

# GENERAL ASSEMBLY

**PRAGUE 2026**

**General Assembly A: Friday, 4 September 2026**

08:30 – 12:00 & 13:30 – 17:00

**General Assembly B: Tuesday, 8 September 2026**

14:00 – 17:30



**O2 universum**

Room C1/C2/C3 • Prague, Czech Republic

# General Assembly – A

**Date:** Friday, 4 September 2026 **Time:** 08:30 – 12:00 **Location:** O2 Universum - Room “C1/C2/C3”  
13:30 – 17:00 PRAGUE, CZECH REPUBLIC

## Agenda

| Time        | Topic                                                                                                                                        | Speaker             |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| 08:30-08:45 | <b>1A. INTRODUCTION</b>                                                                                                                      | S. Liew             |
|             | 1.1 Welcome and opening remarks by the Speaker                                                                                               |                     |
|             | 1.2 Opening remarks from the President of the Czech Dental Chamber                                                                           | R. Šmucler          |
|             | 1.3 Establishment of a quorum                                                                                                                |                     |
|             | 1.4 Apologies                                                                                                                                |                     |
|             | 1.5 Announcements                                                                                                                            |                     |
|             | 1.6 Approval of the 2025 General Assembly minutes (1-56)                                                                                     |                     |
|             | 1.7 Approval of the Agenda                                                                                                                   |                     |
|             | 1.8 General Assembly Manual (57-65)                                                                                                          |                     |
|             | 1.9 Response Budget Reference Committee 2025 (66-68)                                                                                         |                     |
| 08:45-09:00 | <b>2A. PRESIDENT’S REPORT</b> (69-72)                                                                                                        | N. Sharkov          |
| 09:00-09:15 | <b>3A. EXECUTIVE DIRECTOR’S REPORT</b> (73-76)                                                                                               | E. Bondioni         |
| 09:15-09:30 | <b>4A. REPORT ON FDI ACTIVITIES</b>                                                                                                          |                     |
|             | • Projects overview report (77-86)                                                                                                           |                     |
|             | • Advocacy & Communications report (87-102)                                                                                                  |                     |
|             | • FDI Congress (see Education Committee report)                                                                                              |                     |
|             | • International Dental Journal (103-127)                                                                                                     |                     |
|             | Video Presentation available on GA Webpage                                                                                                   |                     |
|             | • Vision 2030: Implementation and Monitoring Working Group report Video presentation on Mid-term survey results available on GA Webpage (88) |                     |
| 09:30-09:40 | <b>4.1 WORLD ORAL HEALTH DAY</b> (93-99)                                                                                                     | A. Lella            |
|             | <b>4.2 STANDING COMMITTEES’ REPORTS</b>                                                                                                      |                     |
| 09:40-09:50 | 4.2.1 Dental Practice Committee (128-129)                                                                                                    | D. Hammer           |
| 09:50-10:00 | 4.2.2 Education Committee (130-133)                                                                                                          | A. E. Valenzuela    |
| 10:00-10:10 | 4.2.3 Membership Liaison and Support Committee (134-135)                                                                                     | I.M. Tarrazzi       |
| 10:10-10:20 | 4.2.4 Science Committee (136-137)                                                                                                            | J. Platt            |
| 10:20-10:30 | 4.5.5 Public Health Committee (138-139)                                                                                                      | C. Chu              |
| 10:30-11:45 | <b>5A. PROXY VOTING</b> (140-146)<br>presentations and discussion                                                                            | D. Hammer           |
| 11:45-12:00 | <u>FDI Smile Award Ceremony</u>                                                                                                              | N. Sharkov / C. Chu |
|             | <b>12:00 – 13:30 LUNCH</b>                                                                                                                   |                     |



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| <b>13:30-16:00</b>         | <b>6A. SPECIAL COMMITTEES (SC)</b><br><i>(presentations and discussion)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |
| 13:30-14:10<br>14:10-15:40 | 6.1 SC on Membership Subscription Formula <i>(147-150)</i><br>6.2 SC on World Dental Parliament <i>(151-155)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | F. Lemor<br>K. Preston       |
| <b>15:40-16:20</b>         | <b>7A. FINANCIAL MATTERS</b><br>7.1 Report from the Treasurer <i>(156-158)</i><br>7.2 Financial Statements 2025 <i>(159-182)</i><br>7.3 Annual Report <i>(183-240)</i><br>7.4 Report from the Audit Committee <i>(241-242)</i><br>7.5 Forecast 2026 <i>(243-247)</i><br>7.6 Five-year budget comparison <i>(249)</i><br>7.7 Budget 2027 including Budget Forms <i>(250-346)</i><br><i>Please read the Draft budget introduction document on page 251</i>                                                                                                                                                                                                                                                                                                                                                                                | C.G. Summerhays<br>A. Dhoble |
| <b>16:20-16:25</b>         | <b>8A. RELATIONS</b><br><br>8.1 Regular Members <i>National Liaison Officers' reports are available on the GA webpage (Tab "2025 NLO Reports")</i><br><br>8.2 Regional Organizations <i>(347-349)</i><br><br>8.3 Affiliate and Supporting Members <i>(350-358)</i><br><br>8.4 Sections<br>8.4.1 Defense Forces Dental Services <i>(359-361)</i><br>8.4.2 Chief Dental Officer / Dental Public Health <i>(362)</i><br>8.4.3 Women Dentists Worldwide <i>(363-365)</i><br><br>8.5 Relations with International Organizations<br>8.5.1 World Health Organization (WHO) <i>video presentation available on the GA webpage</i><br><i>Relations with the WHO, World Health Professions Alliance (WHPA), International Organization for Standardization and NCD Alliance are reported in the President's and Executive Director's reports.</i> | S. Liew                      |
| <b>16:25-16:40</b>         | <b>9A. MEMBERSHIP</b><br><i>Membership documents available at the GA webpage (Tab "List of Members and Membership Applications")</i><br>9.1 List of current members<br>9.2 Applications for membership                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | S. Liew                      |
| <b>16:40-16:50</b>         | <b>10A. NOMINATIONS</b><br><i>- Candidates' nominations and video presentations available at the GA webpage ("Elections")</i><br><i>- Presentations by the candidates for Standing Committees will take place at Open Forum 2</i><br>10.1 Presentations by the candidates for Council                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | S. Liew                      |
| <b>16:50-16:55</b>         | <b>11A. ANY OTHER BUSINESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | S. Liew                      |
| <b>16:55-17:00</b>         | <b>12A. ADJOURNMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | S. Liew                      |

## General Assembly – B

**Date:** Tuesday, 8 September 2026

**Time:** 14:00 – 17:30

**Location:** O2 Universum - Room C1/C2/C3;  
PRAGUE, CZECH REPUBLIC

### Agenda

| Time           | Topic                                                                                                                                                                          | Speaker                |
|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| 14:00-14:10    | <b>1A. INTRODUCTION</b><br>1.1 Welcome and opening remarks by the Speaker<br>1.2 Establishment of a quorum<br>1.3 Apologies<br>1.4 Approval of the agenda<br>1.5 Announcements | S. Liew                |
| 14:10-14:40    | <b>2B. POLICY STATEMENTS</b><br><i>Available at the General Assembly webpage<br/>(Tab "Policy Statements")</i>                                                                 | S. Liew                |
| 14:40-15:00    | <b>3B. FINANCIAL MATTERS</b><br>3.1 Report of the Budget Reference Committee<br>3.2 Budget 2027                                                                                | S. Liew                |
| 15:00-15:16:10 | <b>4B. REFERED ISSUES</b><br>4.1 From General Assembly A<br><br><b>POSSIBLE VOTING ON MATTERS PRESENTED AT THE GAA</b><br><br>4.2 From Open Fora and Committees                | S. Liew                |
| 16:00-16:10    | <b>5B. PRESENTATION OF CERTIFICATES</b><br>5.1 Presentation of Certificates to new Members<br>5.2 Presentation of Certificates to leaving officers                             | N. Sharkov             |
| 16:10-16:20    | <b>6B. FDI WORLD DENTAL CONGRESS (WDC)</b><br><br>Short address and handover of FDI flag to 2027 World Dental Congress Local Organizing Committee                              | R. Šmucler / A. Dhoble |
| 16:20-17:00    | <b>7B. ELECTIONS</b>                                                                                                                                                           | S. Liew                |
| 17:10-17:25    | <b>8B. ANY OTHER BUSINESS</b>                                                                                                                                                  | S. Liew                |
| 17:25-17:30    | <b>9B. CLOSING</b>                                                                                                                                                             | S. Liew                |



# Minutes

## FDI World Dental Federation General Assembly (GA) Meeting “A”

|                        |                                                                                                                                                                                                                                                                                                                                           |                                                            |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| Date: 7 September 2025 | Time: 09:00–12:30 & 14:00–17:30                                                                                                                                                                                                                                                                                                           | Location: FDI World Dental Congress 2025 - Shanghai, China |
| Participants:          | FDI President, President-elect, Treasurer, Executive Director, 10 Councilors and Speaker of the General Assembly; 59 Regular Member Associations (119 Regular Member Delegates), Representatives of the Associate Member Association, Affiliate Member Associations, Supporting Member Association, 2 Past Presidents and FDI Secretariat |                                                            |

| Agenda Item                                    | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Action |
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| 1A. INTRODUCTION                               |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |        |
| 1.1 Welcome and opening remarks by the Speaker | S    | S. Liew           | <p>Dr Stephen Liew (hereafter referred to as 'The Speaker') welcomed everyone to Shanghai, to the 2025 General Assembly “A” meeting of the FDI World Dental Federation.</p> <p>The Speaker extended his welcome by emphasizing that the FDI General Assembly represents more than one million practitioners worldwide and convenes annually to set FDI's strategic goals and guide the organization in achieving its mission. Above all, the General Assembly (GA) brings together expertise from more than 130 nations to shape global oral health policy at the highest level, working through FDI's relationships with the World Health Organization and the United Nations, ultimately for the benefit of people around the world.</p> <p>While this is no small goal, everyone can see collective efforts recognized through the formal inclusion of oral health in the UN's noncommunicable disease agenda. The 2025 marks a year of genuine progress achieved together, with each person in this room contributing in their own unique way. With this powerful, united commitment, the FDI and the GA have the ability to change the future for the 3.5 billion people worldwide who suffer from oral disease. After this statement, the Speaker formally began the 2025 FDI General Assembly “A” meeting.</p> |        |

