

Giving in Order to Receive

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This edition of *JCDA* prominently features news stories on the 2005 FDI Congress held in Montreal, from political and scientific activities to social events. Although we report on the latter, I wouldn't want readers to have the impression that social events are the most important aspect of what occurred in August.

Just a few weeks ago, a CDA member told me that he perceives FDI as a glorified "rich dentists' travel club." This member is likely not alone in having this attitude. The challenge for FDI is to demonstrate that it can act as an effective agent of change for the dental profession worldwide.

Given their nature as political organizations, associations do most of their work behind the scenes. Having to account for the sensitivities of many stakeholders can give rise to perceptions of inactivity. It is hard to shout loudly about progress when it can be painstakingly slow coming to fruition.

Despite these operational challenges, I believe there is a need for national dental associations to cooperate on a global level. Dr. Burton Conrod said it best when describing how Canadian dentists benefit from FDI involvement: we all have something to give and something to receive.

Matters relating to government cutbacks in dental care programs, challenges to the pre-eminence of the dentist in dental care provision, the movement of professionals across jurisdictional borders, corporate influence on the clinical decisions of professionals, the spread of avian influenza — these are all issues that do not begin and end at our provincial borders. They are global issues of vital importance that require harnessing the best minds in our profession to address them effectively.

The FDI policy statements approved in Montreal are published in this month's edition. These FDI statements are a good example of global knowledge sharing. Because science is universal, I see huge potential in this aspect of FDI. I envision an augmented FDI Science Committee creating a greater number of "almost complete" guideline templates that could be refined and finalized by national scientific committees according to their own needs as defined by local conditions. How long can resource-constrained national dental associations continue replicating the work of similar scientific committees?

If you need any reminder of how we in the rich countries of the world should give to our friends in lesser-developed countries — at an individual or organizational level — I draw your attention to 2 articles in this issue describing oral health conditions in India. Millions of people in that country have no access to the oral health care enjoyed by Canadians. For our Indian professional colleagues, the horrifying condition of noma is a reality. We publish the article on noma because the World Health Organization has placed a high priority on its eradication.

FDI is doing something concrete about the problems described in these articles. Through the World Dental Development and Health Promotion Committee, FDI sponsors development projects in some of the world's least prosperous countries. It has organized a number of major conferences in recent years that have produced significant documents and galvanized political action to improve the oral health of the world's most vulnerable citizens. FDI's World Dental Development Fund allows you contribute to these development projects.

In a new initiative, FDI has created a mechanism by which dentists can become "Friends of the FDI," allowing you to receive certain benefits and contribute to the World Dental Development Fund at the same time. Please take a tour of the FDI Web site (www.fdiworldental.org) to learn more about these projects and to get a better idea of our global federation's range of activities.

FDI is not a rich dentists' travel club. I believe the FDI World Dental Development activities provide an excellent opportunity for us to give and receive as individual professionals. I am confident that most Canadian dentists understand that it is in giving that we receive.

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