide, but his offer was refused.

ASO President, R. Cook, wrote<sup>82</sup> to the Universities of Queensland, Sydney, Melbourne and Adelaide giving support to the establishment of a Chair but not

promising any funding.<sup>83</sup> A motion was carried to the effect that the ASO endorse the establishment of Chairs in Orthodontics at one or more Australian universities.<sup>84</sup>

In South Australia, the South Australian Dental Foundation for Education and Research (SADFER) came into being and one of its proposals was that there should be a Chair in Orthodontics at the University of Adelaide. An Orthodontic Chair had been supported in a survey of members of the ADA (South Australian Branch).<sup>85</sup> Steven Bajada outlined, for Council, the talks that had been conducted over the past three years regarding the establishment of a Chair in Orthodontics at Adelaide.<sup>86</sup> The ASO promised \$25,000 over five years, through SADFER, towards the establishment of the Chair<sup>87</sup> and at the next meeting<sup>88</sup> made the same commitment to each of the other states, when a Chair was inaugurated. The contribution to SADFER had given the ASO trustee status within that organisation, which gave it a seat on the Board of Management. SADFER had actually raised over \$2 million, much of it from the dental industry. However it had other items on its agenda, as well as the Chair, principally a research centre to be called The Adelaide Clinical Dental Research Centre. SADFER sought further funding from the ASO, which was denied, although the South Australian Branch committed to further funding by means of a levy added to their state subscription.<sup>89</sup> Wayne Sampson was appointed to the P.R. Begg Memorial Chair in Adelaide as the Inaugural Professor in November 1995.

A letter had been received from Professor K. Adkins, the Dean of the Dental Faculty at the University of Queensland, regarding the establishment of a Chair in Orthodontics. Professor Adkins had wanted to establish Chairs in two specialties and submissions were sought from the various departments. Periodontics and Orthodontics were chosen. The ASO promised a contribution to the University of Queensland. Adkins later wrote specifying that any ASO support would be directed to the furtherance of Orthodontics and consequently the first of the cheques for \$5,000 was sent.<sup>90</sup> In 1992 both these Chairs were established and became the domain of the incumbent Head of the Department. This meant that, when Professor Freer, after lengthy service, offered his resignation, his successor was not automatically promoted to professorial level. Freer did say however that, originally, when his position was advertised, it was at professor level.<sup>91</sup>

At the 1990 General Meeting, the question of a Chair in Orthodontics at the University of Sydney was also raised. A motion had been passed by the NSW Branch in February, to the effect that “the New South Wales Branch recommends to the Federal ASO that the Federal body endorse the establishment of a Chair in Orthodontics at the University of Sydney and direct its resources to the establishment of such a Chair as its first priority”.<sup>58</sup> The President summarised the discussion thus far; that it could be divided into three issues:

1. whether the ASO should support the basic concept of the establishment of a Chair in Orthodontics;
2. whether Sydney University is the ideal location for such a Chair; and
3. whether the ASO with the ASOFRE should support the funding of a Chair fully or in part.

The local orthodontists were well aware that this could only happen if they provided the bulk of the finance. Estimates of the costs had been supplied by the

Dean, Professor Hume, after discussion with the Faculty. Funds in the order of \$2 million were thought to be needed to establish a Chair in Orthodontics on a permanent basis, or a minimum of \$500,000, being \$100,000 for each of the first five years. This made the ASO's promise to fund each of the Chairs to the tune of \$25,000 seem a little paltry. The NSW Branch proposed that the funding be raised by:

1. ASO Foundation for Research and Education
2. Donations on an individual basis from ASO members
3. Profits from successful Congresses
4. Fund raising drives
5. Support from the New South Wales Department of Health
6. Financial assistance from private dental companies.



Ali Darendalilier

D.J. O'Donoghue spoke against the use of Foundation funds to support a Chair rather than for research.

Keith Godfrey retired in 1993, a decision compelled by taxation and superannuation rules. Not being able to accept another position at the same University, he accepted a position at Khon Kaen University in Thailand. Ironically, his place was taken by Milton Sims, who had been required to leave the University of Adelaide for much the same reasons. He was originally appointed for a two-year term, which was extended because the University was advertising for a person qualified to take a professorship. According to Franki,<sup>92</sup> the University informed the Society that the sum of \$1,500,000 would be required and that this should be placed under the University's control in a trust which Prof. Ivan Klineberg had set up to encourage the profession to donate for academic support. The University, which was not prepared to supply any funding, was still anxious for control over any funds collected and insistent that its rules for Chairs be followed. Essentially, they required possession of a Ph.D. and "strong experience in doing research, in patient management, in teaching and in administration".<sup>93</sup>

The Branch decided, amid some acrimony, that only a compulsory levy of \$10,000 over five years from each of its members would produce the necessary sum. Whether the Branch could enforce the imposition of such a levy was discussed at Council. The Branch requested support from Council, but this was denied until the problems likely to be created by such a levy, had been sorted out.<sup>94</sup> A Trust Deed was prepared which gave control of the funds to the NSW Branch, not the University. Ultimately it was approved by a sufficient majority of Branch members. In the end only six members who refused to pay, no matter what terms could be arranged for them, were lost to the Branch. The author contacted one of these as

part of his research for this book. He was informed that even after 15 years, this orthodontist felt that the loss of his membership was a major blow. Others later rejoined.

After an exhaustive search, Dr. Ali Darendalilier, originally from Turkey, but trained in Switzerland and the US, was appointed and the Chair became a reality in 1997. The Branch, with generous assistance from some dental supply companies, still funds the Chair and some of the ancillary costs. The NSW Branch also sought and received its promised funds from the ASO commencing in 1996. In 2008 the Trust, which was established to handle the funding, reported a balance in excess of \$1.5 million.

The University of Melbourne advertised for V.C. West's replacement to be a Director/Professor in 1993 and by the end of the year there were four candidates short-listed. It was hoped the successful candidate would take up the position in mid-1994. The Victorian Branch of the ASO was also proceeding with this matter, looking towards a voluntary contribution from the members rather than a levy. They were anticipating the Society's contribution as well. They had collected some funds in 1994 and negotiated with the University to create a position pithily named "the Australian Society of Orthodontists, Victorian Branch, Professor of Orthodontics". Eventually when no one was appointed, the funds had to be returned.



Michael Woods

Michael Woods succeeded to the Head of the Department as Associate Professor, in 1996 and became a full Professor when a Chair was created in 2004.

## Accreditation of Australian Postgraduate Orthodontic Courses

Sydney was the first and up until 1980s, the only course to use external examiners.<sup>68</sup> The first ones were Professor Martin Kean from New Zealand, Milton Sims and in 1980, Professor J.P. Moss from the University College Hospital in London. To support the engagement of an external examiner, the NSW Branch Treasurer wanted the Branch to allocate \$500 yearly.<sup>95</sup> External examiners came up again for discussion in 1996.<sup>96</sup> Freer felt that if a system of external examiners was developed, it would roll easily into an accreditation process. He said they were frequently exchanged between schools. External examiners should, Freer felt, come from within Australasia. This was far from the case. Several of the Departments had repeatedly used examiners from overseas. Moss and Lysle Johnston spring to mind. The ASO

Council was asked to consider funding for external examiners. They agreed to the principle and asked the State Branches to co-operate. The prevailing view was "With accreditation planned, the more involvement of the ASO with Postgraduate courses, the better."<sup>97</sup>

Independent accreditation of courses of instruction of all types, in all manner of institutions, has existed for a long time. In fact, many institutions have sought such accreditation as a way of promoting their wares and attracting students. Organisations such as professional societies, including the ASO, frequently attempted to influence the content and quality of courses. The American Dental Association is perhaps the best known in this field within Dentistry. It first began rating Dental Schools in 1918 for the Surgeon General during World War I and published accreditation standards for general dental courses in 1941.<sup>98</sup> The Commission on Dental Accreditation published its 'Standards for Advanced Specialty Education Programs in Orthodontics' in 1985.

In Europe, a document was published which became known in orthodontic circles as the 'Erasmus Project', which laid out criteria for an orthodontic course for specialist training. The Erasmus Project was in fact not confined to Orthodontics. It was a European initiative to increase the quality of education across a very wide field throughout Europe. It was the higher education segment of the SOCRATES programme for education in Europe, which was strongly related to the mobility of university students and so can be considered to be one of the precursors of the movement towards the European Union.<sup>99</sup> One of its components was curriculum development, whereby bodies from at least three different countries, would compose a joint programme of study. In Orthodontics, eight countries were involved in this co-operation and the resultant document was published in 1992.<sup>100</sup> The orthodontic recommendations became a sort of gold standard and as well as outlining necessary content, decreed a three-year course. The Education Committee of the ASO considered that a modified form of this (Erasmus) document should form the basis of course recommendations for Australian Dental Schools.<sup>101</sup> It is not certain why it needed modification or what modifications were indeed made to the Erasmus recommendations, although this was also the American response.<sup>102</sup>

This put pressure on orthodontic courses in Australia to add a third year to their courses. At the 1996 Conjoint Meeting it was suggested that Council should amend the clause relating to the requirements for Full membership to read "at least three years full-time study or its part-time equivalent, including a report of original research". This matter was referred to the Education Committee. Of his own volition, Keith Godfrey had lengthened the Sydney programme in 1986. Western Australia began a three-year programme when operations were resumed in 1990, Queensland was the next to follow. Melbourne commenced its lengthened programme in 1998. At which time Michael Woods forwarded to the ASO complete details of the course.<sup>103</sup> He added "This note will also serve as an archival description of our programme as it is in 1998." He had included one overseas student with three local products from 90 applications. There were 11 clinical staff, not including those helping with dentofacial and craniofacial surgery. Fees were \$22,500 per year for Australian students and slightly more for those from overseas.

In the matter of finances, Godfrey reported<sup>15</sup> that:

the advent of fee-payments for tuition did little or nothing to improve the financial position of Faculties and individual departments. Few local students paid fees with the HECS system being available, and the great bulk of overseas student fees went to university administration and the dregs were shared without any favour among all departments irrespective of postgraduate loads.

The Australian Dental Council (ADC) came into being in 1993. One of its intended roles was the accreditation of dental courses conducted throughout Australia. The General Dental Council of the UK had carried out this function in Australia for a long while, but this had become the subject of much criticism after a visit in the 1980s and was also thought to be very expensive.

Undergraduate programmes were tackled first in 1996. Professor Greg Seymour, at the time Dean of the Faculty in Queensland, was the main voice on the ADC and wrote the accreditation protocols. The ASO, through G.J. Burnett, its Chairman of the Undergraduate Education Sub-committee, which came out of the first Orthodontic Teachers Meeting (OTM),<sup>104</sup> prepared a document which outlined the content of all current undergraduate orthodontic courses and made detailed recommendations for the orthodontic portion of the undergraduate curriculum. The Western Australian Branch had earlier drawn attention to the connection between the courses in the undergraduate programmes and continuing education for general practitioners, a responsibility the ASO felt keenly.<sup>105</sup> Although making recommendations about the under-graduate curriculum must be considered a central role for a specialist Society, no other record could be found of the Society making so prescriptive a set of recommendations for the undergraduate curriculum. Sadly, due to the timeframe, the final document<sup>106</sup> was never officially ratified by Council.<sup>72</sup> There appears to have been no attention paid whatever to this excellent piece of work by the ADC Accreditation Committee.<sup>107</sup>



Wayne Sampson

The ADC's focus then turned to the postgraduate curricula. There had been comprehensive changes to the requirements for specialist qualifications for Oral and Maxillofacial surgeons, including that a double qualification in both Medicine and Dentistry was required. To support this, the programmes had been subject to an accreditation process by the Royal Australian College of Dental Surgeons (RACDS) and by 1996 all programmes, except that at Sydney had been accredited and that was in train.

The ASO made it known that it wanted to accredit the orthodontic programmes. This was not the first time the idea had been mooted. When the Graduate Education Committee had been reconvened in 1975, Gordon Kirkness wanted to get together with Freer and Godfrey to collect information about the courses being offered, for the purposes of accreditation. This was not pursued. The Education Committee, in mid 1993, agreed that accreditation of some form was desirable. Accreditation could take a variety of forms including participation by external examiners, discussion at an Orthodontic Teachers conference or an accreditation visit.<sup>108</sup> It was planned<sup>109</sup> that accreditation should initially commence with the documentation of the course structures within each School, outlining the theoretical, practical and research components of each course. This was completed by February 1996. The OTM, held in 1996, recommended to Council, that they consider the establishment of an accreditation system with a view that the task would ultimately be performed by the Society itself.<sup>110</sup> The President of Council wrote to the Heads of Orthodontic Departments the next month, suggesting that they secure the blessing from their Deans for this initiative and outlining the scope of the preliminary data needed.

It was noted that the American Association of Orthodontists had been particularly prescriptive in their methods of course accreditation. Prof. Freer sent out a questionnaire to all Postgraduate departments, the results of which, he tabled at the ASO Council Meeting in September 1996. From this, there was a resolution that the Education committee draw up a protocol for the conduct of the accreditation of Postgraduate courses. A team of six people was to be established which would comprise three orthodontic course directors and three specialist practitioners. Accreditation of each School would be undertaken by two assessors appointed by the Education Committee and approved by Council. The decision to proceed was made by the Education Committee on 21 March 1997 and endorsed by Council the following September. When the ASO announced it wanted to perform this function for the Postgraduate departments in Orthodontics, Prof. Seymour was resistant. He felt that the existing protocol, which was based on co-operation between University and ADC, should be replicated. Any involvement of the specialist societies was not appropriate. Fortunately both he and Freer were part of the same institution and mutual respect existed between them.

Council also adopted the recommendations for the postgraduate accreditation process and agreed that the process should begin and be completed in 1998. When it was made clear that the ASO visits would take the form of a peer review and concentrate on content, but follow a protocol similar to the visits to the undergraduate departments, the ADC, which was to concentrate on process, accepted the initiative. This has since been followed, to some extent, by the other specialties.

Professor Seymour subsequently wrote<sup>111</sup> that he expected the ADC:

to look more at the process rather than the content and in this context I would not see any conflict between the ASO and the ADC. Each of the specialist societies would be asked to make a submission but essentially, as with the under-graduate degrees, each of the Schools will be asked to do a self-evaluation, in fact a SWOT analysis. The ADC visitation then, will allow the schools to focus on their strengths, weaknesses etc. and

in this way, the ADC will be able to ensure consistency in terms of time, adequacy in terms of staff, resources and facilities but allow for a diversity of philosophy and, to some extent, content.

In this way content accreditation by the ASO would be seen as complementing the ADC approach, not competing with it. While the ASO has its “house in order” it would be difficult to say the same of all the specialist societies, hence I expect input from the different societies to vary considerably in terms of its quality.

I look forward to working closely with you and the ASO as I believe this could establish a model for all disciplines in the future.

In June 1998, Olive reported that the ADC was impressed by the process the ASO had set up. They indicated that they expected the Dental Schools would be keen to use any reports generated by the ASO process to satisfy the peer evaluation criteria that would be included in the ADC process. It seemed the ASO process was going to fit well into the ADC accreditation of postgraduate training. The visits were conducted in late 1998 and the reports from the evaluation teams were accepted by Council in June the following year.<sup>112</sup> It was a rigorous inspection and some issues surfaced which were later dealt with. The Chairs of the Postgraduate departments were all willing participants and Wayne Sampson reported<sup>113</sup> that he found the process helpful. A second round of evaluations occurred in 2005 and will continue to take place at intervals of five years.

The ADC conducted their visitations the following year. Professor Seymour opted to write to the barely official Australian Council of Dental Specialists, saying of his team: “that the Sub-Committee would focus on the educational process employed by each University rather than the content of programmes. However they will be seeking evidence from each University, that it has in place a mechanism for evaluation of the content of postgraduate courses.”<sup>114</sup> Why he did not write directly to the ASO and the other specialist groups speaks volumes about the difficulty the ADC (or some within it) continued to see in accepting the process the ASO had just completed.

Each visit was carried out by a team of three, including an academic and a practicing specialist. In some specialties, it was unclear which group could be considered the peak body and so the specialist appointee in each case was nominated by the ADA. Five practicing specialists, all from different fields were chosen. Neither the academic, nor the specialist, were to be resident in the city where the School under review was situated “to avoid any personal bias”. The orthodontist chosen was Steven Bajada and he was on the team that looked at Melbourne. Reading the reports from those accreditation visits, one is struck by how few of the Departments had been subject to any serious form of peer review and how little time was allocated. The visits included only two days of inspection and each Department Head was interviewed for only 30 minutes. Very little time was spent in the clinics.<sup>115</sup> John Locke, a Prosthodontist from Melbourne, was part of the team that looked at the postgraduate departments at University of Sydney. He had, as part of his resource material, some results from the ASO accreditation.<sup>116</sup> He was not altogether sure that the means by which this material had reached him fell within ADC protocol.

In his view, the ADC process was greatly helped by the ASO experience and now (2009), coming up to the third time around, is functioning well with acceptance of the process finally coming from both the specialist academies and Postgraduate departments. Locke continues in this service.<sup>117</sup> The author could not find out whether an orthodontist remained on the panel. Ian Watson, in discussing this event and remembering the ASO visits just completed, asked “Why are they doing it again?” The author feels that Seymour’s distinction between content and process was subtle in the extreme and that the ASO’s visitation was by far the more rigorous.

## Clinical Doctorates

Wayne Sampson reported the course in Adelaide moved to three years in 1995:

in line with the groundswell of international opinion.... In our case, the thought has been to introduce something akin to a registrar year in the third year. The faculty approval was difficult to obtain. The University wanted to go to one year Master’s programmes. The 3 year programme became a Clinical Doctorate in 2000.

In 2006 we changed from coursework to a research degree, largely in response to the government’s funding model which saw Universities having to compete for money, particularly the research quotient.

Sampson went on to say:

the Doctor of Dentistry (research) degree certainly has not suffered a decline in the clinical experience of the postgraduates but the research expectations are very high (under Milton that has always been the situation anyway).<sup>118</sup>

The change in name is probably more window dressing than anything else as the amount of coursework and clinical requirements have not been reduced. Previously, the division in all courses used to be approximately 40 per cent research and 60 per cent clinical and course work. In Adelaide they used to boast that it was 60 per cent research and the remainder also 60 per cent. Now this will be universal.

Melbourne and Queensland have moved to a D. Clin. Dent. Sydney commenced the Clinical Doctorate in 2009. According to Ali Darendilier, this was a Faculty decision, doubtless again prompted by the government’s funding model.<sup>119</sup> The University of Western Australia also moved to the D. Clin. Dent in 2009.<sup>58</sup>

The relationship between the ASO and the Postgraduate Departments is probably unique in Dentistry in Australia and perhaps further afield. There has been a consistent mutual concern and support. On occasion, the one has had to nudge the other. The successful development of Postgraduate education is probably the finest accomplishment of the Australian Society of Orthodontists.



Was it like this in our time?  
Michael Woods with his students

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## Chapter 10

# The College

The idea of a College devoted to Dentistry or Dental Science, in Australia was first mooted in 1956 when the possession of higher qualifications was seen as a necessary prerequisite to academic advancement.<sup>1</sup> Such Colleges had existed in the UK for some time and many Australians had taken the examinations they offered. The Australian College of Dental Surgeons finally came into being on 14 March 1965. “In order to establish the College all members of the profession who possessed a higher qualification were invited to become Inaugural Fellows”. Six hundred and seventy-five individuals accepted this invitation. K.T. Adamson was one of the ‘subscribers’ to the initial Constitution. Initially numbers seeking membership through examination were low and many of these were from neighbouring countries in South-East Asia, but over time this qualification has become much sought after and numbers have increased.

In August 1972, permission was granted to use the title “Royal” as part of the College’s name. It became the Royal Australasian College in 1977 and ever since has served the needs of Australia, New Zealand and their near neighbours. Reciprocity with the four colleges in the UK was also granted in 1977.<sup>1</sup> Provision for examinations at an advanced level in Special Fields in Dentistry was soon introduced and Oral Surgery, Endodontics and Prosthodontics were three specialities quickly to take up that opportunity.

As far back as 1961, Norton, in writing to his successor, Kevin Henderson about the proposed Australian Board of Orthodontics, suggested that, in gaining the necessary qualifications, that Orthodontics could be “the original faculty in the Australian College of Dentists (I hope we get this going soon)”.

The far sighted ASO President, V.P. Webb, when discussing specialisation said that if there was no opportunity from Dental Schools, other than at the University of Sydney, to obtain higher qualifications, the specialty may have to look to training courses under the auspices of the Royal Australasian College of Surgeons or the

soon to be formed Australian College of Dental Surgeons.<sup>2</sup> Alan Parker, Secretary of the Foundation, held the same view.<sup>4</sup> Webb maintained a strong pro-College position throughout his career, and served as an orthodontic representative on panel discussions at early meetings and ultimately offered his academic dress to the College on his retirement.<sup>3</sup>

Almost as soon as it began, the infant ACDS saw for itself a role in the examining of dentists for higher qualifications in the specialities. This was in line with the long-established tradition of the surgical colleges in the UK in both Dentistry and Medicine. Indeed in some specialties, particularly oral surgery, the need was seen for such qualifications nationally. At that time, there were few opportunities for postgraduate study leading to specialist recognition within Australia.

Early in 1969, Robert Harris, Secretary of the College, invited the participation of representatives from the Society in “exploratory discussions on the role of your Society with the College”.<sup>5</sup> G.I. Brown, ASO Secretary, responded<sup>6</sup> that the ASO would be pleased to enter into such discussions, and that the invitation would be discussed at the next Federal Executive Meeting, after which the President would be in contact. After a further meeting, Harris replied<sup>7</sup> “A general discussion was had on the question of specialisation and requirements for recognition and training thereof... further correspondence will develop after our officers have formulated plans arising out of the meeting”. Harris was jumping a little ahead of his original request.

At the same time, both the ASO and the ADA were looking intensively at the general implications of specialisation. At the Society’s General Meeting shortly thereafter, when discussing the report of the Graduate Education Committee, Professor Thonard suggested that the Universities “could not accept the sole responsibility for training specialists”, and Professor A. M. Horsnell, Dean of the Faculty of Dentistry at the University of Adelaide said the ACDS could act as examiner but would not provide specialist training unless it was to “function in a manner different from any other College in the world”. These somewhat incompatible statements serve to underline the uncertainty which characterised the issue at that time.

In May 1969 the College began to look at the “establishment of Diplomas in selected subjects”. A committee under the chairmanship of Prof. Horsnell was established but before proceeding with recommendations to their Council, they wanted to obtain the opinions of the Societies.

Horsnell wrote to the new ASO President, Richard Case,<sup>8</sup> outlining the stage that had been reached by his Committee, but, before presenting it to the College Council, he wanted to obtain the opinion of the specialist societies. What Horsnell’s Committee had in mind was already quite detailed as follows:

1. It is recognised that the acquisition of Fellowship of the College is not a specialist qualification and was not intended to be such.
2. The implementation of examination for the award of a higher Diploma of the College in certain subjects would be desirable.
3. (a) Examinations for a higher diploma should be established initially in the following subjects: Oral Surgery, Periodontics and Orthodontics.

- (b) The list of subjects shall be kept under constant review to permit changes as required through the result of experience and further development.

They proposed some prerequisites for the examination, which included:

- (i) A minimum period of four years experience in general dental practice,
- (ii) The possession of a Fellowship,
- (iii) A period of supervised specialist clinical training which would include:
  - (a) A minimum period of two years full-time (or part time equivalent) clinical experience in the special field,
  - (b) An organised defined course in which the relative proportions of clinical practice and theoretical study would be clearly set out, and
  - (c) The production of evidence of a satisfactory progress and completion of clinical experience of and successful completion of an organised defined course.

A diploma examination would be set at a 'level reasonably to be expected of a person with a University degree and a minimum of six years additional experience'.

They concluded: "The Committee would particularly seek the opinion of your Society on the principle that the fulfilment of the requirements for a College higher Diploma, based upon the foregoing, would be accepted for recognition for specialisation within the ambit of your specialist Society."

A further comment was made, that the Committee did not see the proposal as the only avenue available to proceed to specialist status, but that they were seeking the opinion of the Society "on the principle that the fulfilment of the College's requirement... would be acceptable for specialist recognition" within the "ambit of your specialist Society".<sup>9</sup>

Case replied<sup>10</sup> that the ASO was currently considering the matter of specialist recognition, and would advise the College in due course. "If the Society agrees to a part-time programme for specialist recognition, the deciding factor would depend on the standard compared to a full-time postgraduate course".

The Federal Executive of the ASO held a meeting in Brisbane on 25 May 1970, at the time of an ADA Congress when the recommendations of the Australian College of Dental Surgeons concerning a Diploma course in Orthodontics were discussed, and the following recommendation was made:

After an exhaustive discussion, taking into consideration the policy of the ADA regarding specialisation in Dentistry, the recommendations of the Graduate Education Committee of the ASO and the proposals submitted by the ACDS, it was resolved that this Executive make the following recommendations:

1. The ACDS be asked to initiate a syllabus terminating in an examination for a Diploma in Orthodontics, as a national postgraduate qualification.
2. This Diploma to be a qualification for specialist recognition, provided that:

- a. The diploma syllabus and examination be equivalent in standard to the full-time training course recommended by the ASO.
  - b. The diploma syllabus comprises clinical and theoretical training. The clinical training is to be carried out in conjunction with teaching institutions or practising specialists approved by the ADA in conjunction with the ASO. The theoretical training to consist of a lecture programme corresponding to the full-time course recommended by the ASO.
3. The existing Fellowship should not be a pre-requisite for the diploma examination.

The Executive also considers that the ACDS participation will co-ordinate all specialist bodies affiliated with the ADA and would provide a possible part-time alternative to a full-time postgraduate training course.

What seems clear is that the senior office bearers in the ASO were more than willing to co-operate with the College at this time. Case was to repeat “The acceptance of the ACDS as an examining body could enable this body to act as a co-ordinating agent at a national level for all specialist bodies affiliated with the ADA.”<sup>11</sup>

The Executive was concerned that Universities may not be able to sustain the level of postgraduate education required and that the College initiative could provide substance to an organised preceptorship programme.

The following year, the College announced that it was proceeding with examinations in Orthodontics and Oral Surgery and asked the respective societies for assistance “in preparing minimum standards for national recognition of specialists”<sup>12</sup>

This was discussed by all Branches, as part of their response to the ‘Pilot Policy on Specialisation’, which was supportive of the College involvement. At its General Meeting in July of 1970 the NSW Branch moved a resolution not fully in agreement with the thrust of discussions thus far:

Orthodontic education should be confined to Universities, most of which have recently introduced courses, until sufficient time has elapsed to assess the capabilities of these courses to meet the demand. It would be, in the opinion of this Branch, premature for another body, such as the Australian College of Dental Surgeons to enter the field, particularly on a part-time basis.

The Queensland Branch was even more strident in their opposition to the College becoming involved in postgraduate training. As to the College Diploma and consequent retention of the preceptorship method of training, it moved:

“That the Queensland Branch make a firm statement of its opposition to the preceptorship method of training, as suggested in the Federal ASO Pilot Policy.” The report added, “the establishment of separate postgraduate institutions can hardly be justified and would in fact be detrimental to the progress of dental postgraduate education as a whole”. They further commented on the desirability of the coexistence of postgraduate and undergraduate training for both staff and students. Victoria and Western Australia were non committal.

The South Australian Branch, on the other hand, supported the ACDS involvement provided that, "Diploma status comprises clinical and theoretical training, the clinical training and examination to be carried out by teaching institutions approved by the ADA in conjunction with the ASO".

Although the States had differing views, there was serious opposition to the position held by the senior office bearers.

Richard Case and John Reading, the Society's President and President-elect, who served as the ASO representatives on the College sub-committee for examinations at advanced level (Horsnell's committee) were subsequently able to have the College principles redrafted. This brought them into a form, they felt, that would be acceptable to the ASO. This was approved, in principle, by Council.<sup>13</sup>

At the General Meeting in 1972, because of a clear perception amongst members that the College proposed some sort of takeover of specialist recognition, a motion was moved which confirmed the role of the Universities in the postgraduate education of specialists and the granting of qualifications. The motion also suggested that the College should play no such role. Another motion stated the meeting "recommends that the College does not proceed with the Diploma at this stage".

After lengthy debate, wiser heads held sway and a resolution, moved and relentlessly pursued, through the somewhat disjointed debate, by R.Y. Norton was passed, which stated, "That this meeting directs Council, using the Policy on Specialisation as a basis, to discuss with the ACDS and any other authority the need and desirability of introducing qualifications in Orthodontics." The policy in question had just been ratified at that same meeting.

In perusing the transcript of the meeting, a high degree of suspicion is evident, as is a degree of confusion as to the real nature of the College's intentions. Adamson, Past-President, both of the Society and the College, felt obliged to intervene on a number of occasions, but appeared to be not fully conversant with the extent of the negotiations, already progressed with Horsnell's Committee. He did mention, regarding the Executive's response, that the "College was so impressed by the way things had been done".

The general membership was not so impressed, particularly because so much discussion had taken place without their knowledge. J.K. Hawkins, the mover of the original motion confirming the role of the University, at this stage warned against encouraging the College to offer a Diploma, because of the possibility of this institution taking over control of postgraduate degrees. His statement was greeted with acclamation by the meeting. Milton Sims recommended caution, because of his belief that "the College was acting in a clandestine manner", and detailed some of the movements taking place at his university (Adelaide) involving groups of Oral Surgeons and the College. Keith Godfrey later entered the fray, "it is most unfortunate that the Australian College of Dental Surgeons appears to be committed to duplicating orthodontic education. At least one likely effect of such policy will be to embarrass the dental schools by stretching the teaching line so much more thinly."<sup>14</sup>

Despite the acrimony evident at this meeting from the general membership, there was ample goodwill between the senior office bearers in the two organisations. When the Executive moved to Sydney and John Reading became ASO President, the discussion at meetings continued to try and find a way forward that reflected the interests of both parties.

The College again saw fit to reiterate its view: “Since ... misconception exists that the College would set up training programmes for specialists, it is important to emphasise that this is not and is never likely to be an activity of the College.”<sup>15</sup>

The College was proposing to pitch its examinations “at higher level”, and the ASO Council found no fault with that, given the College’s assurance that it would not be providing training programmes for the examinations. This implied that the role of the Graduate programmes was unaffected. In May 1972 the Federal Executive met again with the College President and the College Committee for Examinations at an advanced level, at which the College confirmed once more that it was not planning to set up a training programme and that a formal programme of two years full-time training, at least equivalent to a Master’s degree, would be a prerequisite for the College qualification. The Executive did not believe the College proposal conflicted with the ASO Policy on Specialisation.<sup>16</sup>

Nonetheless, disquiet still continued, even though a further meeting with the College in 1974 confirmed, yet again, that “training programs are not and are never likely to be an activity of the College”. A further discussion suggested that, for “a special stream qualification, the College’s requirements are at a level higher than the Master’s Course”. The College added: “It is unlikely such an exam will occur in the foreseeable future”.

Several of the State Branches still voiced concerns about the College’s vision. Despite this, the Council had written to the College advising: “The ASO is available for consultation should the College wish to set-up an examination for Fellows at an advanced level in Orthodontics.”<sup>17</sup>

David Hellstrom, President of the NSW Branch, felt that, as this proposal had been severely quashed at the Melbourne Congress, it should not be brought up again without reference to members. The Executive wrote to the Secretary of the NSW Branch<sup>18</sup> “responding to the concerns which had risen both in NSW and Victoria that negotiations had been re-opened with the College regarding an examination in orthodontics”. The letter went on to say that “the ensuing correspondence from the College indicated that no plans had been drawn up for an examination in orthodontics” but in no way responded to Hellstrom’s concern, a concern shared by many others.

The College went ahead with its “examinations in the special fields” in several fields but not in Orthodontics.

The regulations for the Examination of Fellows at an Advanced Level in Special Fields (1981) were indeed more onerous than the requirements for Full membership of the ASO, and involved, prior to presenting for the examination, successful completion of a two-year course or equivalent, with the possibility of a further period being required. Also required were two years prior experience in general

practice and four years experience in the special field with a verified logbook containing a summary of the areas covered. The only exemption from the two-year course applied to those who had accumulated ten years experience prior to 1980. As the specific requirements for Orthodontics were finalised, it came to include the presentation of 12 treated cases.

P.A. Heagney<sup>19</sup>, the WA representative on Council in discussing the College's contemplated Diploma in Orthodontics, said that as the "Diploma in Oral Surgery was accepted as a 'ticket to specialist status' the same inference for Orthodontics was of concern".

In 1984, the RACDS was able to report in its newsletter that it was the only one of the Dental "Colleges to offer an Examination in Special Fields leading to a Diploma at an Advanced Level". This was available in Oral Surgery, Prosthodontics and Endodontics.

On the other hand, the College President, Stanley Kings, said that the Canadian College was very different, offering a Membership and ultimately a Fellowship in nine specialty areas. He went on to say: "the activities of that College are directed towards formalising and standardising requirements for specialisation throughout the country".

In 1986 Stanley Kings wrote: "There is no suggestion that the College policy regarding its role as an examining body might change. The College is not in a position to set up programmes, nor does it intend to."

R.G. Henry, who became ASO President in 1984, was greatly in favour of orthodontists furthering their professional development and seeking higher qualifications. He had been an examiner for the (general) College Fellowship examinations, as well as for several Universities, and remained a supporter of the College's Diploma examinations.<sup>20</sup> The Education Committee wrote to the College, listing their requirements for the Diploma. Further discussions and an interim committee were contemplated.<sup>21, 22</sup>

In its 1984 report, the College stated that the ASO "has approached the College with a view to setting up an Advanced Level Diploma in that special area". A joint committee was developing guidelines. The College indicated its pleasure at the possibility of establishing a course, and indicated various prerequisites, examinations, and suggested areas of study.

The Executive planned to present to the next General Meeting the following motion:

The Australian Society of Orthodontists requests of the Royal Australasian College of Dental Surgeons to set up a Diploma in Orthodontics following the guidelines stated in the Registrar's letter<sup>23</sup> and the Society offers its full cooperation.

This failed to gain the Council's approval and also failed at the General Meeting in August of 1985. Consequently a letter was sent to the Registrar of the RACDS putting an end to negotiations, saying "We do not wish to proceed with the advanced examination by the College at this stage".

The College President's Report for 1986 contains some interesting reading under the heading "Future Policy" in which an alternative to the existing Special Stream examination was being considered. This would lead to a Fellowship, similar to the present advanced level Diploma, i.e. after an intensive training programme, and would be a prerequisite for specialist registration. In the long term this would mean that all members of a particular specialty would be under the umbrella of the College.

This was in total conflict with the thrust of developments to that point, was in clear conflict with the ASO's Policy on Specialisation and was contrary to the Society's beliefs. These held that education for orthodontists should be the prerogative of the Universities. The report simply served to confirm the long-held suspicions held by many ASO members.

Serving to inflame matters further, at about the same time, the Victorian Branch of the College announced plans for a lecture programme in Orthodontics for general practitioners in Mildura to be conducted by Professor Joseph Sim, the specialist pedodontist from the US, who had been the subject of much earlier concern to the ASO. Peter Horkin, ASO Victorian Branch President, chose to write directly to Sim stating his Branch's opposition to the proposed presentation. It is uncertain whether this action was approved at the Federal level. Inasmuch as the content of Professor Sim's course had been discussed with Horkin beforehand, the letter clearly had been provocative in the same way that the College's invitation, despite stated objections from the ASO, could be seen as provocative. The Victorian Branch had been conducting successful and well attended courses for general practitioners since its inception. They considered, that inviting an overseas pedodontist to discuss Orthodontics, showed less than total support for local Orthodontics. The College was of the view that Horkin's letter was "unnecessary, ill-advised, insulting and impertinent". This dispute did little to encourage harmony between the two organisations.

R.Y. Norton had been appointed to the College Council in 1975, and served a two-year term as President in 1983-4. He believed the College had an important role. For his 1987 Stanley Wilkinson Memorial Oration, Norton came out strongly in favour of the role of the College in setting specialty standards, and suggested Orthodontics should look carefully at its sister organisation, Australian and New Zealand Association of Oral and Maxillofacial Surgeons (ANZAOMS).

He quoted Clifford Ballard's opinion, which he had originally dismissed, but now supported, that there were three important prerequisites for specialist recognition: appropriate training, supervised clinical experience and evaluation and acceptance of competency by one's peers. Norton's belief was that the Society itself would be perceived as having too strong a self-interest, and that a body like the Royal Australian College of Dental Surgeons could well fulfil this third function. His view was that State Dental Boards were also not the appropriate authority to evaluate a specialist's competency and that this could be better done by the College. This had recently become the case with Oral Surgery.

The College had sound reasons for the establishment of a second method of entry to its ranks. It had become apparent that dentists were tending to specialise earlier.

The attraction of the general dentistry qualification offered by the College was becoming limited and inappropriate for prospective specialists. Needing to go back to gain the general Fellowship was a strong disincentive for established specialists, and the College was concerned that it might become confined to general practitioners, with no specialists as Fellows.

Over the next few years, the Diploma was discontinued and a new examination process was determined. This included a Board of Studies for each “Special Stream”, with Dr George Wing as the common convenor for all the Boards. A Board of Studies would consist of:

1. The College Registrar;
2. Two Fellows whose eminence is recognised in the relevant special fields, nominated by the College; and
3. Two Fellows of the College nominated by the specialist Society.

R.G. Henry reported that the Endodontic Society was concerned that the composition of the proposed Board of Studies would give a majority to the College nominees. They had a further problem, in that the wording of the new College Regulations stated that: “the method of entry is designed for a dentist who is not already a Fellow and who wishes to gain Fellowship and specialise in a recognised field”. The possible inference being that the proposed qualification was all that was required. A motion asking the College to delete the words “and specialise” was passed.<sup>24</sup>

Because those nominated by the College were almost certain to be members of the Society, the ASO Executive felt confident that control of the standards of the examination would remain in the hands of specialists. However, at the same meeting<sup>23</sup>, Council resolved to request the College to reduce their nominees to these Boards of Studies by one, and that, if the College complied, they would accept the College’s proposal in principle. Council held to this view, despite the long held opposition from the general membership to the College’s proposals.

By 1987, this ‘second stream’ of entry into the College was utilised by three other specialist groups. The College now approached the ASO to form the Board of Studies, necessary for the implementation of this method of entry in Orthodontics. The Council agreed to co-operate with the College and nominated J.F. Reading and K.C. Grave as the ASO representatives on the Board of Studies.<sup>25</sup> The General Meeting in 1987 finally endorsed the Council’s actions in cooperating with the College in the establishment of the Board of Studies, and ratified these nominations. Examiners were also appointed.

The Meeting also recommended to the College that the suffix “Orth” be deleted from the letters FRACDS(Orth) to describe the qualification. The suffix had been added at the request of the Oral and Maxillo-Facial Surgeons, and had been included for uniformity. There was no response from the College to this request. Henry indicated that already there were eight applicants from the ASO interested in gaining Fellowship through this ‘second stream’ entry.

There was a motion in 1988 from J.K. Hawkins, asking the Council to examine and report back to members concerning a recent statement from the College President.<sup>26</sup>

This statement was to the effect, that the aim of the College was to have all the State Dental Boards recognise the special stream qualification, as the basic requirement for specialist registration. This motion was amended, requiring a response on this issue to Council, from each State Branch, before action was taken.

No retraction of the President's comment was forthcoming, so that prior to the 1989 General Meeting, the President of the Victorian Branch, Michael Shearer, moved that "no ASO member shall sit on the examining body of the 'second stream' entry of the FRACDS (Orth)". This motion was passed at the Representatives and Councillors meeting and subsequently at the General Meeting. In the discussion, T.J. Freer foreshadowed the seminal motion on the importance of setting up a Board of Orthodontics in Australia. The Council, in discussing the implications of this step, decided that those who had already accepted the College's invitation, to act as an examiner, were free to do so. Expulsion was not to be applied against any member who ignored the decision<sup>27</sup>.

Not everyone took notice of this sanction, and College examinations went ahead. John Reading who was on the Board of Studies spoke to Darryle Bowden, who was the examiner from Australia (one also having been appointed from New Zealand) to the effect that if the ASO did not provide suitably qualified examiners, others, doubtlessly less qualified, would be appointed.<sup>28</sup> Bowden, never easily (if ever) cowed into a move with which he disagreed, accepted the role, and continued to act as examiner for most of the candidates who presented over the next few years.

A rescission motion to this sanction was moved by Reading and Henry at the first opportunity:<sup>29</sup> "The ASO regrets its action in attempting to debar its members from accepting offers to act as examiners for the RACDS Fellowship in Orthodontics and hereby *removes* this restriction on members' rights." Reading was particularly concerned that this sanction would put the Society in a 'bad light' with the profession generally. This was debated at length and was defeated on this first occasion. Henry argued that the College had heeded all the ASO's concerns. J.P. Fricker wanted it to be established that the ASO would be the body to determine what was an approved course to establish eligibility to sit for the College qualification.

To support the Master's degree was the principal concern of many members. It was decided to appoint a sub-committee, possibly from NSW and Victoria, to liaise with the College and reach a satisfactory conclusion, such that recommendations could be taken back to the general membership.

So great was the angst at that time, that a nomination for Honorary Life Membership for John Reading was voted down by Council<sup>30</sup>, the only time that has ever occurred. Richard Cook<sup>31</sup> remembered that as the low point of his Presidency.

The ad-hoc sub-committee, formed at the 1990 General Meeting in Canberra, had five members. The most contentious of the appointments was that of R.G. Henry, because of his well publicised support of the College. The main concern had been that the College might admit people who would not come up to the standards of the ASO, in that they had not completed a two-year full-time course with a balance between clinical Orthodontics, interdisciplinary training and research, which by then was the de-facto international standard for orthodontic training. A standard

currently met by the Orthodontic departments in the Australian and New Zealand Universities.

The matter resurfaced at the General Meeting the following year, when two motions were presented. The first being to accept the College's rejection of the Society's wish to delete the suffix "Orth" from the FRACDS awarded for the second stream qualification, on the grounds of consistency. The second was another attempt to rescind the sanction on examiners. The decision recommended by the Representative Meeting, and agreed to by the membership, was to delay discussion until further talks between the College and the Society. This time the talks were conducted not by the sub-committee formed for that purpose at the last General Meeting, but by the ubiquitous Education Committee.<sup>32</sup> This made some sense, as qualifications were the root cause of the argument. Just prior to this, the Council had voted against accepting assurances by the College<sup>33</sup> that it would not promote the FRACDS(Orth) as a specialist registration requirement of the state dental boards.<sup>34</sup> Council had wanted the thrust of those assurances incorporated into the College Constitution.

This perceived 'takeover' by the College had been the prompt behind the sanction in the first place. A postal vote was planned for the motions, to be conducted in July 1991. At the request of the Victorian Branch, this vote was called off. There were concerns about the Constitutional validity of such a vote. This Branch was still far from satisfied with the manner in which the President and Council conducted negotiations with the College.<sup>35</sup>

It turned out that the ASO President, Senior Vice-President and the Chairman of the Education Committee did meet with the College representatives, and reported to the membership. The College had made changes, which the ASO was happy with. The regulations for examination in a 'Special Stream' had been amended, with the addition that "evidence must be produced of having successfully completed a full-time and supervised programme of training of a minimum of two years duration, leading to the degree of Master...". This confirmed the primacy of the Master's degree.

The policy document on the Boards of Studies had also been amended, to state: "the Board of Studies shall comprise the Registrar of the College, two nominees of the College, both of whom shall be Full Members of the relevant special-interest societies of Australasia, and two nominees of the relevant specialist Society". This change was to be incorporated into the College Constitution.

Other important changes were that the responsibilities and durations of appointment of members of the Boards of Studies were also incorporated into the College Constitution. In 1991 the appointments of ASO representatives on the Board of Studies came up for renomination. Keith Grave declined, and said he was unaware of his earlier appointment. The meeting refused to renominate R.G. Henry. M.R. Harry and V.C. West became the new appointees<sup>36</sup>.

Further, during negotiations, the Society put its view yet again to the College that it was opposed to the inclusion of the FRACDS (Orth) qualification as a part-requirement for specialist registration.

It was agreed that the Society could expect to be consulted by the College, if and when a significant alteration to the FRACDS (Orth) was contemplated.

At the 1993 General Meeting, Michael Harry challenged the members not to resign from the College if they were unhappy, but to get involved and exert some influence on the College.

The ASO membership passed overwhelmingly a motion accepting, in principle, the College's proposal of cooperation. The rescission motion was finally passed at the same time.

The College Registrar, George Hewitt, responded that he was pleased that ASO members may now act as examiners, and stressed that the ASO nominees on the Board of Studies for Orthodontics would be consulted on every matter relevant to the examination for the fellowship in the Special Stream. There were now four orthodontists on this Board—one from New Zealand, the others nominated by, or members, of the ASO. For the 1994 General Meeting G.R. Dickinson, the new President, wrote a clear and comprehensive report on the situation reached thus far. After such a tortuous passage, such an explanation was indeed necessary.

To date only a few have passed the College's examination in Orthodontics, whereas the equivalent qualification has become much sought after in other fields.

Early in 1996, one of those Fellows wrote an article, published in the newsletter of the NZAO, about the FRACDS Special Stream examination in Orthodontics. In the article, which included much detail about the examination itself, he stated that the qualification "allows automatic registration as a specialist with Dental Councils" (by which one supposes he meant, in the case of Australia, State Dental Registration Boards). This was not correct, in that to be able to undertake the College examination, one would already have had to possess qualifications sufficient to satisfy Australian authorities. He further claimed that there had been a "ongoing heated debate/power struggle between the ASO and the RACDS. The ASO has resented the establishment by the College, of the Special Stream Fellowship Examination. This has propelled the ASO into organising the proposed Australian Orthodontic Board Examination". This has always been vehemently denied by the Society's office bearers.

This article produced an angry response from the ASO Executive, and the President sent a 'hot' letter to the editor of the New Zealand newsletter, who was himself, a possessor of the qualification, a strong supporter of the College, and not one ever to shy away from a confrontation. From across the Tasman came threats to continue an unseemly exchange of views. It was this author's first task, as newly elected ASO President, to attempt to hose down the exchange.

As far as the assertion that the formation of the Australian Orthodontic Board (AOB) was a response to some perceived College threat is concerned, although it may have been more diplomatically put, it is hard, despite protestations from ASO Executives to sustain an argument they are totally disassociated. The reader is referred to the chapter on the various attempts dating from 1960 to bring an Australian Orthodontic Board to fruition.

The President of the College, John Harcourt wrote<sup>37</sup> to the ASO President along similar lines, in which he complained that some groups of specialists were “antagonistic” to the aims of the College, in that they were “attempting to set up their own examining bodies for the awarding of higher qualifications”. He argued that this was an example of ‘re-inventing the wheel’ and invited the ASO to discuss the matter with officials of the College.

As ASO President, the author responded:

There is no intention for this to be a rival offering. It does not lead to a degree or a registrable qualification. It is more in the notion of peer review and quality assurance.

We take the view that the College provides one of several excellent opportunities to achieve additional qualifications of significant worth. There is no reason why anybody who chooses to take the College examinations in the special stream could not do so. I fully expect increasing numbers of orthodontists to take both opportunities.<sup>38</sup>

The ASO was in no way persuaded either that the existence of the AOB was incompatible with the aims of the College, to provide an avenue to possess a further qualification, or that the different approach was a duplication of the opportunity provided by the College.

Obviously the College wanted their Special Stream qualification to be seen as desirable. The nub of the Society’s concern was whether the College also wanted it eventually to be a prerequisite for specialist registration or recognition. Indeed, the Victorian Branch particularly, and many others in the ASO, for a long time remained of the view that many in the College had such an agenda. The June 1997 minutes of the Victorian Branch reported that Professor Klineberg, Dean of Dentistry at Sydney University, together with the RACDS, had proposed that possession of a Second Stream qualification be a prerequisite for specialist registration. Periodontics was reportedly considering a similar proposal by the College.

The Board of Postgraduate Studies at the University of Sydney did put out a proposal, prepared by the Dean, in August 1996:

In order to develop a closer link between this Faculty and the Royal Australasian College of Dental Surgeons, I propose that a new structure be considered for specialty training in all disciplines, that involves both an MDSc and the College special stream exams. Any change in specialists’ description would need to be presented to the New South Wales Dental Board, but in the first instance consideration of this proposal by the College would be appropriate. The proposal involves:

The MDSc is based on two years of didactic coursework and a clinical programme in the teaching dental hospitals, with post graduate students employed as registrars, as is currently the case.

The third year is spent as a full-time registrar in a teaching dental hospital, working in a specialist unit under supervision of the specialist in that unit, and preparing for the special stream exam in the relevant field and the completion of the clinical programme for the MDSc.

Board recognition of specialty standing would then require the MDSc qualification together with the College special stream examination.

This requirement would be for local specialists who would become registered with the New South Wales Dental Board.

It went on to say “this link with the College would strengthen the educational program in each specialty and provide an important collaboration that recognised the Faculty and the College as being co-responsible for specialty training”.

This proposal was thought to represent the thinking of some within the College hierarchy and vindicated the reticence of the ASO to accept some of the College’s initiatives.

In 1999, Professor T.J. Freer spoke to Council about the role the ASO could play in education generally.<sup>39</sup> The ASO round of accreditation visits had provided a template for the ADC. Dental Schools, he said, were coming under increasing financial pressure and the ASO could help. He felt that acting in conjunction with the College, the ASO has the “opportunity to extend itself educationally and ultimately (participate) in the undergraduate course”.

At the time of writing the College has said, in its most recent annual report, that it does not intend that its special stream qualifications be a requisite for specialty recognition (unless it is asked).

The ASO was, and remains, supportive of the Special Stream (now referred to as Special Field) Examination as an additional qualification, much as the basic Fellowship is an additional and highly prized qualification for all dentists. It is Freer’s opinion that as undergraduate education in Dentistry suffers an ever increasing strain on its resources, the College’s roles will become more important.

ANZAOMS requires the possession of a Fellowship for its members, just as the medical model relies on the possession of a Fellowship to confer specialist status. A Master’s degree carries no clout whatsoever. The College plays a part in the accreditation of the postgraduate educational programmes across Australia for this specialty. Currently there is a joint AMC/ADC accreditation programme underway. R.H. Olive is currently involved, representing the ADC.

A College qualification is also mandatory in the field of Periodontics. An arrangement has been worked out, whereby the exit examination from the three-year programmes at the Universities includes the fellowship examination at the same time. The matter has been discussed frequently with the other major specialist groups but to date only Surgery and Periodontics have a College qualification as a requirement.

Lately, the College has introduced a ‘Membership’, in addition to its Fellowship. This allows one to achieve a Qualification from the College in a specialty, without any suggestion that it be a requirement. This plan was introduced by College President Neil Peppitt, with a view to bringing elements of the profession together. It has been widely embraced by the specialty, with 140 orthodontists accepting the offer, by using the ‘grandfather’ clause. Over 20 have sat for and passed the examinations for the Membership.<sup>40</sup>

Memoranda of Understanding have been signed with all postgraduate departments, which allow graduates either of Master's or D. Clin. Dent programmes to receive a Membership. This places the graduates in Periodontics in a privileged position, in that they graduate with a Master's degree or D. Clin Dent and a Fellowship, whereas the other specialties have only a Membership as the extra accolade and have to sit further examinations and present cases, before they can obtain a Fellowship. In Orthodontics it is also possible to sit for a combined qualification, gaining an "M.Orth." from Edinburgh University and a Membership.

