

The American Cleft Palate Association: Its First 36 Years

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History involves memory, and sometimes memory is faulty. History requires documentation, and sometimes documents cannot be found. History demands winnowing, and sometimes the wheat and the chaff cannot be completely separated. History is an assembly of details, and details may become burdensome. History is a challenge, to which the historian tries to respond.

Surely, earlier Historians of the American Cleft Palate Association must have encountered this challenge. The present Historian acknowledges the work of her predecessors: George H. Foster, W. J. Robinson, and William Harkins from dentistry and Gretchen M. Phair and Asa J. Berlin from speech pathology.

In preparing this review of events that took place from 1943 to 1978, in the United States and in other countries, during times of war and times of relative peace, through difficulties and accomplishments, I have attempted to be as accurate as possible. If I have distorted facts and if I have omitted people and happenings that should have been included, I have not done so intentionally. As Historian of the American Cleft Palate Association, I have appreciated the opportunity to learn about the organization and the people, past and present, who have built and maintained it. Thank you for giving me this assignment.

Preface

During the centuries in which babies have been born with craniofacial anomalies, members of several professions have been concerned with the study of congenital defects of the mouth and face and the treatment of persons who present these anatomical differences. As the various professions developed, surgeons, dentists, speech pathologists, otologists, anatomists, audiologists, geneticists, psychologists, research workers, teachers, and many other turned concern into action. Their study and management of children and adults who might be affected physically, emotionally, socially, educationally, and vocationally by clefts led to the development of procedures and the acquisition of information that could benefit "cleft palate persons."

Only rarely, however, were members of the several disciplines concerned with cleft palate brought together to share mutual interests and knowledge. Each profession functioned, effectively but independently; and the benefits that could have accrued to individuals with clefts were often lost or limited by a lack of interdisciplinary cooperation.

This was true in the United States as well

as in other parts of the world when, in 1943, an organization was started "to encourage by every appropriate method and device the improvement of scientific clinical services to persons suffering from cleft palate and associated deformities." This was one of the purposes stated in the Preamble to the Constitution of an organization now known as the American Cleft Palate Association.

The environment from which the new association emerged was not particularly conducive to immediate success. The United States was in a war that had begun in 1941 and would continue to 1946. In some parts of this country, services for individuals with congenital physical anomalies were almost totally lacking. Legislation in support of programs of rehabilitation was minimal. Even by the end of World War II, as Dr. Howard Rusk reported in *A WORLD TO CARE FOR*, the rehabilitation institute that he established in New York City was "merely an idea," opposed by many who considered it a "frilly boondoggle."

Dentists and surgeons were not, in 1943, always in agreement about the management of clefts; and referrals from one discipline to another were not common. Departments of

education in many states had not established programs for handicapped children, and those that had programs did not consider congenital anomalies such as clefts in the same category of need as the crippling conditions brought about by cerebral palsy, spina bifida, severe burns, and poliomyelitis.

Other factors that might well have thwarted the founders of the American Cleft Palate Association, had they been able to recognize the limitations under which they were working in 1943, were cited by Richard Webster, M.D., in his address to the Annual Meeting of ACPA in 1963. Looking back twenty years, Dr. Webster reminded his listeners that, in 1943, the country's major efforts were devoted to harvesting and making supplies and transporting them and manpower to those parts of the world where they could be best used to put down tyranny. "At that moment in history," said Dr. Webster, "very little thought could be given to congenital defects."

In 1943, general dental care was far less adequate than it is today; and the services of pedodontists and orthodontists were relatively unavailable. However, prosthodontists, using the precursors to plastic for the devices they constructed, were often asked to assist children or adults whose surgical management for clefts was considered unsatisfactory.

Surgical repair of prepalatal and palatal clefts, at the time of World War II, was often performed by general practitioners or general surgeons. The main surgical goal in those days, according to Dr. Webster, was "cleft closure—just cleft closure;" and secondary procedures were often needed to correct inadequacies remaining after first operations. The many syndromes with which craniofacial anomalies are associated were not well defined in 1943, and hearing losses related to clefts were often not recognized until the otologist was called on to treat a severe problem.

"Speech pathologists," Dr. Webster pointed out, "were almost unheard of then." People known as "speech correctionists" provided remedial services in some school systems; but they were not familiar with the particular needs of the child with a congenital palatal cleft, repaired or obturated. Some, Dr. Webster commented, were graduates of schools oriented toward drama and elocution "and

certainly not toward the physiology of speech or the anatomy involved in poorly functioning velopharyngeal structures."

The parents of children born with clefts had few sources of financial, genetic, or psychological counseling or assistance. Mothers encountered serious problems in feeding the cleft palate babies, having few of the prepared formulae, protein supplements, and packaged baby foods available today. Parent counseling, in the main, was left to the surgeon in 1943; and genetic counseling was almost unheard of.

In spite of these and other barriers, leaders in several fields of specialization began to see a need for closer cooperation among the disciplines that provided services to cleft palate children. True, no forum existed for discussions; and "even the language spoken by one specialty was incomprehensible to the others," Dr. Webster stated. True, research was not well controlled; and the results of experimentation were often reported in terms that had little meaning across disciplines. True, the fields of audiometry and encephalometry had not yet emerged. However, interdisciplinary cooperation and exchange were beginning, to the advantage of the disciplines and certainly to the advantage of "cleft palate persons."

The First Decade—1943 through 1952

An observer at a meeting held at Pennsylvania State College on March 13, 14, and 15, 1943, might not have recognized the group as interdisciplinary; but this was undoubtedly the first organized meeting devoted to the problems of cleft palate at which speakers were from more than one discipline and at which at least one of those attending was a surgeon. Although this was not the first official meeting of the American Cleft Palate Association, it did lead to the establishment of the organization that eventually had that name.

THE MEETING AT PENN STATE. In each of the brief histories of the association published in recent years, March of 1943, when a special course on the construction of speech appliances for children with palatal clefts was held at Pennsylvania State College, is cited as the point in time at which the present association was suggested. Two personal reports have provided some background for that meeting.

Herbert Koepp-Baker, Ph.D., has recalled that the "interdisciplinarity" that has been a pervasive characteristic of the association started with Cloyd S. Harkins, a dentist from Osceola Mills, Pennsylvania. In 1942, Dr. Harkins was concerned with the fabrication of "speech aids" that would be physiologically satisfactory, simpler than the hinged and sometimes inflated prostheses previously used, and "closely identified with the body of the wearer." When Dr. Harkins and Dr. Koepp-Baker conferred about the construction of a speech appliance for a student at Pennsylvania State College, they decided that Dr. John J. Fitzgibbon of Holyoke, Massachusetts, might give them some help. Dr. Harkins visited with Dr. Fitzgibbon, who wore one of his own speech appliances; and together they built an aid for the student.

Dr. Harkins then asked the Chief of the Dental Division of the Pennsylvania Department of Health, Dr. Linwood Grace, for funding for a conference about the construction of speech appliances; and, with financial support from the Pennsylvania Division of Maternal and Child Health, the Penn State meeting was arranged.

Another report about that meeting came from Margaret Raabe, now Mrs. Hawkins of Dermott, Arkansas, who wrote, in the Fall of 1978,

You asked for information about the founding of ACPA. As I recall, it was a school psychologist by the name of Harry Blackwell, from Clearfield County, Pennsylvania, who came to the Speech Clinic at Penn State and asked Dr. Koepp-Baker what we could do for the cleft palate children he was finding in his county. He brought a young man about 16 years old who had a complete cleft, about which nothing was being done speechwise. Dr. Cloyd Harkins from Osceola Mills, Pennsylvania, had made him a prosthesis. At that time, Dr. Lynwood Grace was President of the Pennsylvania Dental Association. He called a meeting of the dentists in the state and speech pathologists in March of 1943, at the Nittany Lion Inn on the campus of Penn State. It was at this meeting that the Academy of Cleft Palate Prosthesis was founded. . . . Among the founders were Dr. Grace, our first President, Dr. Fred . . . , Secretary, Dr. Harkins, Dr. Koepp-Baker, Dr. E. T. McDonald, Gladys Fish, Harry Blackwell, and Margaret Raabe, who was an Assistant Professor at Penn State.

The course on speech appliances was scheduled; and the speakers were Dr. Harkins and Dr. Koepp-Baker, each of whom was presented with a fountain pen in recognition of

his contribution. In attendance were approximately 25 individuals, most of them from Pennsylvania, most of them dentists, and most of them concerned with the construction of prostheses.

Some exceptions should be noted. Dr. Robert Ivy, who was at the meeting, held a dental degree but was more widely known as a surgeon. Dr. Koepp-Baker was a speech pathologist, a member of the staff at Pennsylvania State College at that time. Two individuals with clefts were present, one coming, by report, from Ann Arbor, Michigan. Some technicians and secretaries appeared in a group photograph taken during the meeting. However, at the start of what might be known as "The Pennsylvania Years," the organization that held its first formal meeting in April of 1943 was conceived and nurtured in the Commonwealth of Pennsylvania.

SOME ADDITIONAL NAMES FROM THE EARLY YEARS. The name of Dr. Orvin Reidel appears in all accounts of the founding of the American Cleft Palate Association. It was he, according to the best memories of those who were there, who first proposed that the group assembled at Pennsylvania State College form a permanent organization. This was done, probably through the efforts of a small group of dentists who wished to expand their special interest in prosthetics.

When early members of the organization looked back over a span of more than 30 years, they could recall the names of some of those who were most prominent in the establishment of the new association. Among those names, that of Dr. Cloyd Harkins was frequently mentioned. Dr. Harkins and one of his sons, John, appear in the photograph taken at the March, 1943, meeting; another son, William, was the photographer.

Others whose names were mentioned included a Dr. Price of the Pennsylvania State Department of Health; Senator Letzler, who presented a bill to the Pennsylvania legislature to obtain funds for the assistance of children with clefts; Herbert Cooper, D.D.S., founder of the Lancaster Cleft Palate Clinic; Robert Harding, M.D., an early program chairman; and the Presidents, all holders of the D.D.S. degree, who served after Dr. Grace and Dr. Cloyd Harkins: Walter Wright, Frank Fox, Leonard Fletcher, W. J. Robinson, Nathaniel Olinger, and John Harkins. The

first President who was not from the field of dentistry was Dr. Koepp-Baker, who served in the last year of the first decade.

By 1950, the organization had its first publication. Edited by Dr. Koepp-Baker, Volume 1, Number 1, of the *BULLETIN* listed the officers and committee members and provided the names and addresses of the 105 members and of the 25 who were applicants for membership. Among the 105 members were 86 who held the D.D.S. degree, three with the M.D. degree, five with both the M.D. and the D.D.S., four with the Ph.D or Ed.D., six with Master's degrees, and one R.N. Of these members, 53% resided in Pennsylvania. The Executive Council in 1950 had, as its members, five who were dentists, one speech pathologist, and one who held both the M.D. and the D.D.S.

The names of those who were officers and Council members in 1952 are available in existing records; and the list suggests that the President-elect, Carl Boucher, did not become President in 1953 but was replaced by Sumner Pallardy, D.D.S. W. J. Robinson was Secretary-Treasurer during the first decade, and Eugene McDonald was the editor of the newsletter that began in 1951. Members of the 1952 Council were Robert Crumpton, Stanley Tylman, Cloyd Harkins, and Robert Ivy; and, when Dr. Ivy resigned his Council position, Harry Blackwell, the psychologist cited by Margaret Raabe, took his place.

THE ACADEMY OF CLEFT PALATE PROSTHE-SIS. The name chosen for the organization at its founding was representative of the interests of the founders. The term "academy" was in popular use in 1943 to identify professional groups with certain specialties, and the term "prosthesis" was a logical choice in terms of the professional interests of most of the members.

In spite of its name, the American Academy of Cleft Palate Prosthesis was not limited entirely to dental matters. Promotion of the science of the rehabilitation of "the cleft palate cripple," encouragement of cooperation among other specialties of the healing arts group, and stimulation of lay groups were the three purposes cited when the Academy held its first regular meeting in Harrisburg, Pennsylvania, on April 4, 1943. Each of these objectives seems, in historical perspective, quite appropriate to the association that now

exists; and the concept of lay groups, although not developed to any appreciable extent for a number of years, is an important factor in the present Educational Foundation.

According to all reports, the organizational structure of the Academy was relatively informal in its first few years. Dr. Grace, the first President, served two terms. Members must have been elected or appointed to offices and as members of an advisory council in the first several years, but no available records confirm this supposition. The Constitution and By-Laws adopted at the first regular meeting were probably the forerunners of those presented when the Articles of Incorporation were prepared in 1950.

MEETINGS AND PUBLICATIONS. The first five meetings of the Academy were held in Pennsylvania. The site of the meetings in 1943 and 1947 was the Thomas Evans Museum and Dental Institute of Philadelphia. Dental schools at the University of Pittsburgh and Temple University were chosen as the places for meetings in 1944 and 1945; and, in 1946, the Academy met at a crippled children's hospital in Elizabethtown. During the next three years, Annual Meetings were scheduled in New York City, Columbus, and Chicago. Under a new name in 1951, the Association met in Philadelphia; and, in 1952, when the meeting was in St. Louis, some sessions were held at a dental school and some, apparently for the first time, at a hotel.

The program of the Annual Meeting in 1948 indicated that the Academy met for two days and that papers were presented by a psychiatrist, a pediatrician, an otorhinolaryngologist, a speech pathologist, a prosthodontist, and a surgeon. Table clinics showed "speech correction appliances," and a speech by the chief of the Division of Handicapped Children from the New York City Department of Health was an added feature.

Reference to an Executive Committee in the first issue of the newsletter that began in 1951 suggests that the group now known as the Executive Council began, at this early stage, the custom of holding "interim meetings" as well as regular sessions at the times of Annual Meetings. The Executive Committee met in Atlantic City in October of 1950, between the meeting held in Chicago and the one scheduled for Philadelphia in April of 1951.

The preliminary program for the Ninth Annual "Convention," appearing in the second issue of the newsletter, included four general sessions and several table clinics. The topic for the first morning was the basic sciences, and surgery and dentistry were discussed in the afternoon. At an evening session, the Associate Editor of *THE NEW YORK TIMES* addressed the members of the organization. Papers at a session on Saturday morning covered pediatrics, otorhinolaryngology, speech, and psychology. Fourteen speakers appeared on the program. The regular sessions terminated at noon on Saturday, a custom that has continued; but diagnostic teams and table clinics offered opportunities for additional learning for those who remained on Saturday afternoon.

A symposium and 12 papers made up the program in St. Louis, with a total of 20 contributors who discussed basic science, surgery, orthodontics, speech, prosthetics, growth studies, and pediatrics. The participants in the symposium were from the field of dentistry, but the moderator was a speech pathologist. One of the sessions in St. Louis included an address by the President, Dr. Koepp-Baker. A report on that session indicates that "sensuous music" from an adjoining meeting room in the hotel provided competition for the President. Some of the members who sought to stop the disturbance found that the music was being played as an accompaniment to the performance of a well-advertised Egyptian belly-dancer, who was appearing at the hotel. Those who went to complain, it was said, remained to admire.

From the outset, the Annual Meetings presented general sessions that were attended by all of the registrants. "Specialty sessions" were not part of the program in the early years. Rather, members from each of the disciplines heard papers from members of other disciplines. Many found this "generality" appealing and appreciated the cross-fertilization of ideas that could occur at meetings that were primarily interdisciplinary.

FROM ACADEMY TO ASSOCIATION. As the organization recognized that it had outgrown its emphasis on prosthetics, it changed its name, encouraged membership, and became a corporation. All of these events took place in the final years of the first decade.

Rehabilitation was one of the objectives of the Academy, so the new name, "The American Association for Cleft Palate Rehabilitation," did not suggest any great departure from the original purposes. The term "association" was probably considered more appropriate than the word "academy" because of the new emphasis on cooperative management for individuals with clefts. The change in name was concurrent with the changes in qualifications for membership and the preparation of the Articles of Incorporation.

In the new structure, active membership was available to persons holding the degrees of Doctor of Dental Surgery, Doctor of Dental Medicine, Doctor of Medicine, Doctor of Philosophy, or Doctor of Education and to persons "possessing a certificate of professional competence in their fields." The number of members, 33 at the beginning, had increased to 113 by 1950 and, by 1956, five years after the changes in title and membership requirements, had reached 294.

