From 25th till 30th of July in the pride of the Mediterranean Sea, there were 19 participants with 5 organizers and 4 lovely trainers, 3 of which IADS Certified Trainers and one IFMSA Egypt Trainer. They all came to the fascinating city of Alexandria to participate in the IADS TNT of Egypt. Participants were from different countries-different culture and cities. There were participants from the land of civilizations Iraq and from the Republic of Sudan. They all came just to get trained and to make new friends in one of the wonderful cities in Egypt. The training took place over a 6-day period and was held at the Faculty of Dentistry in Alexandria. During the first day, participants were trained in different subjects like communication, teamwork, leadership, feedback and presentation skills. The second day of training covered the topics of what the role of a trainer should be, training methods, time management and negotiation skills. The third day was about the place of trainer in dentistry and intercultural training.

This brings us to the fourth day, which was full of social activities. All participants and the team of organizers visited the Royal Jewelry Museum in Alexandria where they got to see the beauty of the ornaments and jewelry exhibited inside and took pictures to seize those memories for a remember it for the lifetime. After the museum, the participants went to one of the biggest sights in Alexandria - the Library of Alexandria. They visited the museum of the library and the library itself. They were very impressed by how colossal and wonderful this place, where you can share the knowledge, meet people from different cultures and develop yourself, is. After the Alexandria Library, participants went to eat had lunch in one of the traditional restaurants and drank tea afterwards.

At the end of this long social day, participants were happy to have spent it sightseeing all these places. On day 5, the sub-regional training (SRT) started. All participants got their topics two days in advance to prepare presentations that they would give in the presence of trainers. On day 6, the SRT was completed and at the end of the day, there was a closing ceremony for the TNT finalized with relaxing in a café at the beach. The participants said the TNT was an amazing experience.
Fayed from Egypt: “Being involved in new experiences, spending 7 days with new people, gaining new skills, having a great time; it was amazing to be in a group with different mentalities, different skills but all with the same passion to learn and make a great impact.”

Mohamed A.M. Ahmed (TNT Egypt Trainer): “The idea of TNT is one of the most successful programs ever done to medical or dental students. Actually, as medical or dental students, sometimes we don’t pay attention to life skills. We spend most of our time on improving ourselves scientifically and clinically. We are very great and professional in that, but the great fact is that we are going to deal with patients, we are going to give lectures, some of us will start a new business; all of these need other skills to be fully qualified. This is what TNT offers us, non-medical skills related to medicine and dentistry. When I decided to leave my own country, Egypt, traveling to attend a TNT program, I wanted to acquire such skills. I had the passion to meet different students from various countries, develop a new way of communication and get inspired by everyone’s story. Here I am today, in love with travelling, giving training sessions, learning more, sharing more, inspiring and getting inspired.”

Aws Salah from Iraq said: “It would be my pleasure to visit Egypt again and to participate in programs like this, because the people of Egypt, the team, the participants and all people that I met in this program were like my second family and I spent memorable days with them. I hope to meet them all in the near future. Big love to IADS family and DSSA-Egypt.”

Ludan Mustafa from Sudan: “TNT was a useful program to learn about communication skills, the art of leadership and how to shape personal features; and we have having met other cultures, the most beautiful moments were brought to me by this excellent team - an experience worthy of praise. I hope to visit Egypt again. I would like to thank everyone who had a role in encouraging me to take this step from friends. Nice to meet all of you and big love to family IADS and DSSA-Egypt.”

Ziad Mekled from Egypt: “These are unforgettable memories; those days we spent together with different nationalities and cultures, in turn redounded on us a kind of cultural openness, in addition to what we learned. TNT is one of the wonderful things the man can do. In the end I would like to thank Sherien Atef, the former president of DSSA EGYPT, for her efforts and keenness to organize this training in a wonderful way and give us the opportunity to attend such a big event like that here in Egypt; and special thanks to my friend Mohamed Ali, who told me about the TNT.”
“Oral diseases affect half of the world’s population and were confirmed to be the most common and preventable Noncommunicable diseases (NCDs) worldwide by the Global Burden of Disease 2016 study.” (WHO)

The m-OralHealth workshop held in Montpellier on October 10th-12th brought together around 30 specialists and opinion leaders in oral care and public health, from more than 15 different countries. The event was hosted in the historical medical faculty of the University of Montpellier, as a joint project by the BHBM and WHO Oral Health Department.

