

# *40<sup>th</sup> Anniversary* . 1973-2013

A COMMEMORATIVE BOOK



Cover: *BORN No.6*  
By Dominique Wood  
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# *We are Proudly Celebrating* **FORTY YEARS** *in 2013*

Welcome to our book of celebration: the AACMA 40th Anniversary – A Commemorative Book. It is my privilege to present this commemorative book to our members and the Chinese medicine community.

Throughout these pages, we take a walk down memory lane and present our rich history and achievements over the past 40 years as Australia's peak Chinese medicine association, plus we look at how far the profession in Australia has come since the 1970s.

We thank our many contributors, especially our Past Presidents, who have witnessed tremendous advances in our profession, and share these gems throughout this book. Many special moments are accompanied by memorable photos, which paint a rich picture of AACMA's membership base and the connections we have made within the national and global profession.

We extend gratitude to our members, whose contributions and loyalty to the association have written our history and enabled our achievements. This book honours their joint efforts to ensure that AACMA and the profession are maintained at a high standard and are recognised for the benefits we can bring to the community as well as the hard work of the dedicated individuals on the AACMA board, staff and committees whose teamwork helps push the Chinese medicine profession forward.

Our 40-year history is a true portrayal of the self-reliance and hard work of generations of Chinese medicine practitioners in this country in meeting the needs of Australians for competent and safe health care services. May AACMA's 40th anniversary bring us closer together than ever before, and provide an incentive for us to plan our way forward.

Last but not least, I would like to extend our deepest gratitude to the dedicated team behind this book, who worked tirelessly over many months to put it together. Without them, this book would not have been possible.

Here's to celebrating our 40th anniversary and the future ahead.



**Richard Li**  
AACMA President

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# 40 YEARS YOUNG...

## THE HISTORY OF AACMA

For Australia's peak professional body for Chinese medicine practitioners, its forty-year milestone is significant. From humble beginnings in 1973, and later the amalgamation with other key associations, AACMA has grown to service more than 2100 members in 2013. The 40th Anniversary has come at a time where the profession is inhabiting new territories as a nationally registered profession, evidence that a lot can happen in 40 years. Not only to one association, but to the profession as a whole – both intrinsically linked.

AACMA has been championing for the profession, year after year, for the past four decades, so it's fitting that its celebratory year culminates in another major celebration for the international profession: the 8th World Conference on Acupuncture, organised by AACMA, marking the 25th anniversary of the establishment of WFAS. The future is indeed exciting, but before we shine a torch into the coming decades, let's cast our mind back to the early days of the Association ... where it all began.



### *The Early Days...*

Despite acupuncture having a rich history spanning thousands of years, back in Australia in the early 1970s, the western community was just starting to dabble with this ancient medicine – which, at the time, was very much an alternative medicine.

Chinese medicine is recorded as having been practised in Australia as far back as the mid-1800s, coinciding with Chinese migration during the gold rushes. However, it was not until Nixon's visit to China in 1972 that the Australian community started to wake up to the potential of acupuncture in particular.

AACMA Life Member, Dr Maurice Mee Lee, recalls being one of medical acupuncturist Eddie Wong's first students in 1972 when Wong started a course, offering non-Chinese speaking Australians the chance to study acupuncture on Australian shores. This nine-month course was intense, and was only the beginning of the lifelong learning journey ahead for its graduates. Around the same time, Russell Jewell had also started training Sydney locals in acupuncture from as early as 1969, leading to the establishment of Acupuncture Colleges (Australia).

There were various attempts by the emerging practitioners from 1973 to form a national body for the profession and the origins of AACMA are from that period. When breakaway associations started forming along state lines, our founding members in Queensland had the foresight to incorporate the association as a legal entity.

'We had to [or] we would have fallen apart if we didn't do something,' Dr Mee Lee recalled. And thus, six Queensland practitioners set up the Australian Acupuncture Association Ltd (AAcA).

Dr Mee Lee was member number 1 and Dr Brian Bateman was member number 3, both have held terms as President, and together they are still involved with the Association, 40 years later as Life Members.

The AAcA was the first association in Australia formed by acupuncture practitioners to represent and promote the profession of acupuncture. As Chinese medicine developed in Australia, many acupuncture practitioners undertook post-graduate studies in Chinese herbal medicine and in 1995 the AAcA began accrediting practitioners in Chinese herbal medicine.

For the next 22 years, the AAcA serviced a few hundred (mostly Queensland) members and focused on increasing the community's awareness of acupuncture by rolling out media campaigns. Whilst these endeavours were fruitful, the AAcA knew that to make a true impact in Australia it was imperative that the profession form a single national body, rather than being split along state lines. Hence, the decision to start developing relationships with other acupuncture and Chinese medicine associations across Australia.

### *The Amalgamation*

AACMA evolved from an amalgamation in 1995 between the Australian Acupuncture Association Ltd (AAcA) and the Acupuncture Ethics and Standards Organisation Ltd (AESO). AESO was formed in 1977 to provide a mechanism to identify and accredit bona fide acupuncture practitioners for health fund rebates.

On 1 March 1995, the AAcA and the AESO formally completed an amalgamation resulting in the vast majority of qualified TCM practitioners in Australia becoming united under one national professional association. In 1996, AAcA merged with and incorporated the members of the Acupuncture Association of South Australia (AASA) which had been the largest professional TCM association in South Australia.

These amalgamations have provided genuine national standards and representation for acupuncture and Chinese medicine practitioners in Australia, independent of any commercial interest, factional alliance, or ethnic bias.

This new structure provided a clear point of contact for governments, institutions, and private bodies seeking to identify and communicate with the majority of the TCM profession nationally.

At the 1998 Annual General Meeting, the members resolved by an overwhelming majority to change the name of the Association (AAcA) to the Australian Acupuncture and Chinese Medicine Association Ltd (AACMA) and to conduct all joint operations of AACMA and AESO under the AACMA name.

#### **READ MORE ABOUT THE AMALGAMATION...**

Read Phil Macqueen's reflections on page 20; Judy James' on page 27; and Stephen Janz's on page 34.

Until 1996, AACMA provided accreditation in acupuncture only. In 1996, AACMA introduced accreditation standards in Chinese herbal medicine for its existing members, and in 1998 introduced entry-level accreditation standards in Chinese herbal medicine equivalent to the entry-level standard in acupuncture. In 2002, standards of accreditation in TCM Remedial Massage were also introduced in line with the new Health Training Package in TCM Remedial Massage (Anmo-Tuina).

### *Membership Categories*

In 2003, new membership categories were passed to provide for entry-level non-voting stand-alone membership categories in TCM Remedial Massage and Chinese Herbal Dispensing, as well as various Associate Member categories and a Retired Member category. In 2011, the members approved the introduction of standards for endorsement of AACMA members for other (non-TCM) health modalities. The purpose of this change was to enable AACMA to extend the range of services available for members and assist in reducing the costs of practice.

In 2011, the members also approved the introduction of a new Associate Member (Specific) category to enable AACMA to accept registered practitioners to a form of membership if they did not meet our practitioner accreditation standard. This type of membership enables access to AACMA member information, newsletter, e-news, journal and continuing education events, but not the benefits of full membership such as practitioner referrals and health fund listing.

### *Forty years later...*

From humble beginnings, where the annual subscription was just \$35 for the small group of members, the association, now known as the Australian Acupuncture and Chinese Medicine Association Ltd, is the peak professional body for TCM practitioners and proudly has more than 2100 members.

It is the largest professional association in Australia, and represents the majority of qualified acupuncture and Chinese herbal medicine practitioners nationally.





# AESO & AASA

## *A snapshot of the early days*

### THE BIRTH OF AESO

The Acupuncture Ethics and Standards Organisation (AESO) was originally formed as a practitioner accreditation and complaints body for health funds. It was set up in the 1970s at the request of HCF to accredit acupuncturists for rebates.

AESO was led by Christine Berle, first as Secretary, then as the first President (prior to being incorporated AESO had a Chairman – Russell Jewell), over a twenty five year period (to 1993). The two most significant feathers in AESO's cap was setting accreditation standards which allowed the organisation to lobby heavily for health-fund rebates (HCF was the first in 1977, then NIB in 1981) and to getting the NHMRC to report that acupuncture should be taught in tertiary education which led the way for course accreditation.

In 1984 the AESO Victorian Branch was established and immediately approached ANA Friendly Society about providing rebates for acupuncture performed by AESO accredited practitioners. Once ANA agreed, other health funds then came on side. The Victorian Branch together with the National Branch lobbied health ministers Australia-wide to register qualified acupuncture practitioners. Dr Kerry Watson was Chairperson of the Victorian Branch from 1984–85 (the late Maurice Copeland then became Chairperson from 1985 onwards), and from 1986–1991 Kerry was the AESO Special Advisor (along with the late Carole Rogers).

In the early days of Chinese medicine in Australia, Christine remembers acupuncture in the 70s as not being its own profession ... yet. Instead, physios, doctors and chiro's did a bit of acupuncture, and only the five element theory. '[The past few decades] has been an exciting time for me, the whole journey ... from Chinese medicine not being a profession, to where it is today,' Christine said.

Christine has held various senior positions on several associations including being the first non-Asian female Vice-President of WFAS (1990–93), and now divides her time between private practice and assisting in research for UTS.



Dr Kerry Watson, shares his memories of the early days of AESO in the late 70s.

'I still remember the day when Russell Jewell, Principal of Acupuncture Colleges (Australia) and later, Chairman of AESO and ACA came into class in 1977 holding up a letter from Hospital Contribution Fund (HCF) and announced "we have made it". The letter informed Russell that HCF had been aware of the College's (ACA) graduates for some time and were prepared to include a rebate for ACA's graduates on the condition that a basic medical science program be included in the Acupuncture Diploma. Russell pointed out to HCF that it would be unfair not to include well-qualified graduates of other institutions including graduates of the TCM colleges in China. He suggested the establishment of a body to accredit all suitably qualified acupuncture practitioners – thus, the birth of AESO.'

## THE BEGINNING OF AASA

Douglas Dickmann, formerly of AASA, and now an AACMA Fellow shares an excerpt from an AASA history report...

'A group of health professionals travelled to Hong Kong for a Clinical Acupuncture course. This group became the founding members of AAcA (Australian Acupuncture Association). As this Association was Queensland based, the South Australian founding members – Brice Douglas, Rudi Anderi, Brian Fischer and Helen Nitschke – decided to form a State association which was more in line with local State matters. This Association was formed in 1977 and was named AASA (Acupuncture Association of South Australia).

The Association also ran a course in conjunction with Melbourne Acupuncture College over a two year period which was completed in 1979 for the Diploma of Acupuncture.

Brice Douglas was the first President of AASA and Helen Nitschke was the next President, a position she held for 19 years when Douglas Dickman, who was Vice President at the time, took over to allow Brian Fischer to work on the amalgamation with AAcA.

As the membership grew, with local and overseas trained practitioners (some from the Vietnamese and the Chinese community), we needed to standardise acupuncture education and qualifications. Therefore in 1985 the Association subsidised our members to attend an advanced program at the Institute of Acupuncture, Kalubowila University Teaching Hospital in Colombo.

Under the Presidency of Helen Nitschke the Association obtained health fund benefits for acupuncture treatment for its members, the only acupuncture association in SA to be able to achieve this.

During Brian Fischer's term as President, the Association unanimously agreed to proceed with the amalgamation with AAcA (now AACMA) to become a stronger body to represent acupuncture in Australia.'

## AACMA HISTORY

### AACMA

#### *Structure and Administration*



From the early days AAcA was run via a phone number directed to Founding Member Maurice Mee Lee's clinic; these days AACMA has its own National Office located in inner-city Brisbane, employing eight full-time, and one part-time staff members covering administration, membership, event management, communications and marketing.

AACMA is managed by a Board of Directors, elected by and from the membership. All fully accredited practitioner members are eligible to vote and stand for positions on the Board.

In addition to full-time employed staff, the Board engages consultants and advisers to fulfil a range of specialist functions. Among these consultants are Australian and China trained TCM practitioners, with Bachelor degree, Masters, and PhD qualifications.

### MEMBER WELL WISH

'Thank you to the founding members of AACMA for shaping our profession into what it is today, and what it will be in another 40 years. (Available on bulk billing – I hope!)' Tracy Churchill (AACMA Member)



# AACMA HIGHLIGHTS

The past 40 years have seen so many achievements, some minor but meaningful, others monumental. Here, we highlight a collection of our proudest moments.

## *Professional standards and recognition*

- National registration of the Chinese medicine profession
- GST-free status for acupuncture and Chinese herbal medicine services
- Workcover benefits (national workers compensation, NSW and VIC, TAC benefits in Victoria)
- Health fund provider recognition for acupuncture, Chinese herbal medicine, and TCM remedial massage
- In 2000, acupuncture & Chinese herbal medicine acknowledged under federal law as health services.

## *Standards and regulation*

AACMA has set the benchmarks in Acupuncture and Chinese herbal medicine education and practice for 40 years, and TCM remedial massage for the past 10 years, including:

- Australian Guidelines for Traditional Chinese Medicine Education
- Infection Control Guidelines for Acupuncture
- Continuing Professional Education (CPD) Policy and Procedure
- Traditional Chinese Medicine and the GST – Guidelines for TCM Practitioners.

## *Government Funding*

- 2002 – \$100,000 in Complementary Therapies Funding to establish a national TCM education council and a national TCM practitioner accreditation board
- 2008 – \$40,000 from the Department of the Environment, Water, Heritage and the Arts to establish and administer the TCM Endangered Species Certification Scheme (ESCS)
- AACMA is the only Chinese medicine association to receive Australian Government funding for any purpose.

## *Health funds benefits for members*

- First health fund rebates for acupuncture negotiated with HCF (NSW) and Mutual Community (SA) in 1977 (these were the first health insurance rebates for any complementary therapy)
- MBF rebate for acupuncture in 1996 (and later for Chinese herbal medicine)
- Medibank Private for acupuncture in 1998; National Mutual (HBA, BUPA) for acupuncture and Chinese herbal medicine in 1998; Medibank Private for Chinese herbal medicine services
- In 2009 – All health funds providing benefits for acupuncture, Chinese herbal medicine services, remedial massage/therapy and TCM remedial massage recognise the current AACMA standard for provider recognition purposes.

## *International affiliations*

- World Federation of Acupuncture–Moxibustion Societies (WFAS)
- World Federation of Chinese Medicine Societies (WFCMS)
- International Society for Oriental Medicine (ISOM)
- MOU with NZRA & TCM Kongress Rothenburg.

## *Direct support for research*

- Over \$100,000 funding over four years awarded to members
- Memorandum of Understanding with NORPHCAM.

## *Peer-reviewed academic journal*

- AACMA supports and publishes Australia's only peer-reviewed academic journal for the profession – the *Australian Journal of Acupuncture and Chinese Medicine* – now in its eighth year.



# BEHIND AACMA: A DEDICATED BOARD

A committed Board that is dedicated to leadership, decision-making, and a vision for the future of the profession is at the helm of AACMA.

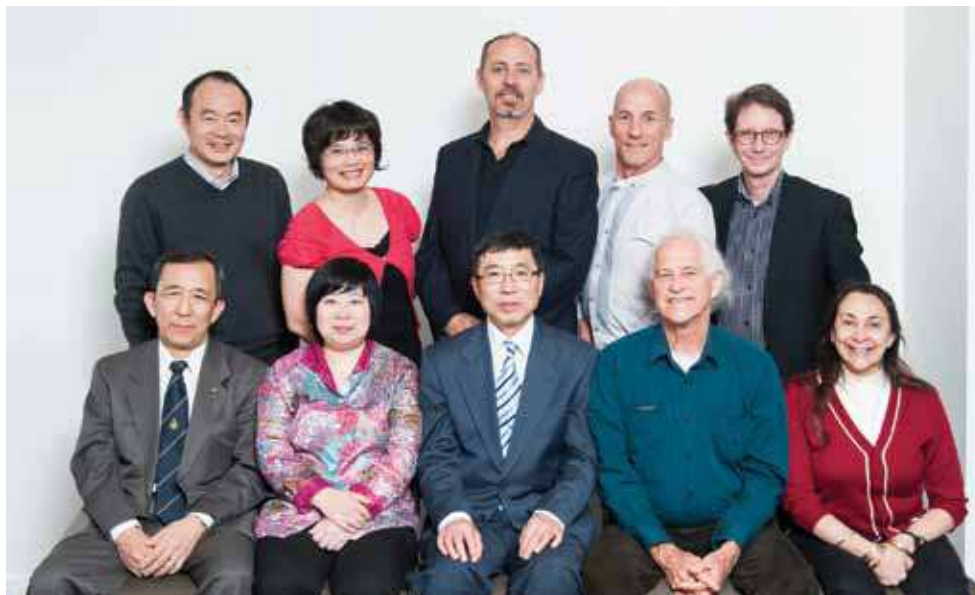
The AACMA Board is responsible for setting and monitoring the policy agenda for the association and for oversight of the AACMA office. Board members also regularly represent the association at functions and events where a Board presence is necessary and appropriate. As Board members are practitioners elected from the AACMA membership, they run busy practices in addition to their various Board roles.

There have been dozens of Board members over the years who have given up their valuable time during and after clinic hours to work on Board matters and attend monthly meetings and engagements with third parties.

Working in conjunction with CEO, Judy James, the AACMA Board has steered the Association into prosperous times as the leading national body of Chinese medicine practitioners.

The Association extends its gratitude to each and every Board Member who over the years has spared countless hours on Board duties, reams of faxes (in the old days), and hundreds of emails and phone calls (in the more recent times).

There have been both turbulent and triumphant times, a natural outcome when a group of passionate practitioners come together. However, in light of our 40th Anniversary, we would like to take a moment to thank our many Board members, and Presidents, who have helped steer the Association to where it is today.



*The 2013/14 AACMA Board: (front, left) Hoc Ku Huynh (Treasurer), Hong Xu (Secretary), Richard Li (President), Walter Simpson (Vice President), Waveny Holland (Director), (back, left) Xiaodong Yu (Director), Zhen Zheng (Director, AJACM Editor-in-Chief), Matthew O'Hara (Director), Mark Bayley (Deputy Membership Officer), Michael Porter (Membership Officer).*

## AACMA Past Presidents

- Maurice Mee Lee
- Brian Bateman
- Rod Dillon
- Bill Silvey
- Philip Vanderzeil
- Phil Macqueen
- Harley Gale
- Stephen Janz
- Peter Aftanas
- Robert Vandeveld
- James Flowers
- John Deare
- Walter Simpson
- Ian Murray
- Richard Li (current)

## AESO Past Presidents

- Christine Berle
- Harley Gale
- Phil Macqueen



# AJACM *A journal of the profession and for the profession*



AJACM Editor-in-Chief  
Dr Zhen Zheng

In 2005, the Board of AACMA under the leadership of the President James Flowers decided to publish its own peer-reviewed high quality journal. This decision came after years of discussion and debating. The Board, at that time considered that AACMA being the peak body of the Chinese medicine profession ought to lead, and provide an avenue for Chinese medicine educators, researchers and practitioners to discuss academic, practice, and regulatory issues that

are particularly relevant to Australia. In the following six months, the Board advertised for the Editorial Board and in November 2005, the first Editorial Board of the *Australian Journal of Acupuncture and Chinese Medicine* was formally established.

The initial Editorial Board included A/Prof Caroline Smith, A/Prof Chris Zaslowski, Dr Peter Ferrigno, Dr Damien Ryan, and John Deare, and I (Dr Zhen Zheng) became the founding Editor-in-Chief. We intended to include on the board people with diverse educational and research background, and people who have academic as well as clinical experience. The composition of the Board ensured that broad views and experience are reflected on the Board and in the Journal. Over the past eight years, the Board members have changed but the composition remains the same. Caroline Smith and Damien Ryan left due to their academic commitments and

we thank them for their extensive contribution to the journal. We recently welcomed Dr Yun-Fei Lu, Prof Hong Xu and Dr Sue Cochrane.

Anyone who has published a journal would tell you it is not easy to start a journal from nothing. Well, eight years down the track, I can say it is hard to start a journal – and an arduous job to maintain a journal. From November 2005 to November 2006, within one year, the Editorial Board with advice from our International Advisory Board and staff, developed the scope of the journal, instructions for authors and a strict peer-review process. All manuscripts are reviewed by one internal and two external reviewers. With the support of our members and international friends and colleagues, we successfully saw the publication of our first issue in November 2006.

Eight years on, we are proud to say that the AJACM is the only peer-reviewed Chinese medicine journal in Australia and in the southern hemisphere. The high quality of our journal has been recognised by the Australian Government through being accepted by the Excellence in Research for Australia (ERA) [see [www.arc.gov.au/era/](http://www.arc.gov.au/era/)] program as a quality peer-reviewed journal. This ensures that every peer-reviewed paper authored by Australian academics is counted as formal research output and contributes to the calculation of the overall impact of the authors and their affiliations. AJACM is indexed in Scopus, EBSCO and Informit, which ensures that papers in AJACM can be easily searched by people all over the world and full-text can be accessed. AJACM also has its own website [[www.ajacm.com.au](http://www.ajacm.com.au)].



