IN LOVING MEMORY

REMEMBERING JAN ANDERSSON-NORINDER
A TRIBUTE FROM HIS MANY FRIENDS AND COLLEAGUES

NEWS

NEWS FROM NATIONAL ORGANIZATIONS AND MEETINGS

REPORTS

IADH POST GRADUATE CURRICULUM IN SCD
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UPCOMING EVENTS

IADH CHICAGO 2016

IADHAPPY

HAPPY MEMORIES
It is with great pleasure that I write to you from these pages but this time with a different title, as the President of iADH. When I was checking the previous issues, I realized that the last magazine that I appeared as the editor was back in October 2012. I strongly believe that this magazine is the iADH’s happy face and an excellent way of communicating between iADH members. I would like to express my sincere thanks to Dr. Alison Dougall for taking over this job from me and continuing to make the magazine even more global as we grow as an organisation.

This edition is a little different and it is a special tribute to Jan Andersson-Norinder. In the following pages, you will read more about him. The contributions received from his friends and colleagues are touching, honest and heartfelt and I think represent Jan was a remarkable and unique person who will always be remembered in iADH for his personality, his work ethic and his vision for holistic care and inter-disciplinary services for people with disabilities; not only for those people in his country but also for many people around the world. He will be always remembered by iADH members with good memories.

It was unfortunate that during my presidency sad news continued and a second honorary member of iADH, Dr. Carlos Salinas passed away. The iADH executive board agreed to ensure that their names are remembered forever and we decided to name two iADH Awards for them in the future to represent the huge role that they have played in the society and in the dental profession.

Well it was not only sad news that happened during my presidency. First of all, I would like to welcome to our new members on the executive board - Dr. Johanna Norderyd from Sweden, Dr. Shouji Hironaka from Japan and Dr. Marcello Boccia from Brazil. The new board now represents all the regions of the world and they bring a wide range of experience and ideas to the table. Their presence not only bring in new fresh vision but will also help us reach out to more members around the world.

There was a request to me personally during the iADH Berlin Congress that iADH explore the possibility of setting up a research committee tasked with creating research networks and promoting collaborative working in the same way that the iADH education committee has taken forward the education initiatives so successfully. I’m happy to inform you that Dr. Blanaid Daly, Dr. Denise Faulks, Dr. Pedro Diz Dios, Dr. Jacobo Limeres Posse and Dr Alison Dougall have met online and via face to face meetings and hope to launch this initiative so that interested people can register their details and themes of research online via the iADH website. It is planned that a research committee with specific terms of reference will be formalised at the 2016 Chicago congress and a seminar for researchers will also be developed for the programme in Chicago. I am very pleased with the way that iADH is moving forward with this proactive approach to promote collaborative global research and hopefully we will have more to share with you in 2016.

The iADH Education Committee has also been busy and recently Dr. Denise Faulks circulated the “iADH Toolbox for measuring attitudes and intended behaviours” document to those researchers who expressed their interest in Berlin. There is more information about this initiative later in this issue.

Drs Alison Dougall and Shelagh Thompson attended the European Association of Dental Education (ADEE) in Hungary in August and ran a very successful special interest group in special care dentistry education and continue their work in this area.
It is very important for iADH to create and maintain relations with other associations in order to achieve change towards standards of care and attitudes towards oral care for people with disabilities. This is especially important when for example collaborative requests come from FDI.

FDI approached our board last year and asked them to prepare a joint Global statement on Special Care Dentistry. This process will undoubtedly be a long one and I would like to thank Dr. Dimitris Emmanouil, Dr. Blanaid Daly, Dr. Denise Faulks and Dr. Alison Dougall who lead on this document and also to the large group of iADH members and voluntary patient organisations who aided in the development and advancement of this document through its consultation stages. Once everything is finalized and agreed, we will be sharing this global statement with all iADH members and it will form the agreed core mission statements for iADH. This is another milestone for iADH and will be used in the future to advocate for better oral health for people with disabilities globally with a variety of associations and regulatory bodies. The continued growing interest in iADH from other associations is due to initiatives such as this and represents the hard work and commitment of our members over the past years.