The introduction of the Membership will also help fill the College's coffers, something very much needed as the College seeks to make up some of the leeway caused by the pressure on resources in undergraduate education.<sup>41</sup>

## Endnotes

1. College website
2. Minutes Executive Meeting 12/1964
3. Archives 1966
4. Letter to ASO Secretary J. Moffatt 23/11/1964
5. To President 13/1/1969
6. 9/2/1969
7. 10/3/1969
8. 8/9/1969
9. M.Horsnell to Case 8/10/1969
10. 24/10/1969
11. Covering letter to "Pilot Policy on Specialization". Undated. Sent out after May 1970
12. Harris R 24/11/70
13. Reading to Heath 20/10/1971
14. AOJ Vol2 No.7 Feb.1972
15. Report of Executive Meeting of College 6/1972 in Minutes Council Meeting 7/1972
16. ASO Newsletter 11/1972
17. Letter to Secretary of College. Reported Minutes Executive Meeting 7/1975
18. 25/3/76
19. Minutes Council Meeting 7/1981
20. Henry RG Personal Communication and Curriculum Vitae
21. Letter from Sims MR to RACDS 30/8/1984 Reported Minutes Executive Meeting 9/1984
22. Minutes Executive Meeting 11/1984
23. Wing,G. Registrar College. 14/2/1985
24. Minutes Council Meeting 11/86
25. Minutes General Meeting 1987
26. College Newsletter 12/1987
27. Minutes Conjoint Meeting 4.1989
28. Bowden Personal Communication 4/2008
29. General Meeting 1990
30. Minutes Council Meeting 3/1990
31. Personal Communication 1/2/2009
32. Minutes General Meeting 9/1991
33. Letter from Muller JH College President 24/5/1991 Printed in ASO Newsletter 8/1991
34. Minutes Council Meeting 3/1991
35. ASO Newsletter 8/1991
36. Minutes Council Meeting 3/1991
37. 6/1996
38. 2/7/96
39. Minutes Council Meeting 8/1999
40. College Website
41. Freer, T.J. Personal Communication 12/2007

## Chapter 11

# Honours and Awards

In accordance with the practice of the day, Honorary memberships were offered to notables, E.H. Angle and Sir Frank Colyer, as one of the first acts of the new Society.<sup>1</sup> There are no records that show acceptance of these accolades.

The early Constitutions provided for Honorary Members and also for the higher award of Honorary Life Membership. Neither had to be orthodontists. “Honorary members must be nominated by State Branches and accepted by the Federal body. The Society shall have the power from time to time to elect as an Honorary Life Member....”. The accepted mechanism was that the nomination would be referred to the Executive for approval before a vote by the membership, although this was not mentioned in the Constitution. This is interesting, because the early view had always been that Branches could not bring resolutions on any other matter before the Society. That had to be done by individuals. The use of Honorary Memberships to give a certain kudos to an organisation was recognised practice. W Stanley Wilkinson suggested, when he declined to become a member in 1950, that this would be the case if he and Oscar Paul were to become Honorary Members.<sup>2</sup>

Oscar Paul and E.C. Gates had been asked if they would accept nomination as Honorary Members of the Society when the Society was reformed in 1950. J.T. Seward was advised that he would be nominated at the next General Meeting. At the 1953 General Meeting Paul, Gates and Wilkinson were nominated by the Executive and



The Honorary Life Membership Medallion

Alex Roche, Head of the Child Growth Unit at the University of Melbourne and R. Smith (who had co-authored one of Storey's articles) were nominated by K.T. Adamson and D.F. Spring respectively. Agreement was unanimous. E.C. Gates died shortly after his nomination (1954).

There were four Honorary Members in 1956 Paul, Roche, Smith and Wilkinson.

Honorary Memberships came up for discussion at the first meeting of the new Executive in September 1956. It was decided that the President (Adamson) should write personally to Arthur Thornton Taylor pointing out to him the "embarrassing position" which had arisen with regard to the appointment of Honorary Members. Adamson included a request that he define the position. The 1955 Constitution said, in Article 4, that "Honorary Members shall be elected for such periods and under such conditions as the Society shall determine... names submitted must have been approved by the Federal Executive".

The problem (not totally clear to the author) seemed to relate to ambiguity between Honorary and Honorary Life Membership. In writing, Adamson<sup>3</sup> actually suggested a solution. It seems he was more comfortable with the concept of the accolade 'Life Membership'. In the next Constitution (1959) it was clarified that nominations for Honorary Memberships were to be made by a Branch and accepted by the Federal body and extend from Congress to Congress.<sup>4</sup>

No new names were brought forward for Honorary Membership at the 1959 General Meeting. The current three Honorary Members were re-elected.

The first Honorary Life Membership (HLM) was awarded, at the first ASO Congress in 1961, to W. Stanley Wilkinson, already an Honorary Member. This was moved by the President and seconded by his predecessor. The nomination came, as it were, out of the blue with no official discussion beforehand.

Norton had earlier written to Kevin Henderson outlining his thoughts for reasonable requirements for HLM's, including that they should be either retired or have completed 40 years of specialist practice. Hand-written in the margin were words asking Henderson what he thought of the nomination of Wilkinson. The Victorian Branch Secretary, Neil Armstrong, had also forwarded a recommendation from that Branch that P.R. Begg be made an HLM. This was not progressed at the time. Oscar Paul and Alex Roche were re-elected as Honorary Members at the same meeting.

There is no mention in the minutes of any discussion about the process of electing Honorary Members. Henderson wrote to Norton,<sup>5</sup> asking whether that had been discussed. Norton's response<sup>6</sup> was that it had been discussed at the Executive Meeting held just days before "but they then apparently got lost...and never went to the General Meeting". He records the method that was discussed:

- (a) State Branches recommend a name for HLM or HM to the Federal Executive
- (b) Executive investigate and either recommend or otherwise to the next General Meeting of the Society.

Norton suggested that Henderson include this in the proposed alterations to the Constitution.

Again at the General Meeting at the 2<sup>nd</sup> Congress, without any official consultation, the President, Kevin Henderson, invited Norton to the rostrum, to move the nomination of Arthur Thornton Taylor. This was seconded from the chair and so he became the second HLM.

Halliday had just finished his work on the history of the ASO, and had drawn the Society's attention to the contributions of Thornton Taylor. This may have prompted the action. At that meeting only Alan Docking's name came up for election as an Honorary Member. Alex Roche subsequently wrote to enquire into his own position as an Honorary Member, pointing out the situation of J.T. Seward, who was an Honorary Member of the Victorian Branch.<sup>7</sup> Seward had been a founding member of the Society, but had ceased to specialise and in fact decried the movement towards specialisation. The Executive decided to accept a nomination from the Victorian Branch<sup>8</sup> that Roche be made an Honorary Member, provided it was ratified at the next General Meeting.<sup>9</sup>



John Reading giving Sir Ken Adamson his medallion

The benefits contingent on Honorary Life Membership were discussed, and it was decided that “no precedent should be established which could, in the future, commit the Society to waiving the subscriptions of HLMs on occasions such as Congresses”.<sup>10</sup>

In preparation for the nominations of the HLMs at the 3<sup>rd</sup> Congress, the Council sought the views of the state councillors regarding such nominations. The first name discussed was that of P.R. Begg. Norton had been considering this, but was concerned by Begg's practice of taking out patent rights on components of his appliance. He wrote to the President: “I would feel inclined to oppose such an honour being conferred on a person who took such actions”<sup>11</sup>. Looking back from the perspective of 40 years, why this should seem so important is uncertain. It does highlight the attitudes at that time of orthodontists, indeed professionals generally, to such commercialism. Norton later wrote directly to Begg, asking about his patenting of appliances. Begg's response settled Norton's concerns, for in a letter to V.P. Webb<sup>12</sup>, Norton states: “from what Ray says, his professional standing in my mind has gone up even further than it was before”.

Begg apparently had used his patents to prevent any particular manufacturer from attempting to achieve exclusive manufacturing rights. This had been frequently tried, but had not succeeded because Begg had already published accounts of their use. Perhaps Norton was unaware that, no less an icon than E.H. Angle had protected his inventions with a series of 46 patents in the US and one in Canada.<sup>13</sup> Norton's letter went on to say that he would be happy to nominate Begg for HLM,

adding the rider: "if it did not come from any other source". There had been a nomination from the South Australian Branch to which Begg belonged.

Webb had written to John Heath, President of the Victorian Branch, seeking a nomination from that Branch for K.T. Adamson. Both agreed that such nominations should come from the Branch, even though according to their (highly questionable!) reading; "Clause 4 of the Constitution does not appear to make it obligatory to do so".

The three nominees for HLM Adamson, Begg and Rosenstengel, were accepted at the 1966 General Meeting, bringing the total number to five. It had been decided those men should be the Board (of Directors) of the about to be formed Australian Orthodontic Board.

At the Executive Meeting, immediately before that 1966 General Meeting, there was a discussion on formulating a policy for nominations. It was felt, as Honorary Life Membership was the "highest possible honour" the Society could bestow, that nominations should be initiated by the Federal Executive, not a State Branch, as provided for in Clause 4 of the Constitution and that the Constitution should be altered accordingly. Upcoming nominations should be proposed separately by the President and seconded by a member of the Federal Executive. This was confirmed by the subsequent Executive.<sup>14</sup>

At that same General Meeting, the Executive resolved to accept the Victorian Branch's nomination for Honorary Membership of Dr Alex Roche and also of Alan Docking, from the Commonwealth Bureau of Dental Standards. Both men had done much research and written papers highly relevant to Orthodontics. Alan Docking died in 1973 but Alex Roche remained an Honorary Member until 1980.

Victoria has been the only State to have nominated Honorary Members of the Society. They were advised that under the new Constitution they would need to be renominated at each General Meeting.<sup>15</sup>

There have been a number of Honorary Members of the State Branches. J.T. Seward, the father of Steven Seward was one such. T.D. Campbell and A.M. Horsnell were made Honorary Members of the South Australian Branch.

The NSW Branch commenced the appointment of Patrons in 1957, under the presidency of Alan Burgess.<sup>16</sup> By tradition, the Dean of the Dental Faculty at the University of Sydney is Patron of that Branch. Prof. Tasman Brown was a long standing Patron in South Australia.

A.J. Arnott was made an Honorary Life Member of the NSW Branch.<sup>17</sup> K.G. Godfrey was also nominated for Honorary Membership of the Branch. This had something to do with his recent resignation from the ADA and a universal wish for him to continue the scanning service he had been performing so admirably for the Journal.<sup>18</sup>

The method of nominating members for Honorary Life Membership, decided in 1966 was added, with only slight alterations, to the Constitution in 1971. Nominations were to be made by the Federal Council (not necessarily the President), a simple majority of votes at a General Meeting being required for election. This could

not be revoked without a three quarters majority. Honorary Members were still nominated by State Branches, accepted by Council and voted on at a General Meeting.

V.P. Webb was made an HLM at the 1972 General Meeting and Moffatt and Norton at the one following. At that same meeting, Council recommended that the Victorian Branch elect Albert Ware as an Honorary Member of that Branch.

Reading had wanted to provide some further form of recognition for the existing HLM's and had medallions crafted.<sup>19</sup> These were presented at the 1974 General Meeting. Those who were absent, by coincidence all resident in Brisbane, had theirs presented by the new President, R.F.H. Rickleman, at a private function at his home.

During the extensive work on the Constitution by Brian Crisp and his team in 1976, a section of the proposed changes was left out during printing which would mean that all Honorary Life Members were denied the right to vote at meetings. Arthur Thornton Taylor wrote that he could not vote against any changes recommended by Council, but also could not vote to disenfranchise himself, and so he would abstain from voting at all. This oversight was quickly corrected, and another vote was taken so that HLMs could retain all rights and privileges attached to their former membership. This was not the case for Honorary Members.

Norton wrote<sup>20</sup> pointing out that the revised Constitution gave no indication of the privileges attached to Honorary Life Membership. The Executive decided that those still in practice would be charged the full subscription for Congress, while those who were retired would only be charged for the functions they attended.<sup>21</sup>

The By-Laws were changed in 1980 to allow HLM's to attend Congresses without charge, in addition to the right to receive the Journal and all documents from the Society and an exemption from annual dues. Attendance at formal functions would also be without charge to them and their partners, at which they should rank immediately after Federal Councillors in order of precedence. To keep track of those honoured, a register was to be kept.

As a result of a desire expressed by the State Branches<sup>22</sup> at the Changeover Dinner concluding the Congress in 1989, Distinguished Service Awards were presented to seven members: Brown, Kirkness, Mollenhauer, Parker, Henry, Reading and Rickleman. These were in the form of plaques. No reference to these Awards has appeared in the Constitution at any time, nor could the author find reference to this in any ASO records. Evidently the production and awarding of these plaques must have not created a huge impression, because the Secretariat was surprised some years later, when one of those plaques, which had been produced and not awarded, surfaced, considerably deteriorated.<sup>23</sup>

At the same time, Barry Mollenhauer was made an Honorary Life Member. The first one for 15 years. This delay can in part be explained, in that all potential recipients were still in practice and there was a feeling that an HLM was most appropriately awarded at the end of a career.

ASO President S.P. Paul was concerned at the cost to the Society of these accolades. Council had decided that HLMs should now pay normal charges at Congresses but when this came up for discussion at the General Meeting in 1989, it was decided that attendance at Congresses should remain free, but that functions should incur a charge. There were some changes to By-Law 4 involving the deletion of the requirement to pay an enrolment fee at Congresses, and confirmation of their order of precedence, immediately after Federal Councillors, unless otherwise entitled, for normal Society functions.

John Reading was nominated, by R.Y. Norton, for HLM in 1990<sup>24</sup>, but due to the hostility over the College's perceived plans regarding qualifications, and Reading's consistent support for the College, this was rejected by Council.

In 1992 the ASO decided to institute a Meritorious Service Award and to give it status within the Constitution. It was also decided that certificates for both the Meritorious Service Award and Honorary Life Membership be prepared. Problems with the quorum delayed the adoption of these measures.

In his report for the April 1993 Newsletter, Secretary Ian Watson wrote: "The Society currently has two Honorary Life Members (all the original having passed away, leaving only Mollenhauer and Webb), and Council would be pleased to accept recommendations." He went on to say that, at the recent meeting at the Gold Coast, it was felt that as a rule such a recommendation should not be made to someone still in active practice. Sims, Brown and Smart were duly elected. John Reading received his well deserved recognition in 1995.

In 1996, with an operational Constitution again, the ASO instituted its Meritorious Service Award. By-Law 21 read:

### *Meritorious Service Award*

The Council may from time to time nominate a person who by the resolution of the Society in a General Meeting shall be the recipient of a Meritorious Service Award for outstanding and continuing dedication to the Society and its objectives. In arriving at a nomination the Council may act on its own advice or on consideration of a recommendation from a State Branch Executive. An appropriate register of recipients of a Meritorious Service Award shall be maintained by the Secretary of the Society. The form of the non-monetary award shall be determined by Council.

A further motion was passed to the effect that "certificates be prepared for the Meritorious Service Award and Honorary Life Membership". The first two recipients were John Chapman and David Hellstrom.

Richard Hay, as soon as he was elected to the Executive, decided that those who had been made Honorary Life Members should receive an appropriate medallion. He arranged for a batch to be produced using the one given to A. Thornton Taylor as a model. He was unaware that the jeweller who had made the original medallions for John Reading over 20 years earlier, still had (and still has) the die from which those had been crafted.



The author presents medallion to W.J. Mackie

At the 1998 Congress, the Stanley Wilkinson Orator, Sir Zelman Cowan, presented the newly minted medallions for Honorary Life Membership to G. Brown, B. Mollenhauer, J.F. Reading, R.F.H. Rickleman, M.R. Sims and V.P. Webb.

Subsequently, R.G. Henry and T.J. Freer (2000), B.W. Lee (2002), B.D. Bowden (2003) and J.K. Hawkins, B.W. Phillips and D.T. Taylor (2004) were made HLMs. Since then, G.R. Dickinson (2006), B.I. Watson (2008), and E.C. Crawford(2009) have received the same honour. The Honours and Awards Committee recommended and Council agreed, that it would be an appropriate recognition of the contribution of R.H. Olive, if he were to receive his Honorary Life Membership at the 7<sup>th</sup> International Orthodontic Congress, which he did so much to attract to Australia. This will take place in Sydney in 2010.

A New Zealander, Prof. Michael Harkness, applied for the position of Editor of the Australian Orthodontic Journal, when it was advertised in 2001. This caused some temporary difficulty, which was solved when he was made an Honorary Member of the Society and Council decided to delete Clause 10.10 (b), which held that an Honorary member could not hold office in the Society. This allowed Harkness to be appointed to that position.

J.K. Hawkins wanted the rights and privileges of Honorary Life Membership further defined.<sup>25</sup> There must have been a general uncertainty<sup>26</sup>, because the President, “subsequent to recent comments made by some HLMs”, felt obliged to write to all the Honorary Life Members, outlining their rights and privileges.<sup>27</sup> These in 2009 include waiving the annual subscription, free receipt of all publications and free attendance at all ASO and Foundation functions, but unlike the situation decided in 1978, this does not include partners.

In 2003, badges were prepared for recipients of the DSA (as well as Past Presidents, Council Members and some others). At the request of the Victorian Branch, A/ Prof V.B. West was given a Distinguished Service Award. Although this was an Award from the Society, it was bestowed at the Branch’s Annual General Meeting<sup>28</sup>. Richard Hay, long term Council Member and indispensable member of the author’s Executive, was honoured with a Distinguished Service Award in 2004.<sup>29</sup>

Alan Parker was less than impressed when, on his retirement from the ASO after a membership of over 50 years, he was awarded a second DSA in 2005.<sup>30</sup> He probably would have been more sanguine had he realised that the batch of such Awards made over 15 years previously had received so little publicity, and there had never been any mention of this Award in the ASO Constitution.

ASO President E.C. Crawford<sup>31</sup> felt that the entire process needed regularising. He presented a model based on the ADA practice<sup>32</sup>, formed a Standing Committee (Honours and Awards) and had By-Laws written into the Constitution. A Distinguished Service Award was re-instituted in lieu of the Meritorious Service Award and criteria for this and HLMs were put in writing. A protocol was established so that the recommendations of this Committee are confidential although its records remain on file.

The Honours and Awards Committee was also given the task of communicating with the Order of Australia Committee on behalf of the ASO, to ensure its members were correctly acknowledged in the wider community.

No discussion of ASO awards would be complete without reference to the P. Raymond Begg Research Award, the other Foundation Awards and the newly inaugurated Milton Sims Award. These are discussed in more detail in the chapter dealing with the Foundation. The Begg Award has been bestowed frugally and awarded only four times; twice to Milton Sims and once each to Simon Freezer and Christopher Ho. This is the Society's highest award.

### Honorary Life Members

1961	W. Stanley Wilkinson
1964	A. Thornton Taylor
1966	K.T. Adamson, P.R. Begg, B.L. Rosenstengel
1972	V.P. Webb
1974	J.B. Moffatt, R.Y. Norton
1989	B. Mollenhaeur
1993	G.I. Brown, M.R. Sims, L.M. Smart
1995	J.F. Reading
1997	R.F.H. Rickleman
1998	W.J. Mackie
2000	T.J. Freer, R.G. Henry
2002	B.W. Lee
2003	B. D. Bowden
2004	J.W. Hawkins, B.W. Phillips, D.T. Taylor
2005	R.G. Cook
2006	G.R. Dickinson
2007	B.I. Watson
2008	E.C. Crawford
2009	R.J. Olive

## Endnotes

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2. Wilkinson to Taylor 4/6/1951
3. to Thornton Taylor 21/12/1956
4. Clause 4
5. 30/11/1961
6. 4/12/1961
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31. Minutes Executive Meeting 3/2005
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## Chapter 12

# A Permanent Home

As early as 1969, concern was expressed regarding the storage of the ASO's records. As the Society grew, more and more members, especially those involved in executive matters, began to question the amateur way in which the business of the Society was conducted. Successive Councils more or less 'reinvented the wheel' every two years. In May 1974, at the suggestion of the previous Treasurer, R.G. Henry, the Executive actually employed dedicated part-time help rather than use staff from their surgeries.

Successive Presidents had, at considerable personal sacrifice, set up offices using their own facilities. Rickleman had set aside portion of his rooms for ASO use, and had actually placed a sign on the door. The new Society's first unofficial office. The December 1974 Newsletter mentioned that "a small suite of rooms has been made available by the President next to his surgery. All Federal Executive Meetings were conducted there. The office can also be used to accommodate a part-time secretary if and when the occasion occurs." This was the first step towards creating some form of Secretariat. Freer suggested consideration of a "central permanent university type of staff set-up to look after ASO administration".

The need for a permanent home became a regular subject of discussion.

The Perth Executive of John McGibbon rented space in the building in which he conducted his practice, and created the ASO's first official office, with its own address. They purchased furniture and office equipment. Signs, both internal and at street level, advertised the new office.<sup>1</sup>

After John McGibbon died, the new President, Lloyd Trotter, moved the office to a position similarly close to his own practice, and that Executive continued to operate there, until their term expired.

The matter of a permanent Secretariat was regularly brought up. In 1982, Henry, who was the Society's recently appointed Liaison Officer with the ADA, reported that at that time the ADA had no spare room, but were shortly to move to recently acquired premises. They would be happy to assist the ASO.<sup>2</sup> Indeed a tenant, to use surplus space, would be an asset. Treasurer John Wilkinson even said that a centralised office would allow more efficient use of the Society's computer.<sup>2</sup> Darryle Bowden introduced the topic in a very positive way in his first editorial for the AOJ, after assuming office as ASO President.<sup>3</sup> The piece was headed "Wanted -A Home for a Professional Society".

Bowden stated that, with a membership of over 300, the complex list of necessary functions could barely be handled by the available pool of willing, capable and experienced office bearers. He listed most of them, so his readers could understand what was really entailed. He said "the Federal Office is a very lean operation" mainly as a result of "the generosity of previous Executive Members". He gave examples of bodies, similar in size and function, which had taken the step of creating a permanent Secretariat. He believed the time was right. Cost savings were possible, particularly with standardised protocols, especially in printing the many publications now required.

He went on to mention the possible advantage to the Society of owning an appreciating asset, if the new office was owned by the Society. Wilkinson raised the matter at an Executive Meeting<sup>4</sup>, and suggested an alternative: establishing a central Federal office in a suburban location perhaps in a spare room of a member's house. The idea was to be passed on to President-Elect R.G. Henry.

A report was presented to the General Meeting in 1983: "The Society has reached the size and stage whereby its day to day running is becoming increasingly more difficult". The report argued that there was a loss of corporate knowledge each time the Executive moved. Its staff and the Society's new computer could be performing much more efficiently than was presently the case. A permanent office was the answer. Sydney, being the geographic and demographic centre, was thought the most suitable location.

Concern was expressed by several members about funding. The Executive was directed to furnish an outline of all the costs involved in the initiative, for further discussion at the next General Meeting.

The NSW Branch met at the end of that year and W.J. Mackie moved a motion: "that this branch accepts the suggestion of the centralised office", but there was a need "to thoroughly cost the project".<sup>5</sup> No doubt that view was generally held. They added: "as an interim measure, that suitable premises in Sydney be leased to ...house the Society's records and archives".

For the General Meeting at the conclusion of Darryle Bowden's term, the Executive prepared a detailed paper further advancing this proposal. This paper outlined the history whereby the periodic rotation of the Federal Executive had taken place. It mentioned that this was viewed by most members as healthy and democratic, allowing for the injection of new personnel and, hopefully, fresh ideas on a regular basis, adding:

The resultant intermix of successive executive input has proven, in the past, to be an important factor in maintaining a balanced Society, with no one group exerting undue influence for any prolonged time.

The Society, however, had grown enormously over the last several years and its functions had become increasingly complex. The workload was proving quite an undertaking for a new Executive, which had probably only limited 'hands on' operating experience, dating back some ten to twelve years, since the last time the Executive was in that State.

According to that Executive, the only feasible solution, if the Society wished to continue to have its affairs conducted in a professional way, was to centralise the Federal Office. This would permit stability of location and staff and encourage inherent efficiency in handling its business. They felt that the work could be handled by two part-time staff and detailed a cost sequence over the following couple of years. They were realistic enough to know that the cost of this Secretariat would be greater than under the previous arrangement, which had recorded annual expenditures for 1981, 1982 and 1983 of approximately \$8,000, \$10,000 and \$12,000. Estimates for the following three years, with a Secretariat would be \$22,000, \$29,000 and \$35,000. Nonetheless, they put the following motion, to be inserted under Section 6 of the Constitution:

*Central Office*

1. From April 1984, the Central Office of the Society is to be established in Sydney, with the location at the direction of the Council of the Society.
2. The staffing and expenditure for running the said Central Office is to be determined from time to time by the Council of the Society. A full report of said Central Office expenditure is to be listed separately in the Treasurer's report.
3. Any decision to purchase real estate or property for the sole purpose of establishing a Central Office must have the majority approval (75 per cent) of all Members of the Council, the Chairmen of Standing Committees and all State Branch Presidents. This decision must be ratified at the next Congress General Meeting.
4. Commencing after the 11<sup>th</sup> Congress, to be held in Sydney in 1987, the Executive office bearers (President, Treasurer and Secretary) are to rotate as per section 6.1 of the Constitution, but with the Central Office of the Society remaining in Sydney.

The motion was passed and became part of the Constitution.

R.G. Henry, the new President, from NSW, was of the view that such an initiative was premature. He disregarded this directive and conducted his Executive in the time-honoured fashion. Executive Meetings were held at his home, convenient for the other two members of his team. He rented space, at a very nominal rental nearby, (the minutes of a 1986 Council Meeting<sup>6</sup> use the word 'princely' to describe the amount) and the Society's historical material and Executive records, not readily required, were stored there.

Henry did ask the Vice-President to discuss with his intended Executive their thoughts on running the Federal Executive in Brisbane, with a Secretariat in Sydney.<sup>7</sup> Shortly, he advised Council against opening a permanent Secretariat.<sup>8</sup> He said “Experience shows that it would not be practical at this stage to have staff on a part-time basis in Sydney with the rest of the Executive in Brisbane.”<sup>6</sup>

It is fascinating that, after so much discussion, there does not appear to have been any complaint from the membership at this unconstitutional behaviour. The 1984 motion was rejected at the Council Meeting in November 1986.<sup>9</sup>

Henry seemed to feel that he could manage the affairs of the Society, with the Executive Meeting in his home on a monthly basis.<sup>10</sup> Certainly his meetings finished in about half the time required by his predecessors.

Neither did the subsequent Executive make any move towards a centralised office. The Treasurer, Demetri Patrikios, did address the issue in his 1988 Report, when he said that the Society needed a permanent home if it was to “deal efficiently with the ever increasing demands” of a burgeoning membership. He discussed funding options expressly for a capital purchase, noting the tax impost on interest earned from income invested for this purpose was very high. He suggested a levy could fund a purchase.

At the end of the term of the Queensland Executive, Patrikios raised the matter yet again in his Treasurer’s Report, while also arguing for a doubling in the Federal component of the annual subscription, from \$60 to \$120 per year. He was of the view that a Secretariat necessarily involved the purchase of a property, and thus an increase in the Federal subscription and retention of any interest earned by the small capital base of the Society, was required. Such a move would attract income tax. He went on to suggest that a levy of Full and Provisional Members of \$250 towards the purchase would make a reasonable start.

The Secretary’s Report for the same meeting made the point that: “the Federal Executive found that in the first 12 months of our activities were largely confined to feeling our way. A centrally located Secretariat would do away with this very inefficient method of operation.”

Patrikios’s comment did not fall on deaf ears because, at the General Meeting (1989) a motion was passed to establish a permanent office in Melbourne after the Perth Congress. Peter Horkin, from Victoria, presented the submission. He stressed that the original 1984 motion had been rejected by the following (Sydney) Executive. The NSW Branch President, spoke for the motion but against the location. He suggested the Society share an office with other specialist societies in Sydney, and cited the advantage of having the Federal ADA office also in Sydney.<sup>11</sup>

At the next General Meeting, held in Canberra in 1990, Peter Horkin presented a very detailed proposal for a permanent office, with budget estimates and possible office locations. He used the same arguments as had previously been advanced, and suggested that, as there had been no interest from the orthodontists in Sydney, that the Central Office be established in Melbourne. He argued that there was, and always had been, considerable interest from that city. He was prepared to consider

the possibility of purchasing a property, but did not think this was essential or that it was the major issue.

The NSW Branch President, John Brabant, again protested at the notion of the office being in Melbourne, as most ASO members lived in NSW. Horkin's motion failed to gain the requisite 75 per cent majority required of a Constitutional amendment. The main problem seemed to have been that despite the great detail in Horkin's proposal, no 'notice of motion' had previously been circulated to members. The Meeting finally resolved to put the matter to a postal vote.

The Executive formed an ad-hoc committee, to work on this project. This was to include members of the NSW Branch and Peter Horkin, the proposer of the original motion. In answer to a question from S.B. Bajada, the Chairman stated that it was always intended that the Executive would continue to rotate, as it had done in the past, but that the Secretariat would remain in the one location. In view of the availability of electronic transfer of information, no problem was envisaged from the distances involved.

The NSW members, of this ad-hoc committee were Brabant, Michael Imer and Richard Abbott. As their focus began to fix on the 'Science Centre Foundation', ASO President Richard Cook, and President-Elect Basil Phillips visited the Science Centre's office with Cook's Practice Manager.<sup>12</sup>

Finally, at the Perth General Meeting in 1991, Michael Imer successfully moved that the Science Centre Foundation's submission to operate the permanent Federal Office be accepted. During the discussion, costs for the project were estimated to be in the vicinity of \$25,000 per annum. Also concerns were raised at the ability of this organisation to act as a conference manager for future Congresses and Foundation meetings. The question was asked if the ASO would have a representative on the Board of Governors of the Science Centre Foundation, to which Richard Abbott replied in the negative. Concerns were also expressed at the confidentiality of ASO information under such an arrangement.

The Science Centre Foundation had first come to Abbott's notice in his capacity as a Congress Chairman for another dental organisation. He was very impressed by their work, not only in organising that conference, but in general administration. He had no hesitation, whatsoever, in recommending the organisation to the ASO.<sup>13</sup>

The Science Centre Foundation had come into being in a curious way. Its founder and Executive Director was a Mrs Ruth Inall, who the author had met when she lived in Canberra many years previously. She had been, at that stage, very involved in health related matters, particularly as Deputy Chairman of the Canberra Hospital Board.

Mrs Inall had become the General Manager of an organisation called 'Science House Pty Ltd' in the mid-1970s after a number of organisations had been required to move their premises, during the NSW Government's resumption of much of The Rocks area of Sydney. She had carriage of the negotiations when these organisations collectively leased a city building to continue their operations. Some ten years later, Science House morphed into the Science Centre Foundation, with Ruth's title changing to Executive Director.<sup>14</sup>

In the early 1990s, the name changed again to the ‘Professional Centre of Australia’ (PCA), conforming to the nomenclature of other professional centres under the aegis of the Commonwealth Foundation. The Commonwealth Foundation’s website states that its aim is “to promote increased participation in decision making at local, national, regional and international levels by citizens and their organisations”. Mrs Inall had wide ranging experience in both government and non-government organisations (NGOs). She also possessed a vision that a Foundation, such as she had built, could become an umbrella under which essential non-government organisations could be administered. Her vision for the Science Centre Foundation extended well beyond running a typing pool.

She reports: “On the invitation of the Director of the Commonwealth Foundation in 1994, the professional centres in the Commonwealth resolved to form a Commonwealth Association of Professional Centres. This was formally created in Canberra in 1996 with a grant from the Australian Government. Australia was elected to be the co-ordinating centre, while I was elected Secretary-General”.<sup>14</sup>

That there should be an association of Professional Centres, and that Ruth Inall should be elected the Secretary-General, allows one to see how broad her vision was and how highly she was regarded. She had gathered around her a dedicated and highly professional staff, with whom the ASO office bearers settled down to work.

In fact, Richard Abbott subsequently was asked to join the Board of Governors of the PCA. The Governors consisted of members of the professional organisations who were the clients. Most of these organisations had management issues similar to the ASO. The allied, but differing, requirements of these fellow organisations have greatly assisted the functioning of the Secretariat. Ruth Inall’s experience has been very useful in relation to several of the issues confronting the Society, in particular constitutional and taxation matters. Particularly was this so in the general re-write of the Constitution that occurred in 1992–93, when several amendments were made to ensure some tax exemption for the Society.

In 1997, commercial pressures required the reorganising of the PCA. PCA Pty Ltd, with some more capital, took over its assets, liabilities, staff and obligations and continued operating satisfactorily. Not long afterwards, the NSW State Branch of the ASO became a client in its own right, as did ANZAOMS.

Commencing in 1994, PCA instituted an annual award for contributions by its members. Retiring Secretary Ian Watson received the first of these. Two years later, the entire 1993–96 Executive received a similar award. These awards were presented by



Ian Watson receiving his award with Dick Hay and Dick Abbott, PCA Governors and Gerry Dickinson, ASO President

eminent persons, including Sir William Deane when he was Governor-General, and the occasions were quite gala affairs. The Governor-General became Patron of the organisation and he indicated at the 1996 AGM, that he would be delighted to host a reception at Government House prior to the PCA's Annual Dinner. Major-General Michael Jeffrey was also Patron when he was Governor-General.

The move was, of course not without its problems. ASO Secretary, Ian Watson, in his first report after the establishment of the Secretariat, said "The first six months are remembered as a haze". He went on to say: "However, we have been privileged to have had Mrs Elizabeth Swaby, our Executive Officer, to oversee our efforts. Her dedication, understanding and tolerance of our demands, has been beyond reproach".<sup>15</sup>



Liz Swaby

For the next 17 years until she retired in mid-2008 Liz Swaby remained the rock on which the Society continued to function. The ASO is eternally in her debt.

The Treasurer, Michael Nugent, was not quite so supportive of the change, and in his financial report at the same time, said:

At the August 1993 meeting, Council decided that the Federal subscriptions be increased for Full and Provisional Members to \$180 per year. This is an increase in the annual subscription of \$80 per member and is the first increase for four years. It will provide extra income of approximately \$27,000. This is to cover the costs of the Federal Secretariat. As Treasurer, I have had reservations about the cost of the central Secretariat however, Council decided that the benefits accruing from having a central organisation tended to outweigh the costs involved. Council also resolved to negotiate with the Science Centre to have a fixed cost per annum for providing the Secretariat.

The succeeding Treasurer, John Armitage, was more sanguine, and noted in his 1994 report that Secretariat expenses had experienced a "significant reduction" and suggested a corresponding reduction in the annual subscriptions to \$150.

Liz Swaby remembers that the main problem she had in assuming management had to do with the information the Society had been keeping about its members. Ian Watson's report makes a similar mention, even though David Hellstrom, who had been in charge of the Directory in the years leading up to the move, was relieved to find that the Foundation's computer could read the discs on which his records were stored. Moving all the administrative functions of the Society performed by various people and committees proved to be quite complicated. Thought was given to having someone spend a couple of days at the offices of the AAO to study their operations.<sup>16</sup>

Costs have risen over the years, but for the next four years, until 1999, there was no further increase in annual subscriptions. And there has been a remarkable continuity of staffing.

One of the difficulties was created by the precarious financial position of the PCA itself. In 1996 Ruth Inall had contacted Richard Hay, hoping that the ASO could purchase for them a laptop computer. The situation was such that, each time the ASO held a meeting, PCA was forced to hire a computer in order to carry out their work. At that stage, they could not afford the cost of \$3000. The change to a company structure improved this, to an extent.

After a brief period, Abbott nominated Richard Hay, who was later to assume many senior roles within the ASO, to take his place on the Board of Governors. Hay was later to become its Vice-President, and only resigned this position in 2005, at the same time as Mrs Inall sold the PCA, and the offices moved to new premises north of Sydney Harbour at Crows Nest.

The new organisation is known as Conference Action, which had been founded in 1984, and the Secretarial arm is now referred to as the Australian Professional Centre. The premises are more cramped than before, and it remains to be seen whether the Secretariat will continue to thrive, now that it is operating under a strictly business model. Already, some of the Society's records have had to be moved elsewhere for storage. Whether this is an administrative or archival issue is uncertain at this point. The Director of the new organisation, Francis Child, indicated in 2007 that he was investigating Association Membership Software and planned to demonstrate it at a General Meeting. This may have suggested the ASO was to be a 'guinea pig'.

There is no doubt that the move to a permanent Secretariat was necessary, if not somewhat delayed. The decision taken and the choice of manager have so far proved to be fortuitous. The personnel involved have performed above reasonable expectations. The Society today could not function otherwise. However the nature of the Secretariat may come under review in the near future.

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## Chapter 13

# The Begg Society

Dr P. Raymond Begg published his seminal articles in 1954<sup>1</sup> and 1956<sup>2</sup>. These immediately created interest worldwide. Within a short time, numbers of orthodontists began to visit his rooms, the better to understand these fairly radical concepts. He was visited by three orthodontists from the US in October 1956. Harold Kesling visited in 1957 and it is recorded that he attended a meeting of the ASO (SA Branch) at Begg's home.<sup>3</sup> Dr Bairnaid Swain, who was invited to lecture at the 6<sup>th</sup> Congress had taken a course in the Begg technique in 1959 and said he was only then (1974) discovering some of the advantages of the technique. Orthodontists from New Zealand showed an early interest in coming to Adelaide. Local orthodontists also paid their calls. W.J. Mackie made several visits, including a two week visit in 1961. It has already been mentioned that Prof. Enoki visited Begg after the 1<sup>st</sup> ASO Congress at the same time.

Begg spoke at the AAO's 56<sup>th</sup> Annual Meeting in Washington in 1960. One correspondent wrote to R.Y. Norton suggesting "I doubt if any orthodontist has ever spoken to such a large audience of his colleagues at any one time, over 1300 members were present to hear his lecture".<sup>4</sup> Norton had received several letters in praise of Begg. "Material and method of presentation were top class".<sup>2</sup>

Norton wrote to ASO Vice-President, Kevin Henderson: "Why don't we ask Begg to put on a typondont course of his technique?"<sup>5</sup> Consideration was given to asking him to present a course for one or two weeks.<sup>6</sup> John McGibbon began writing early in 1962. Begg responded positively, but mentioned overseas commitments in 1962 and agreed to hold the course early in 1963.<sup>7</sup> He agreed to the formation of a committee, with L. M. Smart as convenor.<sup>8</sup> A course was planned for 10 students.

There were many more applicants than this. It transpired that Drs R. Rocke and Raleigh Williams flew out at their own expense to assist in the course, so there was no need to restrict the attendance. The two-week course took place from



Attendees at an early Begg course

20–31 May 1963. It was conducted under the combined auspices of the ASO and the Postgraduate Committee in Dentistry of the University of Adelaide. It was reported that one-quarter of Australia's orthodontists attended the course.<sup>9</sup> Four orthodontists from New Zealand also attended, as well as one from India and one from The Philippines.

Profits from this course went to the ASO's coffers, but there was a reluctance to pass them over to the Foundation.<sup>10</sup> Begg's fractured relationship with the Foundation is discussed in that chapter. The ASO had to decide who could attend these courses, and it was agreed that all those accepted should be members of a recognised orthodontic Society.<sup>11</sup> There was concern that several of the applicants were neither ASO members nor in exclusive practice.<sup>12</sup>

A second course was held two years later, this time with 33 participants (11 from overseas) and a three-day refresher course was held at the same time. Begg was very much of the view that this follow up was essential to an effective understanding of his technique. Smart was again the convenor, and it was conducted again under the same joint auspices. Later courses were independent of the ASO. Begg's famous text also came out in 1965.<sup>13</sup>

A third course was planned for early 1968, but the timing was in conflict with a course in Edgewise technique, also sponsored by the ASO. This had been first suggested at the Executive Meeting, just before the 3<sup>rd</sup> Congress<sup>14</sup> and was another idea from Norton. K.T. Adamson was asked to conduct the course, which was scheduled for February 1968. Norton called the proposed timing of the third Begg course a "bloody disgrace",<sup>15</sup> and it was moved to a time, less confrontational. The third pair of courses (basic and refresher or advanced) took place just prior to the Adelaide Congress in March 1969, and again in Sydney in August 1973.<sup>16</sup> A second Edgewise course was conducted by Rex Wallman in 1972. There was a hint of evangelism in the air.

That a permanent group would form was inevitable. As early as 1963, Norton, writing to Henderson, mentioned that "I have some thoughts about this, but will hold off until after our first Begg Study group meeting on 5 July".<sup>17</sup> Nothing seems to have come of this at that time.

O.P. Black, one of the first graduates of the Sydney MDS course, and who had attended the 1963 course, discussed with colleagues that there was a need for some sort of study group. So a meeting was held at W.J. Mackie's house. Fifteen attended. According to Richard Hay,<sup>18</sup> this group came into being on 16 April 1966. They decided:

- that the name of the group be "The Society for the Study of the Begg Lightwire Technique",
- that membership be restricted to ASO members who had completed a Begg Lightwire course,
- that the prime function of the Society was to be the study of the technique.
- the knowledge gained to be freely disseminated for the benefit of orthodontics in general.
- that a committee be formed.

The committee rounded out the ideas from that first meeting, including the timing of meetings, restriction of members to those who were prepared to present three cases and that there should be specific requirements for case presentations. They decided that it was to be called the Begg or the Australian (apparently Begg was keen for the national character to be emphasised) Light Wire Study Club (BLWSC).

The inaugural meeting was held on 21 July that year. At that meeting, which extended into the small hours of the following morning, and was conducted in the finest traditions of Australian Orthodontics, it was decided that the name of the group be (subject to ASO ratification) 'The Australia Society of Orthodontists Study Group for the Begg Lightwire Technique.'<sup>13</sup> At this stage it was purely a NSW initiative; no other orthodontists attended. A two-day meeting was planned just prior to the next ASO Congress. R.H. Abbott forwarded to the ASO Executive the 'Rules for the Study Group'.<sup>19</sup> These rules were rewritten in 1980.

Quickly the group developed an infrastructure and began a regular sequence of meetings, initially every six months, but soon yearly. The Executive, chosen from the one State, changed every two years and moved around the capitals in a way similar to, but a little less precisely than, the ASO. The appointment of state liaison officers began in the early 1970s. Honorary Life Memberships (the first two to Begg and Sims) were awarded from 1968. A Medallion for the best case report at a Begg Meeting was first awarded in 1985, to John Jenner. John Reading received one the following year.

The meetings were well attended with numbers rising, on one occasion, almost to one hundred. A high degree of participation was expected from members, with the presentation of one nominated case per meeting being a requirement. Discussion apparently could be quite vigorous. Everybody was expected to say a few words each time about what he had learned in the last year. Michael Loader<sup>20</sup> remembers the group more as a club (in comparison to the ASO) and that the meetings were more fun. The Group met in Adelaide just prior to the 4<sup>th</sup> ASO Congress but the first stand-alone meeting away from of Sydney occurred on the Gold Coast in Queensland in 1971, and the next in Melbourne in 1975.



P. R. 'Tick' Begg beside his portrait

The Group also went off-shore. The first such meeting was in New Zealand in 1981, followed by a world Begg meeting in Boston in 1982. A memorable meeting took place in Hong Kong in 1988. This was followed by a visit to China by 25 orthodontists and partners, where a lecture programme and clinical demonstrations were held at the Beijing Medical University.

A newssheet was begun by J.K. Hawkins, which morphed into a more expansive newsletter edited for ten years by Barry Mollenhauer. Both were to serve as Presidents of the Group. International liaison with other Begg groups was integral to the content of these newsletters.

The Group wanted to co-sponsor a special 'Begg Lecturer' at each Congress starting with the 8<sup>th</sup>.<sup>21</sup> This move was pre-empted by the establishment of the P. Raymond Begg Research Award, which is discussed elsewhere. A named lecture in honour of Dr Begg is now part of the programme at each Congress, and was first given in Adelaide in 1991.

There was a name change in about 1990 to the 'Begg Society' to honour the man and not just his technique.

Membership of the Begg Society was always open to any orthodontist who was a member of the ASO or other recognised Orthodontic Society, on condition that they were prepared to present their cases. There was a move for this group to become affiliated with the ASO, but this did not come to pass.

After Dr. Begg died in 1983, the group decided to display the contents of his surgery at a site to be provided by the South Australian Dental Service. John Jenner had carriage of the records and their presentation. This display opened in May 1986.<sup>13</sup>

At the 1972 Congress in Melbourne, Darryle Bowden gathered together some of the Edgewise trained orthodontists and suggested they might also form a study club. This became known as the Australasian Edgewise Study Group (AESG). It had a different philosophy, in that numbers were always restricted to about 15 and membership was by invitation. The restrictions allowed everyone at its

biennial meeting to present a lecture and plenty of time to look at the cases, which the members were required to present. This Group also was much enjoyed by its members but, being of such a boutique character rarely made its presence felt within the wider ASO. There was a degree of criticism of this lack of any real contribution to the Society as a whole. There were also other Edgewise groups in existence, notably in Melbourne.

Despite changes in the generally accepted mechanotherapy, the Begg Society is still active. Its current President was until recently also a member of the AESG.

The existence of such a strong splinter group as the Begg Society, could have been something of a threat to the ASO. However, the leaders in this group also tended to occupy similar positions within the ASO. They have always been assiduous in maintaining a proper, indeed supportive, relationship, so tension was not a problem. Most Begg Society members will say it made them better clinicians. R.F.H. Rickleman is of the opinion that the high standard of reporting required, served to lift the bar for the entire ASO. It has probably served to strengthen the overall fabric of the Society. Alan Pollard, who played such a seminal role in the development of the Australian Orthodontic Board, said that the Begg Society was used as a model in the planning for the AOB.

Although Ray Begg was not so active in the ASO other than in his State Branch, his name has become synonymous with Australian Orthodontics. He was also very much a character. It would only take an instant, when some of the Begg Society members collected together, before the stories would begin to roll out. The author is greatly in his debt, for it was Begg who suggested he should apply to the University of Washington for his own training.

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# Part 3

## Committees

*“A Committee is a group of the unworthy,  
chosen from the unfit, to do the unnecessary.”*

*Anon*

*“I’ve searched all the parks in all the cities  
and found no statues to committees.”*

*G.K. Chesterton*



## Chapter 14

# The Economics and Practice Administration Committee

As the functions of the Society became inevitably more diverse and complicated, more and more were devolved to committees. The activities of the Foundation and the Journal are discussed in their own chapters. The seminal work done from 1969–1972 by the Graduate Education Committee in bringing about a Policy of Specialisation and also insuring appropriate educational standards for Full membership has been discussed in Chapter 2. That committee was not originally planned to be permanent.

The first two committees, formed in the 1970s, were the Orthodontic Services Committee and the Economics Committee (in 1977 this was expanded to become the Economics and Practice Administration Committee). The expectation was that these would become standing committees. Initially the Orthodontics Services Committee (OSC) was created to allow the ASO to develop policies on the delivery of orthodontic services in all its aspects. With time, this Committee has comprehensively broadened its activities.

The precise delineation of committee duties was not a priority in the 1970s or even the early 1980s. John McGibbon had wanted to develop Terms of Reference for the various committees in existence when he took office in 1977. After his death the Council decided to pursue this initiative and contacted all convenors<sup>1</sup> to ascertain their views regarding the feasibility of establishing defined Terms of Reference for their Committees. In response Gordon Kirkness<sup>2</sup> attempted to

define a working relationship between the Council and in his case, the Congress Organising Committee. The first attempt to systematise this burgeoning range of duties, devolved to the committees, was put in place by Darryle Bowden who wanted each Councillor to maintain a watching brief over nominated issues, which were coming before Council and later for each committee to present their concept of their task to Council in the shape of Terms of Reference. This then was a Council-centred approach. As will be discussed later, many of the committees took it upon themselves to assume certain projects under the broad divisions their committee seemed to encompass. This, what might be called a committee-centred approach, produced, in a way, an imperfect break-up of the duties. It did have the advantage that, for a committee, or more usually its convenor, to initiate an activity, there had to be some zest for that task. Particularly the OSC and the Orthodontic Education Committee took on roles that other committees may reasonably have assumed could be theirs.

This was finally amended in the re-write to the Constitution, which took place in 1994–95 and an extensive section in the By-Laws was added, defining the composition and duties of all the standing committees. By then their number had risen to eleven. This addition was proposed by the then President, G.R. Dickinson.<sup>3</sup>

The Economics Committee basically was developed to carry out essential services of a practical nature for individual orthodontists in their practices, but also to inform the Society and its members of issues generally relating to the administration of practices.

In order to substantiate his proposals to the Repatriation Department for an increase in fee, R.Y. Norton, of his own volition, had carried out in 1959 an informal sampling of the cost increases and fee structures in 16 selected practices<sup>4</sup>. The South Australian Executive had conducted the first full fee survey in the late 1960s. This survey was repeated by R.H. Abbott in 1972 and 1975 and has been conducted by the Economics and Practice Administration (E&PA) Committee on a regular basis ever since.

The results of Abbott's first fee survey in November of 1972 showed that 50 per cent of the orthodontists had been in practice over ten years, and that during that time, as in Norton's five year survey, there had been a substantial increase in overheads. It also contained some recommendations about fees. This survey was to be followed by a more detailed survey of ten practices "to give a cross section of the orthodontic climate in Australia" for the Australian Dental Plan.<sup>5</sup> Events made this more detailed survey redundant.<sup>6</sup>

The Economics Committee then conducted a survey on the use of auxiliaries in private practice and forwarded the results to the OSC.<sup>7</sup> The possibility of conducting a course for orthodontic auxiliaries was raised.<sup>8</sup> On occasions, this Committee's surveys have included workforce issues. On occasion, they have been highly, even perhaps too, detailed.

The real impetus for the establishment of the Economics Committee, as it was originally termed, however, had more to do with the advent of third party providers than with anything else. As explained earlier, these providers had proliferated from

the earliest days, when they were confined to the Repatriation Department and a small number of other entities, to a large range of organisations, which provided a more comprehensive list of health service rebates than that hitherto provided by the Government Medical Benefits system.

The ASO was not always persuaded that the ADA had its interests sufficiently to the forefront when it was negotiating with government bodies or with health funds. So it was deemed necessary to ensure that the ASO was in a position to make its attitudes and requirements well known. The fee surveys were proving very useful. Council also accepted Brian Lee's offer to conduct a further survey on the location of orthodontic services.

The first Chairman of this Committee was ASO Treasurer R.G. Henry, assisted by G.J. Hinricksen and Abbott. The latter was in a very sound position to carry out this role, because he had also been appointed as the ASO representative to the various committees of the Australian Dental Association, which dealt with these matters.

At the 1974 General Meeting it was decided that a sub-committee be formed to review orthodontic fees in the light of inflationary trends. Abbott was asked to be the Chairman.<sup>9</sup> The new Executive subsequently decided to make the Economics Committee permanent.<sup>10</sup> Henry's position was taken by Abbott.

The NSW Branch of the ASO had been the first to produce a scale of fees for orthodontic practices in 1971. The Branch formed a sub-committee in 1970 to look at the question. They conducted a survey of Full and Provisional Branch Members. Twenty nine returns were received. They were then directed to consult with the appropriate experts in the NSW Branch of the ADA, who offered support, but nothing specific for specialist fees. They then worked out mean and median fees and added five per cent, which had been the figure most recently used by the ADA. They also considered the mean fees from the 1967 survey and the Repatriation Department fees before producing their own recommendations.

The Queensland Branch also set up an economics committee and, having achieved a 100 per cent response to their survey, produced a recommended fee schedule in February 1973. Eventually all the State Branches of the ASO followed suit.

Surveying orthodontic fees was always considered essential, not only in negotiations with the government and other bodies, but also in order to allow individual practices to be aware of the fee levels in their area. It always proved to be the case that although fees varied from practitioner to practitioner, they tended to be lower in South Australia and Western Australia and always highest in Victoria. The ASO never saw the advantage in producing an overall suggested fee schedule, nor indeed had the ADA.

The setting of fees by associations raises some resistance at the political level and in fact has become illegal. In 1975 the ASO NSW Branch President sought a legal opinion. The advice received was that "it would not be in the best interests of the Branch to proceed with the issuing of a fee schedule at the moment". The NSW Branch decided not to proceed with issuing a fee schedule to its members.