The three days were dedicated to the development of a mobile health concept targeting oral health. The “Be He@lthy, Be Mobile” (BHBM) initiative is a collaboration between two UN bodies: the World Health Organization and the International Telecommunications Union (ITU). They are all working on facilitating the implementation process of mobile and digital solutions to help develop healthcare systems globally. The current work in various countries has been based upon SMS messaging to people about preventive, pro-health measures around different areas of importance. mHealth programs have been established to target a number of diseases and risk factors, for example mTobaccoCessation, mDiabetes and mAgeing. The new one to join the mobile initiative is oral health.
The mHealth initiatives have grown and developed over the recent years with more and more areas of healthcare are also picking up on these opportunities. In low- and middle-income settings, where there is a severe lack of health professionals, text messaging is a good way how to send out messages that help to improve the public health behavior of vast communities. The development of an m-OralHealth strategy is work in progress of the WHO Oral Health department. The key components of the m-OralHealth initiative are 1) Literacy 2) Training 3) Early detection and 4) Surveillance. All these listed terms address various sides within the mobile health framework targeting access and education of populations, front-line workers’ training, early detection of diseases such as noma, oral cancers through teledmedicine and surveillance of the health situation within population groups.

The workshop itself consisted of a theoretical and a more practical day. On the first day sessions were focused on introducing various ongoing initiatives around teledmedicine and mobile health in oral care. In a presentation by Brazil they described how they use teledmedicine as means to consult health professionals working in primary care centers in rural communities. In Madagascar and Senegal, SMS-ing around prevention and healthy behaviour is ongoing work with already good results from large population groups. In France, teledmedicine is being used in a study at elderly care facilities, where nurses are trained to do oral scans of the residents, that will later on be sent to dentists to evaluate.

The second day we worked in groups on case studies aka personas. Each group focused on several personas with different socio-economic backgrounds. This discussion had the aim of understanding the needs of individuals living in various population groups, when designing something like an m-OralHealth initiative. In order to work out a global strategy, it is important not to forget all the potential receivers of the service. Such discussions and creative thinking are definitely the core element while arranging similar initiatives.

The m-OralHealth agenda is a very good area, where also dental students can work on in their local communities. Several countries are already working on mobile health but not as much on mobile oral health. One of the goals for all of our IADS members would be to find out if their countries are working on any mobile health initiatives and try to also push for oral health to be included. The WHO will be issuing a booklet for m-OralHealth at the beginning of 2019 and from there on it will be continuing work to strengthen the existing framework.
“I believe that every human mind feels pleasure in doing good to another.” - Thomas Jefferson.

When people who have little access to healthcare come to you and you relieve their pain, you treat them - you change their lives for good! And it feels amazing to see their gratitude and to know that you are helping them expecting nothing in return.

Five years ago, when I just joined IADS, I saw an advertisement for a volunteer program in Jamaica called “Brush Up”. I was just a second-year student back then and I couldn’t join it, but it stuck in my mind and I kept thinking about it ever since then. Next year there was no advertisement and no program, and the next year after, nothing was there! The project disappeared, and people who organized it were nowhere to be found. But I was still thinking on whether there’s a possibility to revive, re-start the project. Luckily, during the last year FDI Congress in Madrid, I met with two young bright dental students from Jamaica – Ajani Blake and Renae Williams, who were enthusiastic about volunteering and student activities. We sat down and discussed the possibilities of incorporating their freshly formed association into IADS and of course, the possibility of organizing a volunteer project. For many GA’s we discussed that IADS need its “own” projects, organized by dental student associations and not by some other companies or charities. And here it was, the opportunity we could not miss. Eleven month and many meetings and brainstorms later, I was there, standing in the Montego Bay airport breathing hot and spicy island air and waiting nervously and impatiently to meet my teammates for the upcoming project. We had an amazing team with people from Russia, Finland, Slovenia, Slovakia, Germany, and of course Jamaica. Our hosts and main project organizers – Ajani and Thwin did an exceptional job preparing for the event. We had everything from everywhere - military mobile compressors from the US Army, mobile units from them as well, portable German military chairs (these were from 1960', but I bet you wouldn’t find a better one today!), autoclave, all kinds of instruments and equipment.