| Agenda Item                                                                            | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Action |
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| 1.2 Opening remarks from the President of the Chinese Stomatological Association (CSA) | S    | S. Liew           | <p>The Speaker recognized the members of the Executive Committee, Council, Past Presidents, the Presidents and Chairs of FDI Regional Organizations, members of the Regular, the Associate, the Affiliate and the Supporting Member Associations, and FDI Secretariat.</p> <p>After introducing the meeting documents and informing logistical details for conduct of this meeting, the Speaker invited the CSA President, Dr Chuanbin Guo, to address the Assembly.</p> <p>Dr Chuanbin Guo, expressed a great pleasure in welcoming the Council, Delegates, and all congress participants to the second FDI World Dental Congress held in China. This gathering is as a premier platform for showcasing the latest advancements in the profession. Following the success of the previous congress in Shenzhen in 2006, this year, the CSA is privileged to welcome more than 10,000 delegates from around the world. The program will feature 100 keynote lectures, a Young Dentists Forum, and numerous scientific sessions, making it an expanded international hub for oral health professionals committed to advancing global oral health.</p> <p>Dr Guo reminded that Shanghai offers a vibrant display of China's rich traditions and expressed his hope and confidence that all participants will find their free time as enriching as the congress itself. Dr Guo wished that this congress would provide all participants with valuable professional insights and lasting memories.</p> |        |
| 1.3 Establishment of a quorum                                                          | S    | E. Bondioni       | The Executive Director confirmed the presence of a quorum.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| 1.4 Apologies                                                                          | S    | S. Liew           | <p>The Speaker received apologies from the Members of the List of Honour – Prof. John Clarkson, Dr Stephen Hancocks and Dr John Hunt, and from the following FDI Past Presidents - Dr Burton Conrod and Dr Orlando Monteiro da Silva.</p> <p>Apologies were also received from the following Regular Members: Colegio de Odontólogos de Bolivia, Cambodian Dental Association, Canadian Dental Association, Colegio de Cirujanos Dentistas de Honduras, The Icelandic Dental Association, Associazione Italiana Odontoiatri (AIO – Italy), Lao Dental Association and Swedish Dental Association.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |

| Agenda Item                                       | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Action |
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| 1.5 Announcements                                 | S    | S. Liew           | There was one announcement at this meeting: the CSA was offering the exhibition guided tours for the GA participants in groups. The information was available at the exhibition desk.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |        |
| 1.6 Approval of the 2024 General Assembly minutes | D    | GA                | <b><i>The minutes of the 2024 General Assembly were approved without amendments.</i></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |        |
| 1.7 Approval of the agenda                        | D    | GA                | The agenda was approved as circulated without amendments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| 1.8 General Assembly manual                       | S    | S. Liew           | The Speaker reminded the delegates about the parliamentary procedures, after which the test vote was conducted.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
| 1.9 Budget Reference Committee 2025               | S    | S. Liew           | The FDI Constitution makes a provision for appointments of Reference Committees to facilitate the work of the General Assembly.<br><br>In accordance with the Constitution the Council has proposed that the following individuals serve on the 2025 Budget Reference Committee for the duration of this General Assembly: Prof. Nour Habib (Egypt), Dr. Gabriela Ramirez Mendoza (Mexico), Dr. Jean-Philippe Haesler (Switzerland), Dr Adirek Sriwatanawongsa (The Thailand) and Dr. Eddie Crouch (The United Kingdom).                                                                                                                                                                                                                                                                                                                         |        |
|                                                   | D    | GA                | <b><i>The General Assembly approved the establishment of the Budget Reference Committee as nominated by the Council at this meeting.</i></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| <b>2B. PRESIDENT'S REPORT</b>                     |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
|                                                   | S    | G. Chadwick       | The President, Dr Greg Chadwick, welcomed the participants to the 2025 General Assembly and thanked them for their commitment and presence. The World Dental Parliament is far more than a calendar event; it serves as the governance foundation of FDI. This is where FDI members come together united to reflect on progress, address challenges and collectively set the course for the future.<br><br>The President encouraged active participation, open-minded dialogue, and global collaboration, noting that the strength of FDI comes from the voices and leadership of its members.<br><br>The President was honoured that his term began with the launch of the 2024 - 2027 FDI Strategy, which established a values-driven roadmap focused on knowledge exchange, advocacy, and innovation. He was part of a major decision, to end |        |



| Agenda Item | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Action |
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|             | S    | G. Chadwick       | <p>partnerships with the sugar-related industries, which is an important, principled stand for public health and professional integrity.</p> <p>Looking ahead, he called to build on current momentum, strengthen partnerships, and continue working toward a future where oral health is recognized and protected worldwide. Over the past year, FDI's advocacy has gained strong momentum, with oral health increasingly recognized in global health discussions. A major milestone was FDI's active participation in the first WHO Global Oral Health Meeting, where the World Health Organization (WHO) Member States adopted the Bangkok Declaration "No Health Without Oral Health" ahead of the upcoming UN High-Level Meeting (HLM) on Non Communicable Diseases (NCDs) &amp; Mental Health in New York. FDI has worked intensively to ensure oral health is included in the HLM Political Declaration, mobilizing members and partners.</p> <p>He reminded of his words when talking over the FDI Presidency in 2023: "<i>Enhancing FDI's position means supporting and working with our members</i>". FDI's global achievements depend on the dedication of its national and regional members. The President thanked member organizations for their advocacy, education, policy work, and public awareness efforts, which give strength to FDI's global influence. Over the past two years, the President has engaged directly with many members through visits, events, and interactive Member Briefings with the Executive Director, gaining valuable insights into their successes, challenges, and innovations. Together with members, he has explored key topics such as sustainability, innovation, leadership, education, and prevention, ensuring that FDI stays relevant and responsive. The President also highlighted the importance of external partnerships in expanding global impact.</p> <p>Following a mandate from the General Assembly in 2024, two Special Committees were established to examine key issues: the Membership Subscription Formula and the feasibility of a Hybrid World Dental Parliament. These reviews are crucial for ensuring inclusivity, fair representation, equitable contributions, financial sustainability, and long-term institutional resilience in a rapidly changing global environment. Although forming the Committees took time to ensure balanced expertise, their work is now progressing with clear focus. Their progress reports were delivered later at this meeting.</p> <p>As his presidency was coming to an end, the President took a moment to express his sincere gratitude to all those who have supported him throughout his journey. He thanked his family for their unwavering support, as well as his colleagues on the</p> |        |

| Agenda Item                            | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Action |
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|                                        | S    | G. Chadwick       | <p>Executive Committee, the Council, and across Committees, Working Groups, and Task Teams for their dedication, insight, and time.</p> <p>The President expressed appreciation to all FDI members around the world for their trust, engagement, and tireless efforts at national and regional levels, and offered special thanks to the American Dental Association, for their longstanding support of FDI and their leadership in global oral health, which has been a steady source of strength throughout his presidency and his career.</p> <p>The President further thanked FDI's corporate partners for their continued collaboration and support, and colleagues across global health organizations for their shared commitment. He extended heartfelt gratitude to the FDI Executive Director and the entire Head Office staff, describing them as exceptional. He praised their professionalism, energy, and dedication in keeping FDI moving forward and making it possible to turn FDI's vision into action.</p> <p>The President concluded his report by quoting Mark Twain: "<i>The two most important days in a person's life are the day you were born and the day you find out why.</i>" He thanked all participants of the General Assembly and reminded that their shared journey, working together as a profession to improve oral health worldwide, is FDI's "why".</p> |        |
| <b>3A. EXECUTIVE DIRECTOR'S REPORT</b> |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |
|                                        | S    | E. Bondioni       | <p>The Executive Director, Enzo Bondioni, welcomed attendees to Shanghai for the FDI World Dental Parliament and Congress. He acknowledged that the Congress, originally planned for 2020, was postponed due to COVID-19 and he thanked the CSA for their patience, resilience, and continued partnership.</p> <p>He invited delegates to fully engage with the exceptional Congress and Exhibition offerings, including visiting the FDI booth to try the new Toothie video game and the photobooth. The programme was highlighted as rich and varied, featuring the NLO Forum, the launch of World Oral Health Day, Committee Fora, a session reviewing the first five years of Vision 2030 and planning the next five, plus numerous initiatives and sessions. He also encouraged participation in the social programme as an important opportunity to reconnect, exchange ideas, and celebrate the profession.</p> <p>The Executive Director thanked all FDI members. Members' engagement helped position FDI as the leading global voice for oral health. This year is especially important as the UN High-Level Meeting on NCDs &amp; Mental Health approaches.</p>                                                                                                                                                                                                                    |        |

| Agenda Item | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Action |
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|             | S    | E. Bondioni       | <p>When oral health was omitted from the initial Zero Draft of the Political Declaration, FDI rapidly mobilized its global network, its members, Council, contacts in Missions in Geneva, Chief Dental Officers, and partners, to lobby the Governments. Thanks to coordinated action, subsequent drafts increasingly recognized oral health. This demonstrates the unique value of FDI's access and influence at the highest levels.</p> <p>The Executive Director highlighted major achievements in education over the past year, notably the launch of FDI's new Master CE Programme which demonstrates the growing need for high-quality, accessible dental education worldwide. Other key achievements focused on education were FDI's Regional Congresses held in 2025 in Riyadh, Saudi Arabia, and San José, Costa Rica, organized in close collaboration with the Saudi Dental Society and the Costa Rica Dental Association. Both events attracted high participation and excellent feedback.</p> <p>Due to the positive outcomes, the FDI Council has decided to continue this model and aims to hold at least one regional congress each year. Further details will be shared in the Education Committee's report.</p> <p>While education remains a core pillar for FDI, advocacy at global level is equally essential. Over the past year, FDI has made significant progress in strengthening the place of oral health within the global health agenda, thanks to consistent engagement with key stakeholders. FDI's leadership is increasingly recognized, with regular invitations to high-level events hosted by governments and major health organizations. At the upcoming UN High-Level Meeting on NCDs &amp; Mental Health, for example, Asst. Prof. Nikolai Sharkov will speak at several side events, helping elevate oral health within the NCD agenda. When possible, FDI also relies on members to represent the organization at regional UN meetings, ensuring oral health remains part of discussions.</p> <p>FDI's official relations status with WHO allows for access to important decision-making processes. FDI extends this access to its members through updates, joint advocacy efforts, and coordinated input. When invited to comment on major WHO and UN policy documents, we gather member feedback and integrate it into our submissions, helping shape global oral health policy.</p> <p>The WHO invited FDI, alongside the "<i>Global Self-Care Federation</i>" and the University of Montpellier, to co-lead the Advocacy and Communication workstream of the new Global Coalition on Oral Health, launched at the Bangkok Meeting in November 2024. The Coalition has four workstreams: Advocacy and Communication, Implementation Research (led by IADR), Knowledge Translation, and Meaningful Engagement of people with oral diseases and other NCDs.</p> |        |