The Articles of Incorporation for the American Association for Cleft Palate Rehabilitation were approved by the Judge of the Court of Common Pleas of Clearfield County, Pennsylvania, on October 8, 1951. The Constitution and By-Laws, as revised to April of 1950, were filed at that time; the name of the "corporation" had been submitted to the Pennsylvania Department of State; and the intent to request incorporation had been advertised in the *CLEARFIELD PROGRESS* and *THE OSCEOLA LEADER*.

The incorporators were required to state that at least three of them were residents of the Commonwealth of Pennsylvania, that they were citizens of the United States, and that they were "of full age." Those who submitted the Articles of Incorporation and met these stipulations were Dr. Cloyd S. Harkins, Dr. William J. Robinson, Dr. Nathan (Nathaniel) Olinger, Dr. William R. Harkins, and Dr. Eugene T. McDonald. All but Dr. Olinger were residents of Pennsylvania, and all but Dr. McDonald represented the field of dentistry.

By the end of its first ten years, the organization that began at a "short course" for dentists had expanded to an association that brought together the fields of dentistry, medicine (primarily surgery), speech pathology,

psychology, and basic sciences. The cooperative efforts of these disciplines expanded the knowledge of the members of the Association and permitted better service for children and adults with "craniofacial anomalies," a term that was not used in the early years of the Association but was certainly implied in Article II of the Constitution. That article cited, as a major objective of the Academy and of the Association, promotion of "the science and art of rehabilitation of persons with cleft palate and associated deformities." Although many changes have taken place since 1943, much of the past has endured to the present.

The Second Decade—1953 through 1962

During its second decade, the organization known at that time as the American Association for Cleft Palate Rehabilitation continued to conduct its business primarily through its Executive Council and committees. It held ten Annual Meetings, expanded its committee structure, and made some changes in publication policies and in the Constitution and By-Laws. The financial status of the Association reflected its growth in membership.

THE EXECUTIVE COUNCILS. In accordance with Article XI of the Constitution in effect in 1953, the Council consisted of 12 members. Six were officers—President, Past President, President-elect, Vice-President, Secretary-Treasurer, and Editor. One person was elected to represent each of four fields: dentistry, medicine, speech, and either psychology or education. Two were elected as members-at-large. The size of the Councils remained the same during the decade from 1953 through 1962, except for a decrease in membership to 11 in 1955 and 1956 as a result of the death of the President and the subsequent vacancy in the office of Past President.

Between 1953 and 1963, 44 members of the Association held positions on the Executive Councils. The member chosen as President-elect served on the Council while holding that office and again as President and Past President. Four of the presidents of the Association during its second decade came from dentistry, three represented medicine, and three were from speech pathology.

The position of Vice-President, an office with a one-year term, was held by five members from dentistry, four from medicine, and

one from speech pathology; but all of the four Secretary-Treasurers during this time period were from speech pathology. The six Editors of the Association were three dentists, two surgeons, and one speech pathologist.

Council members elected to represent the various disciplines or as members-at-large included 12 from dentistry, seven from medicine, five from speech pathology, and one from special education. The Historian was an officer but not a member of the Council; and, although the Historian was to be elected for a ten-year term, three members—two from dentistry and one from speech pathology—served as Historians from 1953 through 1962. The professional affiliations of the 44 officers and Council members were distributed as follows: dentistry, 45.5%; medicine, 27.2%; speech pathology, 25.0%; and special education, 2.2%.

The roster below provides information about the members who served as officers and Council members during the Association's second decade. The first column contains the names, the second column the professional affiliations (D, dentistry; M, medicine; S, speech pathology; E, education). For each person listed, participation as an officer or Council member is shown as follows: C indicates membership on the Council as representative of a discipline or as a member-at-large. Offices are designated by PE for President-elect, P for President, PP for Past President, VP for Vice-President, ST for Secretary-Treasurer, E for Editor, and H for Historian. Years are shown by the last two numbers; thus, 53 indicates 1953.

BERLIN, Asa	S	C58-59-60-62
BLACKWELL, Harry	E	C53-54
BLOOMER, H. Harlan	S	C59-60-61
BUCK, McKenzie	S	C55, ST56-57
CONROY, Cecil	D	PE54, P55
COWAN, James	M	C56-57-58
CRUMPTON, Robert	D	C53-54
DUPERTIUS, S. Milton	M	C55-56-57
FORREST, Stephen	D	C53-54-55, VP56, PE57, P58, PP59
FOSTER, George	D	H53-54
FOX, Alex	D	C57-58-59
GLOVER, Donald	M	PE56, P57, PP58
HARDING, Robert	M	PE53, P54, PP55, E55-56-57
HARKINS, Cloyd	D	C53
HARKINS, William	D	C54-55-56
HIXON, Ernest	D	E59-60-61
HUNNICUTT, Willard	D	VP55

KIEHN, Clifford	M	VP54
KOEPP-BAKER, Herbert	S	PP53
LIFTON, Jacob	D	C56-57-58
LILLYWHITE, Herold	S	C61-62
LINDQUIST, Arthur	D	C57-58-59, VP60
LIS, Edward	M	C60-61-62
LONGACRE, J. Jacob	M	PE59, P60, PP61
McDONALD, Eugene	S	E53-54-55, PE55, P55, P56, PP57
McWILLIAMS, Betty Jane	S	ST61-62
MARCKS, Kerwin	M	C58-59-60
MATTHEWS, Jack	S	ST53-54-55, VP57, PE58, P59, PP60
MORRIS, Hughlett	S	E62
MOSS, Melvin	D	VP62
PALLARDY, Sumner	D	P53, PP54
PARKER, Douglas	M	VP53
PHAIR, Gretchen	S	H57-58-59-60-61-62
PRUZANSKY, Samuel	D	C54-55-56, VP59, PE60, P61, PP62
QUINN, Galen	D	E62
RANDALL, Peter	M	VP61, P62
RICHARDSON, Sylvia	M	C53-54-55
RICKETTS, Robert	D	C60
ROBINSON, W.J.	D	H55-56
SPRIESTERSBACH, D.C.	S	C56-57, ST58-59-60, PE61, P62
SUBTLENY, J. Daniel	D	E58, C61-62
TYLMAN, Stanley	D	C53
VINCENT, Charles	D	C61-62
WEBSTER, Richard	M	VP58, C59-60-61, PE62

In 1957, the Council stipulated that its membership should include approximately equal representation among the dental, medical, and "paramedical" professions. During the following two years, the distribution of disciplines represented by Council members moved in the direction recommended; and, in 1960 and 1961, four members from each of the three "major disciplines"—dentistry, medicine, and speech pathology—made up the membership of the Council. In 1962, when the offices of President and Secretary-Treasurer were held by speech pathologists, the balance was disturbed slightly. The fourth category of professions designated by the Constitution in 1953—psychology or education—did not have representation on the Council after the first two years of this decade.

ANNUAL MEETINGS. During the second ten-year period of the Association's history, Annual Meetings were held in the South (Atlanta), the East (Boston, Philadelphia, and Pittsburgh), the Middle West (Cincinnati, Cleveland, Denver, and Kansas City), and the West (San Francisco). The Annual Meet-

ing held in Montreal, Quebec, Canada, in 1961 was the first held outside the United States.

From 1953 through 1962, the general sessions of the Annual Meetings were held on Fridays and on Saturday mornings. However, after the short courses were introduced in 1955, the meetings occupied Thursdays, Fridays, and Saturday mornings. This modified pattern was maintained throughout the remainder of the decade.

Members of the Association were given an opportunity, in 1956, to indicate their preferences about certain aspects of the Annual Meetings. Responses to a questionnaire sent out by the Association President, Eugene McDonald, suggested that future meetings should be held in late April or early May, that the day preceding the formal opening of the meeting should be reserved for the short courses, that table clinics should be established to demonstrate dental management of cleft palate patients, that scientific exhibits should be kept on display throughout the days of the meeting, that panel discussions and team demonstrations should be part of the program, that time should be provided for discussion following the presentation of each paper, and that the meeting should include both a luncheon and a banquet.

The format for each Annual Meeting was to include short courses on the day before the meeting, five papers on the morning of the first day, three papers following a luncheon on the first day, and six papers on the morning of the second day. Each of the 14 papers, with the discussion that followed it, was to occupy a time period of 30 minutes. A social hour was to precede the banquet held on the evening of the first day of general sessions. The annual business meeting was to be held on the first day of regular meetings; and the time for adjournment on Saturday was to be noon, with a meeting of the new Executive Council following.

Notes accompanying the report of recommendations based on responses to the questionnaire indicated that the Program Committee "should feel free to schedule some presentations for less than thirty minutes, and vice versa" and that an outside paid speaker or a team demonstration should probably be assigned more than 30 minutes of time. The

notes also suggested that an even number of papers from each of the "special areas" should be included on the program.

As the number of papers on the programs increased, this proposed format was modified. The program in 1953 listed 12 papers. By 1961, the number of papers was 24; and the amount of time allocated for each was decreased to 15 or 20 minutes. In 1962, the number of papers was reduced; but, at most of the meetings, the papers presented by individuals or small groups were supplemented by interdisciplinary panel discussions. After 1956, speakers were required to submit copies or abstracts of their papers for possible publication in *THE CLEFT PALATE BULLETIN*.

Programs from three of the ten Annual Meetings held from 1953 through 1962 provide information about the participants in the general sessions. If the programs presented in 1953, 1958, and 1962 were typical, the dental profession provided 24% of the speakers, the medical profession furnished 38%, speech pathology contributed 27%, and other disciplines made up the remaining 10%. The percentages remained relatively constant in the three years for which analyses of program content were made, the only major change occurring in the contributions from speech pathology, which furnished 20% of the speakers in 1953, 33% of the speakers in 1958, and 31% of the speakers in 1962.

Of the 92 different individuals whose names appeared in lists of contributors to general sessions at these three Annual Meetings, only four participated on programs in more than one of the three years. Officers and Council members contributed more papers in 1953 than they did in the other two years, representing 17% of 53 program participants in 1953 and 7% of 58 and 62 program participants in 1958 and 1962.

The first short course to be offered by the Association was given on the day preceding the opening of the general sessions of the Annual Meeting in 1955. During the following years, short courses were featured events, considering such topics as velopharyngeal incompetency, growth and development of the craniofacial area, diagnosis and prognosis in speech for the child with cleft palate, anatomy and physiology of the oral structures, the

pathogenesis of clefts, and, in 1961, a review of the progress made in the habilitation of cleft lip and palate in the preceding decade. The ten individuals who presented short courses in 1953, 1958, and 1962 represented dentistry, medicine, speech pathology, and speech science, with half of the lecturers coming from speech pathology.

No fee was charged for any of the short courses, and attendance was probably good. However, no information about the number taking advantage of the short courses appeared in reports during the period from 1955 through 1962.

Social events at the ten Annual Meetings included luncheons, banquets at which presidential addresses were sometimes given, and open houses sponsored by centers in cities in which the meetings were held. The social activities during the second decade of the Association were less elaborate than are those of the present time, but the costs of the Annual Meetings were minimal. Members paid no registration fee for the Annual Meetings, but they were assessed \$6.50 in 1957 for the banquet held in Cleveland. Nonmembers were required to pay a registration fee of \$3, but students were admitted to the general sessions without charge.

Although attendance at Annual Meetings held from 1953 through 1962 was not reported consistently, variations in Annual Meeting registrations were probably the result of the locations of the meetings. For example, attendance increased from 127 at the 1953 meeting in Atlanta to 214 when the Annual Meeting was held in Pittsburgh in 1954. In 1953, 26% of the members of the Association registered at the Annual Meeting; in 1954, registration of members represented 48% of the membership, a figure that should not be surprising in consideration of the large number of members who lived in Pennsylvania. Registration by members of the dental profession was 50 (39% of the total registration, including members and nonmembers) in 1953 and 79 (37% of the total registration) in 1954. Representatives of the medical profession totaled 22 (17% of the total registration) in 1953 and 53 (25% of the total registration) in 1954. In 1953, 29 representatives of speech pathology (23% of the total registration) attended the Annual Meeting; and, in 1954, speech

pathology was represented by 71 registrants (33% of the total registration). Representation from other disciplines decreased from 20% of the total registration in 1953 to 5% in 1954. According to report, a total of 189 attended the Annual Meeting held in Cleveland in 1957. Attendance figures for other years were not available.

COMMITTEES. Many of the activities of the Association during this decade were conducted by committees under the general direction of the Executive Council. The five committees appointed in 1953 increased to 15 in 1959 and then decreased in number to 13 in 1962. Some of the committees functioned throughout the ten-year period. Others appeared briefly and then were not reported again, and some that came into existence during the years from 1953 through 1962 continued beyond that period. In all, 26 different committees were appointed at some time during the second decade.

Three committees—Nominating, Membership, and Time and Place—functioned in each of the ten years. Committees appointed to plan programs and short courses for the Annual Meetings are listed in directories and Association documents from 1954 through 1962, committees on local arrangements were cited from 1957 through 1962, and a Committee on Budget functioned for the last eight of the ten years.

Among additional committees responsible for Association affairs from 1953 through 1962 were several that had only short lives. An Advisory Committee served in 1953 and 1954. A group under the title of "Associate Editors" functioned in 1957 and was then succeeded by an Editorial Board from 1958 through 1962. An Auditing Committee, apparently required at that time, was appointed in 1958 but not in succeeding years. In 1959 and 1960, a Long-range Planning Committee was in existence; but that committee was not appointed again until 1964.

During the first four years of the decade, a Committee on Gifts was appointed annually. A Committee on Future Conventions served for three years, as did a Committee on Registry of Anatomical Materials. A Committee on Research was listed from 1955 through 1960; and, in 1957, the President appointed a Committee on Insignia and Certification that was apparently dissolved after one year.

Committees responsible for abstracts for *THE CLEFT PALATE BULLETIN* appeared in listings from 1958 through 1962, and an Executive Committee functioned in 1961 and 1962.

During 1957, a Foundation Committee explored the feasibility of establishing a non-profit educational organization that would be affiliated with the Association. However, investigation of the tax status of the Association led to a decision, in 1958, to abandon the plan for a foundation. Not until 1973 did the Association reconsider the creation of an educational foundation.

In 1961, a Committee on Honors and Awards was established; and that committee continued to function beyond 1962, making its first award in 1963. Similarly, the Committees on By-Laws, International Relations, and Public Relations, begun after 1953, were extended beyond the ten-year period that ended with 1962.

One of the most significant of the committees established between 1953 and 1962 was the Committee on Nomenclature. First recommended at the Annual Meeting in 1954, this committee was charged by the incoming President, Cecil Conroy, with investigating "the feasibility of developing standardized cleft palate nomenclature;" and the Executive Council indicated that "each of the specialties of the Association" should be represented on the committee.

The Nomenclature Committee presented a report to the Executive Council in 1956 and was instructed to continue its work. In 1957, the committee reported that it had made a preliminary classification of clefts and that it was starting work on a glossary. The Council allocated \$200 for the work of the committee and urged its members to consult with the American Medical Association about terms to be used in the committee's report. The 1958 Executive Council, after receiving a report from the Committee on Nomenclature, instructed it to continue until its work on classification was completed. The Council also requested that the committee complete the glossary it had begun, but no evidence of the completion of the glossary appeared in any of the Council's minutes.

In July of 1959, *THE CLEFT PALATE BULLETIN* carried a report from the Committee on Nomenclature that presented a sys-

tem of morphological classification of clefts of the orofacial area. Guided by the principle that the purpose of any classification was to facilitate recording and communication of information, the committee categorized clefts as prepalatal and palatal, specified the incisive foramen as the dividing point between these clefts, and recommended descriptions that cited the location and extent (by thirds) of the various types of clefts. Line drawings illustrated clefts of the prepalate (cleft lip, cleft alveolar process, and cleft of both lip and alveolar process), clefts of the palate (cleft soft palate, cleft hard palate, and combination of these clefts), clefts of both prepalate and palate, and other facial clefts.