Some months later at a Branch Meeting a member again requested that a fee schedule be produced.<sup>11</sup> The President advised that, as legal opinion was against having fee schedules, he should use the cost of living index to adjust his fees, and the meeting confirmed its decision not to prepare a fee schedule.

It was thought possible for the NSW Branch of the ADA to do so, because the schedule was available for people other than members of the ADA and it was a “suggested minimum fee” schedule.<sup>12</sup> The Australian Dental Association had arrived at a system whereby each State Branch produced a suggested minimum fee scale, which, while not binding on its members, became a de facto fee scale in most places. The NSW ADA Branch produced its first suggested minimum fee schedule in 1962. This was periodically increased by the mean of the increases in the Consumer Price Index and ‘average weekly earnings’.<sup>12</sup>

Abbott reported in 1977 that the practice surveys had been helpful in providing the Society with precise information in their negotiations with insurers. Some resistance to the invasion of privacy, these surveys, demanded had been noted, but Abbott pleaded for support explaining that, lately third party funding had proliferated to such an extent that almost all health funds had programmes which included the provision for payment of dental and other benefits.

At the 1977 General Meeting, Abbott was able to report that the three surveys conducted to date had brought about a close unification of fees, and in addition had provided reliable data for dealings with insurance carriers. It had also provided useful information towards formulating a policy on the use of auxiliary personnel in orthodontic practice. At the same meeting, Abbott moved that an annual yearly fee survey be conducted “in the light of the entry of the medical insurance funds”. Some members wanted income data to be added to the surveys. This was defeated.

As part of the functions of this Committee, Brian Lee, later to become an editor of the AOJ, published his survey of practice location.<sup>13</sup> Data from this and other surveys have enabled new orthodontists to make decisions about where they should locate either their principal or their branch practices.

Initially, no orthodontists had their principal practice in country areas. The first orthodontist in private practice to move outside one of the State capitals was Leslie Mobbs, who practised in Newcastle. He was followed by the author, who moved his principal practice to Canberra, upon return from the US in 1963. At that time, and increasingly since then, numbers of orthodontists have opened up branch practices to service the country areas. This was later to produce issues for the ASO in their need to define where an orthodontist had their principal place of practice. Similarly, in the cities, practices began to open branches so that they could better service individual areas and reduce travel time for their patients. An Orthodontic Manpower survey was requested by the Executive.<sup>14</sup> This was published in the ASO Newsletter in September 1977. Referring to a recent article,<sup>15</sup> and using the methodology described, it produced the interesting finding that the number of 12 year-olds per Australian orthodontist was liable to drop considerably (28 per cent) over the next six years. Census figures could project the population growth quite accurately. Abbott calculated the net increase in orthodontists, required to maintain the present ratio to be 11 per year. These surveys have been carried

out on a number of occasions. Theoretically, data such as this could inform the postgraduate departments, but the reality is that their intakes are more reflective of the resources available to the Universities than demography. Abbott also contributed an article on the effect of inflation and taxation on practice profitability at about the same time.<sup>16</sup> His role now encompassed a broad area.

In 1977, consideration was given to setting up a Practice Administration Committee. The decision taken was to ask Abbott to be convenor of a combined committee. This Committee functioned until it was merged with the OSC, 25 years later.

The Committee began to organise the printing of an Estate Details Brochure, following a lead from the Practice Administration Committee of the Victorian Branch.<sup>17</sup> This had been modeled on that of the AAO to help ensure, in the event of the death of a practitioner, that the affairs were in good order and the trustees of the estate were able to access the information necessary for their task. Barry Mollenhauer joined the Committee to take care of this.

Over the years the Victorian Branch seemed to have been very well organised. Branch members were frequent movers of motions at Federal Meetings on a wide variety of matters related to the Board, the College, Associate membership, etc. Richard Hay<sup>18</sup> said the Branch was frequently 'the stirrer'. They almost had a set of committees in tandem with the Federal body in the late 1970s and early 1980s.

The main services of the E&PA Committee to the members remained very consistent over its life. They included publishing the results of surveys of practice fees, costs, locations and related information, including manpower considerations. Over time, these surveys became quite detailed and produced very important information on a range of administrative matters. The Committee has also had a major role in negotiations regarding health funds, and in providing help with the transfer of patients' records from one orthodontist to another.

The Committee continued its work on third party issues particularly providing opinions on item numbering. There were fee surveys in 1977, 1979 and 1980 and one was sent out with the first Bowden newsletter. Abbott's last, in April 1982,<sup>19</sup> produced 20 per cent more replies than ever before. Rickleman was of the view that the success of Abbott's last survey was because "it concerned itself only with collating information that is necessary and useful...."<sup>20</sup>

After five years as Liaison Officer to the ADA, eight years as head of the E&PA Committee and ten years of surveying the ASO membership, Abbott retired as Chair of the E&PA Committee at the 1982 General Meeting. A remarkable and important period of service.

R.F.S. Rickleman, in reviewing an early draft of this work said, "I was thrilled that you are giving Dick Abbott the recognition he deserves. I know he is somewhat of a loose cannon ... however, there is no better thinker in the ASO".<sup>21</sup>

After casting around, Bowden asked Rickleman to take over. He immediately began planning questions for the next survey he proposed in two years time.<sup>16</sup> To assist in the work he planned that each Branch would have its own Economics and Practice Management Committee, which he saw also as a good way to prevent

unauthorised approaches from the Branches to health funds.<sup>22</sup> He saw further need for increasing the range and availability of patient information material, of a type which soon was to be a focus for a Public Relations Committee.

This was a fortuitous appointment, because in the next few years, Rickleman was able to have put in place the all-embracing single Item Number, the ASO had been working so hard to obtain. He was also immediately asked to do a survey on practice costs similar to one just published in the *Journal of Clinical Orthodontics*.<sup>23</sup>



Dick Abbott

The E&PA Committee organised a questionnaire in late 1982 on aspects of the developing practitioner/health fund/patient relationships. All ASO members received the same form, but the information was collected on a State Branch basis. Members could view the responses from their State, particularly important as so many of the funds did not operate nation-wide. Naturally responses varied widely but there was support for the use of a standard form for all health funds, and for traditional account systems. There was a general difficulty reported with coding. This information proved invaluable in helping the Society and its members become more comfortable with the impositions required by the 'new order'.

A patient transfer form was developed by the Victorian Branch, Practice Administration Committee. At the 1974 General Meeting it was decided that this should be made available to all members. New Zealand orthodontists were also supplied. This had been printed in pad form and was well received.<sup>24</sup> This was amended in 1983 in order to ensure that adequate information could be readily and routinely transferred with a patient as they moved from one area to the next, and to facilitate that, sometimes difficult, situation.

Recognising the greater mobility of the population, the E&PA Committee was preparing a set of guidelines for the transfer of patients undergoing orthodontic treatment.<sup>25</sup> They became very concerned with the differential, in a large number of cases transferring from one orthodontist to another, between the amount of work remaining to be done and the proportion of the fee as yet uncharged. The scheduling of payments, both recommended by the Society and also, as used by the health funds, was very likely to cause this to happen. It followed, therefore that the person taking over the treatment of cases would on most occasions be required, either to carry out a significant percentage of the treatment gratis, or alternatively, require the patient's family to pay extra fees—clearly an unsatisfactory outcome either way. In some areas orthodontists could feel that things would balance out over time and what they might lose on the swings could always be regained on the roundabouts. However this was not always possible in areas to which there

was a net migration, such as occurred from south to north during most of the last decades of the twentieth century.

A system of apportioning the total fee between the two orthodontic practices concerned, which reflected the progress made rather than any established payment schedule, was included as part of the scheme. The Committee published in the ASO Newsletter a suggested breakdown of fees along these lines, designed to help avoid the frequent complications when patients transfer. This could, of course, never be more than a recommendation, but the avenue was opened for an arbitration system and P.C. Buchholz volunteered to act as an arbiter to resolve any potential difficulties.

E.J. Peel became Chair in July 1985.<sup>26</sup> He was replaced in 1989 by Buchholz.

The E&PA Committee continued to stress the importance of using this principle in the transfer of patients in the interests of equity, and to discourage the temptation of orthodontists to refuse transfer patients on the basis that it was uneconomic. Efforts in this regard were ongoing and continued throughout the life of the Committee. Buchholz had to say however, after being asked on a number of occasions, that apportioning fees to reflect real progress should not be used as a factor in assessing the ultimate value for the sale of a practice.

Issues subsequent to the death of a member were reviewed, after the matter was brought up by Peter Horkin from Victoria in 1988. He moved that the Federal Council instruct the E&PA Committee to formulate a policy for the correct protocol for the management of a practice in the event of the death of an ASO member. Such a protocol was to be administered by the relevant State president. Paul Buchholz had been involved on two occasions when orthodontists in his area had passed away, and so felt strongly on this matter.

The Committee sought advice from the US and elsewhere, and developed a protocol, which they recommended to members. This began with the immediate appointment of an independent administrator to take over the running of the practice. In line with the recommendation of the AAO, to solve any problem created by the receipt of fees in advance of the progress of the treatments, the E&PA Committee advocated that each orthodontist should purchase a voluntary term insurance policy. Most were unwilling to take this step. Buchholz subsequently determined that the best, indeed the only, way to cope with any discrepancy, was for the ASO to own an insurance policy, the cost of which was to be added to the annual subscription, to ensure upon death that a member's own practice would have a capital fund to allow for this discrepancy.<sup>27</sup> The amount that he chose was \$50,000 for which he had secured, for every practice and every practitioner under the age of 65, a quotation from an insurance company of an annual fee of between \$150 and \$250. Council accepted this in principle only. It was proposed to discuss the protocol with each State Branch before a decision was sought.

Buchholz succeeded in having this agreed to, again in principle only, by the Society at the Perth General Meeting in 1991. Implementing this required an addition to the Constitution. The principle had been supported at subsequent meetings of the Society, but could not be advanced for lack of a quorum, which had been set at the

unrealistically high level of one hundred. The implementation of this resolution was also delayed, because actuarial advice was secured to the effect that a separate Trust needed to be set up, which would own the policy on behalf of the members. This Trust would have the responsibility of holding the funds, of negotiating with the insurance companies on policy renewal and also have the task of administering the provision of funds on the death of a member. The addition of By-Laws was still possible without the onerous quorum demands. So for some time, a By-Law for the Trust remained as part of the Constitution without the system operating.

Not all of the Society was in favour of this move and it had provoked much intense debate. A rescission motion was proposed by the Queensland Branch in 1993. Partnerships of orthodontists, which made up a significant proportion of the membership, saw no great advantage in the scheme, but the real problem was that the amount of money involved was demonstrably insufficient to cope with the need in many cases, and the cost of the policy was quite high. The motion was finally rescinded in 1996, to the bitter disappointment of Buchholz, who had worked so hard for six years to have it accepted. He reminded members that the underlying problem had not disappeared with the resolution and to remain aware of potential difficulties. The issue remained, as it were, 'on the books' and Paul Hanrahan was given carriage of the issue. Alternate methods were then sought, but no progress was made.

In 1991, the Committee announced plans to revamp the current ADA Estate Details brochure, to bring it up to date with more emphasis on the practice of Orthodontics.<sup>28</sup> Barry Mollenhauer, who was one of the original drafters of that brochure, was approached for this function. To what extent trustees of orthodontists' estates were ever assisted by this service is unknown.

The Committee was also negotiating with the AAO for the use of their patient information brochures. The plan was that they could be overprinted with an ASO logo. The Committee also began collecting various items from numerous practices throughout Australia to foster an interchange of ideas in practice administration.

Over the years, the response to the fee surveys had become much reduced. Initially, the response was over 70 per cent but by the 1990s it had dropped to become less than 25 per cent. Buchholz threatened to discontinue the practice. This produced a change of heart by members and the next survey produced a response of over 40 per cent.<sup>29</sup> He recommended that further fee surveys be conducted on a state basis, so that information could be collated locally and be held by the Secretariat. Later, because of poor response, he again moved a motion that the fee surveys be discontinued altogether. The meeting decided that there was still value in this procedure. Rickleman reminded the meeting of a motion carried 15 years before, that the Society should have a fee survey after each Congress. A simpler fee survey was planned for the future. A manpower survey was included with the fee survey conducted in 1997. This gained a more satisfactory response, from 65 per cent of the members. Members were constantly reminded of the confidential nature of the material.

In the mid-1990s it was found that the transfer form was no longer in general use, and a new one was prepared, more adaptable to the computer age so that a form

could be downloaded as required. Maintaining contemporary transfer forms and issues involved therewith remained an ongoing role of the E&PA Committee.

The Committee was also constantly involved in negotiations about Benefit payments. This included requesting the ADA Schedule Committee to add more Item numbers as new approaches were included in the orthodontist's armamentarium. John Armitage became concerned by the overlap of functions of the two Committees and felt then areas should be clarified.<sup>30</sup> This function was gradually taken over by the OSC and is discussed in that chapter under its own heading (Third Party Providers).

The Committee<sup>31</sup> was considering producing another training manual for chairside assistants. One had been produced in the 1980s. Their view was: "With accreditation of staff in all spheres of the workplace, it behoves us to consider our own staff and furnish them with a set of rules/training manuals that will help advance them into the next century." This idea had been floated in one of the recent fee surveys. This was clearly something in the province of this Committee, but Buchholz was concerned that this was a task beyond his Committee and sought help from other members. Council offered its support in principle, but by then the compiler of the 1980 model held the office of ASO President and felt adequately extended in that role.

In 1998, one of the orthodontic supply companies conducted a survey to ascertain the grass-root membership's thoughts on education and staff involvement in the conduct of orthodontic practices. The results turned up some very interesting findings, one of which was that there were far more returns for this survey than for the previous fee surveys. This might have suggested that the previous surveys had become too complicated and difficult to complete. In general, both the staff and the orthodontists considered there was a great need for increased education in clinical procedures, sterilisation, photography, inventory control, office duties and computer technology. Commercial courses are now run for staff and the auxiliaries programme at the Congresses is of great value.

Buchholz resigned from the Chairmanship in 2000. His position was taken by Tony Shields who continued along the same lines. The E&PA Committee was merged into the OSC shortly thereafter.

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24. Council report to 1977 General Meeting
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28. E&PA Committee report for 1991 General Meeting
29. Minutes General Meeting 1996
30. Minutes Council Meeting 6/1994
31. E&PA Committee Report to Council 1995

## Chapter 15

# The Orthodontic Services Committee

The Executive felt it needed to maintain a watch over the rapidly developing issues effecting both public health policy and the future roles of dental auxiliaries. They wished to ensure that ASO interests were preserved as these issues were discussed within the ADA and with government. They had decided, in May 1974, to formulate a 'Policy on Orthodontics in School Dental Services', and the following month a number of suggestions for that Policy were listed.<sup>1</sup> R.H. Wallman refined these suggestions into a draft document. From the 1974 General Meeting, one of the recommendations of the retiring Council was that this draft should be circulated to the Branches to receive their input before being accepted as policy.

Shortly thereafter it was resolved <sup>2</sup> "that an Orthodontic Services Committee be set up to take in the results of a survey to be conducted by R.H. Abbott and E.J. Peel on the use of auxiliaries...." John Reading who, as immediate Past-President, was fully conversant with the issues, was invited to be the Chair and to select the membership, with the suggestion that T.J. Freer be included.

The scope of the Committee was to encompass:

1. The role of the orthodontist in the School Dental Services.
2. The role of chair side attendants.
3. The role of dental hygienists.
4. The role of dental therapists.

The results from Abbott and Peel's recent survey, and the recommendations of the State Branches on the School Dental Services policy, were to be submitted to this Committee.

The first meeting of the Orthodontic Services Committee was held in late 1974. A preliminary policy based on the Branches' comments and Wallman's draft was sent to the ADA for discussion.<sup>3</sup> The Executive felt at that stage that this Committee should not only cover the production of a policy on the delivery of orthodontic services within School Dental Services but also a policy on the provision of Orthodontic Services throughout Australia, through Private Practice, Hospitals, Universities and the School Dental Service.<sup>4</sup>

The School Dental Services Policy was developed for discussions with the ADA, and more importantly, as far as possible, directly with state authorities, health, then and now, being a state issue. The official ASO Policy was adopted in October 1975.

The Policy held, as its basis, that comprehensive dental care must include orthodontic diagnosis and treatment. It emphasised that both overseas and Australian experience held that the maximum long-term benefits, most economically provided, resulted from the use of specialists, even though at such an early stage this was not considered to be feasible.

The Policy encouraged liaison between the ASO and responsible authorities, "in a true spirit of professional cooperation". It suggested the detailed evaluation of pilot studies before specific methods were adopted widely throughout the community. The emphasis was that the ultimate aim of any service must be to provide treatment for those children who were most disadvantaged.

The definitive proposals were:

A comprehensive program of dental care for Australian school children should make provision for orthodontic diagnosis, treatment planning and treatment.

The prime orthodontic responsibility of the school dental officers and dental therapists must be to detect deviations from normal occlusion and when necessary refer patients for orthodontic treatment.

Ideally the delivery of orthodontic treatment, in its broadest sense, should be the responsibility of qualified orthodontists within government service or in private practice.

Recognising the shortage of qualified personnel initially, school dental officers should be encouraged to seek postgraduate training in orthodontics to improve their diagnostic abilities to enable them to confidently select the simpler types of malocclusion for treatment and to treat them efficiently.

Ideally all children or at the very least all those in the 8-12 year age group with rapidly changing occlusions should be seen by a school dental officer, not only at the initial examination, but thereafter, once each year during this important period. This initial examination and treatment planning must never be delegated to dental therapists or other auxiliaries.

The above proposals all emphasise the importance of the university dental schools and the need to increase orthodontic training at the graduate, post graduate and continuing education levels. Adequate funds for orthodontic departments should be given a high priority to enable the departments to meet these commitments. The policy on the use of auxiliary personnel in orthodontic practice complimented that of the ADA, in that it supported the registration and utilisation of dental hygienists and also the expanded duty dental nurse and mentioned certain specific orthodontic functions that they could conduct.<sup>5</sup>

The ADA promised to include the ASO Policy within their own policy, although they were concerned about the funding available for any extension into Orthodontics of the services provided by School Dental Services.

Through liaison with the ADA and State and Federal Dental Health Directors, this Policy was accepted by the School Dental Services Advisory Committee of the Department of Health. Though funding of orthodontic treatment within the school service was unlikely in the near future, the OSC was pleased with the acceptance of the principles. The ASO had advised the ADA that it wanted direct representation on that important Committee.<sup>6</sup> Some within the ASO felt this Policy paid insufficient heed to the belief that private practice is the best place to provide the bulk of orthodontic care.<sup>7</sup>

All the OSC's early deliberations occurred in close liaison with the ADA, especially through the Secretary, John Newton, and the President, Renton Newbury, who was an orthodontist and a foundation member of the Victorian Branch. Mostly the two associations saw eye to eye, but not always. There was a disagreement with the ADA, which suggested a review in the light of the recommendation of its Dental Services Advisory Committee. This committee felt that interceptive and preventive Orthodontics would normally fall under general dental practice, and therefore should fall under the same category in the School Dental Services. Dr D. Everingham, Minister for Health, made a statement to the press along the same lines.<sup>6</sup> Realising the gravity to the Society of the issues under discussion, Bowden, Wallman and McGibbon were added to the OSC.<sup>8</sup> The President wrote to the ADA<sup>9</sup> disagreeing with that concept and requesting that no discussions should be undertaken without consultation with, or attendance by, representatives of the ASO.

In order to look at a policy on delivery of orthodontic services generally, the second part of their brief, much of the attention of the OSC then became centred on auxiliaries.

The survey of Abbott and Peel on the utilisation of auxiliaries in orthodontic practice showed that members rejected the use of dental therapists (school dental nurses) in performing any aspect of orthodontic treatment, but supported the concept of a role for expanded duty dental assistants (EDDA).<sup>10</sup> The Victorian Branch had produced a series of recommendations designed to allow for the incorporation of this form of auxiliary.<sup>11</sup> The OSC held a meeting with ADA representatives, R. Newbury and D. Heffron<sup>12</sup>, at which the training and role of the EDDA was discussed.

When Reading advised his intention to resign from the OSC, Darryle Bowden was asked if he might take over that role.<sup>13</sup> The Committee was shortly restructured to improve geographic representation, and the following year (1975) Bowden took over the chairmanship.<sup>14</sup> He immediately undertook to produce a policy on the use of auxiliary personnel in orthodontic practice. This task was completed after close consultation with State Branches and other organisations and liaison with the ADA, and was accepted as ASO Policy<sup>15</sup>. It supported the ADA's policy on the utilisation of dental hygienists, at that time not registrable throughout Australia, and also supported the creation of the new type of auxiliary (EDDA) advocated by the ADA. Manpower considerations, caused by the possibility of more general utilisation of all forms of auxiliaries, occupied the attention of the 1977 OSC report to the General Meeting. In 1983 a policy on the use of general practitioners and postgraduate orthodontic students in orthodontic practices was passed by postal vote and later ratified at the 1983 General Meeting. The policy did not accept the use of either and sought to ensure that neither were misrepresented as qualified orthodontists. These matters are discussed in greater detail in the section on auxiliaries, later in this chapter.

In 1980 the OSC produced two draft policies, one on 'Treatment for Cleft Lip and Palate patients' and the other on "Continuing Education in Orthodontics". Bowden had held discussions with Newbury and Heffron,<sup>16</sup> from which the OSC formed its own draft policy on the provision of financial assistance for people born with cleft lip and palate defects. Bowden wanted to ensure that this assistance be given to all patients with First Arch defects.<sup>17</sup> This was of great importance to Bowden, arising in no small part from his long involvement with the Royal Children's Hospital in Melbourne. Extending the Cleft Palate Scheme, to include a broader range of syndromes, affecting the dentition, has been an aim of the ASO ever since.

The Orthodontic Services Committee became centrally involved in virtually all the major issues confronting the Society during the first 10 years of its life. Much of its focus was on third party matters. These are also discussed later on in this chapter.

As the time moved closer to Darryl Bowden's assumption of the Presidency of the ASO, his chairmanship of the OSC was transferred, first to Denis McDonald and later to the author.

The Executive asked the OSC in 1983 to investigate an arrangement, which some trade unions and other like bodies were attempting to make with health professionals including orthodontists, whereby in return for an assured supply of patients, services were offered to their members at substantial discount. In effect this was a variation of Health Benefit funding, which had become so much of the focus of the ASO. The carrot was to fill empty places in the appointment book. Practitioners participating in such schemes were known as 'preferred providers'. Why the E&PA Committee was not tasked with this is uncertain. The Victorian Branch had already seen fit to discuss this at length. Their first concern was that such a scheme, if it came to fruition, had to be open to all orthodontists.<sup>18</sup> Clear resistance to this initiative from all branches of Dentistry (and possibly a lack of gaps in most appointment books) saw the scheme's eventual demise. Something similar

did resurface in 2005, when the WA Branch referred to Council a similar proposal from one of the state based funds.<sup>19</sup>

The author had been perplexed at the operation of the OSC, in that most of its activities had been initiated, not by the ASO Council itself, but by the Chairman at the time, principally Darryle Bowden. His own view was that a Committee, whose original function was to develop policy, should work exclusively under the instruction of the Executive. This was a view enunciated by the ASO Council in 1979, as a result of the proposals from Gordon Kirkness about the organisation of Congress. With the benefit of hindsight, and having had the chance, more fully, to assess the role of innovators, like Bowden and later R.H. Olive, in the life of the ASO, this view can only be considered naïve in the extreme.

So on assuming the role of Chair of the OSC in 1984, the author suggested to the incoming ASO president, Robert Henry, that he would wait until he received instructions before undertaking any activity. Henry agreed. The OSC did indicate that there was work they wanted to do on policies involving the use of auxiliaries in practice, and sought specific direction. The report to the 1988 General Meeting, stated "I am not in a position to report anything, because to date I have received no brief". Four years later and after having received no specific instructions at all, his position on the OSC was assumed by Olive, who had been carrying out the same role for the ADA and who required no direction whatever, from any Executive, to pursue initiatives he thought worthwhile.

In 1988 the Australian Dental Association had discarded its policy on the provision of dental services within the School Dental Service and replaced it with a policy, developed for the ADA by Olive, which encompassed the entire public sector. This had been envisaged in the first year of the OSC's existence. An early draft of this document had been reviewed by the ASO Council and in general terms it was supported. The policy reiterated that orthodontic services based on specialists' services were more likely to provide cost-effective treatment of all malocclusions, especially the more complex. So that the first task of the OSC, under Olive, was to produce a policy for the delivery of orthodontic services in the entire public sector, based on the ADA document he had been instrumental in producing.

In the background of this policy was detail in an article, which Freer and Olive had published,<sup>20</sup> on the incidence of malocclusion within the community. This article is also referred to later in this chapter, in discussing the ASO's earlier response to the notion that general dentists would be required to cope with the expected increase in demand for orthodontic services, subsequent to their inclusion among benefits provided by health funds.

Amongst the points made in the Policy were:

The severity of malocclusion is mainly determined by an appearance conscious society, largely on cosmetic grounds. However the psychological and functional consequences of malocclusion tend to be considered on any assessment of its severity.

The degree of the handicap (i.e. cosmetic plus psychological plus functional) associated with malocclusion varies from person to person

and with age. Similarly, assessment of orthodontic needs tends to be subjective and reflects the values of the assessors. Data from the National Oral Health Survey 1986–7 suggest that dental malocclusion affects some 45 per cent of Australian children aged between five and 14 years, in approximately one quarter of whom the malocclusion is severe.

Demand for orthodontic treatment of children in societies comparable to ours is said to vary between 15 and 50 per cent of the child population. In Australia the orthodontic labour force appears to be roughly in equilibrium with the demand for its services, with the capacity to provide orthodontic treatment to more than 20 per cent of children. Present demand at this level is largely satisfied by the private sector. There is considerable scope for improvement in orthodontic services offered to the financially disadvantaged in the public sector.

Where public dental services provide dental care to children, those services have a responsibility to recognise and diagnose orthodontic problems so that children with potential or actual malocclusion may be advised on or introduced to optimal orthodontic care.

This is an especial responsibility of the School Dental Services under whose care the great majority of primary school children in most states are regularly examined.

Extreme dentofacial anomalies, for example cleft lip and palate, are severely handicapping and orthodontic treatment should be regarded as mandatory for them. The treatment of such conditions deserves public funding support to ensure that all the affected patients have access to optimal treatment, which is usually multidisciplinary and often necessary from shortly after birth.

### *Priority*

The priorities for public funding of dental health programmes including orthodontics are outlined in the ADA policy document 1. “National Dental Health”.

Where resources are available in the public sector for orthodontic care, they should be applied first to the financially disadvantaged on a means tested basis.

Priority for orthodontic care in this group should be given to the most severe malocclusions and dental facial anomalies, especially those causing functional problems or psychosocial handicap.

Comprehensive orthodontic care implies responsibility for retention procedures following active therapy and for long-term supervision of stability of completed orthodontic patients.

Interceptive orthodontic care should be recommended where such treatment offers a real chance of avoiding or minimising more extensive treatment at a later date.

In general conformity with the ADA's considered view of the rights and responsibilities that affect the duty of care in providing any type of dental service, procedures with irreversible consequences, such as the extraction of teeth for orthodontic purposes, should only be undertaken upon the advice of a dentist who has overall responsibility for the patient's orthodontic care.

It has been shown that the orthodontists provide the most cost-effective orthodontic treatment.

Appropriately trained clinical auxiliary personnel working under the direct supervision can enhance the cost effectiveness of orthodontic services.

The policy was essentially the same as the policy for School Dental Services, in that it emphasised the primacy of specialist orthodontists in the provision of orthodontic care, which had been proven in all studies to provide the most cost-effective care. It mentioned that pedodontists also had training in growth and development and some expertise in Orthodontics, and made special mention of those with extreme dentofacial anomalies, for example cleft lip and palate, as requiring special attention using a multi-disciplinary approach. It recommended that orthodontic care should be available at Dental Hospitals and Clinics and made recommendations about continuing education of the entire profession.

This ASO policy, which was adopted in 1990, was also adopted by the ADA Council as a resource document in this area and remains largely unaltered today.<sup>21</sup>

After the *Rogers v Whitaker* decision by the High Court of Australia in 1992, the OSC, of its own volition, in 1994, prepared an 'Informed Consent' protocol, which included the use of a form modelled on one from the AAO. Advice was also received from the indemnity insurers. The particular case concerned an extremely unfortunate outcome from treatment, arising from a known but very rare complication of the procedure used. There were two aspects to the case, the first being a re-examination of the time honoured 'Bolton Principle' which holds that "a doctor is not negligent if he acts in accordance with a practice accepted at the time as proper by a responsible body of medical opinion even though other doctors adopt a different practice"<sup>22</sup>, and secondly the extent to which advice must be given regarding risks and complications in the procedures involved.

This form, which the OSC recommended, outlined known complications to orthodontic treatment including root resorption, relapse tendencies and the need to co-operate fully with all advice given during the treatment. Having explained this form to the patient and their family, and having it signed, were considered sufficient to absolve the orthodontist from any liability from unfortunate outcomes, where proper care could be demonstrated. Over the years, the *Rogers-Whittaker* judgment has been subject to some judicial, as well as professional, review, moving it back toward the original 'Bolton' concepts.<sup>23</sup> This occurred largely as a result of recommendations by Justice Ipp.<sup>24</sup> The practice of obtaining appropriate informed consent from patients and their families is a worthwhile legacy. Activities such as this represent a highly tangible service by the Society to its members.

The OSC, again of its own volition, began to prepare a position on Infection Control, foreshadowing support for the ADA's developing position. Transfer of blood-borne infections, particularly from some forms of hepatitis and AIDS, and the concept of the need for 'universal precautions' had mandated a total review of sterilisation regimes. Olive offered to prepare an infection-control manual based on material from the US agency, the Centre for Disease Control, the American Dental Association and the Irish Orthodontic Society. Much information from a wide variety of sources including state authorities was also required.

Largely due to the efforts of Paul Hanrahan, the OSC produced a manual entitled 'Guide lines for cross infection control in Orthodontics' which was generously published and distributed by one of the supply houses, 3M Unitek. It contained, inter alia, reference to the Existing Standard for the cleaning, sterilisation and re-use of equipment and instruments,<sup>25</sup> and included logs of sterilisation tests, staff immunisation tests and injuries.<sup>26</sup> To an extent, this was superseded by a manual, produced by the NH&MRC which had universal application, and which, under the name of the 'Blue Book'<sup>27</sup>, became virtually the bible for use in all dental surgeries.

In many jurisdictions, regulation of infection control procedures has become the province of specific legislation. Individual practices are required to maintain licences, which demand strict adherence to appropriate protocols. The same situation exists with radiation devices. The ASO, and its parent, the ADA, as well as the Registration Boards, have had to surrender much of the autonomy, which they previously held, in ensuring an appropriate delivery of care. Many sections of the community will not regard this as a bad thing.

The Committee revisited infection control guidelines in 2003, when the decision was taken that, as the issue required special expertise, the sensible tactic was to continue reliance on the 'Blue Book' due for republication in 2003. In addition, Professor L.J. Walsh from the University of Queensland was commissioned to review the Society's guidelines which had been operative for the previous eight years.<sup>28</sup> His document was circulated to all members.<sup>29</sup>

The OSC seemed to take over the investigation of work-force issues, which had originally been the province of the E&PA Committee. Even Brian Lee, who had been working on the issue for many years, joined the OSC. As early as 1982 the OSC had this on its agenda.<sup>30</sup> A report suggested there was an oversupply of orthodontists especially in South Australia. It was suggested this finding be forwarded to the Orthodontic Education Committee in the hope of avoiding the overproduction of new orthodontists.<sup>24</sup>

In 1992 Olive announced that a fee survey was soon to be sent out. He also advised that the next ADA Dental Practice Survey would include questions on general practitioner participation in the provision of orthodontic services. The AAOO was very active at that time. In 1994 the OSC advised that a manpower survey was to be undertaken as part of a thesis requirement and encouraged the members to cooperate by returning its questionnaires soon to be sent out.

Andrew McNaught, who conducted the survey, was added to the OSC in 1995, replacing Lee, so as to promote his work. This was completed in 1996 and became available the following year.<sup>31</sup>

There was a change of Chair in 1996 as Olive was elected First Vice-President and John Owen, again with a Dental Board background, took charge.

His first report mentioned that as a result of the rewriting of the Constitution, there were six duties which his Committee had acquired. They were:

- To maintain the schedule of dental services relating to orthodontics.
- To collect, review and evaluate proposals for the amendment of the schedule.
- To liaise with third party bodies concerning the schedule.
- To make recommendations regarding the utilisation and training of auxiliary personnel.
- To carry out demographic and workforce surveys relevant to orthodontic practice.
- To prepare and keep updated guidelines for infection control in orthodontic practice.

Owen regarded relations with the funds, and negotiations regarding the ADA Glossary and Schedule of Dental Services as the major issues for his Committee. In fact, progressively, the OSC had assumed carriage of all matters to do with third party funding including negotiations over items to be included in the ADA Schedule of Dental Services, which would attract benefits.

At the General Meeting in 2000, the task of review of, and making recommendations for changes to, ASO policies was added to the duties of the OSC. Developing policy for the ASO was the original reason for the formation of the Committee a quarter century earlier.

In 2002 changes were required in several of the ASO's policies, to conform both to the Privacy Act and to the Australian Consumer and Competition Commission (ACCC) requirements. These were largely procedural, but did include a pro-forma for use by Australian Orthodontic Board candidates for their patients whose case records were to be presented.

Shortly thereafter the operations of the E&PA Committee and the OSC were quite sensibly merged for a trial period of two years as there had long ceased to be any clear delineation between their roles. This trial proved successful and the Committee took the name of the OSC.

## Auxiliaries

The utilisation of auxiliaries has always been a thorny issue in Dentistry, and probably more so in Orthodontics than in any other branch. The first mention of auxiliaries occurred in minutes of the ASO Executive Meeting immediately prior to the 1966 Congress. It was noted that the utilisation of dental hygienists had just been incorporated into ADA Policy and it was decided to advise the ADA, that the

ASO saw the important role that “trained auxiliary personnel of the operative type” could play in orthodontic practice.

The registration of dental hygienists came rather late in Australia. The first hygienist commenced practice in 1906 in the US.<sup>32</sup> Justice Michael Kirby in his Stanley Wilkinson Oration said that dental hygienists have been an important part of the practice of Dentistry in the US since 1913. They had existed in the UK, Canada and Japan for over 30 years.<sup>33</sup> According to Franki<sup>34</sup>, utilisation of dental hygienists was first discussed in Australia in 1930, and it had been seriously considered during World War II when dentists in the civilian community were in short supply. The duties considered were more in the nature of those normally performed by dental therapists. After 1945, when so many ex-servicemen began to enrol in Dentistry, the opinion changed.

The pressure built again, and dental hygienists were finally registered in some jurisdictions in the early 1970s (firstly in South Australia in 1971). There was much resistance, generally based on manpower considerations. As late as 1983 in NSW, there was argument between the Australian Society of Periodontology and the ADA President on the use of hygienists. The NSW ADA Branch members had voted 755 against to 202 in favour of the registration of hygienists.

Abbott and Peel’s 1974 survey on the utilisation of auxiliaries in orthodontic practice showed that members rejected the use of dental therapists (school dental nurses) in performing any aspect of orthodontic treatment, but supported the concept of a role for EDDA.<sup>35</sup> The Victorian Branch had produced a series of recommendations designed to allow for the incorporation of this form of auxiliary.<sup>36</sup> The OSC held a meeting with ADA representatives, R. Newbury and D. Heffron<sup>37</sup> at which the training and role of the EDDA was discussed.

In the Council report to the 1974 General Meeting, mention is made of the liaison with the ADA Secretary, John Newton, in formulating a draft policy on the use of orthodontic auxiliaries in government services. The Executive began to look into the training of orthodontic auxiliaries that same year.<sup>38</sup>

ASO Council first decided to form a policy on the use of qualified auxiliaries specifically in private practice (at the same time, the policy on providing an orthodontic service within the School Dental Services was in development). At the same meeting Reading advised that training of therapists at the Western Australia Institute of Technology (WAIT) and of hygienists in South Australia had commenced at about the same time.<sup>39</sup> WAIT envisaged that, with an extension of their training, many routine tasks in an orthodontic office could be carried out.<sup>40</sup> The ADA was quick to point out that this conflicted with its policy. The ASO therefore decided to maintain close liaison with the ADA Auxiliaries Committee. The ADA had a policy covering principles for the direction and control of operative dental auxiliaries, to inform those addressing the issue.

At that time, the profession in Australia, after considerable opposition, was adjusting to the existence of dental therapists carrying out routine preventive and restorative procedures for children on both permanent and deciduous teeth. Therapists were restricted to a certain age group and to government service, except for Western

Australia, where their utilisation in private practice was allowed. In Tasmania, where the first training school for therapists was located and where there appeared to be a surplus, a pilot scheme was commenced, to train these auxiliaries to provide orthodontic services. The similar pilot scheme, which commenced operation in 1975, was attempted in New Zealand.<sup>41</sup> T.J. Freer warned against seeing greater utilisation of auxiliaries as a solution to the difficulties of providing care in outback areas. "The main danger is that such auxiliaries will be seen as the answer to a manpower shortage in order to provide at least some treatment in orthodontically remote areas, the reason being that some is better than none."<sup>42</sup> The ADA, having fought their introduction, was not in favour of extending the role of therapists, but developed a policy promoting the use of two types of auxiliaries in private practice; the classic dental hygienist and the new type of auxiliary EDDA who would have to undergo only six months of training, less than half that currently required of the hygienist. Their duties were to include dental radiography, topical application of preventive medicaments, application of rubber dam, and patient instruction.

ADA Auxiliaries Committee Chair, N.L. Henry, examined Bowden's draft policy and requested permission for the use of the results of Abbott's study by the ADA Auxiliaries Committee.<sup>43</sup> The NSW Branch of the ASO also submitted, to the relevant NSW ADA committee, that the orthodontic duties of hygienists be expanded.<sup>4</sup> After receiving a report from the OSC<sup>44</sup>, Council recommended that this become ASO policy. In August 1976, the ASO adopted an official Policy on the use of auxiliary personnel in orthodontic practice. It read:

#### *PREAMBLE*

The suggested policy is a compromise between the specific needs of the Society and the practical alternatives available at the present time.

The Society believes that close cooperation with the Australian Dental Association and its policy on auxiliary personnel is essential and the ASO policy has been drawn up with this in mind.

It is important that the chosen auxiliary be of the correct status—not so low that her training is inadequate and not so high that she would be unwilling to perform the duties of a dental assistant.

The ADA policy document No. 5 on the training of auxiliary personnel allows two methods of training for a dental hygienist:

1. A one year's full-time course;
2. Approximately twenty weeks for a suitably qualified dental chair side assistant.

The Society believes that only the second type of training would produce a suitable orthodontic auxiliary.

The School Dental Therapist would not be acceptable as an orthodontic auxiliary as she is highly trained in an area of dentistry not applicable to orthodontics and untrained in the specific duties which are required. The School Dental Therapist would find it difficult to accept a subsidiary

role and would wish to indulge in treatment planning as she did in conservative dentistry, and this could never be accepted.

The Society should encourage the establishment of courses to train auxiliaries. Membership should be prepared to assist in planning and teaching and to accept the social and professional obligations in the utilisation of such auxiliary personnel to provide orthodontic treatment of the highest standard in a most efficient manner.

The Society supports the use of auxiliary personnel in orthodontic practice.

#### Duties

1. Established procedures associated with chair side assisting and practice management.
2. Patient education.
3. Radiography for the usual views taken in orthodontic examination.
4. Application of rubber dam.
5. Routine checking for loose bands and broken appliances.
6. Removal of orthodontic cement.
7. Taking of orthodontic impressions.
8. Placement and removal of non metallic separators.
9. Placement and removal of archwire fixation.
10. Orthodontic band sizing.

#### *Type of auxiliary*

An Expanded Duty Dental Assistant (EDDA) would be the most suitable type of auxiliary but this auxiliary does not exist as such in Australia at this time.

The Dental Hygienist is an acceptable alternative providing she is initially trained as a chairside assistant and providing it is clearly understood that her duties include those of a chairside assistant.

At that stage, legislation for hygienists existed only in a minority of jurisdictions within the country, and it was the ASO's policy and indeed, that of the ADA, that this be made national. In 1975 the School of Dental Hygiene was established in South Australia. The curriculum was based on local and overseas experience. The following year, a workshop was conducted by the ADA to discuss the training and employment of hygienists. There was no discussion of orthodontic duties.<sup>45</sup> The ADA Auxiliaries Committee had developed a policy on the duties that should be allowed for hygienists.<sup>46</sup> Three of the last four of this list of duties were particularly applicable to orthodontic practice (impressions for study casts, placement and removal of archwire fixation and orthodontic band selection and sizing).

The OSC considered the extension of these particular duties to dental assistants and recommended "that the duties outlined for dental hygienists be included in the duties outlined for dental assistants provided there is no legal impediment and that the dental assistant has successfully completed a formal course of training in those duties". The ASO was asked to comment.<sup>48</sup>

Ultimately all Dental Acts were amended to allow dental hygienists to provide a level of care. Mostly this fell far short of ASO aspirations and although useful to orthodontists, frequently did not include the duties mentioned above. The allowable duties were prescribed in the relevant legislation but were of much more use to general dentists and periodontists.

Later moves were made to increase the number of allowable procedures, to include some with particular orthodontic application. In 1984 Robert Henry wrote to the NSW Dental Board President Eric Gee, regarding expanding the duties of hygienists to include some duties relevant to Orthodontics.<sup>49</sup>

Most, but not all, of the orthodontists supported the role of the EDDA who would be able to provide a service most appropriate for the orthodontic environment. Due to the radical nature of the proposal, each State Branch was asked to gain specific acceptance of this from its membership, and then to make sure that the State Branch of the ADA and the respective Dental Board were fully aware of the move.

In 1975 the NSW Branch conducted a survey of its members and subsequently moved a motion which would have eliminated the EDDA from the policy, replacing it with 'dental hygienist' and also to reduce the numbers of duties allowed.<sup>50</sup> These were confined to emergency adjustments, placement of separators and removal of archwires. The Queensland Branch also conducted a survey in June 1981. It received a good response, of over 80 per cent, over three-quarters of whom favoured, in principle, the introduction of the EDDA. However support for their individual duties was less consistent, with placement and removal of archwire fixation and orthodontic band selection and sizing being approved by just over half the respondents. This became more generally supported when bonding of orthodontic brackets directly to tooth surfaces came into more general use. The preparation of the tooth surface for this procedure was considered to be included amongst the allowable EDDA duties. The University of Kentucky, which provided training for orthodontic assistants in these areas, was contacted for information.

The only move towards the creation of an EDDA occurred in the ACT, when a trial was carried out, to train a number of dental assistants in the extra duties. The trial failed because the ADA informed those conducting the trial that it could not support these auxiliaries using rotary instruments. (The use of rotary instrumentation was actually not a part of the ADA policy. The ACT proponents were not aware of this.) This would have made the polishing of tooth surfaces impossible and the initiative became of no interest to general practitioners without whose involvement the scheme would never have been feasible. It was ironic that the same organisation that originally promoted the idea was the one that caused its undoing. A lack of communication on the part of those conducting the trial (including the author) was a large part of the problem.

Several years later the ASO Victorian Branch President G.L. Roberts wrote to the Executive<sup>51</sup> saying the climate was right to reopen the issue of the EDDA. Each branch was to explore the attitude of their respective Dental Boards. Again nothing eventuated.

## Illegal use of Auxiliaries

A constant source of concern was the manner of the utilisation of untrained staff in orthodontic practices. The general dental profession, the ADA, and particularly the Dental Boards were concerned by what they saw as a wholesale illegal use of untrained personnel within orthodontic practices. In the US and elsewhere, it had been accepted for some time that chair-side staff without formal qualifications of any kind could, quite legally, carry out adjustments to orthodontic appliances, under the direction of the orthodontist. This was not legal in Australia, although it was common knowledge that there were many breaches of this rule. Dental Board Chairmen spoke out against the practice and it was the subject of argument within the specialty. The Victorian Dental Board had received verbal complaints<sup>52</sup> to the effect that patients were being seen by nurses (chairside assistants) when the orthodontist was not present and that junior nurses were cementing bands and attaching brackets.

On one occasion the Victorian Dental Board took the extreme step of calling before it the President of the ASO, B.D. Bowden, the Chairman of the Victorian Branch, G.L. Roberts and also, the Chairman of the OSC, D.J.H. MacDonald, to ensure that there was no doubt whatever that this practice was frowned upon, and, should proof of such practice ever be obtained, the orthodontist in question would be in trouble. This was an unprecedented step.

John Dale, when President of the NSW Dental Board, also made it known that he was aware of what he considered wholesale flaunting of the rules in this matter. He confirmed he would not hesitate to launch a prosecution if he was presented with any evidence. Franki reports him as saying, in his Presidential message in 1998: "I chuckle to myself when I hear that the Master's degree in Orthodontics has been increased to three years, while one group of orthodontists believes that they can train auxiliaries to do most orthodontic clinical procedures in a matter of months". In fact, the ASO policy on this matter had been unchanged since it was formulated in 1976. This policy contained no provision whatever for people without a qualification to carry out intra-oral procedures.

## Expanding the orthodontic role of Hygienists

In 1988, the South Australian Branch had formed a committee to review the duties of hygienists in orthodontic practice. This Committee could not provide a unanimous opinion. Despite the fact that there had been considerable changes in technology, since the introduction of hygienists in 1971, the majority of the members of the Branch were not persuaded that there should be an expansion of the role of dental hygienists to include the placement of brackets. They reported that "our overwhelming experience over 20 years has proved conclusively that removal of orthodontic appliances is a category of treatment that is particularly appropriate for hygienists". "In comparison", the argument went "the bonding and cementing of orthodontic attachments are procedures which provide little or no risk of damage to the enamel". They added that "despite the employment of hygienists in South Australia for 24 years, evidence of entrepreneurial orthodontics

is lacking. Evidence of loss of a close association between operator and patient, when the job of cementing bands and bonding attachments is delegated to a hygienist, is also lacking.” Their view was that “the world trend is for greater use of auxiliaries in orthodontics.”<sup>53</sup>

In 1993 the ASO Policy on Duties for Hygienists was revised with the addition of the removal of orthodontic appliances (There was a general review of policies at that time). Simultaneously the ASO Policy regarding Orthodontic Assistants was amended with the addition that:

If Expanded Function Dental Assistants become realistic again, then the Orthodontic Assistants course may be upgraded into a suitable course for EFDA's.

The Policy regarding Dental Hygienists was also amended:

The Society encourages and supports the establishment of conversion courses to train School Dental Therapists to be Dental Hygienists. School Dental Therapists make excellent auxiliaries in orthodontic practices and can realise their full potential if appropriately trained as Dental Hygienists.

The ASO was trying to accomplish three things.

To achieve a consensus on an appropriate scope of duties, allowable by Dental Boards.

To achieve training opportunities for the performance of those duties, by way of basic courses and/or upgrades.

To achieve alterations in as many of the Dental Acts, as possible, to reflect that list of allowable duties.

The ASO was also keen to see training courses established to enable hygienists to upgrade their skills to carry out duties already permitted in the relevant jurisdictions. In 1993 the Queensland Dental Board gave permission for that Branch to organise such a course.

In 1995 the South Australian Dental Act was being rewritten and the duties of hygienists was included. The ASO was not consulted at any time. There was an exclusion of band selection (sometimes referred to as sizing. There was argument over the correct term) and cementation and bracket placement. The State Boards had varying opinions on this. Four decided to include band selection, although this was left out of the National curriculum. NSW legislation provided no rights for any orthodontic duties.<sup>54</sup> Council finally decided to leave the Policy unchanged.

In 1995, a National curriculum was created for dental hygiene courses. This contained an orthodontic module, that conformed to ASO Policy. This was some help in creating uniformity but it was still a distance away. Band sizing/selection was deleted from the Policy and was therefore deleted from the curriculum (although not in Queensland).

The situation was complicated by the ability of dental therapists trained at the WAIT to work in private practices. In his 1999 report, John Owen, OSC Chairman, stated:

The last few years and particularly the last 12 months has seen very dynamic changes at state level with the utilisation and training of auxiliary personnel, in particular dental hygienists and private dental therapists.... Obviously actual duties allowable are enshrined in individual State Dental Acts. All are currently under intensive review to satisfy national competition policy which has emanated from the Trade Practices (1974) Act. Additional areas where legislative changes will affect members are allowable ratios between practitioners and auxiliaries, and liberalisation of the relationship between general and specialist practitioners, similar to that allowable in NSW.

In November 1999 the Victorian Branch of the ASO presented a well-researched submission to the OSC and the Executive regarding ASO Policy on Hygienists. It showed that some States had allowable duties that were not in ASO Policy. The submission recommended that the ASO Policy's list of hygienists' duties should not omit anything that is already in any of the existing Dental Board's lists. This meant that it should be expanded to include:

- Dental Photography
- Etching prior to bonding
- Appliance removal including bands, brackets and archwires
- Ligature and module removal
- Fixation of archwires with ligatures and modules.

The Branch was adamant that appliance placement and anything that involved activation was not to be permitted. This was then submitted, in a most impressive form, to the Dental Practice Board of Victoria in April 2001. So detailed was the document that it was decided initially to send only a shortened version. The Board members became the subject of intense lobbying.<sup>55</sup> Most of these recommendations were incorporated into the allowable duties.

A survey of ASO members took place and while views varied, there was a marked resistance to further liberalisation of Hygienist's duties and their supervision. In March 2003, John Owen, then ASO President, wrote to the Victorian Dental Board regarding their review of the Code of Practice for Dental Hygienists. He advocated the right to place and adjust orthodontic appliances. James Curtain, the ASO Councillor from Victoria took exception, feeling the auxiliaries should not perform these duties. Uniformity on this issue remains difficult, if not impossible, to achieve. Over the next few years, discussions continued on further defining 'the direction, supervision and control' of hygienists.

In 2001, the position of dental therapists began to undergo change. Registration as Dental Hygienists became available to Dental Therapists in Western Australia after

appropriate conversion courses. The Mutual Recognition Legislation meant that these people could then practice as Hygienists anywhere in Australia.

This situation now applies Australia wide. However, by 2003, less than five per cent of Australia's Dental Therapists had dual registration. Most of those were in Victoria and Western Australia.<sup>56</sup>

The current ASO policy applying to orthodontic chair-side assistants recommends a correspondence course to provide training in all aspects of their work. The Society encourages such courses as the training of choice. However no further attempt at producing a staff-training manual for orthodontic assistants has been made, although it was discussed in 1997. Nor has there been any progress towards the recognition of an EDDA. Dental hygienists represent a powerful group and it is certain they would argue against such a move. Several new training schools dedicated to the teaching of hygienists have opened in the last decade. After a core of common subjects, these schools usually have both therapist and hygienist modules and dual qualifications are now possible.

Currently the General Dental Council in the UK registers 'Orthodontic Therapists' who, after appropriate training, are licensed to carry out a full range of orthodontic procedures, similar to the situation in the US.

Subsequent to a report requested of the OSC by Council, an amended ASO Policy somewhat less patronisingly called 'Allied Dental Personnel in Orthodontic practice' was adopted in 2005.

## General Practitioners in Orthodontic Practices

Although not considered amongst auxiliaries, because, like auxiliaries, they are in a position to carry out procedures in an orthodontic office and there are similarities in the general issues involved, employment of general practitioners will be discussed here.

The orthodontic hierarchy was concerned by the use of both general practitioners and postgraduate students in orthodontic practices. The Victorian Branch had its own Orthodontic Services Committee, and in 1980, under G.R. Dickinson, as convenor, they produced a report on the matter. There were some conflicting issues, in that on the one hand, they were concerned that an oversupply of orthodontists might develop, as was thought to be occurring in the US, and on the other, in Australia it seemed there was an increase in patient load, and a rather high demand for orthodontic treatment.