Preparations for iADH 2016 Congress are gearing up and planning information and details about the call for abstracts is included in this issue. I had the chance to meet with the SCDA organizing committee this March during their annual congress in Denver, Colorado. The group is very enthusiastic and is working very hard to make this congress an unforgettable one. I believe that the Chicago congress is going to be a big success both scientifically and also socially and will be a great chance to meet and forge links with our North American colleagues. Soon you will receive more updates about congress via our webpage and dedicated iADH2016 Facebook site. I look forward to meeting you at this up-coming event.

Our web page with its new face and content is the main communication of iADH through its members but a flourishing means of communication with our members and friends is via the Facebook page and our iadhtweets twitter feed. We have more than 500 members on our page and this increasingly seems to be the best tool for communication amongst our younger members or those who still feel young..........

It is important that we work to expand the integration and equity of services for people with disabilities and encourage the recognition and need for training in Special Care Dentistry worldwide. Both of these depend on the more countries and more individual members joining our organization in order to advocate locally. During my presidency, I’m very motivated to bring more countries into iADH that never attended iADH congress before. Therefore, I have decided to focus on North Africa and Middle Eastern countries as these are under represented at this current time. I have made several contacts with these countries and hopefully we will see a larger attendance from this part of the world over the next congresses. Finally, in the memory of all our members, I would like to finish my first President’s Letter with the words of Rumi below;

Timucin Ari,
iADH
Please enjoy the iADH summer Magazine and I hope that you will take time to read the news and features at your leisure over the next few days including contributions from members from all over the world who are part of our iADH community.

Putting together this issue of the iADH Magazine of 2015 was an emotional task for many. Reading the tributes to dear Jan Andersson-Norinder from those who knew him best was very touching but also ultimately inspiring. Everyone who came into contact with Jan found he had impacted on their lives and touched their souls. He was a leader and he encouraged and inspired so many en route.

My story is this: I was a young dentist very nervously giving my first ever oral presentation in the students section of the Madrid Congress of iADH some years ago having just completed my masters programme in SCD. Everyone was full of encouragement (and even praise) after my distinctly average 12 minutes were through. On my way out of the room a man in a leather jacket and gelled back hair stopped me and said ‘you probably had some good things to say - but i couldn’t understand a single word you were saying and you must remember that we don’t all have english as our first language - if you are going to make an impact in your career you need to keep things simple, slow down and allow people time to think and understand and enjoy your words as you go - please think of me and my faltering english every single time you start to speak in the future and you might get better at this’ …. I found him rather stern at the time but 2 years later we met again in the Athens Conference. To my surprise he remembered me and whirled me around the dance floor in a rock and roll style after first greeting me like an old friend and introducing himself as Jan Andersson-Norinder. That was the first time I heard his name and during the following congress in IADH Calgary he sought me out and encouraged me to do something exciting and specifically to take up my current post in Dublin, Ireland. I remember his words about clarity of speech and language every single time I am asked to speak in public and I always will. He is gone but not forgotten and I think the legacy we owe him is to continue with the work that he pioneered and advocate for better oral health and better oral health outcomes for those people with disabilities whom he so passionately cared about and of course to encourage younger and newer members of iADH to get more involved via mentorship, leadership and friendship.

I would very much like to thank our new iADH Executive Board Member Johanna Norderyd for her collaboration in this issue, as it is she who has so ably and efficiently assisted in the co-ordination of the tributes to Jan from the Scandinavian countries.

I would also like to say a big welcome to our new iADH editorial assistant Basak Durmus and look forward to working with her on the next issue. You can read more about Basak in the news from Turkey section and I am sure she will help us keep up all connected using all various methods of the communication available to us nowadays.

You will find that this magazine is a little shorter than usual in view of this being a special tribute issue, but it includes some key preliminary information about our iADH conference which will be upon us sooner than we think next April. Please save the dates in your diary and read more about the call for abstracts in this issue and watch for updates on Facebook and our website.

Alison Dougall
(iADH editor)
It's hard to understand that our dear friend and colleague Jan Andersson-Norinder is no longer with us. He passed away quietly after a long illness in the circle of his beloved family who always had the greatest place in his heart. In the field of Special Care Dentistry, Jan was a giant and his presence is sorely missed. His groundbreaking efforts in this area of dentistry have been both of national and international importance.