We are now in our 8th Volume. Since its inception, the AJACM has an acceptance rate of about 50%. More than 90% of the peer-reviewed manuscripts were unsolicited. The types of papers vary from original, qualitative research to quantitative research, from clinical trials to case studies, from systematic reviews to discussion on theories and practice. We also publish non-peer reviewed articles, including current research summaries, book reviews, professional news and conference reports. Such diversity has encouraged a wide participation. In the past few years we have seen more submissions coming from Australian authors, including students and practitioners.

Has AJACM achieved its original goal set by the Board in 2005? From the composition of the authors and types of articles, I would definitely say yes. Our member survey reflected the impact of the journal on our members. Over 90% of the respondents said that they read the journal, and nearly 70% read the whole journal. Some of you said that 'I read it again, and again, and again' or 'Nothing will stop me from reading the AJACM'.

The Association is proud of its achievement of producing Australia's only peer-reviewed TCM journal, and we look forward to publishing the journal long into the future – for the benefit of the profession.



2011 Editorial Board: (front, left) Caroline Smith and Zhen Zheng; (back, left) Yun-Fei Lu, Chris Zaslawski, John Deare and Peter Ferrigno.



Part of the 2012 Editorial Board: John Deare, Zhen Zheng, Peter Ferrigno and Chris Zaslawski.

'40 years of age in Chinese ancient philosophy represents a mutuality of mentality, the strongest time of mind and body balance. I see AACMA as the biggest family in Australian Chinese medicine, providing true care for Chinese medicine practitioners, demonstrating great responsibility for the public and leading the harmonisation in national and international communities. It's the time to celebrate and thank people for giving their love, support, knowledge and dedication to the development of our association and profession. Thank you!' Prof Hong Xu (AACMA Fellow and Secretary)







1970s

## A PROFESSION IS BORN

The 1970s witnessed the birth of the modern Chinese medicine profession in Australia, with acupuncture as its spearhead. The Australian Acupuncture Association (AAcA), Acupuncture Ethics and Standards Organisation (AESO), and Acupuncture Association of South Australia (AASA) were formed.

The first structured education programs in acupuncture were established. Graduates commenced practising in all Australian states and territories. The College of TCM at the University of Technology, Sydney had its genesis in the 1970s as Acupuncture Colleges (Australia) and represents the oldest and most established extant TCM education program.

In the 1970s, the profession was young and eager to learn. There were few written texts in English, so we had to rely on each other and our clinical knowledge. Acupuncture was at the forefront and practitioners needed to be resourceful and innovative in their treatment approaches because we mainly saw patients after the health system had failed them – and then we were considered the quacks if they could not be fixed quickly in just a few treatments.



*(Front, left) Dr van Buren and Joan Defteros (both deceased). (Back, left) Alphon (Paul) Paulson (now deceased), Pauline Giesberts, Maurice Mee Lee, Brian Bateman, Helen Edwards.*

This photograph was gifted to AACMA by Brian and Maurice when they were awarded Life Membership during AACMAC in 2007. The photo resides in the National Office today. In this photo from the 70s, Life Members Brian and Maurice are young practitioners, with then AAcA office bearers, Helen Edwards and the late Joan Defteros, and international guests the late Dr van Buren and Pauline Giesberts from the International College of Oriental Medicine (UK).

# Life Members

Meet Maurice Mee Lee & Brian Bateman, who co-founded the Association in 1973 and who proudly hold onto Life Membership 40 years later...



2013: Dr Brian Bateman and Dr Maurice Mee Lee, in Brisbane.

Dr Maurice Mee Lee and Dr Brian Bateman are AACMA Life Members who played a pivotal role in the advent of the Association and today are two of AACMA's Life Members.

## AACMA's Life Members, a brief background

Dr Maurice Mee Lee started practice in 1963 and was a naturopath, chiropractor and acupuncturist. He has held a variety of administrative positions such as State Secretary of the National Association of Naturopaths and Chiropractors (13 years), Acting Principal Brisbane College of Traditional Acupuncture (2 years), President of United Chiropractors Association (Qld) (3 years) and nutrition trainer for three health and nutrition companies as well as a director for over 20 years. Of even greater significance, Maurice was foundation President and Chairman of the Australian Acupuncture Association Ltd (AAcA) when it was formed and continued to serve as President for 10 years. [AAcA changed its name to AACMA in 1998.] In those early heady days, he assisted many neophyte (and now senior) practitioners in starting and developing as practitioners and healers.

Maurice's immense contribution to establishing the profession in Queensland would not have been possible without his fellow peer and good mate, Dr Brian Bateman. Brian has also been crucial to the profession's development. He started practice in 1964 and is an acupuncturist, chiropractor and naturopath. Not only was Brian the foundation Vice-President of AACMA, he also served as President for a short period in 1984.

## Chinese medicine, the passion and start of a new career

For Maurice, Chinese medicine runs in his family. His father was a China-trained herbalist, who had a busy Brisbane-based clinic where he practised his highly-honed art on patients who travelled far and wide to see him.

This was back in the era where patients saw Chinese medicine as a last resort, an option to try when the medical world failed them; back in the era where the general consensus was that Chinese medicine practitioners were 'quacks' who you'd only go to if 'you were really desperate'. And, many people were desperate...

'I knew my dad was good when one of his patients travelled from Rockhampton to Brisbane,' Maurice recalled. 'Dad was very skilled. His pulse checking was amazing.'

Opinions of Chinese medicine have indeed shifted over the decades – by patients and by the medical world. Today, practitioners may see a handful of these 'last resort' cases, but also their fair share of 'first resort' care. But it took a long time to reach this level of acceptance and credibility, and is still ongoing.

After high school, Maurice commenced studies in Dentistry and lasted a year before realising it wasn't his calling. He still had an interest in Chinese medicine, but there were no courses available in Australia and overseas study was out of the question as he was not fluent in Chinese. However, fate would turn his dream into reality thanks to his well-connected father. It all started with his father's connection



with the late Maurice Blackmore, founder of health company Blackmores. Mee Lee Senior studied mineral therapy with Blackmores and became a great naturopath; Maurice later followed in his footsteps and graduated as a naturopath in 1963. Almost a decade later and still no Chinese medicine courses available in Australia, famous medical acupuncturist Dr Eddie Wong contacted Maurice's father requesting advice about starting acupuncture courses in Australia. Maurice and Brian were part of the first intake of 10 practitioners (doctors/naturopaths/chiropractors) who undertook this nine-month concentrated course.

After graduating as acupuncturists from one of Australia's very first acupuncture programs in 1972, they had the good fortune of attending Chinese master Dr Wu Wei-Ping's post-graduate seminar in Taiwan.

### *And so, the Association was born...*

Upon returning home to Brisbane, the fresh graduates realised they needed to remain connected in their new careers as acupuncturists. 'We knew we would fall apart if we didn't do something,' Maurice said. So, six Queensland-based acupuncturists joined forces and started the Australian Acupuncture Association which was incorporated in 1977 (later becoming the Australian Acupuncture and Chinese Medicine Association after the nation-wide amalgamation with fellow Chinese medicine associations).

During their time on the Board of the Association, Maurice and Brian travelled around the world at their own cost looking at the international status of acupuncture. They reported that they were surprised to find that even then Australia was well ahead of many other countries in its development and standards of education and practice.

During their trip to Europe, Hong Kong and Hawaii they discussed policies, standards and approaches to running Chinese medicine associations with some of the world's leading associations. The trip was an important exercise, plus it further cemented the bond between the pair. In 2013, as they cast their minds back to the 70s the pair light up and talk fondly about their trip, everything from conversations with airport staff, through to their meeting with well-known UK-based acupuncturist Dick van Buren who in the 70s charged £50 an appointment and who was booked three years ahead. Van Buren was also trained by Dr Wu Wei-



*Awarded Life Membership, AACMAC Brisbane 2007: Maurice and Brian with AACMA Past Presidents and Board Members.*

Ping, and proof that acupuncture could be embraced by the wider community outside of China.

After arriving back to Queensland, Maurice and Brian embarked on a publicity campaign to drive more patients to acupuncture clinics. It was mid-70s Australia, where conservative views reigned. The pair knew the publicity battle would be challenging, but armed with a fresh vigour from seeing successful European clinics, they were full of fight. Their Queensland campaign started with Letters to the Editor where they 'copped flack from the medicos' who claimed acupuncture was simply 'psychosomatic'.

'Criticism was steady and solid,' Maurice said. He recalled a phrase he often used when talking to journalists: 'It's a shame those so critical of us know so little about acupuncture.'

However, the publicity worked. After press, radio and television interviews, the Association had successfully opened up discussion, and thus awareness, around acupuncture.

'I've had a waiting list practice ever since,' Brian said, who's still in full-time practice from his Yeronga, Brisbane clinic. He's showing no signs of slowing down any time soon. Brian, who Maurice proudly refers to as 'the world's leading bioenergetic practitioner', was involved in one of the first acupuncture births in Queensland and continues to see patients with a myriad of conditions – his passion still as strong as ever.

Maurice retired from private practice in the late 2000s. Today AACMA's Life Members, good mates and close colleagues still enjoy catching up in Brisbane for a cappuccino to share stories from the good old days.

We thank Maurice and Brian for their foresight in starting AACMA, and we salute the Boards of Directors that followed and crafted AACMA into the truly national association that it is today.





## ACUPUNCTURE IN THE 1970s

*'The story of acupuncture in the little  
backwater town of Brisbane'*

By Heather Alderslade (Bruce), AACMA Fellow

In the 1970s with acupuncture not being a mainstream career course, students tended to be either from existing natural health professions (usually chiropractors), or those who were drawn to acupuncture through having seen/felt great results for themselves or their families. The patient population had ailments seen by mainstream medicine as being untreatable. Without HRT, stomach/duodenal ulcer drugs, anti inflammatories, progesterone implants, modern anti-psychotics, or scanning and laser/key hole surgeries, acupuncture, as taught, worked. Moxa fumes ruled!

Initially, Acupuncture Colleges (Australia) in Sydney sent up a few lecturers monthly, then fortnightly. Brisbane's earlier graduates started up their own association (AAcA), later becoming AACMA. The Brisbane branch of the Sydney school broke away to become the Brisbane College of Traditional Acupuncture.

In Brisbane, John Velthiem, a chiropractor, emerged as the major lecturer. As one of his two difficult students, I was asked in 1980 by a fellow classmate (Peter Sherwood) to set up a second college – Acupuncture Colleges Australia (Brisbane). I suggested bringing the other difficult student – Judy James – into the project. Our efforts (minus texts or journals) went on to become the only college in Brisbane; in the past 20 years as a major national force, later as ACNM, and now as Endeavour College of Natural Health.

When I started, patients were desperate. Medical specialists literally shook their hands and wished them well. They came to acupuncture because someone from their church, their work, a neighbour or someone on the bus told them of their own success with it. Everyone knew – when in pain – see

an acupuncturist; when no other person could help – try acupuncture. Patients tended to be mainly the elderly with colossal joint and life problems. Anyone with structural or back issues (think of a life without anti-inflammatories, pain medication or arthroscopies), or those whose condition was seen as being terminal or untreatable – as all women were with menstrual or hormonal issues – knew to go to their local acupuncturist.

Trained by unusually good clinicians to deal with this patient load seeing us only as a last resort, we learnt quickly to swim not sink. Some would say how? No texts, no Chinese study tours, no TCM... The Answer? The classics, as interpreted through the eyes of Westerners (based in the UK) as working on modern English speaking populations (mainly with pain). Dr Dick van Buren was a major force in the profession at that time, albeit from faraway UK. No 'science' based research, no linguistic or travel needs – just using what made a difference in the lives of those who were so distressed.

No health fund rebates – we survived really well through word of mouth and being able to do what was needed – get people happily back on their feet. Judy and I as course designers, writers and lecturers were influenced heavily by what we had seen work in our own clinics, and then through the work of Clive and Tina Minton in the early 1980s, bringing out overseas speakers – Ted Kaptchuk, Giovanni Maciocia and Dr John Shen, to open our eyes 'down under' to both TCM in the first instances and to a family lineage in Dr Shen's case.

Through the 80s, the modern look TCM acupuncture morphed into TCM, adding herbal medicine into the now four-year full time university courses.



# 1980s

## GROWTH AND DEVELOPMENT

The profession starts to grow and find its feet in the 1980s. Although we are still considered 'alternative medicine' practitioners and quacks by many in mainstream health, there is a growing community awareness and government recognition of our potential.

More courses and teaching institutions emerge. Most notably Acupuncture Colleges Australia (Brisbane) was established in 1980, later becoming ACNM and then as Endeavour College of Natural Health. The NSW College of Natural Therapies was also established in 1980, considered to be the forerunner of the Sydney College of TCM, now SITCM. Acupuncture Colleges (Australia) achieved the very first government-accredited program in the unregistered health professions, with a Diploma in Acupuncture in 1986.

AAcA, AESO and AASA continue to grow and develop as separate and competing entities, although there were serious attempts, unsuccessful at that time, to unite AESO and AAcA.

The long journey to national registration starts here, with AAcA in Queensland and AESO in NSW and Victoria commencing lobbying for state-based registration. The NHMRC updates its report on acupuncture and its findings are challenged.



### FLASHBACK



AACMA Fellow John McDonald shares some snaps from the good old days. See if you can recognise any familiar faces, many are AACMA Members. *Top left:* TCM delegation at Chinese Embassy, Canberra. *Bottom left:* Team delegation outside a China Town Herb Shop.



## BLAST FROM THE PAST



Pictured above is a copy of an AACMA Newsletter from 1986.

A valuable communication piece at its time, the newsletter was sent to the Associations some 100–200 members during the 80s.

In November 1986 the main issue reported in the Newsletter was the Board's support for the proposed visit by Chinese officials to evaluate our professional standards. Also reported was an announcement about an Acupuncture Careers video as part of a promotional campaign – a concept the Association would later revisit and update in 2012, with the production of the 'Alife' online videos which promoted careers in Chinese medicine and acupuncture careers to high school students in Australia.

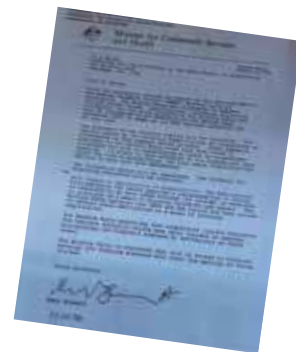
## MEMORIES

AACMA Member Sue Nelson shares her Class of 88 graduation photo from Brisbane College of Traditional Acupuncture and Natural Therapies.



## NATIONAL REGISTRATION: DECADES IN THE MAKING...

Lobbying for National Registration commenced in the 80s, proving to be a long road with registration later coming into fruition for Victoria in 2001 and nationally in 2012. This long road was something that both AESO and AACMA took seriously from the early days. In this letter dated 28 June 1989 to AESO's Dr Kerry Watson, shows recommendations from the National Health and Medical Research Council (NHMRC) Working Party on ways forward to addressing issues as a means of pursuing registration.



## Well Wishes... CHRISTINA CHAU-YANG

'I would like to thank AACMA and the TCM practitioners for its hard work and dedication. It is a great achievement that the TCM profession is recognised by the National Registration and Accreditation Scheme for the Health Professions.

When Francis Chau and I first started our TCM clinic in 1979 there were only a handful of people practising TCM then. We advocated TCM because we were disillusioned with the Western medicine paradigm, which is treatment-oriented, and relies heavily on pharmacotherapy and surgery.

Gradually the Australian public were given more choices of other forms of treatments as more people practised TCM, Australian public were offered approaches different from that of the Western medicine. However, only medical doctors who practised acupuncture were recognised by Medicare.

Currently Australia's aging population, coupled with the rise of prevalence of chronic diseases will increase our burden of diseases and challenge Australian health care resources. Hence, I am looking forward to TCM's holistic and humanistic approach in leading the way of promoting health maintenance and disease prevention instead of disease intervention and treatment.'

Christina Chau-Yang, AACMA Fellow





## *Past President* **PHILIP VANDERZEIL**

### **What period were you President, and what were the big issues at the time?**

I had two terms as President one beginning in the mid 80s and lasting three or four years followed by another term in early 2000. I was also a Board Member for about five to six years in the mid 80s and for two years in early 2000 leading up to my second term as President.

The big issues we took on right through my years as a Board Member and President was to prove to the public that AACMA had a strong culture of running an established health profession.

Registration of the profession was a topic of frequent discussion based on the fact that acupuncture had been well-established in China for 2000 years. It begged the question: if acupuncture was so well-established in China, Vietnam, Korea and Japan, then why not in Australia?

In my first few years on the Board, meetings were very lively affairs, and some of the big hitters of the profession were involved: Peter Sherwood, Keith Jenvey, Bill Silvey, Brian Bateman and many others, who were early pioneers of the profession.

By the late 80s acupuncture was starting to emerge as an effective treatment for a variety of conditions, with information trickling out of China, publication of the *Essentials of Acupuncture* and material from WHO courses conducted in a number of Chinese cities and of course information out of Europe. Europe was at times a source of somewhat puzzling information on the subject of acupuncture. Acupuncture information out of Europe at that time was a combination of older material from Vietnam, Japan and Korea and was at times hard to verify.

Courses on acupuncture were being conducted for foreigners in China from the late 70s, a number of practitioners from

Australia had made it a point to visit and study in China including my own studies in Nanjing in 1982.

By the late eighties and early nineties there was a clearer picture and a more precise curriculum for the teaching of acupuncture. Plus more books in China were being published on how to treat specific health conditions. This was fantastic news for practitioners in Australia.

Board meetings at this stage were starting to reflect a national picture for the Brisbane-based organisation, AAcA was now national and had many other complex issues to deal with.

There were many challenges in managing the profession because there was a strong belief that had existed for many years that registration of the profession was the only way forward. Acupuncture courses by the late eighties were being taught around the country.

The professional board was the gatekeeper of curriculum and standards and took these tasks seriously, we therefore had a profile of been unrelenting. Registration, quality education and high professional ethics were the hallmarks of the AACMA in those tough years.

### **What are your fondest memories?**

Fond memories are littered through the many years I spent as a Board Member and President, one of these in my second term as President was when registration was being touted in Victoria by the Kennett Government. This was a period of intense negotiation and the Board was incredibly and deeply involved in trying to secure a level of registration for practitioners, legislation that meant that we were able to preserve and not give away all that we had fought for over a number of years. Numerous meetings were held in different cities or in conference calls, inordinate amount of time was spent negotiating with representatives of all states. At times these telephone meetings would last five to six hours!

## *A Great Achiever...*

By Clive Powell, AACMA Member

As large numbers of our older members are now retiring from the profession without publicity, they will be missed by their friends and remain anonymous to so many. Let's look at one pre-retirement practising member, who I believe is one of our greatest achievers.

At 70, he has just commenced his fifth book – two of his books have been translated into Chinese at Guangxi University of Chinese Medicine and published in Beijing. In China, he enjoys the title of Emeritus Professor at Guangxi University of Chinese Medicine. He guest lectures to Masters level medical-translator students. He recently was the only Westerner to address 12,000 academics and students at the nationally televised opening of the massive new university campus in Nanning. He has two PhDs, a Masters Degree and acupuncture qualifications.

He is highly respected by this University; just like his students in Malaysia and Thailand and Hospice patients in a Buddhist Monastery in Thailand.

Obviously this is significant, but his Australian successes are even more substantial. He graduated in acupuncture in 1979 and is one of our longest practising members.

He founded the Australian College of Natural Medicine in 1980 (now Endeavour College of Natural Health) and it grew to more than 4,000 students on four campuses. It was internationally recognised as a centre of quality and the largest college of its kind in the World; with more acupuncture students than any Chinese university.

Decades ago, he served on the Board of the Association; the Australian Government selected him to chair its Traditional Medicines Evaluation Committee and to chair its Conference with the 100 leaders of the natural medicine professions at Old Parliament House in 1996.

Peter Sherwood, my fellow graduates and I thank you for our acupuncture education.

Eventually this intense period was followed by total dismay when it was established that the Kennett government had lost the election in Victoria. The Chinese Medicine legislation that was on the way through the Victorian Parliament had stalled and we were to have a change of government. This was a total disaster as we saw it. We frantically lobbied the Labor Party in Victoria and after many weeks of negotiation, and with the help of some clear thinking Victorian departmental personnel, were lucky to get the Bill passed and achieve registration in Victoria. There was total elation for days, which in my case went on for weeks, we had finally succeeded and were part of the established health system in this country.

### *Are you still working within the profession?*

I have recently gone on sabbatical for 12 months, part of my sabbatical is dedicated to completing a book that I started a number of years ago on acupuncture and our health system. I'm also making a point to get to as many conferences as possible, presenting papers and collecting information for the book. After 30 years of intense work I thought it was time to have a break from clinical practice, it's been months now and it's been fun.

### *What's your vision for the profession over the next 40 years?*

My vision is that Chinese medicine has a specific place and part to play in our health system. With acupuncture in particular there is substantial evidence to suggest that it can be used for a series of health conditions that appear to be poorly treated by the established health system. I think acupuncture in particular has a clearer future. It is important though that the practice of acupuncture is managed and practised by the registered Acupuncture profession. Having visited China on numerous occasions and seen acupuncture at work in the hospital system I think there is no reason why certain elements of acupuncture can't be practised by qualified acupuncturists in a hospital setting in this country. It's green, has low side-effects and is cost effective.