On Sunday, we went to prepare the place for the project and the guys brought us to – a church! A church in Jamaica is not the same place I’m used to, here in Russia, and it was very surprising to me. A church that is more of a community center rather than just a worshipping place. Many events and projects are hosted by churches there like summer schools and other educational programs, community events and, as it was in our case, a mobile clinic. So, we had all these amazing instruments, qualified international team, two academic supervisors – Dr. Brady and
Dr. Jones, who made sure we wouldn’t kill anyone, we had a support from the church and we decided we were ready. The goal was set to a 100 people per day with extractions, fillings, hygiene and instruction. And we did it! First day it was 117 people and in total we helped more than 500 people during this week!

It was exhausting and difficult at times, but we all could agree that overall it was an amazing experience. We helped many people to relieve their pain, extracted some teeth, educated and taught them proper oral hygiene, gave out brushes and toothpastes, did prophylaxis with fluoride gel and had lots of fun doing all that! Even though it was +35 and we had no AC in the building...

We, in the IADS, believe that dental students, residents and fresh graduates should be more involved in volunteering. Not only because helping people in need is a very rewarding and noble thing to do, but also because the experience of treating people in a mobile clinic is tremendously valuable.

As we should know that you can’t always rely on the fancy equipment you have, but should rather use what’s available consciously and with the right manual skills.

I want to thank everyone who was involved in organizing this IVP, its promotion, sponsors and other organizations who helped with the project. I am especially thankful to Ajani, Thwin and Renae for the organization; Dr. Irving Mckenzie for the great help and support for the project; Dr. Brady and Dr. Jones for helping and teaching us, Natalia for the ideas and meetings; the ROCS for the dental products and my trip support; Pia, Suvi, Alicia and Frederik, Danilo, Alexandra, Stella, Shelby, Felicia and other volunteers – for their hard work and dedication; and finally, IADS for being a platform where everything is possible and where students can develop themselves as better leaders, clinicians and volunteers.

Finally, I can recommend you, dear reader, to join any upcoming volunteer project and I guarantee that not only will you not regret it, but you will always remember it as one of the best experiences in your life.
On October 25th – 26th 2018, the world came together in Astana, Kazakhstan, at the Global Conference on Primary Health Care to renew a commitment to primary health helping to achieve universal health coverage (UHC) and the Sustainable Development Goals (SDGs).

By the definition of the WHO, primary health care (PHC) is made up of three main areas: empowered people and communities; multisectoral policy and action; and primary care and essential public health functions as the core of integrated health services. The PHC network should be the first point of contact with healthcare service providers for all populations worldwide. By focusing on policies and regulations on primary care facilities, PHC would be a means to reach Universal Health Coverage in the most adequate and fast way. Usually the PHC facilities in most countries consist of community health workers, family doctors, and nurses. Sadly, in most countries oral care is not being nationally targeted to be a part of the basic healthcare that all people need.

Good systems exist in Brazil and Sri Lanka for example, where also dentists are a key element within the primary health care facilities. As (the) representatives of oral health, all IADS members, including me, really need to advocate and work on having oral care acknowledged as an essential factor also within the PHC and UHC agenda. Oral care was not mentioned back in the original declaration from 1978 on Primary Health Care and, unfortunately, it has also not been yet included in the amended Astana declaration. The job for all of us is to work on basic oral care to be also acknowledged and mentioned in documents and discussions on primary health care.