Members of the Nomenclature Committee that reported in 1959 were Cloyd S. Harkins from dentistry, Robert Harding and J. J. Longacre from medicine, Asa Berlin from speech pathology, and Richard Snodgrass from anatomy. The committee and the Executive Council recommended presentation of this new classification system to the membership of the Association for consideration and trial. A revised version of the committee's report, representing "a significant change and improvement," appeared in the *BULLETIN* in January of 1960; and the committee, at that time, pointed out that the plan they had proposed permitted "recording by embryological antecedents as well as the major area of anatomical defect." The committee suggested that communication could be enhanced "by describing the clinical defects in terms of the involved parts (lip, alveolar process, hard palate, soft palate)." The line drawings were presented again in this supplementary report.

In October, 1961, the *BULLETIN* carried another statement from the Committee on Nomenclature, recommending changes that should be made in the material in the *BULLETIN* of January, 1961. No evidence could be found of formal acceptance of this system of classification by the membership of the Association, although many members may have adopted it.

Whether coincidentally or by intent, the same issue of *THE CLEFT PALATE BULLETIN* that carried the first report from the Nomenclature Committee included an article by surgeons Richard Stark and Desmond Kernahan that suggested a slightly different dif-

ferent classification system. This system, "based upon newer concepts of embryology," categorized clefts as those of the primary palate, of the secondary palate, and of both primary and secondary palates. This embryological classification system agreed with the one recommended by the Committee on Nomenclature in considering the incisive foramen as the dividing point between deformities of the lip and those of the palate.

In 1953, 20 members of the Association were appointed to the five committees that functioned in that year. By 1958, the Association had 14 committees, with a total membership of more than 50. In 1962, 54 members of the Association served on committees. Establishment of the Abstracts Committee, which usually had a membership of more than ten, was responsible, in part, for the increase in the number of members serving on committees after 1957.

PUBLICATIONS. Until December of 1953, the American Association for Cleft Palate Rehabilitation published a quarterly *NEWSLETTER*. The first issue of *THE CLEFT PALATE BULLETIN*, which appeared in January of 1954, carried the following note from the Editor, Eugene McDonald: "With this issue we are changing from a newsletter-type publication to a booklet form and changing the name from 'NEWSLETTER' to 'Cleft Palate Bulletin.' Actually, this name was used for the Association's first publication, an annual issue."

During the ten-year period from 1953 through 1962, the total number of pages in the *NEWSLETTER* (Volume 3) and *BULLETIN* (Volumes 4 through 12) approximated 700. A monograph supplement published in May of 1954 contained 63 pages. Minutes of the meetings of the Executive Council and the membership usually appeared in the July issue each year, and the program for each Annual Meeting was in the April issue. From time to time, editorials and messages from Association presidents were included in the *BULLETIN*; and three indices were published during the ten-year period, one in 1954 for the first four volumes, one in 1958 for Volumes 5 through 8, and one in 1960 for Volumes 9 and 10.

Only a few articles that could be identified as original contributions and not as abstracts of papers presented at Annual Meetings ap-

peared in the publications of the Association during the second decade. One was in the 1953 NEWSLETTER; five appeared in issues of the BULLETIN between 1957 and 1963. The reports from the Committee on Nomenclature were featured in 1959, 1960, and 1961; and, in 1962, one issue of the BULLETIN listed 48 research projects concerned with anomalies that were being planned or were in progress at that time. In 1953 and again in 1954 and 1960, the NEWSLETTER or BULLETIN carried an article based on research undertaken by a graduate student. Two of the three papers came from Master's degree studies; the degree status of the third was not identified. In 1962, one issue of the BULLETIN provided a list of eight theses and dissertations in progress that dealt with craniofacial anomalies. These studies were being undertaken at such universities as Michigan, Washington, Indiana, Northwestern, Florida, and Iowa.

In May of 1954, the Association published a Monograph Supplement to THE CLEFT PALATE BULLETIN. Titled "Heredity and cephalo-facial growth in cleft lip and/or cleft palate patients," the monograph was the result of a project at the University of Pennsylvania and the Children's Hospital of Philadelphia and was funded in part by a grant from the United States Public Health Service. The author, Richard Snodgrass, Ph.D., was Associate Professor of Anatomy at Temple University when the monograph was published.

The Executive Council, at its meeting in May of 1954, directed that the monograph supplement be sent to members of the Association without charge, that single copies be made available to nonmembers "at a charge of one dollar," and that discounts be allowed for the purchase of more than ten copies of this publication. In a preface to the monograph, the Editor of the Association spoke of it as the "first Monograph" and suggested that the Association was about to embark on an expanded publication program. However, no additional monographs were published.

Throughout the decade, the quarterly publications of the Association devoted most of their pages to abstracts of papers presented at Annual Meetings and of articles from professional journals. A total of 144 abstracts of papers from Annual Meetings appeared in

the forty issues published in the ten-year period, as few as four such abstracts appearing in 1954 and as many as 49 in 1959.

Abstracts of articles from journals in fields related to the interests of Association members numbered almost 500 in the NEWSLETTER and BULLETIN from 1953 through 1962. In 1953, 14 such abstracts were included; and, in 1961, the number of journal abstracts reached 94. In addition, the committee responsible for abstracts in 1960 included, in the October issue of the BULLETIN, brief reviews of articles published in professional journals prior to 1956, to call attention to articles that had been overlooked by previous Abstracts Committees and to "provide the index of the BULLETIN with broader coverage of the literature."

Members of the Association received the NEWSLETTER or BULLETIN as one of their rights of membership. Subscriptions to the BULLETIN from nonmember individuals, from institutions, and from libraries were \$3 per year; and Treasurers' records of payments suggest that subscribers to the BULLETIN numbered 97 in 1959, approximated 126 in 1960, and reached almost 150 in 1961. By 1962, just before the BULLETIN became THE CLEFT PALATE JOURNAL, the number of subscriptions was 235.

Minutes of meetings of the Executive Council indicated that, as early as 1951, the Council intended that a membership directory be published regularly. The DIRECTORY issued for 1954-1955 provided each member's name, degrees, and address. In 1962, the Council approved the Editor's suggestion that future directories should contain more detailed information, including name, degrees, institutions and dates, area of professional interest, certification, academic rank and institution, preferred mailing address, and year of initial membership in the Association. That pattern was followed in succeeding years.

CONSTITUTION AND BY-LAWS. Insofar as available records indicate, the American Association for Cleft Palate Rehabilitation had a Constitution and By-Laws in 1953. This document included a preamble that stated, as the purpose of the organization, "to stimulate specialistic and public interest in, and a more exact knowledge and improved practice of, the science and art of rehabilitation of persons with a cleft palate and associated deformities

of the mouth and face." The 14 articles in the 1953 Constitution dealt with the name of the Association, its "objects," its membership, the officers, the duties of each officer, the two standing committees (the Executive Council and the Membership Committee), the powers of the Association, procedures for its dissolution, and ways of amending the Constitution. The By-Laws contained articles on meetings, dues, committees, amendments to the By-Laws, and rules of order for meetings.

In 1953, the Executive Council instructed the "Constitution Committee" to meet prior to the business meeting of the Association to prepare recommendations for changes in the Constitution; but, at the business meeting, action on the proposed changes was tabled. However, no evidence of the existence of a "Constitution Committee" appeared in the committee listings for 1953; and the first Committee on By-Laws was not appointed until 1957. At that same time, the Council directed that each member of the Council should receive a copy of the Constitution and By-Laws.

Major changes in both Constitution and By-Laws took place in 1958. Although the Constitution (Article XIV) included specific directions for amendments and required a mail ballot and postponement of action on amendments "for not less than one year," the members at the business meeting approved a change in Article III of the Constitution that established two classes of membership—Members and Honorary Members—in place of the three classes—Members, Associate Members, and Honorary Members—that existed earlier.

At the business meeting on April 25, 1958, the members of the Association changed the By-Laws to include designation of the official Association year as January 1 to December 31, to establish registration fees for the Annual Meetings, and to prohibit the scheduling of meetings in any locations in which "discriminatory practices would limit the professional or social activities of any Association Member or guest."

Additional changes in the By-Laws provided that no dues would be charged for Honorary Membership, that membership might be terminated for nonpayment of dues after a specified lapse of time, and that special assessments might be made on recommenda-

tion of the Council and approval by three-fourths of the members voting. Through changes in Article III of the By-Laws, the number of members of the Nominating Committee was modified from six to five; and a Budget Committee was established. Articles added to the By-Laws dealt with publications and termination of membership for nonpayment of dues. All of the amendments proposed for the By-Laws were approved by members present at the business meeting, thus increasing the number of articles in the By-Laws from five to eight.

At its business meeting in 1959, the Association made several additional changes in the By-Laws. The Auditing Committee required by Article VI was deleted, and a Program Committee was added. Specific costs for single copies of the BULLETIN and DIRECTORY were removed from Article V, and Article VI was revised to include procedures for admission to membership as well as for termination of membership.

Minutes of the meetings of the Executive Council in 1960 indicate that the Council decided to withdraw any considerations it had made for changes in the By-Laws article on honorary membership. However, that Council recommended an increase in membership dues from \$10. to \$15. per year; and the increase was approved at the business meeting. Apparently, the Council also proposed a revision in Article XI of the Constitution to increase the number of members-at-large on the Council from two to three. This revision was submitted to the members by mail prior to the business meeting held in 1961 and was approved in that year.

After considerable discussion, the Council decided, in 1961, to recommend a change in the name of the Association to The American Cleft Palate Association; and revisions in Article I of the Constitution were proposed to reflect this action. Redefinition of honorary membership and the addition of life membership, requiring changes in Article III of the Constitution, were also presented for consideration but not for vote in 1961. Modifications in the By-Laws, by action taken at the business meeting on May 6, 1961, added a description of procedures for admitting life members and provided for a Committee on Honors and Awards.

When the constitutional changes recom-

mended in 1961 came to a vote in 1962, the membership approved the change of name of the Association and the establishment of life membership. As a result of changes in By-Laws at that same meeting, the Association's membership year was from January 1 to December 31, the "tenure year" for officers was from one annual election to the next, and the fiscal year began on April 1 and terminated on March 31. Article X was added to the By-Laws to provide for procedures in awarding the Honors of the Association.

Changes in the Constitution, proposed in 1962 but not voted on until 1963, added the office of Vice-President-elect, thus increasing the membership of the Executive Council to 14. Members at the business meeting in 1962 also deleted the limitation of the term of the Editor of the Association.

MEMBERSHIP AND FINANCES. By 1953, the membership of the Association had grown from the original 33 members to a total of 227. The 1954-1955 *DIRECTORY* listed 319 members; and reports from Secretary-Treasurers stated that the Association had 498 members in 1958, 547 in 1960, 498 in 1961, and 635 by 1962. Thus, in its second decade, the Association increased its membership by 408 and was almost three times as large at the end of the ten-year period as it was at the beginning.

Some of the publications of the Association included information about the professional fields represented by members. The 1954-1955 *DIRECTORY*, for example, showed that members of the dental profession made up 60% of the Association's members, that the field of medicine provided 25%, that speech pathologists and audiologists represented 13%, and that six members came from other disciplines. In 1960, the Secretary-Treasurer's report indicated that dentistry provided 50% of the members, while 31% were in the field of medicine, 18% were in speech pathology-audiology, and less than 1% came from other disciplines. In 1962, the distribution of members among the various professions had changed further to include 44% from dentistry, 34% from medicine, 21% from speech pathology-audiology, with representatives from other disciplines again at less than 1%.

The geographic distribution of the mem-

bers was reported in the 1954-1955 *DIRECTORY* and appeared in other records in 1959, 1960, and 1961. Members in 1955 were from 38 states and the District of Columbia and from Italy, the Philippines, and Turkey. More than half of the members at that time resided in Illinois, New York, Ohio, or Pennsylvania.

In 1959, members represented 40 states, the District of Columbia, Canada, and the Philippines. More than 20 members resided in each of seven states, and these 284 members represented 56% of the membership. The same pattern of geographic distribution was apparent in 1960, when members came from 41 states, the District of Columbia, Canada, and Puerto Rico and when 52% of the membership resided in seven states. By 1962, as the second decade came to a close, members were in 41 states, the District of Columbia, Canada, Puerto Rico, and the Philippines; and 20 or more members lived in each of eight states. Throughout this period, the largest number of members of the Association resided in Pennsylvania, members in that state exceeding 90 in each of the four years for which information was tallied. New York was the residence of the next largest number of members; and California, Florida, Illinois, Michigan, and Ohio were represented by 20 or more members after 1959.

The increase in membership and in dues during the period from 1953 through 1962 brought about a change in the financial status of the Association, which was, however, apparently financially solvent at the start of the decade. On April 26, 1953, the Council learned from the Secretary-Treasurer that, in the previous year, income from membership dues was \$1,990, expenditures were \$1,725.02, and the bank balance was \$1,853.77. By January of 1956, assets had increased to more than \$2,000; and, in succeeding years, they grew from almost \$4,000 in 1957 to more than \$6,000 in 1958, and more than \$8,000 in 1959. In the next few years, the balance made an even more appreciable increase, reaching almost \$19,500 by 1962.

The relatively low costs of publishing the *BULLETIN*, the increase in membership and in dues, and the income from the Annual Meetings were probably responsible for the financial growth of the Association. By 1962, the Council was faced with the problem of

justifying this accumulation of funds by a nonprofit organization; and the Council's decision to use some of the money to finance a new and more costly publication, *THE CLEFT PALATE JOURNAL*, must have been influenced by the fact that the Association was in a relatively strong financial position.

As might be expected, the amounts budgeted for the work of the Association grew each year. In the early part of the second decade, yearly contributions of \$25 were made to the National Society for Medical Research and to the International Society for the Welfare of Cripples. These expenditures were stopped after two or three years. The major items in the budgets were for the office of the Secretary-Treasurer, for the Editor, for the program at the Annual Meeting, and for contingencies.

In 1959, the Secretary-Treasurer was allotted \$1,800; but, by 1962, this allocation had increased to \$2,800. The Editor of the Association had a budget of \$500 in 1954 and 1955, and this amount was raised to \$1,400 in 1956 and to \$3,200 by 1962. The contingency fund remained at or near \$500 each year.

As certain committees assumed increased responsibilities, they were given various amounts for face-to-face meetings. The Committee on Nomenclature, for example, was awarded \$200 in 1957; and that amount was increased to \$500 in 1962. The Long-Range Planning Committee that functioned in 1960 and 1961 received \$500 during each of those two years. The Committee on Registry of Anatomical Materials had a budget of \$500 in 1958 and again in 1960. The Executive Committee appointed in 1961 was given \$600 to support its work in 1962.

The burden of managing the finances of the Association rested on the Secretary-Treasurer, who was bonded after 1955 in an amount that covered the money for which he or she was responsible. The Executive Council approved the budget each year and received the reports of the Secretary-Treasurer, and a Budget Committee assisted planning for expenditures.

The second decade of the Association did not seem to bring any serious financial difficulties; rather, the assets grew consistently. Thus, during the years between 1953 and

1963, the Association was able to begin an expanded program of publication and to offer some financial support to International Congresses and the Educational Foundation when this assistance was needed in the next decade.

SUMMARY. Many changes in the Association took place during its second decade, and the organization made noticeable progress. Membership on the Executive Council changed to include representation of the three major disciplines in the Association, although the fields of psychology and education lost representation.

The Annual Meetings were held in a variety of locations throughout the United States, and one was held in Canada. The format of the program was changed to include short courses on the day preceding the first general session, and the contributors to the program increased in number and in balance among the "major disciplines."

The committee structure was modified throughout the ten-year period, and three of the committees made special impacts during the period and in the decades following. The Foundation Committee that served in 1957 was not successful in establishing an educational affiliate for the Association, but it may have anticipated the American Cleft Palate Educational Foundation that was established in 1973. The Committee on Honors and Awards did not present any candidates for special recognition until 1963, but it laid the groundwork for later awards called the Honors of the Association and the Distinguished Service Awards. The Committee on Nomenclature presented the classification system that has been used extensively since 1959.

The earliest quarterly publication of the Association, the *NEWSLETTER*, became *THE CLEFT PALATE BULLETIN* during this time period. Although the *BULLETIN* made little change in content through 1962, plans for the enlarged *CLEFT PALATE JOURNAL* were begun during the second decade.

Extensive modifications were made in the Constitution and By-Laws after the appointment of the By-Laws Committee in 1957. These changes altered the classes of membership, increased the annual dues, added the office of Vice-President-elect, and provided for the change in the name of the organization

to The American Cleft Palate Association early in the third decade.

