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Commentary

President's message

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FROM THE PRESIDENT

Roberta B. Pierce

President, International Association of Orofacial Myology



To all of my respected colleagues and mentors, I have truly enjoyed my term as your president. This has been a year of growth for the Association with an increase in membership to over 200. More international members have joined the IAOM, particularly with the addition to our rosters of numerous orofacial myologists from Brazil. We continue to encourage certification as a measure of competency in the theoretical foundations and clinical practice of orofacial myology. Almost half of the membership is currently certified, while many others are in the process of completing the written examination and clinical practice requirements. We congratulate those who have achieved certification and encourage others to continue working toward this worthy goal.

The International Journal of Orofacial Myology has grown in professional stature under the care and guidance of Patricia McLoughlin as Editor-in-Chief and Catherine Jackson as Managing Editor. The increasing number of original research and clinical articles reflects

a resurgence of interest in the diagnosis and treatment of orofacial myofunctional disorders and related topics. Articles from the *IJOM* have been reprinted in other professional journals and many articles have been abstracted in other publications. I also extend a sincere *thank you* to Robert Mason, Ph.D., D.M.D., who served as Guest Editor for the March 1988 Special Issue, *Orofacial Myology: Current Trends*. This issue has already become a landmark publication, particularly as the American Speech - Language - Hearing Association (ASHA) reconsiders the Position Statement on Tongue Thrust.

It is time for the IAOM to revise and publicize its response to the ASHA Position Statement. While I applaud the efforts currently underway to have the position statement revised or repealed by ASHA, I foresee some imminent problems. The complex needs of individuals with orofacial myofunctional disorders will not be adequately served by speech-language pathologists without additional education and clinical training. The IAOM might assist universities in establishing minimum standards and guidelines for including this specialized training in the college curriculum.

As I prepare to leave office, I extend my gratitude to all of the members of the Association who have served on various committees, on the Board of Directors and on the Board of Examiners. I especially appreciate the hard work and dedication of the Convention Committee members for both the Chicago and Dallas conventions. Many individuals have made significant contributions to the IAOM in the past few years; however three in particular deserve special recognition and appreciation: Anita Barrett, who has served as our Executive Secretary for many years; Becky Winchell, who willingly accepted this position, becoming the new Executive Secretary in January of this year; and Patricia McLoughlin, who has done an outstanding job as Editor of this journal. To each of you, a heartfelt *Thank you*.

REFERENCE

American Speech and Hearing Association and American Association of Dental Schools, Joint Committee on Dentistry and Speech Pathology-Audiology (1975). American Speech and Hearing Association, 17(5): 331-337.