| Agenda Item                                                                 | Type | Persons concerned     | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Action |
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|                                                                             |      |                       | <p>The Executive Director announced that FDI and International Association for Dental, Oral and Craniofacial Research (IADR) are working on a joint Position Statement on Fluoride. The objective is to defend evidence-based practice and ensure fluoride remains supported in policy. This topic will be discussed in Open Forum 3. He encouraged participants to participate.</p> <p>While the International Dental Journal (IDJ) presentation was available on the GA Webpage, the Executive Director recognized the work and leadership of Professor Lakshman Samaranyake, the IDJ Editor-in-Chief. IDJ has reached a new impact factor of 3.7. This marks an important milestone and reflects the Journal's growing influence in the global scientific community. The presentation included a short video showing the achievement of the IDJ.</p> <p>The Executive Director ended his report by expressing his gratitude the entire FDI community, members, leadership, industry and institutional partners, and the team at FDI Headquarters. He extended a special thanks to the Executive Committee for the tremendous support and in particular, to outgoing FDI President, Dr Greg Chadwick.</p> |        |
| <b>4A. REPORT ON FDI ACTIVITIES</b>                                         |      |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| 4.1 World Oral Health Day                                                   | S    | S. Liew               | <p>The complete written reports were part of the General Assembly documents. The video presentation on IDJ was available at the GA Webpage.</p> <p>In addition to these reports, at this meeting, a report on World Oral Health Day was presented by Dr Anna Lella, Chair of the World Oral Health Working Group, and a report on the work by the Vision 2030 Implementation and Monitoring Expert Group was presented by the Chair, Prof. Manu Mathur.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |        |
| 4.2 Vision 2030:<br>Implementation and<br>Monitoring Expert<br>Group report | S    | A. Lella<br>M. Mathur |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| <b>STANDING COMMITTEES' REPORTS</b>                                         |      |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| - Dental Practice Committee                                                 | S    | M. Armstrong          | <p>The Chairs of Standing Committees presented their reports in the following order: Dr Mick Armstrong for the Dental Practice Committee, Dr Antonio Estrada Valenzuela for the Education Committee, Prof. Dr Paula Perlea for the Membership Liaison and Support Committee. Prof. Jeffrey Platt for the Science Committee and Prof. Chun-hung Chu for Public Health Committee.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |        |
| - Education Committee                                                       |      | A. E. Valenzuela      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| - Membership Liaison and<br>Support Committee                               |      | P. Perlea<br>J. Platt |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| - Science Committee                                                         |      | C. Chu                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |
| - Public Health Committee                                                   | S    | N. Rabi               | <p>A delegate from Morocco and the President of the African Regional Organization, Dr Nawal Rabi, congratulated all Committees for excellent work and asked for a</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |        |



| Agenda Item                          | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Action |
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| <b>FDI Smile Award Ceremony</b>      | S    | S. Liew           | <p>support of the prevention programme in Morocco. The Chair of the Public Health Committee invited interested associations to apply for the Smile Grant and the World Dental Development Fund. He added that the innovative and sustainable projects have higher priority and are important to FDI when selecting the projects, especially for the Smile Grant.</p> <p>The Speaker introduced the important moment for the winners of the FDI Smile Award. The project is open to any FDI Regular or Associate member and designed to reward projects that have been actively rolled out for at least one year and that will continue for at least one more year.</p> <p>Since Colgate is supporting the FDI Smile Grant since 2019, Ms. Matilde Hernández, the Director of Professional Engagement &amp; Scientific Affairs at Colgate, joined the meeting only for the duration of the FDI Award Ceremony.</p> <p>Alongside M. Hernández and the Chair of the Public Health Committee, the FDI Smile Grant Award was presented by President Chadwick to the representatives of the winner associations: the Australian Dental Association and the Philippines Dental Association.</p> |        |
| <b>5A. RELATIONS</b>                 |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| 5.1 Regular Members                  | S    | S. Liew           | The compilation of National Liaison Officers' (NLOs) Reports received for 2024 was in a separate binder available online as part of the General Assembly documentation. The Speaker thanked all the members for high response rate and encouraged more responses, every year the number of reports received is increasing. The reports provide an overview of different countries' activities and serve as a good source of information and inspiration.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |        |
| 5.2 Regional Organizations           | S    | S. Liew           | The reports of some FDI Regional Organizations and Affiliate and Supporting Members were also available in the General Assembly documentation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |        |
| 5.3 Affiliate and Supporting Members |      | S. Liew           | Every year, FDI strives to give a stage to some Affiliate or Supporting members or Sections to present their activities. This year, the Speaker invited IADR to deliver a presentation on their activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |
| - Presentation by the IADR           | S    | C. Fox            | On behalf of IADR's President, Dr. Pamela C. Yelick, who would join the meeting the following day, Dr. Christopher Fox, Chief Executive Officer, delivered a brief report on IADR activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |        |

| Agenda Item                                    | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Action |
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|                                                | S    | C. Fox            | <p>He highlighted IADR's active engagement at the World Health Assembly and the United Nations, its collaboration with partners across the research and health policy landscape, and the development of policies that recognize the essential role of oral health in overall well-being. The report emphasized joint IADR/FDI interventions at the WHO Executive Board and the World Health Assembly, participation in various United Nations multistakeholder meetings, and shared efforts in preparation for the 4th High-Level Meeting (HLM) on NCDs and Mental Health in New York. Apart from the many joint activities with FDI, IADR provides a platform to share perspectives, experiences, and best practices while identifying challenges and actionable solutions.</p> <p>He noted that continued advocacy efforts are focused on outreach and engagement with governments, placing a spotlight on the importance of oral health and oral diseases within the broader NCD agenda.</p> <p>IADR's work within the Global Coalition on Oral Health includes co-leading the implementation research workstream alongside the University of Sydney and the University of Heidelberg. They remain committed to translating research into policy and policy into practice. The presentation also covered numerous research initiatives, policy documents, and position statements tailored to different settings and needs. IADR remains committed to advocating for the full integration of oral health into global and national NCD prevention and control strategies.</p> <p>C. Fox concluded by thanking FDI for collaboration and for the opportunity to present IADR's activities to the General Assembly.</p> |        |
| 5.4 Sections                                   | S    | S. Liew           | The reports from FDI Sections and the International Organization for Standardization (ISO) were available in the General Assembly documentation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| 5.5 Relations with International Organizations | S    | S. Liew           | The Speaker informed that, in addition to good relations with the FDI Regional Organizations and Sections, FDI maintained very good collaborative relations with a couple of international alliances. The relations between the World Health Professional Alliance and NCD Alliance have been reported under the President's and Executive Director's reports. The video presentation by the World Health Organization is available on the GA Webpage. The Speaker encouraged delegates to watch the presentation, and a questions and answers session may be organized later in the week when the WHO representative arrives in Shanghai.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |

| Agenda Item                        | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Action |
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| <b>6A. MEMBERSHIP</b>              |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| 6.1 List of current members        | S    | S. Liew           | A list of FDI members in all categories was available at the GA Webpage under the tab Membership and Membership Applications.                                                                                                                                                                                                                                                                                                                                                       |        |
| 6.2 Applications for membership    | D    | GA                | FDI received 2 applications for Regular Membership. The Speaker informed of the definition and the criteria for FDI Regular Membership as defined by the Constitution and called for a vote for the first application from a new member country.<br><b><i>The General Assembly resolved that the application of the “Antigua and Barbuda Dental Association” to FDI Regular Membership, be accepted, subject to payment of the annual subscription.</i></b>                         |        |
|                                    | S    | S. Liew           | Applications for readmission of an association whose previous membership was terminated voluntarily, or through failure to fulfil its financial obligations, are possible. At the discretion of the Council, all fees owing to FDI shall be paid before an application for readmission is presented to the General Assembly for election. The Bahrain Dental Society paid all the dues owed to FDI and the Council recommended the GA to accept their application for re-admission. |        |
|                                    | D    | GA                | <b><i>The General Assembly resolved that the application of the “Bahrain Dental Society” for Regular Membership be accepted, subject to payment of the annual subscription.</i></b>                                                                                                                                                                                                                                                                                                 |        |
|                                    | S    | S. Liew           | On behalf of GA, the Speaker congratulated the new member from Antigua and Barbuda and welcomed back the members from Bahrain.                                                                                                                                                                                                                                                                                                                                                      |        |
| <b>7A. SPECIAL COMMITTEES (SC)</b> |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
|                                    | S    | S. Liew           | The Speaker informed that participants of the Open Forum 1, held on the previous day, already had an opportunity to hear upcoming presentations, however, the same Committees' reports were delivered at this meeting again, for the formality of the GA and for participants that did not attend the Open Forum 1.                                                                                                                                                                 |        |
| 7.1 SC – World Dental Parliament   | S    | K. Preston        | The Chair of the SC on World Dental Parliament, Dr Kirk Preston, presented a report (enclosed to these minutes).                                                                                                                                                                                                                                                                                                                                                                    |        |
|                                    | S    | D. Muchhala       | Dr Deepak Muchhala from the Indian Dental Association was worried about one missing factor, which are exhibitors and supporters of the congress. It is not sure how possibly lower attendance would affect them in case of a hybrid meeting.                                                                                                                                                                                                                                        |        |

| Agenda Item                              | Type | Persons concerned         | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Action |
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| 7.2 SC - Membership Subscription Formula | S    | E. Bondioni               | The Executive Director confirmed that the hybrid option would impact only World Dental Parliament (WDP) and not the FDI World Dental Congress (WDC) and its scientific programme.                                                                                                                                                                                                                                                                                                                                      |        |
|                                          | S    | S. Joshi                  | Dr Sanjay Joshi from India noted that there are two conflicting proposals: Proxy Voting and Hybrid WDP. He asked what the reason for a hybrid meeting would be if Proxy Voting is adopted. Both options should be considered simultaneously.                                                                                                                                                                                                                                                                           |        |
|                                          | D    | N. Maroufidis             | Dr Nikolaos Maroufidis from Greece expressed a reservation and a big concern of the Hellenic Dental Association about the Proxy Voting. In their view, allowing proxy might decrease the high level of democracy which FDI GA presently have.                                                                                                                                                                                                                                                                          |        |
|                                          | S    | K. Preston<br>S. Liew     | While the Committee Chair, K. Preston, noted that the planned Phase 1 does not include any changes to the GA voting procedures, the Speaker clarified that the discussion on Proxy Voting is intended only for the discussion at the Open Forum 2. The Proxy Voting document was not presented for a vote but rather to provide the FDI Head Office with guidance on whether to continue exploring the three options and to determine if the Council should offer recommendations at future General Assembly meetings. |        |
|                                          | S    | F. Lemor                  | The Chair of the SC on Membership Subscription Formula, Mr. Florian Lemor presented a report (enclosed to these minutes).                                                                                                                                                                                                                                                                                                                                                                                              |        |
|                                          | S    | E. Cavalle<br>E. Bondioni | E. Cavalle from the Italian dental Association (ANDI) asked if the new formula will consider certified and verified number of members of the associations.                                                                                                                                                                                                                                                                                                                                                             |        |
|                                          | S    | F. Lemor                  | The Executive Director informed that annual certification is part of annual exercise conducted by the office as part of membership invoicing procedure.                                                                                                                                                                                                                                                                                                                                                                |        |
|                                          | S    | K.J. Leong<br>E. Bondioni | The Chair, F. Lemor, added that this is outside of the scope of this Committee work. Dr Kei Joe Leong from Malaysia expressed an opinion that finding a perfect formula will not be easy and asked if the GNI remains a part of the formula, would FDI be open to review the fees every year. The Executive Director confirmed that this is already the practice at that GNI is revised annually.                                                                                                                      |        |
|                                          |      |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |

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|             | S    | E. Bondioni       | <p>The Executive Director added that the Committee discussed if the revised formula should consider the number of members only, or should the formula also include the amount of the dues paid.</p> <p>With the help of the statistical department of the German Dental Association (BZAEK), the Committee will look into that in the following months.</p>                                                                                                                                                                                          |        |
|             | S    | N. Rabi           | <p>Dr Nawal Rabi from Morocco appreciated that the Committee is looking into parameters in considering the richness of countries but suggested that the Committee considers that some associations in rich countries are poor, as they have no government support. They cannot be compared or equally considered as associations who are very well supported by their own governments. She suggested a questionnaire where each association could provide that information so that Committee can consider multiple angles in developing formula.</p> |        |
|             | S    | F. Lemor          | <p>The Chair responded that FDI's Membership Subscription Formula is already quite complex. Making it more complex would be possible but very challenging. The Committee does not plan to include this angle at this moment, but to evaluate the fairness of the present formula first.</p>                                                                                                                                                                                                                                                          |        |
|             | S    | A. Choufani       | <p>Dr Antoine Choufani noted that this is a very complex exercise and hoped that the new formula will not result in increase in membership dues which might lead to some countries not being able to pay and leaving FDI. He suggested that more effort is placed in other areas, such as increase in partnerships and fundraising.</p>                                                                                                                                                                                                              |        |
|             | S    | F. Lemor          | <p>The Chair, F. Lemor, highlighted that the primary task of the Committee is to evaluate the fairness and effectiveness of the current formula.</p>                                                                                                                                                                                                                                                                                                                                                                                                 |        |
|             | S    | E. Bondioni       | <p>In addition, the Executive Director informed that the Council is looking for solutions to increase fundraising.</p>                                                                                                                                                                                                                                                                                                                                                                                                                               |        |
|             | S/R  | S. Liew<br>GA     | <p><b><i>As there were no further comments, the Speaker asked the Assembly if they were satisfied with the reports received and with the direction outlined in the presentations. While there was no formal vote, the participants confirmed their satisfaction with the presentations and the outlined direction.</i></b></p>                                                                                                                                                                                                                       |        |
|             | S/A  | S. Liew           | <p>The Speaker took a note of the discussions and participants' comments that the two Special Committees and the Governance Task Team should align their work especially on Proxy Voting and ensured the assembly that their work will be aligned.</p>                                                                                                                                                                                                                                                                                               |        |



| Agenda Item                   | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Action |
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| <b>8A. FINANCIAL MATTERS</b>  |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
| 8.1 Report from the Treasurer | S    | Y. G. Park        | In his second year as the FDI Treasurer, Prof. Young Guk Park reported on the continuous healthy and stable financial situation of FDI. The full report was available in the GA documentation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |        |
| 8.2 Financial Statements 2024 | S    | Y. G. Park        | <p>The Treasurer introduced FDI's 2024 financial accounts which were audited by Deloitte, who are now in the third year of their mandate. Deloitte conducted a thorough examination of the internal control system and confirmed that FDI's financial management processes and controls are both sound and effective. Following their recommendation issued last year, the FDI Council undertook a comprehensive task of creating a Risk Assessment document. The FDI has been audited without provision, the audit report contains no limitations or qualifications and concludes that the financial statements comply with Swiss GAAP RPC 21, Swiss law, and FDI's Bylaws.</p> <p>The Treasurer introduced the Balance Sheet with total assets of 8.1MCHF and liabilities of 1.3MCHF, resulting in reserves of 6.8MCHF (both restricted and unrestricted). FDI still has a Special Fund of 500KCHF for the WDP to be used in the case of the cancellation of the WDC or any other related event that would entail FDI covering the associated costs for the WDP.</p> <p>The Treasurer presented the Income Statement with detailed footnotes and highlighted that the initial membership fees calculation was 1.9MCHF but was reduced by 225KCHF following the General Assembly's vote last year. A special fund has been established, with resources withdrawn from the general reserves. Credit notes were issued, and the difference has been deducted from the 2025 membership fees payment.</p> <p>FDI received 950KCHF for projects, the same level as 2023. Following the Council's decision, 100KCHF was transferred from FDI General Reserves to replenish the World Dental Development Fund. The projects were delivered according to plan maintaining good relationship with the partners. The financial investments portfolio performed well, with the result of 186KCHF.</p> <p>The operational loss is 184KCHF due to the refund of part of the membership fees for 2024, but with a positive financial result, the net result for the year is surplus of 265KCHF. The Treasurer introduced the footnotes with explanations for many of the line items and a list of FDI's restricted funds corresponding to programmes with</p> |        |

| Agenda Item                                                       | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Action |
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| 8.3 Annual Report<br><a href="#">available on the FDI Website</a> | S    | Y. G. Park        | <p>corporate partners, as well as funds in the custody of FDI. The list of countries, members, and their membership fees was also available in the GA binder.</p> <p>After presenting the Management Report, which outlines 2024 budget by section, the Treasurer confirmed that FDI's revenue from Membership represents 37%, Congress income represents 22% and partnerships &amp; other represent 41% of the total FDI revenues. The expenditures per department were also available in the GA binder documentation. He passed the word to the Chair of the Audit Committee.</p>                                                                                                                                                                                   |        |
| 8.4 Report from the Audit Committee                               | S    | A. Dhoble         | <p>The Chair of FDI Audit Committee, Dr Ashok Dhoble, confirmed that the Committee was in receipt of the 2024 Financial Statements as well as other documents including the report from Deloitte to the Council, the FDI Finance Manual, the Terms of Reference of the Audit Committee, and the Audit Committee Reports for the years 2022 and 2023. Based on the information received from all the documents, the Audit Committee did not have any further recommendations and on their behalf, the Chair recommended that the GA approves the 2024 report.</p>                                                                                                                                                                                                      |        |
| 8.5 Forecast 2025                                                 | D    | GA                | <p><b><i>After the presentation of the accounts and verification by the external auditors and FDI Audit Committee, the General Assembly resolved to approve the 2024 accounts and discharge the Council.</i></b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
| 8.6 Five-year budget comparison                                   | S    | Y. G. Park        | <p>The Treasurer continued his report with latest updates regarding 2025 financial year and the ongoing activities. The finances look good and FDI expects to end the year with a small profit, but the result of the year will depend on portfolio performance. On this date, FDI was in line with the budget. Most of the income has been received and the Head Office continues to monitor and tightly control expenses that will be coming up until the end of the year. However, there is a challenge to renew projects or fund new ones so the revenue might be lower than what was forecasted. The Treasurer reassured the Assembly that FDI's funds and portfolio are safe. In addition, the Finance Committee regularly reviews FDI's investment policy.</p> |        |
| 8.7 Budget 2026 including Budget Forms                            | S    | Y. G. Park        | <p>On behalf of the Council, the Treasurer presented a balanced budget with a small surplus of 20KCHF. The development of the 2026 draft budget has been a collaborative effort involving Committees, the Council, and staff. The membership fees have been calculated to balance the budget.</p> <p><b><i>The multiplier was slightly increased (1.5%) and adjusted to 0,067 to reach a revenue of 1,7MCHF.</i></b></p>                                                                                                                                                                                                                                                                                                                                              |        |

| Agenda Item                        | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Action |
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|                                    | S    | Y.G. Park         | <p>Considering the ongoing work of the Special Committee on Membership Subscription Formula, the Council did not want to drastically increase the amount of membership fees. <b>The budget was also calculated to maintain the minimum subscription fee.</b> In 2026, the WDC will be held in Prague, and FDI should organize one regional congress. In addition, the budget includes a Contingency Fund of 8KCHF.</p> <p>After inviting participants to address any questions at the Open Forum 2 in the morning of the following day, the Treasurer ended his report by thanking the members of the Finance Committee, the Council and Executive Director and the supporting staff, Celine Ormaney and Cindy Romand, for fruitful collaboration and teamwork.</p> |        |
| <b>9A. NOMINATIONS</b>             |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| 9.1. Elections for President-elect | S    | S. Liew           | Nomination documents for all candidates standing in FDI elections were available at the General Assembly 2025 webpage.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |
|                                    | S    | S. Liew           | <b>All candidates have been advised that as of this year no printed material is allowed</b> and were given the opportunity to provide a video message in addition to the presentation delivered at this meeting. The Speaker encouraged the participants to visit the Elections part of the GA Webpage and consult the candidates' videos.                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
|                                    | S    | Y.G. Park         | For the position of President-elect, FDI received one uncontested nomination from the current Treasurer, Prof. Young Guk Park, who delivered his presentation at this meeting.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |        |
|                                    | S    | S. Liew           | To better use the time at the General Assembly B meeting, and to avoid interruptions, the GA participants were previously informed that the elections for President-elect would take place at this meeting. These arrangements were made to avoid possible nominations from the floor and interruptions at the GA "B" meeting in case the seat of the Treasurer becomes vacant as an outcome of the President-elect elections. In accordance with FDI election procedures, no vote is held for uncontested positions.                                                                                                                                                                                                                                               |        |
|                                    | S    | S. Liew           | <b>The Speaker declared Prof. Young Guk Park elected to the position of President-elect.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
|                                    | D    | GA                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |

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| 9.3 Presentations by the candidates for Council<br><br>- <i>Treasurer</i> | S    | S. Liew                                                                                              | The Speaker congratulated Prof. Young Guk Park and informed that he will remain to serve as FDI Treasurer until the end of the General Assembly B meeting. He will take the role of the President-elect immediately after the end of that meeting.                                                                                                                                                                                                                                                                                                                                                                                                                                                 |        |
|                                                                           | S    | S. Liew                                                                                              | Since the position of the Treasurer became vacant at this time, in accordance with FDI governance procedures, the Speaker announced a call for nominations from the floor. This was in addition to the two nominations received in response to a call for early nominations, submitted within the deadline, from Dr Carol Gomez Summerhays and from Dr Nahawand Thabet.                                                                                                                                                                                                                                                                                                                            |        |
|                                                                           | S    | S. Liew                                                                                              | As previously informed, any nominees from the floor would be invited to deliver a three-minute presentation at this meeting, at the same time as other candidates for the Treasurer and the Council. To be further considered, the nominations documents of the new candidates should have been submitted in English to FDI Head Office by the end of the day on 8 <sup>th</sup> September, local Shanghai time. The nominations would then be circulated to the GA participants by email, not later than afternoon of 9 <sup>th</sup> September. The GA participants would also have an opportunity to ask questions at the Q&A session for candidates running for the Treasurer at Open Forum 3. |        |
|                                                                           | S    | S. Liew                                                                                              | <b><i>The Speaker called for nominations from the floor. There were no nominations from the floor declared.</i></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |
|                                                                           |      | C.G Summerhays<br>N. Thabet                                                                          | The presentations were delivered by the two nominees, Dr Carol Gomez Summerhays and from Dr Nahawand Thabet.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |        |
|                                                                           |      | J. L. Linton<br>G. R Mendoza<br>S. L. Morrison<br>O. Ijarogbe<br>P. Perlea<br>M. Armstrong<br>Yi Liu | The Speaker invited the candidates for the Council to deliver their presentations. At this meeting, the following candidates presented their nominations: Dr Jina Lee Linton (Republic of Korea), Dr Gabriela Ramirez Mendoza (Mexico), Dr Scott Lee Morrison (USA), Dr Olabode Ijarogbe (Nigeria), Prof. Dr Paula Perlea (Romania), Dr Mick Armstrong (UK) and Prof. Yi Liu (China).                                                                                                                                                                                                                                                                                                              |        |
|                                                                           |      |                                                                                                      | The Speaker reminded that the candidates for the Standing Committees will deliver their presentation at the Open Forum 2 in the morning of the following day.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |        |
| <b>10A. ANY OTHER BUSINESS</b>                                            |      |                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |        |
|                                                                           | S    | S. Liew                                                                                              | There was no other business to discuss at this meeting.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |        |

| Agenda Item      | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                         | Action |
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| 11A. ADJOURNMENT |      |                   |                                                                                                                                                                                                                                                                                                              |        |
|                  | D    | S. Liew           | <p>The Speaker sincerely thanked all participants, technicians and staff for cooperation and assistance in completing the GA "A" meeting efficiently.</p> <p>The Speaker adjourned the meeting until 11 September 2025, when the General Assembly "B" meeting would take place in the same meeting room.</p> |        |