## *Past President* **PHIL MACQUEEN**

Phil MacQueen served on the AAcA Board for seven years in the 1980s before becoming President during 1988–1990.

**During your time as President and preceding, what were the big issues? And, what were AAcA's major achievements?**

Even from the early 1980s, national registration was a big issue for us. 'Us' was then the AAcA, a Queensland-based organisation with about 100 members in the early 80s which grew to about 200 members in the late 80s. The driver for registration was Queensland Workers Compensation payments. It seemed grossly unfair that physiotherapists and chiropractors could get payment and yet in our view, we did an equal job and got no recognition.

We recognised the argument from Workers Comp, that we were not 'Registered', may have been a smokescreen but it was a major driver for the professional recognition of the value of our profession.

A major issue was the grouping together with tattooists in the 'Skin Penetration Regulations' drawn up by the Queensland Government. There was so much 'anti-feeling' towards our profession that they could not bring themselves to name us specifically. We were referred to in the legislation as 'tattooists and other like practices'! Still we were a small minority and had almost no voice.

In 1984 there was a big hit to the profession: HIV AIDS 'came out of the closet'. The Federal Government decided to go in hard and hit the big screen with an advertising campaign that shocked Australians to the core. I'm sure Australians remember the 'Grim Reaper' television ads. It had the most clout of any ad on TV in Australia, before or since.

It decimated acupuncturists' patient numbers through Australia. The ad featured needles being used for drug use. The public obligingly associated needles with acupuncture

and presto we were the bad guys. I lost one of my two practices. It was during this period that the profession made a wholesale move from re-usable needles to the newly available single-use, pre-sterilised needles.

A few Board members decided to take positive action. Phil Vanderzeil and I formed a sub-committee and started Acupuncture Awareness Week which aimed at generating positive press about our profession. Our hard work of organising public forums, an acupuncture tent city in Brisbane City's King George Square, banners above major Brisbane streets and lots of press releases in local newspapers paid off. The positive publicity helped us out of a big slump.

The recognition that we needed a united voice in Australia came early to me as a Board member and I worked at that task through my time on the Board. I started observing who the major players were in the other main acupuncture body in Australia, the AESO. I worked at building relationships with them. There was a degree of mistrust between the two organisations and this was not going to be solved with confrontation. It was like each group thought it was 'the way, the truth and the light'.

There needed to be a common goal and purpose to unite us. I had a meeting with Christine Berle (AESO Executive) to discuss the broad structure of a plan to move forward. This was a really good discussion and we agreed to develop our ideas in a certain way: 'In an ideal world, how would we see ourselves?'. We agreed to share our thoughts and writings. My first was a united profession with each organisation fulfilling a specific role under a united banner. My second was a registered profession, not on a state-by-state basis, but as one group legislation under a Federal agreement. There were a few other dreams on my list that I shared with Christine, but these were the major ones. I never thought the latter would come to pass but it seemed like a good idea to pursue. Health issues were State issues, but lo, common sense prevailed!

The movement toward unification of the two organisations began in earnest with meetings in Brisbane but then stalled. It took some considerable effort on the part of the Board and myself to progress this issue further. I stood for the position of Chair of AESO and as I was President of AAcA it was then possible to have a vote for the unity of the two organisations. This was resolved favourably and we were able to move



forward as a united profession speaking for more than 80% of acupuncturists in Australia.

There was lengthy discussion on a new title for the organisation. Some Board members wondered about how to deal with the herbal aspect as we were an acupuncture association but it was seen that herbal medicine was an integral part of our profession and thus the all-accommodating title of Australian Acupuncture and Chinese Medicine Association was born in 1998. This encompassed all aspect of our medicine. All were happy!

Through this period of time the Board also developed a definition of our profession. This was the National Competency Standard for Acupuncture. It defined who we were and what we did. Board Member Clem West was the driving force behind this. Acupuncturists from every group and organisation in Australia were invited to attend and put forward their ideas on a definition of our profession and their membership standards for perusal and sharing. We all contributed our ideas and knowledge to this and a standard for professional education was created.

This major achievement was not without its toll on me. After this marathon effort of anchoring, holding together two organisations, settling disputes, spending up to 30 hours a week, reading faxes (emails didn't exist back then) consulting on the phone as a director of two acupuncture organisations and President of AACa, reporting to the Board, receiving Ministerial briefs, perusing and digesting same, writing replies to letters and attending Board meetings, all for no financial reward AND running a practice AND being a single dad to three boys, I had enough and feeling burnt out, I handed the baton to Stephen Janz who had been a loyal supporter and good friend through this whole period.

#### What's your fondest memory during your time as President?

The close personal friendships I made are my first fondest memory, and secondly uniting the profession so we could move forward to full legislative recognition of our profession.

#### Are you still working within the profession?

Yes, I have been in continual practice since 1982 and plan on continuing until I hit 75 or 80. I love what I do and see no reason to change too much.

Throughout my time on the Board I made video recordings of invited lecturers. These videotapes were made available through AACa's distance education program. I felt it was important that members far from major centres had access to what we took for granted. It was important too for obtaining CPE points. All the tapes are now in DVD format.

I have developed this idea on a commercial basis and now have the biggest resource for Chinese medicine DVDs in the world on my website ([www.acupuncturedvds.com](http://www.acupuncturedvds.com)).

I love the idea of giving something back and would love to continue to mentor a few young or beginning practitioners with an idea of up-skilling them to greater therapeutic efficiency. I also lecture around the world in musculoskeletal acupuncture and bodywork.

I have bought a 45 foot catamaran and keep it in Thailand. Over the last few years I have run workshops on board in Thailand, combining sailing, sightseeing and teaching in a tropical paradise. I would, and do, suggest that this is the best way of getting CPE points!

So, combining my time in practice at home in Brisbane, lecturing around the world and on my yacht plus travelling around the world videoing specialised lecturers for my website will keep me pretty busy... just the sort of 'retirement' I have in mind.

#### What's your vision for the profession over the next 40 years?

I think that we can continue to make inroads into 'mainstream' medicine. To do this we need to broaden our knowledge base though ongoing communication with expert practitioners and using the internet to promote that to practitioners.

We need an expanded, ongoing research program in place at universities that produces research results that are directly applicable to clinical practice. This will enable greater PR opportunities for our profession. We need to maintain a strong professional association to promote our profession and to advance our hold on our knowledge base.

An expression I have found useful over the years regarding promotion is: 'We can have a niche that is only narrow, but we can make it endlessly deep'.

Let's continue to promote and champion our medicine, the most successful and longstanding in the world.

## MEMBER WELL WISHES

I am thanking AACMA, the Board and all the staff, especially Judy James, to have brought us to this special point of celebration.

Many years ago, when Judy and I were both young women, Judy devoted her life's energy to AACMA and the profession of TCM (without Judy's foresight, planning and support, we would perhaps not be here today as a registered profession), and I set out in my career and tried to become a good practitioner of TCM. But being young and in solo practice was at times daunting. The worst thing would have been self doubt and fear at times. I can recall a number of occasions when I felt greatly supported by Judy. Then there is Michael Porter; Michael and I are the only two students of our group of graduates who made it into the 'now'. I remember when we would sip many cups of coffee at Jimmy's in the Queen Street Mall, together with other students and lecturers, such as Heather Bruce – we all had dreams...

This was a long time ago, 30 years ago in fact, and every year is special to me and I always look forward to seeing Elaine, Michael, Judy and other colleagues at AACMAC. These are deep, sincere connections and I truly appreciate them.

On a lighter note, I recall Judy telling us she was sure that she was 'in her previous life a Chinese person'. Now I only hope, whilst she is pursuing her new chosen path, that she will

not lose her 'Chineseness' and in doing so, will remain connected with all of us.

I feel truly privileged to have been a member to AACMA and of course to the profession of TCM.  
**Domenique Wood,**  
AACMA Fellow



## FELLOW PROFILE JIM CHALMERS

**When did you join AACMA:** 1988

**Describe your career in Chinese medicine:** Life-changing, educational, fulfilling. Now almost at retirement, great satisfaction.

**What's your best conference memory:** 1997 WFAS Beijing, Invitation to a banquet in Great Hall of the People, Beijing and co-presenting a workshop on Auriculotherapy with Stephen Janz at AACMAC Brisbane 2007.

**What's your prediction for the TCM profession over the next 40 years:** Turbulent; risk of over-regulation and limitations of scope of practice, but ever greater consolidation in mainstream medicine.

**What makes you proud to be an AACMA Fellow:** In terms of pride I don't think that there is anything more to being a Fellow than being a member, except maybe the recognition for the years of practice and the contribution to the profession. What makes me proud is the unpaid efforts of the numerous Board members over the years to improve standards in education, ethical practice and regulation. The fact that AACMA now stands as the main body representing the profession and the support it offers to and receives from its members.

**Is there anything else you would like to share?** I recently found an old copy of the *Australian Journal of Acupuncture* Vol.2 No 2. Summer 1986 edited by Harley Gale. It contained letters to the Editor about Medicare submissions and an AESO report on submissions for the Registration of Acupuncture in NSW.

It reminded me of some of the determined efforts that continued during the various times I served on the Board and proves that 'perseverance furthers' and demonstrates how far the profession has come. Now Australia has set a world standard for the practice and regulation of the acupuncture and Chinese medicine profession. A big thanks to all the Board members and of course, to all the members. Special thanks to CEO Judy James who has worked tirelessly, day and night over the years for the benefit of the profession.

On a lighter note, I headed a delegation to China in 1997, which included Judy James, Robert Vandavelde and Richard Li, at a special dinner for one of our hosts, a live snake was beheaded and fresh snake blood was poured into one small glass of very strong spirits and in a second glass, bile from the snake's gallbladder. As head of the delegation I had the honour of 'skolling' both glasses first. My recollection is that no one else in our delegation accepted the offer to try this liquid specialty. We did however enjoy eating the snake. It was an interesting night.

BLAST FROM THE PAST...

## INAUGURAL WFAS 1987, BEIJING

In 1987, the World Federation of Acupuncture Societies (WFAS) held its inaugural WFAS conference in Beijing in 1987. Some AACMA members attended, including Queensland's John McDonald, an AACMA Fellow.

In 2013, WFAS celebrated its 25th anniversary and hosted its 8th World Conference on Acupuncture in Sydney, Australia which was organised by AACMA. Here John shares some of his photos from 25 years ago.



*Inaugural WFAS group at Beijing Acupuncture College.*



*Wang Xuetai, the Founding Secretary-General of WFAS at the inaugural WFAS conference.*



*Inaugural WFAS Conference, Beijing 1987.*

## WELL WISHES & MEMORIES - Judy Murray, AACMA Fellow

In 1983, during the first semester of college in Brisbane, I began a relationship with my two life loves, traditional Chinese medicine and Dean Fatcher. Enthusiasm ran wild within our group of students and our lecturers seemed equally enthralled! Of course, we felt that we were the chosen ones. A quick salute to our lecturers: Annie Mahoney for teaching us point location with patience and sweet enthusiasm; Judy James with her untamed hair, and powerful and commanding presentations; Dr Mel Sydney-Smith for being himself complete with cigs, Coke and Megavitamins; Harley Gale for his ever-smooth lectures, extolling the virtues of Liv 3 and Co 4; Phil Vanderzeil for his quick wit and jokes at the ready; Greg Bantick for taking care of our spiritual puzzlings; and Heather Alderslade (now Bruce) for her passion in all things gynaecological. A special thank you to Chiem Trinh who brought a profound wisdom and knowledge to our learning; and Peter Sherwood for a dream realised. To those I have named and others I haven't, thank you all for your devotion to TCM and for inspiring us.

As I look back, I recall my nervous beginnings. My first client arrived at our brand new clinic in Murwillumbah when I was on my own. Dean had stepped out. The man arrived with his wife and he had been vomiting all night. I brought a bucket and after an anxious

diagnosis, I needled Per 6. He leaned over and vomited into the bucket, then he groaned. I held my breath! Finally he said 'Oh, I feel much better'. The relief for me was greater than his I think. A different choice of restaurant was the culprit. 'We always have Chinese on a Sunday night,' his wife explained.

Dean recalled different growing pains. In 1993 Dean became the chair of the Disciplinary Committee for AESO. Part of the job was going to Sydney for meetings with various Health Fund managers. Dean's brother-in-law gave Dean a 'Collins Street' double-breasted suit so he would look the part. Arriving at the first meeting, Dean stepped out of the taxi and his pants split. He conducted all his meetings that day with his briefcase stuck behind him!

We have come a long way since then. I have been in practice in the same Murwillumbah clinic for 27 years and I am living happily ever after with Dean, who has since changed professions. We have wonderful children and grandchildren. Life is marvellous, thanks to all.

Fellow students, you know who you are. Thanks for making our college years so memorable. The antics, anguish and laughs will stay with me always.





## *Chief Executive Officer* **JUDY JAMES**

*Judy James, the tenacious and passionate CEO of AACMA, has dedicated more than 19 years to the Association, helping to steer AACMA and the profession to where Chinese medicine is today in Australia. In December 2013, Judy hangs up her CEO hat – marking the end of a long chapter. In this story, we uncover the passionate individual behind Judy James and celebrate her rock-solid commitment and influence in the profession.*

In 2013, AACMA has ridden a wave of celebratory moments: reaching its 40th anniversary as the peak professional Chinese medicine association in Australia; hosting the highly successful world conference, WFAS Sydney 2013; and catching its breath after the intense national registration period of 2012, to witness our members practising Chinese medicine within a nationally registered environment. Another pivotal moment in 2013, which could best be defined as a bitter-sweet celebration, is the fond farewell to AACMA's CEO Judy James, who is leaving the Association after almost two decades at the helm of the organisation.

To celebrate Judy's rock-solid commitment to the profession and association, we've taken a walk down memory lane to uncover some of her most loved and life-changing moments that have helped shape her into the strong-willed person she is today, and also we share the softer side behind the CEO mostly known her hard-headed, yet fiercely passionate, ways.

### **The early days**

Judy James fell into the world of acupuncture in 1977, when Brisbane acupuncturist Kevin Jeynes referred her to an acupuncture course that had started at the Brisbane campus of Acupuncture Colleges (Australia). Judy found Carole Rogers' seminar fascinating. And from that day, hasn't looked back. 'I took to acupuncture like a duck to water,' Judy remembered. During college, Judy studied with a 'very strong' group including Heather Bruce, Peter Sherwood and the late Diana Dungworth. It was also during her college years that her feminist background was brought to bear to deal with the patriarchal attitudes that were evident at the college at the time. In 1979, in Judy's final

year of college she became the 37th member of AAChA (now, AACMA) and commenced part-time practice in her own acupuncture clinic in Auchenflower, Brisbane – with her closest colleague setting up practice about seven kilometres away. 'If someone was within five kilometres it was considered too close,' Judy recalled of the early days of practice in the late 70s, quite different from today where many Chinese medicine clinics share the same postcode – proof of the changing nature of the profession over the past four decades. After graduating, Judy took on full-time practice and later became Academic Coordinator of Acupuncture Colleges Australia (Brisbane), a college set up by Peter Sherwood and Chiem Trinh in the 80s. Judy and Heather Bruce were the college's foundation acupuncture lecturers.

This teaching role was indeed exciting and daunting, and given Judy's youth, she had to mature very quickly. 'I was still quite young, in my mid-20s, and was teaching people who were more experienced in life than I was, I had to mature very quickly'. During her six year stint at the college, Judy taught many acupuncturists who are still active in the Association today including current Board Members Wally Simpson, Michael Porter and Fellow Dominique Wood.

Practice in the early days wasn't always easy, Judy recalled the community's perception of the practice of Chinese medicine as quackery. 'Indeed at the time we considered ourselves to be alternative therapists rather than primary healthcare practitioners. This way of thinking has changed significantly over the past 30 years. Chinese medicine was once outside the system, whereas it is now a part of the system, while still retaining its essential character.'

## The passion

Even though Judy's professional life has taken her down many paths, she emotionally confessed that 'being an acupuncturist has been the most dominant thing in my life ... I love Chinese medicine and the thinking of Chinese medicine. In my experience as a Westerner who studied Chinese medicine, once you have immersed yourself in Chinese medicine you can't go back to your previous non-Chinese medicine thinking. You might try to ignore it, but you can't reverse it.'

## An acupuncturist's battles in the early days before registration

During the early days of acupuncture in Australia, Judy recalled that you simply had to be good to be accepted by your patients and the community. This was in an era where there were no text books, apart from Felix Mann's books and the *Outline of Chinese Acupuncture*, so in the 1980s when the Shanghai text came out, people were very excited.

'As an acupuncturist, you had to learn fast and you had to collaborate with your peers to share experiences. You had to learn from your colleagues. We'd get patients once they had been through medical system and thrown out the other end and even though they might have had 20 treatments from the physio, if we couldn't fix them in one or two treatments, we were the quacks,' Judy recalled.

When asked about fond memories from clinical life, Judy recalled how collegiality and lateral thinking helped her achieve results for patients.

'One patient came to me with a viral arthritic problem which I diagnosed as a moving wind-damp Bi disorder, where arthritic aches and pains moved down in the body like a wind band. At the time I thought, what would happen when it hit the feet? So, I took a lateral view and thought the wind and the damp would have to escape somewhere. I tapped the feet, recalling Graham Jellett who had suggested tapping ST 25 to release wind from the bowel, so I tapped the feet with the dermal hammer and the patient had an almost 100% response to this treatment. It dispelled any doubts about whether qi, damp, wind, etc actually existed.'

'Another good learning experience I had in my first month of practice was when a friend came in for smoking cessation, to help me out, give me a go,' Judy smiled. 'I gave him the standard smoking treatment, which we'd been told was moxa on Ren 17 plus needle ST 37 or 39 to help draw the qi down, which I wasn't convinced would do anything, so I didn't do use the ST points. So he came back the next day with a deep purple tip on his tongue and heart pains and I remember thinking 'what on the earth have I done?' I thought it was because I didn't move the excess qi and it was stuck in the chest, so I did those points and it didn't make any difference and the condition had progressed. I had to find other ways to get the qi moving out of his chest and started massaging his shoulder (on Large Intestine and Sanjiao points) and he said it was like letting steam out and when I looked at his tongue all of the purple had gone. There had been a history of shoulder problems which were sparked by a major relationship breakdown – even though this is not strictly TCM theory, it does address issues with energy medicine: that theories are not just theories, they actually relate to real physiological processes.'



AACMAC Brisbane 2012: (left) Kate Roberts, Debra Betts, Judy James, Paddy McBride and Thomas Lin.



Judy James, John McDonald and Richard Li during AACMAC 2009.





*Judy & AACMA Fellow John McDonald during the WFAS San Francisco 2010 trip.*



*Judy presents at NZRA Conference 2011.*



*Judy James & Vice President of Shanghai Uni of TCM at the Welcome Banquet at Shanghai University TCM October 1997.*



*Life Members Brian Bateman and Maurice Mee Lee with Judy James and Richard Li during AACMAC Adelaide 2008.*

'I'm a firm believer in traditional Chinese medicine. TCM is a very elegant framework and set of theories that don't always make sense and can be contradictory, but they've been developed over thousands and thousands of years of clinical practice and they're still developing. It's this collective experience of practitioners that keeps this medicine alive; if we just stick to a rigid set of codes then we miss the true heart of Chinese medicine – it's a living, breathing and organic diagnostic system of observation, analysis, assessment, interpretation, and individualised treatment.'

Collegiality is still as important today. In those days practitioners were desperate for knowledge and Judy and some Queensland colleagues would go to any conference or seminar they could find in Australia, like Dr van Buren, Giovanni Maciocia, Ted Kaptchuk and Dr John Shen who came out in the early 80s (thanks to Christina Neilson and Clive Minton for the work they did in opening up Australian Chinese medicine and acupuncture to the rest of the world).

### Banishing self-consciousness

Today we know Judy to be assertive, direct, strong-willed and at times a little intense to be around. But her thick skin was not always so thick. In fact, the Judy we know now is quite removed from the Judy in the early days. She got involved on the AACMA Board in the very early 80s as a very young practitioner – who, if anyone asked her opinion, she would 'die of embarrassment'. 'People who know me would wonder how I have a problem! But in those days I was extremely self-conscious,' Judy admitted. In contrast, at the same time outside the profession, Judy had been active in the anti-nuclear and civil rights protests.

To break through this crippling self-consciousness, Judy had to learn two important lessons: how to deal with unexpressed anger and how to deal with lack of confidence, which was the biggest challenge. So what did she do? She assumed a new persona for her professional life. And it worked!

Juggling many roles as practitioner, lecturer, Board Member, and her own individual self, Judy credited teaching as helping a lot during her push through self-consciousness.

### Leaving academia and acupuncture practice

After seven years of practising, teaching and working for the profession on a Board level, life brought about a new chapter for Judy – a chapter that saw her leave her old life all behind and she left her position at ACA (Brisbane). By 1986 Judy found practice to be tedious and yearned for a change, so enrolled in a full-time Arts degree majoring in Chinese language and Chinese literature, and followed that with a law degree.