To help cope with this, some orthodontists had resorted to the employment of general dentists in their practices. The recommendation of the Committee, at that stage, was that, if general dentists are employed in orthodontic practice, they should not be introduced or known as orthodontists. No Dental Board had any sanction against this practice, but there was concern that these people could be misrepresented as qualified orthodontists.

Another matter in the Dickinson report was that the Victorian Dental Board refused to endorse or condone a special course for auxiliary personnel even if it were conducted by the Society. They felt that doing so, might engender sharp criticism from other groups such as Periodontists.<sup>57</sup>

In August 1981, the ASO Executive discussed the matter and felt that an official policy was required. They wrote to Branch Secretaries, seeking the opinion of their members on this issue. During 1982, this matter was strangely considered as part of the ASO's Policy on the Education of General Practitioners, a subject much discussed at the time. A draft policy had been sent to State Branch Presidents, and a document containing the recommendations of the Victorian Branch was circulated. The minutes commented that "Should the question not be a pressing problem, now or in the future in other States, then the Victorian Branch recommendations should be noted but no Council action initiated".

Clause 6 of the 'Code of Ethics', which had been adopted in 1983, required that no person employed in an orthodontic practice should be misrepresented as an orthodontist. Subsequently an official Policy was adopted, following a postal ballot in March 1983 and confirmation at the General Meeting that year. There is just one sentence. "The ASO does not agree with the employment of general practitioners or postgraduate orthodontic students in specialty orthodontic practice."

In 1994, a sanction against the employment of general practitioners without orthodontic qualifications was included in the 'Code of Ethics' which was, at that stage, under review.<sup>58</sup>

This matter was raised again in 1999 when it was reported at the Council meeting that there were general practitioners employed by five members of the NSW Branch. At the NSW Branch meeting there had been a motion from the floor stating that: "The NSW Branch abhors the use of GPs in orthodontic practices. There was a specific policy in place at the time and therefore these members are in breach of the Code of Ethics."

R.H. Olive, ASO President, felt that the relevant By-Laws had to be rewritten to clarify the matter. The reality was that no action had ever been taken against any member for such a breach of the Code.

In 1999, there was also a change to the recently added clause regarding the 'Code of Ethics'. This change modified the prohibition on the employment of general practitioners without orthodontic qualifications in orthodontic practices, so as to require "in accordance with State laws, general dental practitioners and other staff within a member's practice must not be falsely represented as specialist orthodontists. In accordance with the Ethics of the ADA, general dental practitioners may only operate within their level of competence. Within a member's orthodontic practice, a general dental practitioner should *normally* hold an orthodontic qualification, which is registrable with that State's Dental Board. In other circumstances, Council would need to review each situation individually."

At the same time, the ASO modified its official Policy regarding the employment of general practitioners, to read, the "ASO recommends that general practitioners

only be employed within specialist orthodontic practices if they hold registerable orthodontic qualifications.”<sup>59</sup>

## ASO Policies

The Society has always wanted to make those with whom it would come into contact fully aware of those things for which it stood. The initial tool was the Constitution and particularly the Objects of the Society, which the Constitution enshrines. These have been slightly enlarged and modified over time.

Initially they were stated thus:

The Object of the Society shall be the study of Orthodontia and its establishment as a distinct dental speciality.

‘Orthodontia’ became ‘Orthodontics’ after 1953. Affiliation was added to that Article in 1955:

(b) The Society may seek affiliation with the Australian Dental Association or may seek or grant affiliation with any other body or association of Orthodontists on terms and conditions mutually acceptable.

In 1977 the Objects were expanded to read:

To encourage and maintain the study and clinical advancement of Orthodontics, and to promote and maintain high ethical and professional standards among Orthodontists.

To support, protect and advance the character and interest of Orthodontics as a specialist branch of the practice of dental surgery in so far as it relates to Orthodontics.

To pursue and advance the recognition and acceptance of the specialist professional practice of Orthodontics as a specialist branch of the practice of dental surgery, and to promote its formal recognition as such and to establish high professional and clinical standards for the specialist practice of Orthodontics.

To exercise supervision over members of the Society, so far as relates to their activities, duties or conduct in relation to the practice of orthodontics or the practice of dentistry in the field of Orthodontics.

To seek affiliation with the Australian Dental Association, and to seek or grant affiliation with any body or association of Orthodontists upon such terms and conditions as shall best further the objects of the Society.

To do all such other lawful things as are incidental or conducive to the attainment of such Objects.

These were expanded further in 1996 into a list of ten but really contained only one addition:

To keep the State Branches informed of all relevant and significant orthodontic issues of which the Society is or becomes aware.

This inclusion was probably required because the Branches were becoming incorporated and some already had their own Constitutions.

Clauses (a) was divided into two and old clause (d) now (e) was altered to read: “To provide guidance to members regarding their activities, duties or conduct...” ...instead of the more authoritarian: “To exercise supervision over members of the Society so far as it relates to...”.

Making only three alterations to the listed Objects of the Society in the 80 years of its existence contrasts with the Constitution as a whole, which has had numerous alterations.

But these ‘Objects’ are general statements only, and there are many issues about which the Society feels strongly enough to formulate specific policies. The ASO first decided to set down its Policies in 1974.<sup>60</sup> The first two concerned the provision of Orthodontic Services within School Dental Services and the use of Qualified Auxiliaries in Orthodontic Practice. Currently the Society has only seven of these. Over time they have all been updated, but only slightly, mostly in the last ten years. Other than the change from the Policy for School Dental Services to include the entire public sector, these policies were all written between 1972 and 1983.

As the number grew, R. Y. Norton recommended<sup>61</sup> that “once all current documents of policy are completed that all such policy statements be produced in one booklet”. This occurred in 1982. Darryle Bowden wanted to go one better and give the policies greater weight by including them as a By-Law within the Constitution. This would have had the advantage that Council could create a new policy, or alter an existing one, at any of its meetings and this would become law when ratified by the membership at the next opportunity. Bowden felt that being part of the Constitution would give the policies more substance. Sadly he could not persuade the membership to his point of view. All current policy statements were published again in the newsletter (10/1999) and are now on the website. The actual effect of having and broadcasting these policies is difficult to establish.

There is no ASO policy on infection control, radiation hygiene, occupational health and safety, accounting procedures, and a host of other major issues that impact on orthodontic practice. This is primarily because rules from some higher authority apply. There is no policy that refers to the need for continuing education of members. Attempts have been made by registering authorities (notably Victoria and subsequently the ACT) to introduce some compulsion, but no consensus has been reached and doubts exist on their efficacy. The Dental Practice Board of Victoria tried to ensure the quality of the continuing educational experiences on offer. In 2005, the ASO was advised, by the Dental Practice Board of Victoria, that it had become an Approved Educational Provider.<sup>62</sup>

Whilst ASO members have never been reticent in advancing their points of view on relevant issues, creating a policy or sending submissions, or bearding bureaucrats in their dens, creates no certainty of achieving change or even of getting a reasonable hearing. Orthodontics, or even Dentistry, lacks the political clout of, say, the Pharmacy Guild. Even a quick perusal of the history of the Guild will reveal how successful this organisation has been.<sup>63</sup>

The existence of the first documented policy, that of delivery of care in the School Dental Services (1975), or its successor, that related to the delivery of orthodontic care in the public sector as a whole (1989), cannot substantiate an argument that public policy was thereby altered. What these policies have done is to create a baseline for discussion or argument, and to give the Society a ready record of past decisions relating to issues relevant to Orthodontics.

ASO policies provide a framework where no other authority exists. The Constitution defines the working practices of the Society, whereas the policies delineate how that relates to the delivery of care. To a degree, it is salutary that decisions made by most external bodies impact much more heavily on ASO members than our policies might do in reverse. This is not to say that the Society should not debate, develop, record and follow policies. The ADA, our fellow specialties and government need to be aware of the attitudes of a wide variety of organisations before reasonable and effective positions can be reached.

Anne-Marie Vincent, Victorian Branch President in discussing breaches of the policy on the employment of general practitioners, questioned how policies are enforced. Her view was that they are 'internal' policies and are therefore unenforceable, but that use of the 'Code of Ethics' may facilitate their enforcement. Olive said that the problem of policing the policies is due to the ASO's lack of a Policy Committee.<sup>3</sup> Why Council should be impotent, where one of its Committees would make the difference, was not explained.

The 'Code of Ethics' of the Society was thought to provide some sort of answer. In addition, it was felt that State Constitutions should incorporate ethical statements. To make the 'Code of Ethics' more enforceable, it was suggested that each state include the Code in its, about to be written, Constitution.<sup>64</sup>

ASO documentation began to refer to a 'Code of Ethics' well before the ASO actually adopted one. The 1959 Constitution required adherence to the 'Code of Ethics' of the ADA Branch to which the ASO member had to belong. The 1977 version mentioned an ASO 'Code of Ethics' before one actually existed. Darryle Bowden corrected this in 1984.

Some years later Olive stated that the Society had no mechanism to deal with breaches of the 'Code of Ethics'.<sup>65</sup> The Constitutional Committee was asked to consider this in the general rewrite being undertaken at the time but failed to do so.

Indeed the Code has been changed only in two areas since it was first adopted. The sanction against tendering or accepting 'rebates or split fees' has had added to it 'material incentives', so that it now reads:

- (d) Neither tender nor accept 'rebates' or 'split fees' or 'material incentives'.

'Rebates or split fees' are defined as the division or agreement to split or divide the fees, or the anticipated fees, received for orthodontic services, with any person or corporation, in return for bringing or referring a patient. 'Material incentives' are defined as "rewards received for orthodontic services from any person or corporation in return for bringing or referring a patient".

As discussed above, the sanction against the employment of general practitioners within orthodontic practices, also the subject of a specific ASO Policy first written in 1980, was also embellished.

There seem to have been very few instances where ASO members have incurred the wrath of the Council or the Membership. This is not so true for the Dental Registration Boards.

## Third Party Providers

The effect of third party providers on day to day operations in the practices of the members has occupied much of the attention of Council and its Committees since the early 1970s. At first this was a concern of the Economics Committee, then the E&PA Committee and the OSC worked jointly on the issue, until, progressively, the OSC took over.

Initially, the Repatriation Department and a few smaller organisations had been the only ones to get involved in providing payment for dental treatment, but the main health funds, which came into being when the National Health Benefit Scheme was introduced, saw a market in Dentistry and began providing benefits. The ADA was immediately involved, to ensure equity for practising dentists and to seek input into the host of administrative details such a scheme required. The Society saw fit to write to the ADA in an attempt to ensure that orthodontic treatment would not be excluded from those services which might attract benefits.<sup>66</sup> The Executive felt, that at the very least, if it was to be excluded, the reasons, including a cost analysis, should be provided to the Society.<sup>67</sup> The notion that Orthodontics might be excluded may have arisen because the ADA at that time had reservations about the provision of orthodontic services being included within School Dental Services.

A list of dental services published by the ADA in April 1972 contained a brief list of orthodontic services, which were mainly interceptive. This was discussed by the Council which saw a need for the preparation of an appropriate “master list of orthodontic procedures” to be prepared.<sup>68</sup> At about the same time McGibbon wrote to Mackie suggesting a simple division into fixed or removable appliance, one or both arches and simple/average/complex.<sup>69</sup> He apologised that it was a “pet subject” and made the point that the “cost of orthodontic treatment is in direct proportion to the time necessarily spent on the case, not the number of springs on an orthodontic appliance”. He was hostile towards mechanistic attempts to provide a costing basis.

Six months later, John Reading supplied the ADA with a more comprehensive list, appropriate for specialist services as well as general practitioners.<sup>70</sup> Again, in 1975, the ASO wrote to the ADA saying that the ADA schedule of dental services still “does not bear much relation to the commonly used schedule of services for specialist orthodontic services”, and offered their assistance in making corrections. Since that time, discussion about the contents of these lists (coding) has become a significant portion of the total range of issues demanding the attention of the Society.

The advantages of the benefits to consumers were heavily promoted by the funds, but it frequently appeared that they caused more headaches to the dental profession, than they provided real benefits to their members. Stringent reporting requirements and low rebates were part of the problem. In response, the ADA sponsored a rival benefit organisation called the Australian Dental Plan (ADP). Both, however, tended to place a low priority on orthodontic treatment. The ADP had a very low ceiling on rebates for orthodontic treatment which they saw as being only cosmetic. ADP was also supplied with a great amount of information including a schedule of orthodontic services and a method of separating functional from cosmetic treatment.<sup>71</sup> The ADP was short lived.

One of the advantages of Abbott's surveys of fees and practice administration, in the 1970s was the information it gave to the ADA to assist in its negotiations with the funds. Abbott was able to report at the General Meeting in 1977 that a third economic survey, conducted in 1975, had been able to provide reliable information for the Society in its dealings with insurance carriers. "The Society can speak with knowledge which commands respect".

Abbott felt that the entry of the medical insurance funds into the provision of dental benefits required that an annual fee survey be made each year.<sup>72</sup> Abbott's surveys were very detailed, but he felt that income matters previously included could be deleted from future surveys. He was also directed by Council to undertake a general review of third party programmes and their implications.<sup>26</sup> It was decided at the same meeting to create a committee to investigate the standardisation of the coding of services for orthodontic treatment rebates. At that time, several different coding systems were in operation and some of the funds would only accept their approved system. In 1975, in an attempt to gain control of the coding systems, a motion from the NSW Branch was passed to adopt certain appropriate numbers from the Federal ADA Schedule of Dental Services, and that those numbers should supersede any previously issued numbers.<sup>73</sup> Bowden was anxious that the ASO Committees should work in conjunction with the ADA and hold annual meetings with the ADA and insurance carriers. Council decided at its meeting a few days later that this task would best be undertaken by the combined efforts of the E&PA Committee and the OSC.

At that time Australia had a scheme for the payment of benefits for health care, which was thought, particularly by those on the conservative side of politics, to be the envy of the world. The scheme had been introduced in 1953, by Sir Earle Page, a Country Party politician and briefly Prime Minister. It included the provision of free essential pharmaceuticals and the opportunity for those from low socio-economic backgrounds to receive free medical services at public hospitals. Membership in any one of the heavily subsidised private funds was voluntary, and was part of the overall scheme. The majority of the population became involved. The voluntary nature of the scheme meant that lower socio-economic groups were often not adequately covered. In 1973 the Whitlam government responded to mounting criticism of this situation and introduced Medibank legislation. After a stormy passage through Parliament which included a double dissolution election and a joint sitting of Parliament,<sup>75</sup> the Medibank scheme commenced on 1 July 1975. It provided universal health-care, funded from general revenue. This left the

pre-existing private health funds, by then wealthy, powerful and ubiquitous, with much less to offer their members, so that the range of services for which benefits could be offered was extended. A Health Insurance Commission (HIC) Bill 1973 was included in that raft of legislation and this created the Commission with which dental authorities have negotiated ever since. Medibank Private, an arm of the Medibank system, commenced operations the following year to compete with the pre-existing funds.

Abbott was asked, at that time, to act on behalf of the Society in negotiations with the HIC, in the provision of dental benefits through Medibank Private.<sup>76</sup> Dentistry naturally was anxious for these benefits to be available, but saw problems with, amongst others, the coding systems, the relationship between costs and the benefits provided, and the paper work, which the providers were required to perform. There was an even greater concern for the priorities inherent in the system, which the dental authorities felt should emphasise preventive procedures above reparative work.

The long-term nature of orthodontic treatment was also at odds with the fee for service basis by which the medical benefits scheme operated. Frequently benefits for orthodontic treatment were to be paid only to 'registered' orthodontists where no such specialist registration existed. Sometimes Provisional Members were prejudiced. This was partly handled at the State level, but was eventually solved by general acceptance of the ADA list of specialists.<sup>77</sup> In addition to this, many of the health funds were State based and the concern only of practitioners in that State.

Alerted by findings from the general review requested of Abbott and his team, the ASO Council became alarmed at the cavalier attitude they detected amongst a substantial minority of practising orthodontists towards what they appeared to regard as a new freely flowing well.

In response, Abbott prepared a paper for circulation to the membership, outlining some of the issues involved with third party insurers. It made a number of points:

The role of the orthodontist since the advent of third party insurers is no different from what it is always been: that of 'a professional providing services for a patient in return for a fee that he has contracted with the patient or parents'.

The amount of the rebate is not the concern of the person providing the service. It is between the patient and the insurer.

An orthodontist should not adjust his fees from his normal practice because the patient is receiving a rebate.

The orthodontist should not place himself in the position of trying to achieve better benefits for a patient.

When the ADA is discussing aspects of orthodontic treatment with an insurance carrier, or more especially, a prospective insurance carrier, an official representative of the ASO should be present, and responsible, to report to the Federal ASO, even though it be through the State Branch.

It is not the function of the ASO to advise or discuss with insurers the amount of any rebate in terms of actual dollars.

The use of the ADA coding should be adopted by all insurers and members should use this code. Its very looseness enables it to be used to describe all treatments carried out by specialist orthodontists in Australia.

The total fee concept is the generally practised system for billing for orthodontic treatment in Australia. This system, giving a maximum rebate for a 'once in a lifetime treatment' using a two tiered scale of fees, as used by the HCF in NSW, seems to be the most satisfactory for the orthodontist and the least criticised by patients.

This cautionary paper was the genesis of the official ASO policy in this matter.

McGibbon tried to get an ASO representative on the ADA Dental Health Services Committee, chaired at that time by Robin Woods. This was the Committee which negotiated with the Government and the funds. Woods favoured an "advisory sub-committee" from the various specialities to his Committee.

A forum for specialists had not existed up to this point and in the event Woods' suggestion did not come to fruition. During the McGibbon Executive, there had been two meetings of the affiliated societies, largely of specialists, at which there had been general support for a differential rebate for specialists. G.I. Brown also wrote in support of a two-tiered system.<sup>78</sup> The President of the South Australian Branch of the ADA supported the system.<sup>79</sup> In South Australia, a grouping of specialists did band together as part of that State's rapid response to their locally based funds.

McGibbon and ADA President D.J. Heffron met in Perth.<sup>80</sup> As a result, Heffron agreed that the ASO should have an official liaison officer to work with the ADA. Abbott was the obvious appointment. In addition, a Sub-committee of Woods' Dental Health Services Committee was formed, specifically to concentrate on the schedule of services.<sup>81</sup> Woods wanted Abbott to represent the orthodontists on this Schedule Sub-committee, especially as he lived in Sydney where the ADA had its Federal offices.

Abbott voiced his concerns to the ADA about the way the dental component of Medibank had been implemented. Colin Wall, the ADA Federal Secretary, wrote to Dick Abbott explaining the problems that they had encountered in their dealings with the Health Insurance Commission and with Medibank, which had made it difficult for them to appear to be fully supporting the ASO's positions.<sup>82</sup> Wall's opinion was that, in view of all the circumstances, a good outcome had been achieved. He included in his response, a copy of the resolution made by Federal Council that, in fixed rebate systems, ADA policy would be that specialist treatment attracting a higher fee should also attract higher level of rebate. A proviso was that, where the above resolution is applicable, the benefit should apply only to patients referred by registered dentists or medical practitioners.<sup>83</sup>

A differential rebate was very much part of ASO policy, the only question was what it should be. The Victorian Branch opposed the setting of the rebate for specialists

at the arbitrary level of 20 per cent above that for general practitioners.<sup>84</sup> Many felt it should be higher.

It was a difficult time. Freer and Bowden meet with representatives of the Department of Health in Canberra on a matter to do with the School Dental Services.<sup>85</sup> On hearing of this, Heffron, the ADA President, let it be known that he did not want the ASO to negotiate directly with the government without the ADA's involvement.<sup>86</sup> Abbott was later to report that he had been able greatly to improve the working relationship between the two organisations, both of which were desperately striving to make the new conditions functional. McGibbon agreed with Abbott. "It seems that we are establishing a much closer liaison with our parent body, and I feel that a good deal of the credit for this must go to you."<sup>87</sup>

At Woods' suggestion, McGibbon sought the inclusion in the upcoming ADA Council Meeting agenda of an item, requesting liaison between the ASO and ADA "at all levels" in discussion about health funds. Woods was confident that it would eventually become standard practice.

Abbott attended that meeting and, shortly after, a special committee of Brown, Abbott, Bowden and Dennis McDonald was formed<sup>88</sup> to allow the OSC and E&PA Committee to work more closely together:

1. to ensure the ASO held the ear of the ADA in all matters.
2. to become part of the ADA policy making system in their efforts to influence the funds, the Health Insurance Commission and government.
3. to develop its own policy on third party matters to assist the ADA

The South Australian Branch under the Chairmanship of Grahame Moore went ahead, much to the chagrin of this special committee, and formulated a policy approach designed specifically to help South Australian members in dealing with locally operating funds.<sup>89</sup> Bowden was very concerned that any approach be national. "This is the thing that really worries me—each Branch proliferating into an area different from the Federal group."<sup>90</sup> Council considered it was essential that any approach be national and, if necessary, adjusted to regional specifics, rather than be splintered. After hearing of the Federal Executive's concerns, the South Australian policy was altered to more closely match the approach of the Federal body.<sup>91</sup> Although many of the funds operated in only one state, the ASO Council, through its Committees, was finally able to ensure that only national responses were made. Once ASO Policy had been established, Council suggested to the Branches that, to allow for national oversight, they appoint one member as their Executive's appointee for negotiations between orthodontists and third party programmes within that State.<sup>92</sup>

## Developing the Policy

In August 1977 the new Executive began to develop policy to cope with this innovation. Even though an official policy was some time in development, a draft policy conceived by Darryle Bowden, Chair of the OSC, was circulated to all Councillors. It included comments that "Overseas and Australian experiences

emphasise that the orthodontic services which provide maximum long-term cost benefit to the community are most economically provided within a specialist structure" ... that "the Australian Society of Orthodontists seeks to co-operate with the health funds to limit some of the difficulties in funding orthodontic services, and this co-operation is concerned only with optimising long-term benefits to the community and not for any financial rewards to any of its members".

It was proposed that there should be a differential rebate paid to the patient for the professional fees of the specialist orthodontist compared with those of a general practitioner. The differential rebate should be based on a percentage of the fees charged, and never on a fee for an appliance, to which concept the Society was strongly opposed. Orthodontic rebates should be assessed on a percentage of the total treatment fee charged and no form of pre-authorisation for treatment by any of the funds was to be acceptable nor would be the assignment of fees directly from the fund to the practitioner.

The Policy statement on Third Party Programmes, after the usual round of discussions, came into effect in February 1978.

Dental health programmes should be formulated with the professional advice of authorised representatives of the Australian Dental Association and its affiliated bodies and be compatible with their Code of Ethics.

The Australian Dental Association should seek consultation with its affiliated bodies whenever dental health programmes are being formulated which affect the interests of these affiliated bodies. Orthodontic treatment should be included in dental health programmes only after the principles of basic dental care are established.

The major portion of the delivery of orthodontic treatment should be by a recognised specialist orthodontist. The majority of complex treatment should be limited to these recognised specialists.

A third party programme must not interfere with the orthodontist's right to prescribe for patients under his care.

To preserve a fundamental professional relationship, the patient must retain the right of free choice for selection of the orthodontist, and the orthodontist the right to accept or reject any patient for treatment.

To preserve the contract between patient and orthodontist, the patient should be responsible to the orthodontist for all fees. Third party rebates are part of the contract between the patient and the third party.

To maintain the mutual responsibilities of the patient and the orthodontist, a reasonable part of the fee should be paid by the patient.

To be efficient, the operation of third party programmes, and especially coding procedures, should be simple.

When rebates are based on a percentage of the fees paid by the patient a total maximum rebate limit should apply. An objective of rebate systems should be the elimination of detailed appliance coding procedures.

In order to encourage efficient delivery and maintain the highest standards of treatment, rebates for treatment performed by an orthodontist should be higher than the rebates for orthodontic treatment performed by a general practitioner. Rebates for complex orthodontic treatment should be payable only when this treatment is carried out by a recognised orthodontic specialist.

Any system of peer review must be implemented by the Australian Society of Orthodontists.

A companion Procedures Policy, issued at the same time, was designed to:

1. Assist the members in daily practice in dealing with third party assisted patients.
2. Standardise procedures and maintain uniformity throughout the profession. As third-parties provide an increasing proportion of dental fees, the profession will come under closer scrutiny. Therefore members must take precautions to protect themselves from any possible suggestion of unethical practice.

The Procedures Policy provided practical advice on what information should and should not be provided to the funds on behalf of patients. Not everybody was happy with the addition of the Procedures Policy. Bowden was concerned about the inclusion of the comment concerning unethical practice, feeling there was an “inference, direct or implied, which I would not like to see put in a document.”<sup>93</sup> Freer felt that having the tandem policies could be confusing, and a little more time spent could serve to have the two “melded to form a better useful, clear and unambiguous document.”<sup>94</sup> Nonetheless Abbott’s view, that the Procedures Policy furnished essential practical assistance, held sway.

Abbott suggested that the ASO should seek official ADA acknowledgement of this policy, insisting that the ADA should consult with the ASO prior to any future negotiation concerning orthodontic treatments.<sup>46</sup> The ADA accepted the Policy and it was resolved that all Councillors should make that fact clear to all the Branches.<sup>95</sup> This was a major breakthrough.

Overarching all these deliberations was the question of the best method of delivery of orthodontic care, expected to be in greater demand under such a nationally operating health scheme. There was a precedent in the British Health Scheme which included Orthodontics as a general practitioner based service, using specialists principally as consultants. Research from Scandinavia and the US had not found in favour of this method. John Reading had come to much the same view, when he had conducted his survey in 1973.

At this time Professor George Davies, Acting Vice-Chancellor of the University of Queensland and recently retired Dean of that University’s Dental School, produced a paper designed for submission to the Standing Committee on Dental Health of the National Health and Medical Research Council, the nation’s premier health policy advisory body. The NH&MRC had been requesting data from the Society on the number of orthodontic graduates likely to be produced in the near future.<sup>96</sup> Davies’ paper looked at the published surveys of orthodontic need, internationally and in

Australia and it had concluded that a figure of 20 per cent of the school children in Australia was the most conservative figure that could be used to describe those in need of treatment. The output of orthodontists from Australian Dental Schools could not handle this volume. The conclusion inevitably to be drawn, in Professor Davies' view, was that the general practitioners would have to supply much of this service. He even engaged the prestigious W.K. Kellogg Foundation, renowned for philanthropy in health matters, to fund a study, the purpose of which was to examine the feasibility of training 'community health dentists' who would become involved in the provision of orthodontic treatment.

At the same time, a suggestion had come from Tasmania that orthodontic treatment could be carried out by dental therapists employed by the Health Department in that State.

Both McGibbon and Freer were concerned at the possible uses to which the Davies report might be put. Because of the personal connection (Davies had been, until recently, Freer's immediate superior), Terry Freer was less than happy to respond directly, but eventually did so, in a detailed and brilliant reply, in which he outlined, Australia-wide, the relationship between need, demand and delivery of orthodontic services. He emphasised the British experience. Freer argued:

"It is clear to me, as one with no private practice axe to grind, that any system of delivery which bypasses the fully trained specialists is to be discouraged for reasons of efficiency and the well-being of the recipients.

I do not think anyone would seriously argue with a very conservative estimate of 20 per cent of the population requiring treatment. However, where the disagreement arises, is in estimating what proportion of that 20 per cent should be offered treatment or indeed want it. Classification of an individual in the 20 per cent should not mean an automatic acceptance for treatment. Some may not want treatment. Some may not be suitable for treatment because of their interest in the concept of oral health maintenance. The situation was very plainly put to me by a very experienced member of the profession who has dealt with under-privileged children, that for some, "the idea of washing their feet let alone their teeth never occurs to them".

"The only thing that comes out of all this is the prime necessity to firstly define the problem and secondly to plan on the best method for its solution. It may well be that this solution will vary in different parts of different States. The underlying philosophy of providing treatment must be defined before any steps are taken. Only in this way can demand be estimated. The ASO has already stated its willingness to participate in such an exercise. As I see it, the aim should be as follows:

1. Effective screening of all potential patients by orthodontists, so that those most in need of treatment receive priority, providing such treatment will receive the necessary co-operation from patients.
2. Proper planning and estimates of need, so that education, supply and demand, may be synchronised.

3. Avoidance of wasteful treatment of the apparently simple cases by general dental practitioners with a poor knowledge of diagnosis and treatment planning.
4. Employment of fully trained orthodontists within the School Dental Services, and the establishment of proper specialist structures within those Services. Such orthodontists should be responsible for diagnosis, treatment planning and treatment.
5. The fullest utilisation of the private specialist structure for the efficient treatment of children, in conjunction with a concerted attempt to raise the level of orthodontic awareness of general dental practitioners and School Dental Officers in particular.
6. To ensure that wide consultation with the responsible parties occurs prior to the introduction of any scheme, so that regional variations may be accommodated in a manner most suitable to each region, consistent with the principles outlined above.

Freer reiterated the Policy on Third Party Programmes already determined by the OSC as the only practical way to move the matter forward. The fact that the ASO had already broadcast this Policy was extremely fortuitous. In the end, no decisions were taken, by the NH&MRC or indeed by the government, that were in conflict with ASO policy, except that funds for any form of dental or orthodontic education have never actually overwhelmed the Universities.

## Coding Systems

The ASO had decided to attempt some co-ordination in the coding system at its 1977 General Meeting. Although the ASO had provided considerable input, especially in the early years 1972–75 discussions with health funds about delineating services had been largely conducted by the ADA through their Dental Health Services Committee. A series of item numbers was developed to include the range of services covering all aspects of dental treatment including orthodontic treatment. On the other hand, some individual funds developed their own series and expected that orthodontic practices would use them for their clients.

The ADA had a series of item numbers dividing treatment with fixed appliances into one or two arch, and into simple, average and complex. Abbott was well aware of the deficiencies in this system.<sup>97</sup> In February 1979, the ASO wrote to the ADA suggesting a modified system for describing orthodontic services based on the existing ADA series. It was very simple, having just four numbers for removable appliances and dividing fixed treatment into one or two arches, partial treatment or full. Only 17 items in all.

Later, the ASO recommended to the ADA that, rather than using a whole series of item numbers to describe the various stages of an orthodontic treatment with the consequent need to submit frequent and numerous accounts, a single item number be used for a complete treatment. This made up the majority of services carried out in a specialist practice. They further recommended that this number be restricted

to specialists. Several of the funds, including the two largest, MBF and Medibank Private, already had such an item.

ADA CEO Colin Wall responded that the ADA accepted the single item number concept, but that there was to be no special identification of specialist services, and reminded members that, since 1979, specialist services attracted a fee differential of 20 per cent. That there should be a differential fee was always a part of ASO (and other specialist societies) policy. Such a differential, and indeed of a larger percentage (approximately 30 per cent) had always been part of the medical benefits system in Australia. Much of the effort of the combined E&PA Committee and OSC working group continued to be devoted to this matter.

In 1978 Abbott reported <sup>98</sup> that, in the previous 12 months, the recommended ADA coding had been completely altered as a result of ASO activity. This included consideration of adopting a code encompassing all orthodontic treatments carried out by specialists (at that stage called Item 854). Abbott was directed to continue negotiation for its adoption.

Having established a sound working relationship with the ADA in these matters, the new President, Lloyd Trotter, was able to write to the ADA<sup>99</sup> to the effect that he had received, from Abbott, advice on the recent meeting of the Dental Health Services Committee and representatives of the Voluntary Health Insurance Funds Association (VHIFA) regarding proposed amendments to the current listing of dental services. Notwithstanding that there might be a single code for full treatment, he added: "This Society would like to confirm its support for the proposed listing of orthodontic procedures." He went on to outline a set of numbers, which became standard for specialist orthodontists for the next several years. Why he missed the opportunity to advance the single item number concept was not explained.

Subsequently, some non-specialists were able to convince the Association that there was a wide range of minor interceptive appliances for the treatment of ectopically erupted teeth, which should have their own item number. An interim number (005) was added, with which the ASO could not agree.<sup>100</sup> The ASO's Western Australian Branch wanted a separate number for functional appliances.<sup>101</sup> The ADA responded that they intended to maintain the interim number (005) and asked for further information on the matter of functional appliances.<sup>102</sup>

The final development of the ASO Policy and growing familiarity with the administration required of the new methods, gradually ameliorated the orthodontists' concerns. However, to this day the extra staff work involved gives members pause for thought, as to just who are the ultimate beneficiaries of these schemes.

In 1982 Abbott resigned from his position as Chair of the E&PA Committee and R.F.H. Rickleman took over. The ASO advised that Rickleman was to be the Liaison Officer with the ADA specifically for matters related to third party funding. (In other matters R.G. Henry performed that function.)

Council wanted to receive the views of all the Branches and Committees, and to assess whether the existing coding satisfactorily covered a total-care concept. As mentioned above, the E&PA Committee conducted a survey through all the State

Branches covering all aspects of orthodontist/health fund/patient relationships. The questionnaire showed almost half the respondents had been forced to abandon the ADA coding system, at least in part.

Based on information gained from that questionnaire, a submission was approved by the ASO Council for presentation to the ADA. However, not every member of Council was convinced that changes were needed. John Wilkinson felt that the present ADA code numbering adequately covered orthodontic treatment. Henry agreed, indicating that no problems with the Health Funds were being experienced in NSW. Last minute negotiations produced a number of changes before the submission was finally forwarded.<sup>103</sup> The ASO sought membership<sup>104</sup> on the newly formed ADA Schedule Committee, now separated from its Dental Health Services Committee parentage. The Society wanted to be represented by Rickleman. The ADA response was negative<sup>105</sup> but included that “it has always been open for any organisation or individual to make representations to the Schedule Committee”. This Committee first met in 1983, and ASO President Bowden was invited to attend. Following on from Rickleman’s suggestions, he requested that the ADA Schedule Committee respond to the proposition of separate code numbers for specialist services. The ASO submission, in summary, made two requests that:

the ADA introduce a separate single code to cover “orthodontic treatment by specialist orthodontists”

health funds raise the rebate level for consultations by orthodontists.

In September 1983, the ADA responded that there should be:

- i no special identification of specialist services.
- ii an item number covering a complete course of orthodontic treatment.
- iii a reminder that provision applies, as from September 79, that in fixed rebate systems, ADA policy states that treatment by a specialist should attract a higher level of rebate (not exceeding 20 per cent and applicable only if referred by registered dentists or medical practitioners).

In June 1984, Rickleman announced that a separate number for all orthodontic treatment was likely to be approved. The following year, Item 881 was finally included in the ADA Schedule of Dental Services and an appropriate form was designed to be given to patients to substantiate claims.<sup>106</sup>

The creation of this code for an entire orthodontic treatment, and its acceptance by the ADA, the Commission and the funds was the result of successful lobbying and much arduous negotiation by Bob Rickleman. When interviewed for this history, he remembered it as his major contribution to the Society. Despite his yeoman efforts in relation to the Constitutional changes as ASO President, few would disagree.

Sadly Item 881 began to be abused almost immediately. Patients were presenting for treatment with no cover left, often after undergoing treatment by general practitioners. ASO members were encouraged to use Item 881 only for comprehensive fixed appliance treatment.<sup>107</sup> The ASO became concerned when the Department of Veterans’ Affairs (previously Repatriation Department) and the HIC

## R.F.H. Rickleman

Bob Rickleman was one of the early orthodontic specialists to set up practice in Brisbane and was widely recognised for his abilities in the areas of practice administration and design. His contacts within the profession and his empathetic approach to parents and patients guaranteed his success. Bob conducted a happy practice based on generosity to his staff. He also treated many children for token fees when it was clear they were not able to afford treatment.

Many years before superannuation became a mandated employment requirement, Bob set up individual superannuation accounts for all his employees and passed their entitlements on to them when they retired from the practice. All staff were entitled to a half-day leave with pay each week. These generousities were indicative of Bob Rickleman's

approach to life in general and he generated strong loyalties from all who associated with him. He involved all those in the practice in his personal and professional pursuits and was a pioneer of what is now termed "human resource management" although Bob simply saw it as good management. He was ably supported by his wife Margot, who complemented him in all his activities.

Bob served in various Executive capacities in the State and Federal structures of the Australian Society of Orthodontists and was Federal President in 1974–7. His Presidency was marked by an energetic attention to all aspects of the Society including the various Committees responsible for the day to day business. He was responsible for introducing a range of administrative changes to cope with the expanding base of the Society and the demands of an increasing membership. It was under his watch and constant help, that major changes were made to the Constitution including co-ordinating the requirements for Full membership of the Society with the ASO's Policy on Specialisation. The changes he introduced were practical and apposite and lasted for many years before once again requiring an overhaul to cope with the ever-changing and expanding membership. Bob was a networker par excellence and sought to take advice from all who had an interest or could contribute to the efficient and smooth running of the ASO.

Not well known was Bob's lengthy and detailed interaction and negotiation with the health funds and his legacy in the area is still seen in the code numbers employed for the designation of various types of orthodontic treatment. In typical fashion he sought to devise a system which was simple and sensible and recognised the particular expertise of orthodontic specialists. His efforts across the orthodontic and professional spectrum were recognised in 1997 when he was elected to Honorary Life Membership of the Society.

His only vice was a dedication to large quadrupeds and all of the paraphernalia and activity surrounding them. From time to time in his city practice he would go missing for a quick trip to the TAB trying to beat the odds. At one stage he was an enthusiastic racehorse owner and was always happy to syndicate the ownership of potential champions to anyone who was interested. Bob is still an active golfer and enjoys the company of many long-held friends. The great love of his life is his grand-daughter Amy.

*Contributed by Emeritus Professor T.J. Freer*



held consultations. Orthodontists might have been prepared to provide a discount to the families of veterans, but the entire community was a different matter.<sup>108</sup>

Since that time, negotiations with the ADA, HIC and the individual health funds or their association, the VHIFA, have occupied much of the time of the ASO Branches, Executive and Council. A major concern was that there was no formal pathway whereby the OSC, which had gradually purloined this matter, could negotiate the ASO's position. It was the province either of the ADA Schedule Committee, which had a Health Insurance representative but no one from the ASO. Despite this, the ASO has constantly sought to engage the ADA, the HIC and the individual funds in order to produce the best possible result for the members and their patients. This has generally involved discussions along three lines:

1. Seeking inclusions to, and modification of, the ADA Schedule of Dental Services where appropriate,
2. Ensuring the appropriate use of item 881 which the ASO wanted for full fixed appliance therapy only and
3. Maintaining the principal of differential rebates.

It would be fair to say that the ADA Schedule Committee, which, since 1983, has looked after these matters for Dentistry, listens to the opinions of the ASO, but is not always in agreement. It constantly receives submissions from manifold interested parties, the specialist societies being a major proportion. The Australasian Association of Orofacial Orthopaedics (AAOO) sought a series of their own item numbers for treatments they regarded as orthopaedic more so than orthodontic. This was rejected, whereupon an orchestrated campaign of letter-writing to the Schedule Committee from AAOO members was conducted, but without success.

The Schedule Committee sees a positive in this bombardment, especially when new treatment approaches, about which they lack information, have to be incorporated into the system. A good example would be sequential aligners like 'Invisalign'.

A major source of disagreement was that the ASO together with other specialist groups wanted a separate list of item numbers for services performed by specialists.<sup>109</sup> With this the ADA could not agree, and this continues to be the situation.<sup>110</sup> Council members felt the main problem with Item 881 was that it was being used by non-specialists, which was contrary to the ASO's wish.<sup>111</sup> The degree of general concern can be appreciated when one realises that ASO President Dickinson saw fit to highlight relations with the ADA in his last two Presidential reports, stating in 1996 that liaison appeared to be improving.

One of the differences between Medicine and Dentistry here is that whereas in Medicine, specialists are more numerous than general practitioners and have considerably more political clout, this is not so in Dentistry. Senior general practitioners in the ADA were always able to be heard, and their views did not necessarily coincide with those of specialists.

In the early 1990s differential rebates existed in Queensland and Western Australia but this varied in the other jurisdictions. Shortly, differential rebates ceased to exist altogether. The ADA discontinued its support for differential rebates in 1993.<sup>112</sup> Shane Fryer, ASO President at the time of writing, said that the original acceptance

of differential rebates had been a marketing ploy employed by the health funds. The current chair of the ADA Schedule Committee affirmed this.<sup>113</sup>

John Owen, OSC Chair, at Council's direction, presented to the ADA Schedule Committee a comprehensive submission detailing all items on the ADA Schedule relating to orthodontic treatments, and suggesting some alterations.<sup>114</sup> These were accepted by the ADA with some amendment, which, in turn, were accepted by the ASO.

At this stage, these words were added to the relevant ASO Policy<sup>115</sup>:

1. Specific item numbers for specialist orthodontic services should be available to, and utilised by, registered specialist orthodontists.
2. When services are provided by both a general dentist and a specialist orthodontist, the Health Insurance Industry should provide a rebate to their members (where the service is provided by a specialist) commensurate to 20 per cent or more than the rebate provided when the service is provided by a general practitioner or non-orthodontic specialist. This would assist to reflect the additional educational and clinical skills, and thus the standard of care, provided by specialist orthodontists.

In 1998, the ADA published the Sixth Edition of the Schedule of Dental Services and Glossary, with which the ASO largely approved. The concept of a period of 'active treatment' inherent in many of the claim forms, was replaced by the 'anticipated duration of treatment'. This was to ensure that the retention phase of treatment was adequately provided for in the thinking of the insurers. Unfortunately 'consultation by referral' had been deleted, and the same item numbers were to be used for consultations with both general practitioners and specialists.

The OSC was upset by this change, which had not been discussed with them. "It would appear the ADA does not support or acknowledge this valuable two-tiered support regime, as our referred patients will not be entitled to any additional rebate, or we the status we deserve."<sup>116</sup>

In 1998 a new and more useful definition of Item 881 was proposed to Council and adopted, as follows:

this infers treatment of a significant malocclusion which requires control of all erupted teeth, involving at some stage a fixed appliance, retention as necessary and responsibility during the period of the major growth.

This definition was accepted by the ADA Schedule Committee. In his report for the 2000 General Meeting, John Owen, the Chair of OSC said "the expanded definition of Item 881, although complex in wording does minimise its misuse by general dentists providing minimal treatment yet attracting significant rebates". Regarding the deletion of 'consultation by referral' he said "A logical or political reason for this deletion has still not been obtained from ADA Inc".

Fortunately, 'consultation by referral' was later reinstated. Owen was to say<sup>117</sup> "The 7<sup>th</sup> Edition of the Schedule contains everything the ASO had asked for".

However a number of the funds had begun to reject the use of item 881. There was little the ASO could do about this other than to defend its use. The Australian and New Zealand Academy of Periodontists reported the same difficulty in the operation of their global descriptions.<sup>118</sup>

It is now over 30 years, since third party providers began to affect the day-to-day practice of ASO members and since the Government began to include Dentistry in its health funding considerations. Since that time the Society has been unstinting in its efforts to improve the circumstances under which orthodontic treatment is provided to fund members. It has endeavoured to achieve a united front and prevent piecemeal approaches. It has argued hard in every possible forum on behalf of its members and in support of treatment provided by specialist services. It has had to engage the ADA in meaningful discussion and insist its voice is heard. It has had to help its members adapt to the opportunities and obligations involved.

The Society has sought to achieve listings of services appropriate to the practice of Orthodontics. Sadly it has failed to preserve those listings specific to specialists or to achieve for patients a greater rebate, when services are delivered by specialists.

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## Chapter 16

# The Education and Appeal Committees

The seminal role of the Education Committee, under its various names, in developing policies on Graduate education and specialisation, and the requirements for Full membership have already been described. In 1972 the Committee had done what had been asked of it, and submitted their resignations.

This Committee however has continued to have a pivotal, indeed a most central, role in the development of the Society. A case almost of the tail wagging the dog. Renamed the Graduate Education Committee (GEC), it was almost immediately re-established under the Chairmanship of V.C. West.<sup>1</sup> The Council had asked it to collate information about the current situation in the orthodontic departments at the various Australian Dental Schools. A table was published in October 1972 outlining the numbers of full and part-time students in each of the Graduate departments. They were also asked to make another attempt at creating a set of standardised cephalometric measurements for case reporting.

Most of the Committee's activity over the first couple of years centred on helping to put the new 'Policy on Specialisation' into practice. This included establishing the credentials of the training programmes operating throughout the nation. This is discussed in Chapter 3, because the Executive, not the Education Committee, was the central player.

The Rickleman Executive reconvened the Committee in 1975 under the Chairmanship of G.D. Kirkness, to "provide guidelines for the Council on Specialist Registration and Full membership requirements with regard to investigating and formulating a register of world-wide orthodontic qualifications so that enquiries can be readily processed". The thought was that the previous Committee chaired

by West had served for a long time and should be disbanded.<sup>2</sup> Three years does not seem such a long time, and the real reason may have been other than that recorded. The new Committee, which took a long time to build, included the heads of all the orthodontic departments with the exception of K.G. Godfrey, and a representative from each State Branch. Godfrey was no longer a member of the ASO at that time. Henry and Peel represented NSW. It was foreshadowed that the Convenor should rotate with each Executive. It was renamed the Orthodontic Education Committee (OEC), later this was shortened in general usage simply to 'Education Committee'.<sup>3</sup> In 1976 Kirkness' position was taken by T.J. Freer.<sup>4</sup>

The renamed Committee's first task was to collect data from all the Graduate courses currently conducted in Australia and New Zealand. Information was also progressively recorded on a number of courses conducted overseas (Dundee, Glasgow, Leeds, Wales) to ensure that graduates from those courses fulfilled the ASO's new requirements before being offered Full membership. The Executive looked at those who took the Diploma in Orthodontics from the Royal College of Surgeons in England, and who had spent a further year in the institution.<sup>5</sup> The College adopted new regulations in February 1977 for the D.Orth R.C.S., which added a year to the course and this made assessment much easier.<sup>6</sup>

The Executive had been concerned to learn about the orthodontic course at Bombay. An orthodontist who had trained there was seeking ASO membership. I.L.N. Lopez from Sydney, who was to attend an orthodontic meeting there, was asked to report on the course. That was the only time such an inspection has been carried out overseas. Apparently his response was<sup>7</sup> not overwhelmingly positive, because the applicant was required to go through the Appeal process.<sup>8</sup> In 1977, the questionnaire to the postgraduate departments was repeated because of confusion about such minutiae as the difference between scheduled and non-scheduled hours in determining whether a course was of sufficient duration.<sup>9</sup>

Freer relinquished the chair in 1980, and for the next few years there was a shift away from a focus on postgraduate education to education of general practitioners under a series of chairmen. The reasons were partly to do with the role of the Appeal Committee in assessing candidates with overseas qualifications, who were not certain to measure up to the Society's rules, and because the Australian postgraduate courses were considered to be functioning well.

The ASO really began to focus on the continuing education of general practitioners in 1977 after it had raised objections to the visit of a pedodontist, Professor Joseph Sim, who was to discuss minor tooth movement. This visit had been arranged by the ADA as part of their continuing education programme, with no discussion whatever involving the ASO. This matter is discussed in the chapter dealing with the events of the 1970s. It is testament to the ASO's lack of influence, that the same lecturer was invited a second time. Also in 1984 the Continuing Education Coordinator of the Dental Faculty in Melbourne also organised an orthodontic course without involving the ASO. Additionally, it was noted that a non-specialist was on the ADA's list of lecturers in Orthodontics.<sup>10</sup> In the event the Sim course was well attended, reported to be well presented, and mainly involved with diagnosis and treatment planning.<sup>11</sup>

G.I. Brown, President-Elect, as part of the ASO protest, had made a statement to the ADA Affiliated Societies Meeting in 1979: "That the ASO has two Committees working on further education and would make available to the ADA, a panel of lecturers to discuss orthodontics for the general practitioner". But to no avail. The South Australian Branch was to organise a course in November 1979, sponsored by the Postgraduate Education Committee of the ADA in that State. The outline of this course was to be sent to Freer for comment and further suggestion as to how to stage similar courses elsewhere using the same materials. All Branches were encouraged to participate. Freer suggested that the ASO should use some of its funds (which he saw as growing all the time) to develop a package to simplify delivery of a series of such courses throughout Australia. This was attempted over the next several years with varying, but limited success.

The OEC did not meet during the time of the Western Australian Executive, but they did prepare a draft outline of a minimum Master's course.<sup>12</sup> Kirkness resumed the Chair at the 1980 General Meeting, where it also was decided that an official policy on providing Continuing Education for members of the profession should be developed.

The Western Australian Branch, in discussing this matter suggested that, "consideration should be given to the undergraduate orthodontic programme as any effective postgraduate course should be supportive of this".<sup>13</sup> Serious discussion by the ASO of undergraduate programmes did not occur for another 15 years. Kirkness resigned at the next General Meeting and the new ASO President thought that the Committee should become more active in developing the Policy on Continuing Education. Over those years comments like "The document has become bogged down"<sup>14</sup> can be seen. He asked J.K. Hawkins to take over.

The OSC, which normally had carriage of policy development, was asked to give their file to the Education Committee<sup>15</sup>, so that it might deal with the issue "with great expediency". However, they did complete a report for the Council on "Principles Determining Society Policy on Continuing Orthodontic Education for General Practitioners"<sup>16</sup> which doubtless informed the eventual writing of that Policy.

A Policy was presented in 1983 supporting the establishment of courses in Orthodontics for general practitioners, with a limited range of objectives, mainly restricted to diagnosis. The Policy was adopted after a postal ballot in 1983. It began: "The Society undertakes to support and assist in the establishment of courses in orthodontics for the general practitioner". It stressed understanding of diagnosis and treatment planning, and awareness of advances in orthodontic methodology, and warned against teaching complicated diagnostic procedures. Courses "should teach the general practitioner to competently manage patients within the general practice environment, and to refer patients for specialist orthodontic treatment when required". It could well be argued that this approach departs from the usual practice of the other specialities, which are not nearly so defensive.

Hawkins felt he could not carry out his role adequately, and after some time, Milton Sims was persuaded to accept the position. While the Committee continued

to obtain information on postgraduate courses conducted overseas, general practitioner education remained the main focus.

Over time, perhaps the most comprehensive effort in this direction was made by the Victorian Branch. They formed an education sub-committee, which prepared a report<sup>17</sup> on the issue of courses for general practitioners, and discussed their possible scope and direction. The Branch ran a series of two-day courses in 1979 and 1980 which were a mix of lectures and tutorials, in which, for the second course, no fewer than 17 Branch members contributed. In his report, which analysed the worth of the courses, E.C. Crawford said they would happily consider a repeat, a suggestion supported by the participants.<sup>18</sup> The Postgraduate Committee of the ADA (Vic) requested that two courses per year be conducted.<sup>19</sup>

The most successful of all continuing education courses, which had already been running since 1949, was a long course conducted by the University of Sydney Postgraduate Education Committee. The Victorian experience confirmed the superiority of longer-term courses.<sup>20</sup> Peter Horkin reported that the Victorian Branch had presented a programme in 1986 and would do so again in 1987.<sup>21</sup> He felt that there was a real void in general practitioner education that was being filled by courses, such as those supported by the AAO, which were much less cautionary in nature.

The Victorian Branch was concerned by the inactivity of the OEC. Committee Chair Milton Sims' report, at that time, suggested uncertainty as to whether the ASO should go it alone or embark upon co-operative programmes involving the College and/or the ADA.<sup>22</sup> President R.G. Henry held much the same opinion as Milton Sims, and advised State Secretaries that, as well as arranging their own courses, they should contact the ADA and each regional Committee of the College and offer assistance to any course they were considering. He saw this as an effective counter-measure against the proliferation of commercial courses on offer.<sup>23</sup> Henry wrote to Milton Sims<sup>24</sup>, reiterating Freer's comments six years previously, asking the OEC again to consider the question of developing continuing education courses for general practitioners and that, for efficiency considerations, each State Branch should organise and present appropriate courses, using pooled resources. Yet again, little happened. Courses were conducted and many were well attended. The membership however remained concerned and the Councillors and Representatives Meeting recommended that the "incoming Council look into the future possibilities and activities of the Education Committee"<sup>25</sup>. A decade later the Council was still recommending that all State Branches should consider underwriting continuing education courses.<sup>26</sup>

The other side of the coin saw concern develop on the proliferation of short courses by overseas lecturers. Henry was moved to write to the editor of the *Australian Dental Journal*<sup>27</sup> complaining about such courses "offering the carrot of simplified treatment and an increase in income without increasing the number of patients". He reiterated suggestions that the ASO should be conducting more courses along the lines of existing ASO policy. Some years later, in his role as Chair of the Public Relations Committee, academic Wayne Sampson<sup>28</sup> decried the fact that many such dubious courses were acceptable to the ADA and Dental Boards as

genuine continuing education. A By-Law was added to the Constitution to restrict the attendance of Associate Members at courses deemed to be specialist in nature.