# Special Committee on World Dental Parliament

Dr Kirk Preston  
Chair

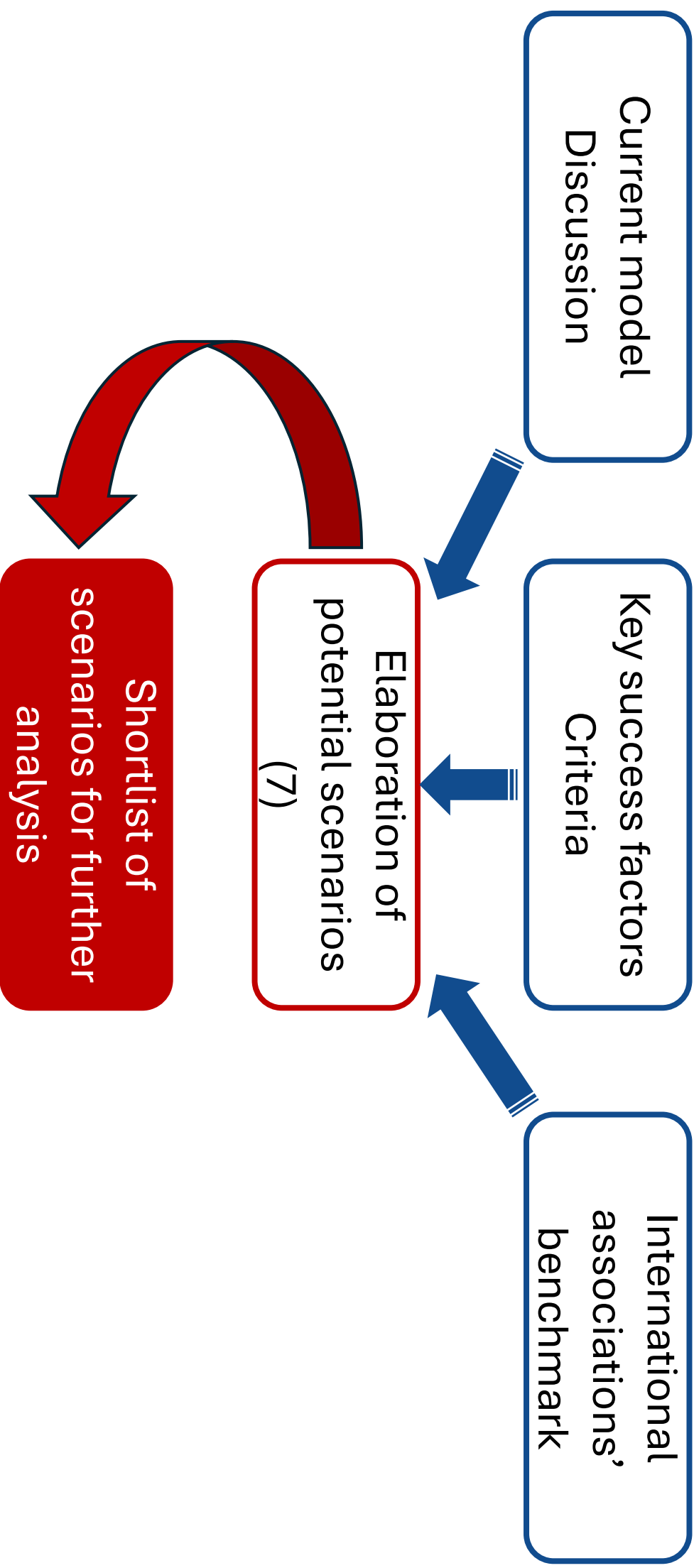
# Composition

- Dr Kirk Preston, Chair (Canada)
- Prof. Dr Marzena Dominiak (Poland)
- Dr Juan David Pelaez Ossa (Colombia)
- Dr Mark W. Donald (USA)
- Prof. Jun Tsuruta (Japan)
- Prof. Dr Yi M Liu (China)
- Prof Tarek Abbas (Egypt)
- Dr Ashok Dhoble (India)

Explore ways to facilitate remote participation simultaneously alongside face-to-face participation (further in the text - hybrid participation) for FDI delegates in the Open Forum, General Assembly and NLO Forum in situations in which in-person attendance is not feasible or possible for some individuals.

## Framework Definition

Identify a series of plausible scenarios and conduct a strategical, operational and financial analysis on each of them.



Following key success factor criteria have been identified and will be used when comparing the scenarios:

- Security of the meeting attendance
- Security of the voting
- Time framework of the meeting
- Additional costs involved



# 24 Associations' Benchmark

Association selection criteria: similar structure

- National association membership
- Similar size
- Global reach



115 national members



138 national members



130 national members



129 national members



+67 national /regional  
alliance, 300+ members in  
80 countries

## Feedback:

- Hybrid Parliament is not an established standard for any of these entities.
- Some have tested during COVID with onsite timing applicable to all delegates.
- Only one is still envisioning it for future use and is currently comparing hybrid costs vs additional travel grants for participants.
- All of the 5 entities meet on a less regular basis than FDI and for a shorter duration.

## Trends / watchpoints:

- Participant onboarding and technical assistance
- Quorum reach
- Interaction opportunities and programme refining

# Intermediary conclusion

## → **Complex financial set-up**

Costs currently embedded in FDI World Dental Congress, no dedicated operational budget for the Parliament

## → **Large stakeholder involvement = important side impacts to consider**

Dense programme including main and parallel activities, platform for key stakeholders (regional organizations, sections) and for programmed and spontaneous knowledge exchange / networking

## → **Technical constraints**

Rotating location, global inclusion, confidentiality

## → **Legal constraints**

Voting security, quorum, proxy

## Scenarios should

- Be analysed with real costs / suppliers
- Be based on a fictive Parliament in Geneva
- Offer hybrid participation based on the in-person meeting timings
- Allow for step-by-step roll-out (voting excluded from phase I)
- Allow for flexibility in case FDI voting rules evolve (proxy)

# 27 Shortlisted Scenarios

| A: Limited Broadcast               |                                                                                                                                                             |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Timezone                           | All participants adjust to the Parliament in-person timezone                                                                                                |
| Meeting structure                  | No change to current 6-days structure                                                                                                                       |
| Activity Format & Hybrid Component | Presentation and Debates are broadcasted – no interaction are possible for online participants. Q&A and voting are possible for in-person participants only |

| B: Extended Broadcast              |                                                                                                                                                                              |
|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Timezone                           | All participants adjust to the Parliament in-person timezone                                                                                                                 |
| Meeting structure                  | No change to current 6-days structure                                                                                                                                        |
| Activity Format & Hybrid Component | Presentation and Debates are broadcasted with possibility for participants to present remotely and to participate to Q&A. Voting is possible for in-person participants only |

main difference between both scenarios is the level of interaction for offsite delegates.

## **Additional considerations: Meeting overall duration & impact**

- Financial impact for onsite delegates
- Attendance experience for offsite delegates
- Financial costs of hybrid set-up
- Meeting opportunities for side-programme

**To leverage these challenges, previously described scenarios will be developed and analysed with a standard duration (6days) and with a shortened duration (4-5 days)**

# Timeline & Next steps

## Next steps

### Mid-term goal

Offer GA the possibility to pilot one of the pre-selected scenario during an upcoming World Dental Parliament.

### Work objectives for 2025-2026

- Develop and analyse the two envisioned scenarios
- Survey members and other key stakeholders about meeting duration and structure to finetune the shortened version of each scenario. Upon feedback, develop and analyse these additional two variants.
- At GA 2026: Budget and propose a scenario for a live pilot in 2027

### Remark

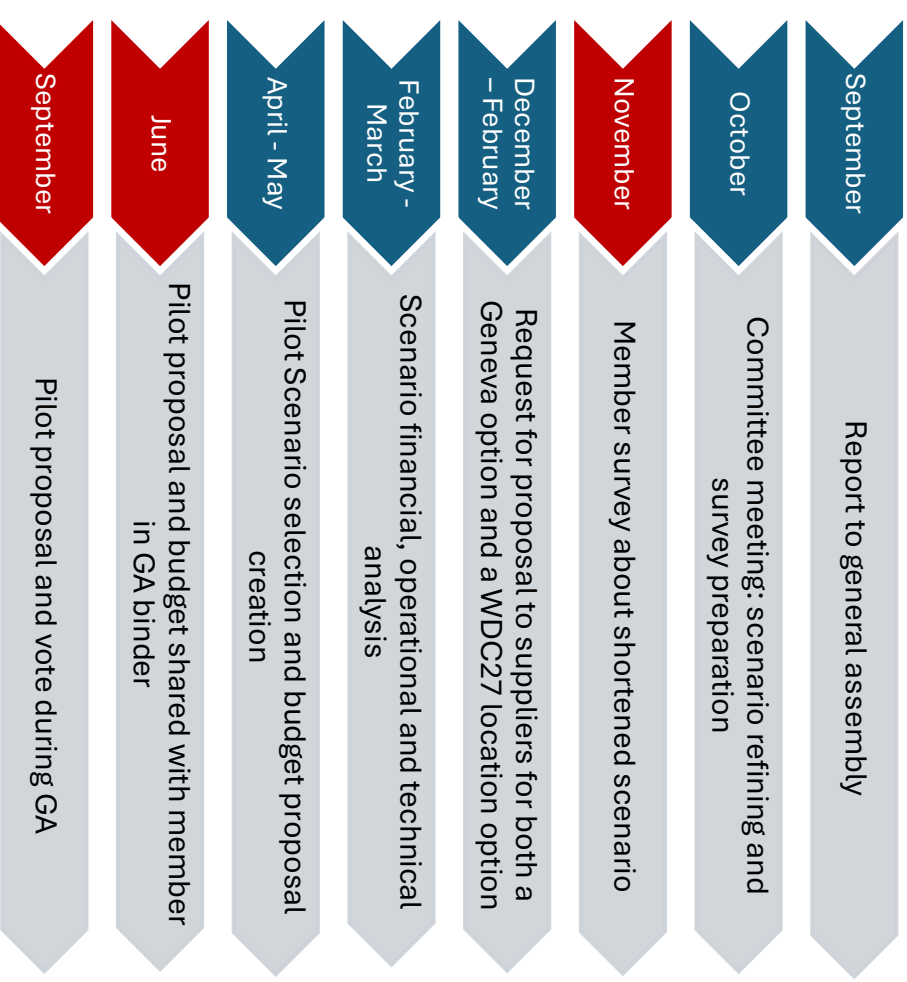
All envisioned scenarios are to be understood as a phase I. Depending on their success, additional hybrid features regarding voting could be added at a later stage. Same process (analysis and pilot live testing could apply).