'One of my fondest memories of that time was inhaling the moxa aroma wafting by when practitioner Crissi Schmidt, also a Chinese language student, entered the classroom and the hilarious role plays in Chinese. Schmidt 同志, 好不好?'

However, the world of Chinese medicine was not too far away thanks to Judy's subsequent involvement at the Brisbane College of Traditional Acupuncture as lecturer and clinical supervisor in 1988–89.

During her law degree Judy also worked in domestic violence and as an administrator in the Crown Law Office in Queensland, was involved in setting up the inaugural



Freedom of Information (FOI) Unit for the Queensland Government and worked as an administrator in Criminal Prosecutions. It was during her time at FOI, that Judy learnt a very hard life lesson: if you have something important to do, sometimes you just have to play hard ball and not be afraid to make enemies.

Judy's career in government was short-lived when the Chinese medicine profession literally called her back.

### What drew Judy back to the Chinese medicine profession?

If 1987 was the year of leaving the profession, 1992 and 1993 presented two significant opportunities that saw Judy return back to the profession that deep down held her heart.

In 1992 the late David Benn telephoned Judy to invite her to lecture to graduating students on Womens' Health and Menopause. 'I told him I didn't know anything about menopause to which he said, Well you're a woman aren't you?' Judy laughed. 'So I thought I'll research it and apply my intrinsic knowledge,' she said. Given Judy's lack of recent experience, she instead focused on theoretical knowledge and used deductive processes. 'Delivering the lecture was so exciting and I felt so enthused!' Judy smiled. 'One of the things law taught me was good deductive reasoning and Chinese medicine, although it does require a lot of instinct, is highly deductive. And that doesn't conflict with it being organic, you just have to combine the deductive with the complex multi-layered system of how the body works.' The ability to problem solve is an area that Judy believes students lack the most, but an area vital for practice. Judy believes it is not a matter of learning check boxes, it is a matter of understanding processes and how to fix them when they falter or fail.

Also in 1993, whilst working in the Qld Department of Justice Judy was approached by Heather Bruce to stand for the AAaA Board as Secretary. This was when Harley Gale became President and Stephen Janz and Phil Macqueen were also on the Board. 'I remember saying I don't want to come in and fight, I want to come in and bring harmony. As you would expect, the first thing that happened after a short honeymoon – we fought,' Judy laughed. As Secretary, Judy tightened up the whole process of formal communication with the association – and centralised the process of communications of the national office. In 1994 she resigned as AAaA Secretary to take up a contract position as part-time Administration and Research Officer, a role which

further grew and developed into Judy being AAaA's first full-time employee. This was a time when the Association indeed needed support on deck due to the impending amalgamation of AAaA and AESO.

### Judy's recollections of the Amalgamation

Judy remembers Harley Gale was initially president of both AESO and AAaA and his focus was on uniting the two organisations. 'I won't pretend the amalgamation was an easy time, a few people fell by the way side, and there was a lot of internal disharmony and power struggle on both boards, but it was absolutely essential for the profession that the two big acupuncture societies joined together to form one big group,' she said. 'We wouldn't have national registration if the amalgamation didn't occur'.

Judy recalls there were many key people involved during this process. 'Harley Gale was a major force in pulling the idea together, but was no longer on the Board by the time the amalgamation happened. He did however, inspire others to pursue the positive aspects of the amalgamation. Stephen Janz was the driving force holding the AAaA Board together. Special mention to has to be given to Michael Porter, Phil Macqueen and Hoc Ku Huynh who fought hard on the AESO Board to complete the amalgamation. There were lots of people involved, but these people were the glue to the amalgamation. Later, in 1996 we merged with AASA; Brian Fischer was the key person during that time, a role that Doug Dickmann continued.

### A National Office

The AACMA National Office was established in West End, Brisbane in 1996 and a decade later the association invested in its own premises in Coorparoo – which will be a future asset for members.

Judy never thought she would be an employee for almost 20 years but the role kept evolving, the staff and structure kept evolving – and the challenges facing the profession (which later became great achievements) kept coming.

'The Board thought I was empire building when I asked for a third and then a fourth staff member,' Judy laughed. 'I wanted someone to do membership and someone to do admin. Now the national office staff complement isn't much more than what it was 10 years ago. It's an intense workplace. Some days it gets a little emotional. But every worker is dedicated and passionate about what they do.'



## Judy, the CEO

Judy has spent more than 17 years at the helm of the Association as CEO and has surprised herself on how long she stayed in the position she likens to as 'eventful, challenging, frustrating, and fulfilling'. But she cites the reason she has stayed this long is her passion and commitment.

'I have a passion for the profession and the role. However, one can't do the same thing forever. Initially I thought I'd stay a few years over. As it turned out, there was always one more challenge around the corner. Every time I tried to move on, another big challenge came up. There were the major health funds, GST-free status, then registration. Because of my personal background and interests, I've driven us to punch way above our weight, which may be quite difficult for many people I have worked with. The national office has had some fantastic staff, and our current cohort is wonderful. Our longest-serving staff members need special mention: Jazz Tyrril, now in her third stint with AACMA, Rebekah Davis who has been with AACMA over six years, and of course Nadya Urban who has been with AACMA for over 3.5 years.'

Judy's approach as CEO can be seen as hardheaded, yes she's a stickler for getting everything precise and right, and stands firm on the administration and policy approach in the office, but it's her passion for everything about the profession and association that we don't often see.

## Fond memories and greatest Association achievements

The Association moved from 37 members in 1979 when Judy joined as a practitioner member to more than 2100 members in 2013. 'We've moved from quacksville to mainstream health in under 30 years. I'm really happy. I don't claim credit for all these achievements but they occurred on my watch and that's what I'm proud of. Everything we've achieved for AACMA has been group work or collaboration with one or two really forceful personalities driving it, but it's all about cooperation. Every president that I've worked with has been fantastic and even when we've had disagreements, I have known they've all been people with passion and commitment with the best interests of the profession at heart. I think all the board and committee members and staff have all been invaluable contributors and deserve recognition.'

## The Paper Napkin Submission resulting in GST-free status

In the late 1990s, AACMA was instrumental in one of the profession's greatest achievements: GST-free status for

acupuncture and Chinese herbal medicine services. It's a feat where there were lots of contributors involved, but one that was ultimately brought over the line courtesy of the powerful 'paper napkin submission' led by Stephen Janz, AACMA's former president, Judy James and an AACMA-employed lobbyist.

'The lobbyist got us in the door, and we put the arguments forward. We lobbied the Greens, we lobbied Labor, we lobbied the Coalition, and we went up the ranks through all the relevant departments and we finally got to the minister's office who acknowledged that it was unfair that acupuncture had attracted the GST when provided by an acupuncturist, but a doctor or physio practising acupuncture didn't have the GST imposed. We knew not to draw on the "unfair card", rather make it about economics instead. So afterwards in the Parliament House cafeteria Stephen did a quick set of calculations on a cafe paper napkin, which formed our submission. He worked out that it only took one patient per month to move from an acupuncturist to each of the 1200 doctors then doing acupuncture for the projected GST revenue to be paid out in Medicare rebates. Back in the National Office, I put together a one-page submission and sent it off to the Minister's office. I know this was instrumental in the decision as they called me directly and said 'You've convinced us' – they were putting up acupuncture, Chinese herbal medicine and naturopathy as GST-free health services. And subsequently western herbalists were included as well. There were lots of factors, but the argument was won on economics not fairness. There was an economic benefit to the national budget for our services to be GST-free. We were also supported by the fact that our profession had similar characteristics in terms of qualifications, educational standards, complaints handling and professional recognition as to most registered health professions.'

Judy has observed that the benefits AACMA negotiates for our members eventually flow onto the profession as a whole and then to the natural therapies. Some of the other professions don't realise the hard work that has been invested in our achievements for which they have reaped the benefits.

## National Registration

Registration has been a goal of the profession for decades. 'After registration in Victoria was achieved, work commenced on the other States. First, the NSW government and

Parliament held a number of inquiries into the practice of TCM and complementary medicine, resulting in a decision to proceed with registration of the profession. Then the WA government which, following the outcome of a discussion/consultation paper on options for regulation of TCM, also agreed to proceed with registration. It was a lot of work,' Judy remembered. 'And then, when the issue of national registration emerged, all states decided to put any further plans to register the profession on hold, pending the outcome of the national process. However, if registration had not already been established in Victoria, national registration would have been out of our reach – and we would be in the same precarious position that the complementary/natural therapies are now facing. In the lead up to national registration in 2012 the AACMA membership staff and I undertook a phenomenal amount of work in researching and clarifying process and policy, supporting and educating members, which was essential to ensure as smooth a transition to the national scheme as possible.'

#### *AACMA's Annual Conferences*

Something that Judy is personally proud of achieving is AACMA's annual conferences. 'I looked at what other associations were doing well, and it was a sense of collegiality and professional identity that their annual conferences facilitated – and convinced the Board that an AACMA-hosted annual conference was important for professional development and bringing a sense of unity to this diverse profession. These annual conferences brought a sense of mutual respect and belonging together as a profession. We have grown from our meagre beginning of 80 delegates at our one-day symposium in 1999 to over 360 delegates over 2.5 days in 2012. AACMA is much more high profile and high energy than our previous symposium formats, to the point where AACMA is now the must-attend CPD event of the year'.

#### *Amalgamation*

The amalgamation of AAChA, AESO and AASA during 1995 and 1996 set the framework for the future. AACMA was no longer state based, or peripheral, we became the largest and most established national association. This was only achieved by the foresight, commitment, hard work and personal sacrifices of many who put the future of the profession above their personal self-interest.

#### *Australian Guidelines for TCM Education*

A significant project that Judy also initiated was nationally-agreed educational standards for TCM programs. With Judy as Project Manager, AACMA then commenced a national consultation process involving all identifiable TCM education providers and professional bodies as well as representation from four state higher education bodies. This project resulted in the Australian Guidelines for TCM Education. Kerry Watson (VU) and John McDonald (ACNM) were contracted to draft and review the main content of the Guidelines, with leading academics drafting the content of the Appendices to the Guidelines. The trigger for this project was the impending registration of the profession in Victoria. 'If the profession left it any longer, there would be no professional voice about education standards. We saw the need to provide consistent and nationally uniform statement on education standards. This project took three years. Even though some parts are a little outdated now, the core standards are still highly relevant,' Judy said.

#### *Infection Control Guidelines for Acupuncture*

In 1997, AACMA launched Australia's first comprehensive *Infection Control Guidelines for Acupuncture*. While today the guidelines are scheduled for review to align with the new CMBA standards, the guidelines at the time represented landmark standards in infection control for acupuncture.

#### *Life Member*

In 2013, Judy became the third person in the history of the association to be awarded with Life Membership, as a credit to her commitment to the Association. Judy now joins Maurice Mee Lee and Brian Bateman as Life Members. Both Maurice and Brian were founding members and first and second president of AACMA, custodians of first acupuncture college in Brisbane, and they're still going strong.

#### *Life after the National Office...*

What's next for Judy James? Time will tell, but if it's anything like her true nature – she will be following something she wholeheartedly believes in and is passionate about.

'I want to follow some other interests but I'll always be here to help the association if it needs it,' she said.

'Before I finish in this world, I also think I should get registered,' Judy smiled.





## *International Issues*

The importance of international relations to the global advancement of the Chinese medicine profession cannot be overestimated. We provide a short summary of AACMA's major international relations.

### **NZRA**

AACMA shares a long-term cooperative and supportive relationship with our New Zealand sister association, the New Zealand Register of Acupuncturists (NZRA). In May 2012, NZRA and AACMA signed a Memorandum of Understanding (MOU), outlining the formal terms of our cooperation.

### **WFAS**

AACMA is a foundation member of the World Federation of Acupuncture-Moxibustion Societies (WFAS). AACMA and AESO nominees have held all the elected Vice-President positions for Oceania-Australia since the inception of WFAS. AACMA President, Richard Li, holds the WFAS Vice-President position for Oceania-Australia and AACMA Vice-President; Wally Simpson holds an Executive Committee position on WFAS; and A/Prof Chris Zaslowski is also an Executive Committee member.

AACMA hosted WFAS the 6th World Conference on Acupuncture at the Gold Coast in October 2004 and the 8th World Conference on Acupuncture in Sydney in November 2013. WFAS is the only non-government organisation (NGO) in official relations with the World Health Organization (WHO) on acupuncture.

### **WFCMS**

AACMA is also a member of the World Federation of Chinese Medicine Societies (WFCMS). AACMA Treasurer, Hoc Ku Huynh, is a member of the Presidium of the Executive Committee of WFCMS; Former President James Flowers is Deputy Chair of the WFCMS Supervision Committee and AACMA Secretary Prof Hong Xu is a member of the WFCMS Executive Committee.

### **ISOM & ICOM**

AACMA is a member of the International Society of Oriental Medicine (ISOM). The major countries are South Korea, Japan and Taiwan. ISOM is primarily an academic society that hosts the International Congress of Oriental Medicine (ICOM) every two years.

### **TCM KONGRESS ROTHENBURG AND AGTCM**

In November 2012, AACMA signed a Memorandum of Understanding with the organisers of the Rothenburg TCM Kongress, the AGTCM. The Rothenburg Kongress is held in May each year, around the same time as the AACMA annual conference. Under the terms of the MOU, AACMA members are able to access the same rates as the AGTCM members (lowest possible rate) and AGTCM members are able to access member rates for the WFAS 2013 conference and AACMA annual conferences. This is a great opportunity for members to see the status of the profession internationally first hand and to learn from the leading clinicians in TCM in Europe.



## ISO

Australia is a participating country in the development of international standards in traditional Chinese medicine. This project, called ISO/TC249 TCM (Provisional) is being conducted under the auspices of the International Organization for Standardization. Standards Australia (SA) is Australia's designated standards body, and represents Australia's position on standards at the international level. In 2009, SA established a local committee (called HE031 TCM) to develop the Australian position and to represent the Australian view at meetings and consultations of ISO/TC249. A/Prof Chris Zaslowski, from UTS, is Chair of the Australian committee and AACMA Secretary Prof Hong Xu is AACMA nominee on the Australian committee.

AACMA had initially provided external project management for the Australian Committee since the Committee was established by Standards Australia. If AACMA had not agreed to provide this project management support, Australia would not have been able to participate in this important international project on standards for TCM. The decision by the AACMA Board to support the work of HE031 showed great leadership and vision, as it was not possible to know precisely the extent of the project at the beginning. Due to the exceptional work being done by HE031 Committee members at an international level, Standards Australia has funded and managed the committee since December 2012.



*Images: (Opposite page) Judy James with WFAS officials at the 7th General Assembly of WFAS and World Acupuncture Congress, in France; (This page, from top, clockwise) ISO/TC249 2011 meeting Beijing; Judy James & Richard Li with WFAS officials Wang Hongcai, Song Li, Professors Yang Jingsheng & Li Weiheng, and Yang Yuyang in Beijing 2013 to discuss the 2013 WFAS conference; Judy James & Wally Simpson with NZRA's Paddy McBride and Thomas Lin; Australian delegation ISO TC249 4th plenary in Durban, South Africa.*





# 1990s

In this decade, we refine our identity as a profession and make substantial progress toward mainstream acceptance. AACMA recognised the importance of unifying the profession while supporting its diversity. AACMA underwent significant change to achieve this goal and adapt to the changing demographics of the profession.

In 1995, AAcA and AESO successfully completed a long-overdue amalgamation, resulting in the vast majority of qualified acupuncturists being represented by one national body. In 1996, the merger with AASA was completed.

AACMA commenced accrediting practitioners in Chinese herbal medicine in 1996 and, in 1998, our name was changed from Australian Acupuncture Association Ltd (AAcA) to Australian Acupuncture and Chinese Medicine Association Ltd (AACMA). The members also agreed to operate organisationally under the AACMA identity while continuing to incorporate AESO, AASA, AAcA as part of the AACMA family.

More government-accredited education programs were approved under the Vocational Education and Training

system, initially for Diploma and later Advanced Diploma qualifications in acupuncture. Bachelor degree programs in acupuncture and Chinese medicine under the Higher Education system also commenced. See article on history of education on page 38.

A number of major projects commenced in the 1990s which were to have far-reaching effects on the profession. These were the National Competency Standard for Acupuncture, national standards for TCM education, statutory registration, and GST-free status for acupuncture and Chinese herbal medicine services.

The 90s saw statutory registration move to the front burner. Following intense lobbying by the profession, the NHMRC working party was extended to include members of our profession and its revised report recommended registration of the acupuncture profession.

Then, in the mid-1990s, the Victorian Minister for Health initiated an inquiry into the regulation of TCM practitioners and commissioned a report on the profession. The resulting report, *Towards a Safer Choice: the Practice*



## FOND MEMORY



*Zhejiang delegation of TCM Bureau, ACNM 2007 including (front, left): John McDonald, CEO Judy James, Prof Wang Kungen, Delphine Rouessart (ACNM); (back row) ACNM's Jiang Man and guests.*

of *Traditional Chinese Medicine in Australia* (Bensoussan and Myers, UWS:1996) still stands as one of the most significant reports in the history of TCM in this country.

The Victorian process dovetailed in with new criteria released by the Australian Health Ministers Advisory Council (AHMAC) to be used when assessing applications for the regulation of new occupations. AACMA coordinated the Joint Submission for Occupational Regulation of the TCM profession in collaboration with most TCM professional bodies and education providers.

In 1997, AHMAC agreed that Chinese medicine substantially met the six AHMAC criteria and that Victoria would take the lead in developing template legislation on TCM regulation. This was years before national registration was a realistic thought bubble.

The GST-free project is a story in itself dealt with elsewhere in this book on pages 28 and 36.

'It has been an absolute pleasure over these past few years as an AACMA member and I would just like to say a large congratulations on AACMA's 40th anniversary. As AACMA has lasted for 40 years already, I hope this association would prolong this great association for generations to come. All the best AACMA and best wishes.'

**Steven Wang (AACMA Member)**



*Welcome Banquet, Shanghai University TCM 2007- as part of AACMA's 2007 China delegation trip, AACMA representatives met with officials from the University of TCM.*

### NHMRC Report on Acupuncture 1990

Significant findings: acupuncture is a primary health care modality; acupuncturists are primary contact therapists; acupuncture education should be offered in the university sector; the registration of qualified traditional acupuncturists should be expedited.

'Congratulations to the AACMA for 40 years of supporting not only AACMA members but also the whole profession and thank you to those past & present who have freely given their time and input to bring us to this point in time. I'm very proud to be a member' **Walter Simpson (AACMA Vice President)**





## *Past President* **STEPHEN JANZ**

Queensland-based Stephen Janz headed the AACMA Board as President in the mid-90s, during the significant time of the amalgamation.

### **What year/s did you hold President position at AACMA?**

I was president for a brief, but intense, two year period. I was appointed Australian Acupuncture Association (AAcA – before the change to AACMA) president by the Board following the departure of the former president Harley Gale around November 1994. I was elected by the members in May 1995 as President of AAcA and Chair of AESO following our amalgamation. I retired from the presidency in December 1996 due to the commitments which go with a young family. Peter Aftanas assumed the presidency on my retirement.

Following retirement from the presidency I continued in a number of non-Board roles such as accreditation coordinator until 2001 and chair of the National Academic Standards Committee for TCM from 1998-2006. In 1999 I led the successful campaign to have GST removed from acupuncture. In 2005 I developed the association's Code of Conduct and Code of Ethics.

### **During your time as President, what were the big issues?**

To me the big issues were the funding basis for our services and moving into the mainstream. In the early 90s only a few minor health funds paid a benefit for acupuncture in Queensland, with HCF the major fund paying acupuncture benefits in NSW. The profession was represented by associations which had developed along alumni lines, with the Australian Acupuncture Association Ltd (now AACMA) mainly Queensland focused, and the Acupuncture Ethics and Standards Organisation (AESO) mainly NSW and Victoria focused. I chaired the health funds liaison

committee prior to my presidency and consistently lobbied MBF, the largest private health insurer in Australia. Around the same time we were also lobbying health ministers to try and achieve registration. I recall the Health Minister of the day explaining that we should avoid registration – he was an accountant and explained that accountants were better off without it and that we should pursue self-regulation as they had. Meanwhile the major health funds were saying that they would not consider a benefit unless we were registered or had one national body – they weren't interested in state-based associations.

The need to amalgamate the two main associations for the profession to move forward had been well recognised, and we were fortunate that the right people emerged at the right time. Harley Gale was the editor of the *Australian Journal of Acupuncture*, the chair of AESO and a member of AAcA and was keen to see amalgamation occur. The then AAcA president Phil Macqueen stood aside in favour of Harley who occupied the presidency of AAcA while chair of the separate AESO. Through this dual role the difficult process of amalgamation of these two groups with quite different cultures into what is now AACMA was ultimately achieved.

