Dear friends and colleagues,

In this August issue, I would like to discuss the importance of our profession. You might say that it is a strange topic for me, as a president, and of course you would be right were it not for the fact that the dental hygiene profession is not always recognized by other professionals.

Let me give you some examples. In the WHO's action plan for oral health entitled 'Oral health: action plan for promotion and integrated disease prevention' (2007), oral health has been integrated into general health. As Sara Monaiem pointed out in the February issue of the International Journal of Dental Hygiene (2009), discussions on capacity building in oral health systems that are oriented towards disease prevention and primary health care involve the dental hygiene community. However, in most countries, dental hygienists largely work in private practice rather than in public institutions. The cost to society of this missed opportunity, its impact on human capital and the resulting macroeconomic implications are yet to be calculated. If dental hygienists can effectively respond to the shortages of oral-health personnel, the need to train primary healthcare workers as suggested in the report would be reduced (Monajem, Int J Dent Hyg 2009; 7).

The importance of prevention in oral health is finally being recognized by the medical profession. In the editorial of the Lancet (Lancet 2009; 373), numerous advantages of promoting oral health are mentioned and prevention is emphasized as the key issue. However, when writing about the health workers who can be involved in delivering the preventive message, the dental hygienist is not mentioned. Why are we not mentioned? Are we not doing a good job? In a review of the literature titled 'The economic impact of preventive dental hygiene services' (Stull *et al.*), it was shown that where there is an increase in the use of preventive dental services, there is a significant decrease in restorative needs (Stull *et al.*, J Dent Hyg 2005; 79).

To have an impact, we need to have more market power among external stakeholders. We should control our scope of practice and prove to our stakeholders that dental hygiene services are both efficacious and cost-effective as Elizabeth Brutvan says in Current Trends in Dental Hygiene Education and Practice (*J Dent Hyg* 1998; 72). This is already happening in Canada and the Netherlands, as well as in many other countries, but a lot still remains to be done.

I would like to end on a happy note. We have been recognized by an important organization: the WHO has invited me as a temporary adviser for their upcoming meeting in June, titled 'Global consultation on the contribution of health professions to primary health care and the global health agenda'.

It is proposed in the letter of invitation of the WHO, 'that a virtual Global Health Profession Network (GHPN) will be formed through a WHO electronic platform known as the Knowledge Gateway. The Knowledge Gateway supports virtual social networking and Communities of Practice that will focus on sharing knowledge, experience and expertise to define the contribution that different health professional groups can make towards improving global health issues. In addition, it is envisaged that through these virtual communities it will be possible to engage the various professional groups in relevant dialogue to explore opportunities to collaboratively contribute more effectively towards the work of WHO in regard to achieving improved health and access to equitable healthcare provision. There is general recognition of the important role that all health professions could play in one way or another in strengthening the work of WHO, and thereby contributing towards improved health and the strengthening of health systems globally. However, it is also acknowledged that much of the activities of different health professions is often done in a profession-specific approach, with limited recognition of the value of, and need for a more multi-disciplinary and interprofessional collaborative approach towards successfully achieving global healthrelated outcomes. The WHO Study Group on Inter-professional Education and Collaborative Practice describe interprofessional collaboration as 'a patient-centred, team-based approach to healthcare delivery that synergistically maximizes the strengths and skills of each contributing health worker' and which through collaboration can contribute towards lowering patient mortality, improving health services, reducing costs and increasing staff motivation, well-being and retention. It was agreed that in order to define the vision, goals and activities of the proposed Global Health Profession Network (GHPN), it would be important to provide a forum for the leaders of health professions to meet in order to discuss

the issues, identify their synergies and define their roles in future activities. Consequently, considering the potential value of an effective synergistic approach towards real multidisciplinary and interprofessional collaboration to improving health inequities and achieving successful health system strengthening globally, the decision to hold a Global Consultation of health professions the June 2009 is particularly timely and important'. By the time you have read this editorial, I will have been to Geneva. I will let you know the outcome.

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