As a newly qualified dentist in 1972 Jan started his working career at a large Swedish institution for people with severe intellectual disabilities. Those of us who knew and worked with him can bear witness to his dedication to patients with difficult and complex problems and whose dental needs previously often had been neglected or given low priority. He skilfully managed to communicate his message to decision-makers and politicians in Sweden in order to secure top rate dental care for these patients. The following story may help to illustrate his gifted manners.

In 1992 I was privileged to work with Jan in the planning for a national symposium about dentistry for patients in psychiatric care. At that time a “National Investigation Committee of Psychiatric Care” had started its work in Sweden. Jan contacted the chairman for some advice. This turned out to be a stroke of well-timed genius because the investigators had entirely forgotten the oral care aspect of patients in mental care. Not only did we receive help for our symposium but we also became involved in the investigation. Oral Care got an elevated status and its own chapter in the national investigation report as a result!

Jan’s major achievement was the establishment and development of Mun-H- Center (MHC), i.e. a national orofacial resource centre for rare disorders. MHC opened its doors in 1995 in Gothenburg. Jan was director and Senior Dental Officer at the centre for many years. His leadership in the field of oral care and rare disorders, which at that time was of pioneering importance, was truly inspirational for all of us who worked there. The pleasure we took in our work was unique.

Jan was to me, and indeed to all who knew him, an inspiration, and a warm and good friend who is greatly missed. Like a snowball rolling down a snowy slope, the results of his efforts for the patients he held dear, will grow and gain momentum in the future.

by Bitte Alborg
Jan was a visionary and entrepreneur. As a young dentist in the seventies he early realized the need for special care. In the county of Bohuslän in Sweden, where he worked, he managed to convince the management in the Public Dental Service to establish dental teams that would particularly care for persons with disabilities. In the nineties the Ministry of Social Affairs started an investigation into financial support for dental care for people with disabilities. Amongst other they looked at the system that Jan built up and part of this was the basis for the compensation scheme introduced in 1999. Jan never saw any obstacles but always looked for opportunities. He inspired many of us and made a great contribution to improve the dental health of children and adults with disabilities.

The visionary

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Life-long commitment

Our dear friend and colleague Jan passed away last November. Jan was deeply committed to improve oral health care for persons with disabilities from the start of his professional career. He was a “down to earth”, empathic and enthusiastic person who inspired all of us to a commitment for those who need us the most. When we established the Norwegian national Resource Centre for Oral health in Rare Diagnoses in 1993, Jan immediately started to work to have a similar centre in Sweden, and the Mun-H-centre near Gothenburg became the second centre in the Nordic countries. With his holistic approach to what oral health comprised, his co-workers at Mun-H included speech and language therapists and nutritionists as well as specialists in all fields of dentistry. The Mun-H database is today an important source for various research projects within our areas of interest in rare diagnoses.

Jan was a very active member of our Nordic association (NFH), as well as IADH, and we all appreciate his commitment to our organisations. Jan and his devoted family had planned his funeral on December 16th in the beautiful old church in the village where he grew up. It was a warm and lovely ceremony where his wife, Eva, children, and grandchildren participated actively. All those present laid a rose on Jan’s coffin, and there was music and singing all the way. Later, family, friends and colleagues met for lunch at a scenic venue by the lake overlooking the Andersson summerhouse where Jan spent his happiest moments with his loved ones. We are thankful for having known Jan, and we have been deeply moved and inspired by his life-long commitment.
Jan Andersson-Norinder dedicated his professional lifework to patients with special needs and acted as their political advocate during all his professional life – both nationally and internationally. He started to work as a dentist at the largest institution in Scandinavia for people with intellectual disability in 1975. Most of his patients had severe untreated periodontitis and caries disease and Jan soon became aware that this group of patients were discriminated in society and also in dentistry. He claimed their right to dental care of excellence in a time when these individuals had very low priority in dentistry compared to healthy individuals. Thanks to Jan and his co-fighters the situation for patients with special needs has improved a lot in Sweden.