The event itself took place on the 25th - 26th of October in the capital of Kazakhstan - Astana. As mentioned before, the conference also presented a new amendment to the original Alma-Ata declaration from 1978, with an even stronger focus on targeting health systems worldwide to improve coverage with basic healthcare services. But as WHO is working hard this year on including also youth within their work, they organized a separate full day for youth and young.
On the 24th of October, WHO and UNICEF, main organizers of the whole event, brought together the Youth Preparatory Workshop. More than 150 students, young specialists in healthcare and other professions were joined together into groups that worked on finding solutions to issues of concern around primary healthcare. Partners of IADS, such as IFMSA and IPSF, were also present with core associations from the WHO Youth Hub being included. We all formed working groups where we shared our experiences and knowledge and brainstormed to find solutions and fresh ideas to the PHC concept. I had a chance to meet young people from not only healthcare but also outside, who were working in NGOs, having start-up companies or strong personal initiatives related to global health and PHC. Some of the key issues we worked on within our teams were: 1) Lack of health workforce in rural areas; 2) Education and training; 3) Interprofessional and multisectoral collaboration; 4) Health policy. I believe that besides being a nice gesture from the main organizers, the youth preparatory workshop was a good platform for widening perspectives around how many different specialties meet together within the realms of Primary Health Care and how wonderful it is to meet with 150 young people who have completely different lives and occupations but all have a united target to achieve better health in the world. The two following days were dedicated to the Astana conference and were also extremely interesting. The sessions comprised of panel discussions that targeted different sides and issues related to PHC, such as finance, interprofessional teams, education and training of health personnel and many more. During the discussions, it was sad for me to once again admit the fact that oral care was not brought up in those discussions. On the other side, this once again proved to me that capacity building among dental students, educational reforms with a more community-based educational system during our undergraduate studies and trainings on health advocacy are essential to also have dentists and oral care professionals speaking and debating on issues such as primary health care. The Alma-Ata PHC declaration is amended every 10 years. I would like to stay optimistic and motivated to work these next 10 years to also have basic oral care included in the amendments for the 50th anniversary of this document. It will be a long process that includes changing not only the mentality within the oral care profession, but also the educational systems and training of dentistry. IADS needs to work on a targeted approach on providing means and ways to build capacity and enhance knowledge about global health. This is essential to have a generation of oral health advocates for the future.
FDI World Dental Federation was established in Paris in 1900 as the Fédération Dentaire Internationale and is the world’s leading organization representing the dental profession. International Association of Dental Students (IADS) participated in the 2018 FDI world dental congress which was held in Buenos Aires, Argentina during September 5th – 8th with more than 200 dental associations in attendance.

IADS Representative Pongkarn Kanjanawattana from Thailand (IADS Chairperson of External Relations Committee) had the chance to attend The General Assembly (GA), FDI’s supreme legislative and governing body. Notable outcomes of the proceedings in Buenos Aires included the welcoming of new FDI member associations, elections within FDI’s governance structure, and the adoption of FDI policy statements.

Furthermore, the 2019 FDI World Dental Congress, hosted together with the American Dental Association, will take place in San Francisco, California, from 5th – 8th September 2019.

From the GA, the FDI committee discussed worldwide dental problems and came up with 10 new policy statements as stated below:

- Deep dentine caries and restorative care
- Continuing dental medical education in dentistry
- Dental amalgam phase down
- Dentistry and oral health related apps
- Dentistry and sleep-related breathing disorders
- Global periodontal health
- Nanoparticles in dental practice
- Providing basic oral healthcare for displaced persons
- National health policy with the inclusion of oral health
- Promoting oral health through the use of fluoride toothpaste
Join the largest educational network in dentistry!
When Portuguese sailors stumbled across a new piece of land about 180 km off China’s coast in the 16th century, they called it “Ilha Formosa” which means beautiful island. Today we know it as Taiwan and it is still true to its name. It has it all: from magnificent mountains to enchanting beaches, dynamic cities, delicious food and friendly locals. Taiwan Dental Student Association (TDSA) welcomed dental students and dentists from all around the globe from the 27th of August to 2nd of September 2018 to gather for the 65th IADS Annual Congress in Taiwan’s biggest port city Kaohsiung.