# Timeline & Next steps

## Why a live test in 2027?

- To have sufficient time to develop a structured and complete analysis, replicable on the long-run in various destinations.
- To have sufficient time to survey suppliers on real-cases and ensure financial and operational accuracy of each scenario
- To ensure an inclusive process where FDI members can share their views on the overall structure
- To respect FDI constitution and give all members an opportunity to agree on the test (financial implication)

## What's next?





# Special Committee Membership Subscription Formula

Florian Lemor  
Chair – FDI General

## Role and Responsibilities - The committee shall:

1. Conduct a thorough analysis of the existing membership formula and determine whether the current formula is fulfilling its intended purpose evaluating both: **formula's effectiveness and fairness.**
2. Analyze **the relevance of use of GNI** (Gross National Income) in membership formula.
3. Gather new and analyze existing data and input from members related to **members's satisfaction on financial contributions to FDI and fairness of the formula.**
4. Consider the **feedback received** from members in 2024.
5. Research into **alternative membership calculations used by similar organizations** and consider if they might **apply** to FDI's diverse membership structure.
6. Explore the **financial impact of any changes** for FDI membership revenue, and for FDI members.
7. Explore **non-financial impact** of any changes (community involvement, members satisfaction)
8. Present a draft **report to FDI Council** by 30th June 2025.
9. Report to the 2025 **General Assembly**.

# Special Committee Members



**CHAIR**  
Apr 2025 -

**Mr Florian Lemor**  
Germany



**MEMBER**  
Apr 2025 -

**Antonieta Muñoz Solís**  
Costa Rica



**MEMBER**  
Apr 2025 -

**Dr Morten Harry Rolstad**  
Norway



**MEMBER**  
Apr 2025 -

**Dr Jim Boyle**  
United States of America



**MEMBER**  
Apr 2025 -

**Dr Renier Putter**  
South Africa



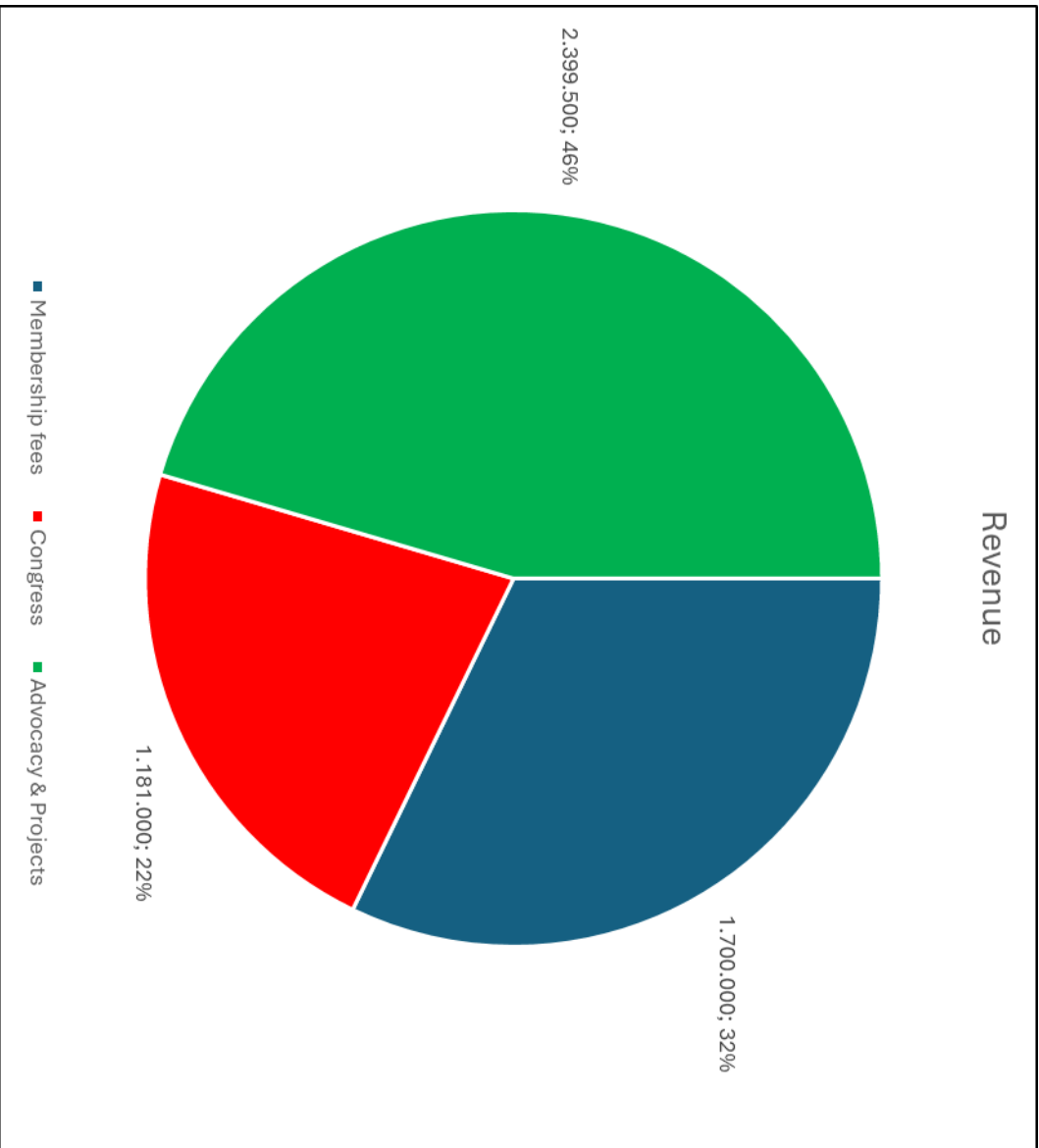
**MEMBER**  
Apr 2025 -

**Dr Chris Sanzaro**  
Australia

# Background / Work methodology

- **General Assembly 2024:** FDI received **two comments** from member organizations (Canadian Dental Association (CDA) and the British Dental Association (BDA)) regarding the **need to discuss potential reforms of the FDI Membership Fees**
- Outcome of discussion during the GA: **Special Committee** for the evaluation of the membership subscription formula was established
- Special Committee started working in **April 2025 & met 3 times**
- participated to the **Members' webinar** & report has been added to **the binder**

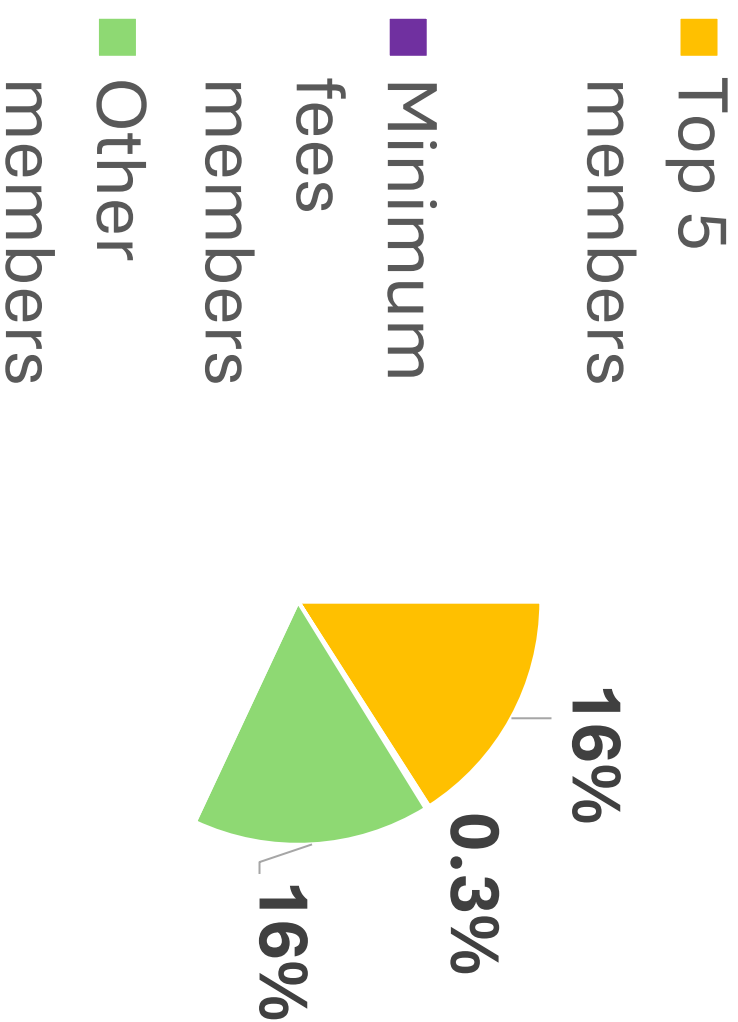
# Effectiveness & Fairness of Formula



„Effectiveness“

- **5 members (3% of members)** – ADA, GDA, JDA, FDA & SDA – pay 50% of the total membership income, which represents **16% of the overall FDI budget > „Business risk?“**
- **90 members (61% of members)** pay 49 % of the total membership income, which represents **16% of the overall FDI budget.**
- **53 members (36% of members)** pay 1 % with the minimum fee, which represents **0,3% of the overall FDI budget** but aligns with the principal of social equity

Membership fees part in the global  
revenue





## „Fairness“

First issue: perceived inequity between the fee amount and the number of votes allocated: some countries paying substantially more per vote than others:

- **5 members (3% of members) pay 50%** of the total membership income, have **only 32 votes out of 239 votes**
- **25 members** contribute **each** a membership fee that **exceeds the combined amount paid by all 53 members** who are each paying the minimum fee. However, 9 of these 25 members are **only allotted 2 votes** at the General Assembly, while each organization paying the **minimum fee receives 1 vote**
- Members with a larger membership but a low GNI pay small fees while having significant voting rights

## „Fairness“

- second issue: members paying **high membership** fees needing to **convince their own members** that the fees are **justified** and provide value for money.
  - > Otherwise, these members could soon come to believe that it isn't worth the cost?
- “Political” and external factor

- main difference between the FDI and other organization on international level:
  - **methods is how they calculate membership fees**
  - FDI uses **GNI**, while other organizations often rely on the **World Bank's income classifications**
  - categorizes countries based on their **GNI into four groups**: low, lower-middle, upper-middle, and high income. But no significant changing would arise
- **common** at the international level: include one sort of **wealth/fairness factor** when calculating membership fees
- suggestions have been made to explore options beyond GNI or to use GNI together with the World Bank classifications for a more balanced view
- **FDI-statutes** state: "GNI is the Gross National Income/Index (US\$ per capita) according to the Atlas method of the World Bank, or a comparable official source. If unavailable, FDI reserves the right to make its own assessment."