General practitioner education continued to be the main focus of the Education Committee (by then the term in general use) until, in his 1988 Report, G.J. Hinrichsen noted that the Committee had received up-to-date information from all the orthodontic courses in Australia. Information continued to be requested on some overseas Postgraduate courses, but responses were received only from the UK and New Zealand. In his last report (1989), he alluded to the need for the formation of an Australian Orthodontic Board, one of whose tasks could be to assess overseas graduates.

## The Education Committee under Professor Freer

T.J. Freer re-took the Chair of the Education Committee in 1989 and his fine work to establish the Australian (now Australasian) Orthodontic Board under the auspices of this Committee is documented in the Chapter devoted to the Boards. The acceptance by dental authorities of the accreditation of Australasian Postgraduate Orthodontic courses by the ASO is another of his major legacies. He greatly widened the focus of the Education Committee and increased the scope of its activities.

In his first report for the 1990 General Meeting, Freer said the Committee had continued with the general theme of approval of courses acceptable for Full membership of the Society. He also mentioned some recent courses designed for general practitioners. So far he was simply following the path, which had been taken by the earlier Committees. Freer continued the push for a 'nationally co-ordinated education programme'.<sup>29</sup>

His report for 1991 outlined a much broader focus to the Committee's activities and contained comment on three particular issues. These were matters involving the Appeal Committee, the formation of a membership advisory sub-committee, and the procedures involved in applications for membership.

Freer reported that "several issues continue to present problems, including the requirements for membership applicants who have not completed recognised two year full-time Master's coursework programs".<sup>30</sup> He added: "The Committee also recommends standardised procedural guidelines for assessors of cases presented through the Appeal[s] Committee mechanism. There should be a common procedure for all appeal cases, including the number of cases, the manner of presentation and the subject matter to be assessed." and "The Education Committee also recommends that no member of the Executive should be a member of the Appeals Committee."<sup>31</sup> The decisions of the Executive and the Appeal[s] committee should be at 'arms length'.<sup>30</sup>

Since the General Meeting the previous year, the Education Committee, due to the strong support of ASO Executive, actually had three face-to-face meetings, something hitherto unheard of for ASO committees.<sup>32</sup>

## T.J. (Terry) Freer

Terry Freer has had a greater influence over a longer period of time in a greater range of issues within the Australian Society of Orthodontists than anyone else. His contributions include a lifetime of teaching and research, editorship of the Australian Orthodontic Journal, and the operations of many ASO Committees. Most noteworthy is the implementation of the accreditation process for postgraduate programmes throughout Australia, particularly in Orthodontics and the creation of the Australian Orthodontic Board.

He trained in United Kingdom between 1960 and 1961 and returned to Australia as lecturer in Orthodontics in 1965. He was appointed Senior Lecturer in 1968, Reader in 1975 and was awarded a Ph.D. in 1971. He quickly became expert in IT (writing an article on the subject in the early 70s) and his graduate students thereby greatly benefited. He became Professor of Orthodontics in 1992 being so far the only Orthodontic Educator in Australia to have his own Chair. The University of Queensland began taking Graduate students in the early 1970s and since then has graduated over 70 orthodontists. In a lengthy academic career he has held a plethora of responsibilities within the Faculty. He has also served on the Queensland Dental Board and a large range of positions in both the ASO and the ADA. He was made an Honorary Life Member of the ASO in 2001. On retirement the following year he was made an Emeritus Professor of his University.

He has been an external examiner at all the Australasian orthodontic departments. His consultancies have included FDI 1968–76, WHO 1972–76 and the Health Minister's Committee on Cleft Lip and Palate.

He was a member of the Graduate Education Committee of the ASO during the time when it accomplished the important work of setting the standard required for specialist recognition by the Society, the ADA and the Registration Boards. He was Chair of the committee by then called the Orthodontic Education Committee in 1976–80 and then from 1989 for a lengthy period until 1999 and also Chair of its Membership Advisory Sub-committee for three years beyond that. The Orthodontic Teachers meeting came into being on his watch.

Most of Terry's colleagues report that teaching and Orthodontics generally have been the consuming passions of his life but he is known to be a keen fisherman and a jazz enthusiast so he can't be all bad. Although devoted to academia, he continued to practice Orthodontics for all of his career, working for the time allowed by the University with Bob Rickleman and later, after Bob retired, Peter Keay. He was for a long time passionate about politics and ran a couple of election campaigns, the last one successful, for a colleague from the dental school. Terry was also pressed to stand for political office himself but was advised by management against this move.



The Education Committee had never up to that point involved itself in the operations of the appeal procedure, although, as mentioned previously, there was a suggestion from Brian Crisp that the Education Committee should take over review of qualifications when the legality of the appeal process was in question.<sup>33</sup>

After the Appeal Committee's operations had been regularised by the Constitutional changes passed in 1983 and they had cleared the backlog of cases caught up in the changes of membership rules, it became a de facto clearing house for all applications from aspiring members with overseas qualifications. This was well removed from the original purpose of the Appeal Committee, which was to examine the qualifications of new orthodontists caught up in the continuum of Constitutional changes affecting the Society. The Appeal Committee therefore had a local emphasis. As the number of applicants with overseas qualifications increased (in 1988 there were 12 such cases<sup>34</sup>) the Chair pointed out to Council that assessment of these courses was not an appropriate role for a committee designed to adjudicate on clinical skills.<sup>35</sup> By contrast, ASO President S.P. Paul spoke of the need to upgrade, in terms of responsibility and expand in duties, not membership, the Appeal Committee.<sup>36</sup> This would help in the handling of membership applications where the applicant has overseas qualifications or whose Australian qualifications are questionable. To allow this to happen, some Constitutional changes were proposed,<sup>37</sup> that all overseas graduates be referred automatically to the Appeal Committee, and that there be no requirement for circulation of their credentials to Council before referral to that Committee. Up to that point the need to refer all applications to the Federal Councillors had produced an inevitable delay, approaching six months, before approval could be given.<sup>38</sup>

One of the first things Freer did as Education Committee Chair was also to recommend, just as Paul had done, that the role of examining applications for membership be a responsibility of the Appeal Committee.<sup>39</sup> At the time this was not supported by Council.<sup>40</sup> V.C. West went so far as to say that the "Appeal Committee was an inappropriate name for a body reviewing overseas qualifications".

Concern was expressed at the ability of the Appeal Committee to evaluate overseas qualifications. This Committee had wanted its role limited to the assessment of membership suitability, only after the applicant's qualifications had been deemed inadequate, and recommended that a membership committee be raised to look at overseas qualifications. It also made a second recommendation, that the Chairman of that committee should not be the President of the Society, as was currently the case.<sup>41</sup> In addition Dr Cook felt there was some disruption of the Appeal Committee's functions whenever there was a changeover of the Federal Executive, and there had been no continuous Secretary willing to take on the job since Dr Alan Parker had retired from the Committee. Compounding the normal bureaucratic delay caused by the Council, the whole process of appeals was extremely slow, and some applicants had been disadvantaged because of this delay. With more continuity on the Committee, this would not have occurred.<sup>42</sup>

The President advised Council that the matter had been referred to the Education Committee. One of the reasons was that, at that stage, the assessment of orthodontic qualifications was among the many activities proposed for the Australian Orthodontic Board, then being nurtured into existence by the Education Committee.

This Committee’s 1989 report advocated that such a Board be responsible for the accreditation of specialist orthodontic courses, degrees and standards.<sup>43</sup>

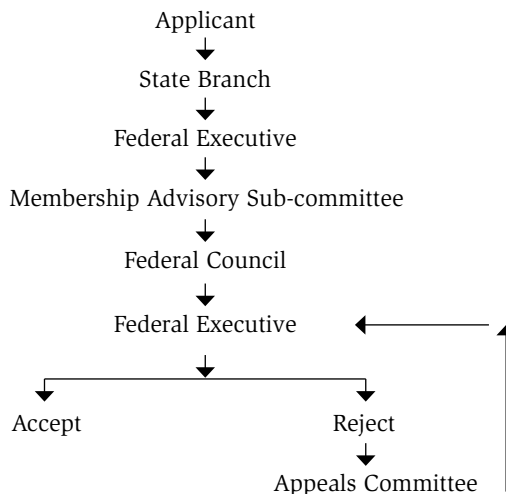
As a result of a recommendation coming jointly from the Appeal Committee Chairman W.J. Mackie and Freer<sup>44</sup>, at its meeting in March of 1991, the Council changed tack completely and resolved to accept the advice originally given by the Appeal Committee and recommend that all applications for Full and Provisional membership be considered by a subcommittee of the Education Committee, whose members would have knowledge and expertise in assessing graduate qualifications in Orthodontics. Council felt that the system would be advantageous for three reasons:

It would allow the Education Committee to offer advice on membership application based on its knowledge derived from evaluation of postgraduate courses around the world and would provide valuable feedback to the Education Committee.

Secondly it would provide a more stable committee structure and that of continuity of membership in contrast to the ever-changing Federal Executive.

Finally it does not remove any of the deliberative decision-making powers of the Federal Council concerning membership.<sup>45</sup>

Freer reported it somewhat differently in his report for the 1994 General Meeting, when he stated that the Membership Advisory Sub-Committee (MASC) was established in 1991, “when legal advice suggested that procedures for admission to membership should be completely divorced from the activities of the Appeal(s) Committee, and from cross-membership of the Federal Executive”. Conflict of interest was to be avoided.



To clarify the process for the Council and ASO Members generally a flow-chart of the progress of membership applications was prepared.

Freer sought leave of the meeting to insert into the flow-chart 'Federal Council' between the Membership Advisory Sub-committee and Federal Executive, as a further step towards fulfilling the requirements of the Constitution. During the frequent discussions on membership he was to reiterate this primacy in decision-making for the Council, although there are no recorded cases where the Council acted contrary to the advice of this Sub-committee.

All this was happening at the same time as the Chair of the Education Committee achieved a seat on the ASO Council. At the Representatives Meeting in September 1991, Freer, acting to progress Council's March decision, moved two motions, both of which were carried: "that the new membership application form be accepted by the Representatives Committee and be recommended to the Federal Council for immediate implementation" and "that a Membership Advisory Sub-committee be appointed from the Education Committee, and the new procedures for membership application be implemented immediately".

Cook is also of the view that the continued running of an alternative Master's course in Sydney played some part in this series of decisions. Most of the cases before the Appeal Committee at that time were from the Westmead course<sup>38</sup>.

The newly formed MASC was lean, only Jane Spark and Alan Pollard, who was already on the Education Committee, were the additional members. The Federal Office initially referred only those applications where they foresaw a problem, but very shortly, all applications.

By 1994 Freer was able to say that: "the Membership Advisory Sub-committee had been particularly effective in sorting out the previous difficulties with membership applications". On the other hand, he did ask at the October 1994 Council Meeting, whether it was still necessary to have an MASC. In the discussion, which followed this possibly rhetorical question, he reported that there were no problems with overseas qualifications.

When asked to record her experiences with this Sub-committee in preparation for this history, Jane Spark said:

Currently, our ability to assess applications for membership is more straightforward than it has ever been. This, I believe, is due mainly to an improvement in the uniformity of postgraduate orthodontic courses in the states of Australia. There are still, however, some problems:

our ability to assess overseas graduates' qualifications

how to assess temporary residents

how to deal with applicants whose membership had lapsed and they have reapplied. Their qualifications may differ from those of current, new applicants

how to deal with applications where there has been objection from a member (or members), particularly when those objections have been of a personal nature (not qualifications)

A continuing lack of congruence between our (ASO) standards and those of the Dental Boards within Australia.

## Membership applications

In its initial burst of energy, the Education Committee had also made: “recommendations to the Executive, concerning the information required of all applicants for Full or Provisional membership”.

It was felt that many of the difficulties with membership applications arose from insufficient information being supplied by the applicants. Having regard to the impossibility of the ASO having information on every single course conducted overseas, the Education Committee felt it should be incumbent on the applicant to supply enough information to allow for an informed decision.<sup>46</sup> The Education Committee produced a new application form requiring a considerable amount of detailed information, including all experience since graduation, complete information about the postgraduate course attended including its management, duration and content, and logbook information detailing cases treated during the course.

All applications received up to 1 July 1992 would continue under the old format; the new format would apply to all subsequent applications.<sup>47</sup> A certificate of good standing was also required. Details of referring dentists were required for upgrading to Full membership. This meant that for the first time, a barrier had been placed in front of Provisional Members, before they could progress to Full membership. Again, there were no recorded objections from Councillors. However the NSW Executive 1996–98 eventually tried to restore automatic upgrading. Provisional membership was shortly to cease altogether.

The considerable detail required was to prove a stumbling block for some aspiring members. On the other hand, Jim Curtain reported that the preceding Executive complained about the poor presentation of many applications for all grades of membership.<sup>48</sup>

Initially, membership application was totally controlled federally. All applications from the 1950s contain signatures from the Councillors from every State indicating their approval. This procedure must have had certain logistical difficulties. In the early 1960s, it became more State-based and to this day, all Branch members in the State in which the applicant has his principal practice, and to which Branch the aspiring member must eventually belong, are advised of the application and can lodge objections. The theory being that members of that Branch will have more direct knowledge of this aspiring member and would be in the best position to comment. A three-quarters majority of Branch members voting is required for acceptance. There have been cases where objections have been raised.

In his 1996 report, Freer emphasised the importance of the membership application:

It is perhaps timely to remind members that the Australian Society of Orthodontists accepts degrees from all around the world as the basis for Full membership providing the equivalence of standing can be demonstrated. The process of vetting has been developed over many years and is now working reasonably well. Equivalence of standing applies equally to our own dental schools and could only continue to be guaranteed by preparedness to subject course content and clinical experience to examination by members of our own Society and this requires documentation. Anything less ought not to be acceptable. It is in effect a form of continuing accreditation. It should also be reiterated that the final decision on membership application is determined by the Federal Executive.

This last point was not strictly correct. Although the Federal Executive appears in the flow chart depicted above, it actually has no power. In matters related to Full membership it is simply a functionary, acting on behalf of the Council, and any discretion remains with the Council. Freer was at all times very anxious for it to be seen that the ultimate control rested not with his Education Committee but with Council. "The procedures for applications are now well-documented, and the Federal Office in Sydney has streamlined procedures so that applications are now handled efficiently and fairly, with ultimate scrutiny and determination by the Federal Executive." Again, it was really the Council.

Freer commented<sup>49</sup> that one of the advantages of the current method was that it enabled the Education Committee to find out what is happening in the other Universities. None of the heads of the postgraduate departments nor the Deans of the Faculty, who were responsible for the standard of their own graduates, appeared to have had any problem with this attitude or the fact that the Chair of one orthodontic department was scrutinising the output of the others, albeit on behalf of the Society. ASO President Dickinson felt that serious thought should be given to dropping the logbook requirements for graduates of Australian and New Zealand Universities.<sup>50</sup> Some Council members, including the author, were made aware of objections from applicants to, among other things, the time taken to complete this complex process. J.P. Fricker wrote to the Executive a number of times complaining of the process, and the author was made aware of cases where the person involved had simply given up. When this matter was brought up at the Council meeting in February 1996, Fricker wondered whether too much detail was required of new graduates from Australian schools when applying for membership. The Executive felt a new membership application form was required, and it was agreed that this be discussed at the next Orthodontic Teachers Meeting.

E.C. Crawford felt quite strongly on this matter, and believed that the Society had a problem, in that the very people it needed to encourage to take up membership were being allowed to drift away, partly through a lack of action by the State Branches and partly because the students felt the requirements were punitive. He repeated these concerns later.<sup>51</sup> The author, as President-Elect, advised Council that this was one of the matters he would take up in his term of office.<sup>52</sup>

At the March 1996 Council Meeting, Freer mentioned that he had produced a logbook, which had been accepted by all heads of school. However, by September, Queensland was the only department, which reported that they had this logbook in use. It was suggested that this be given to all candidates proceeding overseas for graduate study. It was also felt that some would object to enforcement of the proposal. Freer wanted it generally known that Council had the power to waive the log book requirement and anyone who put forward a good case would not be refused. This was fairly meaningless because no mechanism had been established for such cases to be brought to the attention of Council. In fact early in his term as <sup>53</sup> ASO secretary, John Coolican had to enquire about the protocol of assessing applications and Professor Freer had to provide details. Why there was not a written set of procedures at that stage when the matter had engaged so much of the attention of Council was not explained. Coolican was advised that Council could empower the Executive to handle student applications. A motion to that effect was passed. At this meeting the Executive were also asked to prepare yet another logbook after looking at all existing ones. This had been a recommendation of the recent Orthodontic Teachers Meeting. The log book designed by John Coolican, and produced by 3M Unitek, was tabled at the first Council meeting in 1997. What was wrong with Freer's logbook, mentioned at Council meetings the year before, was not explained.

Attempts were made by the Executive to make the process more 'new member friendly'. They sought to begin this, initially, by breaking the nexus between the MASC and its parent, the Education Committee. Being naive, no caucusing was carried out by the Executive, to convince Council that a problem really did exist. Terry Freer who had built this structure and believed in its role, argued his case with great skill. He said the matter was being brought up at Council for the fourth time and asked that it be recorded that he saw this as "a gross discourtesy". One Councillor was troubled "at the time spent by Council on matters raised by an over zealous Chairman". The Executive was told that "if it's not broke (and that seemed the majority opinion) don't fix it". This seemed a little strange because at this time 20 per cent of the 417 registered orthodontists in Australia were not members of the ASO.<sup>54</sup> Most of the orthodontists who were not members practised in NSW. John Owen was able to say, during his Presidency some years later, that there had been an increase to 92 per cent.

In addition, amendments had only recently been made (1991) to the Appeal Committee By-Laws to ensure that there could be no conflict of interest in the granting of membership. It seemed to the Executive that such a conflict did still exist, in that the Chair of MASC, who was a member of Council as well as a department head in his own right, was in a position to adjudicate on Graduates of the other courses.

In hindsight the author realises how ill-prepared he was for the job, which was given to him as a result of the rotation policy, and how vast was the experience of some Committee Chairmen by comparison. From this salutary exchange came a resolution from Council, that an advisory committee be formed, composed of Professor Freer together with the existing and next President and Secretary.

They were to investigate changes to the membership procedures and report back to Council. A second part of the resolution required Council to introduce a clause in the Constitution showing that it had the final discretion to admit members.

Constitutional Committee Chair P. J. Hannon prepared a detailed argument that such a clause was unnecessary, as “Council already has the discretion with regards to all applications for membership”.<sup>55</sup>

A working paper was to be prepared by Terry Freer for this advisory committee, which was to meet before it was to present recommendations to the next Council Meeting.

In this working paper, <sup>56</sup> Freer outlined the history of MASC and its operations since it was formed. He described some of the problems as arising from applications which had not always been dealt with promptly by the Branches and was of the opinion that the practice of advising all existing Branch members of a new application had become moribund. He argued: “without qualification, the present protocols put in place by various succeeding Federal Councils and implemented by the Membership Advisory Sub-committee have been an outstanding success.... In summary, there seems to be no valid reason for changing the present system, where the link between the Education Committee and MASC has helped to implement a standardised, fair and transparent process”. He concluded his working paper by making five recommendations:

1. That the Membership Advisory Sub-committee continue to maintain a strict arms length relationship with the Federal Executive and with the Appeal Committee.
2. That the present broad procedures and protocols for membership applications be continued, except as outlined in (4) below.
3. That the Membership Advisory Sub-committee be constituted as a standing committee of the Society and that it consist of the Chair of the Education Committee with two other Full Members elected at the Congress AGM of the Society. [This was exactly what the Executive had been trying to achieve.]
4. That application for membership be made to the Federal Secretariat in the first instance, with a copy to the State Branch, before consideration by the (new) Membership Advisory Committee and final acceptance of the recommendation by the Federal Executive.
5. That the practice of circulating applications within the State Branches be discontinued. Notification to the State Branch should be in the form of a letter to the State Secretary from time to time, as required.

There is no record of this working paper ever being discussed by the advisory committee just set up, before it went to the Council.

Other than the suggestion that sought to remove the State Branches from the process, the thrust of Freer’s recommendations came to pass at the next Council Meeting and a discrete committee separate from the Education Committee was

indeed formed. Council decided however that its Chair should still be the Chair of the Education Committee.

This Committee had the following duties:

1. To examine applications for membership
2. To seek and obtain information it deems necessary to review an application for membership and make recommendations to Council.
3. To act in accordance with the principles of natural justice.(Council is not bound by a recommendation of the Membership Advisory Committee)
4. In addition, the Membership Advisory Committee may conduct de novo such procedures that will enable it to determine whether an applicant can demonstrate advanced clinical expertise.<sup>57</sup>

The procedure of returning membership applications to the State Branches according to the Constitution was confirmed, as was the principle that applications be sent initially to the Federal Office for recording and then action taken after approval by State Branch Members. This, in a way, was a return to the original pre 1960s model.

Since that time the application form has been progressively simplified and can now be completed over the internet. The logbook requirement was completely eliminated early in 1999. This was certainly not the wish of the preceding Executive. Logbooks remain a basic requirement for most specialist academies/societies throughout Australia and are essential in the assessment of equivalence of overseas trained specialists by the ADC.

With the same Chair, separation between the Membership Advisory Committee and the Education Committee seemed not always to be clear-cut. Not long afterwards, Freer resigned from the Education Committee in favour of Mithran Goonewardene, but remained on the Membership Advisory Committee for a further term. In 2001 and 2002 there were different Chairmen of the Education Committee and the Membership Advisory Committee. Not so since 2003, when Goonewardene assumed the chairmanship of both, after Terry Freer retired, and began producing a single annual report.

## Orthodontic Teachers Meetings

The Education Committee sponsored a meeting of all those involved in teaching at the 1994 General Meeting. Meetings of Department Heads had been scheduled previously in 1968 (unsuccessfully) and in 1971. The principal function envisaged was to provide a forum for all those involved in postgraduate education. In addition, undergraduate and general practitioner education was to be discussed.

In the lead-up to this meeting, Freer reported that the Education Committee was committed to getting the Orthodontic Teachers Meeting (OTM) off the ground<sup>58</sup>, that there were substantial cost implications and that he was totally committed with the Board and the OTM and that he would like continuing education for

general practitioners and orthodontic education for undergraduates to be handled by others.

Guy Burnett from Adelaide was appointed Chair of the Undergraduate Education Sub-committee. His brief was to examine the part Orthodontics played in the undergraduate curriculum in Australian Dental Schools and compile a syllabus, for the ASO to recommend to the Universities. This must be considered a pivotal role for a specialist Society, but had never seriously been undertaken before. Burnett prepared a document which outlined the content of all currently conducted courses and made recommendations for the orthodontic portion of the curriculum. The thrust of these recommendations was to include Orthodontics with that part of the course which looked at anatomy, physiology and the growth and development of the individual, and to teach occlusion based on natural teeth, instead of the more usual practice of incorporating Orthodontics towards the end of the course, which is devoted more to repair. No other record could be found of the Society making so prescriptive a set of recommendations for the undergraduate course. A draft had been circulated but, although comments had been sought and it was discussed at four meetings<sup>59</sup>, Council failed to focus adequately and the document was forwarded directly to the ADC, which was about to commence the accreditation of the Dental Schools, without the ASO providing adequate review.

That it should be sent to the ADC, was a step which the OTM had not at the outset considered. Freer, while he agreed with the general thrust of the paper, had some criticisms, he felt that the document needed considerable rewriting to become acceptable for the ASO's purposes in dealing with the ADC and for transmission to the Universities. He had written recently on the subject.<sup>60</sup> It would have been so much better if his input could have been received by his Sub-committee before it went to Council, or at least to the Australian Dental Council. This paper appears to have become lost in the ADC's 1995 accreditation of undergraduate programmes. There appears to have been no attention whatever paid to this. Undergraduate orthodontic educators have not since sought the ASO's help in developing their curricula.

Continuing education courses designed for general practitioners have been another matter. Previously there had been liaison between State Branches and the Continuing Education programmes conducted by the Universities, in which the ASO underwrote the mounting of courses. Sometimes the Branches had conducted courses on their own. But coordination between Branches to combine material had proved unsuccessful. The 1993 report admitted that previous policies on interstate cooperation had failed, and recommended "that in future each State Branch should underwrite the costs of a general practitioner course conducted by the Continuing Education Committee of the respective Dental Schools" and that "the new Secretariat could act as a central collator of information on all courses".

The OTM formed yet another sub-committee in 1994 and Paul Schneider battled with general practitioner education. His group had a representative from each State. Its role was to attempt coordination of the efforts of all the State Branches; something that could not be achieved in the 1980s. Information was gathered on

the available resources, to ascertain what could be shared but sadly progress was minimal.

Support for these two sub-committees was written into the duties of the Education Committee when committee duties were written into the Constitution in 1996.

## Appeal Committee

The Appeal Committee was created during the time of the Rickleman Executive. This was part of the change made to the Constitution, to have the rules for Full membership conform with the ASO's Policy on Specialisation. The original membership of the Appeal Committee was the ASO President, the Chairman of the Education Committee and three others. They set to work, handling the large number of cases that had been disadvantaged by the change in the membership rules. After only four years this process was revisited by the Constitutional Committee under the continuing Chairmanship of Brian Crisp, who continued to be advised by the same solicitor, Chris Winnall, from Adelaide. Winnall had formed the view that the terms of reference of the Appeal Committee were insufficiently supported by the Constitution, and advised, as a matter of urgency, that they be redrafted. His view was that the right to membership of an applicant, who had appealed successfully, was not adequately provided for in the Constitution. In addition, he felt that the workings of the Appeal Committee should be more completely prescribed. Their work was suspended and cases proceeding through the process moved into limbo. The redrafting included the addition of a sub-section that defined the right to membership of those who had been through the appeal process and had demonstrated that they had a clinical expertise equivalent to that of a graduate from an approved course.

A separate clause was added to the effect that all those previously admitted to Full membership, by virtue of the appeal process, "shall be deemed to have been properly admitted in accordance with the new Constitution". In other words, even if the procedure had been flawed at the time, it would hold for those who had successfully passed through it. These amendments, and a raft of others, were subject to a postal vote in 1983. The composition of the Appeal Committee was later increased<sup>61</sup> to include, in addition to the President and Chair of the Education Committee, one representative from each State who, together with a member co-opted from that State, would adjudicate on applications from that State.

The Appeal Committee resumed operations again immediately with Alan Parker continuing to act in the role of Secretary. Within a short time the Executive was able to report that all cases affected by the legal irregularities had been resolved.<sup>62</sup> Further changes to the Constitution affecting the Appeal Committee were, as discussed above, passed at the 1991 General Meeting. "The Council shall refer any application for membership to the MASC and an applicant who is refused election by the Council may, within 28 days, request that the Council refer his application to the Appeal Committee."

Membership of the Appeal Committee was also revised. The Chair became, instead of the President, a "nominee of the Council", the Chair of the Education Committee

was no longer on the Committee, and instead “one shall be nominated from time to time by the Orthodontic Education Committee”. The change also included the requirement that “no member of that Committee nor any referee appointed by that Committee shall have previously been member of a committee which has deliberated on an application for membership from any person who was making an appeal”. This sought to eliminate any semblance of a conflict of interest from the deliberations of the Appeal Committee. Its operations were further delineated by changes to the By-Laws to allow the Committee to investigate the circumstances whereby an application had been denied by Council, and it was given the right to evaluate the necessary level of expertise. Later, the Representatives Meeting recommended that the Education Committee nominee be removed from the Appeal Committee.<sup>63</sup> This took place in 1996.

In 1993, Mackie reported to Council that the improved protocol for assessment of appeals, which was among the many recommendations by the Education Committee in 1991, had been attempted, but no consensus could be reached. On the other hand, the 1991 By-Laws under which they were now operating provided a measure of flexibility to resolve appeals through enquiry or examination, as well as through the ‘tried and true’ method of case presentation. At that time almost all cases proceeding under the old rules had been able to satisfy their particular referees. From 1991 to 1993 the appeals before the Committee were, in the main, from candidates possessing an MDS qualification from New South Wales, which did not conform to the ASO’s requirements for postgraduate training.

Mackie stated: “I am happy to report that the above candidates, who were required to conform to case presentations set out in the old By-law 8, satisfied their respective referees to the point of being recommended for Full or Provisional membership. In all, eight applicants proceeded to membership through the avenue of appeal and there is only one case yet to prove his clinical expertise through case presentation.”

There was a later comment in 1997 when Mackie reported: “cases peaked in 1993 and since that time the Committee has had a few cases to review. In relinquishing the reins as Chairman of this Committee, I trust its activity is maintained at this minimum rate.” This has turned out to be the case.

In 1995 Freer offered his view that the Appeal Committee’s light work load showed that the MASC was working satisfactorily. This was supported by Jane Spark, a member of that Sub-committee.<sup>64</sup>

As a result of the changes begun in 1992 to create conformity with the ACT Associations Ordinance, an additional function was added to the duties of the Appeal Committee. This was done with little fanfare. In fact, Mackie reported that he was not aware of its existence. One of the 1993 drafts refers to “the predominant function of the Appeal Committee”<sup>66</sup>, suggesting the existence of this secondary function. The 1996 version of the Constitution confers onto the Appeal Committee the duty to advise Council in relation to appeals pursuant to a nonexistent Clause 6.5 of the Constitution, which Hannon<sup>67</sup> assured the President was to relate to “an appeal following disciplinary action”. This was later amended in the Constitution to refer to the correct Clause 13.7. The basic reasoning here is

to give the Appeal Committee power to protect the rights of individual members from unfair rulings by their governing Councils.

Since the accreditation of Postgraduate courses has been established, locally trained orthodontists will not again need to present themselves to the Appeal Committee. An Overseas Trained Orthodontist last proceeded through the appeal process, beginning in 1999. Those from overseas seeking to be recognised as specialists by Registering Authorities are currently assessed by a panel set up by the Australian Dental Council. These panels make recommendations to the relevant Dental Board where registration is sought. The Membership Advisory Committee, under Mithran Goonewardene, established a protocol to allow overseas trained Orthodontists to demonstrate a standard equivalent to that of a local graduate, to allow Full ASO membership. The ADC Panel in Orthodontics has adopted this procedure, to determine if equivalence of standard and training exists. Goonewardene's Committee has also succeeded in creating a system whereby those who have not been able to demonstrate equivalence can, after successfully completing a qualifying examination, enrol in an Advanced Training Programme at one of the Graduate departments to upgrade their training to support a claim for equivalence. In essence this follows the lead of the Appeal Committee.<sup>68</sup> At the time of writing similar opportunities are being explored in other specialties for overseas trained specialists who cannot quite prove equivalence. The lead the ASO has provided in this field is highly regarded by the ADC.

The original role of the Appeal Committee has ceased to exist. It remains in place, probably 'just in case' and to enable it to exercise its new role, something to date which it has not yet been called upon to perform.

## Endnotes

1. ASO Newsletter 11/1972
2. Minutes Executive Meeting 2/1975
3. Minutes Council Meeting 6/1975
4. Education Committee report to Council 1977
5. Letter from Bowden Minutes Executive Meeting 5/1975
6. Minutes Executive Meeting 11/1977
7. Receipt recorded Minutes Executive Meeting 5/1976
8. Letter Mackie to McGibbon 1/3/1978 Published ASO Newsletter 3/1978
9. Report to 1977 General Meeting
10. Executive Minutes 4/1995
11. Minutes Council Meeting 9/1978
12. Education Committee report to 1980 General Meeting
13. Dillon to Crawford 4/8/1982
14. Minutes Executive Meeting 7/1981
15. Minutes Council Meeting 3/1982
16. Undated but likely to be for the 1982 General Meeting
17. Committee Recommendations Undated 1979
18. Crawford EC Report on First Metropolitan Course 11/6/1980
19. Minutes Branch Meeting 10/1980
20. Minutes Victorian Branch Executive Minutes 6/1982
21. Education Committee Report to 1987 General Meeting.
22. Education Committee report to General Meeting 1987
23. Minutes Executive Meeting 2/1985
24. 4/3/1985
25. Minutes General Meeting 1987

26. Minutes Council Meeting 8/1993
27. 20/1/1975 Minutes Executive Meeting 2/1985
28. Report of Public Relations Committee to General Meeting 1992
29. ASO Newsletter 4/1991
30. Education Committee Report to 1991 General Meeting
31. Professor Freer has by no means been the only one incorrectly to pluralise the name of that Committee.
32. Cook R, Minutes General Meeting 1991
33. Report to General Meeting 1982
34. Secretary's Report for 1989 General Meeting
35. Education Committee report to Council 3/1991
36. Minutes Councillors and Representatives Meeting 4/1989
37. 3/1990
38. Minutes Councillors and Representatives Meeting 3/1990
39. Minutes Council Meeting 3/1991
40. ASO Newsletter 4/1991
41. Appeal Committee Report to Council Meeting 3/1991
42. Minutes Council Meeting 3/1991
43. Education Committee report to General Meeting 1989
44. Cook R, Personal Communication 22/7/2008
45. Newsletter 8/1991 'Revised membership procedures'.
46. ASO Newsletter 8/1991
47. Minutes Executive Meeting 7/1992
48. Minutes Council Meeting 3/1995
49. Minutes Council Meeting 4/1996
50. Minutes Council Meeting 11/1995
51. Minutes Executive Meeting 4/1998
52. Minutes Council Meeting 2/1996
53. Minutes Council Meeting 6/1996
54. Minutes Council Meeting 9/1997
55. Hannon to Taylor 15/11/1997
56. 29/19/1997
57. Minutes Councillors and Representatives Meeting 3/1998
58. Minutes Council Meeting 8/1993
59. Minutes Council Meetings 3/1995, 6/1995, 11/1995 & 2/1992
60. Freer TJ and Foster GA: AOJ 11/3; March 1990 Towards a revised undergraduate Orthodontic Programme
61. 1984 General Meeting
62. Appeal Committee report 1987 General Meeting
63. Minutes Council Meeting 9/1992
64. Personal Communication 2007
65. Personal Communication 29/10/2008
66. By-Law 13.2
67. Hannon to ASO President 26/11/97
68. Minutes Council Meeting 3/2005

## Chapter 17

# The Smaller Committees

### The Directory Committee

Another committee, which provided a popular service to members, began its life as the Membership Directory Committee in 1972, under the Chairmanship of Robert Gates. Gates is the great-nephew of E.C. Gates, who was nominated second ASO President. This Committee began to produce directories of members of the ASO, which were issued only to members, on an almost yearly basis. ASO archives contain lists of members prior to this. These lists were collected by the Executives for administrative purposes, and were occasionally included in Bulletins or Newsletters.

There was a pre-existing directory, the Orthodontic Directory of the World (ODW). Mention has already been made of this directory, which has been produced privately from the US since 1918.<sup>1</sup> This directory's main service was to assist in the transfer of patients undergoing orthodontic treatment. For many years it had listed orthodontists who were not necessarily members of any official society in their part of the world, and also those in non-exclusive practice, who had requested listing. Early ASO members were diligent in ensuring that orthodontists whose religious faith prevented them from joining any organisation that was not based on that faith, or others who simply did not care to join the Society, were properly listed.

During the 1950s and 1960s the ASO Secretary had the role of providing information to the editors of the ODW. There were a number of complaints<sup>2</sup>, particularly

about the exclusion of Associate Members who were in exclusive practice, and the inclusion of academic members who were not in a position to accept transfer patients. The ODW at that time contained listings of non-specialists from certain countries, but guaranteed that all listings from the US and Canada after 1961 were fully qualified. The NSW Branch suggested to the Executive that an Australian Editorial Office be established for this publication, and offered their services. The Federal Office responded that it could handle the necessary administration, and mentioned that a letter of appreciation for the accuracy of their reports had been received from the editor of the ODW.<sup>3</sup> After 1970, until his untimely death in 1989, Steven Seward took over this function and was the ASO contact for the ODW. He was succeeded by Greg Brudenall, ASO Secretary at the time. This function is now performed out by John Coolican.

On assuming office, the Rickleman Executive<sup>4</sup> asked Gates to reconvene his Committee, and, having regard to the recently altered rules for membership, to suggest changes in the application form. They also requested suggestions for streamlining the processing of applications. This was later seen more as a proper function of the Education Committee.

In 1980, Gates said that, as his Committee had nothing to do with membership, its name should be changed to 'Directory Committee'. He continued as Chairman until David Hellstrom assumed the position at the 1982 Congress. Gates hoped that newer methods of handling information would make the job less tedious. Initially it was a list of Full, Provisional and Associate Members. To this was added, lists of the Society's office bearers and then the addresses of all Members' branch practices, fax numbers and email addresses. ASO President Bowden suggested<sup>5</sup> that the format be changed to include information useful in patient transfer such as the preferred type of appliance, place and date of graduation. The possible inclusion of the types of appliance members would be willing to accept had been first raised by the Victorian Branch eight years earlier.

Bowden, who was very progressive in the use of new technology suggested that consideration be given to using the ADA computer, or an ASO computer, if one was purchased. Hellstrom thought the ADA data system was ideal for the Directory, because it already contained most of the information required. He added that it had the additional advantage of ensuring every member was also a financial member of the ADA. Just as Mollenhauer had increasingly used computer technology for the production of the Journal, so too Hellstrom began to use it for his publication. He was pleased that, when the administration of the ASO moved to its permanent office, even though the office found that the production of the Directory was one of their biggest problems initially, that his disks could eventually be read by the computer in the Secretariat's office, which had not been possible with computers used by the Executives. The membership indicated unanimously that they wanted the Directory to be updated yearly. Concerns had been expressed at that time about the confidentiality of member information. Subsequently, members were advised to keep the Directory confidential, to avoid a copy falling into the hands of somebody, who might, for commercial purposes, sell the intellectual property it contained for promotional purposes.

As the Secretariat took over the ASO functions, the Directory Committee became redundant and was discontinued in 1993. Curtain, as ASO Secretary, was able to report for that year that there had been very few claims of inaccuracy.

The ASO Directory continues to be an annual production and contains lists of all the significant functionaries in the Society, together with the details of all ASO members and includes a list of members of the AOB. Apart from the constant difficulty of ensuring accuracy and currency (the 2007 issue required a large addendum), the only major issue in recent years concerned the listing of Associate Members. This came to a head when, in error, the listing of a Full Member was deleted, and an Associate Member was listed for the same area. This latter was a general practitioner with a substantial interest in providing orthodontic treatment. The aggrieved member proposed that the Directory discontinue listings for Associate Members. However this proposal failed to achieve agreement at a General Meeting and the listings continued. Slowly the number of Associate Members has declined and the issue no longer has currency.

Who owns the intellectual property contained in the Directory? What use can be made of it? Amendments passed in 2001 to the Privacy Laws prevent further use of this data. ASO data has not always been secure. Attention was drawn to a CD Rom produced by a commercial organisation, Dentists Jobsearch, operating as an employment agency, which listed all the orthodontists in Australia regardless of category. The Executive was concerned that having Associate Members share the listing with specialists was misleading, but the infringement of privacy must be of more concern.<sup>10</sup> Society Minutes do not record any problems from this production.

The Secretariat had allowed various organisations, both professional and commercial, use of its membership information to allow them to circularise the membership. It does this by providing, on request, printed labels for posting. But there has been no attempt to profit from the material.

It had always been the view that a Directory be published yearly. Because its production is an expensive exercise, there were frequent suggestions that it not be published every year, only with each change of office bearers (i.e. at each Congress). Watson said that the membership had indicated that the Directory was the greatest service the ASO provided for them, but its inclusion on the website meant that printing a new one only for each Executive term was reasonable, and this is now the practice.

## The Archwire Standards Committee

One of the early roles the Society saw for itself concerned assistance to members with dental materials. The ADA had a parallel interest. At this time, standards for many of the materials used in practice were either nonexistent or inadequate. McEwan reports that the NH&MRC had provided some funding, commencing in 1939, for a Research Scholar, Howard Worner, to study amalgam and from that came the Dental Materials Research Laboratory<sup>11</sup> which was later subsumed into the Commonwealth Bureau of Dental Standards when it was formed as part of the Australian Bureau of Standards (later the Standards Association of Australia)



Silent Clinic at an ASO Congress

in 1947. Worner went on to become a famous metallurgist.<sup>12</sup> The Society and some of its members individually began to work with people in that Bureau. Probably the first contact with the ASO was in 1957, when Alan Burgess, in his NSW Branch President's Report, stated that the Standards Association of Australia (SAA) had approached the ASO to have representation at their meetings.

In 1963 R.Y. Norton, ever the visionary, wrote to ASO President Kevin Henderson<sup>13</sup> suggesting he talk to Alan Docking from the Commonwealth Bureau of Dental Standards about standards for orthodontic materials, saying that to his knowledge nothing had hitherto been done along these lines. The ASO formed an Orthodontic Standards Committee, with Norton as convenor. A committee in Victoria was also working in liaison with the SAA<sup>14</sup>. Draft copies of a Standard for Resilient Orthodontic Wires were sent from the Executive to all Branch Secretaries with the suggestion that comments be sent directly to the SAA.<sup>15</sup>

Earlier Kevin Henderson<sup>16</sup> had expressed the view that if there were "a set of standards for orthodontic materials, the Association would have a strong weapon when approaching the department" to have the recently imposed tariffs dropped.

As ASO President, he had written to ADA Secretary John Newton,<sup>17</sup> "My attention has been drawn to the probability that a radical increase in Federal Customs Duty on certain items ...is pending". Prompted by Norton, the ADA formed a committee to review the import duty on dental items with special reference to orthodontic materials. The interest had been sparked by the expected imposition of duties, of 40 per cent and more, on a huge range of imported orthodontic supplies. A.J. Wilcock, who was well known as the developer of the wires used in the Begg technique, had sought tariff protection for his materials. At that time Australia had a protectionist policy towards foreign trade.

The government's response was very broad-brush and tariffs were heavily increased across almost the full gamut of orthodontic materials, most of which Wilcock did not produce. The first task the author embarked upon for the ASO was to discuss this matter with officials in Canberra. He was unable to make the

slightest difference. The 'A' team was then put in and Norton successfully lobbied for the reduction of some of the recently introduced tariff increases. The ASO was to work in harmony with the ADA for many years on tariff policy, until alternative economic theories produced a change in government policy, and protective tariffs were generally dropped or drastically reduced.

The Executive reported to the 1966 General Meeting that, following comment from members, they had contacted the Commonwealth Bureau of Dental Standards to develop standards for orthodontic elastics. Alan Docking responded months later<sup>18</sup> that arrangements had already been made with one of the rubber companies to use their facilities for 'accelerating aging' tests. He also said that the SAA were in the process of setting up a committee on orthodontic materials. The ADA at that time had an operational Dental Materials Board and, in 1965, that body had been involved in developing a standard (T32) for orthodontic wire. It seems likely that interest in orthodontic wires originated with Wilcock's special resilient wire. This wire seemed unlike any alternative used in Orthodontics at the time.

Names were requested, to represent the ADA on this technical sub-committee of the SAA, to consider the preparation of standards for orthodontic materials. The ADA contacted the ASO. The names given were John Wilkinson, who had just completed a doctorate on the subject<sup>19</sup>, Darryle Bowden and Brian Lee who maintained a long term interest in the subject.

The two men who were working on this, and maintaining contact with the ASO were Alan Docking and Albert Ware, both of whom spoke at various times to ASO Congresses and contributed articles to the AOJ. Alan Docking was made an Honorary Member of the ASO in 1966 and Honorary membership was also suggested for Albert Ware by the Victorian Branch.<sup>20</sup>

In 1968 the Bureau had decided on a sequence for the investigation of materials, first elastics, then cements, then the quality of metal bands. A survey was conducted among Orthodontists to establish their wants and experiences. Ware wrote to Council in January 1969, advising what actions should be taken, and Council received draft specifications for elastics and cements in June 1972. By 1974 these specifications had been made substantive.<sup>21</sup> At the same time, the NSW Branch<sup>22</sup> requested that Council write to all manufacturers of orthodontic wires, asking them to submit samples to the SAA. The SAA were asked if they wanted that contact made. The response was positive, and in 1973 Ware suggested that he and Ron Masson prepare a report for publication on stainless steel wires and, following testing, a report was prepared for the ASO on resilient wires produced by several manufacturers. The Executive encouraged Masson<sup>23</sup> to forward his report to the Journal for publication<sup>24 25</sup>. Specifications for latex elastic bands and orthodontic cements were also received in 1974.

Alan Docking, Director General of Dental Standards at the Standards Association of Australia, suddenly passed away in September 1973. The Council saw fit to make a donation to the Diabetic Association in his memory.<sup>26</sup>

A recommendation came from the 1977 General Meeting in Queensland that the ASO should form a committee to instigate the certification of orthodontic

wires in accordance with the Australian Standard 1964, T32. Much of the impetus for the orthodontist's involvement came from the Begg Light Wire Study Group. The Orthodontic Archwire Standards Committee was duly formed under the chairmanship of R. A. Miles. This was later renamed the Orthodontic Standards Committee.<sup>27</sup> Miles presented a report for the 1980 General Meeting: "Manufacturers of archwire in common use in Australia have been circulated with copies of the Australian Standard 1964". The circular asked the manufacturers for their cooperation, and comments, in allowing their wires to be certified. There were however a number of unforeseen difficulties. Miles continued "The Australian Standard 1964 had been made metric. Several manufactures of wire supply markets in which the imperial system is used. This dual measuring system can complicate the tolerance allowed for different sized wires. Dr Ron Masson the mover of the original motion, who has done considerable research on wires and their properties in particular relationship to orthodontics, feels that the proof/stress quality of wire is an important factor in the performance clinically for the orthodontists. This is not as yet part of the Australian standard."

Miles felt that they had only just begun to scratch the surface of the issue. "However it is the hope of the Committee that further perseverance will enable a greater progress towards satisfying the original motion proposed in Surfers Paradise". Soon however, Miles saw no real role for his Committee and recommended that it cease to exist. Twelftree was asked to keep a watching brief over the situation.

The SAA formed two new committees, Materials and Instruments.<sup>28</sup> Brian Lee, as the ASO representative on the Standards Association, offered to send a circular to all members requesting comments favourable and unfavourable on materials in use.<sup>29</sup> In 1986 the Standards Association of Australia contacted the Australian Dental Standards Laboratory (renamed from the Bureau), indicating that it was over 10 years since the standards of elastomeric materials had been updated and the Executive was advised. Twelftree was asked to arrange an update for these materials.

Activity died down until John Fricker prepared a submission on an international standard for orthodontic materials and equipment, which was forwarded to Prof. Martin Tyas, regarded as the expert in dental materials.<sup>30</sup> Tyas asked the ASO to comment on the need for an International Standard for Orthodontic Materials.<sup>31</sup> The matter was last raised at the Council meeting in June 1995 when John Fricker referred to standards for orthodontic wires. The previous standard, completed in 1987, was solely for Stainless Steel wire. Council agreed that there was a need for an international standard, looking at what is relevant in clinical practice. By this time there were many new types of wire available.

The demise of the Commonwealth Bureau of Dental Standards as it became, first, the Australian Dental Standards Laboratory and then in January 1985 was subsumed into the Medical Devices and Dental Products Branch of the National Biological Standards Laboratory, part of the Therapeutic Goods Administration (TGA)<sup>11</sup>, eventually saw activity cease altogether in 1991. Brian Lee complained about this in his first editorial as the newly appointed Editor of the Journal. Tyas wrote an epilogue to Chong's History of the Australian Dental Standards Laboratory.

Subsequent to this, the growth of the industry which supplied orthodontic materials and the federal government's tightening of the purse strings on much of Australia's technical research effort, meant that the Society had ceased to have a meaningful role in the setting of standards for materials.

From the reverse point of view, as recently as 2006, the OSC was looking at the members' responsibility, and the responsibility of the ASO, in complying with the new TGA regulatory framework in the use of materials in orthodontic practice.

## Cleft Palate Reference Committee

The orthodontic treatment for people born with a cleft lip and/or palate has always been of great concern to the orthodontic speciality; in fact, one of the first activities of the ASOFRE in 1972 had been to call together professionals from all the groups involved in treatment for these people for a meeting, which attempted to collate details on the situation throughout Australia. This was probably the first time such a meeting had been held.

One of the main findings was that such treatment was best done by a centralised team, expressly devoted to such work, but that this was not always the existing situation.

W. F. Brogan, an English-trained orthodontist employed, part-time, by the Perth Dental Hospital, had been agitating for some time for more government involvement in the funding of this treatment. At the constant behest of Brogan, Jim Mackie discussed with ADA Secretary John Newton possible inclusion into Hospital and Medical Benefit schemes of orthodontic treatment for patients with cleft palates.

In addition, he (and others, including Gordon Hinrichsen) had urged that rapid maxillary expansion (RME) should also be considered for inclusion with those procedures attracting medical benefits. In this, he succeeded in involving both the ASO and the ADA. The current ASO President at the time, L.M. Smart, provided support, but some in the ADA were not so sure. These discussions continued for some time during which it had first to be decided whether the procedure itself was sufficiently valid for its respiratory effect. Eventually, inclusion into the Medical Benefits Schedule for this procedure was denied. This prompted Brogan to threaten resignation from both the ADA and the ASO. Brogan argued the same case for orthodontic preparation for orthognathic surgery. He could not see why medical benefits could be received for treatment by some dentists (in this case, oral and maxillo-facial surgeons) and not others.<sup>32</sup>

In 1974 in Sydney two friends gave birth to children at about the same time. Both infants were born with lip/palate defects, and the organisation now known as Cleft Pals was born. This quickly grew to have branches Australia-wide, and exists to provide advice and support to families who have a member born with a cleft lip/palate. One of these mothers, Mrs Gerry Nicholas, acting as Secretary of Cleft Pals, wrote, also in 1974, requesting the co-operation of the ASO in supplying information to the government to obtain medical benefits for those aspects of cleft palate treatment beyond those provided by medical practitioners.<sup>33</sup> Council responded

to Mrs Nicholas, pointing out that the dental care involves disciplines other than Orthodontics and her approach should best be made through the Australian Dental Association.<sup>34</sup> They promised their support for such an approach.

Brogan provided information on a scheme currently in operation in Switzerland, which was passed on to the ADA.<sup>35</sup> Brogan decided, of his own volition, also to involve local politicians, and sought the aid of The Hon. J. Hyde, the Member for Moore, an electorate in Western Australia.<sup>36</sup> Whoever was listened to most is uncertain, but late in 1977 the Department of Health wrote to the Australian Dental Association saying that it was looking at providing financial assistance towards the expenses associated with orthodontic treatment for cleft lip and palate and related conditions, and invited the ADA to attend a meeting. The Department further went on to suggest that, as orthodontists were vitally concerned, the ADA might ask representatives from the ASO to attend. A Department of Health committee was formed, with R.G. Henry and E.J. Peel representing the ASO.

A meeting of officers from the Department of Health, Specialist Societies and the ADA was held in February 1978. Abbott and Chapman were the orthodontists present. John Chapman, who had spent some time at the Hospital for Sick Children in Toronto, arguably the leader in the field, provided a break-down of the various elements of orthodontic treatment required for cleft lip and palate patients. His paper outlined the various stages in the growth of a child where intervention might be required, and the various types of treatment that might be employed.

