



A Monthly Newsletter from ADEA Executive Director Richard W. Valachovic, D.M.D., M.P.H.

In this month's letter, Dr. Rick Valachovic, Executive Director of the American Dental Education Association, ponders the present and future impact of globalization on the dental education community.



Our dental education community has something that the world wants and needs.

A Warm Day in Adelaide

Last November, on a South Australian spring day, the ruler of Sharjah came to the University of Adelaide. The visit of His Highness Dr. Sheikh Sultan Bin Mohammed Al-Qassimi marked a bond that had been created between the Australian university and the Persian Gulf state, one of the seven United Arab Emirates. Earlier in 2005, according to the monthly *Adelaidean*, the University of Adelaide had signed a contract worth nearly US\$5,000,000 with the University of Sharjah to provide the Bachelor of Dental Surgery curriculum, intellectual property, and associated expertise to Sharjah's new College of Dentistry.

For me, there are two messages in the Sharjah-Adelaide connection. The first is that dental education knowledge is a highly valued international commodity. The second is that globalization has come to dental education.

Globalization, says the Carnegie Institution, is "a process of interaction and integration among people, companies, and governments of different nations." This process, Carnegie continues, "has effects on the environment, on culture, on political systems, on economic development and prosperity, and on human physical well-being in societies around the world."

The leading explainer of globalization, of course, is Thomas L. Friedman, the *New York Times* foreign affairs columnist. In his best-selling, must-read *The World Is Flat: A Brief History of the 21st Century* (2005, 2006) he traces the steps that have made it possible, even inevitable, for institutions, companies, and individuals to collaborate—and compete—on a global basis.

The first step was political—the tumbling of the Berlin Wall in 1989, which "tipped the balance of power across the world toward those advocating democratic, consensual, free-market-oriented governance" and "enhanced the free movement of best practices." Then technology took up the march, so that according to Friedman, "It is now possible for more people than ever to collaborate and compete in real time with more other people on more different kinds of work from more different corners of the planet and on a more equal footing than at any previous time in the history of the world—using computers, e-mail, fiber-optic networks, teleconferencing, and dynamic new software." These steps came together in force about the year 2000. And that is why the voice that answers when you call for help with your operating system or your lost luggage is probably coming from Bangalore. And why your accountant may be outsourcing your tax return. And why your CT scan may be read by a radiologist in Australia.

What does globalization mean for practicing dentists? I highly recommend [Globalization and its implications for dentistry](#), an excellent series of articles that the American Dental Association put online this past spring and summer. One piece looks at what happens when a dentist's patients lose their jobs to overseas competition. Other installments examine U.S. dental laboratories that send work to foreign labs, the exportation or "offshoring" of the examination glove industry, and the fast-growing business of dental tourism. In that phenomenon, patients travel the world in search of cut-rate dental care, not always with satisfactory results.

In the emerging globalization scene, the ADA is a player from the practicing dental community, as is the FDI World Dental Federation. Governments are represented by the World Health Organization and by the European Union (the EU is supporting a multiyear project to raise and standardize benchmarks of European dental education and to create a "Profile of an International Dentist"). The International Association of Dental Research is an important global player. ADEA is one of two major actors for academic dentistry; Immediate Past President Dr. Eric J. Hovland chairs ADEA's Task Force on Globalization. Since 1992, the International Federation of Dental Education Associations (IFDEA), which I serve as Executive Director, has been the second major representative of academic dentistry. Next year, following a global congress, IFDEA will become The International Federation of Dental Educators & Associations, based in Washington, D.C., and Dublin, Ireland, and presented as "The Global Network for Dental Education."

So, with this background, here are some globalization-related developments that our dental education community should watch for during the next five to ten years:

- In countries that are more prosperous because of globalization, particularly India and China, there is pent-up consumer demand for oral health care. To meet this demand, new dental schools will be launched (India, which had 50 schools five years ago, now has 220).
- More schools, more students. There will be a global millennial generation of dental and allied dental students.
- International accreditation, and the setting of uniform global standards for dental education, will become even bigger issues than they are now.
- There will be changes in funding for dental research. NIH will continue to be the major funder in the United States. But in the rest of the world, corporate research and development funds will be footing the bill.
- New models for the allied dental workforce will emerge. Although the Alaska Native dental health-aide therapist concept is facing a lawsuit, the idea has been planted.
- ADEA will explore future membership opportunities for institutions outside the United States. Toward this end, we are inviting the deans of all the Mexican dental schools to participate in a focus group at the 2007 ADEA Annual Meeting.
- Technology will play a large role in global dental education. We will see Web-based dental schools, more e-learning, and more licensing of curriculum (as in the Adelaide-Sharjah arrangement). Also, thanks to excellent translation software, language will be much less of a barrier than it has been.

Advances in technology have accelerated international collaboration that has been going on for decades because of personal and professional relationships that faculty, administrators, and others have developed with their peers at institutions and organizations around the world. What's different today is that many journals, research and marketing studies, and conference proceedings are now available on the Internet. We can communicate with one another by email without regard for time, distance, or borders. This can only become more important. Disease, after all, knows no boundaries, and neither does learning. In the future we all will have chances to learn from one another.

Earlier this year, in Shenzhen, China, ADEA President Ken Kalkwarf and I found ourselves in a darkened lecture hall with 1,500 Chinese dentists at the FDI Annual Meeting, watching a PowerPoint presentation. The program was "Implant Dentistry: An Asian Perspective." On the screen, the message was the incidence of implants per 100,000 people in three countries: 400 per 100,000 in the United States, 800 in Germany, and 1.2 in China. The last line

on the screen was "Look at the opportunity for us!"

Globalization is our opportunity as well. Our dental education community has something that the flattened world wants and needs: the tremendous and powerful accumulation of talent and knowledge residing in our membership. How that plays out on the world stage remains to be seen. But rest assured, the world is flat, and knowledge can be golden. Ask the folks at the University of Adelaide.

Happy holidays!



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