Jan was also a pioneer in the field of oral motor therapy. Together with the other NFH board members, Jan introduced Castillo Morales and the orofacial regulation therapy to Sweden in the late 1980s. It was on an oral motor conference in Gothenburg arranged by NFH that I met Jan for the first time. I knew then that Jan was the dentist of many of my patients and I decided to ask him if he would like see one of these patients together with me for the management of drooling - and he said yes. This was the beginning of a cooperation that lasted for almost twenty years.

In 1994, Jan invited me to join him and his team to build up a multidisciplinary center for patients with rare diseases. Jan was inspired by his dear friend and colleague Dr Kari Storhaug who had founded the TAKO Center for rare diseases in Oslo some years earlier and he was determined to start a similar project in Sweden. With financial support from The Swedish National Board of Health and Welfare and the local Public Dental Service, Jan started the Mun-H-Center orofacial resource center for rare diseases. The main mission of the center was to provide information about rare odontological and medical conditions to dental teams meeting these patient groups. The vision was good oral health and good oro-facial function for everybody. A database on oro-facial manifestations in rare diseases, the MHC database, was implemented in 1996. Jan is the co-author of two articles based on data from the MHC database collected between 1996 and 2008 which confirmed that a majority of these patients have odontological symptoms that require specialised dental care and that oromotor impairment and orofacial dysfunctions, such as affected intelligibility of speech, eating difficulties and drooling, are frequent in individuals with rare diseases.

The Mun-H-Center team is devoted to the mission to carry on the work that was initiated by Jan and we will always remember him for the good leader and the civil rights activist that he was. His empathy seemed to have no limits. We miss him very much and send our warmest thoughts to his beloved family that always were in his mind and in his heart.
Our Colleague, Mentor, Friend - Jan stands in a class of people that only few ever reach. I had the incredible privilege of serving with Jan on the executive of the iADH for many years and to count myself as lucky to have worked with him. His worldly and professional accomplishments, passion, and vision for advocating for people with disabilities were unparalleled.

We would often sit late into the night debating and arguing over sensitive issues. These discussions credit for a radical shift in my own philosophies and am so grateful for his encouragement to find North American solutions to problems that Jan had so well navigated and established in Scandinavia. The use of physical restraint and the methodologies of working with individuals with Autism spring to mind. Even if Jan vehemently disagreed he had the ability to acknowledge and respect diverse opinions while at the same time never letting go of his ideal. I always used to tease Jan about his Swedish work ethic. Twenty-four hours in a day were never enough for him. His energy fuelled by always being in service of others.

Working together with him on iADH matters one would always be acutely aware of how much he cared for the organization: he selflessly spent many personal hours ensuring iADH would grow to become a truly international body. The seeds he sowed are now coming to fruition and iADH is so much richer for Jan’s legacy.

Dr Clive Freedman

I came to know Jan when he joined the IADH Executive and in a very short time he and his fabulous family captivated us all. He had boundless energy and an enormous sense of fun! Above all, he was totally patient-centred and averse to anything self-congratulatory.

Spending time with him at Ågrenska in Lillövägen one quickly sensed that this was all about people as patients and not necessarily about the Centre, or Jan or any member of his team. On the IADH Executive, Jan wanted outcomes, ever before that became fashionable; he was not afraid to challenge or ask awkward questions, even to be critical. He did not tolerate artifice nor pomposity and possessed real insight into people and their motives. He cherished IADH and what it stood for; he eschewed the strongest moral code and assumed the same of others. He expected that, as an Executive, we stayed true to the ideals of IADH, so, for example, we variously stayed in people’s homes, even a training ship run by students, for our meetings, to contain costs. People on the Executive had to pull their weight and deliver, to make meaningful contributions and to work hard.

His enthusiasm for life knew no bounds and the chill of his confidences at the IADH meeting in Calgary, that something in his mind was not right, despite the way we denied and made little of it, stayed with me. After countless medical trips for tests and a confirmation of the diagnosis, the Jan we knew gradually slipped away and the world lost a really ‘good’ person.

Professor June Nunn
The 23rd IADH Congress will be hosted by the Special Care Dentistry Association and will run from August 14th-17th 2016 in Chicago Illinois at the Westin Michigan Avenue Hotel.

