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The JCDA of the future can create community by providing dentists with credible Canadian clinical and scientific content.

A New Platform for Clinical Conversations

EDITORIAL

n August, I attended the annual meeting of the American Society of Association Executives (ASAE) in Toronto. My primary reason for attending was to learn more about the use of social media to increase member engagement in associations, a stated theme of the conference. However, it didn't take long to confirm a longheld belief of mine during the conference—that the information and communications technology revolution has turned the world of traditional membership associations upside down.

Today, people can use these technologies to create community through more informal channels, potentially bypassing traditional associations completely. Combined with an overall downward pressure on the level of membership dues in associations of all types, it is becoming apparent that associations must have a clear purpose in order to survive and thrive. These challenges were summed up by one ASAE presenter, who stated that an association can claim worthiness of support if it can "host the platform on which the conversations most important to its members are taking place."

With this in mind, how can *JCDA* facilitate the conversations most important to Canadian dentists, while also contributing to a united dental community that Dr. Friedlander accurately identifies in his column as an important element of our profession (p. 679)?

Over the past year, we have been asking such questions to a wide range of people in the profession and listening intently to what they are telling us. We have scanned the operating environment and analyzed how we can modify our strategies to thrive in the current environment. I have also considered the many content suggestions that *JCDA* readers communicate to me on a consistent basis.

I believe Canadian dentists are looking for a new type of clinical knowledge service from *JCDA*, one which offers practical, clinical resources that will aid clinical decision making, rather than a traditional scholarly journal. The *JCDA* of the future can create community by providing dentists with credible Canadian clinical and scientific content.

Based on these extensive consultations, our Board of Directors has given its support to a new publications strategy that will be introduced and developed on an incremental basis over a number of years. When complete, the centrepiece of the strategy will be a set of searchable electronic databases of clinical content that will give dentists credible information where and when it counts—at the point of patient care. Canadian dentists will also have an opportunity to exchange information about topics of clinical relevance using modern social media.

This new vision will not come to fruition overnight. We will be entering a transition period to obtain further detailed guidance from dentists about what clinical conversations should take place on our platform and how they should be conducted. To that end, I will be consulting with several groups of dentists and dental students over the coming year, to help shape the structure and content of our new knowledge base.

Since our resources are limited, we will need to de-emphasize certain aspects of today's publication strategy to focus on developing the strategy of tomorrow. As such, we will produce no more than 6 editions of the print version of *JCDA* in 2010. However, we will be introducing a new service called *JCDA Express*, which will bring you concise information about the latest important scientific and clinical developments in the literature. This new service will be delivered to CDA members for whom we have an email address.

We will also be creating a new website for *JCDA* in the coming year, where we will start building the clinical knowledge base of the future. Once this new website is operational, I will be inviting you to visit and provide your input, helping to shape the platform where clinical conversations vital to Canadian dentistry will take place. After all, clinical dentistry is what binds our particular community together.

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