## Special Committee Review

- Conducted a closer examination of membership fee formulas used by similar international NGOs.

## Income Sources

- Most organizations surveyed receive **80-90%** of their income from membership fees
- In contrast, FDI receives only **1/3** of its income from membership

## Complexity of Fee Formulas

- FDI's membership fee formula is the most complex, as **different reduction options** have been implemented
- all organizations surveyed incorporate a **wealth parameter** in their fee structures
- formulas used by other organizations do not align with FDI as they currently stand and would require a more in-depth analysis and adaptation!

# Financial impact / Constitution

# Financial impact

Footer Text place holder

# Explore non-financial implications

- such as the **threshold for reductions**
- **percentage reductions**
- and the **decisions made by the General Assembly**



- **investigate alternative formulas** that will integrate the wealth component, the membership numbers as well as the fees paid to FDI per member.

# Connect with us



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<https://www.linkedin.com/company/565297>



<https://www.facebook.com/FDIWorldDentalFederation/>



<https://www.youtube.com/FDIWorldDental>



<https://twitter.com/fdiworlddental>



<https://www.fdiworlddental.org>



# Thank you

Minutes

FDI World Dental Federation General Assembly (GA) Meeting “B”

Date: 11 September 2025      Time: 14:00–17:30      Location: FDI World Dental Congress 2025 - Shanghai, China

Participants:      FDI President, President-elect, Treasurer, Executive Director, 10 Councilors and Speaker of the General Assembly; 81 Regular Member Associations (160 Regular Member Delegates), Representatives of the Associate Member Association, Affiliate Member Associations, Supporting Member Association, 3 Past Presidents and FDI Secretariat

| Agenda Item                                    | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Action |
|------------------------------------------------|------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1B. INTRODUCTION                               |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |        |
| 1.1 Welcome and opening remarks by the Speaker | S    | S. Liew           | <p>The Speaker welcomed the delegates to General Assembly 'B' and acknowledged the members of the Executive Committee, the Council, Presidents and representatives of FDI Regional Organizations, Past Presidents, Regular, Associate, Affiliate and Supporting Member Associations, the member delegates and alternates, and the FDI Secretariat.</p> <p>The Speaker reminded the delegates on the importance of the technicians' request that attendees do not use mobile hotspots during the meeting. Although Wi-Fi was available in the meeting room, during voting sessions, the Wi-Fi was temporarily turned off to ensure the voting system works correctly. Once voting concludes, Wi-Fi access was restored.</p> <p>The Speaker introduced the additional documents sent in advance of this meeting by email and available on the GA Webpage. These were the final drafts of Policy Statements (also available on the GA Webpage) and the report of the Budget Reference Committee which was sent in the morning of this meeting.</p> <p>After informing of the logistical details, the Speaker reminded the delegates about the parliamentary procedures, after which the test vote was conducted.</p> |        |

| Agenda Item                   | Type | Persons concerned      | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Action |
|-------------------------------|------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1.2 Establishment of a quorum | S    | E. Bondioni            | The Executive Director confirmed the presence of a quorum.                                                                                                                                                                                                                                                                                                                                                                                                   |        |
| 1.3 Apologies                 | S    | S. Liew                | There were no new apologies received in addition to those received for the General Assembly "A" meeting.                                                                                                                                                                                                                                                                                                                                                     |        |
| 1.4 Approval of the agenda    | D    | GA                     | The agenda was approved as circulated without amendments.                                                                                                                                                                                                                                                                                                                                                                                                    |        |
| 1.2 Announcements             | S    | S. Liew<br>E. Bondioni | The Speaker expresses gratitude to the Geneva Head Office staff for their meticulous planning, document preparation, and translation work, highlighting their long hours, dedication, and efforts in transforming an empty building into an impressive parliament setting. Their commitment merits a standing ovation. The speaker invited the Executive Director to the stage. E. Bondioni invited staff members to the stage, introduced and thanked them. |        |

## 2B. POLICY STATEMENTS

|                           |   |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
|---------------------------|---|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                           | S | S. Liew | The Speaker reminded delegates that FDI Policy Statements require a two-thirds (2/3) majority vote. Comments from member associations had been considered and discussed at Open Forum 1, with final drafts sent to members and available on the GA Webpage in English.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|                           | S |         | Only English versions would be voted on during the meeting. All germane comments and modifications have been considered and integrated by the Committees into the draft FDI Policy Statements and at this meeting the Speaker announced that only comments that are confined to spelling, and minor editorial changes may be accepted. If there are any modifications that would alter the scientific or basic underlying assumptions, they would be referred back to the committee for clarification/revision and presented again next year. Prior to starting with the voting, the Speaker thanked the staff involved and recognized the contribution of his fellow members of the Policy Statement Editorial Task Team: Dr Liran Levin and IDJ Editor-in-Chief, Prof. Prof. Lakshman Samaranayake. |  |
|                           | S |         | <b>The assembly voted on final drafts of the policy statements as follows:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| "Silver Diamine Fluoride" | D | GA      | <b>The General Assembly resolved that the FDI Policy Statement "Silver Diamine Fluoride" intelligence" be approved.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |

| Agenda Item                                                                  | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                 | Action                                                                                                         |
|------------------------------------------------------------------------------|------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| "The Use of Topical Fluoride for Caries Prevention" ( <i>Revision</i> )      | D    | GA                | <b><i>The General Assembly resolved that the revised FDI Policy Statement "The Use of Topical Fluoride for Caries Prevention" be approved.</i></b>                                                                                                                                                                   |                                                                                                                |
| "Electronic Health Records"                                                  | D    | GA                | <b><i>The General Assembly resolved that the FDI Policy Statement "Electronic Health Records" be approved.</i></b>                                                                                                                                                                                                   |                                                                                                                |
| "Alignment of oral health care with ISO Standards" ( <i>Revision</i> )       | D    | GA                | <b><i>The General Assembly resolved that the revised FDI Policy Statement "Alignment of oral health care with ISO Standards" be approved.</i></b>                                                                                                                                                                    |                                                                                                                |
| "Digital Dentistry"                                                          | D    | GA                | <b><i>General Assembly resolved that the FDI Policy Statement "Digital Dentistry" be approved.</i></b>                                                                                                                                                                                                               |                                                                                                                |
| "Noma – eradicating a preventable disease to save lives" ( <i>Revision</i> ) | D    | GA                | <b><i>The General Assembly resolved that the revised FDI Policy Statement "Noma – eradicating a preventable disease to save lives" be approved.</i></b>                                                                                                                                                              |                                                                                                                |
|                                                                              | S    | S. Liew           | Before proceeding with the voting and following some reports from the delegates that a couple of working pads did not work correctly, which were immediately replaced, the Speaker repeated a request to the participants to switch off mobile hot spots as quite a few of those were identified by the technicians. |                                                                                                                |
|                                                                              |      |                   | The Speaker informed that the numbers of replaced voting pads do not make a difference in the previous votes and that there is no need to repeat the vote. He also informed that slight increase in voting delegates (less than 5), that appears on recent slides, is due to late arrival of the participants.       |                                                                                                                |
| "Advertising in Dentistry"                                                   | D    | GA                | <b><i>The General Assembly resolved that the FDI Policy Statement "Advertising in Dentistry" be approved.</i></b>                                                                                                                                                                                                    | Distribute the approved Policy Statements in four languages and publish them on FDI Website and in IDJ Journal |
| "Specialization in Dentistry" ( <i>Revision</i> )                            | D    | GA                | <b><i>The General Assembly resolved that the revised FDI Policy Statement "Specialization in Dentistry" be approved.</i></b>                                                                                                                                                                                         |                                                                                                                |
| "The Role of Supervision in Dentistry" ( <i>Revision</i> )                   | D    | GA                | <b><i>Resolved, that the revised FDI Policy Statement "The Role of Supervision in Dentistry" be approved.</i></b>                                                                                                                                                                                                    |                                                                                                                |
|                                                                              |      |                   |                                                                                                                                                                                                                                                                                                                      |                                                                                                                |

| Agenda Item                    | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Action                                                                                                                                     |
|--------------------------------|------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| WITHDRAWALS                    |      |                   | <p><b>The following Policy Statements were presented by the Council for withdrawal:</b></p> <ol style="list-style-type: none"> <li>1. <b>“Guidelines for Dental Volunteers” (2005).</b> This topic has been adequately addressed in another revised Policy Statement “Ethical Recruitment of Dental Volunteers” adopted in 2023.</li> <li>2. <b>“Perinatal and Infant Oral Health” (2014).</b> This topic has been adequately addressed in another revised Policy Statement “Perinatal and Infant Oral Health care” adopted in 2023.</li> <li>3. <b>“World Oral Health Day” (2007).</b> As the content aligns more closely with a Position Statement, Council recommends transferring it to the existing World Oral Health Day website.</li> <li>4. <b>“Code of Practice of Tobacco Control for Oral Health Organizations” (2004).</b> This topic has been adequately addressed in another revised Policy Statement “The Role of Oral Health Practitioners in Tobacco Cessation” adopted in 2021.</li> <li>5. <b>“Post-Exposure Prophylaxis for HBV, HCV, and HIV” (2009).</b> In consideration of the 2021 revised Policy Statement on Infection Prevention and Control in Dental Practice and the 2022 Policy Statement on the Role of Vaccinations in Protecting the Dental Team this topic has been adequately addressed.</li> </ol> <p><b>Resolved, that the five FDI Policy Statement as presented at this meeting be withdrawn.</b></p> <p>The Speaker thanked all the authors, Standing Committees, staff and member associations contributing to the development of the policy statements approved at this meeting.</p> | <p>Transfer the wording of withdrawn Policy Statement from 2007 (World Oral Health Day) to the existing World Oral Health Day website.</p> |
| <b>3-4B. FINANCIAL MATTERS</b> |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                            |
|                                | S    | S. Liew           | The Speaker invited the Chair of the Budget reference Committee to present their report which was circulated to all delegates prior to the meeting.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                            |