The theme is ‘Reframing Special Care’ and in order to fulfil the stated aim of ‘a Global Perspective’ we hope that dentists, hygienist or allied oral health care practitioners from all over the world who are interested in the oral health of people with disabilities will consider this meeting the must-attend event of the year for continued education and networking.

Booking will open on November 2nd and we will be posting up to date news as it happens via our website [www.iadh.org](http://www.iadh.org) and on Facebook and Twitter.

The first call for abstracts was released last week and the deadline for oral presentations and workshops is September 28, 2015 and deadline for applications for poster and round table discussions by November 16, 2015.

The online electronic abstract form calls for a maximum 300 word summary of the presentation in one of the following three formats:

**FORMAT 1 - Roundtable, poster, symposium, 20 minute short talk.**

This format is suited for presentation of research projects.

**FORMAT 2 - Roundtable, poster, symposium.**

This format is suited for presentation of policy, programs, interventions and program evaluations.

**FORMAT 3 - Workshop**

We strongly encourage or global members to consider applying to run a workshop to showcase areas of good practice or expertise and to work with colleagues to present a global perspective on topical issues of interest. Applications must include description of the workshop goals, description of the content to be covered in the workshop and description of the workshop design and the number of participants that can be accommodated in the workshop.

Please send in an abstract to encourage a truly global event and visit the SCDA website for more details [http://www.scdaonline.org](http://www.scdaonline.org) and [www.iadh.org](http://www.iadh.org)
In 2010 the International Association for Disability and Oral Health (iADH) Education Committee initiated an international consensus process to develop guidance for the core essential elements for programmes in Special Care Dentistry (SCD). Since that time the iADH has published curriculum guidance at the undergraduate level, which has been widely disseminated and translated into four languages.

Following the same methodology, a high level of agreement as to the essential core requirements of a post-graduate programme in SCD was established from an international expert panel. The post-graduate consensus process, which involved 44 experts from 17 countries, has informed the iADH Post-graduate Syllabus Guidance and it is intended that the suggested learning outcomes within this document may be used flexibly to develop discrete modules as fulfillment for certificates, diplomas, masters and doctorate programmes that meet the requirements of national professional and educational bodies.

People requiring Special Care Dentistry (SCD) are those with a disability or activity restriction that directly or indirectly affects their oral health. This disability or restriction is defined within the World Health Organisation’s International Classification of Functioning, Disability and Health (ICF) and is impacted by the personal and/or the environmental context of the individual. SCD takes a comprehensive, holistic approach to the care of patients, previously referred to as a group of people with ‘special needs. It is appropriate, therefore, that a postgraduate programme in SCD will draw on expertise across a wide variety of disciplines in health and social care.

This postgraduate curriculum document was launched at the iADH Conference in Berlin and is now available in three languages namely English, Spanish and French. It provides guidance for development of the key elements of a curriculum; namely content, learning and teaching strategies, assessment processes and evaluation processes.

The learning outcomes are arranged into eight modules for educators to develop contextualized, culturally sensitive educational programmes that conform, if necessary, to national regulatory bodies. It will enable educationalists to plan and develop postgraduate programmes in SCD that provide theoretical knowledge at the appropriate depth and most importantly, include hands-on clinical experience to build on and enhance graduates’ skills in order to engender the positive attitudes and behaviours necessary that are the pre-requisites for the successful delivery of SCD.

If you are an educator or student of SCD please download the curricula documents in your chosen language by visiting the educational resources page of the iADH website.
Evaluating attitudes to diversity and disability

Measuring attitudes, intentions and behaviours towards disability and diversity is DIFFICULT but theoretical and research models exist to help us do things rigourously.

Renewed interest in this problem has been elicited by the IADH undergraduate and post-graduate curricula as educators strive to measure the effectiveness and outcome of such educational interventions and examine how they shape future behaviours within the workforce.

An IADH task-force has been set up to collect, collate, develop and validate a set of tools for the evaluation of attitudes and behaviour to encourage collaborative longitudinal studies.