The third decade—1963 through 1972

In 1963, the Association had a new name and, during the third ten-year period of its existence, added two members to its Executive Council, held meetings on both coasts and outside the United States, sponsored an international congress, established several new committees and abandoned others, started a new journal, began publication of a research bibliography, revised its Constitution and By-Laws, and established its financial base more firmly by increasing its membership to more than 1,000 and its subscribers to more than 1,300. In addition, the Association started a program of honors and service awards, considered changing its name again, began to think about the need for a national office, and instituted plans for an educational foundation.

THE EXECUTIVE COUNCIL. This group, cited in the Constitution as one of two standing committees, increased in size from 12 to 14 members during the third decade. The office of Vice-President-elect was established in 1963, to provide assistance to the Vice-President, who had been assigned the role of program chairman for the Annual Meeting several years before. The office of Secretary-Treasurer became two offices in 1968 to permit better allocation of responsibilities.

The President, Past President, President-elect, Vice-President, Vice-President-elect, Secretary, Treasurer, Editor, the three members-at-large, a representative of dentistry, and a representative of medicine continued to serve on the Council. However, by 1968, the Council member who had previously been designated as representing "speech, psychology or education" was replaced by a Council member who represented speech pathology-audiology, probably in recognition of the limited number of members from psychology and education and the increasing number from speech pathology and audiology. The Historian, an elected officer of the Association, was not a member of the Council in this decade.

The total number of members who served as officers and Council members from 1963 through 1972 was 39. Many new names ap-

peared on the Council roster, although ten members continued to hold office or to serve as Council members from the second decade to the third. The professional affiliations of the 39 officers and Council members were distributed as follows: 33% from dentistry, 31% from medicine, and 36% from speech pathology-audiology. This distribution was more nearly equal than that of the previous decade, showing a decrease in the percentage representing dentistry and an increase in representation from medicine and from speech pathology-audiology.

The following roster provides information about the members who served as officers and Council members during the Association's third decade. The professional affiliations in the second column are abbreviated to D for dentistry, M for medicine, and S for speech pathology or audiology. Membership on the Executive Council as representative of a discipline or as a member-at-large is indicated by C in the third column, and offices are abbreviated as in a previous listing. Again, years are shown by the last two numbers, 68 indicating 1968.

ADUSS, Howard	D	T68-69, C70-71-72
ALLEY, Norman	D	C63-64-65-66
BERLIN, Asa	S	C63-64, H66-67-68-69-70-71-72
BLAKELEY, Robert	S	VPE69, VP70
BZOCH, Kenneth	S	VPE64, VP65, ST66-67, S68-69-70-71
CHASE, Robert	M	C63-64
COURSIN, David	M	C71-72
CRAMER, Lester	M	C65-66-67
CRONIN, Lester	M	C68-69-70
CURTIN, John	M	VPE66, VP67, C68-69-70, PE71, P72
GEORGIADIS, Nicholas	D	C69-70-71
HAHN, Elise	S	VPE65, VP66, PE70, P71, PP72
HARDING, Robert	M	EE70, E71-72
KREMENAK, Charles	D	C72
LANEY, William	D	VPE70, VP71, PE72
LEWIN, Michael	M	C65-66-67-68
LILLYWHITE, Herold	S	C63, PE67, P68, PP69
LINDGREN, Verner	M	C71-72
McWILLIAMS, Betty Jane	S	ST63, PE64, P65, PP66
MAZAHARI, Mohammad	D	VP63, C64-65, PE66, P67, PP68
MORRIS, Hughlett	S	E64-65-66-67-68-69-70
MUSGRAVE, Ross	M	VP64, C65-66-67, PE68, P69, PP70
OLIN, William	D	C66-67-68, PE69, P70, PP71

PHAIR, Gretchen	S	H63-64-65
PHILIPS, Betty Jane	S	C72
POWERS, Gene	S	VPE71, VP72
RANDALL, Peter	M	C63-64, PE65, P66, PP67, VPE68, VP69
ROCH, Harry	D	C63-64-65
ROSEN, Morton	D	T70-71-72
ROSENSTEIN, Sheldon	D	C67-68-69
SHELTON, Ralph	S	C70-71-72
SMILEY, Gary	D	S72
SPRIESTERSBACH, D.C.	S	PP63
SUBTELNY, Daniel	D	PE63, P64, PP65
SUBTELNY, Joanne	S	C66-67-68-69
TRIER, William	M	VPE72
WARREN, Donald	D	VPE67, VP68, C69- 70-71
WEBSTER, Richard	M	P63, PP64
WELLS, Charlotte	S	ST64-65

The several Executive Councils made a number of important decisions during this decade. The actions taken and the recommendations to the membership fell into several categories. Changes in terms of office, modifications in procedures for Annual Meetings, charges to committees, decisions about publications, revisions in the Constitution and By-Laws, concerns about membership and finances, further consideration of a change in the name of the Association, initiation of plans for a national office and an educational foundation, and even the choice of an official insignia—all these and more were discussed by the Councils and then, when appropriate, referred to the membership.

Before the offices of Secretary and Treasurer were separated, the Council had stipulated that the Secretary-Treasurer should have a three-year term. When the two offices were created, provisions were made for rotation of terms for the Secretary, Treasurer, and Editor; and, by 1971, the Constitution indicated that these three officers were to be elected every third year, with no two of their terms ending in the same year.

In considering Annual Meetings, the Councils set a pattern of placing abstracts of all papers in the printed programs for the Annual Meetings after 1963; and, although the 1971 Council accepted a recommendation from the Long-Range Planning Committee for evaluations of Annual Meeting programs each year, these evaluations do not appear in available documents if they were made. Funds were allocated to the Program Committee for

invited speakers at the Annual Meetings during part of this ten-year period, through action by one of the Councils, which also recommended that any charges made for commercial exhibits at these meetings be determined yearly. In 1972, scheduling of scientific exhibits was continued as a responsibility of the Program Committee; but arrangements for commercial exhibits were to be made by some other group or individual.

In response to a recommendation from the Long-Range Planning Committee, one Council instructed the Program Committee to increase the number of days for the Annual Meeting in 1970 from the customary two and one-half days to three and one-half. The longer Annual Meeting was held in 1970 but not in 1971 nor 1972.

The Councils depended, to some extent, on suggestions that came from the Long-Range Planning Committee that was established in 1964. During the period from 1963 through 1972, several *ad hoc* committees were created by Council action, some committees were disbanded, and some were given different assignments by the Councils.

After THE CLEFT PALATE JOURNAL began in 1964, the Councils continued to be concerned with that new publication. The Council in office as the JOURNAL began its third year replaced Charles Vincent, from dentistry, with William Laney, D.M.D., as coeditor with Peter Randall, M.D.; and the 1966 Council approved a plan to expand four issues of the JOURNAL in 1969 and 1970 to accommodate papers presented at the 1969 International Congress. In 1970, the Council installed the second editor of the JOURNAL, Robert Harding, M.D., as the successor to Dr. Hughlett Morris.

By the middle of the third decade, the Councils had approved a plan to publish a research bibliography that would be sent to all ACPA members. This publication, under the sponsorship of the Nomenclature Committee at first, was made a responsibility of the Editor of the Association in 1970 and was sent, after that year, only to those members who requested it. One Council made changes in the MEMBERSHIP DIRECTORY of the Association, approving inclusion of a list of cleft palate teams in that publication, "without endorsement from the Association;" an-

other removed the team listings from the **DIRECTORY** published in 1971. In addition, after the **DIRECTORY** had been a semi-annual publication for some time, the Council authorized the plan to publish the **DIRECTORY** every two years.

Toward the end of the third decade, the Councils showed special interest in the publication of materials for parents of children with clefts and for laymen. Whether or not this interest was responsible, in any part, for the eventual establishment of the American Cleft Palate Educational Foundation is conjecture; but Council minutes for 1970 and 1971 show that the leadership of the Association was concerned with parent and public education.

The revisions made in the Constitution and By-Laws of the Association between 1963 and 1973 were initiated, for the most part, by the Executive Councils. Many of the articles in the Constitution were modified in some way during the third decade, and articles in the By-Laws underwent extensive changes as a result of Council recommendations.

When the Association decided to publish **THE CLEFT PALATE JOURNAL**, it entered, knowingly, into a period of deficit spending, using accumulated funds to finance the new, more costly publication. The Executive Councils responsible for Association finances after the **JOURNAL** began recognized the need for expenditures to support the publication and encouraged recruitment of new members for the Association to bolster its finances.

The Executive Councils dealt with other matters, too, during the third ten-year period of the Association. At one point, the Council directed that a plaque be prepared for presentation to each Past President. On another occasion, the Council gave careful consideration to the adoption of an official insignia for the Association, studying more than 50 designs before choosing the one that became the official ACPA logo. Just before the time of the Second International Congress, scheduled for Copenhagen in 1973, the Council established an award for the best student paper presented at the 1973 Annual Meeting, the award to be transportation to Copenhagen for the Second International Congress. Insofar as records indicate, no winner was chosen.

Toward the end of the decade, the Councils gave some thought to three matters that did not reach the action stage until after 1972. These were the possibility of changing the name of the Association, the need for a central office and an administrative secretary for the Association, and the potential value of an educational foundation.

With all of these matters demanding attention, the Councils of the Association, early in the third decade, resumed "interim meetings," usually held in the Fall between one Annual Meeting and the next, to have time for discussions that could not be completed in the day or so preceding the Annual Meeting. After 1970, these interim meetings were held regularly; prior to that time, they were held only when called by the President. The Long-Range Planning Committee, which was established in 1964, held a meeting following each interim Council meeting; and, at its meeting in 1971, the Long-Range Planning Committee discussed the concept of an educational foundation.

ANNUAL MEETINGS. Most of the Annual Meetings held during the third decade followed the pattern that had been in effect for a number of years. However, the meetings in 1966, 1969, and 1970 deviated from the custom of scheduling general and special sessions on Thursdays and Fridays and on Saturday mornings, of meeting in the United States, and of presenting all papers and discussions in English.

Mexico City was the site of the Twenty-fourth Annual Meeting, held in 1966, the second to be held outside the United States. At this meeting in Mexico, simultaneous translations of presentations at all sessions were in Spanish and English; and the printed program carried abstracts of papers in both languages. The program was planned by a committee of the Association, but guest co-chairmen were appointed from Mexico to the Program Committee as well as to committees on local arrangements and public relations. This meeting followed the usual time-pattern, sessions being held throughout the day on April 14 and 15 and on the morning of April 16, 1966.

The Twenty-seventh Annual Meeting of ACPA was also the 1969 International Congress on Cleft Palate, and this meeting was

very different from those usually conducted by the Association. It was international in scope, was longer than previous Annual Meetings, was multilingual, and required several years of preparation before its opening in Houston, Texas, on Monday, April 14, 1969.

As early as 1965, the Long-Range Planning Committee began to work toward an international meeting, which was conceived and organized "to involve the world-wide community of those concerned with the problem of cleft palate in the interdisciplinary exchange of data and views that has been the unique characteristic of the American Cleft Palate Association." Although reference has been made frequently to the "First International Congress," the planners did not use the word "first" in any announcements nor in the printed program.

Duane C. Spriestersbach, Ph.D., was chosen by the Council to serve as the Secretary-General for the Congress; and an Assistant to the Secretary-General, three Assistant Secretaries-General, and committees were appointed to conduct registration, manage public relations, organize the programs, and plan social events.

Financial support for the Congress was sought from foundations and associations; and funding was received from the National Institute of Dental Research, the Burroughs Wellcome Foundation, and anonymous donors. Additional financial assistance came from the response of the members of the Association to assessments levied during the years preceding the Congress.

Announcements of the Congress and invitations to submit papers were distributed world-wide to almost 5,000 individuals and organizations. From more than 300 papers submitted, 162 were accepted for presentation at one of the 22 sessions scheduled. In addition, 107 papers were listed by title only in the printed program. Three speakers were invited to appear at general sessions, and specialty sessions and a colloquium were planned.

The format of the Congress program included the usual general and specialty sessions, film forum, and exhibits. However, the General Sessions differed in several respects from those at other Annual Meetings. The Congress opened with a formal ceremony; flags

of the nations were displayed; simultaneous translation was provided in English, French, German, and Spanish; and abstracts of papers were published in the four languages. The social events at the Congress were more elaborate than those in previous years, including a reception on the evening prior to the opening session, a Texas-style barbecue, a performance by a mounted patrol, and a trip to the Astrodome for a baseball game.

Papers were presented at the Congress by representatives from 26 countries that ranged alphabetically from Australia and Brazil to the United Arab Republic and West Germany and geographically from Houston, Texas, to Japan, South Africa, and Iran. Those listed as presenters at the General Sessions included 48 from the field of medicine, 19 from dentistry, 12 from speech pathology, and 17 from other fields. The Congress program showed 408 names in the list of participants, including chairmen and cochairmen and secretaries at general and specialty sessions, the essayists, and coordinators and speakers at the colloquium.

The total registration for the 1969 International Congress was 891. Of these, 185 represented the field of dentistry, 184 were from medicine, 167 were speech pathologists or audiologists, 25 came from other disciplines, 33 were unclassified, 217 were students, and 80 were spouses of delegates. Those attending the Congress came to Houston from 43 of the United States, the District of Columbia, and 33 countries.

Financially, the Congress was successful. The special assessment of ACPA members had brought money to supplement the grants made to the Congress, exhibits and advertising brought in additional funds, and registration fees totalled almost \$21,500. The greatest expense for the Congress was for the provision of simultaneous translation of papers presented at the general sessions and translations for the published abstracts.

From the outset, the Association planned to publish many of the papers presented at the Congress. A separate publication was considered at one time, but the final decision was to present Congress papers in *THE CLEFT PALATE JOURNAL*, expanding the 1969 and 1970 issues of that journal to include these papers.

In 1970, when the Annual Meeting was held in Portland, Oregon, the program began on Wednesday and occupied two and one-half additional days, through Saturday morning. This increase in time may have resulted from the proximity of the Portland meeting to the four-day International Congress, but the 1970 time-pattern was not repeated in the remaining two years of the third decade.

In accordance with a regulation set by the Executive Council in 1963, all printed programs after that year contained abstracts of papers presented at Annual Meetings. Copies of papers were requested for possible inclusion in THE CLEFT PALATE JOURNAL after that publication began in 1964.

The printed programs of some of the Annual Meetings in the third decade contained statements of fees for attendance. At most of the meetings, Association members and students did not pay fees; but the charges made to nonmembers increased from \$3 in 1963 to \$10 in 1968. The fee for the International Congress, including all of the social events, was less than \$50.

The number of papers presented at the meetings, excluding the 1969 International Congress, ranged from 26 in 1963, when two symposia were also on the program, to 49 in 1970. The symposia scheduled in 1963 were not on other programs; but panel discussions were presented in 1967 and 1968, and breakfast round tables were on the 1970 schedule. A presidential address was given at each of the nine Annual Meetings, sometimes at a luncheon, sometimes during a general session, sometimes just preceding the business meeting of the Association.

Prior to the International Congress, few social events except luncheons and an occasional banquet were included at Annual Meetings. However, tours of NIH facilities in Washington, D.C., and a trip to Mount Hood were features of two of the Annual Meetings between 1963 and 1973.

COMMITTEES. With the advent of THE CLEFT PALATE JOURNAL, the Abstracts Committee that had been responsible for much of the content of the BULLETIN was disbanded. Eleven committees continued to function throughout the third decade, groups that were designated in the Constitution or By-Laws or that were needed to carry on the

work of the Association. These committees, all of which had been in existence in the preceding ten-year period, were those on budget, by-laws, honors and awards, international relations, local arrangements, membership nomenclature, nominations, program, public relations, and time and place.

Several *ad hoc* committees were appointed to study and report on certain problems or procedures during the period from 1963 through 1972. A committee to investigate Association finances was in existence in 1967, 1968, and 1969. Another, on the development of educational materials, was begun in 1968 and continued through 1972. Preparation of a listing of cleft palate teams was assigned to a committee that was initiated in 1968 and terminated in 1971. On two separate occasions, in 1970 and in 1972, a special committee investigated the possibility of establishing a central office for the Association; and, in 1970 and 1971, a committee explored the changing interests of the Association. In 1972, a committee was charged with planning the scientific programs for future Annual Meetings; but the differentiation between this and the consistently-functioning Program Committee was not clear.