Chapman also divided the required treatment into 'units of service', which took into account the time required and the estimated numbers of visits, at each stage and for each treatment. It was written in non-clinical language, so that the bureaucrats could gain an understanding of the commitment the scheme would require. Matters discussed involved possible funding for elements not currently covered by Health Benefit Schemes, and the need for multidisciplinary clinics. The report was also published in the ASO Newsletter.<sup>37</sup>

Darryle Bowden reported that the issue of dental benefits for cleft palate patients was considered at a meeting in June 1978 of the Orthodontic Services Committee and representatives of the Australian Dental Association.<sup>38</sup> A policy for financial assistance to cleft palate patients adopted by the Orthodontic Services Committee was tabled at the Federal Council meeting held the same month. It stated that cleft palate patients should not be singled out for assistance without due consideration for other patients with first arch defects, and that treatment for cleft palate patients was not suitable for general practitioners. The work was best done by experienced teams, but patients must have a freedom of choice.

It was resolved that a 'Treasury' type of fee schedule (as for the Repatriation Department) for orthodontic treatment of cleft palate patients was unacceptable to the Society, and that Darryle Bowden, as Chairman of the Orthodontic Services Committee, would prepare a draft policy on treatment of cleft palate patients to aid further negotiations. This was accepted as ASO Policy at the 1980 General Meeting. It begins:

The Australian Society of Orthodontists pledges itself to support that disadvantaged group within the community with severely handicapping deformities, and particularly the children with cleft lip and palate anomalies.

It added that it wished to assist this group in every way possible. It reiterated that the specialised skills involved in the overall management of cases required a multi-disciplined approach, including specialists in plastic surgery, ear, nose and throat surgery, children's Dentistry, Orthodontics, oral surgery, prosthodontics, speech pathology, psychology and audiology. Ideally these specialised teams should be confined to specific units situated in closely populated areas, and all treatment for patients with these abnormalities should be within these units. The list of conditions or diseases so covered should be determined by the Society from time to time. Remuneration should be equal to that of other specialists and that families should be able to receive rebates for payments for orthodontic treatment in the same way as they would receive payments for surgical and associated treatments.

Although slightly rewritten, this policy remains in force today.

Chapman and Bowden, both heavily involved in such treatment, met with the officials of the Department of Health, to decide the final form in which the orthodontic benefits would operate. The announcement was made during 1980 (The Year of the Child), and the scheme was finally introduced in January of 1981. Richard Abbott took a position on the working party involved. Orthodontists had to obtain accreditation, as having some expertise in treating this condition, before their patients could obtain benefits.

Initially, certification of eligibility of the patients to receive benefits (as opposed to eligibility of the practitioners), could only be provided by special clinics attached to major hospitals in capital cities. After May 1982, practitioners involved in the treatment could also provide that certification.<sup>39</sup> In addition, there was a change in the Department's ruling, allowing accreditation of non-specialist practitioners from remote areas, where they could demonstrate capability in handling these cases.<sup>40</sup>

The early 1980s was a period of high inflation, and it was not long before increases in the recommended fees were sought. For a while, nothing happened. Just over three years after the scheme started, Bowden complained to the Department of Health that, in that period when the National Wage had increased 48.3 per cent and the Consumer Price Index 46.6 per cent, there had been no fee increase. "The position is fast approaching where our Society members must seriously question our continued cooperation in a scheme with such injustices." An increase followed.

Scheduled fees were increased again (17.5 per cent) in August 1987. The medical benefit rebate remained at 80 per cent of the scheduled fee. It had been found that 87 per cent of the charges had been for the rebate only.<sup>41</sup>

In 1983 a Cleft Palate Reference Committee was formed as a standing committee of the ASO in 1983 with R.G. Henry as convenor. Henry reported to the 1984 General Meeting that the scheme had met with overall approval, and all the 'bugs' had been ironed out. The Committee had proposed that the scheduled fees be increased in line with increases in scheduled medical fees. In Queensland, which had the most

decentralised population, some of the orthodontists who visited these regional centres complained of difficulty in achieving accreditation.

After Henry became ASO president, the Chairmanship devolved to John Chapman, who remained in service until 1996. During that time he made many detailed submissions to the Department of Health (under its various names, currently Department of Health and Ageing) for improvements to the scheme, and for increases in the rebates that patients could receive. Chapman was highly regarded by the officers with whom he dealt for the accuracy of his cost estimates. As well as making the scheme more closely resemble normal orthodontic practice administration, he was able to include special provision for retention devices, including cast metal partial dentures. This had been sought almost since the scheme began.<sup>42</sup> Negotiations about the level of fees have been continuous.

In 1996, as Chapman's retirement was announced, the ASO bestowed upon him a Meritorious Service Award in appreciation for all his work. He, and David Hellstrom, who received his Award at the same time for work on the Directory, were the Award's first recipients. Kit Chan, who had been on the staff at the Children's Hospital working with Keith Godfrey, assumed Chapman's position.

To help with the administration of this scheme, the Government formed an advisory committee, the Medical Benefits (Dental Practitioners) Advisory Committee. The ADA nominates the dental appointees. For a long time it was chaired by Oral and Maxillofacial Surgeon, Frank Monsour, and included, until 2005, Helen McLean from Adelaide, representing Orthodontics. Dr McLean also served on a number of ADA committees so her input was most valuable.

The short-lived Australian Council of Dental Specialists (ACODS), while the ASO representative was its Chairman, was able, in the late 1990s, to convince departmental officers that orthodontists and other dental specialists should be able to refer patients for x-rays necessary for diagnostic procedures for cleft palate treatment and that the fees entailed should attract medical benefits. This was a situation already enjoyed by Oral and Maxillofacial Surgeons. These procedures included Computerised Tomography (CAT), Technetium and MRI scans and bone-age studies.<sup>43</sup> A continuing education programme to support this extended prescribing right was also mooted.<sup>44</sup> ACODS also succeeded in extending the number of conditions to be included under this scheme, but failed in having a wider range of services essential to the care of people with congenital defects included in the scheme. They did succeed in achieving an increase in the age, up to which benefits can be paid, to twenty eight.

## Public Relations Committee

During R.G. Henry's term the ASO, realising a need to lift its public profile, formed a Public Relations Committee under the Chairmanship of G.R. Dunn.<sup>45</sup> Dunn was a recent Past-President of the NSW Branch of the ADA, and a central figure in their public relations medium, the Dental Health Education and Research Foundation. He immediately honed in on a general need to improve communications with

patients and their parents. Interestingly, he added that more younger members should be encouraged to be active in dental politics.

The idea of such a committee was originally touted during Bowden's Executive. The possibility of the ASOFRE playing a role was discussed.<sup>46</sup> Dunn recommended to Council a rather encyclopaedic programme involving pamphlets, education of GPs, a national advertising campaign and formation of a committee in each State Branch. All this required copious funding, for which he felt a grant should be sought from the Foundation.

This utopian approach, naturally, was unsustainable, but it did increase the general consciousness. Minds were turned to the use of available resources, mainly from the AAO, but also to developing some of our own. Dunn presented a comprehensive range of options, which included a national advertising campaign along the lines of that conducted by the AAO, concentration on educational programmes for general practitioners, and the establishment and maintenance of solid relationships with all facets of the profession. He also mentioned ethical use of auxiliary personnel.<sup>47</sup> ASO President Henry reported that the activities of the PR Committee were to an extent hamstrung by the ADA, who were against any suggestion in corporate advertising that Orthodontics would be best carried out by specialists. How closely the Society should work with the ADA needed discussion.<sup>48</sup> The need to promote specialist services in Orthodontics was one of the main rationales behind the development of a public relations programme.

Each State Branch established its own committee and these were co-ordinated federally.<sup>49</sup>

Academics Wayne Sampson and Michael Woods were the succeeding Chairmen throughout most of the 1990s. Sampson produced a highly successful brochure 'Do you want straight teeth?', containing photos of his daughter whose treatment he had recently finished, and of his dog, who had not been in such need. Woods decided to tackle one project a year, and produced, in conjunction with a supplier of orthodontic materials, another brochure, this time on early treatment and an attractive poster for use in schools, in community health centres and in the surgeries of referring practitioners.

For his annual report in 1996, Woods added a thoughtful message on PR in general, saying that it needed much thought, and should not turn, as it easily could, into aggressive marketing campaigns to undermine colleagues who could be thought of more as competitors.

It could be said that Dunn's efforts were attitudinal, striving to influence members to look outside the confines of their surgeries to the feelings of their community, whereas the later efforts were largely internal, to provide the individual orthodontist with material to be used in the practice. Subsequent efforts tended to be external in that they focused on mediums outside the profession.

The ASO always saw the provision of educational opportunities for general dentists amongst its obligations. Throughout most of the 80s this was one of the major focuses of the Education Committee. The Education Committee began to focus more on Graduate education under Freer and during the 90s formed a subcommittee

devoted to general practitioner education chaired by Paul Schnieder of Melbourne. Like others before him, he attempted to build a package and co-ordinate the work being done in the States. Most of the short-term courses had limited impact. The principal reason for this may well have been that much of the content had to be cautionary in nature and as such the experience lacked what might be called a 'Wow Factor'.

On the other hand, many members wanted to restrict attendance at presentations by visiting orthodontists to specialists. In fact at the 1987 General Meeting By-Laws were passed which stated that "any course run by a Branch or Committee of the Society may be restricted in attendance to Full, Provisional or Student Members, where the course content is deemed to be 'specialised' in nature". However this impacted on the rights of Associate Members. Many Associate Members were specialists in their own field and the Queensland Branch made its opinion known that it did not want to disenfranchise this group.

The involvement of general practitioners and pedodontists in Orthodontics was of concern not only in Australia, and had been addressed by such notable figures as Graber, Holdaway and Woodside, who called a meeting in 1974 to voice their concern. This issue reached huge proportions with the arrival in Australia of a Dr Truitt from the US. This clinician, with his almost evangelical message, was able to convince a large number of general dentists in Australia of the efficacy of his methods, and of the advantages that would accrue to dentists who used them. It is fascinating to recall that this was similar to one of the first issues facing the newly formed ASO, when its Executive took issue with a commercial laboratory, partly owned by an Associate Member, and loudly supported by one of Sydney's premier general practitioners, advocating techniques not entirely dissimilar. As previously discussed, the ASO president at that time, Arthur Thornton Taylor, had cause to write several letters to the Australian Dental Journal to oppose this form of 'mail order' Dentistry.

The movement was by no means confined to these shores. Truitt visited Australia a number of times and others of similar mind came also. An association, the Australian Academy of Orofacial Orthopaedics (AAOO), was formed and grew as did a certain amount of antipathy between the 'disciples' and the ASO membership. The ASO approach initially was to be somewhat inclusive, and invitations were issued to members of the AAOO to attend clinical meetings and subscribe to the AOJ. Few subscriptions resulted. The author met with Derek Mahoney, AAOO President, who was a qualified orthodontist trained in the UK, and suggested that there could be two parallel organisations such as existed in periodontics, one for the specialist and one for those interested in the field. Ian Watson, who attended an AAOO symposium was of a similar opinion<sup>50</sup>. The same thing was happening in the UK after the formation of the purely specialist British Orthodontic Society in 1994.

The AAOO acted in a very entrepreneurial manner. They sought and, despite objections from the ASO and four State Branches of the ADA, achieved affiliation with the ADA. The conditions placed by the ADA on that affiliation were that they cease to use the title 'Academy' and that they would not become involved

in promoting entrepreneurial courses of doubtful scientific value. At one stage the AAOO attempted, without success, to change their name to the Australian Association of Orthodontics and Orthopaedics. There was some sponsorship of clinical presentations, including a course conducted by the eminent Dr Robert Ricketts. Ricketts's course was reported as dealing in great detail with diagnosis and treatment planning, (similar to his earlier presentations to the ASO), which in the view of some of the attending orthodontists, was not really what the AAOO members wanted to hear.

It is not the place of this history to discuss the science involved, or indeed, clinical preferences. The difference in the clinical approach between what might be called mainstream Orthodontics and those of the followers of the AAOO, was that the latter considered that extractions were over-used by the former. In reverse, the mainstream believed that the latter placed too much faith in jaw-repositioning techniques and the potential for expansion of the dental arches. Orthodontists were also concerned at the relatively short-term instruction which encouraged general practitioners to attempt quite heroic treatments. Naturally orthodontists were also concerned that they might have fewer patients in their own practices, that patients and their families would become confused and, in the long term, concerned that there might be a mess to clear up in the form of wholesale relapse.

Inevitably, the imbroglio reached the media, never reluctant to enter such an affray. In 2003, the media became aware that the President of the AAOO, Derek Mahoney, had reported having been consulted on many occasions for a second opinion, and that 90 per cent of the children concerned had had extractions recommended, whereas his opinion was that the need for such extractions was almost zero.

Although the ASO Executive was not initially involved, the Chair of the Public Relations Committee and President of the Victorian Branch, Geoff Wexler had the unenviable experience of being interviewed by Richard Overton of the well known television programme '60 Minutes'. In this interview, although the producer did reveal the rules of the interview in advance, the theme of the programme, which was clearly antagonistic to the points argued by Geoff Wexler, was kept secret until the interview was underway. Aspects of this difference in approach, emphasising alleged unnecessary extractions, were published in many places. Most of the public became more, not less, confused by the screening of this interview, which would have been heavily edited but which on the website extends to over 80 pages. The ADA made public its support of Australian Orthodontics and the ASO. It was also critical of the programme's use of material from the UK, which it said was irrelevant. ASO President Ian Watson had his hands full hosing down the general hostility. Several members were sufficiently disturbed to pursue the matter. The ASO council was not so sure.

Mahoney published an apology, entitled "60 Minutes: A personal perspective", which headlined "I was particularly disgusted by the promos for the 60 Minutes segment that made out orthodontic treatment was causing more harm than good."<sup>51</sup> Four months later a retraction of the criticism appeared in the same publication. Mahoney must have been more intimidated by the wrath of the 'big end of town', than of his own colleagues. In the end, the clinician who had brought the matter

up, Mahoney, also a member of the ASO, was asked to show cause why he should not be asked to resign. In the end that is what he did of his own volition. The ASO lawyers were consulted throughout. Minter Ellison recommended<sup>52</sup> that he be accused of “persistently and willfully acted in a manner prejudicial to the interests of the Society”. It was interesting that they had to decide whether action was to be taken at the State or Federal level. They opted to initiate moves for expulsion from the State Branch, if it ever got that far, because the Federal Constitution said that membership of a State Branch was required of all ASO members, but the State Constitution contained no such clause in reverse. In actual fact this issue provided impetus for extensive legal work to bring the Federal and State Constitutions into harmony.

At the time of writing, after over 20 years the AAOO continues to exist and has over 300 members.<sup>53</sup> Doubtless, there is more orthodontic treatment carried out by its members and other general practitioners as a result of this phenomenon, than before Dr Truitt visited these shores. In fairness it is possible to argue that, over the same period, there has been something of a paradigm shift in the nature of all orthodontic treatments.

By contrast, the involvement by general practitioners in other forms of dental treatment, frequently carried out by specialists, seems not to be a major issue for any of the other specialist societies or academies. There are parallel general practitioner oriented societies in endodontics, periodontics and prosthodontics. All operate in complete harmony with the specialist groups. In fact, just as those who taught in the Sydney ‘long course’ in Orthodontics used to say, that those who completed the course became the best referrers, so too those who undertook courses in periodontic treatment also came frequently to refer their work.

## Later Developments

Albert Wong replaced Woods as Committee Chair, and was also tasked with the development of a website. It had been suggested by several members, including K.G. Marshall, that it was high time the Society developed its own website. Websites have since become, of necessity, a face to the world for all organisations.

Realising that the public really lacked information about Orthodontics, a media based marketing plan was discussed and the decision was taken to employ a PR consultant. Naturally the budget escalated. Whereas previously the supply houses had been the principal financial support for preparation of educational material developed by orthodontists, about \$30,000 was set aside from ASO funds and the State Branches were also asked to contribute.

A survey was undertaken to look into attitudes both of orthodontists and their patients. There had been a number of surveys previously conducted by students, which uncovered a surprising degree of ignorance, even apathy, among the general population about Orthodontics and a very low profile for the ASO. It is not certain how much of this work was noted by the PR consultants.

At this stage the principal focus of the campaign, if it can be so called, was on the threat posed to Orthodontists by general practitioners carrying out treatment. Sixty-two per cent reported that this was a major problem for their practice. A few years later, Geoff Wexler, who became Chairman in 2002 wrote that “the ASO PR Committee was born of a wish to differentiate ASO orthodontists as the premium providers of orthodontic services. And that is still our purpose”. There was overwhelming support for a long-term strategy in public education.

Wong also developed a series of public educational packages principally directed towards the media, which would contain and be funded by advertisements from individual orthodontists. This initiative was seen as being distant from the ASO, the ethos of which would wish to be seen as impartial and expert, and also as appealing to the media because of the advertising revenue that would accrue. Some more brochures were prepared to replace Sampson’s one, which by now needed updating. These were to contain more information and to broadcast the more ‘punchy’ messages which the media releases contained. Wong’s view was that the ASO’s PR needs should be carried out by people experienced in work of this type.

A trial series of ‘Community Education Programmes’ was commenced in Victoria and the first in the series was published in 34 regional newspapers again financed by advertisements from individual orthodontists. For the second, 57 orthodontists participated. The messages discussed such things as “*Am I too old for braces?*” and “*The best age for braces?*” In the final analysis, not a lot of positive feedback was received.

The PR consultants also produced, monthly, a newsletter called ‘Illuminate’ the purpose of which was to interpret for members the findings of the survey. In reality, it was the PR company practicing what it preached. ‘Illuminate’ quickly fell into disrepute because, unknown to the consultants, no one from the ASO was actually vetting the material. Members became disturbed by the content. At the end of the agreed period for the first newspaper trial, the ASO withdrew its support for the Publication and for the PR company producing it. Despite this embarrassment, the PR company had been given its entrée into the world of Orthodontics. Through its association with the Society, it had learned much about the commerce carried on in the orthodontic specialty, both from the survey commissioned by the ASO and from a few private consultancy experiences. The company continued to advertise their wares and to seek involvement from individual orthodontists. There even developed an argument over who owned the intellectual property from the survey, which the ASO had financed.

This, the Society’s first foray into commercial public relations had really been of questionable value to the Society, even in the eyes of its strongest advocates. The exercise gave birth to a private PR firm, which continues today in Melbourne and Sydney as a private consultancy to individual orthodontists.

Promotion was not only federally based, but each State Branch had separate plans. A levy was mooted in NSW. Some members made contributions, but the memories from 1993 prevented this from being compulsory. The Victorians sought pledges from their members, and some funds were raised that way. After discussions, the

Victorians did not agree to pool funds for PR; instead the members devised a scheme to pool funds for a large entry in the Yellow Pages, to include listings of all those participating.

It is hard to judge how effective, if at all, the ASO public relations campaign had become. In 2004, the new chairman was at pains to point out that no matter how many resources the ASO committed, in the final analysis, most of this was up to the individual orthodontist operating at the coalface. However the PR Committee was full of energy, searching for effective ideas.

The membership had no understanding of the costs involved in using external help but it was realised that the Society did need help in its dealings with the media. Some media coaching began. The media was employed for the first time in preparation for the '60 Minutes' programme. At the time, the media coaching was thought to have been effective in minimising the damage that could have occurred without coaching. Coaching also opened opportunities for promoting the ASO's corporate message. While '60 Minutes' afforded a hostile opportunity that spurned the ASO message, positive opportunities for ASO messages continue to occur in radio and print media. Focus has moved more towards providing information, stressing benefits, and promoting ASO members as the preferred providers.

A levy was considered, "to fund an ASO public education and awareness campaign and related PR needs". The proposal was for a contribution of \$1000 a year from each member for three years. A postal vote to bring this about was narrowly defeated.

The PR Committee was restructured in 2004, to include four members of the Victorian Branch, including ASO President E.C. Crawford, as well as a representative from each State. \$10,000 was allocated for 2005 to employ a PR consultant. Among other things, the Committee proposed a logo change and initiated a programme called 'Give a Smile'.

Rhonda Coyne assumed the Chair in 2006 and the Committee became Queensland based, again to match the Executive, but still with a representative from each state and shortly thereafter it was renamed the Communications and Information Committee, "to reflect its role as the brand and relationship builder."<sup>55</sup>

## Give a Smile

'Give a Smile' has come to be referred to by the easy acronym GAS not by the Council's intent but by its ready acceptance after use in the media. It was, in the first instance, the idea of Di Crawford, wife of E.C. Crawford when he was Vice-President of the Society. Musing on his impending term of office, he was going through all the things he wanted to accomplish when his wife suggested he might do something "really useful", go outside the square, and set up a programme where ASO members, instead of (or in addition to) their usual practice of donating money to charity, could make available to some who could otherwise not afford it, that most valuable of all, their own expertise. The basis of the idea was that members could carry out a treatment, without fee, for a person who was on the

waiting list of a State health service. The waiting lists for orthodontic treatment had grown to tremendous lengths, as in so much of Australia's health system. Doing this through a State instrumentality kept the selection of those who would receive the treatment, and they were not all children, at arms length and was more in keeping with the concept of a service rendered by an 'honorary' professional. ASO members would enlist in the scheme, and each year would be allocated a patient from a waiting list, who was conveniently located and in obvious need.

Council, after some initial reservation, endorsed the concept in May 2004. Initially its operation was under the umbrella of the Public Relations Committee which, unusually, was chaired at that time by the ASO President himself. Taking leadership of this Committee underscored the importance Crawford attached to this project. To organise the scheme, a three person committee was formed, including John Armitage, who had enormous experience across a range of ASO projects and whose wife Annette also proved to be an invaluable contributor. This grew into a larger committee with a Chairman and two others from the same State and also a representative from each of the other States. A liaison officer was secured in every State, to work with the relevant government department in the allocation of patients.

As the project grew to reality a wide range of skills became required, and much of this was rendered gratis. A public relations consultant, Sally Romano from News Release Express, donated her services. A graphic designer, Rebecca Lorraine, and the proprietor of her firm, Baseline, Betul Madakbas, gave generously of their expertise to ensure for the project, a recognisable feel and brand. Probono legal advice was also forthcoming from Graeme Johnson, an old friend of Crawford's.

'GAS' became a registered trademark, and thus became 'GAS™'. Legal advice was that the objectives of GAS™ should be included among the Society's Objectives listed in its Constitution, and an appropriate By-Law was added providing for the Committee charged with its administration. A separate trust was required because in some State health organisations co-payments from patients are required and these funds must be accounted for correctly. This has resulted in there being not one but two standing committees of the ASO supporting this function. The second one is solely devoted to the Trust itself. Like the ASOFRE, the GAS Trust must submit its accounts to Council every six months, and also produce audited accounts annually. Further legal advice sought to protect the brand by always referring to it as 'Give A Smile™' or 'ASO Give A Smile™' meaning that a trademark applies.

A part-time administrative assistant is required to handle the large number of GAS activities and projects.

The AAO recognised the fine work embodied in this segment of the ASO activities with an award to the instigator, E.C. Crawford

The scheme was publicly launched in June 2005 by the Hon. Tony Abbott MHR, Federal Minister for Health, under the well known and spectacularly 'toothy' entrance to Luna Park in St Kilda, Melbourne. Tony Abbott's father has featured prominently in these pages.

GAS™ was enthusiastically adopted by ASO members. The first year's target was doubled, and within two years, well over half the membership of the ASO had joined in. This level of involvement (now well over 60 per cent) is thought to be unique in professional organisations. Allocation of patients ensured that almost everyone who joined the scheme was paired with a patient. However, some have expressed surprise that some allocated patients seemed not always to fit the “in need” category.

The ASO has received wonderful publicity from this initiative, and other specialist societies were sufficiently impressed to consider setting up similar programmes. Many offers of further assistance from supply companies, laboratories, and individual dental practitioners have come as a result. As treatments move to completion the PR company is using records, particularly photos, of the happy results, as part of the publicity. Sadly, a media release, centred on the removal of the braces of the first GAS™ patient, and featuring Shane Bourne, a professional



The opening of 'Give a Smile'



The GAS Executive Drs Armitage, Crawford and Skelton with their wives. Annette Armitage is on the Committee and Di Crawford gets credit for the original idea.

actor and comedian, was not picked up by any of the media. Shane, self-appointed 'patron' has been a very generous supporter and has agreed to be the ongoing public face of the scheme.

It can fairly be said that GAS™ is the charitable face of the Society.

## Endnotes

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# Part 4

## The Later Years



## Chapter 18

# Management

The Society seemed to go into a quiescent period after the Bowden Executive retired, partly as a result of the “steady as she goes” attitude of the Executives in the later 1980s and partly as a result of the impossible quorum requirements. From 1991 until 1996 no alterations to the Constitution could be achieved at meetings. A successful postal vote did occur in 1993, mainly to achieve compliance with the Ordinance, under which the Society became incorporated.

The General Meeting in 1993 had to be adjourned for two days in an attempt to achieve a quorum. But when it reconvened, only 77 members were present, insufficient for a vote on matters related to the Constitution.<sup>1</sup> As the Society grew in number, a smaller percentage of the membership seemed to feel any obligation to attend meetings or any interest in doing so. Perhaps the introduction in 1983 of the ‘delegate’ process had, to a degree, disenfranchised the members.

There was, however, a period of intense activity to produce a functioning Constitution. Much of the business of the Society progressively centred on its committees. In fact after 1984, it seems that discussing the Society and its changes is best followed through its various elements. Many are discussed in Part 2. The issues confronting the major committees are discussed in Part 3 of this history. Only the barest précis follows.



Dick Cook, ASO President from 1989–91

During the time of the Perth Executive (1989–1991) significant changes were made to the rules affecting membership, both of local and overseas trained orthodontists. This necessarily involved changes to the functioning of the Appeal Committee. Much of the preparatory work, which eventually allowed the AOB to take shape was done at this time, as was the groundwork to establish a permanent secretariat. Similarly, with the resolution of the College imbroglio. The team from Perth had much to be satisfied about.

The Adelaide Executive continued with these changes and brought them to fruition.

With its permanent Secretariat finally established as a result of the decision taken in 1991, the Society became a more mature organisation. The new Executive was highly experienced. Basil Phillips and Ian Watson had worked together before, under Brian Crisp on the Constitution in the late 1970s, and in organising the hugely successful 1982 Hong Kong Congress. Bedding down the new home was their major concern. Transferring data proved a major difficulty and the Directory information became the real stumbling block.<sup>2</sup>

The Phillips Executive worked steadily and made few changes by itself. However, during that term, the AOB was successfully brought to life. This needed powerful support from the Executive, a fact readily admitted by T.J. Freer. The embargo, preventing ASO members serving as examiners for the College, was finally withdrawn. The Adelaide Executive increased the composition of Council by the inclusion of the Chair of the Education Committee as an ex-officio member.<sup>3</sup> Terry Freer had been able to convince Council, that his position required a seat at the ‘big table’.<sup>4</sup>

The financial position at that time makes interesting, if a little confusing, reading. The auditors were changed in 1989, when the Executive moved to Perth and the method of accounting changed from cash to accrual.<sup>5</sup> Surpluses arising from Congress were then brought in as income, which appeared to make the Society much wealthier than previously was the case. This helps to explain why the Treasurer, Michael Nugent, did not act to increase subscriptions until near the end of his tenure. He attempted to husband the funds with care and expressed his concern at the financial implications of a permanent Secretariat. When the Secretariat commenced on a permanent basis, yet another new auditor was appointed who was to look after the books for the next 15 years.



Basil Phillips, ASO President from  
1991–93

The Society’s finances ran down to the extent that eventually the annual subscriptions were increased in 1993 from \$100, where they had been for four years, to \$180.<sup>6</sup> This turned out to be something of an over-reaction because the

year later, with over \$200,000 in kitty, the new Treasurer, John Armitage, was able to recommend a reduction to \$150.<sup>7</sup> This was helped by a decrease of \$11,000 in the annual cost of the Secretariat. The Treasurer said “they were working in a more efficient manner now they are familiar with the Society and they are to be congratulated”.<sup>8</sup> It may well have been that everyone was on a steep learning curve.

The work of the committees, particularly that of the Education Committee continued. The complicated series of steps through which they progressed is discussed in its own chapter. A national Orthodontic Teachers Meeting occurred first in 1994. Terry Freer had wanted the Society to be seen as taking a special interest in education.

The South Australian Executive were replaced by one equally experienced. G.R. Dickinson, President, J. Curtain, Secretary and A.J. Armitage, Treasurer with E.C. Crawford as Congress Chairman. All four, highly experienced, and veterans from the previous rotation. They all practised at the ‘Paris end’ of Collins St, Melbourne, so that a meeting could be called at any time, no one needing to walk more than 50 metres. Their major focus was the preparation, and achieving acceptance of, a new Constitution, control of the finances and ensuring a first class Congress. Fortunately these men were close friends and the operation went like clockwork. They held the reins for two and a half years.



The Victorian Executive 1993–96

The ASO’s involvement in the World Federation of Orthodontists commenced. A ‘Foreign Affairs’ Committee was started to establish liaison with other Orthodontic organisations, including the NZAO, AAO and WFO and to keep a record of upcoming meetings.<sup>9</sup> This was later, more prosaically, renamed the International Liaison Committee.

The first attempts at conducting Council meetings by teleconference occurred.<sup>10</sup> In his last two President’s reports, Dickinson, in addition to the Constitution, on both occasions, mentioned the efforts made to improve relations with the ADA, particularly with respect to matters involving third party providers. At that time a fairly hard line against specialists’ particular interests was being taken by the ADA. This clearly had also been a major focus of Dickinson’s Executive.

Congress and the General Meeting, which takes place as an integral part, is the climax to the period in office. To hold a successful Congress is the wish of all Executives. Melbourne’s, in 1996, was to be a blockbuster. It saw the first

auxiliaries programme. Initially this programme was highly subsidised by the rest of the activities, but now is a major part of any Congress.

Their major success, after enormous effort, was that the new Constitution was passed. Changes were still obviously necessary but a working and workable document, complying with statutory requirements, had finally been achieved.

At the General Meeting, a couple of days later, the Indemnity Scheme to provide funds to support a practice, after the death of a member, was, at last, abandoned. The opposition to the proposal turned out to be overwhelming.

The requirement for three years experience as a specialist prior to attaining Full Membership was reduced to two.

The next Executive, from the NSW Branch, it has to be said, was much less experienced. Richard Hay was the only member who had been on Council before. He had been there only since 1990 (replacing Patrick Kline). John Coolican, Secretary, was a real rookie, but highly respected for a host of qualities, not the least of which was his ability to pack down in a Wallaby front row (1982–83). John turned out to be a real workhorse, maintained a position on Council for two further terms and subsequently was elected Secretary of the 7<sup>th</sup> IOCC. A fortuitous appointment.

But other than attending Council meetings for three years, the author's ASO experience, for his role as President, was limited. His involvement with organised Dentistry had been through the Registration Boards and the newly formed Australian Dental Council.



The 1996–98 Executive at the Changeover dinner in fine company

This Executive determined to follow closely the example set by its predecessor and was cognisant of the experience, around the Council table, and available to it, through the committees. They had made it known that they were not happy with the procedures for membership application. That and bedding down the new Constitution were their first priorities. In addition international affairs were assuming greater importance.

They chose to follow their predecessor's lead in ensuring an asset base at least equal to one year's activity. At their first Council meeting, Richard Hay reported that the ASO's finances were in a healthy state, with funds of over \$250,000, and no immediate project in mind.<sup>11</sup> He succeeded in gaining approval to make a substantial donation to the Foundation. On the other hand there was constant concern over the burgeoning cost of producing the Journal.

It was the first time the Congress, which was to end their term, was to be held onshore, but not in a state capital. Canberra, the national capital, a city smaller than the capital of any mainland state, and the home of the new President, was the chosen site. Both the other members of the Executive lived in Sydney. Executive Meetings, held monthly, occurred in a host of venues, some even associated with football matches, not unheard of in dental circles in this country.

The idea was to outdo Melbourne, which had conducted such a spectacular Congress. Whether this was achieved is a matter of opinion and really unimportant. It was a successful meeting. The fact that it was not in a state capital turned out to be irrelevant. At this Congress there were also a number of innovations. A special meeting for members of the AOB and the first meeting of reviewers for the Journal took place. The first meeting specifically for all the Graduate students was arranged. Opportunities were given for all to present their theses. The Orthodontic Teachers Meeting was continued, as was the programme for auxiliaries. And there was a special meeting to foster the collection and preservation of the ASO's archival material. The Journal, the Foundation and the Graduate departments continued their evolution.

In 1998, the Executive moved to Queensland and R.H. Olive assumed the Presidency. Olive was highly experienced, having been on Council for some considerable time, and having played a major role in several ASO committees especially the OSC. He had been through the full gamut of positions in the Queensland ADA, was President of the Queensland State Dental Board, and was already highly involved in the ADC. His drive, experience and vision reached a fitting climax with his Presidency of the 7<sup>th</sup> International Orthodontic Congress. His Executive began a review of Society membership; this lasted for several years and is described in a later chapter.

The Western Australian Executive was again on the less experienced side, although John Owen, the President had been Chair of the OSC for some time and had considerable Dental Board experience.

Ian Watson and Ted Crawford held terms as President from 2002 to 2006. Both hugely experienced, they were both anxious to, and capable of, moving the Society forward to face new challenges. They both played major roles in widening the ASO's international focus, in advancing the relevance of the Australian Orthodontic Board and in public relations. Both held hugely successful Congresses. The structure of the Council underwent an almost total change, and more committees were introduced.

## Edward C Crawford

Gained his Bachelor's degree from the University of Melbourne in 1971 after which he spent two years in the Navy and then did the Master's Course in Melbourne 1974-5. The very next year he began a lengthy term on the Victorian Branch Executive which lasted, with only a four year break, for the next 30 years.

He has been central to the Victorian contribution to the ASO federally since shortly after he graduated, being with successive rotations Secretary 1982-4, Congress Chair 1993-96 and lastly ASO President 2004-2006. He served on Federal Council from 1982-87 and 1991-2006. This period of service is unrivalled in ASO history. He was made an Honorary Life Member of the Society in 2009.



Ted has been a lecturer to the Dental Nurses Training Course, the Orthodontic Technicians Course at RMIT and also frequently to General Practitioners as part of the Victorian Branch commitment to Continuing Education. In specialist education, He has been highly involved as a tutor, lecturer and examiner, not only for his own University but throughout the country as well.

A superb clinician and speaker, he has published an impressive list of scientific articles and has lectured widely, giving over 30 major presentations all over the world. A highlight was a keynote lecture to the World Federation of Orthodontists Congress in Paris, 2005.

Other than the important offices he has held, he has made seminal contributions to the AOB, to the Public Relations programmes and to the ASO 'Give a Smile' programme, the latter being particularly his 'baby'.

Ted is a keen photographer and golfer and served on the Council of the Royal Melbourne Golf Club. He is also the Founding Chair of the Peninsula Exchange, an environmental group dedicated to the protection of the Mornington Peninsula.

## The Council

The composition of the Council, the ASO's governing body was subject to frequent change.

After the addition of the Chair of the Education Committee in 1993, the Council effectively included four ex-officio appointments. These were the current and subsequent Congress Chair, the Editor of the Journal and Chair of the Education Committee. This had a tendency to dilute the corporate knowledge during the Executive changeovers, something which had been slowly built into the ASO structure over the preceding decades.

In 1990 Mollenhauer<sup>12</sup> had suggested that future Federal Secretaries should attend Council meetings prior to their appointment. Ian Watson's invitation

(as Secretary-Elect) was approved by Council in 1990, and he attended Council meetings during the time of the Perth Executive. The same thing did not happen for the next succession. A Secretary-Elect was due to be added with the next round of Constitutional changes. This did not happen until 2004, but John Coolican was also invited to attend a number of meetings in 1995 after he had accepted the invitation to be Secretary.

The structure of the Council remained static then until 2002. At that time the Editor of the Journal and the Chair the Education Committee ceased to be Councillors and the relevant clause in the Constitution was amended to read: “the Chair of the Congress Committee shall be regarded as an ex-officio voting member of Council whose term of office as a Councillor shall expire forthwith if the Council decides the same”.

This was the first stage of a significant change in the Council to make it more focused on the functions of the Executive and less on the Congress and the committee-based activities of the Society.

At the end of his term as President, Ian Watson had recommended to Council<sup>13</sup> that it should be composed of the current and the next Executive and three other Councillors, representing the other States. He also suggested that adoption of the principle, that the 1<sup>st</sup> Vice-President would automatically succeed to the Presidency, if the incumbent was no longer able to continue, could create logistical difficulties. He recommended that, should the need arise, subject to Council approval, the Executive should be able nominate a suitable person. Except for filling the vacancy caused by the death of John McGibbon, there have been no midterm changes in any of the Executives.

In 2004, a Secretary-Elect was added to Council. This meant, for a short time, there were again ten on Council, with a Congress Chair and a Second Vice-President, that is the current and successive Congress Chair, both having seats. The Treasurer Elect who had already been nominated to the position was also invited to attend Council meetings.

The following year (2005) further changes removed from the Council, both the current Congress Chair and the successor to that position.<sup>14</sup> This meant there ceased to be a Second Vice-President, so the “first” was eliminated from the title of the senior Vice-President. The Treasurer-Elect was added to the Council. The Congress Committee was expanded to include the Chairman of the subsequent Congress. The Chairmen of the Congresses in 2004, Colin Twelftree, and 2006, Peter Scott, both commented that their workload was quite sufficient of itself, and their connection to the operations of Council less relevant. They both supported the change to the Council.<sup>15</sup>

This was the composition, which had been recommended by Watson over ten years previously. The number of Councillors returned to nine. This not only had the advantage of ensuring that incoming Executives were familiar with all the issues from the beginning of their term, but allowed for their interactions to be better understood. This has helped to ensure good teamwork.

Previously, a close tie between the Executive and those running the Congresses was taken as an article of faith. The creation of a virtual industry, that is the running of conventions, had removed much of the detail from Congress organising, leaving only strategic matters for the Congress Committees.

The breaking of any nexus between siting the Executive and the next Congress now became more feasible. It is probably not feasible to have a committee, planning a Congress, based in a city other than the one where the Congress will take place, but an Executive and a Congress Committee no longer need share the same address.

A suggestion that there should be honoraria of \$1,200 paid to the President and Secretary and \$600 to the Treasurer from early 2002 was defeated. Several of the Council confirmed the honorary nature of their positions. A small committee, tasked to consider the proposal, was of the same opinion. There is, however, a huge workload borne by the Society's office bearers. It has always been so. Ever since the time of A. Thornton Taylor, ASO Presidents have, at their own expense, travelled to all or most States and frequently visited overseas. With the increased involvement in the Regional and World Orthodontic Federations, the extent of travel Presidents have felt obliged to undertake, has grown exponentially. In 2003 Council took the decision that, during their term, the President should visit each State's Clinical Day, the biennial meeting of the NZAO and two Asia-Pacific national meetings, including any meeting of the Asia-Pacific Orthodontic Congress. They also attend, on a rotational basis, meetings of the Korean, Japanese and Indian Orthodontic Associations. Presidential travel allowances between \$25,000 and \$40,000 were allowed. This equated to the addition of \$60–90 onto the yearly subscription.<sup>16</sup> An allowance for out of pockets expenses was also included.

More and more Council meetings are now conducted by tele-conference. In fact, Council now meets face-to-face only twice a year. The first Council meeting by teleconference occurred in December 1993 when the Victorians took the helm. In fact they used this method quite extensively, the next Executive less so, when some Councillors mentioned how exhausting prolonged teleconferences can become.

## The rotation of the Executive

In its recommendations to the new Executive,<sup>17</sup> the outgoing Queensland Executive (1989) said, that if the Society went ahead with a Federal Office (as was mooted at the time), they could look at longer terms for the Federal Executive and shorter terms for Congress Committees. As early as 1993, Ian Watson developed the view that the rotation of the Executive, had a serious downside. While it ensured that each State was adequately and fairly represented in the management and direction of the Society, the available experience, talent and enthusiasm, in such a small organisation, was spread too thinly.

In his first report as Secretary of the ASO, immediately after it achieved its permanent secretariat, Watson drew the members attention to some of the problems related to this rotation—in that it required a number of willing and able hands in each State and also tended to create a constant drain on the overall corporate knowledge.

Over the early years, a progression of steps had been taken, to ensure that the corporate knowledge, inherent in the Council, was retained to the greatest extent possible. This had begun with the creation of a Vice-President in 1959 and the Second Vice-President in 1974. And frequently the strategy worked. A good example existed in Victoria where E.C. Crawford moved with each rotation from Secretary to Congress Secretary and finally to President. Ian Watson had a similar progression over three cycles. This did not happen at all times. The author looks back in horror at his inexperience for his role on the Executive. Were it not for his highly experienced Treasurer, Richard Hay, the mind fairly boggles.

A corollary of this was that those who maintained their positions, as head of the standing committees, were in a position to wield considerable, perhaps even undue, influence. The net effect of this was that the Executive was frequently more controlled by the committees than the other way around. Every organisation has had some problems with the power wielded by its office bearers. The ASO is no exception.

The ADA, ANZAOMS and many such bodies, addressed this issue by appointing professional CEOs, full or part-time, well versed in the administrative, legal, financial and historical issues involved. Moreover, they were much more able to take a stand and defend it against the fairly forthright egos with which they were confronted. Perhaps this will happen with the ASO in the not too distant future.

The ASO has been very well served by its secretariat, which, since 1991, has provided loyalty, efficiency and continuity for the operations of the Society. During all that time, until mid 2008, Liz Swaby retained her position as Executive Officer. Sadly she retired in September 2008. Shortly thereafter, the President gave a dinner in her honour. It said much about her contribution to the ASO, that every former President of the Society, who had served ‘under her’, all nine of them, was present at that dinner.

But experience, vision and leadership always had to be provided by those from the merry-go-round. As Winston Churchill once said “Democracy is the worst form of government except for all the other forms that have been tried”.<sup>18</sup> Perhaps the price is worth paying. Generations of orthodontists have thought so. There seems little mood for change.

The clockwise rotation of the Executive every two years continues. The author is aware of no other organisation that requires this type of progression today. Complaints about lack of representation doubtless occur, but few organisations are destabilised this way. Probably the need to involve each and every State creates a situation where most of the membership feels far more involved than would otherwise be the case. The downside of this is that there can sometimes be flaws in the management and this is probably most noticeable in financial control.

## Finance

The ASO finances have at all times been under reasonable control, because it has been fairly easy to increase the subscriptions and because Congresses generally

make solid profits. The Society was thought to be in a perilous state in 1980, but emerged two years later, after the Congress in Hong Kong, with a very healthy balance sheet. The situation was not critical in 1993, but it had taken an unreasonable length of time to become aware of serious downward movements. Again in 1998, after a very generous Executive finished their term, those from the following team saw cause for concern.

Like Michael Nugent in 1992–3, Igor Lavrin, Treasurer in 2005, felt it took him some time to come to grips with the intricacies of his position and suggested the Society's entire financial approach be professionally reviewed.<sup>19</sup> This review looked primarily at the taxation position, which was a good deal less than Lavrin had in mind. To avoid tax altogether, it examined the possibility of having the Society classified as a public educational institution (Under section 50-5 Item 1 of the Income Tax Assessment Act.) This was a position long advocated by Terry Freer, probably for reasons more philosophical than financial. This was rejected, since advice was received that it would be unlikely that the ASO would be granted status as a public educational institution, due to the strict criteria involved. The preferred option therefore was to maintain the existing 'mutuality principle'. This created tax obligations on income from non-members, which could only be eliminated by donations to registered charities or bodies such as the Foundation.

Lavrin looked into the matter more deeply than the accountants. He decided that ASO subscriptions were relatively cheap compared with those of similar associations and there was room for an increase. Lavrin's view was that an asset base equivalent to one and one-half year's activity made for a sounder cushion than the 12 months advocated by John Armitage. There had been an average turnover during the preceding three years, 2003–5, averaging \$220,000. So a base of \$333,000 was required, well above of the amount in hand. Regardless of the taxation implications, Lavrin favoured retention of all profits, as opposed to donating the profits to the Foundation, in order to achieve this aim. His goal was quickly achieved.

There actually has been a very significant increase in subscriptions over the last 10 years. Aside from Congress levies, in the decade from 1998, there has been nearly a fivefold increase from \$150 to \$720. The increase for the preceding decade, which included the establishment of the Secretariat, was less than half that.

He saw other avenues to increase income from Journal, newsletter and website advertising and sales of brochures and other ASO items. Nowhere, however, did he take into account profits from the sale of this history.

The prospect of holding the 7<sup>th</sup> International Orthodontic Congress in 2010 however, has completely changed the equation. There is a requirement to build up a considerable reserve in the lead-up to this Congress, in order to fund the various commitments. A special 'WFO levy' as part of the annual subscription was begun in 2004. The Society's plan is currently to have seeding finance of approximately \$700,000 available in time for the 7<sup>th</sup> IOC. Added to funds advanced by the WFO, the extra levies collected for that Congress, plus relatively large profits from recent Congresses have that goal in sight. It is expected, on the other hand, that there will be a considerable profit. This of course cannot be guaranteed, as the distances

involved are considerable and the world finances in 2010 are likely to be very unstable.

The long-term plan was that, with a build-up of funds in reserve, and after return of the seeding funds and receipt of the ASO's share of the profit from the International Congress, there should be capital, sufficient to purchase property for an ASO administration office. This plan has been considered but not officially adopted. How the current world financial crisis will impact upon this sensible, albeit ambitious, plan remains to be seen.

## New Branches

Probably as a result of the very significant levy of \$10,000 over five years, which the New South Wales Branch required of its members, certain people in the ACT looked to form their own Branch. The Constitution still allowed this to take place on the written request of at least five members. Generally speaking, the membership from the ACT were not very involved in New South Wales Branch activities and rarely attended meetings. An informal study group had been operating for a considerable time, having started its life to discuss issues of common concern in orthognathic surgery with the oral and maxillofacial surgeons in the area.

In 1988, eight members of the ACT orthodontic community wrote to the ASO Council requesting permission to form a new branch. Council consulted the New South Wales Branch, which responded that it could, and should not raise any barriers to such a move. Council replied accordingly, but let it be known that it was not highly supportive of this initiative. The Executive asked to see a Constitution and Articles of Association, to ensure they would be compatible with the Federal Constitution. Several Orthodontists practising in the ACT, the author included, were against the move, feeling that a branch in the ACT would never develop the critical mass capable of supporting the necessary infrastructure. John Coolican, the NSW Councillor, advised that New South Wales Branch "cannot be seen not to support the ACT's move"<sup>20</sup>, but noted it was not unanimous.

P.J. Hannon, chairman of the Constitution Committee raised some interesting considerations. He asked firstly, whether it was possible for a member to change branches, without having completely satisfied any financial obligations. Secondly, he noted that even though some members had indicated they did not wish to make the change, the rule that members had to belong to the branch in which their principal practice was located, would require that all members living in the ACT must join the new branch, if it was formed.

John Fricker, who would appear to have been the prime mover, organised the preparation of a draft Constitution and, after gaining an informal agreement from the local orthodontists, who had made the original move, forwarded it to the ASO Council. One of his suggestions<sup>21</sup> was to remove clauses from the Constitution, to allow members who did not wish to join the proposed ACT Branch to continue in the NSW Branch. The matter remained on their agenda for a period of time, until finally, interest diminished. This happened, partially, as a result of the almost total

involvement of the ACT Orthodontic community in the 16<sup>th</sup> ASO Congress, held in Canberra.

In November of 2001, eight Tasmanian Orthodontists had a meeting. Seven of these were members of the Victorian Branch. The group felt comfortable under the umbrella of this Branch and decided to make no changes. They did invite the Victorian Branch to conduct its next meeting in Tasmania and Victoria accepted. Since that time, there have been no moves of any kind to create additional branches.

## Falling Branch Activity

As far back as 1960, Keith Godfrey, when President of the NSW Branch, complained of poor attendances at meetings.<sup>22</sup> In the early days, much of the activity of the Society centred on its branches. Many initiatives began in the branches. Sets of committees paralleling Federal Committees were a regular feature. Over time much of the energy in the branches appears to have dissipated. The reasons are numerous. There are many more meetings generally and also short courses of various types. These are frequently to assist in the promotion of materials for sale by dental supply companies, innovations in practice being frequently product driven.

The organisation generally, being more mature, is more stable, so contentious issues arise less frequently. General funding issues occupy the greater part of the attention of the branches. Even the implementation of the Councillors and Representatives Meeting, where the positions of the branches can be presented federally, seems to have backfired to an extent that discussion about issues is more and more confined to the Council Meetings. The NSW Branch sometimes has meetings coincident with Federal gatherings to ensure their quorum of 15 members.

Sadly much of the archival material from the activities of the State Branches has been lost or was not available to the author. Fortunately the NSW Branch became a client of the same organisation which manages the ASO federally, and therefore good records remain of the activities of this Branch.

## Increasing Numbers of Committees

Committees to look after the Journal, the Foundation, the Directory, Orthodontic Services, Economics and Practice Administration and the Constitution have been in existence for a long time. The Education, Appeal and the Cleft Palate Reference Committees, have existed for a slightly shorter time. The demand to engage the public to a greater extent has also caused the creation of a special committee to deal with Public Relations. This was originally called simply the Public Relations Committee and more recently the Communications and Information Committee. The activities of these committees are recorded in earlier chapters. Relentlessly the number grows.

An International Liaison Committee was added with the dual role of keeping track of orthodontic meetings and visits by overseas lecturers in our immediate area

and maintaining liaison with the Executives of the nearby Orthodontic Societies. Chairman J.P. Geenty carried out his allocated functions conscientiously, but was never really satisfied that he was able to make a real contribution.

Changing circumstances were continually requiring new committees. Ever since Graeme Dunn warned that too few of the younger, newer members were involving themselves in the ASO's operations, this wastage has been an ongoing trend. Peter Southall (WA) raised the issue again in 2003. A Recent Graduates Committee was formed to see what could be done, not only to facilitate involvement but also to represent the interests of those starting out on their professional life as orthodontists. This Committee immediately recommended reduction of the ASO subscription by half for the first year after graduation and the provision of extra time to make the payment. Whether this will translate into an earlier meaningful involvement in the ASO remains to be seen. The first two Chairpersons of the Recent Graduates Committee went immediately into Executive positions in their State Branches. Although there have been concerns about the lack of interest of the younger members, there now seems to exist quite a satisfactory ratio between newer and older Society members in the management of its business.

The Federal Secretariat frequently receives both queries and complaints, from the public and, having no basic knowledge in these matters, sought assistance. The ADA experience was helpful, and from 1996, in each state, an enquiry officer was appointed to handle these, sometimes contentious, issues. Some States (South Australia and Western Australia) use the ADA officer, already charged with this duty. This has taken a large load from the Secretariat. Recently (2007) an Orthodontic Roster Sub-committee of the Orthodontic Service Committee has been formed to manage this function.

Other new committees are the Archival Committee formed officially in 2001 (when the By-Law was passed). It had been functioning to an extent since 1998. The work of this history takes place under this the auspices of this Committee.

A committee to manage the Australian Orthodontic Board was formed after the Education Committee had finished the preliminary work and the Board was 'up and running' and two committees were required for the 'Give a Smile' programme. The reason two committees are required for this initiative, but the ASOFRE, which also operates under a Trust agreement, needs only one, is not entirely clear.

There is a newly formed Honours and Awards Committee to regularise the awarding of the Society's accolades. Just as there is always a Congress Committee designated for each Congress, so too there is now a separate committee for the 7<sup>th</sup> International Orthodontic Congress.

The Education Committee and its Membership Advisory Subcommittee were split in 1996, but except for a two year period have had the same Chairman. The functions of the Economics and Practice Administration Committee, which had not already been purloined, were merged into the Orthodontic Services Committee. At last count (2009) there were 16 standing committees.

So far only two committees have been wound up: the Orthodontic Standards and the International Liaison Committees. The former never really got off the ground.