The congress started on the 27th August with an opening ceremony, which took place at Kaohsiung Medical University. A charming program was followed by banter between old friends and new faces over delicious food. The venue for the rest of the congress was Ambassador Hotel Kaohsiung with a lovely view over the Love River. In the following days LOC provided us with a stimulating scientific program. Lectures covered the topics of periodontology, endodontics, oral surgery, orthodontics, implantology, esthetic dentistry and public health. Everyone was excited about the skype session with “Singing Dentist”, Dr. Milad Shadrooh, who gave us a live performance of one of his songs. We also had a chance to learn new skills in Cerec Asia CAD/CAM, Desmart Radiology, Straumann and Hi-Clearance implants workshops. On the 28th and 29th there was also a dental exhibition, where you could get a souvenir from the congress, if you collected stickers from all the stands. The General Assembly gathered all delegates from member countries, the key event of every IADS congress, on the 29th and 30th for two long sessions. They reviewed association’s work of the previous year. IADS welcomed 8 new members: 3 of them received a full country membership (Japan Dental Students Association, Iraqi Dental Students Association, Portugal Dental Students Association), 4 of them received a corresponding membership (Latvian Dental Students Association, Association of Dental Medicine Students in Bosnia and Herzegovina, Zimbabwe Dental Students Association, Fiji Dental Students Association in the School of Dentistry and Oral Health at the College of Medicine, Nursing and Health Sciences) and 1 received an affiliate membership (Cambodian Dental Students Association). Delegates voted on the host for the 66th IADS AC, the majority of the votes went to Tunisia. The congress will be held in August 2019 and will be hosted by Tunisian Association of Dental Students. The last but not least part of the GA were elections for the Leadership Board (Executive Committee, Standing Committee Chairpersons and Regional Directors) for the 2018/2019 term.
The social program is an indispensable part of every IADS meeting and LOC made sure we had a good one. The Exchange Fair was the perfect way to relax with tasty food and drinks from all over the world, after some of the participants sat at GA for the most of the day and some of them took part in sightseeing. France won the award for the best performance and Japan won one for the yummies food. The next night we experienced how to party the Taiwanese way, it was a night out in a fabulous club MUSE Kaohsiung. The last night was Gala dinner and we all dressed up. After an interesting program, it was time to take the last photos and spend some last bittersweet moments with all of us together. The competitive part of the congress included Dental Olympics and Lecture Contest, which both took place on the 31st of August. The contestants at the Olympics had to prove their skills in radiological interpretation, suturing, wire bending, soap carving and root canal treatment. The winning team was from Penang International Dental College in Malaysia, consisting of Lim Yi Yin, Alicia Pui Lai Wong and Goh Wei Horng. The first place for the Lecture Contest went to Araxie Dovlatian from Armenia, who presented a topic on “CAD/CAM All-Ceramic and Ceramic-Like Materials: Mechanical and Esthetic Properties and Clinical Indications”. Regardless of being an industrial city, Kaohsiung is a vibrant place to visit and the rainy weather didn’t stop us from sightseeing. We visited Fo Guang Shan Buddha Museum, most famous for its 40 meters tall Buddha statue. At Lotus Pond, we turned bad luck into good luck by entering through the dragon’s and exiting through the tiger’s mouth of Dragon and Tiger Pagoda. We took a ferry ride to the picturesque Cijin Island and hiked Shoushan – Kaohsiung’s monkey mountain, encountering a great number of Formosan rock macaque, monkey species endemic to the island. A day in Taiwan is not complete without a visit to one of the night markets the city has to offer. Following the smell surrounding countless food stands, we tried plenty of tasty Taiwanese specialties. Heavenly XiaoLongBaos, world famous bubble tea, tempting beef noodle soup just to name a few, and of course stinky tofu, probably the most famous night market dish, for those who could get past its not-so-pleasant smell. Contrary to the rainy and dull weather that was present through the congress, about 40 participants who joined the post-congress trip where delighted with sunshine for the two full days. Our first stop was Sió house (Salt Museum), where you can find salt in the color for every day of the year, and the historical Anping Fort. After a traditional lunch we had a lovely boat ride through the mangrove tree Sioco Green Tunnel, followed by a visit to the beautiful Beimen Crystal Church and breathtaking sunset at Jingzijiao Wapan Salt Field. In the evening we were already starving, so not only we had a delicious seafood dinner, but after arriving to our Dreamer Hotel, the staff welcomed us with oyster BBQ. The next morning the LOC surprised us with kayaking among the oyster-farming floats, which was truly a unique experience, and a visit to the High-Heel Church, a popular wedding venue and a monument for all the women who lost their feet due to the blackfoot disease. Afterwards we boarded the bus, which took us to Tainan, the oldest city in Taiwan and its former capital. There we spent our free time visiting the Confucian Temple, Chihkan Tower and simply enjoying the last moments with people that are more than just friends – the IADS family. Even though the week went by too fast, it was a wonderful experience that all of us will remember. A huge thank you goes to the LOC and TDSA for organizing this beautiful event and trying their best to make sure everything went smoothly. Looking forward, the French delegation is expecting us for the 65th IADS MYM in March 2019 in Strasbourg. We hope to see you there!