In 1970, a committee was established to work toward liaison with the American Speech and Hearing Association, but this group does not appear again in committee listings; and an Interdisciplinary Relations Committee, appointed in 1972, served only in that year.

When an educational foundation was considered, an *ad hoc* committee, in 1971 and 1972, looked at means of financial support and development of such a foundation. At one point, in 1972, a task force, rather than a committee, was designated to consider Association development; and, as international congresses began, a special committee functioned in 1965 to plan for the 1969 International Congress. Another committee, in 1971 and 1972, worked with the sponsors of the Second International Congress, held in Copenhagen in 1973.

A Committee on Ethics and Professional Affairs was begun in 1964 and continued through 1972, assuming an advisory role in that year. In spite of the continued appointment of a Committee on Nomenclature, spe-

cial committees were appointed in 1967 and 1968 to recommend a "simple standardized speech classification."

In all, 29 different committees served the Association during its third decade. Each President, from J. Daniel Subtelny, D.D.S., in 1963 to William Laney, D.M.D., in 1972, appointed committees in conformance with the regulations of the Association, to investigate certain problems or to assist with certain projects. During its third decade, the Association continued to rely heavily on its committee structure for progress.

PUBLICATIONS. The decision to begin an expanded publication program for the Association was made by the 1962 Council; and Volume 12, Number 4, published in October of 1963, was the final issue of THE CLEFT PALATE BULLETIN. In an editorial in that issue, Hughlett Morris pointed out that the BULLETIN and its predecessor, THE CLEFT PALATE NEWSLETTER, had "served a many-faceted purpose—from publishing a few original papers to serving as a house organ for the Association."

Acting first as an *ad hoc* committee and then as coeditors of the new journal, Hughlett Morris, Charles Vincent, and Peter Randall, representing the three major disciplines of the Association, reported that they were making every effort to continue to meet, in an expanded program, the goals set by John F. Harkins, the President when the NEWSLETTER was established in 1951. These goals were to help Association members keep informed, to further interprofessional understanding and cooperation, and to lead to an increase in facilities for rehabilitating persons handicapped by cleft palate and associated deformities.

In planning for the new publication, the ACPA Executive Council had chosen the title JOURNAL OF THE AMERICAN CLEFT PALATE ASSOCIATION in preference to a proposed title of CLEFT PALATE; but the membership, in 1973, voted to approve the title THE CLEFT PALATE JOURNAL and to change all references in the By-Laws of the Association to conform to the new name for the new publication.

THE CLEFT PALATE JOURNAL differed in many respects from the older BULLETIN. Whereas the number of pages in all

40 issues of the BULLETIN totalled no more than 800, the first four issues of the new journal contained 478 pages. Photographs appeared to illustrate many of the articles in the JOURNAL; the size of the new publication matched that of other professional journals; the JOURNAL had an editorial board of 24 consultants, in addition to the three editors, in 1964; the average number of articles in each issue of the JOURNAL in its first year was nine; and the new publication contained book reviews, abstracts of articles from other professional journals, a research directory, announcements, and letters to the editor.

The Association publicized the JOURNAL widely, and the number of subscribers in the United States and abroad increased from approximately 200 for the BULLETIN to 1,260 for the JOURNAL in 1966 and remained relatively stable until 1972.

Members of the Association reacted favorably to the new publication, and the number of articles submitted grew steadily. Evidence of the acceptance of the JOURNAL appeared in a report by the Association's Historian, Asa Berlin, Ph.D., who said, in 1971, "The JOURNAL was immediately so unexpectedly successful that a second printing of the early issues had to be made. In a short time, the number of subscriptions to the publication exceeded the membership in the organization. Manuscripts which had been withheld before now flooded the editor, and publication dates had to be set as long as a year ahead. The content continued to reflect the basic Association policy of interdisciplinary communication."

Once the JOURNAL had been started and was well-accepted, the increased costs of the publication were reconsidered. In 1966, the Council debated the acceptance of advertisements for inclusion in the JOURNAL and appointed a committee to investigate "limited advertising." Whatever the recommendations of that committee, the amount of advertising that appeared in the JOURNAL was indeed limited. In the eight issues published in 1971 and 1972, one full-page advertisement occupied the inside of each front cover. After 1972, no advertisements appeared in THE CLEFT PALATE JOURNAL.

In 1972, the title of the journal was supplemented by the addition of AN INTERNA-

TIONAL JOURNAL OF CRANIOFACIAL ANOMALIES. Perhaps the subtitle was chosen to reflect the increasing breadth of the Association's interests, or perhaps it was intended to encourage use of the term "craniofacial" in the name of the organization. Indication of the "international" scope of the JOURNAL seemed desirable in view of the attempts of the Association to reach beyond the United States and in recognition of the many "international" subscribers to the publication.

The expanding publication program of the Association included more than the new JOURNAL. In 1968, under the chairmanship of Nicholas Georgiade, D.D.S., M.D., the Nomenclature Committee of the Association began a craniofacial-cleft palate bibliography series that provided a listing of articles published in journals throughout the world. Assistance for this project came from the National Library of Medicine through the Medical Literature Analysis and Retrieval System (MEDLARS). The first issue of the bibliography, covering the period from July through December, 1968, cited articles by more than 350 writers. After 1968, the bibliographies were issued four times a year and were available without cost to ACPA members who requested them. Publication of the bibliography continued through the third decade and beyond, with responsibilities for publication and distribution being transferred from the Nomenclature Committee to the Office of the Editor in 1970.

CONSTITUTION AND BY-LAWS. Minutes of the meetings of the Executive Council and the membership suggest that extensive changes were made in the Constitution and By-Laws of the Association during the third decade. However, amendments to the Constitution were fewer than were modifications of the By-Laws.

The Constitution in effect during the second decade had contained 13 articles following the Preamble. Although the Preamble was preserved in its original form, the number of articles in the Constitution had increased to 16 by 1966. The DIRECTORY for 1966-1967 contained a Constitution with two articles numbered XIII, but this error was corrected by 1968.

One major difference between the Constitution of 1966 and those of 1968 and 1971 was in Article XII, Committees, which was

changed to designate a representative of speech pathology-audiology, rather than of "speech, psychology or education," on the Executive Council. Another change in the Constitution appeared in Article XV, Dissolution of the Association, which was revised between 1966 and 1968. Prior to 1968, property owned by the Association at the time of dissolution was to be sold by the President, with proceeds to be equally divided among all surviving members, corresponding members, and associate members in good standing. In response to Federal legislation and to preserve the status of the Association as a non-profit organization, the second paragraph of Article XV was changed to read, "Any property of the Association at the time of dissolution shall be sold by the President, and after satisfaction of all liabilities, shall be donated to an organization qualified under Section 501 (c) (3) of the Internal Revenue Code." The addition of student membership in Article III, presented to the membership at its meeting in 1972, did not appear in the Constitution until 1973 because of the requirement for submission of constitutional changes to the membership by mail after the first reading of the change at a membership meeting.

The By-Laws of the Association underwent a number of changes in the third decade, changes facilitated by the stipulation in Article VII that permitted By-Laws changes at business meetings without mail ballot to all members. Earlier versions of the By-Laws contained only five articles. By 1966, the number of articles had increased to ten; and, although the number remained the same, some of the articles were revised further between 1966 and 1973.

Section 3 of Article II of the By-Laws, on meetings of the Association, stated, in 1966, that all classes of members might attend sessions at Annual Meetings without fee, that students might attend sessions without fee, and that nonmembers would pay a registration fee determined by the Executive Council. The 1971 By-Laws, in Article II, provided for a registration fee for all classes of members "when such fee is deemed necessary by the Executive Council."

Changes in Article III of the By-Laws, the article titled "Dues" in 1966 and "Fees and Dues" in 1971, occurred as the membership approved increases in charges for membership

and an "entrance fee" to be paid at the time of admission as a member of the Association. In 1966, this article in the By-Laws stated that members, corresponding members, and associate members should pay dues of \$15. each year. By 1971, the membership had approved increases in dues to \$25. for those three classes. Honorary members and life members were not required to pay dues at any time. Provisions for special assessments, such as the one used to obtain additional funds for the 1969 International Congress, were part of the By-Laws in 1966 and in 1971.

In earlier By-Laws, only one committee, the Nominating Committee, was specified. The By-Laws of 1966 provided for four standing committees—on nominations, on budget, on program, and on honors and awards. By 1971, a committee on long-range planning, composed of the President, the President-elect, the Secretary, the Treasurer, the Editor, and at least two other members, had been added to the list of standing committees. In all articles on committees, the President was authorized to appoint "such special committees as may be necessary to conduct the scientific, clinical and business affairs of the Association."

The By-Laws article titled "Publications," Article V, was modified to permit a change in the cost of THE CLEFT PALATE JOURNAL, for nonmembers, from \$10 a year in 1966 to \$20 a year in 1971. Single copies of the JOURNAL were \$2.50 in 1966 and \$5 in 1971. The MEMBERSHIP DIRECTORY was provided without cost to members, but a charge of \$1.50 for single copies of that publication for nonmembers, cited in the 1966 By-Laws, grew to a charge of \$5 for single copies in 1971. Interestingly enough, the DIRECTORY was published every other year during much of the third decade, although Article V of the By-Laws continued, even to 1971, to state that "an annual directory of members of the Association shall be published each membership year."

Articles in the By-Laws that were new in the third decade included those on the official association year, Article I; on publications, Article V; on admission and termination of membership, Article VI; on ethics, Article IX; and on honors, Article X. The term "extensive" could well be applied to the changes that took place in the By-Laws between 1963 and 1973.

MEMBERSHIP AND FINANCES. In its early years, the Association had regular, associate, and honorary members. By 1963, three types of members—regular, honorary, and life—belonged to the organization. However, of the 646 shown as members in the records of the Secretary-Treasurer in 1963, only 13 were honorary or life members.

Changes in the Constitution provided for additional membership classifications by 1966, when five categories were used—members, corresponding members, associate members, honorary members, and life members. Of these, only "full Members in good standing" were eligible to vote, hold office, or serve as committee chairmen. Corresponding membership was granted to those whose professional interests were consistent with the goals of the Association and who were members in good standing of their professional organizations but who could not qualify for full ACPA membership because of "circumstances related to their geographic locations." Associate membership was available to those who were in good standing in their professional organizations but who could not qualify for full ACPA membership "because of circumstances related to accreditation requirements."

In 1972, members at the business meeting of the Association were notified of a proposal to add another class of membership, that of student member. This constitutional change was approved by mail ballot during 1972, and the sixth class of membership was created. This membership was available to full-time students in good standing in their training programs.

The number of members of the Association increased from 1963, when a total of 646 members were recorded, to 1971, when the membership totalled 1,093. The increase was steady; and the Association grew from the 646 members in 1963 to 691 in 1964, 761 in 1965, 850 in 1966, 911 in 1967, 966 in 1968, 939 in 1970, to the total of more than one thousand in 1971.

The distribution of members among the several disciplines was not reported for all of the years of the third decade; but, in 1966, 42% of the 850 members were from dentistry, 37% were from medicine, 19% were from speech pathology-audiology, and 2% were from other disciplines. A tally of the member-

ship list in the DIRECTORY for 1971-1972 showed that, of the 1,089 cited, 433 (40%) held degrees in dentistry, 416 (38%) were in the field of medicine, 219 (20%) came from speech pathology-audiology, and 21 (2%) represented other fields. For those members who held degrees in both dentistry and medicine, the degree received last was used to determine the classification.

The increases in membership dues and the addition of an "entrance fee" did not inhibit the growth of the Association. Those who were regular members, associate members, and corresponding members paid dues of \$10 each year in the early part of this decade; but, by 1966, the dues were \$15 per year. Another increase brought dues to \$25 a year by 1971. In comparison to dues for other professional organizations, these costs were not high; and the membership responded favorably when asked to contribute, through an "assessment," to the support of the 1969 International Congress. The "entrance fee" that was established late in the third decade was not specified in the By-Laws but was to be "determined by the Executive Council."

Recognizing the need for deficit spending to get the new journal started, the Association increased the amount allocated to the Editor in 1964. However, the additional costs for the JOURNAL were offset, in part, by the increase in the number of subscribers.

In 1963, the income of the Association was \$9,850 (in round numbers); and the expenditures were \$8,312. In the next year, the income was \$16,050, chiefly as a result of the subscriptions to the new publication; and expenditures were greatly increased by the allocation of \$8,000 to the Editor's Office. By 1968, the income was \$36,073, with expenditures of \$26,652. Additional funds from the assessment for the International Congress brought the total in the Congress fund to \$24,693, with expenditures of \$8,200 for Congress affairs in the year prior to the 1969 International Congress.

Toward the end of the decade, when additional costs for expansion of the JOURNAL to include Congress papers were no longer needed, the Association's income was \$63,068, with expenditures of \$55,689 in 1971. The budget proposed for 1972 was intentionally a "deficit budget;" but the actual income for

that year, \$51,526, exceeded the expenditures of \$47,342, probably because of the increase in dues.

The Association was not in any financial difficulties in the period from 1963 to 1973, having a balance of \$28,895 in its treasury in 1971. This balance, although it should have been a source of gratification to the Association, may well have been of some concern to the Executive Council because of the Association's status as a nonprofit organization. Hence, the Council felt justified in allocating funds for the establishment of an educational foundation shortly after the close of the third decade.

HONORS AND SERVICE AWARDS. Just before the end of its second decade, the Association, aware of the desirability of recognizing those who had made unusual contributions to the field of craniofacial anomalies, had established an Honors and Awards Committee. This committee was charged with recommending appropriate means of recognizing outstanding achievements in the field of cleft palate and outstanding service to the Association and with the selection and recommendation of specific individuals who might be deserving of such recognition. Four individuals were given the Honors of the Association during the third decade, and one received the Service Award.

The first recipient of the Honors of the Association was Robert H. Ivy, M.D., D.D.S. Sc.D., F.A.C.S., who was recognized in 1963 "for his outstanding contributions as a teacher, surgeon, author, editor, and public health official." In 1965, the Association conferred its Honors on Herbert K. Cooper, D.D.S., D.Sc., L.H.D., F.A.C.D., for his many contributions to cleft palate patients and his dedication to a philosophy of interdisciplinary action that typified the Association. Josef Warkany, M.D., received the Association's Honors in 1966 for his contributions as a teacher and a dedicated investigator in the fields of experimental teratology, deficiency diseases, and congenital malformations. The fourth recipient of the Honors of the Association was Herbert Koepp-Baker, Ph.D., who was recognized in 1967. One of the founders of the Association, Dr. Koepp-Baker was cited as an outstanding teacher and lecturer and as an indefatigable research worker.

Until 1971, no Service Award had been given. In fact, although the committee charged with recognizing contributions to the Association had been in existence for some time, it had not defined a "service award." However, in its desire to give recognition to Hughlett L. Morris, Ph.D., for his work as editor of *THE CLEFT PALATE JOURNAL* and *THE CLEFT PALATE BULLETIN*, the Honors and Awards Committee established the Service Award. In its citation of Dr. Morris, the committee stated, "Because of the model developed by Hugh Morris for the *Journal*, the Association has profited enormously. This award represents an expression of its eternal gratitude."

A CHANGE IN THE NAME OF THE ASSOCIATION. Throughout all of the third decade, the Association bore its third name. Previously known as the American Academy of Cleft Palate Prosthesis and the American Association for Cleft Palate Rehabilitation, the Association seemed satisfied with its title until 1970. At that time, proposals were made for a change in name; and these proposals recurred with some regularity, in spite of an apparent lack of interest on the part of the membership in a name change.

The Preamble to the Constitution of the Association had, for many years, stated that the organization had a concern not only for "persons with a cleft palate" but for those with "associated deformities of the mouth and face." Nevertheless, the chief argument presented by those who urged a change in the name of the Association was that the scope of the Association's interest was broadening and that the name should reflect that expansion of interest.

In 1970, the Council discussed the possibility of selecting a new name for the Association; and an *ad hoc* Committee on Exploration of the Changing Interests of the Association was recommended by the Long-Range Planning Committee. The name of the *ad hoc* committee was almost as long as its term of appointment, because it met only in 1970 and 1971.