As the manufacture of materials, for orthodontic practice, became a big international industry, there became little it could do. The manufacture of archwire was revolutionised, helped by space age technology. The resilient wires which were locally manufactured, and which were so much part of the Begg technique, and the real reason the Committee originally was formed, also became part of the international industry.

The International Liaison Committee was discontinued, when it was decided that matters international were really of first priority, and could only be properly handled by the senior members of the Executive, indeed by the President. At the present time, the ASO's relationships with Orthodontic Societies world-wide are really in the hands of two ex-Presidents, Olive and Watson, both well known on the international scene. Both serve on the Committee to drive the upcoming International Orthodontic Congress. How that continues after 2010 remains to be seen.

The Appeal Committee has lain idle for the last five years but remains in place.

## Relations with the ADA

The ASO has always been scrupulous in its relationships with the ADA. From the time of its reformation when it was required to make adjustments to its Constitution, to the time when, of its own volition, it sought to ensure there were no changes required consequent to the ADA's rewriting of its Constitution<sup>23</sup>, to McGibbon's concern to find out the latest requirements for affiliation, and during the long history of the negotiations regarding health funds, successive ASO Councils have almost slavishly observed the demands of their affiliation. Even as a member of ACODS, originally set up as a ginger group to protest perceived ADA indifference, this was never in question. The author has not completely researched the attitudes of the other specialty groups, but neither the Academy of Prosthodontists nor ANZAOMS is affiliated with the ADA.

The ACCC found that this affiliation arrangement was in breach of the law. In 1999, the clause "to maintain affiliation with the ADA" as one of the objects of the Society had to be removed. An alteration was also required to the list of reasons for cessation of membership by replacing reference to the ADA with the wording "an approved professional association of dentists". Although there were times that the youngster rebelled against the restraints imposed by the parent, the potential for help and the advantages of belonging to the larger institution were always realised.

Mention should be made of another organisation, which has also performed a mentoring role for the ASO. That is the American Association of Orthodontists. The encouragement AAO President William Fischer gave to D.V. Donaldson, in the genesis of what has become the NZAO was acknowledged in an early chapter.

The ASO has seen fit to ask for advice and help, from their counterpart in the US, on numerous occasions. Although British organisations have always been fully supportive, similar requests from them have not often been made. It is always to the AAO that we have gone for advice or example. Help has been sought in

such areas as: advice in the writing of the first Constitution, educational materials and practice administration aids, leads in graduate education and general running of a growing organisation. Norton and Reading used the AAO example in their movements towards the formation of an Orthodontic Board. We have adopted their 'delegate' system of governance, and based our 'Code of Ethics' on theirs. Their Foundation has also provided assistance to ours.

No history of the ASO would be complete without acknowledging this unflagging support.

## Australian Council of Dental Specialists

It is very easy for the specialist societies and academies to feel the ADA does not always act in their best interests. Even in the 1950s, the infant Society had concerns along these lines. Very often the ADA is required to take a broader view, sometimes in conflict with special interests.

At the 1977 General Meeting, Norton made the suggestion that all affiliated bodies of the ADA should meet annually. The first movement towards a national forum of specialists came out of discussions during the profession's adjustments to the introduction of third party payment programmes. This was the major focus of organised Dentistry at that time.

Shortly after Norton's comment, Bob Rickleman wrote to John McGibbon, the President, saying "it may be opportune for you to write to the President of each specialist Society in Australia, outlining broadly the problems: (a) with third party programmes and (b) ADA affiliation. The ASO, as the largest specialist Society, should state its willingness to collect all ideas of the specialist societies in two areas with a view to presenting a joint submission to the ADA, and if required, the insurers". (There was a Dental Specialist Societies group formed in South Australia also in 1977, for much the same purpose.)

The ADA organised a meeting with affiliated societies in February of 1978 and again in May of 1979. The suggested agenda items were the principles of affiliation; the Australian Dental Journal; relationships between the affiliates and the ADA; third party programmes and rebates for specialist fees; Honorary Members and Associate Members of affiliates; liaison officers and participation in Congresses.

The Society suggested to Robin Woods, who was Chair of the ADA Dental Services Committee, which had carriage of matters related to third party providers, that there should be a separate specialists' group. Woods favoured an "advisory sub-committee" to his committee and wanted Abbott to represent the ASO. It was also planned that there would be a meeting of the Federal President and Secretary of all specialist societies with the Executive of the ADA, occurring in conjunction with the next ADA Congress. It was envisaged that this practice would become standard. The principal imperative for this was the need to include the specialist bodies in negotiations with the health funds. This is dealt with in its own section, but this represents the first time the various specialty groups had the opportunity to join together to advance their particular interests.

Much later, the postgraduate committee of the University of Adelaide arranged a combined meeting of specialists in March 1990 and requested a speaker from the orthodontists to speak on dental materials.

Separately, in the early 1980s, a group of practitioners who were leaders in their fields had joined together to discuss clinical issues, which crossed established boundaries between specialities. They called themselves the Gnathological Society initially (now the Inter-disciplinary Society). Membership was by invitation. At one of their meetings, several people made comments that the ADA, at that time, seemed not to be acting in the interests of the specialists. Quite informally, a group, perhaps a pressure group, took shape. It was originally to be called the Australian Dental Specialists Council.

In 1993 Ian Watson suggested that something needed to be done to improve the referral arrangements for x-ray imaging. He circulated a paper on Diagnostic Imaging services<sup>24</sup> in which he stated that he did not think the ADA could represent the interests of the general practitioners and specialists at the same time. He suggested that consideration be given to forming a body, which he referred to as the Australian Council of Dental Specialists to advance the interests of specialists.

The next year, the ASO received a letter from the Academy of Australian and New Zealand Prosthodontists, concerned at the lack of interest shown by the ADA in the concerns of specialists. A meeting occurred in May 1994, at which all the specialist bodies supported the formation of a specialists group and agreed, initially, that it should be under the umbrella of the ADA, but that certain demands would be put. One of these was representation on both the Schedule and Auxiliaries Committees. Soon, it began to act independently. R.H. Olive saw in this an analogy with the recently formed Council of Professions, which he felt had been very successful in placing before government their special concerns.

The inaugural meeting was held early in 1995<sup>25</sup>. The ASO Executive wanted to modify the original “aims and objectives”:<sup>26</sup> ASO Council agreed that in the light of the first meeting they should proceed further with the development of this venture.

Neil Peppitt, a Prosthodontist, and at the time of writing, the President of the RACDS, was its first President. The Prosthodontists were the main instigators. This body began to meet regularly. Concern was expressed that Dental Boards were listening to general dentists and not specialists.

The Society representing Oral and Maxillo-facial Surgeons, ANZAOMS, let it be known in no uncertain terms that they did not want ACODS purporting to represent them in any forum. First its President, Frank Monsour, and subsequently its CEO, Graeme Herring, drew the attention of ACODS to their informal status, there being no Constitution. ACODS faithfully promised to leave ANZAOMS out of their considerations. At that stage, Oral and Maxillo-facial Surgeons had already achieved all the rights, in the referral for x-rays, the other specialties were seeking.

Lack of a proper funding base was another problem. A yearly subscription of \$350 was agreed upon in 1999. That same year, there was a name change to the “Australasian” Council of Dental Specialists to reflect the fact that other than Orthodontics, the Societies/Academies included those from across the ‘ditch’.

The author became President in that year and John Coolican became the Secretary and was tasked with advising if the body could be formalised and have its own Constitution. As the group meet by teleconference only quarterly, it was decided not to require any specialty's representative to be its current President, whose term of office may be relatively short, but to seek a greater degree of continuity from the representatives.

The main focus of activity initially was not, as it should have been, to engage the ADA in meaningful discussions to iron out perceived differences or to put the specialist point of view in discussions regarding third party programmes. This latter had been raised frequently. The principal focus, as well as referral for imaging, became to increase the scope of the Cleft Palate Scheme, to include a much wider range of syndromes and also to include a greater range of services. For instance, conditions like ectodermal dysplasia and ameliogenesis imperfecta, both of which have severe dental ramifications, were thought appropriate for inclusion. Negotiations with the relevant departments were moderately successful and were always conducted with the full support of the ADA. Discussions along these lines have since become one of the principle functions of the Cleft Palate Reference Committee.

It was, however, a much too informal arrangement for the purposes for which it was established. The author formed the view that if there was a message for the ADA, it had been received and if ACODS were to survive, it should become a standing committee of the ADA. He was sure that this would produce better results.

In 2002, there was a series of meetings of the ADA Council, the affiliated specialist bodies and the Deans of the Dental Schools. Michael Imer represented the ASO. The Specialists Advisory Committee of the ADA came into being. Their first meeting occurred in mid-2003.<sup>27</sup> Shane Fryer, ASO President 2008–10, represented the ASO on this Committee.

## The ASO and its Corporate Image

After almost constant criticism since it first came into use in 1957, the ASO logo was finally changed in 2004.

The first reference on the possible use of a logo (although in those days it was referred to as a badge or crest) was at a meeting of the Executive in April 1957. Three designs were produced by G.K. Manwaring, an artist, who worked at the Ballarat School of Mines. One of his designs was accepted in December and for it he was paid eight guineas. This design was not to everyone's taste. D.F. Spring, ASO Secretary, observed that "The fact that some unfavourable comment has been forthcoming has not surprised us, for it would be humanly impossible to please all tastes. A contemporary design was rejected for a more conservative one".<sup>28</sup>

The original version, circular in shape, blue in colour, with the letters A, S and O cleverly intertwined with the Southern Cross at their side, has never been long without criticism. The original problem probably had more to do with the manner in which it was incorporated into the letterhead. The title 'Australian Society of Orthodontists', across the full width of the page, was thickly highlighted with

a heavy dark blue line. It first appeared on stationary in January 1959. John McGibbon, and the Western Australian Branch, produced alternatives later that year. McGibbon's suggestions were also rejected in favour of something more conservative.<sup>29</sup> In fact discussion of the letterhead occurs frequently in the minutes of the Sydney Executive around 1960, with the clear insinuation that the existing choice was not pleasing. Reading wrote: "The question of an emblem was again considered by the Executive, before proceeding with the notepaper. It was felt that the letterhead should be dignified, but discreet, and more in keeping with a specialist Society. This in no way detracts from the excellence of the emblems supplied on the initiative of Mr. McGibbon".

In 1960, the Executive produced a new letterhead, which bore only the names of the three main office bearers, but which could be overprinted for use by the branches. There was no emblem. This surprised E.A. Barham, Western Australian Branch President, but he thought the new letterhead was "in better taste than the existing one"<sup>30</sup>.

John Reading had done a course in printing, at a London institute, and had definite views about an appropriate style in such matters. He thought the 1957 letterhead to be garish.<sup>31</sup>

In 1967, President L.M. Smart wrote to Moffatt, saying that the Executive Committee felt that the ASO crest was "not a pleasing design" and could possibly be improved.<sup>32</sup> Those designs prepared years before by McGibbon and found among the archives by W.J. Mackie (and sadly since apparently lost) were mentioned<sup>33</sup>. Moffatt himself presented a new design, but no change was made. The existing logo was incorporated into the Journal letterhead, which Moffatt had designed. He had a particular interest in this type of thing and he subsequently designed a Presidential medallion, which he submitted to ASO President Richard Case. Case felt the design "could not be improved upon". He was asked to choose the colour and choose Royal Blue, preferring it to a lighter colour.<sup>34</sup> The medallion first saw the light of day at the 1972 General Meeting, when it was presented to the President, Richard Case, who wore it through the function and, in turn, presented it to the incoming President. Moffatt also conceived the idea of a Past-President's medallion. This idea was accepted but was not advanced, being thought too expensive. A Past-President's badge did eventually see the light of day about 2000.

The question of displaying ASO Membership on Members' stationary was raised. This was not supported, because of its possible use by Associate Members.<sup>35</sup>

The use of the logo on Members stationary was again advocated at the 1984 General Meeting but again was rejected. The Victorian Branch thought it worthwhile and again proposed that it could be used "provided it did not contravene Dental Board regulations".<sup>36</sup> Previously, there had been little interest in the use, on individuals' letterheads, of the ASO logo to indicate membership of the ASO. At that stage South Australia was the only Board to give its approval, although all Dental Boards had been approached. The hope was that this would percolate throughout Australia. Registration Boards now allow the AOB logo to be printed on letterheads for certified members.<sup>37</sup>

The 1957 logo was in universal use in all the Society's functions until 2005.

Albert Wong, when he became Chairman of the Public Relations Committee in 1997, suggested that it was time for a redesign of the ASO logo and for development of a “brand spirit”. Most of Wong’s suggestions were appreciated, but his idea to redesign the logo failed to achieve much support.

The Executive eventually decided that the time had come to make the change. In 2004, a first version was produced and put to the vote by members, who quite promptly rejected it. It really was quite awful. The second attempt, however, was universally appreciated and has been adopted and can be seen on the cover of this History. It was described in the ASO newsletter<sup>38</sup>, with suitable opacity, thus: “Our new logo references the concept of a Society, its dimensionality and the practice of being an orthodontist.”. More tangible was the rest of the description “The combined semicircular shapes graphically represent the notion of two rows of teeth or an open mouth brought into alignment to create a ‘whole’ ”and later on it says “and, yes, if you squint and use your imagination, the letters A S O are there to be found” The decision was taken to protect the logo by trademark.<sup>39</sup>

The ASO has also produced items of apparel. Ties were first discussed during Bowden’s Presidency. Various designs for the lettering were produced together with a drawing<sup>40</sup> for a very elegant tie, which incorporated one of those designs. Images of this were circulated. The Queensland Branch informed the Executive of their overall support for the concept, but wished it known, that they had little personal interest in wearing such an item of apparel. The first tie produced was actually for a Congress. After considerable discussion ties and shirts were first produced in 1998 and now the Society does everything from t-shirts to baseball caps.

Badges are now produced for Office Bearers, Past Presidents, AOB members, Foundation contributors and the like.

Council recently looked at the value of the ASO Corporate identity and wondered at the possibilities in some forms of product endorsement. The AAO, the ADA and the NSW Branch of the ASO all derive income in this way<sup>41</sup>

## The ASO Website

As part of its Corporate image, the ASO also has a website for the public, with a secure section for members. This includes copies of both the Journals and Newsletters as well as the Federal and some state Constitutions. Sadly, there has been no ability to control the material produced by search engines such as Google, although at the time of writing, when seeking information about Orthodontics, the ASO comes up as the first listing.<sup>42</sup>

Increasingly, websites have become the public face of organisations. In 1995, when the World Wide Web was in its infancy, two keen young members of the ASO Public Relations Committee, David Fuller and Albert Wong, investigated the possibility of establishing an ASO website.

Faced with a prohibitive quote for what nowadays would be regarded as an elementary website package, the intrepid pair decided to ‘go it alone’. A proprietary

web design software program was purchased and, by a slow process of trial and error, a prototype website was designed and presented to ASO Executive at the Congress in Canberra, 1998. A monitor was hired so that Congress delegates could 'surf' on the site for themselves.

Soon after, with appropriate 'toning down' on the advice of wiser elders, the first ASO website was launched. By default, David Fuller became web-master and web design became his extra-curricular hobby, obsession and nemesis.

With no third parties involved, initial costs were limited to relatively low annual website hosting fees and 'in-house' design and development allowed inexpensive, immediate, continual and total control of content.

Over the next few years, separate websites were developed for the Australasian Orthodontic Board, the Australian Orthodontic Journal, the 'Give a Smile' programme, and one or two Australian Orthodontic Congresses. (Further advice was sought from Orthodontic Societies overseas on setting up their websites.)

Consideration was given to the issue of privacy. It was originally decided to give members the right of veto of allowing their details to be placed on the website. This ceased to be an issue when the GDC placed the Dentists Register on its site about 1998.

At the turn of the century, a web development company was employed to develop a 'Find an Orthodontist' facility, which enabled the general public to search the ASO database for Orthodontists by name or location. This is the most used section of the website and, at the present time, more than 100 people use this feature each and every day. Within a couple of years, the Secretariat requested a liaison officer to deal with the questions which are being receive from the internet.

Over ensuing years, as the ASO's orthodontist-cum-web-master became more experienced, the basic look and feel of the ASO website changed several times. In 2006, when the ASO revamped its logo and image, a web-developer was employed to redesign the existing website, in keeping with the new ASO 'brand', at a cost of \$10,000.

Later that year, a password-protected ASO Member Portal was added to the website to allow members to access and maintain their personal ASO database details and to access and download various ASO documents, publications and forms. This was later extended to include all copies of the ASO's Journal and Newsletters since 2004.

In 2007 a secure ASO Council Online Resource section was developed to allow ASO Council Members to access an archive of ASO documents and ASO Meeting information. ASO Council Meetings are now 'paperless' with agendas and relevant documents accessible online.

With the meteoric growth of the internet, the popularity of the ASO website has increased in leaps and bounds and, at the time of writing, the site receives 800-900 'hits' every day and from all parts of the world.

(This section contributed by David Fuller)

## Endnotes

1. Minutes General Meeting 1993
2. Personal Communication E.Swaby, 2008
3. Postal Vote 1993
4. Minutes Councillors and Representatives Meeting 9/1991
5. Financial Statement for year ended 12/1991
6. Executive Minutes 8/93
7. Treasurers report 1993
8. Treasurers Report 3/1995
9. Minutes General Meeting 1996
10. 5/12/1993
11. 6/1996
12. 9/3/1990
13. Minutes Executive Meeting 2/2004
14. General Meeting 2005
15. Personal Communication E.C. Crawford 6/1/2009
16. Minutes Council Meeting 10/2003
17. Minutes Conjoint Meeting 1989
18. House of Commons speech 11/11/1947
19. Minutes Executive Meeting 2/2005
20. Minutes Council Meeting 9/1998
21. Minutes Council Meeting 6/1998
22. Keith Godfrey Circular to Members. Mentioned in ASO Bulletin Vol2 No2 6/1960
23. 1973
24. Minutes Council Meeting 8/1993
25. Minutes Executive Meeting 5/1995
26. Minutes Executive Meeting 7/1995
27. Minutes Council Meeting 8/2003
28. Minutes Executive Meeting 2/1959
29. Minutes Executive Meeting 11/59
30. Barham to Reading 13/10/1960
31. Personal Communication 13/10/2008
32. Minutes Executive Meeting 2/1967
33. Brown to Mackie 4/1967
34. Case to Moffatt 22/7/1969
35. Minutes Executive Meeting 7/1971
36. Minutes Executive Meeting 1/1986
37. Minutes General Meeting 3/1997
38. 6/2005
39. Minutes Executive Meeting 6/2005
40. In Archives
41. Minutes Executive Meeting 6/2005
42. This was no longer the case on 20 July

## Chapter 19

# Late Constitutional Changes

Over the life of the Society there has never been a time when Constitutional changes were not either being planned, undertaken or voted upon.

The changes, which had been passed by postal vote in 1982, were principally to allow the Appeal Committee to “function legally and fairly” but included also By-Laws for affiliated Societies and the newly commenced research awards. Two new policies were also included.

Basil Phillips continued the work of his predecessor, Brian Crisp as Chairman of the Constitutional Committee, which became a permanent Committee of the ASO on Bowden’s watch. They continued to be advised by solicitors, who were to become quite experienced with the ASO work, based in Adelaide and Canberra.

The Constitution was reprinted in 1983. There were some amendments in 1987 and another reprinting in 1990, but again no significant changes.

At the 1987 General Meeting, attempts were made to introduce two new By-Laws, the more contentious of which would allow the Society to restrict attendance at courses run by the Society to Full, Provisional and Student Members. V.C. West urged caution in this, as it might be in conflict with the Trade Practices Act. The ADA had already given its approval and the motions succeeded. At the same meeting, Peter Horkin, on behalf of the Victorian Branch, introduced a motion that no new applications for Associate Membership be accepted after 15 March 1987. The Representatives meeting had been unable to come up with a recommendation for the General Meeting. Again West dissented, saying it looked as though the Society was becoming too elitist or its members were becoming insecure. The motion was

lost at that stage, but came up again later. Associate members were progressively losing their rights.

As his Presidency became imminent (1990), Basil Phillips surrendered the Chair of the Constitution Committee to West, who was the head of the Orthodontic Department in Melbourne and who had just completed a law degree. His opinion had been sought, and more frequently offered, on constitutional issues and proposed changes, generally, over previous years. These included the advisability or otherwise of incorporation.<sup>1</sup>

During his time in the chair, West introduced a number of Constitutional changes; these did not prove either lasting or beneficial. The most significant of these was to increase the quorum from 50 to 100 for meetings where changes to the Constitution were to be decided. His argument was that such an increase was required, because there had been a commensurate increase in the overall membership.

He also saw the need to return the clause, that governed the rules of debate of the Society at general meetings; a clause, which had been included in the original 1920's Constitution, whereby the rules were to be those applying to the House of Commons. This provision had been removed in the 1950s. He replaced it with a clause, recommending that where not otherwise provided for in the Constitution, the well known hand-book; 'Rules of Procedure at Meetings' by P.E. Joske was to be used.<sup>2</sup>

P. E. Joske was the son of Ernest Joske, who had been the long-term Registrar of the Dental Board of Victoria from its earliest beginnings<sup>3</sup> and who himself had held that position briefly. As Ernest Joske had been so involved in all aspects of the organisation of Dentistry in Victoria in those early days, it is entirely possible that he had something to do with the first ASO Constitution, which was written by one of his good friends, Stanley Wilkinson. This inclusion only lasted five years.

West also attempted, at the same time,<sup>1</sup> to return to one year, the required period to be spent in the general practice or the teaching of Dentistry, before one could commence postgraduate Orthodontic studies. If this failed to pass, he wanted the words "prior to commencement of the course..." deleted. This would provide the option of obtaining some form of general experience after completion of the postgraduate course. Doubtless, West was influenced in this by the number of applications that he was receiving for his course from dentists wishing to commence their orthodontic studies as soon as possible.

He argued that the Victorian Dental Board had no such provision and that the NSW Board did not require the period to be spent prior to the course being commenced. He also contended that this requirement could cause unnecessary hardship to young people seeking to pursue specialist training. Actually he had already accepted a number of postgraduate students who did not comply with this provision. One was to create some dissension within the Victorian Branch, when the Editor of the Journal wanted him to become 'book reviews editor' which was not acceptable as he was not a member of the ASO.<sup>4</sup> The individual applied for Associate membership, as he was not technically eligible for Full membership. It required passage through the appeal process to achieve Full membership. Yet another

student wisely chose to defer commencement of the course. Some years before, ASO Secretary Crawford had advised all heads of Orthodontic departments of the change in membership requirements,<sup>5</sup> suggesting that appropriate advice should be given to prospective post graduate students. Keith Godfrey on the other hand would only accept students after at least three years of general practice experience or its hospital equivalent.<sup>6</sup> Several of West's opinions remain on file. They make interesting, if difficult, reading. It was, perhaps, a case of a little knowledge being a dangerous thing.

West's report to the 1991 General Meeting (his first, the previous year, was brief and simply outlined plans for future discussions) included a series of concerns, which were minor in nature, and most were not proceeded with. At T.J. Freer's suggestion,<sup>7</sup> a Constitutional convention was planned to coincide with the Foundation Meeting at Hamilton Island in 1992. This did not take place, possibly because the meeting was so poorly attended. Nor was there a General Meeting that year for the same reason.

At the Council Meeting, which was held during the Foundation Meeting, it was recorded that both Mrs Inall and West had been working very hard on the review of the Constitution in the light of the fact, that a wholly rewritten Constitution needed to be in place prior to 31 March 1993. This, according to the minutes was necessary to 'comply with the Incorporation Act of Federal Parliament'. The draft of recommended changes was not available for this meeting.<sup>8</sup> The new draft was ready for the Council Meeting the following December. West took the Councillors through it. The main purpose, as he explained, was to bring the Constitution into line with the requirements of the new Incorporation Ordinance in the Australian Capital Territory, where the ASO was incorporated. Anything that was not covered under the Constitution would, he advised, be covered under the 'model rules' for associations produced as part of that Ordinance. This was the principle followed, on this occasion, in revising the Constitution, but some anomalies had been picked up by West and his team, on the way through.

Several changes of a minor nature were also suggested at that meeting. Prof. Freer felt that more emphasis should be given to the educational objects of the Society. It should, Freer felt, and this was supported, be made clear that the Society was committed to education. It was agreed that the Federal Treasurer could, but was not obliged to, hold the position of Congress Treasurer. This was a departure from the position of a decade earlier, when it was the preferred situation, or a decade later when Congress committees were completely separated from Council.

There was discussion about the place of the Foundation within the ASO structure. Olive felt the Foundation should be more a part of the Society and be treated like a committee. The subject of the independence of the Foundation had been broached on more than one occasion. It was agreed to leave By-Law 6, relating to the Foundation, as it stood for the time being.

Dr West was instructed to work on an amendment to that By-Law and submit that to the Foundation for approval, so that these more substantive changes could be incorporated later.

West advised the meeting that the legislation required the Society to hold its Annual General Meeting no later than five months after the end of the financial year. Concern was expressed that this might possibly clash with ADA meetings.

The resultant proposals were submitted to a postal vote, thereby overcoming the quorum difficulty, and were overwhelmingly passed.

Significant changes were to the effect that there was to be no proxy voting allowed at meetings and the number of votes required in a postal ballot was increased to one hundred. In addition, instead of requiring (as had previously been the case), that all papers read before the Society were the property of the Society, it was stated that "all papers read before the Society should be submitted to the Society and a copy delivered to the Journal as soon as possible thereafter".

The Chairman of the Education Committee became an additional member of Council. At that time, much of the agenda for change seemed to originate with the Education Committee, which began to take the role of gatekeeper. In addition to their newly formed Membership Advisory Sub-committee, it provided opinion to Council regarding the functions of the Appeal Committee, and also suggested major additions in the application form for ASO membership, including the need to present certified logbooks of work performed during the course.

This created the interesting situation whereby the Chairman of the Education Committee sat on the Council, chaired the Advisory Sub-committee to which the Council might refer an application for membership and also had a member of his committee on the Appeal Committee.

West went overseas for an extended period in 1993<sup>7</sup> and played no further role, although he was listed as the Chairman up until the 1996 General Meeting. He was represented, for a while, on the Council by the President, while the detailed work was carried out by the others on the Committee, David Houghton and Patrick Hannon. The former went on to become President of the ADA, the fifth ASO member to do so. Hannon continued with the Constitutional Committee, serving as Chair for nearly 10 years.

There was no report to Council in 1994. Hannon wrote the 1995 report as a committee member and was officially made Chair of the Constitutional Committee at the 1996 General Meeting. During this time, he moved to Queensland but continued his excellent service to the ASO. This created a temporary difficulty as the rules for membership of the Constitutional Committee required, mainly for convenience, that the other two committee members must come from the same State as the President.<sup>9</sup> This was corrected by removal of the phrase "from the same State as the President".

Work on the Constitution continued. It was discussed at length at the Council meeting in December of 1993. The President, G.R. Dickinson, began:

the changes of late last year and earlier this year, culminating in a postal vote to change the Constitution, really only brought the Constitution to a standard to satisfy the Corporations Law. There is agreement that we

need entirely to review the Constitution and bring it up to date. The planned constitutional review meeting had not taken place.

The Constitution Committee felt that there were in general three aspects, which required attention. One was a housekeeping type of inspection and review. Secondly there were more significant clauses, which required changes.<sup>10</sup> E.C. Crawford was anxious to see a change with the procedure for applications for membership; Hannon, one for the rules of membership itself; and further changes that had been suggested by the legal advisors, adding a definition of the Society and a proposal for the proper management of the Society's funds. The President felt "those types of changes are perhaps more significant and will require more debate".

The third point, which was probably even more difficult, was the issue of the incorporation of each State Branch and the consequent inter-relationship between the Branch and the Federal Constitutions. Most immediately it involved the right of the States Branches to raise finances.

## **Incorporation and State Branch Constitutions**

Initially, State Branches were run entirely according to the Federal Constitution, which outlined types of membership, the structure of the Branches, the method of applying for membership and dues etc.

Ian Watson, the newly elected Secretary of the South Australian Branch, wrote to Council<sup>11</sup> proposing rules and regulations for the Australian Society of Orthodontists (South Australian Branch). This was the first set of regulations written by a Branch. His covering letter mentioned that no provision was made for the incorporation of the Branch in the proposals. "If the ASO becomes an incorporated association, there will be no requirement for this Branch to do so separately. If the ASO does not become an incorporated association then it is proposed that this Branch will proceed independently to become incorporated in South Australia". Ian Watson reported, at that time that in South Australia, the orthodontists were the only (specialist) group not yet incorporated. The Executive received this in late 1974 and forwarded a copy to each State Branch, as a guide to formulating their own rules.

At about the same time, recognising that the NSW Branch had no Constitution, B. Mclean suggested the creation of a 'Policy Book' to record resolutions of that Branch. He felt it would save much research when important matters came up in future.<sup>12</sup> No other Branch saw fit to create any rules for itself. Otherwise there were no moves to organise branch affairs until 1993, when State Constitutions entered the picture.

In 1993 the Branches began the process of becoming incorporated and creating their own Constitutions. Victoria and NSW were the first to achieve both, and for the same reason, the desire to have a Chair in Orthodontics at their University. In Victoria, their document was prepared by the members of the Federal Constitutional Committee, all resident, as required, in Victoria.

Council maintained pressure on all Branches to achieve incorporation and have their own Constitutions. The ADA was going through the same experience, with some Branches proving more tardy than others. Although at that time Olive was of the view that as all the State Constitutions had to be compatible with the Federal Constitution, nothing needed to be done until the Federal document was tidied up.<sup>13</sup> He said that Queensland had made no decision. At that Council Meeting, the NSW Branch's desire for a certain amount of autonomy was mentioned.

The trigger to start work on Branch Constitutions was the decision to impose a levy on NSW Branch members, to finance a Chair for the Orthodontic Department at the University of Sydney. The Branch Executive saw no other way adequately to upgrade postgraduate education in Orthodontics in that State but to achieve, for the Department, that status. The only possible source of the required funding seemed to be the membership. Constitutional pressure was required to encourage payment.

The production of the NSW Constitution in 1994 was a protracted and anguished affair and involved a Constitution, a Trust and Incorporation.

The eventual successful establishment of this Chair tells us much about the relationship between Branches and the Federal body. At one stage, as a Constitution was being cobbled together, it seemed likely NSW members would cease membership of the Federal body altogether. Wise heads prevailed and dual membership was the outcome.

The Trust received the required funds, which continue to grow and support the Chair. Initially the funding came entirely from the contentious levy, but now is augmented by further donations; a 'Case for the Future' programme and by sponsorship from companies, which supply materials for the profession and/or their patients. At the present time its funds are nearly as substantial as those of the Foundation.

Largesse in NSW is not limited to this initiative. To recognise the massive contribution of Keith Godfrey, his successor Milton Sims, together with W.J. Mackie and A. O'Meara, inaugurated the Keith Godfrey Visiting Professorship. Fifty-seven contributors built a Trust fund, which biennially brings an overseas lecturer to present material to the profession and the postgraduate students. In the alternate years an eminent educator for the postgraduate students is brought into the Department. These Trust funds were placed initially in the care of the 'ASO NSW University Trust Fund'. These were augmented by profits from courses organised by Sims, notably a Tip-Edge course conducted by Richard Parkhouse, Consultant Orthodontist at Glan Clwyd Hospital in Llanfairfectan. These funds are now controlled by the Sydney Orthodontic Alumni, which also provides support for the Department. The Alumni now have formal status under the University of Sydney Alumni, which guarantees their tax-free status.<sup>14</sup>

Incorporation had been strongly and consistently recommended by the ASO's legal advisors.<sup>15</sup> During this time, the ASO solicitor was George Marques, based in Canberra. His firm was also acting for the Federal ADA and had acted for the ASO

during their process of incorporation. This was the main reason for the change from Chris Winnall, who was based in Adelaide.

There was concern also that changes in the law would affect, amongst other things, the relationship between the Federal ASO with the State Branches.

At the following Council meeting in June 1994, a 'draft model 2' of the Constitution, together with a running sheet listing the changes to the existing Constitution, was examined step by step. The quorum was reduced in this instance to 80. Retired members were exempted from the need also to be ADA members. Changes, which were discussed, included appeals against Council decisions beyond the ASO Appeal Committee (but unlike 1976 not to a General Meeting). Several changes were also included to clarify the right of a State Branch to raise its own levies. Another change required all members of the Society also to be members of the State Branch in which their principal practice is located, thus beginning the tortuous process of the coordination of Federal, and the developing State, Constitutions.

At the same meeting, the NSW Branch reported that its Constitution was nearly ready. At this stage the Executive was unaware of the difficulties this would produce.

Armed with new directions from Council, the solicitors returned to work. At the next Representatives Meeting<sup>16</sup> a motion was put to reduce the quorum further, to 50. This resulted in a divided vote and so was lost. Later this was passed<sup>17</sup> and proxy voting was also allowed, the thinking being that this would make a quorum more attainable. Not all of Council favoured this, as it could allow for undue influence from a pressure group. At the same meeting, this matter was later revisited and the quorum for a General Meeting was further reduced to 30.

By this time (mid 1994), all Branches were reported as becoming incorporated and preparing Constitutions. The Victorian Constitution was reported as being very simple; NSW, the reverse. Both Queensland and South Australia reported they were working on their documents (these would take at least a decade to complete). President Dickinson wanted to ensure that compatibility was ensured in these documents.<sup>18</sup>

The writing of the NSW Constitution was to cause many headaches. There had been considerable resistance to the imposition of the levy, not unexpectedly, considering the large amount involved. Clarification was needed about the right to expel members who refused to pay. Clause 8(6) of the Federal Constitution held that "the State Council may levy an annual subscription upon its members or such other special assessment as it considers necessary for the conduct of the Branch". This wording was not thought adequate to support the imposition of a levy.

Much of the content of the NSW Constitution was a response to this perceived weakness. As the document developed, the legal advice from those writing the NSW Constitution was that State Branch members would have to resign their Federal membership, so that they would become members only of the Branch. Not unsurprisingly, Dickinson was extremely upset by this. He wrote to State Branch President A.J. O'Meara<sup>19</sup> outlining his concerns which included a serious lack of communication:

Contrary to the agreement made in Adelaide, it would appear that the NSW solicitor has been advised strongly to alter membership qualification so that the Federal Body is little more than a rubber stamp, which is totally in contrast to what has been successfully operating throughout the history of the ASO.

The original premise of those writing the NSW document was that the Branches were to be the members of the Federal body. Later this was modified such that the Branch was to be affiliated.

The Federal Executive asked their legal advisors to comment on the draft. Their view was that the provisions in the draft gave the Branch complete financial autonomy. "The current practice of the Federal Society collecting the Branch Subscriptions and then distributing them will cease" and further that "a failure to pay membership fees and levies will end membership ... automatically".

The mechanics for this would be that the State Council would recommend expulsion to the Federal Council. The Branch membership was given power to override any decision by the Federal Council not to expel a member.

The general advice was that "with the exception of the financial provisions, the state Constitution follows the existing structure"<sup>20</sup>

This draft was amended throughout 1994. The final document in fact altered the situation very little except the right "to raise subscriptions and levies that are necessary or expedient for the administration of the NSW Branch or to further the Objects of the NSW Branch" was made clear. Also in section 26, the procedures involved in expulsion were also laid out in great detail. This of necessity involved the Federal ASO. If the Federal body did not accept the recommendation of the Branch that a member should be expelled, the member was to be reinstated (Article 13.6). Further Article 13.7 held that "Removal of any member pursuant to such recommendation will be according to Federal Rules".

The membership requirements were unaltered.

Clause 5.1 began; *"A person is qualified to be a Member of the NSW Branch if, but only if,*

*(a) the person is registered as a Member of the Federal Body immediately before the incorporation of the NSW Branch,"*

*Or*

*(b) the person is a natural person who has been admitted to Membership of the NSW Branch in accordance...*

This appeared to give the NSW Branch total control over membership but a legal nicety was added:

Clause 6.1 stated *"The NSW Branch may recommend to the Federal Body that Full Membership be granted to a person..."*

This was acceptable to Federal Council and made no difference to NSW Members willing to support the Chair.

The new NSW Constitution was a detailed document of 42 pages and seemed destined to need changes whenever the Federal Constitution altered any of its membership rules.

What it did do was to require immediately a change in the wording of the Membership Qualifications of the Federal Constitution in that a clause was added:

*Membership Qualifications*

A person is qualified to become a member of the Society if:  
the person is proposed as or is a member of the State Branch...representing members in the location in which the person's principal practice is located....

This required Federal membership to include a State membership but prevented someone from choosing to belong to a Branch where no levy or other impost would apply. The NSW Constitution was approved by the Branch on 28 October 1994. Demonstrating that the State Council meant business, new membership applications for the Branch were posted three days later.<sup>21</sup>

By October 1994 there was a third draft of the Federal Constitution, which contained the solicitor's and the Council's recommendations. A postal vote was planned for 1995. However advice was received that a postal vote for acceptance of a change to the Constitution would contravene the Incorporations Act, and so was not possible.<sup>22</sup> Accordingly a Special Meeting was planned.

Shortly thereafter a suggestion was received from the Society's solicitor, with a reasonable quote for \$2,200, for a total redrafting of the Constitution to include all the changes which had been progressively incorporated. This offer was accepted.<sup>23</sup>

The NSW Constitution had just been finished and "so discussion ensued about the viability of asking NSW to change their brand new Constitution to meet some new and as yet uncreated federal document, or whether the essence of the NSW Constitution would be a suitable model for the Federal one. The latter was the chosen course".<sup>24</sup> Dr R. Fryer<sup>25</sup> from the Executive of the NSW Branch had advised that the NSW Branch had spent a lot of time and money on its Constitution and if the new Federal one were passed he was concerned that it would make the NSW Constitution invalid.

In a sense this may seem a case of 'the tail wagging to dog' but made no difference to the acceptance by the general membership of the new document. And probably has made it easier to keep the documents compatible as they have required changes ever since.

The rewritten Federal Constitution, with the amendments discussed over the previous three years, was duly submitted to a special and well advertised meeting, which took place on the Sunday at the start of the 1996 Congress in Melbourne. The President advised members that the new Constitution had to be passed *in toto*, any subsequent amendments could be possible at a later date. The meeting, which fortunately was attended by more than the necessary 100 members and which lasted only fifteen minutes, passed the Constitution in that form.

Surprisingly, after continual use over the preceding 45 years, there was no provision at all for postal voting. On the other hand, proxy voting with little limitation as to numbers was allowed (although other than the Secretary, no member could hold more than five proxies). The quorum was now 30. The Education Committee lost its seat on the Appeal Committee to avoid conflicts of interest. Further changes formalised the accepted practice that all applications for membership were to be referred by Council to the Orthodontic Education Committee through its subcommittee. A list of provisions, which must be included in State Branch Constitutions, was another addition. These required the Constitution of a State Branch to specify:



ASO President Gerry Dickinson

- a. that any moneys to be raised by the State Branch for purposes, other than paying reasonable administration costs will be sanctioned by a special resolution.
- b. membership criteria and membership categories which are consistent with the Society's.

That all members of the Branch must also be members of the Society.

Council was no longer bound by the findings of the Appeal Committee but on what basis it could disregard them was not made clear. Provision for the Indemnity Scheme was still included, pending the creation of an appropriate Trust.

There was no longer any mention of the Research Awards. These had been placed in the Foundation's recently signed Trust document. No privileges for Honorary Life Members were mentioned.

Duties for all the committees were also addressed for the first time. As discussed elsewhere, many of the committees had taken it upon themselves to assume certain tasks under the broad areas their committee seemed to encompass. This was an imperfect system for a division of duties, but it could be assumed that some incentive must be in place for a committee to initiate such an activity. This was all amended in the new draft and, at the direction of the President,<sup>26</sup> an extensive section devoted to By-Laws was added, defining the composition and duties of all the standing committees which by then had risen to eleven.

At the General Meeting the following day, the Indemnity Scheme was at last abandoned. The voting was quite close 68 to 44. The requirement for three years experience as a specialist, prior to attaining Full membership (not consistent with the ASO policy and incorporated in error in 1982) was returned to two, so beginning the process of eliminating the category of Provisional membership. This would bring conformity with other specialities.

As the dust began to settle over this lengthy and momentous series of detailed changes, there came a plea from the Constitutional Committee<sup>27</sup>, as to which of

the many versions existing at that time was the 'real' one, adding a hope that an electronic copy would soon become the official version and allay those concerns. Hannon requested an additional clause relating to the duties of the Constitutional Committee: "To maintain and update the computer copy of the Constitution and By-Laws for the proper administration of the Society".

Even this latest version contained a multitude of errors, which were either typographical or as a result of oversight. A pragmatic decision was taken, as they were not changes of substance, that no voting was required for their correction. It was decided<sup>28</sup> to reprint the Constitution and By-Laws with an approved hard cover in time for the AGM in March of 1998. This did not happen.

During the following year a Membership Advisory Committee, separate from its parent, the Education Committee, was finally established.

At a subsequent Council Meeting compatibility issues between the State and Federal Constitutions were raised.<sup>20</sup> No problems were reported from Western Australia and Victoria. The situation was uncertain in NSW. South Australia was expecting a test case in the near future and the only problem for Queensland related to 'third line forcing' which the Branch felt could be disregarded for the present, but which was to require consideration in the near future.

Postal voting was again made possible in 2003 and a definition of a principal place of practice was made so as to require a member of the ASO to be a member of the State Branch where most time was spent.

## Changes to Australian Law

Changes to the legal landscape began to impact upon the Society. The Federal Government began to enact legislation, which arose from recommendations in a report prepared by Professor F. Hilmer, which was designed to outlaw anti-competitive behaviour in commerce. The Australian Competition and Consumer Commission (ACCC) came into being in 1995 to administer the Trade Practices Act 1974 which the Hilmer report had caused to be amended. This was to ensure that individuals and businesses comply with Commonwealth Competition, Fair Trading and Consumer Protection Laws.

Part of this was to outlaw the practice referred to as 'third line forcing'. This occurs when a supplier of goods or services places a condition on that supply.<sup>29</sup>

This produced a host of interesting sequelae, which demanded the close attention of, and heavy expenditure by Council for the next decade. Caught up in this were the affiliation rules of the ADA, which demanded that all members of its affiliated bodies (like the ASO) must be simultaneously members of the ADA. The financial difficulty this caused to postgraduate students had previously surfaced in the 1970s. The new legislation seemed to outlaw such a requirement altogether. In 2002 the Society decided that Postgraduate students be accepted as members without needing ADA membership. The ACCC published guidelines also in 2002, which included that a minority of members could be non-ADA members.

Naturally the ADA was consulted throughout this process. Affiliation with the ADA was regarded as sacrosanct by successive ASO Councils and has only ever been in question once, and on that occasion the status quo was confirmed unanimously.<sup>30</sup> The ASO and most of its members wanted to maintain the connection with the ADA because of the clear advantage accruing to membership of the larger organisation and the services it could offer. The most notable of these was their arrangement for professional indemnity insurance. This was not an issue for Post Graduate students who were insured by their University.

When this was brought to the attention of the ADA, the response was that they may have to review the ASO's affiliated status, if a large number of ASO members left the ADA. Such a mass exodus never looked like happening.

The differing response by ANZAOMS is interesting. After 1996, its members were no longer required by their Constitution to be members of the ADA and ANZAOMS ceased to furnish the ADA with membership lists. When asked to do so in 2002, they declined, citing privacy reasons and because they felt the Trade Practices Act meant they had no obligation to do so.

By contrast the ASO has been punctilious in its relationship with the ADA. Even as a member of ACODS, this was never in question. The author has not completely researched the attitudes of the other specialty groups, but the Academy of Prosthodontists is not affiliated with the ADA. Members of the Academy of Periodontists are not required to be ADA members.

The ACCC did in fact contact the ASO, to assist them in assessing a complaint about an entirely different matter and as a result it was found that this affiliation arrangement was in breach of the Act. In 1999, to satisfy the ACCC, the clause 'to maintain affiliation with the ADA', as one of the Objects of the Society, had to be removed. An alteration was also required to the list of reasons for cessation of membership by replacing reference to the ADA with the wording "an approved professional association of dentists". The reasoning behind this is that there could be a number of such societies, thereby allowing the required element of competition. It will not surprise the reader to learn that, promptly, the ADA was recorded as such an "approved institution".

Although there were times that the youngster rebelled against the restraints imposed by the parent, the potential for help was always realised.

To allow for arrangements which were in conflict with the letter, but not the spirit of the legislation, a process was instituted which required an 'Exclusive Dealing Notification' to be lodged with the ACCC. This would bring the process within the exception created by Section 47 of the Trade Practices Act, which dealt with exclusive dealing, and thereby provide immunity. If the ACCC became satisfied that the benefit to the public outweighed any detriment of having the restriction, the ACCC would advise that it would not intend to take any action in respect of the notified conduct.

The legal consultants argued that "there was no possible detriment to the public from the conduct"<sup>31</sup> so that the enforced dual membership of the ASO and ADA could continue to exist. The 'Notification' was duly lodged and the ACCC advised

that after 30 June 2003, the ASO was immune from any action. Council suggested (unsuccessfully) that the ADA might provide some financial compensation to the ASO because of the reduced legal costs in achieving a similar situation for its other affiliated Societies.<sup>32</sup> All the ADA's affiliates were in the same situation and the ASO's attention to this matter was a help to the other specialist Societies. ANZAOMS saw no reason to combine with other affiliated societies when seeking a 'Exclusive Dealing Notification' in 2004.<sup>33</sup>

## Compatibility of the Constitutions

The Society's legal consultants had been constantly advising, since the early nineties, that all the Branches should both become incorporated and draw up their own Constitutions. This advice was not acted upon with any great urgency. Ian Watson reported that by 2003 all Branches had become incorporated, and all but one had their own Constitution. (In 2009 two States did not yet have their Constitutions on the ASO website.)

Requiring each State Branch to be incorporated and to have its own Constitution would have had the effect of demanding an additional membership of the legal entity that was the State Branch. A corollary to this, under the new Trade Practices laws, was the illegality of a member of a State Branch being forced to belong to the Federal body or vice versa. The ADA itself was in a similar but not identical position. Historically, because the ADA was formed from the amalgamation of pre-existing State Dental Societies, the first point of contact and involvement had always been the State body even though it came to be known as a "branch". It was originally thought possible, that individual members would become members only of the Branch and the Branches themselves would become the members of the Federal body.

In the ASO, the primary membership, historically, was with the Federal body. This is so, even though, mechanically, membership applications always originate and have to be approved at state level. The pragmatic justification for this practice was always that applicants were more likely to be known locally, and any reasons why membership should be denied could be made known at that point.

In addition to the 'third line forcing' issue, compatibility of the Federal and State Branch Constitutions, first discussed in 1993, needed urgent attention. Achieving such compatibility of the Constitutions was an obvious goal. As mentioned earlier, the first Branch Constitution was written for NSW, to provide backing for the imposition of a levy. The proponents behind this heavy financial commitment became quite aggressive, as they had to be to force through such a contentious, highly divisive and expensive levy. It became something of a struggle to see which Constitution would conform with which.

One of the main imperatives forcing this compatibility issue arose out of a disciplinary procedure, which the ASO, prompted principally by the NSW Branch, decided to initiate.<sup>34</sup> It was thought that non-uniformity between State and Federal Constitutions could provide a loop-hole for a possible defence.<sup>13</sup> As this matter was further discussed, the possibility of a member being expelled from the Federal

organisation but not from the State Branch was of concern. The legal opinion stated:

We are unsure whether it is proposed that disciplinary action should be taken on a National basis as opposed to on a State level. We note provision in the National Constitution that a person ceases to be a member of the national body if he or she ceases to be a member of the relevant State Branch but the same reciprocal position does not appear in the State Constitution. Therefore it would seem desirable, where possible, that disciplinary action be taken on a State level to avoid duplication of disciplinary proceedings.<sup>35</sup>

It was therefore rather ironic that altering the Federal Constitution to achieve compatibility with the first NSW Constitution in 1994 on issues mainly involving expulsion, created one of the major imperatives for revisiting of these documents almost a decade later.

The report went on to recommend that the procedure outlined in the Queensland Constitution, which allowed a member, subject to a State Council expulsion resolution, to make submissions to a Federal Council Meeting, was preferable from a natural justice perspective. The solicitors offered to review all the Constitutions with a view to drafting a common disciplinary process.

There was no option but to create compatibility between all Constitutions in all matters, not just discipline.

Steps towards ensuring compatibility with the Federal Constitution were begun in 2003, with the NSW document, being thought the most difficult, tackled first. This would be used as a template for the other states. The Queensland Branch confirmed they would simply copy the NSW document.

Despite the 1996 amendments to the Federal Constitution which required inclusion in State Constitutions that members of the State Branch had also to be members of the Federal body, the NSW document had not been changed from the original 1994 version and there had been many changes to the Federal Constitution in the subsequent ten years. The report from the lawyers<sup>36</sup> outlining the areas where changes were required made several points. These included matters related to membership, finances (including auditing) and the need to comply with the current Associations' Incorporation Act. The latter two were fairly technical, but there were many changes necessary around membership, which also encompassed the disciplinary issues.

To be eligible for Full Membership, Clause 5 of the NSW Constitution required that:

the person be registered as a member of the Society immediately before the incorporation of the NSW Branch.

Clearly this clause had to be applicable to all members applying for membership, not just the foundation members (i.e. those who already were ASO members at that time).

Reference to Provisional membership, which no longer existed, had to be deleted. Associate and Corresponding Members did not have to be ‘registered dentists’.

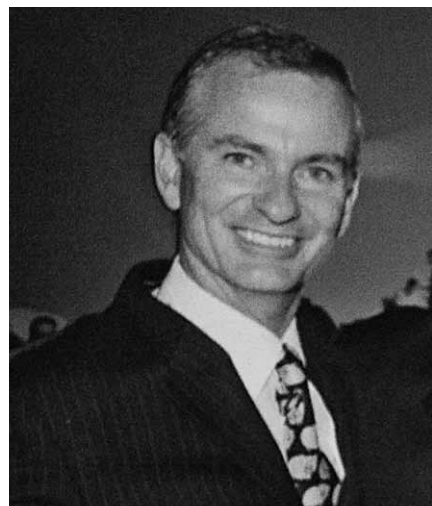
The issues already dealt with in the Federal Constitution around ‘third line forcing’ of ADA membership also needed attention. A series of ‘notifications’ that the requirement to hold membership both of the State Branch and federally was not against the public interest, was received from the ACCC for each State Branch.

These changes to the NSW document were expected to be costly and caused a worrying drain on ASO finances.<sup>37</sup> Initially the Federal President suggested that NSW should pay the lion’s share<sup>34</sup>. This they vehemently refused to do, with the result that the Federal Executive said they would make a contribution, so that all Branches would pay similar amounts. Eventually the ASO footed the entire bill, which made quite a dent in the finances. The treasurer reported “The 2004 year has been a difficult year financially. The changes to the NSW Constitution cost \$16,000”.

As late as 2006, a whole raft of constitutional changes (again largely technical) was approved at a General Meeting to make the Federal Constitution consistent with the provisions of the NSW Constitution. The President, in his 2007 report, wrote of his hope that all States would have the Constitutions functional and compatible by the end of the year. “The Federal Constitution with appropriate and compatible State Branch Constitutions is the cornerstone of our Society’s operations...”

Although Australia’s eight jurisdictions have different sets of laws, applying as much to dental regulation as to everything else, this has impacted surprisingly little on the Society. There have been few instances where one could be recognised as an orthodontist in one place and not in another. In Victoria there was a movement towards deregulation of Dentistry and the consequent elimination of any regulation of specialties. This occurred in 1997, when it was decided that some changes were necessary to their Dental Act. The same sort of process was discussed in New Zealand. Nothing came of either movement. There was some intense lobbying. Although a new Dental Practice Act came into force in Victoria in 1999 and was altered in 2007, the situation affecting specialties remained fundamentally unaltered.