While there were a number of very sound reasons to pursue the amalgamation of AAcA and AESO, to me the main one was to have credible national representation and secure better health funding for our services. I couldn't see us being accepted as a mainstream health service or developing further as a profession without health fund recognition, and without amalgamation we just weren't going to get benefits from the major insurers. A little over 12 months after the eventual amalgamation of AAcA and AESO, MBF called me to tell me that they had approved acupuncture benefits. At the time this was the first and only natural health benefit that Australia's largest private health insurer paid. It became

a matter of time before other funds and other benefits followed, with Medibank Private coming on board after I had left the presidency. Following the amalgamation of AAoA and AESO we then amalgamated with the Acupuncture Association of South Australia, the major association in that state. This brought uniform health fund benefits to all of our members in SA as well as gave the association strong and credible presence across the country.

As a Board in the mid 90s we were well aware of the need to drive education standards, and at a time when Diplomas had only just become government accredited due to reforms in the vocational training sector we were aware that the entry level for the profession should be a degree. We were fortunate to have a board member, Clem West, with experience in competency standards and the vocational sector. With Clem's insight getting us on the right track the board initiated and managed a cross-association National Competency Standard for Acupuncture project which identified that the necessary qualification to enter the profession was a degree. This project took several years to bring to completion. While a competency standard for acupuncture was controversial at the time, it was useful to support the transition from the vocational to higher education sector. It also documented for the first time the diversity of practice within the acupuncture profession in Australia and the document serves an important historical role even today.

During my time as a Board Member and President, the board members dealt with correspondence, submissions, lobbying, member enquiries and member support themselves, assisted by a part-time secretarial service. To be a board member was a purely voluntary role, with our public face depending on which board member was secretary and answered the correspondence or who was available to attend a meeting. The biggest organisational change came with leasing

premises, appointing an executive officer and secretarial staff. These measures led to a more consistent and professional approach to issues and led to a gradual shift in some of the roles of Board members and better engagement with professional issues. Once again, without amalgamation we would not have had the financial resources to make this transition to a more professional organisation.

### What's your fondest memory during your time as President?

It was just amazing to work with a group of dedicated volunteers with a vision for the profession. These were not easy times and the amalgamation of AESO and AAoA which occurred leading up to my presidency did not occur without considerable conflict and angst. History shows us that the goal was worth achieving though and it is great to see many of the participants from the old AESO and AAoA boards still in practice and some still active in the association today.

### Are you still working within the profession, and if so, in what capacity?

I am in full-time clinical practice as the clinic director of a multidisciplinary natural health clinic. I am also currently the Practitioner member for Queensland to the inaugural Chinese Medicine Board of Australia, and chair of the CMBA's Policy, Codes and Guidelines committee.

### Chinese medicine has come a long way in Australia since 1973, what's your vision for the profession over the next 40 years?

My vision has always been for the mainstreaming of Chinese medicine into our health system. We have come a long way





but we are not there yet. I think we are at another turning point. Registration will hopefully give the public the confidence that we are an accountable profession, registration is not designed to advance the needs of the profession though. Now as much as ever the role of the professional association is critical to advance our professional roles and secure equitable funding for the future. No other body or individual can do this. Imitation may be the greatest form of flattery and suddenly everyone seems to want to practise acupuncture (they just don't want to become qualified). Acupuncturists need to ensure that 20th century health funding models do not divert people away from accessing the best care available from acupuncture and Chinese herbal medicine practitioners

in the 21st century. If we are going to secure our place as a valued member of the Australian health system we need to understand that we are health professionals first and Chinese medicine practitioners second. We need to generate more research ourselves using a suitable model. We need to incorporate more outcome measures in clinical practice and to become comfortable 'translating' Chinese medical theory into terms that allow good inter-professional communication. Research, health funding, outcome measures and effective inter-professional communication look like the key to securing our place in the mainstream. Hopefully it won't take another 40 years but that will be up to the new emerging professional leadership.

## THE PAPER NAPKIN SUBMISSION: GST STATUS

In the late 90s, AACMA President at the time Stephen Janz and CEO Judy James led the AACMA lobby for removing a GST on acupuncture and Chinese herbal medicine services.

At the time, the future looked glum as acupuncture and Chinese medicine services were subject to a GST if supplied by a qualified practitioner, but GST-free if supplied by a registered health practitioner.

In an earlier *Jing-Luo* interview, Stephen reminisced about this remarkable feat: 'What finally got us over the line, I believe, was the economic argument. We were able to demonstrate that it would cost more in Medicare outgoings than they could ever collect in GST income if even only a very marginal number of clients moved from qualified TCM practitioners to medical doctors for the provision of acupuncture services', he said. 'What I learnt most from the process was – don't sit back and let things happen. Be proactive, get involved, and don't give up on things if you first don't succeed.'

Judy James supports this sentiment, saying 'we had to play hard ball'. 'There were lots of contributors, but the argument was won on economics not fairness. There was an economic benefit in us not being GST-free,' she said. To read Judy's account of this proud achievement, please see page 28.





## *Past President* **PETER AFTANAS**

Peter started on the Board as member in the 90s and moved to various Board positions. He eventually became Secretary then President from 1995 to 1997.

### *During your time as President, what were the big issues?*

The registration of traditional Chinese medicine was the issue of the time. The Association worked tirelessly on this project. I think the major achievements of that time was gaining general agreement from the profession that this was the correct direction for us to take.

### *What's your fondest memory during your time as President?*

I have my practice in Sydney and would talk to the office multiple times per day. Most of the 'hard copy' communication at the time was by fax. Many times I would walk into the clinic in the morning to find 5 to 10 metres of faxes for me to read and respond to.

### *Are you still working within the profession, and if so, in what capacity?*

Yes I still work in the TCM profession. I have a full time practice in Sydney's Eastern Suburbs. I have a general practice with my main area of special interest is in Digestive Health. I also still help the Association in various tasks/issues and Committee work from time to time.

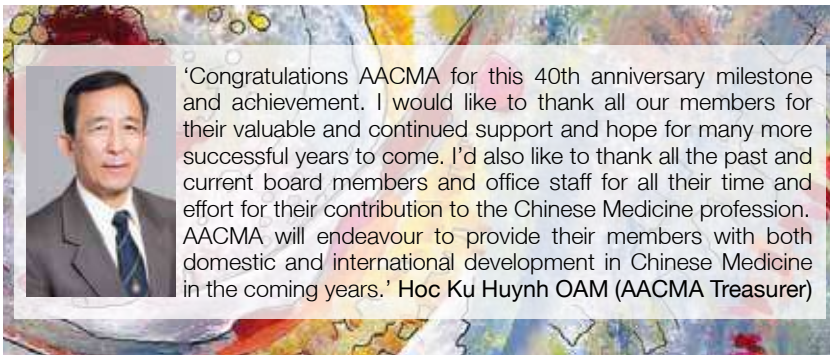
### *Chinese medicine has come a long way in Australia since 1973, what's your vision for the profession over the next 40 years?*

I entered my TCM studies straight out of high school in 1978. Mostly everyone in my TCM class at that time was in their late twenties or thirties and I was still a teenager. Today this is now the norm rather than the exception.

I think that now as TCM is slowly maturing in the medical landscape we need to start to showcase TCM's scope and abilities. I think we need to demonstrate to the public as well as the medical professions the true scope and depth that TCM can achieve in treatment and health outcomes.

### *Is there anything else you wish to share?*

I think now that we are here it means nothing if we do not promote and continue to develop the profession. We need to be involved in every aspect of medical development and planning. We need to be a player at the table where the decisions are made. I think now is the time when we need to find the best amongst us and help them to achieve positions where they start to move our profession in the correct direction.



## **FEATURED FELLOW: MIN YING WU**

Min Ying Wu joined AACMA in 1989 and is a proud Fellow Member. 'I'm grateful for being supported by the Association for the past 24 years,' she said. Min Ying attributes AACMA for growing the public recognition of Chinese medicine. Her predictions for the next 40 years are a rapidly growing profession that 'cannot be ignored by the AMA and public'.



## TCM EDUCATION IN AUSTRALIA

*A snapshot of history – setting the lineage record straight*

### Acupuncture Colleges (Australia) Pty Ltd (ACA)

Chinese medicine education in Australia had its very humble beginnings in 1969 when Russell Jewell taught the first training program in acupuncture in Sydney. He then went on to form **Acupuncture Colleges (Australia) Pty Ltd (ACA)** which spearheaded the development of acupuncture education in Australia. In the early years, Prof. Lok Yee Kung, of the Hong Kong College of Chinese Acupuncture oversaw Sydney's ACA program and issued the initial diplomas.

The late and indomitable Carole Rogers was at the helm of ACA in Sydney when it achieved the nation's first accredited Diploma of Acupuncture in 1986 and the first accredited bachelor degree in acupuncture in 1991. In 1994, ACA moved into the **University of Technology, Sydney (UTS)**, becoming the **UTS College of Acupuncture** and later the **UTS College of TCM**. UTS now offers a four year full-time double-modality bachelor degree program in Chinese medicine.

From 1974, branches of ACA were established in Adelaide, Melbourne, Canberra and Brisbane. In 1975, links were established with the late Dr Dick van Buren of the International College of Oriental Medicine (ICOM) in London and most ACA graduates undertook the ICOM examination in their final year.

The Melbourne campus of ACA, established in 1974 became the **Australian Acupuncture College (ACA)**. Under the leadership of Kerry Watson, it moved into the **Victoria University (VU)** in 1992, offering the nation's first university-

based bachelor degree in acupuncture. VU also developed a bachelor degree program in Chinese herbal medicine and later a combined bachelor degree in acupuncture and Chinese herbs. The VU Chinese medicine program was discontinued and converted to teach-out in 2008 for continuing students.

Life members Maurice Mee Lee and Brian Bateman were the original trustees of the Brisbane campus of ACA when its first acupuncture program commenced in 1975. Then, in 1978, the college became independent of ACA and changed its name to **Brisbane College of Traditional Acupuncture (BCTA)** which expanded its scope to include Chinese herbal medicine and natural therapies programs in the 1980s, before closing in 1990.

### Endeavour College of Natural Health (ECNH)

**Endeavour College of Natural Health (ECNH)** was established in 1980 by Peter Sherwood and Chiem Trinh as **Acupuncture Colleges Australia (Brisbane)**, no relation to ACA Sydney, later becoming the **Australian College of Natural Medicine (ACNM)**. It took on its current name after a change of ownership. After expanding into the natural therapies, the college obtained vocational accreditation of these programs at diploma and advanced diploma and then in 1998 achieved Australia's second accredited non-university bachelor degree in acupuncture. The College has campuses in all major States and offers a four-year full-time accredited bachelor degree in acupuncture.

### NSW College of Natural Therapies (NSWCNT)

The TCM program at the **NSW College of Natural Therapies** commenced in 1980 and ran a four year full-time TCM program until 1987 when the college closed down.

A number of other colleges were established in its wake, including the **Sydney College of TCM**, which later became the **Sydney Institute of TCM (SITCM)**. In 2012, the SITCM obtained accreditation for the profession's latest non-university degree and now offers a four-year full-time bachelor degree in TCM.

Historical note: the NSW College of Osteopathy and Natural Therapies ran a one-off Diploma of Oriental Medicine from 1978–1980.

### RMIT University

**RMIT University** established its Chinese Medicine program in 1994, developing the profession's third university-based bachelor degree and the first dual-modality degree in



Chinese medicine. It currently offers a five-year full-time double degree in Chinese medicine and two three-year part-time Masters by coursework in acupuncture and Chinese herbal medicine respectively.

RMIT is also host to the Chinese Medicine Confucius Institute and the WHO Collaborating Centre for Traditional Medicine.

### University of Western Sydney (UWS)

UWS commenced Chinese medicine education in the late 1990s with a four-year full-time dual modality bachelor degree program in Chinese medicine. Its current primary-qualifying program in Chinese medicine is a four year full-time combined Bachelor of Health Sciences/Master of TCM program. UWS is also host to CompleMED and the National Institute of Complementary Medicine.

### Southern School of Natural Therapies

The Southern School of Natural Therapies (SSNT) also commenced its Chinese medicine program in the 1990s initially with vocational training. SSNT later obtained the profession's third non-university accredited bachelor degree program and the first (non-university) accredited dual modality Chinese medicine degree. It currently offers a four year full-time bachelor degree program in Chinese medicine.

**Research Programs:** PhD Chinese Medicine research programs have been offered for many years at some Australian universities including, RMIT University, UTS, UWS and Victoria University.

### Other programs no longer running

This potted history of TCM education in Australia cannot be closed without noting some other program and institutions that are no longer with us. We apologise for any omissions or errors.

**Academy of TCM Australia:** The Academy was established in Melbourne by Prof Wong Lun and provided a range of vocational Chinese medicine programs until it closed in the late 1990s.

**Academy of Natural Therapies (Gold Coast):** The Academy was established in the 1980s and ran vocational programs in acupuncture and TCM. It was later incorporated into the Gold Coast Institute of TAFE where it operated for a few years before the program was discontinued. GCIT also ran a bachelor degree in acupuncture upgrade program in collaboration with VU.

**Perth Academy of Natural Therapies (PANT):** PANT delivered vocational education in acupuncture and Chinese medicine from the 1990s until the institution closed in the next decade.

**Australian Institute of Applied Sciences (AIAS):** AIAS offered vocational training in acupuncture, including distance education, from the 1990s until the program converted to teach-out in 2012/13.

### *Past President*

#### ROBERT VANDEVELDE



Robert Vandeveld was President of AACMA from 1998–1999 and remembers that occupational regulation was the major point on the agenda after the meeting of the health ministers and the proposal for occupational regulation of TCM by the Victorian Minister for Health, Robert Knowles.

AACMA also hosted the meetings of the national academic standards committee. Two other pressing issues at the time was getting rid of GST on Acupuncture/TCM fees and of course, the name change/amalgamation from AAcA to AACMA.

When asked what his fondest memory was during his time as President, Robert recalled Judy James's incredible drive and tenaciousness. 'It led to some confrontations, but also some wonderful moments,' Robert said. It was also the time that James Flowers and Richard Li came on the Board and would later become Presidents of AACMA.

Robert resides and practises in Spain and still conducts the occasional lecture. He's in his 32nd year of practice, and is still learning and enjoying the world of Chinese medicine enormously.

Robert hopes that one day, over the next 40 years to come, that Chinese medicine will be regulated worldwide.

A photograph showing a woman in a white shirt, likely an acupuncturist, performing acupuncture on a patient's back. The patient's hair is tied up, and several red acupuncture needles are visible on their back. The background is a light-colored wall with a framed abstract artwork.

# 2000-2013

## 2000s onward – Maturing into the mainstream

It is in the noughties and beyond that we reap the benefits of our hard work over previous decades:

- GST-free status obtained for acupuncture and Chinese herbal medicine services (2000)
- Statutory registration for Chinese medicine practitioners commences in Victoria (2001)
- *Australian Guidelines for Traditional Chinese Medicine Education* published (2001)
- Awarded \$100,000 Federal Government Funding to assist acupuncture and Chinese herbal medicine practitioners to retain their GST-free status (2002)
- AACMA receives its Tax Ruling that the acupuncture and Chinese herbal medicine services of AACMA members are GST-free (2003)
- AACMA organises the World Federation of Acupuncture-Moxibustion Societies 6th World Conference on Acupuncture at the Gold Coast (2004)
- AACMA extends its annual conference from a two day national event to a three day regional conference (2005)
- The NSW Health Minister agrees in principle to register the TCM profession (2006)
- The WA government agrees to register the Chinese medicine profession (2006)
- The first issue of the *Australian Journal of Acupuncture and Chinese Medicine* is published (2006)
- AACMA purchases its first office premises, in Coorparoo, Brisbane (2007)
- 2008 – Endangered Species Certification Scheme launched
- Decision by Health Ministers to include the Chinese medicine profession in the National Registration and Accreditation Scheme for the Health Professions (2009)
- Australia becomes a participating member of the project to develop international standards for TCM under the auspices of the International Organization for Standardization; AACMA Board agrees to provide the external project manager to support the Australian Committee established under Standards Australia (2009)



'The state of our profession and our craft has grown beyond recognition in the past 40 years, and AACMA has been integral in that growth and development. Its members (past and present), practitioners from other associations, government legislation, and any person who has used "TCM" in Australia have all been influenced in some way by the work done by AACMA – it is something to be extremely proud of. Many happy returns AACMA, and may the future be built on the foundation of what we have achieved.'

**Matt O'Hara (Board Member)**



'As member of AACMA, we have witnessed the development of acupuncture & TCM in Australia and AACMA has grown to become a leading organisation for TCM practitioner in this country, we are proud of this achievement and now look forward to a bright & prosperous future.'

**Xiaodong Yu (AACMA Board Member)**

- AACMA publishes *Infection Control Management Plan: Template for Queensland Acupuncture Practices*, endorsed by the Queensland Health Department (2011)
- Inaugural Chinese Medicine Board of Australia appointed (2011)
- National registration of the Chinese medicine profession commences (2012)
- AACMA releases the overview of its new strategic plan (2012)
- Standards Australia agrees to take over and fund the management of the Australian Committee to develop international TCM standards under ISO (2012)
- AACMA signs Memoranda of Understanding with the New Zealand Register of Acupuncturists and the Network of Researchers in the Public Health of Complementary and Alternative Medicine (2012)
- AACMA and AGTCM/TCM Kongress Rothenberg sign a Memorandum of Understanding (2013)
- AACMA organises the World Federation of Acupuncture-Moxibustion Societies 8th World Conference on Acupuncture in Sydney (2013)

2000-13



*AACMA Board & CEO 2002/03 (Front, left): John Deare, Ke Li, James Flowers, Judy James (CEO), Michael Porter, (Back, left) Yifan Yang, Ray Martin (Operations Mgr), Adrian Button, Jacqueline Corner, Hoc Ku Huynh.*



*AACMA Board & CEO 2003/04 (Front, left): Ray Martin (Operations Mgr), Ke Li, James Flowers, Judy James (CEO); (Back, left) John Deare, Marina Christov, Hoc Ku Huynh, Jacqueline Corner, Wally Simpson.*



*AACMA Education Council 2003 (Front, left): Wendy Morrow, Congxing Yang, John McDonald, James Flowers, Michael Weir, (Back, left) Xiaoshu Zhu (Sue), Liming (Henry) Liang, Chris Zaslawski, Lisa Yangyan Liu, Hong Xu.*



## AACMA RESEARCH GRANTS

AACMA has contributed \$100,000 to members in support of academic and clinical research in Chinese medicine. This was made up of grants totalling \$25,000 each year from 2005 – 2008.