At the business meeting in 1971, members of the Association heard a motion to change the name of the organization. Included in the proposed new title was the term "craniofacial anomalies," a descriptive phrase that had be-

come popular among members of the organization. However, in 1971, the membership took no action of the proposal to call the Association "The American Association for Cranio-Facial Anomalies," although those at the business meeting agreed to go on record as favoring a name change. The advice given to the Council at that time was to survey the membership "to expedite the change."

In 1972, members at the business meeting heard a report that included another recommendation for a change in the name of the organization. The report supported a name change but advised that, "since there is not now solid unanimity as to what the change should be," no decision should be made at that meeting. The attitude of the members of the Association was indicated by the statement that, "after considerable discussion it was suggested that further polling of the membership be conducted."

Several reasons might be postulated for the seeming lack of concerted support for a change in the name of the organization. Perhaps the members of ACPA might have been more concerned if the Association had represented their major disciplines; but, since ACPA members belong to organizations in their fields of specialization, they may have considered that the name of the American Cleft Palate Association was adequate. In addition, some of the members may have considered that the longer title proposed—The American Cranio-Facial Anomalies Association—might have confused laymen and obscured the purposes and functions of the organization for those served by the members. In any event, the third decade ended without a change in the name of the organization, although the membership recognized the fact that its interests were changing and broadening.

A NATIONAL OFFICE FOR THE ASSOCIATION. During the first thirty years of its existence, the Association had depended on the willingness of certain of its members to serve in such capacities as those of Secretary and Treasurer. Those elected to such positions gave unusual amounts of time to the affairs of the Association, without direct recompense. Although some assistance for the Secretary was made available through funds allocated by the Council, the member who served as Secretary

or Secretary-Treasurer depended, to a great extent, on support from the institution in which he or she was employed.

Institutional support was usually available, since, at least from 1953 through 1972, each of the members who served as Secretary was affiliated with a university. Institutions of higher education in Pennsylvania, Iowa, Missouri, Florida, North Carolina, and Illinois provided assistance, in terms of space and facilities, for the secretaries and treasurers of ACPA for many years.

Those who held the office of Secretary or Treasurer, or both, gave willingly of their time to the offices to which they had been elected. However, the Long-Range Planning Committee and the Council were cognizant of the need for centralizing the records and the operations of the Association and for providing some relief for the elected Secretary and Treasurer, as well as for furnishing assistance to the other officers and to committee chairmen. Hence, although the Secretary and Treasurer continued to carry their designated responsibilities, consideration was given to the ways in which ACPA could establish a National Office and employ an Administrative Secretary. Plans were not complete during the third decade, but a committee to consider a national office is shown in the records for 1970; and a Central Office Study Committee was appointed after the 1972 Annual Meeting. The concept of a National Office was one of the ideas begun in the third decade that came to fruition later.

AN EDUCATIONAL FOUNDATION. Members of the Association in their service roles, were always concerned with public education, although emphasis on this aspect of the organization was not strong until after 1962. In 1966, a committee was charged with investigating the "total area" of parental relations in cleft palate rehabilitation; and, by 1968, the Association had an *ad hoc* committee to develop educational materials. Awareness of the need for education of parents and the public was part of the Association's turn toward the provision of information to laymen and to professional workers who might not be able to attend Annual Meetings. Although the American Cleft Palate Educational Foundation was not established until 1974, the

seeds for it were sown in the period from 1963 through 1972.

SUMMARY. Change was a notable characteristic of the Association's third decade. The name had changed. The Constitution and By-Laws were amended. The dues were raised. The number of classes of membership was increased. A journal replaced a bulletin. The Association did not stand still between 1963 and 1972.

And six years more

The six years following the end of the third decade of the Association's history were eventful and productive. In the period from 1973 through 1978, five Annual Meetings were held, two International Congresses were scheduled, the American Cleft Palate Educational Foundation was established, a newsletter was added to the publications of the Association, a National Office was opened in Pittsburgh, the number of members of the organization continued to increase, and the Constitution and By-Laws were further amended. The now-familiar proposal for a change in the name of the Association was finally given formal consideration by mail ballot just after the close of the Annual Meeting in 1978.

THE EXECUTIVE COUNCILS. The six Presidents of ACPA in the period from 1973 through 1978 represented the "troika," the three major disciplines of the Association, equally. Other members of Executive Councils during those years included nine from dentistry, ten from medicine, seven from speech pathology, and one from anatomy. Some of the officers and Council members had terms longer than one year; but the balance among dentistry, medicine, and speech pathology was well maintained. The addition of a representative of the basic sciences gave a new dimension to the Council. The officers and Council members for the period from 1973 through 1978 are listed below. The discipline represented by each is shown by D for dentistry, M for medicine, S for speech pathology, and A for anatomy. Positions held by the 33 individuals are abbreviated, and the years are indicated by two digits. The name of each person who also served on the Board of Directors of the Educational Foundation is marked with an asterisk.

NAME	DISCIPLINE	POSITION(S)
ADUSS, Howard	D	VPE73, VP74, PE75, P76, PP77
BERKOWITZ, Samuel*	D	C73-74-75
BRANDHORST, William	D	VPE77, VP78
BURDI, Alphonse	A	C76-77-78
BZOCH, Kenneth	S	PE76, P77, PP78
CHIERICI, George	D	C78
COURSIN, David	M	C73
CURTIN, John	M	PP73
DICKSON, David	S	C75-76-77, S78
GARRETT, William	M	VPE78
GUAY, Albert	D	C76-77
HARDING, Robert	M	E73-74-75
HARKINS, William	D	H73-74-75
HOLVE, Leslie	M	C77-78
JOBE, Richard	M	C77-78
KREMENAK, Charles	D	C73-74
LANEY, William*	D	P73, PP74
LEEPER, Herbert	S	S75-76-77
LEWIN, Michael	M	VPE75, VP76
LINDGREN, Verner*	M	C73, PE74, P75, PP76
McWILLIAMS, Betty Jane*	S	E76-77-78
MORRIS, Hughlett*	S	PE73, P74, PP75
NOLL, Douglas	S	VPE74, VP75, C76-77-78
OWSLEY, John	M	C74-75-76, PE77, P78
PETERSON-FALZONE, Sally	S	C78
PHILIPS, Betty Jane	S	C73-74
ROSEN, Morton*	D	T73-74-75-76
ROSS, Bruce	D	C75, VPE76, VP77, PE78
SMILEY, Gary*	D	S73-74
SMITH, Jeanne	S	C73-74-75
STOOL, Sylvan	M	C74-75-76, T77- 78
TRIER, William*	M	VP73
WELLS, Charlotte	S	H76-77-78

Interim meetings of the Executive Council and of the Long-range Planning Committee supplemented regular meetings from 1973 through 1978. At the interim session in the Fall of 1972, the 1973 Council added the subtitle "An International Journal of Craniofacial Anomalies" to the title of THE CLEFT PALATE JOURNAL, learned that the classification of student member had been approved by mail ballot, agreed that the new student members would pay no Annual Meeting registration fee, considered the desirability of publishing a newsletter, and expressed support of a proposal for establishment of an educational foundation.

When it met in Oklahoma City in 1973,

this Council made a number of additional decisions. It concluded that financial support for an educational foundation would reduce the Association's balance on hand and avoid possible difficulties in retaining a nonprofit status. It considered setting up a central office in Chicago and appointing an Administrative Secretary there. It requested changes in the By-Laws to legalize publication of the directory of members every other year and to modify Article XVI in the Constitution. It was concerned about the reduction of Federal support for the printing of a team directory, and it recommended changes in the Articles of Incorporation to bring the Association into "legal corporate status." In other actions, the Council decided that the Annual Meeting for 1977 would not be held as a separate function but would be in conjunction with the Third International Congress; and it provided for the publication of a newsletter. Then, taking a significant step, the Council approved establishment of a foundation to serve as an educational arm for the Association.

The Council that served in 1974 held its first session at the conclusion of the 1973 Annual Meeting. At that time, it recommended the transfer of excess ACPA funds to the new Educational Foundation and invited the President and Secretary of the Foundation to serve as *ex officio* members of the ACPA Council. Additionally, it asked for a study on the establishment of a central office and expressed its interest in having a history of the Association prepared "by a good writer, such as Dr. Koeppe-Baker."

ACPEF and ACPA held separate meetings of their governing bodies after the Foundation started, with the President and Secretary of each organization on the Council or Board of the other. Hence, the ACPA Council elected for 1975, in both its interim and regular meetings, had the advantage of advice from ACPEF but made its decisions independently. Matters with which the Council was concerned in the Fall of 1974 and the Spring of 1975 included the following: a recommendation that the JOURNAL be copied to microfilm, the appointment of Mrs. Flora Berk as Administrative Secretary in the new National Office, instructions to the Editor and Secretary to return the list of cleft palate teams to

the DIRECTORY, recommendations for changes in several articles in the Constitution and By-Laws, plans to reduce the amount of clerical assistance provided for the Secretary and Treasurer as the new National Office began its functions, recognition of increasing difficulties in obtaining advertisement for the JOURNAL, provision for a loan of \$2,000 as "seed money" for the Third International Congress, delay in further considerations of a change in the name of the Association, the appointment of Jerome Klingbeil as "Convention Coordinator," discussion of a grant from NIH for the preparation of a statement on norms and standards in management of cleft palate patients, and the preparation of a policy manual.

During its meetings, the Council elected for 1976 requested the Secretary of the Association to send, for inclusion in the Articles of Incorporation, the changes approved by the membership in Articles V, IX, and XIII of the Constitution. These changes made the Historian a member, without vote, of the Executive Council and legalized the *ex officio* status on the Council for the President and Secretary of the Foundation.

The 1976 Council, in setting the registration fees for the Annual Meeting, stipulated that an extra fee should be charged for late registration. Concern about the processing of applications for membership led the Council to urge the Membership Committee to recommend more efficient procedures for admitting members, at the same time recommending an increase in membership dues.

Although the Association did not hold a regular Annual Meeting in 1977, the Council for that year gave consideration to a number of recommendations. Meeting in Chicago in the Fall of 1976, the Council elected for 1977 recommended that a booklet of information about ACPA be prepared and distributed to new members, that Article VI of the By-Laws should be modified to speed up admission to membership, that some outside agency or professional organization should be employed to handle arrangements for the times and places of Annual Meetings, that the exhibit prepared for display at professional conventions should be given financial support to a maximum of \$2,000, and that at least two members of the Nominating Committee should be elected rather than appointed.

Meeting in Toronto at the time of the International Congress, the Council heard reports from the committees of the Association, established the Association's "corporate address" as 331 Salk Hall at the University of Pittsburgh, formalized the inclusion of a contingency item in the organization's budget and increased it by several thousand dollars, and considered the need for an International Confederation for Cleft Palate and Related Craniofacial Anomalies.

The Executive Council that served from June of 1977 to April of 1978 was well-occupied during its relatively short term. It accepted financial assistance from a Federal agency for a special program at the 1978 Annual Meeting in Atlanta; and it set the fees for that meeting at \$35 for preregistered members, \$50 for preregistered nonmembers, and \$25 for companions, waiving registration fees for nonsalaried students and establishing a \$10 fee for students who were salaried.

After additional consideration, the 1978 Council, meeting in Atlanta, authorized costs for a face-to-face meeting of the Program Committee, established an *ad hoc* Committee for Program Planning, appointed a National Office Advisory Committee, and allocated money for additional personnel and equipment for an expanded National Office. The Council also stipulated that the fiscal year of the Association should coincide with the calendar year. Further, the Council set up a Government Liaison Committee to represent ACPA in encouraging increases in Federal participation in programs of treatment for children with clefts and, in response to a request for a ruling, instructed the Committee on Membership to accept membership in AAO to satisfy the requirement of certification in orthodontics for prospective members of the Association. The Council asked the Foundation to serve as cosponsor of scientific sessions at Annual Meetings, to facilitate obtaining CME credit for attendance at those sessions, and made the Chairman of the Foundation's Professional Education Committee an *ex officio* member of the Association's Program Committee.

By unanimous vote, the 1978 Council endorsed the selection of the name "The American Craniofacial Association" for presentation to the membership at the business meeting, with resultant constitutional changes to

replace the current name of the Association with the proposed new name. However, this history, although it terminates with the conclusion of the Annual Meeting in 1978, must include the report that the proposal for a change in the name of the American Cleft Palate Association was defeated, by a narrow margin, when it was referred to the membership by mail ballot in the Fall of 1978.

ANNUAL MEETINGS. In the six-year period from 1973 through 1978, five Annual Meetings were held. When the Third International Congress was scheduled for Toronto in the Spring of 1977, the Association chose to hold a business meeting at the Congress but to abandon a separate Annual Meeting. This situation was different from that in 1973, when members of the Association met in Oklahoma City in the Spring and then went to Copenhagen for the Second International Congress in August.

Each of the five Annual Meetings resembled the others in several ways, but each had its own characteristics. General sessions, film forums, scientific exhibits, commercial exhibits, and social events were parts of each of the meetings. However, panel discussions, specialty sessions, and special events were scheduled for some of the meetings but not for all of them.

When the Association met in Oklahoma City in 1973, the program presented general sessions at which 38 papers were read and included three panels, eleven "instructional courses," a workshop on cleft palate team problems on the day preceding the first general session, a luncheon at which the ACPA President and Dr. Poul Fogh-Andersen were speakers, and a visit to the Cowboy Hall of Fame. More than 100 individuals contributed to the papers that were presented.

In 1974, at the meeting in Boston, the Association's Program Committee scheduled 28 papers at general sessions and a short course on the state of the art on the day before the opening sessions and listed 45 papers as being "read by title." The number of contributors to papers read at the sessions was less than at the previous Annual Meeting. Scientific exhibits numbered 11, and ten commercial exhibits were on display. The social event for the Boston meeting was a trip to Plymouth Plantation and the ship "Mayflower" and a New England clambake.

Study sessions were featured for the first time at the Annual Meeting in New Orleans in 1975. These 29 sessions, sponsored by the Educational Foundation, represented the second major contribution made by the Foundation to the Annual Meetings, the first having been the short course offered the year before in Boston. At the general sessions, 20 papers and two panel discussions were presented. The Association luncheon was addressed by Dr. Fernando Ortiz-Monasterio, and a cruise on the Mississippi River was a social event for the more-than-80 listed in the program as contributors to papers, for the speakers at the study sessions, for those who attended as registrants, and for the companions of members and registrants. The printed program for this meeting announced the opening of the ACPA-ACPEF National Office in Pittsburgh on the first of the preceding October.

At the Annual Meeting held in San Francisco in 1976, poster sessions were introduced. During one of the days of the meeting, 13 poster-exhibits were set up for viewing and for discussion of the information presented by the posters. At the general sessions, 29 papers were read; and a guest speaker appeared at the opening session. Three panel discussions were included in the program, and the Educational Foundation sponsored 19 study sessions. Specialty sessions were offered for those with interests in surgery, dentistry, and speech pathology. More than 90 names appeared in the listing of contributors to papers. A trip to the DeYoung Museum in Golden Gate Park, with dinner there, was provided for participants, registrants, and guests.

When the Association met in Atlanta in 1978, the program included 37 papers and two panel discussions. A special presentation was made on the ontogenesis of clefts, with assistance from a Federal agency. Specialty sessions were held in surgery, dentistry, speech pathology, and the psychosocial aspects of clefting; and 19 study sessions were provided by the Educational Foundation. Posters were again on display, a special session on judging nasality was featured, and the luncheon speaker was a representative of the National Institute of Dental Research. More than 100 individuals contributed to the papers, the panels, the study sessions, and the specialty sessions.

At each of these five Annual Meetings, films or videotapes were shown, as few as three at some meetings, as many as ten at others. Scientific exhibits at the meetings increased in number from three in 1973 to 15 in 1978. From seven to ten commercial exhibits were scheduled at each meeting.

COMMITTEES. The Constitution of the Association in 1977 provided for two committees—The Executive Council and the Committee on Membership; and the By-Laws named six additional committees—Budget, By-Laws, Honors and Awards, Long-range Planning, Nominating, and Program. During the period from 1973 through 1978, three additional committees were appointed. These were the Committee on International Congress Liaison, the International Members Forum, and the Committee on Local Arrangements.

Some Presidents added committees to the list above; and, in 1974–1975, the total number of committees reached 25. Presidents Lindgren and Aduss reduced the number to 15; but, by 1978, the tally had grown to 18. Some of the committees were appointed on an *ad hoc* basis, with a special charge; and those that accomplished their purposes were then dissolved.