Currently the Constitution runs to 52 pages. An up-to-date copy is available to ASO members on the website. This copy no longer lists the occasions when changes have been made. The document bears little resemblance to the one of 20 years ago whereas that version was still recognisable from the 1927 original.



Pat Hannan

In writing to the author, Patrick Hannon<sup>38</sup> said that his advice was always restricted to

matters of a technical nature and that he did not enter into any policy discussion with Council. In this he varied from his predecessors, especially West, Crisp and Spring, all of whom had initiated many of the changes, on which they worked.

After more than ten years of dedicated service, in 2004 Hannon retired from the 'pan' as Chair of the Constitutional Committee to jump right into the 'fire' as ASO Secretary, where his good work continued. It was a great pleasure to see Pat receive a Distinguished Service Medal from the Society in 2009, for his Herculean efforts.

## Endnotes

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5. Executive Minutes (/1983
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## Chapter 20

# Membership

The categories of membership and their requirements have changed considerably over time, but the rate of change increased greatly around 2000. The 2.2.2 rule became established in 1982 as part of the ASO's Policy on Specialisation, although the rules for Full membership continued to require three years of specialist experience. West had attempted to have the requirement that two years be spent in some sort of general practice, prior to graduate training, reduced to one year. This was eventually eliminated altogether in 2002. Why this happened is unclear from Society minutes. It probably came about as the intense competition to achieve a place in the graduate programmes increased. A pass in the primary examination for the College's Fellowship became, de facto, a prerequisite, as was proof that the time had been well spent. To gain a sufficient range of experience, to compete against a host of other applicants, all well qualified, took a great deal of time. Spelling out a certain period of time after graduation, became unnecessary.

The Registrar of the Dental Board of Queensland contacted the ASO<sup>1</sup> regarding the requirements for registration as a Dental Specialist. He reported that the most recent conference of Dental Board Presidents resolved to recommend to Boards that the "special skill" period of experience no longer be a requirement. The Queensland Board accepted that recommendation, but also proposed that the training period be extended to three years. They sought the views of the ASO, which supported the Board's intentions<sup>2</sup>. Both parties realised that there were postgraduate students currently doing courses of a shorter length.

The minimum duration of an approved course, as envisaged by the Queensland Board and as laid down in the Erasmus recommendations, could not be included in the rules for Membership until 1999, as some students were still completing courses which had been advertised as of the shorter duration. A fixed term was eliminated so that the wording became "an approved course". Progressively, and influenced by the Erasmus document, the two year courses had moved to three.

The last course being Melbourne where, it had been planned for some time, but the change did not take place until after the first round of evaluation visits for the accreditation of Postgraduate Courses in 1999. Subsequently (2000) the definition of an approved course was changed to:

a course approved by Council comprising two or more full-time academic years of advanced education leading to a higher qualification in orthodontics and includes any additional requirements relating to postgraduate experience and minimum periods of exclusive practice in orthodontics imposed by Council as conditions of its approval.

This addition seems strange when the 2:2:2 rule had just been discarded. Effectively this meant that a course could only be approved after evaluation by the ASO, as the peer review element of the accreditation protocol, just established by the Australian Dental Council.

Two years later, the rules for Full membership were again altered. Clause 5.1(a) which had read “registered dentist” became “registered orthodontist” meaning a person whose name has been registered, or permitted to use the title, by a Dental Board in Australia. This could not have been the wording in days gone past, as not all the Boards had sections recognising specialties. Victoria has been the standout and even today specialists in this State are only ‘endorsed’ as such.

Because of the residency requirements, to be mentioned later, the alternate possibility for Full membership of the ASO of having been “the equivalent of a Full Member in an ‘approved overseas organisation’” also had to be eliminated.

The requirement that “no person is entitled to Full membership of the Society within six years from the date of his or her graduation as a Bachelor of Dental Science or its equivalent” was also completely deleted.

No part of the 2:2:2 rule remained.

## Provisional Membership

This category had been contentious for some time. Originally introduced in the preceptorship days to ensure Full membership could only be achieved with a reasonable level of experience, it had, for some time, caused problems when the health funds would only pay benefits to Full Members. This had been resolved when the funds were asked, and acceded to the request to pay benefits to registered orthodontists or to use the ADA lists to decide on specialty status. But it was always a barrier to younger orthodontists at a time when new blood was much in demand for the Society’s ever-increasing range of functions. The systems in use to ensure an automatic upgrade to Full membership, after expiry of the prescribed time, were somewhat unsatisfactory. On occasion Provisional Members languished in that status much longer than should have been the case.

None of the other speciality groups had such a requirement. The first suggestion to discontinue the category of membership occurred as early as 1975,<sup>3</sup> but did not get majority acceptance. Council decided in 1999 to recommend that the category

eventually be abolished. In the shorter term, Council also requested a change, so that while retaining the category of Provisional membership, graduates of Australian orthodontic programmes would proceed directly to Full membership. Provisional membership was finally eliminated entirely in 2002, in tandem with the other changes to the membership rules mentioned above.

To be compatible with the elimination of this category, the requirement that a Full Member must have completed not less than two years exclusive practice in Orthodontics was eliminated and replaced by an entirely different requirement, that “all applicants must produce a certificate of good standing from the Dental Registration Board with whom the applicant is registered as a dentist or specialist”.

## Overseas Membership

R.H. Olive also became concerned about the residential status of ASO Full Members. Perhaps his principal concern was to ensure affiliation with the WFO, which requires that only fully qualified orthodontists can be voting members of affiliated societies. His view was that to ensure that all members were both fully qualified and registered, they must be resident in Australia. It is not certain that legal opinion was sought to substantiate that view, or that this was the intent of the WFO rules.

The By-Laws of the WFO, amended in February 2008, state in Clause 4.1.1 that one of the options to be a “fellow” requires that an orthodontist shall be:

a Full Member of a national or regional association of orthodontists affiliated with the WFO and reside within the jurisdiction of such association.

Article 6, which deals with affiliation to the WFO, is silent on the issue of residence. The situation with the ADA (Queensland Branch)<sup>22</sup> was quoted. So in 2000, included in the requirements for Full membership, was that the member should be resident in Australia and registered with, or recognised by, an Australian Dental Board. The author feels the imposition of this requirement to be questionable.

This change necessitated a further change in 2002 to include a category of Overseas Member. To encourage involvement in the Australian Orthodontic Board, a process of provisional certification/membership of the Board had been instituted for Postgraduate students. Many came from overseas, planning to return after graduation. These members would have been lost to the Board without special provision, which took the form of offering an Overseas membership of the ASO.<sup>23</sup> A subtle difference then existed between that Overseas Member and a Corresponding Member, who also had to be a member of the Orthodontic Society of their home country.

What this meant for Corresponding members was initially uncertain. For a while both categories continued to exist. In 2005 it was suggested that this category be discontinued. Hannan advised against this move, as the two categories carried different rights.<sup>4</sup> It was decided to put this matter to the vote at the 2006 General Meeting. Winifred Harding, NZAO President, confirmed that all Corresponding

Members from New Zealand, who made up the majority, were fully qualified orthodontists and so eligible to be 'grand-fathered' into Overseas membership.<sup>5</sup> Eventually this category, introduced in 1961, was eliminated.<sup>6</sup> This is not expected to produce any sort of backlash from those who may have wanted to maintain a connection to the ASO. The existence of the WFO and other Regional Confederations, allowing ready interaction, including attendance at meetings internationally, make this unlikely. One of the author's friends said that he had not always received notices about his subscription, and was getting only a very slight advantage from his Corresponding membership.

## Associate Membership

The history of Associate membership goes to the heart of the Society's existence. In the early days tension existed between the desire to have a Society devoted to the study of the subject, as was the case with the NZ and UK Societies, and the need for a body primarily to look after the particular interests of the specialist practitioners. In 1961 the BSSO had 99 per cent Associate Members.<sup>7</sup> The ASO originally chose the latter option, and it departed from that only when it was clear that the Society's viability could never otherwise be achieved. Originally Associates had to be "practising Orthodontia in general practice with a view to specialising" and could only be elected for a period not exceeding three years. The actions of the Victorian Branch removed "with a view to specialising", but at that stage Associate membership still had the same time constraints. ASO secretary John Reading confirmed in 1960<sup>8</sup> that retention of Associate membership would be automatic on receipt of subscriptions. Norton had written to Kevin Henderson<sup>9</sup> that the Executive had resolved that, unless there had been a "contrary report", renewal of Associate membership would be automatic.

The NSW Branch, in 1957, moved "that the Federal Executive examine the possibility of Associate Members, in good standing, being granted Full membership after five years". This was unanimously opposed by the Executive.<sup>10</sup> In fact that Executive noted, with some alarm, the huge rise in Associate membership during their term, and thought that some sort of ratio between Full and Associate Members may be a satisfactory solution.<sup>11</sup>

Originally, overwhelmingly comprised of Associate Members, the proportion of Associates in the Society irrevocably fell away. L.M. Smart, President, said in the very first edition of the AOJ, "It seems probable that in the not too distant future, membership in the Society will be limited to those engaged full-time in orthodontics." the Executive recorded that the Society lost 25 per cent of its Associate membership as a result of the implementation of the Congress levy. No part of this loss was attributed to the fact that Associates lost their right to vote at State Branch meetings, at about the same time (1982). Various moves were made either to eliminate the category altogether, or alternatively, to impose a moratorium on the acceptance of new Associate Members beyond a certain date. The Western Australian Branch indicated, by way of a foreshadowed motion in late 1985, that it accepted in principle "that no new Associate Members be accepted into the Society, but that membership of present Associate Members not be prejudiced".

The Executive wrote back to the State Branch expressing concern at the “premature and provocative motion”, as it was in no way certain that Associate membership would be altered.

At the 1987 General Meeting, motions were presented to introduce two new By-Laws, the more contentious of which allowed the Society to restrict attendance at courses run by the Society to Full, Provisional and Student Members. The other motion was that no new applications for Associate membership be accepted after a certain time, and further that “Associate Members be no longer able to attend the Business Section of the meetings of the Society nor should they be eligible for election as Office Bearers on the State Executive”. The Representatives meeting had been unable to come up with a recommendation for the general membership, indicating that the notion clearly had some degree of support. The motion, however, was lost. By 1992 there were only 48 Associate compared to 258 Full Members.

None of the other specialist Societies had had Associate Members for a long while. Periodontics, Prosthodontics<sup>12</sup> and Endodontics<sup>13</sup> have twin organisations, the one encouraging general practitioner involvement operating in complete harmony with the other. The category was still listed in 2000. Subscriptions were identical to those for Full Members.

A change in the formatting of the Directory had created a situation where a Full Member’s listing had been deleted, and that of an Associate included. This occurred at a time when many non-specialists, including this Associate, were actively promoting their orthodontic services. The Full Member felt disadvantaged. A motion to the effect that Associate Members be no longer listed in the directory was defeated in favour of including their names only in the alphabetical and not the regional listings.<sup>14</sup> The category was eliminated altogether at the 2005 General Meeting, where it was pointed out that there were very few Associate Members, the last was admitted five years previously and the one before, ten years prior to that. Those who had been Associate Members were assured that as non-members they would still be welcome at Society Meetings.

In the UK, a purely specialist organisation began when the British Orthodontic Society was formed in 1994 with the incorporation of several specialist orthodontic groups.<sup>15</sup> The BSSO continues to exist so those with an interest in Orthodontics in the UK have their own organisation.

Failing to provide properly for any interest in Orthodontics by general practitioners does not represent the ASO’s ‘finest hour’.

## Semi-retired Members

Retired membership had existed from 1977. Jeremy Hall, President of the Western Australian Branch suggested a new form of membership, similar to a category of membership which had been introduced by the ADA for those employed less than 500 hours per year. This also included a much reduced professional indemnity insurance premium. This category of Semi-retired Member was introduced in 2003, for members who were engaged clinically for an average of one day a week or in

teaching for half a day weekly. Such members had to be over 55 years old and must have been members for 25 years. The rapidly increasing costs of Full membership must have necessitated this addition.

## Student Membership

To encourage attendance at the ASO Congresses, Student membership had been introduced in 1971, as postgraduate training became generally available Australia-wide.

The Executive decided only full-time students were eligible.<sup>16</sup> All however were invited to Congresses. The high cost of the compulsory ADA membership created the problem. The ASO had been able to convince the Federal ADA but not the State Branches to reduce subscription fees. The matter was raised again during Stanley Paul's Executive when the Society reviewed the question of Student membership to encourage postgraduate students to become members of the ASO, and take part in its activities.

In order not to lose ADA affiliation, the idea was mooted of making all students Honorary Members. The Constitutional Committee was asked to look into the matter and Phillips reported that there seemed "to be nothing to preclude the invitation by the President of guests to lectures at Congress". This did not fully address the issue. There the matter lay. The Executive made recommendations in 1993, to the effect that student subscriptions be set at \$50 Federally and that they be exempt from State subscriptions. Some Sydney students were having difficulty with the high fees for subscriptions. The ASO eliminated any subscription fees for students in 1996<sup>17</sup> but the ADA's rules applied until the situation became resolved with the rules forbidding third line forcing.

The question of ASO membership for postgraduate students from overseas came up in 1996. The initial response was that membership was not necessary as postgraduate students would always be made welcome at meetings of the Branch, in the State, where they were studying.

The Postgraduate Departments generally demand participation by their students in ASO Branch activities. This has the benefit of somewhat energising the branches and also introducing the students to the community in which many would spend their professional careers.

An additional type of membership for students studying Orthodontics in institutions overseas was introduced in 2007.

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## Chapter 21

# The ASO internationally

Australians have always travelled. They have to. Australia is a long, long way away.

Orthodontists are no exception. The overseas training undertaken by our early orthodontists has already been discussed. Stanley Wilkinson attended the 1<sup>st</sup> International Orthodontic Congress in 1926, and the involvement of the newly formed ASO Executive in the 2<sup>nd</sup> Congress in London has also already been mentioned. All major orthodontic conferences in the English speaking world have a solid antipodean presence. Increasingly, conferences in the Asia Pacific area are officially attended by representatives of the ASO.

Although it is a private publication from the US, the Orthodontic Directory of the World (ODW) has had an effect in the bringing together of its international community. The editors have always been conscientious about including as many practising orthodontists from all corners of the globe as possible. This has provided, and continues to provide, a very valuable information source for patients being referred overseas.

In fact, as has been pointed out, the ODW's request for the names of orthodontists known to be practising in Australia, helped to provide an incentive for Thornton Taylor to contact these men, with a view to reforming the Australian Society of Orthodontists.

As early as 1954, the matter of overseas liaison was discussed: "Every effort should be made to gain closer liaison with overseas Orthodontic Societies and ... this could best be done through media of correspondence and the various Dental Journals".

New Zealanders probably have been somewhat more active in attempting to create international bonds than we in Australia. Geoffrey Walker, the Honorary Secretary of the NZOS, wrote to his opposite number in Australia, asking: "Would there be

enough support for a Journal or annual Transactions if we pooled all papers and lectures for an Australasian publication?” R.G. Tonkin from Auckland, who was the first Corresponding Member of the ASO, wrote to the ASO President, mentioning that many members in New Zealand were Associate Members only and suggested an Australasian Society for specialists. (The original NZSSO had changed its name in the years 1960–62. It became first the NZ Orthodontic Society and then as a result of a constitutional change, taking place at a meeting in Wanganui, it became the New Zealand Society of Orthodontists.)

Norton promised to place the request before the Council the following month in order to try to establish meaningful co-operation. This was to include shared meetings and collected transcripts from meetings. John McGibbon was also an advocate of creating a joint Society. Nothing ever came of this proposal. It was raised again when R. Cook spoke to his NZ counterpart in 1990.

To cement the co-operation, ASO Secretary John McGibbon wrote to his counterpart A.H. Gresham saying: “We now have four New Zealand corresponding members of our Society and we would very much like to publish a New Zealand news letter in our Bulletin”.

In 1969 the NZOS requested a membership list for a three-day symposium to be held in Auckland. J. Tonkin, NZOS President, contacted his counterpart Richard Case saying that he intended to invite the Japanese and Philippine Associations to participate and expressed the opinion that the AAO was willing to co-operate with the possible development of an regional organisation of Orthodontists in the Pacific area.

The first biennial Conference of the New Zealand Orthodontic Society was officially designated the “1971 Pacific Basin Orthodontic Conference”. The ASO indicated its general approval. Case was invited to represent the ASO as Federal Representative but John Heath was eventually appointed. The meeting was well supported by Australian Orthodontists. No such moves were made by the ASO. Despite the universally sound relationship, which exists, and the Trans Tasman Mutual Recognition Arrangement (1998), at the present time Orthodontics is the only specialty in Dentistry where a Trans Tasman Society does not exist.

The ASO did respond to the invitation from Prof. W.J. Tulley, President of the 3<sup>rd</sup> International Orthodontic Congress, which was finally held in London in 1973 and sent an official representation. This Congress was jointly sponsored by the European Orthodontic Society (EOS) and the AAO and was attended by 3,500 delegates. During the discussions leading up to this event, Council suggested that Australia might, at one stage, have been able to host this meeting. In responding to the ASO, Tulley thought that distance might be a major problem.

Sir Kenneth Adamson had been named a Senior Honorary President at this meeting and P.R. Begg and A Thornton Taylor were appointed Honorary Presidents. In the lead up to this meeting, having gained approval from the EOS, Thornton Taylor donated a medallion to be worn by their President during official occasions. That medallion is still in use and is referred to in the history of that organisation.

Expecting a large contingent, R.Y. Norton attempted to organise group travel, to include as many Australians as possible. This failed to materialise, but J.F. Reading and J.B. Moffatt, ASO President and President-Elect, were appointed as official representatives, actually called Officers of the ASO, to attend the meeting. In travelling to London, they were particularly interested in receiving information regarding dental health schemes in the United Kingdom and elsewhere in Europe. Reading wrote a detailed report on this matter for the ASO on his return. This resource proved invaluable, when moves were made to include Orthodontics among the services receiving health benefit payments and orthodontic treatment provided by general practitioners was being promoted.

## Asia Pacific

Close relationships were developed with the Japanese orthodontic community as a result of their early interest in the techniques of P.R. Begg. Their involvement at the 1<sup>st</sup> Congress and the congratulatory message from the President of the Japanese Orthodontic Society has already been mentioned. The President and members of the Japanese Orthodontic Society were invited to attend most early conferences. These invitations were naturally reciprocated.

The Executive had a number of banners with an ASO logo prepared. In 1974, Ives Lopez, who had come to Australia as a Colombo Plan fellow, was directed to take one along to the Indian Orthodontic Congress, which he planned to attend, and present it to the Indian Orthodontic Society.<sup>11</sup> B. McLean, who had been invited to give a postgraduate course in Brazil, performed the same task in that country that same year. Lopez was also requested to represent the ASO in any discussion on the formation of an Asia-Pacific Orthodontic Society. He was also asked to visit the Orthodontic Department of the University of Bombay to provide an opinion on whether a qualification from that Institution would be sufficient for acceptance for Full membership of the ASO.<sup>9</sup> The only time such an inspection visit has occurred overseas.

Japan held its first International Congress in 1976. Barry Mollenhaeur deputised for the President. There existed at this time an Asian Pacific regional newsletter which was used to publicise ASO Congresses.

The Pacific Coast Society of Orthodontists, a component Society of the AAO, requested official representation at a meeting planned in Honolulu in 1977. John McGibbon offered to act as ASO liaison officer.

In 1991, the first Asian Pacific Orthodontic Congress was held in Osaka, Japan, to commemorate the fiftieth anniversary of the founding of the Japanese Orthodontic Society. In drawing the attention of the Council to this Congress, Crawford wondered, if one day the ASO might not host this conference in Australia. It took 19 years. Since that time the South African Orthodontic Association has suggested a joint meeting of the two Societies.

Recognising the desirability of playing a more international role, the ASO established an International Liaison Committee in 1995 with J. Geenty as Chairman, assisted by

Alan Coveney. Shortly after, the NZAO advised of similar action. (The NZ Society of Orthodontists had become the NZ Association of Orthodontists in 1987). For some time this failed to produce any initiatives other than to collect information about overseas meetings and was eventually wound up. Meaningful international cooperation between Orthodontic Societies is really more the province of the President and Executive than of the committees.

There was a move to form an Asia Pacific Federation of Orthodontists at the Asia Pacific Orthodontic Congress in Taiwan in 1997. The Executive felt that it would be more appropriate for the Societies in the Asia Pacific region to become part of the newly formed World Federation of Orthodontists (WFO). The President also felt that the Asia Pacific leaders might express their interest in holding the 2005 Congress of the WFO.

In preparation for the 1998 ASO Congress, the author suggested that Prof. Daniel Huang, the Secretary of the upcoming Asia Pacific Orthodontic Congress (APOC) (November 1998), be invited to attend, and that the Presidents of the New Zealand Association of Orthodontists and the Thai Society should also receive invitations. In fact, the Presidents of all the orthodontic societies in the Asia Pacific area received invitations to attend the 1998 Congress, but at their own cost. The President of the Korean Association of Orthodontists, J.C. Kim was also present, but was not invited to attend the Council meeting.

Both Huang and Robert Max, the ASO's WFO representative, attended the Council meeting at which Huang explained the essential operations of Asia Pacific Orthodontic Society (APOS). The ASO indicated its interest in becoming a member. Individual memberships were also available. Dr Huang reiterated the view that the Asia Pacific area should form its own Federation, independent of the WFO.

R.H. Olive reports having had dinner with Prof. Huang and Dr J.C. Kim, during that meeting, and discussing shared interests. He was positive about the APOS but declined any executive position. Dr Huang, in thanking the ASO for his invitation, wrote: "I firmly believe that your ASO should play a strong role in the Asian-Pacific Orthodontic Conference. The Asia-Pacific orthodontists will know you better..."

Almost alone among the ASO community, Olive and Ian Watson understood what he meant. Council decided to invite Watson to represent the ASO at the 3<sup>rd</sup> APOC and failing that, Peter Ferguson to attend one of the functions planned. In the end, no office bearer was available and Council asked NZAO President Wayne Dalley to represent it. A meeting to discuss a Constitution for APOS was planned for that meeting. The Executive also choose not to accept an invitation to host the 4<sup>th</sup> APOC meeting in 2002.

For a while, APOS had acted purely as a type of committee, the principal purpose of which was to organise the Asia-Pacific Congresses every four years. It was an informal group without a Constitution or legal backing of any sort. A draft Constitution was prepared in 1999 and immediately rejected by the Executive as being too loose. In Olive's words, "It was not incorporated, has no bank account and no reporting requirements".

The ASO had indicated its wish to become a member of the APOS as early as 1998 but an invitation was a long time coming. Seemingly the rejection of the first draft Constitution prejudiced our case and began a rift between the APOS hierarchy and the ASO, which Ian Watson spent three years trying earnestly to heal.

Nobody has worked harder to build bridges and promote the ASO throughout Asia than Ian Watson. He reported in 2003 that there had been some bitterness towards the ASO from some Asia Pacific countries. There was a change in Presidents from those areas, and after repeated attendance at meetings of the regional societies, eventually, in 2004, the invitation to join APOS was forthcoming. This was aided by an innovative approach from the ASO, whereby each year the Asia Pacific Presidents would receive another in a series of eight Aboriginal art works.

Upon being invited, the Australian representatives attempted to regularise the constitutional basis of the group. To this end, Watson had rejected an offer to be a Vice-President in favour of a secretary-general's role and eventually succeeded, despite some deep cultural differences, in having a Constitution accepted by all parties. Both the NZAO and the ASO are now integral members.

ASO Presidents, during their terms of office, now regularly attend conferences in the Asia Pacific area in order to build bridges. Funding is now provided for these visits, which include the NZAO, the AAO and the APOC. E.C. Crawford in his term as President visited France, Japan, Korea, India, New Zealand and the United States.

Watson hosted a dinner at the Adelaide Congress of all the Office Bearers of the Orthodontic Societies attending. So successful did he feel this to be, that it has become a feature of all following Congresses. It was long overdue. Currently all Presidents in the Asia Pacific area receive invitations to attend ASO Congresses at no expense.

Subsequently Watson has felt compelled to resign his position on the APOS. He now feels the Constitution, he worked so hard to have accepted, is under threat and considers a review of the ASO membership is in order.

Becoming more involved internationally may be seen more as an 'article of faith' than an initiative with specific goals. The success of the FDI and Australia's involvement in that organisation may have provided a model, but in reality there are far fewer areas where practical co-operation can be developed.

Orthodontists can provide help in fewer areas of public health in third world countries than general dentists. 'Rotary International' organises a considerable effort in cleft lip and palate rehabilitation programmes and many other forms of care. Australian orthodontists, notably Andrew Collette from Victoria, have been involved for some time. Many programmes carried out by Australian health workers in the Asia Pacific area, have had a considerable orthodontic contribution from a group called the Australian Orthodontic Institute. This group is not associated with the ASO, being something of a splinter group, but includes mostly ASO members.

Some Australian orthodontists, notably Colin Twelftree, who served with the Army in Vietnam, have continued visiting that country and elsewhere, providing more general dental services. No doubt there are many other contributions.

Our graduate programmes attract numerous applicants from overseas, many of whom maintain their connections with the ASO. The Australian Dental Council has developed an accreditation protocol for undergraduate programmes, which has been of interest overseas (United Arab Emirates), but to date there has been no similar response for the protocol pioneered by the ASO for the accreditation of postgraduate courses in Orthodontics.

Australian orthodontists regularly present research findings and clinical material overseas. Some have gone overseas to help develop or participate in graduate education. Notable are Professors Keith Godfrey and Mithran Goonawardene. Godfrey, throughout his 30-year tenure at Sydney University, consistently flew the flag overseas (Pacific Islands, Libya, China). After his retirement from the University of Sydney in 1993, he has worked almost full-time at Khon Kaen University in Northern Thailand developing a graduate programme there, based mainly but not solely on his extensive experience in the rehabilitation of those born with cleft lip and palate and other congenital facial deformities. Khon Kaen has become something of a mecca for graduates of the Sydney Programme. Goonawardene, whose family hails from Sri Lanka, continues to visit and provide input to orthodontic education there.

Despite the relative paucity of areas for practical interaction, the ASO has pursued with determination a meaningful involvement in the international community of orthodontists and care programmes.

## The WFO

A World Federation of Orthodontists (WFO) was formed in 1995. The ASO had been asked in mid-1993 if it was interested in the possible formation of such a body. It responded positively and ASO President Basil Phillips met with representatives at the AAO meeting in Toronto in 1993. That September, Phillips was asked by the planners of the Federation if the ASO would like to become a member. He promised that the ASO would be represented at the AAO meeting in San Francisco in 1995, where it was mooted the WFO would become into being.

Preliminary discussions occurred at the AAO meeting in Orlando in 1994. This meeting was attended by the author, as President-Elect, representing the ASO. Consensus that such an organisation should be formed was inevitable and the steering committee was tasked with bringing the WFO into being. Matters moved at an extraordinary pace such that, within a very short time, the infant organisation could boast of 4,500 fellows, including 138 ASO members, with 79 affiliated Orthodontic Societies from 69 countries.

It would be fair to say that without the active sponsorship and stimulus of the AAO, a WFO would have been much longer in its formation. William De Kock, Chair of the steering committee, and long-term Secretary-General of the WFO, said

that: “One of the biggest reasons for its formation was that there had not been an international congress since the Third Congress in London in 1973”. He continued: “The need was there to have an umbrella body with world wide participation to determine where the next international orthodontic congress should be and an IOC needed to be held once every five years”.

Probably the principal reason, however, was defensive. It was quite common for general practitioners, or orthodontists without approved training, from all parts of the globe to attend, and to use their attendance at AAO meetings to bolster their qualifications. There was, at that stage, no means of ensuring that attendees were specialists and therefore a procedure was begun, whereby it was required of the President of an orthodontic association to confirm that an applicant for WFO membership was indeed an accredited specialist in that country.

Again in De Kock’s words: “The world needed an orthodontic credentialing mechanism and the AAO was willing to support the origin of the WFO to do that and I believe it is accurate to say that you and the Aussies and several other forward looking countries were willing to do that as well. Thus the WFO was conceived to be a mechanism to verify the credentials of an orthodontic specialist worldwide and I’m proud to say it has done just that”.

There was a difference of opinion between the North American protagonists and some from Europe, who perhaps were not so defensively minded. They saw more an amalgam of orthodontic societies rather than an organisation to which individual orthodontists might belong. Whether that would have been more successful is a moot point.<sup>13</sup>

The 4<sup>th</sup> International Orthodontic Congress was held in San Francisco in May 1995 under the sponsorship of the American Association of Orthodontists. The WFO’s By-Laws, which prescribed the requirements for both Society and individual membership, were adopted at this meeting.

Australian orthodontists immediately made up one of the largest representations in the WFO fold. The SSFODF from France paid all the original dues for their Full membership and that made them the second most numerous, after the US, with South Korea perhaps next.

For administrative purposes, the world was divided into regions. Our area, the South Western Pacific, referred to as Oceania, was superbly represented by Robert Max, from New Zealand, in the initial phases. No financial support was forthcoming from the WFO and so, at his own cost, he represented the Oceania area at their yearly conventions, which were held, for sound political reasons, in a multitude of locations worldwide. His position has since been taken over by Ian Watson.

The WFO held international meetings in association with the AAO in Chicago in 2000 and in Paris in 2005. Australia was chosen for the next meeting of the WFO in February 2010. Being granted the right to hold this meeting in Australia was a great coup for the ASO, Australian Orthodontics in general and a good thing for the nation.

## Richard John (Rick) Olive

Like many of the others in the ASO, Rick's myriad contributions have been underpinned by his lengthy experience in organised Dentistry generally.

Rick wasted no time in deciding Orthodontics was his future and finished his Masters Degree four years after graduation. He has served over twenty years as Tutor or Examiner for the Orthodontic Department in Queensland. Positions on the Faculty Board and Executive Committee of the Faculty followed. Recently he was made an Adjunct Associate Professor.

He has given several major presentations to scientific meetings and made important contributions to the scientific literature including one quoted in this work.

He has played a major role in the Queensland Branch of the ADA and also Federally. He has been a Director since 1999, and President from 2002–4, of the Australian Dental Council. Accreditation of courses at all levels has been one of the greatest accomplishments of the ADC. Rick has been central to this endeavour and made special contributions in Orthodontics and Oral and Maxillo-Facial Surgery.

He was President of the Queensland Dental Board for 11 years and had organised for a history to be written of the Queensland Dental Board. It was a chance remark by Rick, overheard by this author, that led him to volunteer to write this History.

His services to the ASO began as Queensland Branch President in 1987. In 1990 his term on the ASO Council began, culminating in his Presidency from 1998–2000. During that long period, his extensive experience across all facets of Dentistry has informed much of the debate taking place and been of enormous value to the ASO Council.

Since that time his involvement has been more international, being Chair of the WFO 2010 bid Committee and Chair of the 7<sup>th</sup> IOC Committee once that bid was successful. His vision and foresight meant that it was he who first saw the possibility that Australia could host an International Orthodontic Conference when such events became a reality, with the formation of the WFO. His dogged pursuit of this dream saw it become a reality.

His other activities include a 30 year service with the Army Reserve where he is currently Consultant Colonel. He has also given long service to the United Services Club rising to President from 2000–2002.

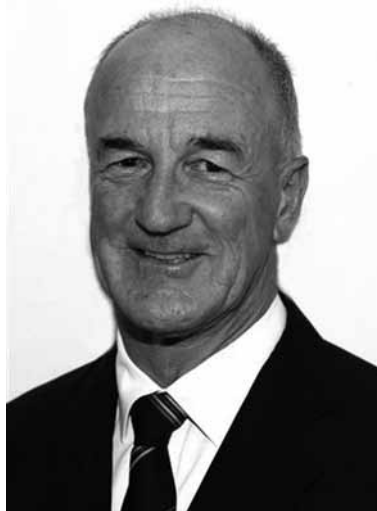
He has received multiple honours for his work including Distinguished Service Award and Honorary Life Membership from the ADA (QLD branch), the Australian Defence Medal and the Reserve Force Decoration. In 2007 he was made a member of the Order of Australia. An Honorary Life Membership of the ASO will be bestowed at the 7<sup>th</sup> International Orthodontic Congress.



## Bruce Ian Watson (Watto)

Graduated in 1968 and served three years in the Army. Subsequently he served with the Army Reserve gaining the rank of Lieutenant Colonel. He then completed his Postgraduate training in Orthodontics in Sydney where worked on the recently developed direct bonding procedures. He lectured widely on this subject in the early days.

He began his political career in the SA Branch of the ADA rising quickly to Branch President. Subsequently he served in all offices in the South Australian Branch of the ASO. His first major accomplishment was to set out rules for the operation of the Branch. Council recommended these for general use. He moved into the Federal sphere as part of Brian Crisp's committee during the mammoth rewriting of the Constitution in 1975-7. Basil Phillips was also on that team.



When the decision was taken to hold the 1982 Congress offshore, Phillips and Watson went to work again and as Secretary, Ian bore the brunt of the administrative work and helped produce one of our most successful Congresses. Possibly because of the tremendous amount of work involved, Watto was instrumental in the employment of professional Congress organisers thereafter as well as recognising the urgent need for a permanent secretariat. That team of Phillips and Watson became respectively President and Secretary on the next rotation and it was left to Ian to establish the successful working relationship with the new secretariat. Ian then served continually on the Council until he finished a highly successful turn as President 2002-4. The modern composition of the Council owes much to his foresight.

He will, however, be best remembered for the extraordinary effort he put in to establish sound relationships with Orthodontic Societies in the Asia Pacific area particularly and also worldwide through his involvement with World Federation of Orthodontics where he now represents the South Western Pacific area known as Oceania. His commitment of time, his own funds and his relentless diplomacy has seen the ASO secure a meaningful presence among the Asia Pacific Orthodontic Societies, something that the disparate cultural traditions makes very difficult. His contribution has been vital in the selection of Australia as the venue for the tandem holding of the 7<sup>th</sup> Asia Pacific and the 7<sup>th</sup> International Orthodontic Congresses and he has worked tirelessly to ensure its success. Ian was honoured by his peers, by being made an Honorary Life Member of the Society in 2008.

In his nonexistent spare time, he runs a successful Angus cattle stud. It will surprise no one that Ian has been highly involved with the Angus Society, serving on the South Australian Committee, rising to President in 2002-3. He was Founder of the Angus Education and Research Foundation (a little plagiarism perhaps?) and since 2007 a Director of Angus Australia. Ian enjoys tennis and plays golf reluctantly.

The idea, that Australia might host this international meeting, was first floated by Rick Olive. A request for an expression of interest to bid for the 2005 meeting had been made. This author, President at the time, doused the idea. His view was that the WFO was still a fragile beast and very US dominated. Unless the European Societies became significantly involved, the WFO would eventually fail. Additionally meetings, which could take place only every five years, must be held as soon as possible in Europe and also Asia where at least South Korea and Japan had higher WFO memberships. I was also apprehensive about the workload involved.

Fortunately, future ASO Executives, notably those of Olive himself, and also of Ian Watson took a much broader view. Olive said at the time, “This would be a good thing for Australia”. In 1999 the ASO was invited to tender to host the 2010 meeting. Olive galvanised into action and enlisted the aid of the Brisbane Tourism Office. Quite understandably, he wanted the conference held in his hometown, where the biennial ASO meeting was scheduled to occur. Understandably also, there was some dissension and those from Sydney argued that theirs was the only city in Australia that had the required facilities.

Six thousand delegates, including 151 from Australia, had attended Paris and the advice based on experience of other international conferences was that one might expect 60 per cent of that number. Presentations were mounted from both cities. After a second round, Sydney was selected as the Australian candidate to compete against, as it turned out, Istanbul, Johannesburg and a combined submission from Seoul and Tokyo (similar to the 2002 Soccer World Cup). The conference was finally awarded to Australia in November 2002. Council took the steps to alter the traditional clockwise rotation of Executives leading to our biennial Congresses, such that the Executive became NSW based in 2008 in preparation for the 2010 meeting.



The 7<sup>th</sup> IOC Committee at work

Quite appropriately, Olive was appointed President of the International Congress. Never short on ambition, the ASO also indicated its desire to host the 7<sup>th</sup> Congress of the APOS concurrently and, after finally achieving membership, this will now happen.

The ASO is now, as it has been since its inception at the time of the 2<sup>nd</sup> IOC, a significant member of the international orthodontic community. Its Congresses attract considerable overseas representation. Its Journal is highly regarded. Its members now have two seats at the WFO governing table. Its newly formed Australasian Orthodontic Board has become a model for others to follow and its Graduate departments have an international reputation.

## Endnotes

1. Minutes Executive Meeting 8/1954
2. 10/8/60
3. 14/7/61
4. 18/8/1960
5. Peat, JH. op cit pp104-5
6. Minutes Executive Meeting 9/1990
7. 20/3/1963
8. Minutes Executive Meeting 2/1969
9. Minutes Executive Meeting 5/1970
10. AOJ Vol 2 No.6 6/1971
11. Minute Executive Meeting 11/1971
12. Minutes Executive Meeting 8/1971
13. ADC Paper on Alternative assessment pathways for Overseas Trained Dental Specialists 6/2009
14. Susan London EOS Personal Communication 12/2008
15. ASO Newsletter 12/1974
16. Minutes Executive Meeting 11/1974
17. Report of 6<sup>th</sup> Congress
18. ASO Newsletter 7/1976
19. Minutes Conjoint Meeting 1991
20. Minutes Councillors and Representatives Meeting 3/2003
21. Letter to ASO 24/4/2002
22. Peat Op Cit. P176
23. Minutes Executive Meeting 2/1998
24. Olive, R. Personal Communication.5/2008
25. Daniel Huang to D Thornton Taylor 25/3/1998
26. Minutes Executive Meeting 4/1998
27. Minutes Council Meeting11/1998
28. Olive, RH. Personal Communication5/2008
29. Minutes Councillors and Representatives Meeting 9/93
30. De Kock,W. Personal Communication 6/2007
31. Max,R. Personal Communication 5/2008

## Chapter 22

# Here we are

There have been many changes to the way Orthodontics is practised.

There are now no restraints on any form of advertising, other than the requirement that all advertised matter has to be free from untruth, and not disparaging to others. This is a long way from the time when most Dental Registration Boards used to run a ruler over brass plates outside dentists' surgeries and forbade even the use of the despised ASO logo on members' stationary. Older orthodontists would shudder if they were to view the 'yellow pages' of the current telephone books. Promotional activities of extraordinary innovation can be and are now practiced. Many practitioners have their own website.

The knowledge base grows constantly. Technological advances mean greater case loads are possible. Greater utilisation of associated professionals (previously referred to as auxiliaries) has had the same benefit.

Much of the continuing education is now in the hands of the supply companies, which are having a greater and greater influence. As well as the major financial contributions they are making to the Foundation and to the postgraduate departments they sponsor numbers of clinicians from overseas both at Congresses and for other short courses, usually involving promotion of some appliance components used in the mechanotherapy under discussion. Salespeople vie with researchers for the clinician's attention. The same thing happens to all health professionals from the drug companies.

Ever more aspects of practice have become under legal control. The *Rogers v Whitaker* decision by the High Court of Australia (1992) placed a greater onus on the practitioner, to ensure that acceptance of treatment was given only after the possibility of risk was satisfactorily and fully explained (so called informed consent).

Amendments to the Privacy ACT (1988) came into being in December 2001 [Privacy Amendment (Private Sector) Act 2000]. Originally the Executive felt that the ASO, having a yearly cash flow of under \$3 million, was unaffected even though the Executive reported that they tried to abide by the new rules.<sup>1</sup> However the law was principally designed to protect the privacy of individuals and this meant that treatment records could not be published or shown at meetings without the consent of the patients. In Orthodontics this mostly means their families. Until this was sorted out by the ADA, this became a serious consideration for the infant AOB, where displaying treatment results is the essence of the review.

Australia is thought of as a very litigious society. Fortunately, because claims have been few, Orthodontics has been spared the huge imposts of expensive professional indemnity insurance experienced by many fellow professionals, not only in health. The annual cost to the Australian orthodontist of their professional indemnity insurance stays comfortably under the cost of one full treatment.<sup>2</sup>

The demand to use 'universal precautions' (that is to treat every situation as if an infection was possible) to prevent the spread of blood borne infections, saw a revolution in infection control procedures in all practices. In many instances separate authorities with legislative backing policed these practices.<sup>3</sup> These initiatives reduced the influence of the Dental Registration Boards and the relevance of the Society's 'Code of Ethics'.

Occupational Health and Safety issues and Unfair Dismissal laws impacted on employment. New financial regulations demand more from the Orthodontists' accountants.

The net effect of all these was to reduce the independence of the individual practice. Its effects on the Society were subtle but none-the-less significant. The number of pieces of legislation, which the Council had to consider, in conducting the Society's affairs, has continually increased. Changes are frequently required to the Constitution not because of some directive from Council, but because of some legislative change. Even such a relatively simple and worthy initiative as 'Give A Smile' ended up requiring not one but two separate sets of By-Laws and separate committees to operate them.

The status naturally accorded to the professional, at the time of the ASO's founding, can no longer be taken for granted. Everything a dentist does is subject to some or many forms of scrutiny.

Unlike the situation in 1927, Australia is now very much a multi-cultural society. Orthodontists, like professionals generally, are increasingly less Anglo-Saxon with increasing numbers of females. Keith Godfrey<sup>4</sup> reported that only one of his first 33 students was female. Now they make up much nearer to 50 per cent of all postgraduate students. Figures from 2002 showed that females made up over 50 per cent of all Australian dental students.<sup>5</sup> Nonetheless respondents to the 2004 survey of members were 89 per cent male, which was thought to reflect the current gender balance in the Society.<sup>6</sup>

There have been female Branch Presidents in all States and a smaller number of Chairs of Committees. Strangely to date, (2009) no member of an Executive has

been female. Members of the Executives have been overwhelmingly Anglo Saxon. On the other hand, the list of authors of articles in the AOJ reveals an entirely different picture. There is more than one way to serve one's Society.

Although it is likely to become standard in the near future Mandatory Continuing Education requirements are not yet universal. Victoria and the ACT are notable exceptions. The ASO has no firm policy in this matter. On the other hand the courts look dimly at those who, for whatever reason, come before them, who have not made an appropriate effort to keep up to date.

A significant amount of orthodontic therapy is still conducted by non-specialists. Brian Lee reported in 1994 that the latest estimates from the supply houses in the US were that 51 per cent of orthodontic supplies were sold to general practitioners.<sup>7</sup> The ADA conducted a survey in 2004. Nearly a third of the practitioners reported doing some orthodontic treatment, but this was mainly with removable appliances. Over 90 per cent always or usually referred. These numbers are certainly less than a decade before. The comment from the Executive about this survey was: "These figures are reassuring for the orthodontic profession and suggest that, by and large general dentists have faith in orthodontists."

Practice ownership is changing. Facts seem difficult to obtain. Corporate ownerships began in Orthodontics in the mid 1990s in the US, but appeared not to be taking hold in Australia. In medicine, however, both at the general practitioner and the specialist level, commercial ownership of practices, as well as hospitals, is well entrenched. There are those who say that this is inevitable in Orthodontics. Orthodontic Centres of America, possibly the largest company in this field has operations in Japan, China, Puerto Rico as well as the United States, but has no apparent presence in Europe or in Australia. What effect this will have on the Society is unknown but it will probably be more subtle than overt. At the present time it appears that ownership remains overwhelmingly in the hands of the practising orthodontist.

## Finale

Change is the only constant. This applies to the ASO, as much as to any other organisation. Nonetheless the ASO has achieved a degree of maturity and has travelled a long way towards realising the Objectives enunciated by the Founding Fathers. The strengths of the Society are numerous. There exists a stable and functional organisation. There is a corporate knowledge to take the Society forward. Talented and highly trained young practitioners are joining the specialty.

In fact, the status of postgraduate education in Orthodontics is probably the highest achievement of the Society. Orthodontics is rightly regarded as the trailblazer for the other specialties. Its working relationship with the ADA, the ADC and all facets of organised Dentistry is of the highest order. The Founding Fathers could not fail but smile. Obtaining the right to hold an international orthodontic conference is probably the highest achievement.

This does not mean that all is rosy. The secretariat will need some change in the near future. I am aware of no other successful organisation, which has held on to the fixed geographic rotation of its senior office bearers. Universally people stand and are elected to federal office on the basis of their enthusiasm and ability, not their geography. Our system has worked. Of that there is little doubt. Will it work forever?

There are many changes afoot. For the first time in 2008, overseas trained specialists can be recognised and registered as specialists in Australia without previously obtaining, by examination, the ADC certificate, which allows registration as a general dentist. This situation, which exists in Medicine makes some sense, but is not universally supported. There are many institutions worldwide, which produce graduates purely for export. Orthodontics cannot be immune. Is this an issue?



ASO President at the time of writing,  
Shane Fryer

Currently there are many initiatives through a Council of Australian Governments (COAG) initiative that would eliminate the powers of the States in a multitude of matters in health and much else. A single Federal Dental Ordinance under the National Registration and Accreditation Scheme is one such idea. What effect will this have?

Progressively, funds available for education have been squeezed. Just as Orthodontics has made substantial contributions to support Professorial Chairs for the Orthodontic departments, the profession generally will have to continue to take up the slack. There can be no doubting the positive role the College will have in Continuing Education.

In many respects, events have turned 'full circle'.

The education of orthodontists is now, at least financially, to a large extent back in the hands of those who practise the specialty. International contacts are central to the Society. The Society finally parallels what Stanley Wilkinson had in mind.

This book has set out to record the major events in the life of the Society. It cannot however preserve our history. Only an archival process can do that. So much of our history has already been lost forever. Fortunately moves have been made to stop the rot. Now that the handling of data is so much easier, we will be able to record electronically all the records created by our activities. Salvaging our past will be more feasible. The time to start that is now!!!

## Endnotes

1. Minutes Executive Meeting 3/2003
2. In 2009 the cost of the Insurance provided by Guild Insurance through ADA membership was \$3800 annually
3. Public Health (Skin Penetration) Regulation 2000 in NSW
4. AOJ February 1972
5. [www.dest.gov.au](http://www.dest.gov.au)
6. ASO Newsletter 5/2005
7. Minutes Council Meeting 8/1994

## Australian Society of Orthodontists List of Executives

<b>Year</b>	<b>President</b>	<b>Secretary</b>	<b>Treasurer</b>
1927–1930	W.S. Wilkinson	J. Wonderley	J. Wonderley
1930–?	E.C. Gates	A. Thornton Taylor	A. Thornton Taylor
1950–1953	A. Thornton Taylor	R.Y. Norton	R.Y. Norton
1953–1956	A. Thornton Taylor	R.Y. Norton	R. W. Halliday
1956–1959	K.T. Adamson	D.F. Spring	R. Morris
1959–1961	R.Y. Norton	J.F. Reading	N.J. Cox
1961–1964	K.F. Henderson	J.F.S. McGibbon	E.A. Barham
1964–1966	V.P. Webb	J.B. Moffatt	P.G. Andrews
1966–1969	L.M. Smart	G.I. Brown	B.C. Crisp
1969–1972	R.C. Case	J.R. Heath	A.G. Parker
1972–1974	J.F. Reading	W.J. Mackie	R.G. Henry
1974–1977	R.F.H. Rickleman	D.E. Robertson	J.D. O'Donoghue
1977–1978	J.F.S. McGibbon	T.Y. Lam	F.B. Dignam
1978–1980	L.A. Trotter		
1979		P.A. Heaghney	R.G. Cook
1980–1982	G.I. Brown	S. Kuusk	P. Burgess
1984–1984	B.D. Bowden	E.C. Crawford	G.R. Dickinson
1984–1987	R.G. Henry	P.W. Kline	D.P. Kinsella
1987–1989	S.P. Paul	B.I. McKenna	D. Patrikios
1989–1991	R.G. Cook	G. Brudenall	P.A. Heagney
1991–1993	B.W. Phillips	B.I. Watson	M.A.C. Nugent
1993–1996	G.R. Dickinson	J.L. Curtain	A.J. Armitage
1996–1998	D.T. Taylor	J.E. Coolican	R.N. Hay
1998–2000	R.J. Olive	B.F. Sullivan	P.D. Ferguson
2000–2002	J.R. Owen	P.J. Southall	S.L. Singer
2002–2004	B.I. Watson	S.R. Langford	S R Freezer
2004–2006	E.C. Crawford	D.J. Fuller	I.G. Lavrin
2006–2008	A. Shields	P.J. Hannan	C.J. Nelson
2008	F.S. Fryer	M.A. Cordato	T.P. Baisi

## Committee Chairs

### Education (Graduate Education, Orthodontic Education, Education)

J.F. Reading	1968–1972
V.C. West	1972–1975
G.D. Kirkness	1975–1976 1980–1982
T.J. Freer	1975–1980 1989–2000
M.R. Sims	1983–1986
G.J. Hinricksen	1986–1989
M. Goonawardene	2000–

### Membership Advisory

T. Freer	1998–2000
M. Goonawardene	2000–

### Economics/Economics and Practice Administration

R.G. Henry	1973–1974
R.H. Abbott	1974–1982
R.F.S. Rickleman	1982–1985
E.J. Peel	1985–1989
P.C. Buchholz	1989–2000
A.M. Shields	2000 Merged with OSC 2002

### Constitutional

D.F. Spring	1969–1972
R.A. Miles	1972–1974
B.C. Crisp	1974–1985
B.W. Phillips	1985–1989
V.C. West	1989–1996
P. Hannon	1996–2004
J. Cameron	2004–

### Public Relations

G. Dunn	1986–89
W.J. Sampson	1989–1993
M.G. Woods	1993–19978
A. Wong	19968–2002
G. Wexler	2002–2004
E.C. Crawford (interim)	2004
R. Coyne	2006–

**Orthodontic Services**

Reading	1974–1975
Bowden	1975–1982
D. MacDonald	1982–1984
D.T. Taylor	1984–1988
R.F. Olive	1988–1997
J. Owen	1997–2000
R. Kift	2000–2002
A.M. Shields	2002–2004
F.S. Fryer	2004–2006
M. Razza	2006–

**Appeal**

ASO Presidents	1977–1991
W.J. Mackie	1991–
E.C. Crawford	1998–2002
C. Dreyer	2002

**Cleft Palate Reference**

R.G. Henry	1982–87
J. Chapman	1987–1996
Kit Chan	1996–

**International Liaison**

J. Geenty	1996–1999
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**AOB**

Sutton	1998–2002
E. Crawford	2002–2004
A. Shields	2004–2006

**Honours and Awards** D.T. Taylor

<b>Archival</b> G. Keogh	2000–
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**Recent Graduates**

T. Shell	2005–2007–
S. Papas	2007–2008

**Give A Smile**

E. Crawford	2005–
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## Congress Organising

1 <sup>st</sup>	1961	ASO Executive
2 <sup>nd</sup>	1964	R.S. Gargett
3 <sup>rd</sup>	1966	V.P. Webb
4 <sup>th</sup>	1969	ASO Executive
5 <sup>th</sup>	1972	ASO Executive
6 <sup>th</sup>	1974	R. Norton
7 <sup>th</sup>	1977	R. Rickleman
8 <sup>th</sup>	1980	G. Kirkness
9 <sup>th</sup>	1982	B. Phillips
10 <sup>th</sup>	1984	G. Dickinson
11 <sup>th</sup>	1987	W. Mackie
12 <sup>th</sup>	1989	J. Mowbray
13 <sup>th</sup>	1991	K. Metzger
14 <sup>th</sup>	1993	K. Grave
15 <sup>th</sup>	1996	E. Crawford
16 <sup>th</sup>	1998	J. Fricker
17 <sup>th</sup>	2000	N. Eberhardt
18 <sup>th</sup>	2002	M. Goonewardene
19 <sup>th</sup>	2004	C. Twelftree
20 <sup>th</sup>	2006	P. Scott
21 <sup>st</sup>	2008	R. James

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