### 2008

**Yuling Chen et al (University of New South Wales): \$2500**

*Investigation of the Anticancer Effects and the Mechanism of Actions of Extracts from Chinese Herbal Medicine Formulae on Proliferation of Human Ovarian Cancer Cell Lines*

**Suzanne Grant and Emma Scully (University of Western Sydney): \$2000**

*Traditional Chinese Medicine Diagnosis for Pre-Diabetes and Development of a Chinese Medicine Assessment Measure*

**Christopher McKeon et al (Mater Adult Hospital): \$2500**

*A Randomised Trial Of Electro-Acupuncture Versus Sham Acupuncture and No Acupuncture for the Control of Acute and Delayed Chemotherapy Induced Nausea and Vomiting*

**Michael Popplewell, Chris Zaslowski et al (University of Technology, Sydney): \$1000**

*Collection of data from a TCM questionnaire, practitioners and MEDS device: a pilot trial*

**Caroline Smith et al University of Adelaide and REPROMED): \$5000**

*The effect of acupuncture on ovarian blood flow and follicular health among 'IVF poor responders': a pilot study*

**Mark W Strudwick (Wesley Hospital): \$3000**

*Brain mapping of clinical acupuncture effects with high field functional MRI (fMRI)*

**Kirk Wilson et al (University of Technology, Sydney): Award: \$1500**

*Acupuncture and major depressive disorder: is pattern differentiation necessary?*

**Chris Zaslowski et al (University of Technology, Sydney): \$2500**

*The effect of acupuncture compared to usual care on stopping smoking in adults: a single-blind, randomised, controlled study*

**Claire Shuiqing Zhang et al (RMIT): \$2000**

*Ear Acupressure for Allergic Rhinitis: A Randomised, Single-Blinded, Sham Controlled Clinical Trial*

**Zhen Zheng, Charlie Changli Xue et al (RMIT): \$3000**

*Combined therapy of electroacupuncture and cognitive behavioural therapy for tension type headache: a randomised, controlled pilot trial*

### 2007

**George Lenon (RMIT): \$1,500**

*Efficacy and safety of a Chinese herbal medicine formula in the management of simple obesity: A randomised controlled trial*

**Charlie Xue (RMIT): \$2,000**

*Workforce analysis of the Chinese medicine profession in Victoria, Australia*

**Zhen Zheng (RMIT): \$1,500**

*The Effects of Acupuncture on Hyperalgesia in Healthy Humans: Implications for the Use of Invasive-Sham Acupuncture in Clinical Trials for Pain Workforce analysis of the Chinese medicine profession in Victoria, Australia*

**Caroline Smith (University of Adelaide) \$4,915**

*Understanding women's views towards the use of acupuncture and Chinese herbal medicine for women undergoing in vitro fertilisation (IVF), or natural fertility treatment: a qualitative study*

**Byeong-Sang Oh (University of Sydney): (\$2,500**

*Mind-body medicine: Integration of Medical Qigong with Western medicine can enhance the quality of life of cancer patients and reduce the side effects of standard medical treatment*

**Yuling Chen (University of Sydney): \$2,500**

*The Study of Anticancer and Immunomodulatory Activities of Chinese Herbal Medicines towards Gynaecological Cancer*

**Christine Berle (University of Technology, Sydney): \$2,500**

*A Controlled Trial of Acupuncture for the Treatment for people who are Hepatitis C antibody positive: A Pilot Study*

**Dr Sean Walsh (University of Technology, Sydney): (\$2,500)**

*Referral Systems and the Chinese Medicine Profession (collaboration with AACMA)*

**Suzanne Grant (University of Western Sydney): \$5,000**

*Post-graduate scholarship; \$5000 per year x 3 yrs (2005-07)*

### 2006

**Xiao Shu Zhu (CMCRC, Liverpool Hospital, Sydney): \$4,500**

*Chinese herbal medicine in the management of primary dysmenorrhoea*

**RMIT University (institutional application): \$5,000**

*The effect of acupuncture on temporal summation of pain in healthy humans: a randomised, single-blind, controlled-study*

**Caroline Smith (The University of Adelaide): \$5,000**

*Does acupuncture improve the endometrium for women undergoing a embryo transfer: a pilot randomised controlled trial*

**Bobbie Sodarak (UTS Sydney): \$1,900**

*Retrospective Joint Cost Analysis of Acupuncture Treatment Claims involved in Workers Compensation Claims*

**Christine Berle (UTS, Sydney): \$3,100**

*A Controlled Trial of Acupuncture for the Treatment for people who are Hepatitis C antibody positive: A Pilot Study' [this is in addition to the \$2,500 awarded in 2005]*

**Suzanne Grant (University of Western Sydney): \$5,000**

*Post-grad scholarship; \$5000 per year x 3 yrs (2005-2007)*

### 2005

**University of Technology Sydney (institutional application): \$2,500**

*Research on Practitioner Referrals (joint project with AACMA)*

**Mark Strudwick (University of Queensland): \$5,000**

*To demonstrate acupuncture effects in the central nervous system using resonance magnetic technology Acupuncture effects in the CNS using fMRI*

**Charlie Xue (RMIT): \$2,500**

*A national population-based study of complementary and alternative medicine usage in Australia*

**Damien Ryan (Victoria University): \$5,000**

*The Effectiveness of Acupuncture in Drug and Alcohol Withdrawal: Western Hospital Footscray Withdrawal Unit*

**Christine Berle (University of Technology Sydney): \$2,500**

*A Controlled Trial of Acupuncture for the Treatment for people who are Hepatitis C antibody positive: A Pilot Study*

**Run Xiang Jessica Guo (RMIT): \$1,250**

*The effect of electro-acupuncture on reducing opioid consumption in patients with chronic pain*

**Yanyi Wang (RMIT): \$1,250**

*Evaluation of effectiveness and safety of acupuncture in the treatment of migraine: a randomised, single blind and sham controlled trial*

**Suzanne Grant (University of Western Sydney): \$5,000**

*Post-grad scholarship; \$5000 per year x 3 yrs (2005-2007)*

Unfortunately, budgetary issues made it impossible to continue these grants after 2008; however the Board is considering the possibility of research grants being reinstated in the future.

Did You Know: AACMA research grants have enabled researchers to generate essential data for four successful NHMRC project grants on acupuncture. NHMRC grants are the most prestigious medical research grants in Australia.



## National Registration

National registration is undeniably the largest accomplishment the Chinese medicine profession has achieved in Australia. It took hard work for Chinese medicine to be registered in Victoria in 2001, and even harder work for registration to spread nationally in 2012. Thanks to persistence and lobbying, AACMA is proud of this feat and what it means for our practitioners and the future of the profession. We also acknowledge that this big step forward is a reflection of the changing face of complementary medicine in the mainstream system.

Below is an excerpt by CEO Judy James and then-President Ian Murray published in the *Australian Journal of Acupuncture and Chinese Medicine* in 2011, following the introduction of national registration.

‘Undoubtedly, the commencement of national registration in 2012 represents a watershed in the development of the profession in Australia. This has been achieved through the hard work and dedication of many individuals and organisations over the past three decades, although it only came to fruition in recent years.

In our view, the key positives for national registration clearly outweigh the negatives. National registration will, for the first time, enable minimum national standards of Chinese medicine education to be legally enforceable. This creates the basis for a minimum national standard for entry in the profession and means that, in the future, unqualified practitioners will be prevented from commencing acupuncture and/or Chinese herbal medicine practise in Australia.

Public safety is enhanced through enforceable practice standards and guidelines. Through independent complaints processes, it is expected that unethical and unsafe practitioners would be progressively weeded out of the profession or placed in programs to improve their performance to an acceptable level. This can only benefit the profession through increased public confidence in a profession that adheres to high standards of ethics and practice.’

*‘The primary objective of the national scheme is the same as that for all the previous state-based systems – public safety. The national scheme has additional benefits though in that it will also enable practitioners to move around the country easily, reduce red tape, provide greater safeguards for the public and promote a more flexible, responsive and sustainable health workforce.’* Debra Gillick, CMBA Executive Officer (AJACM 2011 Vol 6 Iss 2)

*‘The AACMA is the peak national professional body whose purpose is to protect, develop, represent and promote the profession and to provide services to its members. The profession will continue to need a strong and viable national association to provide leadership and representation, to lobby for appropriate standards of education and practice, and to do what is necessary to protect its interests.’* Judy James & Ian Murray (AJACM 2011 Vol 6 Iss 2)



## *Past President* **JAMES FLOWERS**

James Flowers, AACMA President from 2000 until 2009, reminisces about the highlights of the 2000s where National Registration was a hot topic, and how his time on the Board was one of his most treasured experiences.

### **During your time as President (2000–2009), what were the big issues?**

During the 2000s much of our work focused on the path towards the goal of registration. Coupled with that, much of our work focused on wrestling with the issues of standards in education and clinical practice. I think that other contributors to this volume will discuss registration so I would like to draw attention to more intangible issues in building the Association. In 2000, AACMA's claim to represent the majority of the profession was not unchallenged. A number of groups aimed to see the demise or at least the neutralisation of AACMA. The profession could easily have gone further down the path of division into racial groups. Some prominent leaders of ethnic Chinese groups in Australia referred to AACMA as the Westerner's association in a disparaging manner. That was how AACMA was depicted in some Chinese-language media of the early 2000s. In response, we aimed to be as inclusive and pluralistic as possible. I think that our profession in Australia became much more united and definitely less fractious than our colleagues in the UK and the US. Our goals centred on building a solid organisation based on inclusiveness, while at the same time insisting on professional standards in the field.

Turning to more concrete manifestations of our rapid growth in the 2000s, on the subject of AACMA being a body akin to a large family, although a fraught decision, the move to buying our own offices was an important step. From a small rented

office in 2006, in 2007 we moved to purchase a premises worthy of a professional body. Not only was this a boost to the identity of our profession but also a solid physical base.

### **What's your fondest memory during your time as President?**

It is very hard to choose, as I have so many fond memories. My happiest times were always when I was able to get together with my colleagues in AACMA. Meeting with colleagues was always refreshing after tiring days in clinic. Being quite introverted, I may not have said much, but being able to meet so many of my colleagues was the one joy that kept me going despite the gruelling and unending mundane tasks that came across our desk. So if I had to choose one memory, it would be WFAS 2004 in the Gold Coast. I believe it was the largest gathering in Australia of so many colleagues in one place. I was thrilled when I saw the hundreds of people filling the main auditorium on the first day and felt grateful that so many colleagues had turned out to support the profession. Added to the delight was the large attendance of international colleagues from across the globe. I believe this gathering enabled many connections and friendships between Australian practitioners and the global community of practitioners. Having said that, it does not mean I only remember the big-ticket events. In essence, I most enjoyed one-to-one contact with colleagues in the association.

### **Are you still working within the profession?**

I say without irony that one of the saddest decisions I have ever made was to step down as President of AACMA in 2009. Again without irony, my work in AACMA taught me to love Chinese medicine more deeply as time went on. I was lucky enough to meet and work with many great colleagues,





*(From left) James Flowers addressing the WFAS 2004 audience; Ke Li, She Jing (President of WFCMS) and James at WFCMS 2004; James with Mayor of Melbourne, John So, during AACMAC Melbourne 2005; Judy James and James during WFAS Strasbourg 2009.*

both within the AACMA organisation and internationally. Although I am on a temporary break from clinical work I am very much involved in research. I am working on the history of medicine in China and Korea while doing a PhD at Johns Hopkins University, USA. My personal goals are spurred by a love of learning in general and a deep love for Chinese medicine. Not taking for granted my fortunate opportunity to develop my research skills; I am obligated to give back to the profession to the best of my ability. I hope to make a contribution in understanding Chinese medicine, and, together with my colleagues in Australia and worldwide, in pushing our field further to the forefront of global healthcare. In addition, I am Secretary-General of the International Association for the Study of Traditional Asian Medicine. This is an international organisation in the field of Asian medicine embracing both academics and practitioners.

### **Chinese medicine has come a long way in Australia since 1973, what's your vision for the profession over the next 40 years?**

Without compromising our principles or surrendering to the biomedical profession we have a great opportunity to establish ourselves firmly within mainstream medicine. To do this we need to let go of any notions of victim mentality or any feeling that we are being marginalised. Chinese medicine is new in a country like Australia and has made remarkable and astonishing inroads into medical care in the community. While not a cause for complacency, this is cause for celebration.

Although many of us came to Chinese medicine through a love of older medical literature and a notion of being aloof from the world of hierarchy, I believe we have no other choice than to be

ruthlessly professional if we are to stake our claim to legitimacy, not just in regards to the state but most importantly in the eyes of the public. By professionalism I do not mean commercialism, but rather the highest standards of clinical skills based on rigorous and extensive educational programmes. Most importantly, if we can, as a community of clinical practitioners, maintain the highest levels of ethics and honesty in practice, the community will adjudge our worthiness as mainstream healthcare professionals. In that sense, we should all be there for each other, and not compete with each other for personal gain. If the profession can pull together, as a family or at least as a body of colleagues, the potential for what we can do is limitless. The coming years will be crucial in this quest.

As biomedicine moves rapidly away from reductionism and towards individualised medicine in which every patient is distinctly unique, the door will open for us to make a greater contribution. Ironically, while bastion institutions of western biomedicine, with Johns Hopkins as the foremost example, are pulling irrevocably away from a standardised approach to treating patients, some state-driven forces, especially in China, believe they can standardise Chinese medicine as a whole package. While state actors keep themselves busy in trying to force standardisation of a whole range of areas of herbs and acupuncture, clinical practice will continue to be pluralistic and changing. Practice always changes. The history of medicine shows that change over time enabled innovation and diversity. For example, at each stage in history, doctors such as Zhu Danxi (1281–1358), Zhang Jiebin (1563–1640) and Ye Tianshi (1667–1746) introduced new controversial ideas that needed to be defended and argued for. These doctors attempted to introduce new ideas overturning old practices. I am not arguing that we need to

*Past President*  
**JAMES FLOWERS**

rely on great individuals to innovate medical ideas and practice, but I am saying that these doctors are representative examples of the many doctors arguing their corner.

I don't know how Chinese medicine will change but I am sure that it will. In thinking about change we cannot avoid the issue of scientific biomedicine. Chinese medicine practitioners hold a wide range of views on the issue of western biomedicine. Meanwhile, individualised medicine is the new mantra of biomedical training in the top-tier medical schools in the US. This is a big push back against reductionism and one-size-fits-all medical treatment. I argue, therefore, that actors in the Chinese medicine field who push for old-fashioned scientific validation need to reassess their mode of thinking. Biomedicine is changing. Randomised controlled trials have their place but I argue that they cannot form our major path to validation. I am not arguing that people should not do trials but that we should be careful in placing our hopes in just this one area. Rather the main driving force in the global proliferation of Chinese medicine has been and will continue to be social change. This involves engagement in the lives of people at all levels of society. Popular demand remains an irresistible force.

**Anything else you'd like to share?**

On a personal note, I would like to sincerely thank all those colleagues who supported me during my time in my Chinese Medicine journey in Australia and particularly in AACMA. I am indebted to many people, too many to name. I was lucky enough to have the opportunity to be involved with so many colleagues in work relationships and in friendship. I enjoyed the support of so many people. For that, I am sincerely grateful. Even though I am not in Australia, I keep my precious memories, which convince me that our Chinese Medicine family is valuable and will continue to grow and prosper. I wish you all the best.



*Conference Memories...*  
**WFAS 2004 - GOLD COAST**

In 2004, AACMA proudly organised WFAS 2004 Gold Coast, which represented a turning point in the development of the profession in Australia. The conference was co-sponsored by the World Health Organization (WHO) and the World Federation of Acupuncture-Moxibustion Societies (WFAS). With over 765 delegates at the conference, and over 450 at the conference Gala Dinner, WFAS 2004 was the largest gathering of acupuncture and Chinese medicine practitioners in the profession's history in Australia, and the largest international gathering of the profession outside of its East Asian homelands. As a profession, we can surely claim to have come of age in Australia.

The purpose of the WFAS 2004 conference was academic exchange and building and strengthening networks of practitioners worldwide. Friendships were made and networks were strengthened. We heard many papers and shared many experiences.

James Flowers, supremely sums up just how pivotal the conference was for the profession, and Australia, during this time. In the December 2004 edition of the *Jing-Luo*, he writes: 'Writing about it seems almost unfair. To capture the mood and the feeling at the Gold Coast Convention & Exhibition Centre over several days in late October 2004 at the WFAS Conference renders one inadequate in fairly reporting it. The feeling I had when I saw crowds of members who had come from around the country, let alone fellow practitioners from all corners of the globe, made me feel incredibly humbled. I had never seen so many of us gathered in one place. I was thrilled to see so many of our practitioners there giving their support. Without succumbing to hubris, let me declare it a success. As Australians, we can be proud. This was our occasion, your occasion. Our team stepped up to the crease and performed with dignity, enthusiasm and goodwill.'



## WFAS GOLD COAST 2004: AN OPENING CEREMONY TO REMEMBER!

WFAS 2004 was opened in spectacular fashion, with an exciting lion dance and a sensational performance by local indigenous dance troupe, Murri Dancers. To bring Chinese flavour, Liu Xin from the University of Queensland performed a graceful Taiji performance, and it was particularly moving that our AACMA Secretary at the time, Wally Simpson, personally put together an impressive display of bagua style martial arts.



*WFAS Gold Coast 2004: AACMA Board with members of the WFAS Executive Shen Zhixiang, Deng Liangyue, Wally Simpson, Li Zhenji, Richard Li, James Flowers, John Deare, Ke Li, Seung-hoon Choi (WHO), Wang Xuetai (now deceased), Wade James, Li Weiheng, Liu Baoyan, Yifan Yang, Hoc Ku Huynh.*



*Opening Ceremony (left), and the Exhibition in full swing (right).*



*WFAS Officials and AACMA representatives singing Auld Lang Syne during the sentimental Closing Ceremony.*





## OUR CODE OF ETHICS

In 1977 AACMA drafted its first Code of Ethics, which later underwent several amendments to address emerging issues. It wasn't until 2004 and 2005 that AACMA undertook a comprehensive review of the Code of Ethics – a complete fresh approach to bring the Code in line with that of other established health professions.

Presented as three separate documents: Code of Ethics; Code of Conduct; and Policy on Reasonably Necessary Treatment, the new Codes were overwhelmingly approved by the members at the 2006 Annual General Meeting.

The Code of Ethics outlines the profession's ideals and aspirations. Meanwhile, the Code of Conduct is more prescriptive and consists of a series of statements about professional practice directed at the practitioner, and describes the minimum acceptable standard of professional conduct.

## *The early days...*

### FROM ANNUAL SYMPOSIA TO AACMAC

In 1999 AACMA launched its first Annual Symposium, initially a one-day event which was held in Brisbane and attracted more than 80 members. The Symposium was introduced to increase collegiality and create a platform for peer-to-peer engagement.

After four years of running these annual events, AACMA stepped up to the plate to co-ordinate an annual conference on a much larger, global stage: WFAS 2004 conference at the Gold Coast, which attracted more than 765 delegates – a huge feat for the Association. This event not only cemented AACMA's dedication to the profession on a national-scale, it strengthened our international connections and put Australia on the global TCM map.

Following this outstanding success, the AACMA Board reviewed the focus and direction of its Annual Symposia and from 2005 started hosting an annual regional conference on acupuncture and Chinese medicine in conjunction with its Annual General Meeting. This new conference format was re-branded to what we know today as AACMAC – the Australasian Acupuncture and Chinese Medicine Annual Conference.

AACMA has since hosted an AACMAC every year in each mainland state in Australia – attracting hundreds of members annually who enjoy the convenience of obtaining most of their annual Continuing Professional Development points, as well as a great way to socialise with their peers.

In 2013, AACMA had the honour to again organise WFAS in Australia – this time, the 8th World Conference on Acupuncture, which was hosted early November at the beautiful Darling Harbour, Sydney. We were delighted to again share this event on a world scale!



**FROM THE VAULT: Annual Symposium 2003!**

*AACMA Annual Symposium 2003: Gala Dinner guests, including President James Flowers, CEO Judy James, Richard Li, Stephen Janz and Hoc Ku Huynh (above); (top right) Bernd Schulte, Charlie Xue, Hoc Ku Huynh and Henry Wong; (bottom, right) Henry Wong and Alan Bensoussan.*

## Conference Memories...

### AACMAC MELBOURNE 2005

AACMAC Melbourne 2005 was held over 11–13 May at the Rydges Melbourne Hotel, attracting hundreds of members and guests from the Chinese medicine profession. Given the tremendous success of 2004, this AACMAC had big shoes to fill, but the experience of hosting an international conference certainly aided the success of AACMA's next annual conference.

AACMAC Melbourne 2005 had an exciting and diverse line up of presenters, covering both clinical experience and academic research. The papers ranged from Chinese herbal medicine, acupuncture and moxibustion topics to TCM remedial massage and massage and exercise therapies, as well as papers on policy, regulation, standards, clinical justification and the nature of the profession.

The conference was held at a time where the profession lay at a crucial point in its development. Registration was in place in Victoria, the host state of this Conference. With acupuncture and Chinese medicine becoming more and more in the public eye and steadily moving into mainstream health care, the nature of the practice, with regard to cultural, scientific and philosophical dimensions was held up for analysis and debate. In this regard, AACMAC Melbourne 2005 was an important forum and gathering for practitioners, researchers, educators, students and others in the field.

*See if you can spot familiar faces in these AACMAC 2005 photos!*







Promotion of the profession has always been a priority of AACMA. From the early days of AAcA in the 70s where there was very little public awareness of Chinese medicine, through to today where 70% of Australians use some form of complementary medicine, including acupuncture and Chinese herbs, the need for a public voice is integral for the profession and its future.

In the past decade, the Board has made a concentrated effort to keep promotion of the profession a priority. This has been reflected by the appointment of promotion/media relation experts at the National Office, as well as media training for Board and office staff, and improved communication strategies – including the Association's website, member webpages, and social media (Facebook and Twitter).

We get a thrill out of reading and sharing positive Chinese medicine news articles to members and the public, and thanks to daily media tracking, we're always quick to respond to any negative stories within the press.

In 2013, AACMA's focus has been to fine-tune our promotion initiatives and roll out the Board's strategic plan. Stay tuned for increased promotion of the profession in 2014 and beyond!



**On the set of 'ALIFE' Filming 2011:** AACMA commissioned a film producer to make Career Videos to promote Chinese medicine as a career choice for high school students. The result? Seven-minute videos as part of the 'ALIFE series' which follow a day in the life of Brisbane-based acupuncturist Beau Mannix and Sydney-based Chinese medicine practitioner Eli Huang (above) in their busy clinics. We thank our members Beau and Eli for participating in this project.



**Media Training with Board Members & Staff 2002:** The media contact AACMA regularly to speak to a practitioner, researcher, or AACMA-representative regarding a story – and it is up to us to refer the best person. Back in 2002, we hosted a media training workshop which was a very important step. Pictured is AACMA Board Member at the time, John Deare, being interviewed by ABC Radio Producer Paul Barclay.

## JING-LUO MEMBER NEWSLETTER

In February 2003 our Member quarterly newsletter, the *Jing-Luo* was launched. In the same way that the jing-luo operate as the communications network of the body, so this newsletter, *Jing-Luo* is the communications wing of AACMA. The *Jing-Luo* started out with the intention of being both the primary means of providing information to members (jing) and as a networking tool for members to communicate with their professional colleagues (luo) and provide feedback to AACMA. From 2003 to 2011 the newsletter was black and white and packed full of useful information; in 2012 the newsletter underwent a makeover with the launch of the full-colour, magazine-style template. In 2011, we also launched our monthly email newsletters, providing important quick updates for members, which was an essential means of communication in the lead up to National Registration in 2012.





## HEALTH FUNDS AND CHINESE MEDICINE

AACMA has been at the forefront of all major developments in health fund provider recognition for not only acupuncture and Chinese herbal medicine but also the complementary medicine professions as a whole.