A committee on liaison between ACPA and the newly-created Foundation functioned until the President and Secretary of each organization were given *ex officio* status on the governing body of the other. After the National Office was started, the committee charged with planning for a “central office” was disbanded. When a policy manual seemed desirable, a committee spent one year in planning and preparing that document.

One of the committees of ACPA, the Committee on Educational Materials, established in 1973, was transferred to ACPEF after the Foundation was established; and the Committee on Public Information, started by the Association, was paralleled by a committee set up by the Foundation and thus was no longer required.

Some committees existed during one or more years after 1972 and then were dissolved. The Committee on a Name Change came and went until it had presented its recommendation in 1978. Committees on interdisciplinary affairs and on an interprofessional program were not essential, because the philosophy of

the entire Association was interdisciplinary and interprofessional. A Committee on Membership Certification, after recommending that no certificate and no membership card be provided for members, was dissolved; and the Committee on Ethics was discontinued when it pointed out that each ACPA member was also a member of a professional association that set standards and had a code of ethics. When the DIRECTORY for 1975–1977 was designed to include a listing of cleft palate teams, the Committee on a Team Directory was no longer needed; and, after a sporadic existence, the Committee on a Research Registry was abandoned.

Some committees were established to consider specific needs or problems. While reports on the state of the art were being prepared for publication, a committee dealt with that task. While the Association was concerned with costs and resources for cleft palate management, a committee bearing that name functioned. When the Association set up an exhibit to be shown at professional meetings, a committee was appointed to manage the preparation and routing of that exhibit. When the “time and place” manager, Jerome Klingbeil, could no longer carry on his work, the Time and Place Committee assumed more responsibility; and, as team directors became concerned about the organization and management of services, a committee was appointed to assist in arranging meetings of team directors. The Committee on Public Relations was established to function primarily at the times of the Annual Meetings; and, at the request of the incoming Editor, a Journal Policy Committee, affiliated with the Editorial Board, was established. A New Members Forum was set up, during one or two years, to provide information to those who joined the Association.

Charges to the long-standing Nomenclature Committee were modified during the period from 1973 through 1978; and, at the Annual Meeting in 1978, the committee recommended that any new classification of craniofacial anomalies, although possible, seemed to have limited merit. The committee, feeling some frustration, suggested that attempts to meet their assigned task of producing a specific classification system for all craniofacial disorders might continue for one more year.

With the assistance of the National Office, committee reports, after 1974, were presented in written form, following a specified format, and were sent to members of the Executive Council prior to each Council meeting. Supplementary oral reports were heard when the Council convened at the time of the Annual Meeting.

Officers responsible for appointing committees tried to involve a large number of Association members in the groups assigned to assist with the affairs of the organization. In 1975, almost 150 members held appointments to one or more of the 25 committees. By 1978, fewer committees and fewer committee members were listed. Some of the "committees" were designated as "forums;" and one of these was the International Members Forum, to which representatives of 20 to 25 countries were appointed. This forum was intended to provide information to and from those concerned with craniofacial anomalies throughout the world.

As might be expected in an organization made up of professional people who also belonged to associations devoted to their major interests, some committees were effective and others inactive. However, after the National Office was set up in 1974, most of the committees reported regularly to the Executive Council; and the work of the committees facilitated the progress of the Association.

THE INTERNATIONAL CONGRESSES. Even before the 1969 International Congress ended, planning had begun for the Second Congress, held four years later. Denmark was the host country in 1973, when the meeting was in Copenhagen. In 1977, Canada sponsored the Congress that was held in Toronto.

Under the patronage of Queen Ingrid of Denmark, and with Karl-Erik Hogeman, M.D., of Sweden, as President and Poul Fogh-Andersen, M.D., of Denmark, as Secretary-General, the Second International Congress occupied the week of August 26, 1973. The Scandinavian Association of Plastic Surgeons, the Scandinavian Orthodontic Society, and the Scandinavian Collaboration Board for Speech Pathology joined in the organization of the Congress.

In the printed program, Dr. Fogh-Andersen wrote, "The multidiscipline Organizing Committee has the pleasure to welcome 500 active participants and their companions from all

parts of the World to a busy week in Copenhagen." The number who registered as participants reached 558, and 177 companions came with these participants to Copenhagen. They did come from all parts of the world, from 36 countries, with eight countries being represented by 25 or more participants. The largest group, totalling 237, was from the United States; from among the European countries, Denmark, Sweden, Germany, and Great Britain had the largest number of registrants. However, participants came from as far away as Australia, Japan, South Africa, Turkey, Rhodesia, and New Zealand.

During the week, social events were combined with general and specialty sessions and a colloquium. On the evening before the opening ceremonies, an informal reception was held at the old University of Copenhagen. A buffet supper at the City Hall was the social event for Monday; and, on Wednesday afternoon, the participants and their companions took an excursion trip to Elsinore Castle and Sweden. A banquet, with dancing, was on the social program for Thursday evening. The program of activities for companions included tours of Copenhagen and a visit to the Royal State Rooms. In true Hans Christian Andersen tradition, two special events were scheduled for children, a visit to the Tivoli Gardens and a trip to the Circus.

The Congress in Copenhagen opened with a ceremony at the Falkoner Centret, where the scientific sessions were held. A feature of the ceremony was provided by musicians who played instruments known as "lurs," described as the oldest playable musical instruments in the world. Then, after words of welcome from a state official, the scientific sessions began.

Five general sessions, six panel discussions, 15 specialty sessions, and a colloquium made up the program. Papers were accepted for presentation from a total of 417 authors, and 125 papers were "read by title." Abstracts of the papers included in the program appeared in a separate volume. The official language of the Second International Congress, for presentations and abstracts, was English.

Most of the general sessions included five papers, each limited to 15 minutes. In each of the specialty sessions, four or five papers were presented. The colloquium on Wednesday included 23 papers. The panels were made up

of five speakers, introduced by a moderator. For each session, a "stand-by" paper was listed. Eleven films and ten scientific exhibits were available in the Falkoner Centret for the registrants to view.

The closing session on the morning of Friday, August 31, provided for evaluation of the Congress by representatives of the three major disciplines—dentistry, surgery, and speech. The final period of the closing session was given to an open discussion of future congresses.

The large number of companions, particularly from Australia, Germany, and the United States, suggests that the Second International Congress on Cleft Palate offered an opportunity to combine continuing professional education with a vacation trip, often for the entire family, to a city that offered hospitality and history, pleasure and learning, and experiences that were both interdisciplinary and international.

The Third International Congress on Cleft Palate, held in Toronto, added the words "and Related Craniofacial Anomalies" to its title. This meeting was as international as were those in Houston and Copenhagen. Representatives from 20 countries appeared on the program, and registrants and their companions came from 30 countries. From Australia and Austria, from Scotland and Finland, from Czechoslovakia and Japan, from South Africa and Mexico, they came to contribute to the program or to attend the sessions, as well as to enjoy the colorful city of Toronto and its educational and social facilities during the week of June 5, 1977.

The printed program for the Third International Congress included the abstracts of all papers in addition to the schedule of events day by day. The official language was English. The President of the Congress was William K. Lindsay, M.D., with R. Bruce Ross, D.D.S., as Secretary-General. The patron of the Congress was the Governor General of Canada, His Excellency The Right Honourable Jules Léger.

At the general sessions in Toronto, 64 papers were presented. These had been selected, with the aid of an international review board, from the 500 abstracts that were submitted. The printed program listed 168 additional papers by title only. The Congress also featured 81 teaching seminars, 28 poster sessions, and 17 specialty sessions. One specialty session

combined dentistry with surgery; another brought dentists and speech pathologists together. Two were offered for those interested in general science and otolaryngology.

In addition to attending sessions, viewing films and videotapes, looking at 32 scientific exhibits and six technical exhibits, and discussing the posters and papers, those attending the Third International Congress toured the city, took an island cruise, and visited Niagara Falls. They were impressed and entertained by the displays at the scientific center at which a dinner was held on Thursday evening.

The closing session of this Congress was informal. On Friday afternoon, June 10, 1977, 13 papers on varied topics were read. This gave registrants one more session to attend before leaving Toronto. The 769 registrants, more than half of whom came from the United States, appreciated the welcome they received from their Canadian hosts.

THE AMERICAN CLEFT PALATE EDUCATIONAL FOUNDATION. The first real attempts to establish a "foundation" as a supplement to the Association were made in 1958. At that time, Articles of Incorporation were proposed for "The American Cleft Palate Rehabilitation Foundation," which was to be "a corporation not for pecuniary profit." This foundation was to be established in the State of Iowa, under the provisions of Chapter 504 of the 1954 Code of Iowa, with its principal office in Iowa City.

A close relationship was evident between the Foundation and the Association. Members of the Executive Council of the Association would serve, according to the plans, as the members of the Board of Directors of the Foundation. Some of the offices of the Association were to be deleted, and a "resident agent" was to be appointed by the Foundation.

One reason for the proposal to establish the Foundation was to improve the Association's tax-exempt status. However, the decision about establishing a foundation, which was to be made in 1959, was not reached in that year. Instead, a fund was started, to be administered by the Executive Council, for "cleft palate research and rehabilitation." This action seemed to satisfy those who had urged the establishment of a foundation in the second decade.

In retrospect, one might judge that the

Association's Secretary-Treasurer, D. C. Spriestersbach, may have influenced the proposal for an incorporated foundation. Dr. Spriestersbach was an active member of the American Speech and Hearing Association, which had, under the sponsorship of one of Dr. Spriestersbach's colleagues at the University of Iowa, established the American Speech and Hearing Foundation in 1946. The ASHF was apparently the model for the ACPRF.

Committees and Councils considered an educational foundation from time to time after 1959; but not until 1973 was the concept of a foundation approved, in principle, by the membership of ACPA. Then, at the business meeting of the Association, the American Cleft Palate Educational Foundation was approved.

Articles of Incorporation for ACPEF had already been prepared and were filed in the office of the Corporation Commissioner of the State of Oregon on February 13, 1973, fourteen years after the proposed Articles had been drawn up in Iowa City. Under the non-profit law in the State of Oregon and in conformance with several sections of the Internal Revenue Code of 1954, the Articles stipulated that the Foundation had, as its purposes, "to initiate, conduct, assist, encourage, maintain, and carry on" not only studies and research pertaining to congenital and acquired oral facial deformities but also activities to educate and inform the medical profession and the public regarding such research. An additional purpose was to make contributions or grants to individuals, partnerships, organizations, or institutions to carry out any purposes of the corporation to or on behalf of "individuals who have such deformities or are suffering from the effects of such deformities." The Articles of Incorporation were signed by John J. Loughlin, Verner V. Lindgren, and Warren Hastings, all residents of Oregon.

The initial Board of Directors was made up of three individuals, who were to serve until the first annual meeting of the Foundation or until their successors were elected. The three directors were Verner V. Lindgren, Robert W. Blakeley, and William R. Laney, representing medicine, speech pathology, and dentistry, respectively.

The By-Laws for the Foundation resembled those of the Association, added public members and deleted student members, included the same offices as those in ACPA except for

the Historian, and established the Board of Directors as a separate entity instead of as a committee. The By-Laws were adopted by the original three-member Board; but Boards elected at the initial meeting and thereafter were given authority, in Article IX, to amend the By-Laws.

Having been approved in principle at the business meeting of the Association on May 10, 1973, the Foundation met on that same date, electing Peter Randall, M.D., as temporary chairman and Gary Smiley, D.D.S., as temporary secretary. This first meeting could have been in violation of Article II of the By-Laws, which provided for advance notice of any "special meeting;" but a motion to waive sending the notice was presented and passed. With that, the group went to work to put the Foundation into operation.

Officers were elected, and nine members were chosen for the Board of Directors. Their names and positions appear in the list of officers and Board members that follows. The 27 individuals who served as officers or Board members from 1974 through 1978 are identified by name, by discipline, and by position or positions held. Dentistry as a discipline is indicated by D, medicine by M, speech pathology-audiology by S; P is used to indicate psychology; and B indicates that the Board member was a business man.

NAME	DISCIPLINE	POSITION(S)
BERKOWITZ, Samuel	D	S75-76-77, PE78
BISHARA, Samir	D	B77-78
BLAKELEY, Robert	S	B75, PE74, P75, PP76
CLIFFORD, Edward	P	B74-75-76, VP77
FOX, Donna	S	B74-75-76-77, H76-77, S78
GARNER, LaForrest	D	B75-76-77
HELLER, Joyce	S	B76-76
LANEY, William	D	B74, VP74
LINDGREN, Verner	M	S74
McWILLIAMS, Betty Jane	S	B74-75
MASON, Robert	S	B76-77-78
MORRIS, Hughlett	S	VPE74, VP75, VP76
PANNBACKER, Mary	S	B78
PARADISE, Jack	M	B74
PASHAYAN, Hermine	M	B76-77-78
PETERSON, Rex	M	P74, PP75
RANDALL, Peter	M	B74, PE75, P76, PP77
ROSEN, Morton	D	T74-75-76, PE77, P78
ROSTON, Lory	B	B78
SALYER, Kenneth	M	B78
SHELTON, Ralph	S	B77-78
SKOLNICK, Leon	M	B76-77, VP78

NAME	DISCIPLINE	POSITION(S)
SMILEY, Gary	D	B74-75-76-77
SPRIESTERSBACH, Duane	S	B74-75
TRIER, William	M	B74-75, T77-78
WARREN, Donald	D	B74, VPE75, PE76, P77
WHITAKER, Linton	M	B76-77-78

In each of the years following its establishment, the Foundation presented one or two symposia on professional topics; and, from 1975 through 1978, it sponsored a total of 58 study sessions at Annual Meetings. Approval was obtained from the American Medical Association for the granting of "continuing education credit" for attendance at the study sessions.

The Association reduced its accumulated funds by contributing to the Foundation, which, in turn, assumed financial responsibility for approximately 30% of the costs of some of the activities of the National Office. ACPA members, who were also members of ACPEF, contributed to the support of the Foundation, giving a total of \$8,357, an average contribution of \$20 from 33.7% of the members, in 1977 and \$10,954, representing contributions from 40% of the members, in 1978. A drive for substantial contributions in 1975 brought in enough money to support the first efforts of the Foundation, and memorial contributions and "special" contributions added almost \$2,000. A special memorial fund of \$5,000, in honor of Donna Pruzansky, was established to encourage nurses to attend and participate in the meetings of ACPA and ACPEF.

In its first year of operation, the Foundation had a balance of \$9,879, which increased to \$31,184 by 1976 as a result of earnings from short courses, symposia, study sessions, and additional contributions.

All ACPA members were considered to be members of ACPEF unless they requested otherwise. In addition, as a public association, the Foundation had public members. No dues were assessed for any of the classes of membership; but appeals were made to members, patients, and others for contributions to the Foundation. Funds were anticipated, from the beginning, from study sessions held at Annual Meetings and from symposia sponsored by the Foundation.

In 1973, the Foundation issued an infor-

mation booklet, bearing its own logo, to describe its purposes and plans. The Foundation was called the educational arm of ACPA but was a separate organization, independently incorporated. According to the information booklet, "ACPEF has initiated a number of programs for patients and for parents of patients with clefts, for those concerned with the care of these patients, and for the interested lay public." The Foundation also intended to encourage interest in the field of clefts through an essay contest and to stimulate research through "seed money" research grants.

By 1975, the Foundation had produced its first educational publication, a pamphlet titled "For Parents of New Born Babies with Cleft Lip/Palate." The Board accepted this pamphlet as an official publication of ACPEF and arranged to distribute it at minimal cost. During the previous year, the Foundation had agreed to assume responsibility for the Cranio-Facial-Cleft Palate Bibliography and had sponsored a short course, "The State of the Art," on the day before the opening of the Annual Meeting in Boston.

In 1978, the Foundation had sufficient financial stability to expand its publications, organize additional symposia, continue its support to the National Office, establish a library of audiovisual materials, and give encouragement to the activities of its 16 committees.

In a short period of time, ACPEF had grown from a concept to a corporation, from a hope to a reality, from a plan to a functioning organization. Although some were concerned about the maintenance of cooperation between the Association and the Foundation, although some could not measure differences in the purposes of the two organizations, and although some of the objectives of the Foundation have not yet been achieved, the idea that first came to light in 1958 and flickered fitfully for a number of years had become a viable entity by 1978.