It is hoped that, members of IADH who regularly evaluate their teaching of students will collaborate by using some or all of these tools and share anonymised information with the task-force so that the tools can be further validated and refined and ultimately made available to all professionals working in education and SCD. The aim of the toolbox is that it will be be used to encourage harmonisation of data collection between centres to allow comparison and collaboration in order to increase the evidence base for educational interventions in SCD.

If you are an educator in SCD and are interested in finding out more about the study or you would like to use the pilot toolbox to measure the attitudes and planned/predicted behaviours of your students please contact:

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Meet our new iADH Editorial Assistant Basak Durmus

Following receiving her PhD degree from Marmara University, School of Dentistry, Dept. of Pediatric Dentistry, Dr Basak Durmus has been working as an University academic since 2010. She has had many articles published in different areas and her main fields of interests are; Laser therapy in pediatric dentistry, temporomandibular disorders in children, cariology, and provision of care for medically-physically-intellectually compromised children.

She’s living in Istanbul with her husband and two kids and she’s willing to make an effective contribution as an editorial assistant for the IADH magazine and is looking forward to writing some features for the magazine and collecting and compiling news from around the regions.

News from Sweden

The Mun-H-Center have produced three great videos to aid train staff to safely and confidently move a patient from a wheelchair to the dental chair in order to provide better opportunities for a good treatment position for the patient and for the dental staff. There are three videos available and step by step they show how to use various mobility devices such as a glide board, a turntable and a hoist. It is envisaged that clinical teams can watch them together in the clinic and they can be shown to new employees so that patients can be treated with better quality and dental staff avoid injuries.

The videos are in Swedish but it would be very easy for trainers to turn down the volume and talk over them in their native language as required. It is noted that one of the learning outcomes in the iADH education undergraduate curriculum is about safe transfer of patients from a wheelchair to a dental chair and so these videos provide a very useful resource for use in the teaching environment and are freely available by visiting:

News from Chile

In the offices of the San Sebastián University (Cumming campus), in the city of Santiago, Dr. Efrain Rojas Oxa, President Alope Chile and Dr. Fernando Fuentes Barria, Race Director of Dentistry, University San Sebastián - Santiago, have joined forces to carry out the Alope Congress to be held between 26 and 28 November this year, 2015. The event is intended for professionals from all of the national societies for oral health and Latin America, so that they all have tools when seeing patients with any special needs.

Dr. Efrain Rojas Oxa referred to the importance of the event and discussed: "It is a regional event, this part of the world, where everyone can exchange experiences, whether they are academic, institutional or private sector, about patients with special needs." He added: "This conference allows us to gather in one instance a set of themes and professionals who will make every colleague expand the scope of their skills in order to care for patients with special conditions. We hope this can bring their countries and incorporate it into daily practice and institutions. "Moreover, he referred to the importance of the support of the San Sebastian University:

For his part, Dr. Fernando Fuentes Barria, was emphatic in stating that many national dentists do not have the tools necessary for special patient care and said: "Here is where I think there is a flaw curriculum. The vast majority of dentists do not have the tools or cognitive, procedural and attitudinal or to face these patients with special needs."

"The USS has opened its doors for Congress to take place in their facilities so we can accommodate all national and Latin American colleagues, in a comfortable environment, modern, close to central places of Santiago and will allow attendees to learn more about the capital of our country. " He also invited all professionals oral health to participate in the Alope Congress: "The invitation is for Pediatric dentists, periodontist, dental assistants, hygienists, general dentists, learn to better manage and better serve these people who are part of our society, so that never again a situation of segregation occurs. We believe it is essential that the dentist is trained to efficient care and humanistic as it should be " he said.
Divya Jyoti College of Dental Sciences & Research inaugurated a Special Care Clinic named SUNEEDHI, on the 15th of September 2014 under the banner of iADH, India Chapter with Special Olympics, Bharat.