The first rebates for acupuncture were negotiated in 1977, by the Acupuncture Ethics and Standards Organisation (AESO) with HCF and by the Acupuncture Association of South Australia (AASA) with Mutual Community. Both AASA and AESO are now part of AACMA. It is an interesting historical fact that AESO was established to accredit practitioners in acupuncture for HCF, and accreditation with AESO was a condition of HCF provider recognition until the mid-1990s.

Over the following two decades, provider registration for acupuncture was progressively extended to all major health funds, and benefits for Chinese herbal medicine and natural therapies then followed.

From 1995 to 1998, AACMA successfully negotiated the introduction of rebates for acupuncture and Chinese herbal medicine services with MBF and HBA (now BUPA), Medibank Private and a range of other private health insurers. These rebates were progressively extended to cover acupuncture services with all health funds open to the public, and extended to include cover for Chinese herbal medicine and TCM remedial massage services for the majority of private health funds.

Prior to 1996, a practitioner had to be a member of an association recognised by the relevant health fund for patients to obtain rebates for their services. The range of recognised associations was narrow and AACMA/AESO/AASA operated as the gatekeepers for acupuncture provider recognition for most funds.

However, the period 1996–2009 was a time of substantial upheaval and change in the way provider registration for acupuncture, Chinese herbal medicine, and the natural therapies was administered by the various funds. In 1996, some funds introduced 'direct provider recognition', in addition to relying on association lists, in order to avoid threatened legal action about third line forcing (in this situation, requiring a person to be a member of a particular association in order to access provider registration with the fund).

The AACMA view is that the introduction of 'direct provider recognition' significantly undermined the capacity of the profession to self-regulate as practitioners could obtain provider registration without being subject to any level of regulation and accountability. Another impact was the high administrative cost burden on health funds to administer 'direct provider registration'. Because of this operating environment and the need to protect their own members from unqualified and unethical practitioners, the private health funds had no choice but to set minimum qualifications and criteria for health fund provider recognition, including first aid certificate, professional indemnity insurance and annual continuing professional education. AACMA, via the CEO, provided extensive advice to the health funds in relation to the minimum criteria and the qualification levels that should be applied for Chinese medicine and natural therapy provider recognition, including advice on many individual provider applications for acupuncture and Chinese herbal medicine. These annual requirements continue to apply.

The year 2009 ushered in a long-overdue change to this situation with the introduction of the Private Health Insurance (Accreditation) Rules. These regulations reinstated the need for practitioners to be subject to regulation, either by a state or federal registration board, or be a member of a professional association which met some fundamental criteria. This was later updated in 2011 and 2012 to take into account the inclusion of Chinese medicine as a nationally registered health profession.

For administrative and compliance management purposes, most funds still rely on association lists for acupuncture and Chinese herbal medicine provider recognition. In the past, access to health insurance rebates for patients was a major factor in practitioners seeking to be members. Today, managing access to and resolving problems with health fund provider recognition is viewed as just one of many important services AACMA provides to members, but not the *raison d'être* of membership. This important service assists members to focus on their practices and what they do best: the care of their patients.

## Conference Memories...

### AACMAC ADELAIDE 2006

In 2006 hundreds of AACMA Members flocked to Adelaide University where AACMAC 2006 was held over 19–21 May. The well-attended conference was a hit, and secured the following keynote speakers: James Flowers, Dr Seung-hoon Choi (from WHO), John Deare, John McDonald, Paul McLeod, A/Prof Caroline Smith, Prof Charlie Changli Xue, Dr Zhen Zheng, plus many quality invited speakers.

The academic line-up covered myriad topics relevant at the time, including some informative workshops for practitioners to sharpen their skills. Dr Seung-hoon Choi presented 'WHO Traditional Medicine Strategy and Activities: Standardization with Evidence-based Approaches'; James Flowers presented 'Virtue in Healing: The Role of Morality and Ethics in Chinese Medicine'; and Zhen Zheng delivered presentations on acupuncture for pain management. During the conference AACMA hosted the world launch of Debra Betts' new book 'The Essential Guide to Acupuncture in Pregnancy and Child Birth'.



Conference Presenters & AACMA Board/CEO: Richard Li, James Flowers, Dr Seung-hoon Choi, Lindsay Hill MP, & Judy James.



Members of the Victorian State Committee of AACMA.



Book launch: James Flowers & Debra Betts

### AACMA BOARD 2006/07



AACMA Board & CEO 2006/07: (front, left) John Deare, CEO Judy James, James Flowers, Wally Simpson, (back, left) Zhen Zheng, Hoc Ku Huynh, Wade James, Yun-Fei Lu, Mirana Christob, and Michael Porter.

### *In 2006:*

- > The Commonwealth Minister for Health and Ageing, the Hon Tony Abbott MP, announced a new \$5 million funding initiative through the National Health and Medical Research Council (NHMRC) for researchers investigating the use and effectiveness of complementary and alternative medicines.
- > AACMA and HICAPS worked hard together for more than a year to make HICAPS available to acupuncture practitioners in private practice in 2006.

'Congratulations and happy 40th anniversary AACMA! Great achievement! A big thank you to the team for your assistance and support to the TCM community in Australia! Jeffrey Fricot (AACMA Member)



## AACMAC BRISBANE 2007

At the time, AACMAC Brisbane 2007 experienced the biggest attendance ever for an AACMA event, excepting the World Federation of Acupuncture- Moxibustion Societies 6th World Conference held at the Gold Coast in 2004.

This well-attended conference had its usual strong list of academic and research presentations, providing a wealth of knowledge and new ideas. During the Gala Dinner, Professor Charlie Xue officially launched the *Australian Journal of Acupuncture and Chinese Medicine* (AJACM) – big news for AACMA and the profession at the time.

The buzz at the 2007 AACMAC was indeed electric, and who better than to quote, than James Flowers who beautifully describes his favourite moments of the conference in his *Jing-Luo* September 2007 President Report: 'A highlight of the Dinner was the bestowing of Life membership upon two special guests Maurice Mee Lee and Brian Bateman. These two gentlemen were part of the small band of pioneers of Chinese medicine in this country. In 1973, a small group formed the Australian Acupuncture Association, a precursor organisation of AACMA. Maurice Mee Lee was member number one and Brian Bateman was member number three. As Maurice Mee Lee said in his acceptance speech



*AACMAC Brisbane 2007: Richard Li, Ke Li, Jim Chalmers, John Deare, Brian Bateman, Maurice Mee Lee, James Flowers, Stephen Janz, Phil Vanderzeil.*

the decision was made to set up a structure with built-in systems of accountability and transparency. This structure has served the association well ever since then. I was quite overwhelmed by the occasion, awed by thinking about the difficulty of starting up an association way back then and knowing that we stand on the shoulders of giants. It was also the first standing ovation I have experienced in the profession and it was a spontaneous one at that. There was a very good feeling in the room.'

## AACMA BOARD 2007/08



*AACMA Board 2007/08: (front, left) Treasurer Walter Simpson, Vice-President John Deare, President James Flowers, Secretary Hoc Ku Huynh, (back, left) Director Michael Porter, Director Wade James, Director Ke Li, Director Zhen Zheng, and Director Yun-Fei Lu.*



## National Office Purchase

The AACMA office moved to its new premises at Cooparoo, Brisbane on 2 April 2007. The purchase of a permanent home for the AACMA office will result in long-term financial stability and reduced administration costs for the association.



## *Conference Memories...*

# AACMAC SYDNEY 2008

AACMAC Sydney 2008 was held at the Star City Sydney Hotel and Casino from 23–25 May 2008. With over 315 delegates and quality papers focusing on a mix of academic, research, clinical and practical topics in both lecture and workshop format, the conference was even more successful than the Brisbane conference in 2007, proving the continual growth of our annual conferences.



'AACMA's 40th anniversary has been a wonderful recognition of its merits, which have made us all proud. It is a milestone for us, an occasion to celebrate our achievements and an opportunity to set new goals. May AACMA continue with the same unfailing energy and commitment to work for the good of its members and Chinese Medicine profession in this country as it has done for 40 years.

Congratulations to all at AACMA on moving the organisation from strength to strength and a history of success in turning goals into reality.'

**Richard Li (AACMA President)**



'Congratulations on AACMA 40 year's anniversary and I wish AACMA continuous prosperity.'

**Li Fang Wang (AACMA Member)**

'Congratulations and thank you to AACMA! Forty years service has provided strength and credibility for the members and the profession.'

**Waveny Holland (AACMA Board Member)**



## A TRIBUTE: CAROLE ROGERS ... AND HER ACHIEVEMENTS FOR THE PROFESSION

A prominent figure in the Chinese medicine profession, we pay tribute to the late Carole Rogers who is most worthy of a mention in AACMA's 40th Anniversary Book.

Carole made an outstanding contribution to the development of the profession in its foundation years in Australia, and continued as a major force in sectors of the profession up until her decease in June 2009.

Carole will be remembered by many as the long-term Head of Acupuncture Colleges (Australia) Pty Ltd (ACA) in Sydney, the first acupuncture teaching institution in Australia, established by Russell Jewell in 1969. She is credited with negotiating Australia's first government accredited diploma program and the first accredited bachelor degree, not only in acupuncture but in the whole complementary therapies sector, while at the helm of ACA. In the mid-1990s, ACA was incorporated into the University of Technology, Sydney (UTS) as the UTS College of Acupuncture, which later became the UTS College of TCM. After her retirement in 2000, Carole served as Adjunct Professor at UTS, concentrating on special projects, teaching, research supervision and consulting.

Carole Rogers was also a foundation member of the Acupuncture Ethics and Standards Organisation Ltd (AESO), established in NSW in 1977 to accredit acupuncture practitioners for HCF, the first health fund to introduce a rebate for acupuncture. After two earlier attempts at a merger, AESO democratised and merged with AACMA in 1995.

In addition to her busy roles with ACA and AESO, Carole was a published author and expert advisor to the World Health Organization (WHO).

Carole co-authored with her son Cameron the first Australian text on acupuncture point location (*Point Location and Point Dynamics Manual*), as well as many other published articles on acupuncture.

Carole, in collaboration with Kerry Watson from Victoria, established the Australian Council for Acupuncture and TCM Education which, in the early 1990s, was integral to the development of the first accredited degrees in acupuncture. She also actively participated in the National Academic Standards Committee for TCM (NASC) which was established by AACMA in 1998 to consult on the development of national educational standards, resulting in the publication of *Australian Guidelines for Traditional Chinese Medicine Education*.

She had also acted as a consultant to various Australian and overseas higher education accreditation authorities and continued in this role until shortly before she passed away.

Carole held a great vision for the profession and was an indefatigable proponent for registration, a belief she held for the past 30 odd years and which inspired many who came into contact with her. In addition to submissions in support of registration in the 1980s, Carole was a participant in the professional collaboration that resulted in the Joint Submission from the NSW TCM Registration Committee (submitted to the NSW Department of Health in 2003).

Carole held strong, and at times contentious, views on Chinese medicine standards and how the profession might best be regulated. No matter whether you agreed with her views, one thing is certain – Carole was a powerful and indomitable force in the profession for over 30 years and her legacy is undisputed.



### Wildlife Aware 2008: ESCS LAUNCH

In May 2008, AACMA launched the Traditional Chinese Medicine Endangered Species Certification Scheme (ESCS). This scheme entitled practitioners and industry to declare publicly that they trade only in legally acquired wildlife parts and products. The scheme was a result of a funding agreement with the Department of the Environment, Water, Heritage and the Arts (DEWHA), and was to establish and administer a collaborative certification scheme for professionals and traders involved in the research, recommendation, prescription, supply, export or import of traditional Chinese medicines.





## *Past President* **JOHN DEARE**

John Deare, from Queensland, held the President position from February 2009 until May 2010. His favourite memory was being part of a board which had the best interest of its members and the profession as a whole. John still runs a busy clinic at Southport, Gold Coast and is on the AJACM Editorial Board and the AACMA Course Accreditation Committee.

**During your time as President, what were the big issues? And, what were AACMA's major achievements?**

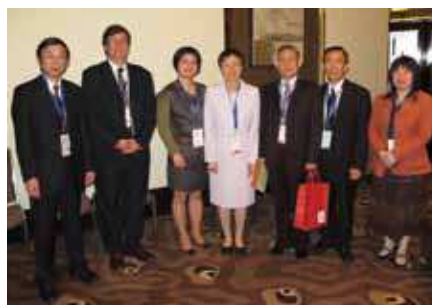
Inclusion of Chinese medicine practitioners into the National Registration and Accreditation Scheme, new accreditation rules for Private Health Insurance, Victorian Black Saturday fires, North Queensland floods and the National office and board's quick response to negative media reports.

**Are you still working within the profession, and if so, in what capacity?**

Still working for AACMA for our journal (AJACM) and the Course Accreditation Committee.

**What's your vision for the profession over the next 40 years?**

To receive the same recognition as other allied health professions, which not only includes Medicare but full inclusion into the hospital system.



### MEMORIES:

(Top, left) John Deare, President portrait; AACMA Past Presidents, Phil Vanderzeil, Phil Macqueen, Stephen Janz, Wally Simpson and John Deare at WFAS Sydney 2013; (bottom, left & right) John and colleagues at the WFCMS Melbourne Conference 2009.

## **FEATURED FELLOW: YINA WANG**

Yina Wang joined AACMA in 1997 and is a Fellow Member. Yina is proud of the achievements Chinese medicine has made over the past 40 years in Australia and hopes that in 40 years to come, Chinese medicine will be an even more popular treatment method. 'I wish AACMA continues to promote and advance the profession of natural medicine,' she said.

## **WELL WISHES**



'Happy Birthday AACMA. All of our members can celebrate a strong Acupuncture & Chinese Medicine profession because we have drawn together and overcome challenges & difficulties over the years. May this continue with pride & professionalism to show strength of leadership & vision.' **Michael Porter** (AACMA Board Member)

'Warm congratulations for AACMA's 40th birthday and best wishes for a prosperous and brilliant future.'

**热烈祝贺AACMA 成立40周年, 衷心祝愿AACMA走向更光辉灿烂的明天'**

**Yang Xu** (Fellow Member)





## Conference Memories...

### AACMAC MELBOURNE 2009

In 2009, we announced some major news at the AACMAC Melbourne Conference, that Chinese medicine practitioners would be included in the National Registration and Accreditation Scheme for the Health Professions as from 1 July 2012 – finally national registration was getting closer!

Dr Louise Morauta, Project Director of the National Registration and Accreditation Implementation Project, gave a keynote presentation about the national scheme. She made us aware of the three main issues: professional indemnity, continuing professional development, and criminal history and identity checking. She also stated that we were not going to be able to register every title that relates to our profession – meaning we would need to lobby for a concise list of titles to cover use of the term 'dry needling' (which we have consistently lobbied for until 2013).

Other topics focused on during the Conference were: our practice/professional environment; Musculoskeletal and Pain Management; Women's and Men's Health/Sexual Health; and Chronic Disease Management.



### WFAS SAN FRANCISCO 2010

AACMA representatives often attend the World Federation of Acupuncture and Moxibustion Societies (WFAS) international conferences to connect with the international profession and continue to put Australia on the TCM world map. In 2010 WFAS was held in San Francisco, a memorable trip for AACMA representatives. Below left: Richard Li, Paddy McBride (NZRA) & Judy James at Sausalito, below right Brenda Golianu, John McDonald, Paddy McBride, Judy James.



### WELL WISHES



'If AACMA were a female, at 40 years of age, she would be a graceful lady. She is confident, caring, tolerant and radiant with unyielding inner strength. She would be the rock of the family. That is where I see AACMA in the family of Chinese medicine in Australia. Walking into the future with those qualities, AACMA will continue to lead the profession in proving quality health care to the Australian public. Happy Anniversary!' Zhen Zheng (AACMA Board Member & AJACM Editor-in-Chief)



## Conference Memories AACMAC ADELAIDE 2010

AACMAC Adelaide 2010 focused on the theme: Entering a new era for Chinese medicine. Academics, researchers and practitioners presented on: pain; fertility; chronic disease management; regulation, registration, ethics education and professional standards; preserving our scholarly traditions, fundamental theories and philosophies in a modern clinical setting. The conference also included two panel discussions, the first on Regulation of Chinese Herbal Medicine and the second on the Future Directions for the Profession.



## Well Wishes...



'Congratulations to AACMA in achieving this milestone of 40 years supporting and working for our profession.

Proud to be part of it and well done to all those involved now and over through the timeline.'

**Mark Bayley** (AACMA Deputy Membership Officer)

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'Happy 40th Anniversary and may we continue to be blessed with more to come. Thank you to the masterminds of the association and all who work hard to make AACMA to what it is today. Keep up the good work.' **Irene Newn** (AACMA Member)

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'AACMA – a pioneer and vanguard of TCM in Australia; a strong voice and wonderful supporter of the members – Challenging 40 years, Developing 40 years and Glorious 40 years.

AACMA--澳洲中医的开拓先锋; 学会会员的坚强后盾。奋斗的40年, 发展的40年, 光辉的40年”。’  
**Xue Song Liu** (Fellow Member)





## *Memorandum of Understanding 2010*

On 25 May 2010, AACMA attended the signing of a Memorandum of Understanding (MOU) between the NSW Office of Science and Medical Research (OSMR) and the China State Administration of TCM (SATCM) in relation to the establishment of a Centre of Excellence in Integrative Medicine combining western and traditional Chinese medicine. The Chinese delegation was led by Deputy Commissioner Li Daning, Head of Science and Technology at SATCM. The NSW delegation was led by The Hon Jodi McKay MP, NSW Minister for Science & Medical Research.



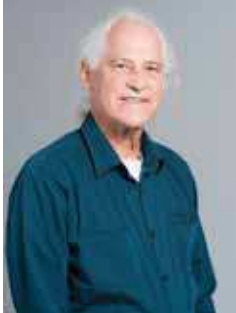
AACMA attends the Chinese Medicine Industry Council of Australia Ltd's Emperor Yan Birthday Celebration



## **AACMA BOARD 2010/11**

**AACMA Board & CEO 2010/11:**  
(Front row, left) President Walter Simpson, CEO Judy James, Director Hong Xu, Secretary Hoc Ku Huynh, (Back row, left) Director Michael Porter, Treasurer Ian Murray, Director Zhen Zheng, Director Wade James, Ian Dummett.





## *Past President* **WALTER SIMPSON**

Queensland's Wally Simpson held the AACMA President position from June 2010 until May 2011, and has been a long-standing Board Member. Wally is our current Vice President.

### **During your time as President, what were the big issues?**

In July 2010 the National Registration and Accreditation Scheme came into force and acupuncture and Chinese herbal Medicine were to become part of this scheme on 1 July 2012. My time as President was in this lead up to registration so there was a lot of work being done trying to educate our members as to the process that was going to unfold in July 2012.

I remember, there was a lot of misinformation and unfounded theories among members as to what it was all about. Some were under the illusion that the Chinese Medicine Board of Australia was just a morphing of the AACMA national board, and that nothing much would be changed by this process. Meanwhile, others were under the impression that if you were a member of AACMA then you would automatically be eligible for national registration.

Government forums on the National Registration Accreditation Scheme (NRAS) were held in all capital cities in March and April 2011 to inform professional organisations of the process for transition to National Registration. There were two phases set to manage this transition; the first was the establishing of registration and accreditation arrangements and the appointment of a national board; the second was the development of actual registration standards and then practitioner registration.

To be in this position was a major achievement that AACMA had been working toward for many years; it was a consistent effort by many people.

We owe a great debt to AACMA CEO Judy James who worked tirelessly writing submissions that contributed to

our being in this pre-registration state. There were also submissions giving input into the proposed standards for Acupuncture endorsement by the Medical Board of Australia; the Physiotherapist associations and the Chiropractic groups.

In February and March 2011 Judy James held members' meetings in each state to inform our members of the process involved in the NRAS.

Also, during my time as President, dry needling was beginning to be a problem for some members and in my first 'From the President' article in the *Jing-Luo* 2010 Winter edition, I commented that the best way to deal with this emerging problem was to educate all of your clients about the difference between what we do and what other individuals who do acupuncture by another name fail to do, or even understand. I still feel that this is the best way to deal with this problem and that members should be utilising this pro-active approach.

### **What's your fondest memory during your time as President?**

I don't know if fondest memory is the right term, more like a feeling of pride seeing our members donating their time and money, working together to help those who had been adversely affected by the fires, floods and cyclones that left a trail of devastation across the country in successive years. This sort of selfless community work is at the heart of every humanitarian endeavour and reflects very well on the quality of people who are members of our association.

Having members come up to me and say how much they liked the things I wrote about in the *Jing-Luo* is probably a fond memory. I was attempting to remind and inspire our members to stay in touch with their roots from the antiquity of Chinese medicine.

### **Are you still working within the profession?**

Yes, I am still working in the profession; I am presently Vice President of AACMA and a member of several AACMA Board Committees.

I also run a busy clinic using a combination of Acupuncture, Chinese herbs, a variation of Tuina & Shiatsu, some deep tissue massage as well as lifestyle advice.

