



POLITICS / GOVERNMENT / LEGISLATION

Changing of the Guard

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Today, we have the very real opportunity to make our profession great, our practitioners successful, and Oriental medicine much more accessible to those who desperately need our services. By changing our approach to governance, we can embrace transparency and accountability. We can tap our valuable intellectual, financial and organizational resources and learn how to more effectively communicate, delegate, and collaborate with our state associations, our allied national organizations, and related health professions.

We are a relatively small field, and we are divided into many different groups. Without effective methods of communication and cooperation, our medicine and our profession are at risk. We need to develop supportive structures and the resources that allow our state and national associations to collaborate. Let's move beyond turf battles and special interests to unite in benefiting, advancing and protecting Oriental medicine.

While our road ahead is a long one, we can use something special to overcome our lack of resources. We can start by supporting the volunteer efforts of our students, practitioners, schools, state and national associations, and vendors. Without these volunteers, without organizational support, and without funding, we face failure. In the past, state and national organizations had no means for coordinating solutions to common issues. This situation is gradually changing, and the profession needs to encourage, if not demand, this change. And we, your newly elected leadership, have a way to do this. We invite you and challenge you to have a voice in building this collaborative vision to help create the future you want.

The work has already begun. A foundation has been established through the creation of a communications network that brings a centralized approach to coordination of the activities of our profession. We are asking all of our organizations and their leadership to join us in an open and continual collegial dialogue. In so doing, all branches of the profession - students, practitioners, teachers, state organizations, and the national organization - can be in constant contact with one another. Once we begin to utilize this network, this new structure will facilitate productive discussion and decision-making that will assist us in finding solutions to move us forward as one united community.

We will not agree on everything, but our differences should never prevent us from working together to advance the profession. Through this open dialogue, we will assess the best ways to tap our collective

resources. We will find a path that utilizes our deep pools of talent. If we do this well, we maximize our chances for success.

Our new board is a wholesale turnover of smart, capable leaders; new faces, with the energy, expertise and experience to lead us to new heights. As the new AAAOM board enters this year of transformation, we will commence building a "new house" for the association. We are excited to accomplish these goals, and we are encouraged by what we have already seen. Our collective dream is to utilize all available resources so that the next generation of practitioners inherits a more stable, secure, profitable and rewarding profession. If we are able and willing to find ways to work collaboratively on the administrative levels, we can serve national and state interests simultaneously, and better than they have ever been served.

However, again, it starts with you. It starts with one non-competitive delivery point of state and national membership. Yes, some of us will disagree. Some will offer excuses like "the economy is in poor shape" without recognizing that this is precisely why we have this opportunity to be a part of the mainstream health care team. If times were good, our message of choice, integration, and cost effectiveness might fall on deaf political ears. But right now, we have the most persuasive argument of any profession in health care.

As Michael Taromina, a dear friend of the profession, frequently stated, "We are safe, low-tech, clinically effective, natural, and a cost-effective medicine with little to no side effects." This is now a supportable fact, thanks to the work of you and your colleagues. Every single politician who has heard this has responded favorably to our cause, but we need to reach more of them. The evidence shows that when we add 30,000 AOM primary care providers to the health care equation, we not only reduce the shortages of primary care physicians, we reduce the costs of the most expensive components of health care; invasive surgeries, hospitalizations and prescription medications.

We must establish a common message and improve the delivery of this message via the press, political halls, courtrooms, journals and, most importantly, our patients. It is time for AOM to look towards better models for accomplishing what the profession wants accomplished. Our request of the profession is that we step up, right here and right now, to ensure our success as emissaries of this medicine and to make this medicine rightfully accessible to the citizens of our great country.

Join us in making this profession what you want it to be.

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