SUNEEDHI, The Centre of Excellence for Special Care Dentistry aims to bring all sectors of society together and build the cause for meaningful philanthropy. 12 Special schools and education centres in 10 miles radius were identified and the information on SUNEEDHI was shared with them through Government office on special education (Sarva Siksha Abhiyan) and Special Olympics. Schools were encouraged to participate and depute a special educator to bring 4 students/athletes every day -Monday through Thursday. Friday and Sat

National Tooth Brush Day - 7th November 2014 – Twenty five special athletes, twenty five school children and 25 adult patients were invited for the program. Seventy Five students of the 1st and 2nd year of BDS provided oral hygiene instructions on a One on One basis. It was an innovative personalised method resulting in sensitization of the young dental students to the people with intellectual disability and enhanced learning and training to the special athletes and the care givers, coaches and special educators.

Unified Dance - Students of the college participated in Unified Dance and Music with the Special Athletes. These activities were held on Children’s Day celebrated on 14th November and on World Disability Day. The staff and other students of the college are always present in large numbers to cheer.

Drop the “R” Word Campaign and Advocacy on Rosa’s Law

The staff and students of Divya Jyoti College of Dental Sciences & Research conducted a signature campaign with a pledge to Drop the R Word and restore dignity, justice, joy and respect to the people with intellectual disability.
Dear friends of the iADH:

As President of the next XII National Congress of the Spanish Society for Disability and Oral care (SEOEME) of Special Care in Dentistry it is a great pleasure to invite you to attend our congress. It will take place in Cádiz, from November 6th to November 7th. I want to emphasize the excellence of the speakers; all of them recognised in their field of work. We will have the opportunity to learn and to discuss latest issues and challenges in special care dentistry. As probably you know, Cádiz is one of the oldest cities in Europe. Its charm will be waiting for you, with a very active cultural and social program. You can get more information in www.seoeme.es

We wish to be your hosts in Cádiz in November.

Best wishes
José Ramón Corcuera
Flores, President of the Congress

Congratulations to the pupils and teachers from the Masters for Patients with Systemic Pathology from the University of Santiago da Compostela during their graduation ceremony

Congratulations to the pupils and teachers from the Masters promoting Integrated Adult Dentistry and Special Care Patients at the University of Seville, photographed here at their closing graduation ceremony

editors note:
Guidance for Post-graduate Education in Special Care Dentistry is available in Spanish as a free open access educational resource on the iADH website. Thanks to our colleagues in Spain SEOEME and our colleagues in Latin America for their collaborative hard work and assistance in this regard.
Social inequalities in oral health
From evidence to action, May, 2015, LONDON UK

The International Centre for Oral Health Inequalities and Policy (ICOHP) was formed in 2013. Committed to tackling oral health inequalities both within and between countries, academics and policy makers from 15 countries have formed a global network to inform policy recommendation. On the 21st May 2015, the ICOHIRP launched its first meeting in London. Eminent speakers from around the world presented an overview of the state of knowledge on global oral health inequalities and the actions needs to address the major public health problem presented by untreated decay, severe gum disease and oral cancer.

240 Delegates from over 20 countries took part in stimulating debate and discussion and several iADH members present ensured that inequality related to disability was part of this discussion. It was agreed that collaborative efforts between researchers, policy makers, public health practitioners, clinical teams and the public were urgently needed.

A monograph to accompany this meeting entitled "Social inequalities In oral health: from evidence to action is available to download by visiting the ICOHIRP website www.icohirp.com and includes a chapter on Disability and Oral Health.
Central to the process and aiming to move the agenda forwards is the London Charter on Oral Health Inequalities 2015 to encourage a more fundamental Public Health upstream agenda to tackle the underlying social, economic and political causes of oral health inequalities with action at local, regional and international levels. This charter exactly aligns with the expressed mission of iADH and it is hoped that IADH members will join the growing number of ICOHIRP partners to ensure that disability remains high on the agenda as it progresses. IADH members are encouraged to advocate for adoption of the charter locally and use it to lobby and act both nationally and internationally.