PUBLICATIONS. From 1973 through 1978, the Association continued its publication of *THE CLEFT PALATE JOURNAL*, distributed copies of the craniofacial-cleft palate bibliography and a special report from the Task Force on Association Development, issued a *MEMBERSHIP DIRECTORY* for 1973-1974, added a listing of cleft palate

teams to the DIRECTORY for 1975–1977, and started a newsletter. The Foundation, in this same period of time, prepared its first informational booklet, a pamphlet for parents, and informal newsletters for parent groups.

The editors of the JOURNAL in the years following the third decade were Robert Harding, M.D., who served from 1973 through 1975, and Betty Jane McWilliams, Ph.D., who assumed the editorship in 1976. Under the able direction of these editors, the JOURNAL presented an average of nine articles in each issue during 1973 and increased the average to 13 in the first three issues for 1978. The total number of pages in the JOURNAL ranged from 393 in 1977 to 523 in 1974.

Even after the institution of THE ACPA NEWSLETTER in 1976, the JOURNAL continued to carry announcements of interest to the membership. In addition, book reviews, abstracts of articles, and letters to the editor were part of CPJ from 1973 through 1978. In 1976, all of the articles in the July issue of the JOURNAL reported research in, or related to, countries outside the United States, an innovation that supported the subtitle “An International Journal.” In that same year, a special “Clinical Conference” section was added; and guest editorials were invited. Abstracts of papers presented at Annual Meetings and the Third International Congress were printed in the JOURNAL in 1974, 1975, and 1977. Two features of the JOURNAL, in the period from 1974 through 1977, were the “State of the Arts” reports describing clinical research on clefts.

Publication costs for the JOURNAL increased as the number of Association members grew, but subscriptions provided financial support. Although the number of subscribers was lower in 1973 than it was when the JOURNAL began, subscriptions reached a total of 1,222 in 1978, when 924 institutions and 298 individuals, in addition to the 1,480 members, received the JOURNAL.

In its fourteenth year of publication, 1977, the CLEFT PALATE JOURNAL summarized its purposes by saying, “CPJ is an international publication designed to reflect research and clinical activities in the many fields concerned with the study and treatment of cleft lip and cleft palate, other craniofacial anomalies, and related problems.” Most reg-

ular readers of that publication would agree that the JOURNAL had achieved its purposes.

The bibliography of articles on craniofacial-cleft palate became the responsibility of the Educational Foundation after 1974. It continued to report, each year, authors and titles of articles from many journals; and it was a useful document for the 250 subscribers who received it at minimal cost.

A Task Force for Association Development, under the chairmanship of Edward Clifford, Ph.D., prepared a special report on the Association in 1973. On the basis of information obtained through a questionnaire sent to a representative number of members, the Task Force concluded that the desire for a change in the Association's name or objectives was not great, that members were relatively satisfied with the Annual Meetings and the JOURNAL, that the attitude of members toward the rotation of elective offices among the three major disciplines was uncertain, that the Association should structure itself to create an environment in which more of its members could participate to a greater extent in the work of the organization, and that differences of opinion expressed by members seemed to be attributable to “the primary disciplinary affiliation of the respondents.” The “Clifford Report,” as this document was called, suggested that little dissension existed in the Association.

When a change in the By-Laws permitted publication of the MEMBERSHIP DIRECTORY every two years rather than annually, two such directories were published between 1973 and 1978. The MEMBERSHIP DIRECTORY for 1973–1974 did not include a listing of cleft palate teams, although such a list was published informally in those years. The DIRECTORY for 1975–1977 included information about each member, a geographical section to show members' locations by state, and a team directory that provided information about 160 teams in the United States and seven in other countries.

The impetus for a newsletter for the Association came from the International Members Forum and the Council in 1973. Originally, this publication, informational in nature, was to be edited by the President; later, the Historian of the Association, Charlotte Wells, Ph.D., was assigned the editorship. The first

issue of THE ACPA NEWSLETTER, a four-page document published in August of 1976, reminded the readers that the first official publication of the Association was a newsletter published from 1950 to 1953. By August of 1978, when the modern NEWSLETTER bore the insignia of both the Association and the Foundation on its mast-head, the number of pages had increased to 15. The NEWSLETTER became a means of getting information and announcements to the membership with less publication lag than that required for the JOURNAL.

Publications by the Educational Foundation were primarily informational. The newsletter for parent groups, edited by Mary Pannbacker, Ph.D., was in its early stages in 1978; and additional publications were being planned, at that time, by the Foundation.

THE NATIONAL OFFICE. For years, the idea of a centrally-located office to serve the Association was a gleam in the eyes of several Councils. In 1970, a committee was appointed to investigate the possibility of establishing such an office; and, in 1973, the Executive Council continued the Central Office Study Committee, charging it with deriving specific flow sheets to show how the office would function and requesting that a firm recommendation on the desirability of establishing a central operation be made to the Council at its interim meeting in the Fall of 1973.

Several titles were used for this centrally-located operation, and several locations for it were suggested. At first, reference was made to "The Administrative Office" and to "The Central Office;" and, even in 1975, when the new office was publicized in the printed program for the Annual Meeting, the term "Administrative Office" was used. Not until June of 1977 was the term "National Office" made official.

The appointment of an Administrative Secretary, to be located in Chicago, was discussed by the Council in 1973; and, in 1974, the Central Office Committee recommended an "Executive Director." However, by October 1, 1974, an office to serve both ACPA and ACPEF had been set up at the University of Pittsburgh; and Mrs. Flora Berk had been appointed as Administrative Secretary. Mrs. Berk had assisted former Secretary-Treasurer Betty Jane McWilliams and was familiar with the operations of the Association. The duties of the Administrative Secretary, as described

in 1975, were "to expedite the business affairs of the Association and to assist Officers, Committees, and Executive Boards in the execution of their duties."

During its first several years, the work of the National Office was carried out in a small amount of space in Salk Hall, the location of the University of Pittsburgh Cleft Palate Center. An assistant for the Administrative Secretary was employed, and the two organizations began to make more and more use of the efficient services of the National Office. The office handled all mailings to the membership of ACPA-ACPEF, billings for membership and subscriptions, registrations for symposia sponsored by ACPEF, applications for membership, duplication and distribution of committee reports, financial matters, and correspondence for officers and some committee members.

By 1978, the National Office had been in existence for nearly four years but was still functioning in the same single room and with the same staff of two people. The physical facilities were very inadequate, and storage space for records of the two organizations was almost nonexistent. Requests for assistance from the National Office were being made without direct authorization, the work-load had become unduly heavy, and changes in the financial arrangements of both the Association and the Foundation required unusual amounts of the Administrative Secretary's time. Therefore, the 1978 Council, with concurrence from the ACPEF Board, authorized acquisition of additional office and storage space and of more secretarial assistance. A committee with specified responsibilities for facilitating the work of the National Office was recommended and appointed; and expansion of space and staff in the Fall of 1978 lessened the problems. In terms of improvement in the functioning of both ACPA and ACPEF, establishment of the National Office was a major accomplishment in the first six years of the fourth decade.

MEMBERSHIP AND FINANCES. Remaining above the 1,000 mark, the Association's membership continued to grow from 1973 through 1978, increasing to 1,480 in the six-year span. The number of associate members remained relatively constant, as did the number of life members. Students, to whom membership was available after 1973, did not show much interest in affiliating with ACPA; and the

number of student members had not exceeded 20 by 1978. Members from countries outside the United States increased slightly, reaching 104 in 1978, when 49 of the United States were represented by at least one member.

Many professional organizations encounter financial difficulties, but ACPA was faced with a quite different problem after 1972. Throughout the years, the net worth of the organization had increased, until its nonprofit status was in some jeopardy. Information from the Internal Revenue Service suggested that a nonprofit organization such as ACPA could have, in its treasury, an amount that would meet its operating expenses for a year if no income were received. If the assets went beyond that amount, the organization might be considered outside the nonprofit category. Hence, the Council, with advice from consultants and with the Foundation as a channel for its "coverage," reduced its assets, indulged in some intentional deficit spending, and protected its nonprofit status.

The balance on hand in 1978 was greater than the balance in 1973, but the costs of operating the Association and its National Office had increased. Deficit spending on Annual Meetings was not unusual, but the International Congress replaced the Annual Meeting in 1977 and did not require expenditures that year. Thus, the balance that approximated \$22,000 in 1977 increased to a higher level by 1978 because of savings occasioned by the International Congress.

Membership dues were \$40 in 1978; but ACPA members, who belonged to other professional organizations with higher dues, did not seem to object seriously to this amount. In fact, many added contributions to ACPEF when they paid their annual dues. Registration fees for Annual Meetings increased after 1973, a charge of \$20 for members, \$30 for nonmembers, \$10 for student nonmembers, and no fee for student members being typical. The registration fees for members and nonmembers covered the costs of the social events that had been scheduled at Annual Meetings since the 1969 Congress. In 1977 and 1978, fees for attendance at Annual Meetings were greater for those who did not preregister.

In spite of higher operational and publication costs, allocations of funds for face-to-face meetings of committees, expansion of space and staff for the National Office, and contin-

ued support to the Educational Foundation, the Association concluded its Annual Meeting in 1978 with a balance that is considered respectable. Such a financial status might well have been envied by other professional organizations.

HONORS AND SERVICE AWARDS. The Honors of the Association were given for the first time in 1963; and, by 1972, four outstanding contributors to the field of cleft palate had been recognized. The first Service Award was made by the Association in 1970, and nine additional awards were presented in the six years following the third decade.

At the Annual Meeting in 1973, the year of the Second International Congress, Poul Fogh-Andersen, M.D., of Copenhagen, was given the Honors of the Association. Dr. Fogh-Andersen, a member of ACPA since 1964, was honored for his research on causes of clefts, his participation in the planning for the Second International Congress, his contributions to the literature, and his leadership in the management of clefts in his native Denmark.

F. Clarke Fraser, M.D., of McGill University, was honored in 1974. The citation read at the time of the presentation recounted his distinguished achievements in genetics, teratology, and medicine. Dr. Fraser's many publications had influenced the study of cleft lip and palate, the citation stated; and his service as a teacher and scientist were also characteristics that led the Association to award him its Honors.

In 1976, the Association presented its Honors to Samuel Pruzansky, D.D.S., a long-time member of ACPA. As Director of the Illinois Center for Craniofacial Anomalies, as a strong defender of the points of view he presented, as President of the Association and a member of its Executive Council, as a prolific writer, as a leader in research, and in many other capacities, Dr. Pruzansky was selected for recognition by the Association.

When the Association met at the Third International Congress in Toronto, it took pleasure in awarding its Honors to Muriel Morley, B.Sc., F.C.S.T., who came from her home in Newcastle-upon-Tyne in England to receive recognition. The citation spoke of her as a far-sighted professional worker who established one of the earliest relationships between a speech pathologist and a plastic surgeon and praised her as a researcher, author, and teacher.

The second recipient of the Association's Service Award was D. C. Spriestersbach, Ph.D., from the University of Iowa. After joining ACPA in 1953, Dr. Spriestersbach served as a member of the Executive Council, as Secretary-Treasurer, and as President. He was the Secretary-General of the 1969 International Congress and was chairman of the committee that prepared the extensive report on the state of the art in clinical research.

Two Service Awards were made in 1974. One recipient, Kenneth Bzoch, Ph.D., of the University of Florida, was the Association's Vice-President in 1965 and served as Secretary-Treasurer and Secretary for six years. His contributions to research on clefts and his publications on that topic supported his eligibility for the award. Peter Randall, M.D., a surgeon at the Hospital of the University of Pennsylvania, was recognized for such contributions as his service on the Executive Council, his two terms as Vice-President and as President, his assistance in the establishment of the Educational Foundation, and his work as Program Chairman for the 1969 Congress.

The list of accomplishments of Betty Jane McWilliams, Ph.D., of the University of Pittsburgh, who was given the Award in 1975, included service as Secretary-Treasurer and President and as Editor of the JOURNAL. Her many publications and her teaching were also cited when she was given the Service Award.

Robert Harding, D.D.S., M.D., from Pennsylvania State University, had served the Association since he became a member in 1950. He was the President in 1964, edited both the BULLETIN and the JOURNAL, and was a member of many of the Association's committees. Dr. Harding was given the Service Award in 1976.

At the Third International Congress, in 1977, Asa Berlin, Ph.D., and Charlotte Wells, Ph.D., received Service Awards. Dr. Berlin, of Pennsylvania State University, was recognized for his contributions to the Executive Council, the Nomenclature Committee, and the Committee on By-Laws, as well as for his long-time service as Historian. The Association recognized the contributions made by Dr. Wells as Secretary-Treasurer, Registration Chairman for the 1969 Congress, editor of the NEWSLETTER, and Historian.

Michael Lewin, M.D., and Ross Musgrave, M.D., received the Service Awards in 1978. Dr. Lewin, Professor of Plastic Surgery at the Albert Einstein College of Medicine, became a member of the Association in 1958 and had served on the Executive Council and as Vice-President and Program Chairman. He was a member or chairman of many of the Association's committees. Dr. Musgrave, whose membership began in 1953, was Clinical Professor of Plastic Surgery at the University of Pittsburgh. He had been a member of the Executive Council and had served as Vice-President and President. These and other services and his work on the Advisory Committee for the 1969 International Congress were considered in choosing him to receive the Service Award.

Plaques and notations in the CLEFT PALATE JOURNAL became permanent records of these Honors and Service Awards. By 1978, ACPA had recognized a total of 18 individuals whose contributions had met the objectives of the Association—research, rehabilitation, interdisciplinary cooperation, and stimulation of public interest in the rehabilitation of cleft palate persons.

CONSTITUTION AND BY-LAWS. ACPA members, like their counterparts in most other professional organizations, were usually willing to endorse changes that were investigated by appropriate committees and bore the stamp of approval of elected representatives. Therefore, the recommendations for changes in the Constitution and By-Laws of the American Cleft Palate Association from 1972 through April of 1978 encountered little opposition.

Comparison of the Constitution of 1971 with that of 1977, as recorded in directories, showed that six of the sixteen articles had been amended. Article III, in 1977, added students as the sixth class of membership and stipulated that dues-paying members would receive the publications of the Association. Articles V and IX were amended, when the Foundation was established, to allow the ACPA President and Secretary to serve, with *ex officio* status, on the ACPEF Board of Directors. Changes in Articles XII and XIII provided for membership on the Council, without vote, for the Association's Historian and for *ex officio* status on the ACPA Council

for the President and Secretary of the Educational Foundation.

Additional changes in Article XIII deleted the specification of the number of members on the Council, directed the Nominating Committee to maintain "the diversity of professions and sciences represented in the membership of the Association," and stipulated that lists of proposed new members be sent to the members of the Council twice a year. Article XVI of the Constitution was modified, between 1971 and 1977, to require that ballots on constitutional changes be sent to the membership within 30 days of date on which the changes were reviewed by the Council.

The By-Laws published in 1977 differed in several respects from the 1971 By-Laws. The change in the fiscal year of the Association was not made until after the 1977 Constitution had appeared in the DIRECTORY; but an increase in dues from \$25. to \$40. per year, together with the provision for dues of \$5. per year for student members, appeared in Article III of the By-Laws of 1977. A Committee on By-Laws was added to Article IV after 1971, and Article V was amended in three ways: to increase the cost of subscriptions to the JOURNAL to \$35. per year, to authorize the

Council to set the cost for single copies of that publication, and to permit publication of the DIRECTORY every other year.

The Preamble to the Constitution of the American Cleft Palate Association was written in 1950 when the organization was known as the American Association for Cleft Palate Rehabilitation. Over the years, the name of the organization and many articles of its Constitution and By-Laws underwent alterations; but the introductory statement remained unchanged. From the time it was first drafted, the Preamble was the Association's assertion of concern for the welfare of persons with craniofacial anomalies.

The final paragraph of the Preamble to the Constitution is presented here as a conclusion to this report of the events in the life of the American Cleft Palate Association, now 36 years of age and showing commendable maturity.

"We propose to form a non-profit corporate organization, the intent of which shall be to stimulate specialistic and public interest in, and a more exact knowledge and improved practice of, the science and art of the rehabilitation of persons with a cleft palate and associated deformities of the mouth and face."