I have for many years now mentored students in my clinic. At present I have three students who at first came to my clinic to observe and have stayed on for over 12 months now to gain experience in the many facets involved in being a Chinese medicine practitioner. I believe, we need many more practitioners across the country to offer this service. If we are to be thought of as primary care practitioners our students and new grads need more than what they presently receive at their undergraduate institutes, they need to be exposed to the work place of real clinics that treat more than just two or three patients in an afternoon.

I also run classes and teach private lessons in *Taiji Chuan*, *Bagua Zhang* and *Qigong*.

### What's your vision for the profession over the next 40 years?

My vision over the next 40 years is that we will continue to grow and flourish, finding our way into the hospital system and perhaps influencing the way that all health care practitioners think about and deal with disease processes. If we do get into the hospital system then hopefully our undergraduates will be able to partake in some kind of internship where they will be exposed to some of our most-experienced clinicians.

### Is there anything else you wish to share?

There is a long way to go before our profession commands the same respect as that of Western medicine and we need to continue to work on honing our skills and propagating our medicine. We need good quality research using methods conducive to the understanding of Chinese medicine and its methodology not what often appears to be the narrow constraints of a Western medicine analysis of what we do and how it works.

I believe that we need to ensure that we do not lose touch with our roots as we reach out toward the future.

Having a good grounding in skills such as Pulse, Abdominal and Channel palpation have always been seen as basic diagnostic tools in the *Nei Jing Su Wen - Ling Shu*; the *Nan Jing* and the *Shang Han Za Bing Lun*. I was taught that the pulse is the mainstay of diagnostic techniques in our arsenal



WFAS Gold Coast 2004 Wally Simpson performs Qi Gong in front of the conference's 750 delegates.



AACMACs: Wally with his wife, Vivienne, and Tony Graham at Brisbane 2012 (above) and having fun at the Gala Dinner during AACMAC Perth 2011 (right).



of skills, unfortunately if I am to believe the students who pass through my clinic; this no longer seems to be the case.

While there are many systems of pulse diagnosis, at present students are exposed to one system and even then this is not the daily practice which is needed to prepare them for the challenges of clinical life. Many of our colleges brush over these skills in one, perhaps two, three-hour lessons, and students are expected to learn the rest from books. How do you learn the tactile skills of feeling the Qi flow in channels from books? We need to be taught by constant practice under the guidance from someone who has mastered the skill.

I know of one organisation that expects its members to continue to practice pulse taking with their peers even after

*Past President*  
**WALTER SIMPSON**

having been in practice for many years in order to grow and maintain the skills required to excel in this amazing art.

When new skills are introduced into our system, then the responsibility lies with those introducing these skills to explain them from a Chinese medicine perspective, how else can they be considered to be part of Chinese medicine?

In the 26 years I have been a practitioner and a member of the AACMA, I have seen AACMA go from strength to strength. I have seen our association gain credibility not only within our profession and among the Health Funds but also in Government circles; winning tax concessions for not only our members but for the whole profession. Our influence has reached beyond our shores to many countries around the world and our advice and expertise is a sought-after commodity.

I have watched the profession grow from just a few practitioners advertised in the Gold Coast Yellow Pages to three complete pages of advertising with around 36 of these entries being AACMA members ... and we are all getting work!

This growth has occurred throughout much of the country, especially in our cities.

In my early days of practice the majority of people who came for treatment had muscular skeletal disorders with just a sprinkling of other conditions, now people come to see me for an incredible diverse range of conditions. While this diversification is a good sign, there are still many more people out there suffering who are prone to statements like 'I have tried everything but nothing is helping', but have never tried acupuncture or Chinese herbal medicine. Many are unaware of the diversity of conditions that we successfully treat.

Our profession has moved from the domain of private colleges to public universities and it appears we are gaining more respect from at least some of our colleagues from the Western medical profession.

What I love about our medicine is that even after many years of practice I still have a thirst for more knowledge, there is still so much to learn. Fortunately the number and quality of the workshops available to us these days is helping quench that thirst. May we continue to grow and prosper.



## *National Office Memories*

### **2011 QUEENSLAND NATURAL DISASTER RELIEF**

The South East Queensland floods and cyclones of 2011 left many people in devastating circumstances. At the time, AACMA appealed to our members to support fellow practitioner members who were affected. AACMA members showed exceptional generosity in donating to the various charities assisting those affected. We are humbled by our member's generosity and AACMA disbursed donations directly to affected members.

The National Office was fortunately spared during the Brisbane flood, with water just meters away from our sandbagged doors – see pictures (left) of the receding water levels.





## Conference Memories... AACMAC PERTH 2011

In Ian Murray's President's Report in the *Jing-Luo* June 2011 newsletter, he called AACMAC Perth 2011, the 'best AACMAC' he had attended. 'The venue was great, the welcome from the Western Australian members was warm, and the presentations ranged from the classics to clinical research and everything in between – there was something for everyone,' he reported. During the Conference, AACMA was fortunate to have international speaker Professor Jianjie Chen from China who shared his experience in the treatment of liver diseases. Professor Chen was kept very busy delivering three presentations in just two days. Also, there were a large number of papers submitted on the business aspects of a clinical practice, which enabled us to dedicate an entire session of the conference – it was so popular there was standing room only!



## Strategic Plan

In 2011, the Board commenced work on the AACMA Strategic Plan. In 2013, the Strategic Plan underwent further development (see image) and subsequent roll out of some of the objectives with the help of the Board, CEO, staff and a consultant. This lengthy project has been a beneficial experience in helping us identify our goals and vision for the future. It's timely that as we celebrate our 40th year, we are in the position to confidently work toward our goals.



AACMA BOARD 2011/12

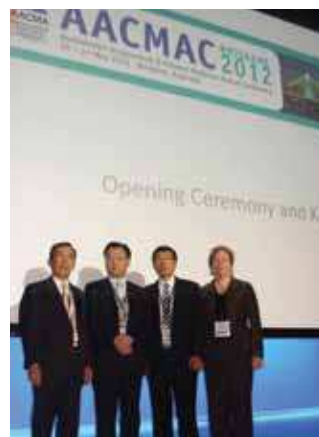
(Front, left) Hoc Ku Huynh, Wally Simpson, Richard Li, Hong Xu, (Back, left) Zhen Zheng, Ian Murray, Peter Kington, Tim Wilson & Wade James.

## Conference Memories... AACMAC BRISBANE 2012

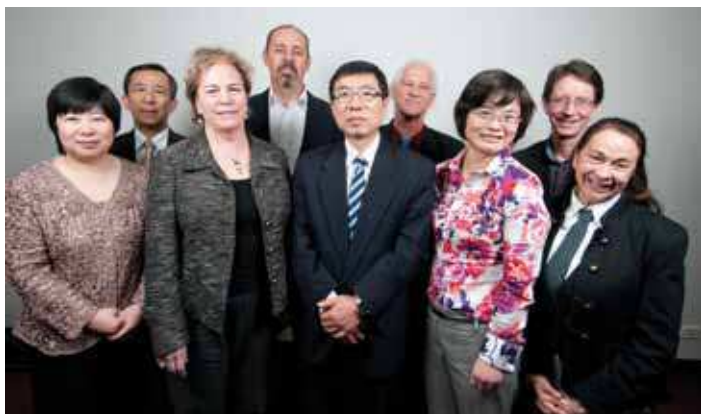
AACMAC Brisbane 2012, from 25–27 May, was a resounding success and proved to be the biggest and most popular AACMAC to date. More than 360 delegates from Australia and abroad met for three engaging and entertaining days at the Brisbane Convention and Exhibition Centre, in the heart of beautiful, sunny Brisbane.

During AACMAC Brisbane 2012, AACMA signed Memoranda of Understanding with the New Zealand Register of Acupuncturists (NZRA) and the Network of Researchers in the Public Health of Complementary and Alternative Medicine (NORPHCAM).

The social events, Cocktail Party and Gala Dinner, were lively and entertaining as per previous years – and such a wonderful way for members to connect with each other and let their hair down. During the Cocktail Party, author David Legge launched his book *Close to the Bone*.





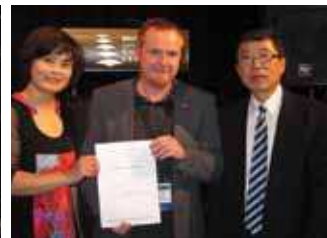


## AACMA BOARD 2012/13

(Front, left) Secretary Hong Xu, CEO Judy James, President Richard Li, Director Zhen Zheng, Director Waveny Holland, (back, left) Treasurer Hoc Ku Huynh, Director Matt O'Hara, Vice President Wally Simpson, Membership Officer Michael Porter.



NZRA's Paddy McBride and Richard Li.



NORPHCAM's Jon Adams with Zhen Zheng and Richard Li.

## Memoranda of Understanding 2012

### *Forming strategic alliances*

During AACMA Brisbane 2012, AACMA signed Memoranda of Understanding (MOUs) with two organisations: the New Zealand Register of Acupuncturists (NZRA) and the Network of Researchers in Public Health of Complementary and Alternative Medicine (NORPHCAM). These MOUs signify our alliances with fellow organisations to strengthen the TCM profession.



AACMA CEO Judy James presents at the AACMA National Registration Information Session – Brisbane, March 2012.

## 2012: National Registration

### NATIONAL OFFICE SUPPORT SERVICE

The year 2012 was a big year for not only the Chinese medicine profession (national registration) but, behind the scenes, the National Office experienced one of its most intense years yet.

We offered a thorough support service to our members, offering phone and email advice on dealing with the lead-up to national registration. AACMA staff put together support materials for members, fielded a flood of calls from members about the application process, and conducted national registration information sessions around the country. Online, we built a national registration section within the members-only section of the website, publishing updates, FAQs, and helpful material to aid the application process.

Now on the other side of this process, we are so thrilled the majority of our members achieved national registration and are now experiencing the benefits of registration. The hard work paid off!





## *Current President* **RICHARD LI**

Richard Li has been AACMA's President since 2012, and has spent many years on the AACMA Board. During Richard's presidency he has seen one of the biggest things to happen to the profession: National Registration in 2012. In this interview, Richard shares some of his memories and highlights from over the years.

### **How long have you served on the AACMA Board for?**

I have served on the Board in two different periods: 1998–2002 and 2008–present. Over these nine years, I have undertaken roles in different capacities in the national board, such as President, Acting President, Vice-President, Membership Officer, Chair of the Course Accreditation Committee, Chair of the Continuing Professional Education Committee, and Chair of the first NSW State Committee.

**You became President in the months prior to National Registration in July 2012, which was one of the biggest milestones in Chinese medicine history in Australia. AACMA had been lobbying for this outcome for quite some time, what was the feeling like for the Board, and you as President, when National Registration finally came into fruition?**

I feel very honoured to be the President working alongside the members of the Board to witness the successful TCM registration. In fact, it is something that we and all past Board members have long expected to see happen. AACMA has been working with members supporting and taking the leadership co-operating with all stakeholders through decades of joint efforts to achieve National Registration and Accreditation for TCM.

We were excited about it. We were fully aware of the fact that registration represents the biggest change in our profession for more than a decade and it is a step that will inevitably change the face of our practice.

While delighted, we understand that AACMA has a big responsibility in making the transition from a mostly unregistered profession to a fully-registered profession. AACMA should continue strengthening services to its members, work for members' interests and enrich the TCM practice environment in the post registration era.

We believe with registration allowing TCM to be part of the mainstream health system, the profession faces challenges and opportunities.

We believe that AACMA must adapt itself smoothly to the environment of post registration, and maintain its position as a TCM peak body and continue its leading role in all areas of TCM development in Australia.

### **What are some AACMA's major achievements during your time as President?**

The past two years have been a very challenging time for the association. The board has kept the association moving through this tough time, managing all its changes and developments along the way.

We are successfully transitioning from a mostly unregistered profession to a fully-registered profession. The association has provided assistance where needed to our members to successfully register in one or more divisions of the Chinese Medicine Register. We are now in a new phase of practice to meet increased demand for acupuncture and Chinese Medicine services from the Australian public.

Due to national registration, AACMA faced a challenge in retaining members. We are pleased that we have maintained a strong membership base with more than 2200 memberships in the post era of the Chinese medicine national registration and continue to grow. This is essential to AACMA remaining the nation's leading TCM organisation, and continuously playing a pivotal role in Chinese medicine practice in Australia. In fact, the Chinese medicine profession

needs a strong association that is able to unite all qualified practitioners no matter where you are from, and AACMA is the one to belong to for the future.

After hosting AACMAC Brisbane 2012, lauded as one of the best ever in AACMAC history, AACMA in 2013 hosted its second WFAS World Conference on Acupuncture – the WFAS Sydney 2013 8th World Conference on Acupuncture in Sydney. This conference exceeded our expectations and turned out to be an even greater success than the WFAS 2004 Gold Coast conference. This again shows our commitment to promote TCM academic and training standards in Australia, as well as taking a stronger global leadership role in the profession internationally.

AACMA has also taken a proactive role in promoting Chinese Medicine practice both domestically and internationally by forming appropriate strategic alliances with other organisations. AACMA has signed a Memorandum of Understanding (MOU) with the New Zealand Register of Acupuncturists (NZRA), Rothenburg TCM Kongress and AGTCM, and the Network of Researchers in the Public Health of Complementary and Alternative Medicine (NORPHCAM).

AACMA Board has approved publication of the Summary of our revised strategic plan, as part of an ongoing review of our goals and objectives in the *Jing-Luo* Summer edition 2012. The plan determines where AACMA is going over the next 3 to 5 years, and enables the association to effectively allocate its resources to pursue the advancement of AACMA.

#### **To date, what's been your fondest memory as President?**

Many things come to mind. One of them is AACMAC 2012 Brisbane – the conference was one of the best ever in AACMAC history. It offered audiences an overview of a wide range of TCM topics and discussed prospects for research in the future. It provided, to a large extent, a grand vision of today's TCM and its prospects for tomorrow. Feedback from the participants was overwhelming.

#### **What's your vision for the profession over the next 40 years?**

My vision for the profession is one that is highly skilled, both in TCM skills and modern technology, literate in classics and traditions, articulate, and able to meet the needs of Australians for safe, effective and ethical acupuncture and Chinese medicine health services. The profession must be united and collaborative, with a strong sense of and commitment to, its unique identity.

#### **What are the big issues AACMA is now lobbying / focusing on for the future?**

- Promoting AACMA to the community, government, and the profession
- Protecting members and the profession
- Member services and support
- Developing strategic alliances
- Developing and nurturing continuing professional development
- Developing the profession (standards, CPD)

#### **What's your vision for AACMA in the future?**

The future for AACMA must be based on a strong membership, providing members with comprehensive services relating to day-to-day practice.

AACMA will continue to be a national leading TCM organisation with a vibrant culture of continuing professional development, offering high quality and diverse opportunities for practitioners to engage in lifelong learning and continuing education, and encouraging a rich and diverse research culture (methodology) that supports clinical practice and practitioner knowledge.

AACMA must continue its leadership and form a united front with a united voice in TCM development, and maintaining our identity, culture and history in the Australian TCM community.

# WFAS SYDNEY 2013

WFAS Sydney 2013 8th World Conference on Acupuncture proved to be a fulfilling, entertaining and professionally beneficial conference for all. This is in no small part due to the enthusiasm of more than 850 delegates, who travelled to Sydney from 36 countries to attend the conference, engage in the academic program and socialise with fellow TCM practitioners and academics.

In 2013, WFAS celebrated its 25th anniversary the same year AACMA, the organiser for WFAS Sydney 2013, celebrated its 40th year – a milestone for both organisations which no doubt made the event even more special and full of celebratory energy.

The Sydney Convention and Exhibition Centre on the sparkling Darling Harbour hosted the three-day conference from 2–4 November 2013. Delegates were spoilt for choice with more than 250 oral presentations, workshops and posters covering a huge variety of TCM topics. The international conference was flavoured with an Australian touch with a very special Welcome Corroboree performed by Sydney-based indigenous dance group. Throughout the conference, the collective passion for Chinese medicine was evident in the workshops and seminars, with the sharing of ideas and insights. An impressive 350 delegates attended the Gala Dinner, a wonderful chance to soak up the social aspect of the conference. Dancing, door prizes and delicious cuisine delivered an evening that had delegates smiling from ear to ear.

AACMA extends its heartfelt thanks to each and every delegate, speaker, session chair, trade exhibitor, advertiser and sponsor for contributing to a fantastic conference.



## Opening Ceremony

(Top left) AACMA Secretary Prof. Hong Xu co-chairs the Opening Ceremony; AACMA President Richard Li opens WFAS Sydney 2013; Richard Li shakes hands with Shuting Fang (President, China Association Of Traditional Chinese Medicine (CATCM)); Sydney Indigenous dance troop performs a welcome corroboree; WFAS VIPs: guests include, Paddy McBride, Steven Aung, Arne Kausland, Richard Li, Deng Liangyue, David Kamt Fupuy, Juliana Tjandra, Shen Zhixiang, Ramon Maria Caldach, Lixing Lao.

## TRADE EXHIBITION: 36 exhibitors connecting with the profession







Nancy Harding & John Deare. Richard Li & Heather Bruce. MingLin Chen & Zhen Zheng. Alan Bensoussan & delegates. Diana Knight & Michael Smith.



Board Members Wavny Holland & Michael Porter hit the dance floor. Past AACMA Presidents: John Deare, Stephen Janz, Wally Simpson, Phil Macqueen, Richard Li and Phil Vanderzeil. AACMA Fellow Dominique Wood presents Richard Li the 40th Anniversary Book artwork.



Dr Huiyuan Xu, Biling Wen, AACMA Staff Rebekah Davis, Denise Cullen, Talina McKenzie & Tina Wu. David Hartmann, Michael Porter, Elaine Batty & Jeonhee Jang. Prof Baoyan Liu & Luz Ros Torres enjoying the live music.



John McDonald, Ruth Kendon Huang Longxiang & Richard Li. UANYSLA and ACMIPA delegates. David Schievenin, Dr Shulan Yang, Dr David Lee & Diane Price.





DECEMBER 2013: (Front, left) Nadya Urban (Reception & Front-Line Admin), Tina Wu (Accounts & Committees Officer), Judy James (CEO), Rachel Dowdy (casual admin assistant), (back, left) Jazz Tyrill (Events & Operations Mgr), Rebecca Dowdy (casual admin assistant), Rebekah Davis (Member Services Mgr), Talina McKenzie (Communications Officer).

## Our National Office Team

The staff at the AACMA national office are a tight-knit team that work consistently to provide quality services to members and support for the public. The national office is the engine room of the association, driving policy, managing projects and continually reviewing what we do and how we do it. The association gives its heartfelt thanks to all current and past staff members for their contribution to the work of the national office and the success of the association.

Staff at the national office as of 31 December 2013 were:

Judy James – Chief Executive Officer  
 Jazz Tyrill – Events and Operations Manager  
 Rebekah Davis – Member Services Manager  
 Talina McKenzie – Communications Officer  
 Nadya Urban – Receptionist and Front-line Administration  
 Tina Wu – Accounts and Committees Officer  
 Rachel Dowdy and Rebekah Dowdy – Casual Administration Assistants

## Behind the scenes...



Julia Starkey worked as AACMA's Publications & Promotions Administrator from 2011 until May 2013. During this time she felt the passion members had for Chinese medicine and saw first-hand how dedicated AACMA was to the profession. To celebrate AACMA's milestone, former-journalist Julia produced the *40th Anniversary Book*, inbetween full-time yoga teaching in Brisbane in mid/late 2013.

From researching old *Jing-Luo's*, appealing online for member submissions, scouring folders for photographs and memorabilia, to working with contributors, interviewing Presidents and Judy James, and liaising with artist Dominique Wood, the *40th Anniversary Book* came to life.

We hope you enjoy the trip down memory lane...

# 40<sup>th</sup> Anniversary

1973-2013  
A COMMEMORATIVE BOOK

## PUBLICATIONS MANAGER & EDITOR

Julia Starkey

## MANAGING EDITOR

Judy James

## COVER & THEME ARTWORK

Domenique Wood

## CONTRIBUTORS

Peter Aftanas, Brian Bateman, Mark Bayley, Christine Berle, Heather Bruce, Jim Chalmers, Christina Chau-Yang, John Deare, Doug Dickmann, James Flowers, Jeffrey Fricot, Waveny Holland, Hoc Ku Huynh, Judy James, Stephen Janz, Richard Li, Xue Song Liu, Phil Macqueen, John McDonald, Maurice Mee Lee, Judy Murray, Sue Nelson, Irene Newn, Matt O'Hara, Michael Porter, Clive Powell, Walter Simpson, Philip Vanderzeil, Robert Vandevelde, Kerry Watson, Li Fang Wang, Steven Wang, Yina Wang, Dominique Wood, Min Ying Wu, Hong Xu, Yang Xu, Xiaodong Yu, Zhen Zheng.

## PUBLISHER

AACMA

## PRINTER

Big & Little Media

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## *It's time to celebrate*

In 2013, the Australian Acupuncture and Chinese Medicine Association Ltd celebrates its 40th year. This book celebrates this milestone and the people who helped bring to life the Association and the Chinese medicine profession in Australia.

[www.acupuncture.org.au](http://www.acupuncture.org.au)