¥ Acknowledge that oral diseases are largely preventable and that oral health inequalities are unfair, unjust and can be avoided through action on the underlying causes of oral health inequalities in society.
¥ Act as an advocate for oral health equity in their local communities highlighting the public health significance of oral diseases and the need for Public Health Policies in particular upstream actions to tackle oral health inequalities both within and between countries.
¥ Lobby local and national decision makers and those in positions of authority to acknowledge the importance of oral diseases and their shared common risks with other non communicable diseases (NCD), and provide assistance in developing and implementing the actions needed to tackle oral health inequalities.
¥ Work in partnership with their communities to develop and implement local and sustainable solutions to promoting oral health and general health in an integrated fashion.
¥ Encourage and enable local, national and international dental professional organisations to recognise the importance of oral health inequalities and support actions to promote oral health equity.
¥ Promote and facilitate the reorientation of dental services towards the promotion of oral health and engagement in efforts to reduce oral health inequalities within local communities.
¥ Work in partnership with the Iadr-Global Health Inequalities Research Network and other stakeholders to ensure that research on oral health inequalities is given priority for funding and support so that the understanding of the causes of oral health inequalities, as well as the implementation of effective actions to promote oral health equity can be strengthened.
¥ Share any examples of good practice and their expertise and experience to support others on their efforts to promote oral health equity.
¥ Incorporate an oral health inequalities agenda within dental professionals undergraduate and postgraduate curricula.

We were delighted that a high number of members of SOSS were able to attend the IADH conference in Berlin and present their work. Our hallowed president, Philippe Guyet, even managed to get his photo taken with the IADH outgoing and incoming presidents!

The annual meeting of the French Association was hosted by Handident (www.handident.com) at the dental faculty of Strasbourg. There were approximately 80 dental attendees and 20 allied health or social professionals. The theme this year was ‘Bien-traitance et Santé Bucco-dentaire’ (‘Good treatment and oral health’). Seminars included liaison with the medico-social sector to improve oral health; ethics and quality of life; conscious sedation; and a workshop on oral hygiene in residential care homes. One of the highlights of the day was managing to get the French Secretary of State for persons with disability, Mme Ségolène Neuville, to address the conference and then exchange with the audience regarding barriers to oral health care for persons requiring Special Care Dentistry. This heated exchange was followed by an informal discussion over coffee where members of SOSS were able to put over their views and suggestions for improving services. May this discussion not have fallen on deaf ears! Thanks to Philippe Guyet for his perseverance in arranging for Mme Neuville’s visit. Thanks to Sylvie Albecker and Brigitte Mengus for organizing this very successful meeting.

SOSS was co-signatory of a consensual report addressing access to health care for persons with disability – Le Charte Romain Jacob (available at www.soss.fr). This national charter consisting of 12 articles aimed at facilitating access to healthcare was developed by numerous non-profit making organizations, disability groups, health insurance companies, scientific societies and the Ministry for Health. This document is to be used to inform health policy at a ministerial level.

SOSS also produced its own mission statement in 2014, which particularly calls for greater coherence and support for improving access to Special Care Dentistry throughout France (available at www.soss.fr).

In addition, the SOSS website is being completely rehauled with much greater interactivity and a more modern look. We hope that our members will now be able to both keep up to date and to contribute to the website with their own stories and ideas. Many thanks to Martine Hennequin of the Centre for Clinical Research in Odontology of Clermont-Ferrand and Olivier François (www.protolab.fr) for all their hard work on this project. See you at www.soss.fr!!

editors note:

Guidance for Post-graduate Education in Special Care Dentistry is available in French as a free open access educational resource on the IADH website. Thanks to our colleagues in the SOSS France for their collaborative hard work and assistance in this regard.
IADH gathers together professional health carers who are devoting themselves to drive change and raise awareness across society of the need for ‘disabled people to have the same opportunities as everyone else to maintain good oral-health’.

#Disability#notabarrier#IADH#enpower
#those#willingto#find#solutions#inorder
#to#challenge#barriers#combine#exchange
#experience#and#knowledge

**Membership of IADH**

Joining entitles you to:
- reduced member rates for scientific conferences, international and local meetings
- apply for research prizes and bursaries
- free online access to the Scientific Journal of Disability and Oral Health
- receive regular news and updates about events related to IADH via our magazine and email notifications
- meet colleagues around the world and sharing experiences scientifically at global scale to improve the oral health and quality of life for persons with special needs discover unmet needs!!!
No one's death comes to pass without making some impression, and those close to the deceased inherit part of the liberated soul and become richer in their humanness.

~ Hermann Broch