| Agenda Item                                     | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Action |
|-------------------------------------------------|------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 4.1 Report of the Budget Reference Committee    | S/R  | E. Crouch         | The Budget Reference Committee Chair, Dr Eddie Crouch, presented the report and thanked the Executive Director, the Treasurer and FDI staff for all work and explanations provided at the introduction meeting weeks before the congress and at the BRC meeting in Shanghai. The report was read and explained at the meeting, and it is enclosed as part of these minutes. The Budget Reference Committee recommended the approval of the proposed budget for 2026.   |        |
|                                                 | D    | GA                | <b><i>The General Assembly resolved that the report of the Budget Reference Committee be received and that the Council review and take appropriate action on their recommendations and report back to the 2026 General Assembly.</i></b>                                                                                                                                                                                                                               |        |
| 4.2 Budget 2026                                 | D    | GA                | The Speaker asked the delegates to vote on the budget. There were no discussions.<br><b><i>The General Assembly resolved that the proposed operating budget for 2026 be approved.</i></b>                                                                                                                                                                                                                                                                              |        |
| <b>5B. REFERRED ISSUES</b>                      |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
|                                                 | S    | S. Liew<br>GA     | There were no referred issues from General Assembly A, Open Fora or from the Committees.                                                                                                                                                                                                                                                                                                                                                                               |        |
| <b>6B. PRESENTATION OF CERTIFICATES</b>         |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| 6.1 Presentation of Certificates to new Members | A    | S. Liew           | The Speaker invited the President to present a certificate of FDI Membership to the representatives of the new Regular members admitted to FDI membership at the General Assembly A meeting - "Antigua and Barbuda Dental Association". He expressed a hope that the same can be done at the next General Assembly in Prague for FDI's returning Regular Member from Bahrain, who were absent from this meeting.                                                       |        |
|                                                 | A    | G. Chadwick       | On behalf of the General Assembly, the President presented Certificates of Appreciation to the leaving elected Council and Standing Committee members who have not received their certificate in 2024 and thanked them for joining GA this year: Dr Alma Gracia Godínez Morales (for one term served on FDI Council), Assist. Prof. Dr Azamat Baigulakov (for one term on Dental Practice Committee) and Dr Olabode Ijarogbe (for 2 terms on Public Health Committee). |        |

| Agenda Item                                                                                               | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Action |
|-----------------------------------------------------------------------------------------------------------|------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 6.2 Presentation of Certificates to leaving elected officers                                              | A    | G. Chadwick       | The President presented certificates for 2025 to outgoing Council members, Dr Nahawand Thabet and Dr Carol Gomez Summerhays (for their two terms served on the Council), Prof. Paula Perlea, (Outgoing Chair of the Membership Liaison and Support Committee - MLSC), Dr Makiko Iwasaki, Dr Oluwarotimi Akanbi Clement and Dr Manuel Sergio Martinez Martinez (for their first term on the MLSC), Prof. Yi Liu (for his two terms on MLSC), Dr Mick Armstrong (outgoing Chair of the Dental Practice Committee - DPC), Dr Kinga Grzech-Lesniak (for her two terms on DPC) Dr Stefanie Tiede (for her first term on DPC), Prof. Katalin Nagy (Vice-chair) and Dr Meshari Faraj Alotaibi (for their first term on the Education Committee) and to Dr Samira Osailan (for her first term on the Science Committee). |        |
|                                                                                                           | A    | N. Sharkov        | The President-elect, Asst. Prof. Nikolai Sharkov, presented the Certificates of Appreciation to FDI outgoing President, Dr Greg Chadwick, and to Prof. Young Guk Park for his service as FDI Treasurer.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
|                                                                                                           | S    | S. Liew           | The Speaker warmly congratulated all recipients and thanked them for their service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |
| <b>7B. FDI WORLD DENTAL CONGRESS (WDC)</b>                                                                |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
|                                                                                                           | S    | S. Liew           | The Speaker invited the leadership and representatives from China and Czech Republic for the handover of FDI flag.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |        |
|                                                                                                           | S    | C. Guo            | Prof. Chuanbin Guo, the President of the Chinese Stomatological Association (CSA), warmly thanked all delegates and everyone involved in organization and attendance of a very successful congress, and wished them a very good time for the rest of their stay in Shanghai.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| 7.1 Short address and handover of FDI flag to 2026 World Dental Congress Local Organizing Committee (LOC) |      |                   | The FDI flag was passed from the outgoing LOC of the CSA to the incoming LOC of the Czech Dental Chamber (CDS).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
|                                                                                                           | S    | R. Smuckler       | After WDC 2026 promotional video was played, Dr Roman Smuckler, the President of the CDS, thanked FDI for receiving the FDI flag, which for the Czech LOC represents great honour, responsibility and unity of the global dental family. He warmly thanked the Council, the Executive Director and the team at the Head Office. He ended his address by reminding that Prague, a city where art and science always meet, is looking forward to welcoming all participants to be part of the state-of-the-art scientific programme and to move dentistry to the new dimension together.                                                                                                                                                                                                                           |        |



| Agenda Item                       | Type | Persons concerned         | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Action |
|-----------------------------------|------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| <b>8B. HANDOVER OF PRESIDENCY</b> |      |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |        |
|                                   | S    | G. Chadwick<br>N. Sharkov | <p>The President (2023-2025), Dr Greg Chadwick, invited President-elect Asst. Prof. Nikolai Sharkov, to take the FDI presidential oath of office. Dr Greg Chadwick then passed the presidential chain, a symbol of FDI Presidency, to the new FDI President Asst. Prof. Nikolai Sharkov.</p> <p><i>The two-year mandate of Asst. Prof. Nikolai Sharkov to serve in a position of FDI President, began immediately following the closure of this meeting.</i></p> <p><i>The mandate of Dr. Greg Chadwick ended immediately following the closure of this meeting.</i></p> <p>Asst. Prof. Nikolai Sharkov delivered an acceptance speech to the General Assembly, available at this link: <a href="https://www.fdiworlddental.org/inaugural-address-fdi-president-assst-prof-dr-nikolai-sharkov-wdc25-shanghai">https://www.fdiworlddental.org/inaugural-address-fdi-president-assst-prof-dr-nikolai-sharkov-wdc25-shanghai</a>.</p> |        |
| <b>9B. ELECTIONS</b>              |      |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |        |
|                                   | S    | S. Liew                   | The Speaker reminded participants that Prof. Young Guk Park was elected FDI President-elect at the General Assembly A meeting on 7. September 2025.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |
| - <i>President-elect</i>          | D    | GA                        | <i>The mandate of Prof Young Guk Park began immediately following the closure of this meeting.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |        |
| - <i>Treasurer</i>                | D    | GA                        | <i>The General Assembly conducted elections for the Treasurer and elected Dr Carol Gomez Summerhays to her first term as Treasurer. The mandate of Dr Carol Gomez Summerhays began immediately following the closure of this meeting.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| - <i>Council</i>                  | S    | S. Liew                   | The Speaker informed that Prof. Paula Perlea withdrew her nomination for the Council and allowed her a moment of personal privilege to address the delegates.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |        |
|                                   | S    | P. Perlea                 | P. Perlea expressed her gratitude for the opportunity. It was an honour to stand for the position, and she thanked everyone for the support she received while speaking to the delegates during this congress. Since she had been asked by the President of the FDI European Regional Organization (ERO) to either withdraw from FDI elections, or to step down from the position of ERO President-elect, she has decided to dedicate her time, energy and passion to the ERO at this moment, and                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |

| Agenda Item                        | Type | Persons concerned | Text                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Action |
|------------------------------------|------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
|                                    | D    | GA                | expressed a hope to receive the same support on the next occasion in FDI elections, after she finishes terms of her leadership positions.<br><br><i>The General Assembly conducted elections for the Council for the North America geographic area vacancy and elected Dr Gabriela Ramirez Mendoza (Mexico) to a first term on the Council.</i>                                                                                                        |        |
|                                    | D    | GA                | <i>The General Assembly conducted elections for the second vacancy on the Council open to candidates from all geographic areas and elected Prof. Yi Liu (China) for a first term on FDI Council.</i>                                                                                                                                                                                                                                                   |        |
| <b>STANDING COMMITTEES</b>         | D    | GA                | <i>The General Assembly conducted elections for the Membership Liaison and Support Committee, re-electing Dr Makiko Iwasaki (Japan) for a second term, and electing Dr Dasom Kim (Republic of Korea) for a first term on the committee.</i>                                                                                                                                                                                                            |        |
| <b>- Dental Practice Committee</b> | D    | GA                | <i>The General Assembly conducted elections for the Dental Practice Committee, re-electing Dr Stefanie Tiede (Germany) for a second term, and electing Dr Marijan Denkovski (North Macedonia) for a first term on the committee.</i>                                                                                                                                                                                                                   |        |
| <b>- Education Committee</b>       | D    | GA                | <i>The General Assembly conducted elections for the Education Committee and re-elected Prof. Dr. Katalin Nagy (Hungary) for a second term on the committee.</i>                                                                                                                                                                                                                                                                                        |        |
| <b>10B. ANY OTHER BUSINESS</b>     |      |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| <b>11B. CLOSING</b>                | S    |                   | There was no other business to discuss at this meeting.                                                                                                                                                                                                                                                                                                                                                                                                |        |
|                                    | D    | S. Liew           | On behalf of the General Assembly, the Speaker thanked the CSA LOC, interpreters, audio-visual and voting experts, the Council, Committees and Regional Organizations, Head Office staff and all the participants for their cooperation in making the meeting productive, engaging, clear and respectful.<br>The Speaker announced that the General Assembly will meet next September 2026 in Prague, Czech Republic, and declared the meeting closed. |        |

## **Budget Reference Committee report Shanghai for Budget 2026**

The Budget Reference Committee (BRC) approved by General Assembly A met with the Treasurer, Executive Director, and Director of Finance on 8<sup>th</sup> of September having attended the Open Forum 2 on the same day.

The terms of Reference of the Committee are to

1. Consider issues raised by General Assembly delegates at Open Forum 2 regarding the next budget to be adopted at General Assembly B.
2. Suggest to Council improvements to the budget process and presentation of financial information, including recommendations about adopting the next year's budget.
3. Present a report to General Assembly B on deliberations including any recommendations to Council.

We discussed the terms of reference and the frequency they are reviewed by council to ensure they remain fit for purpose. We were reassured that this is regularly done, but suggestions could be submitted by our committee.

There was discussion about the staff costs related to committees and office costs in Switzerland as the budget breaks down into individual sectors of administration, governance, committees by name, communication and advocacy, multi committee projects, congresses and continuing education and development.

**It was recommended by the committee that these staff costs be totalled in the presentation of the budget.**

We queried how such budgeting for staff support was determined and allocated and were satisfied that appropriate process was in place.

We questioned if there were potential savings on staff costs and were told that there is a dedicated staff budget due to expected workload and that 16 staff were needed for the allocated workload of FDI. Remuneration needed to stay competitive and accommodate support for cover such as maternity issues.

The committee found that within year suggestions on projects must be analysed for funding and prioritised and that any proposals coming from committees must secure funding before progressing.

Budget proposals must be submitted by the mid-year meeting and are presented to the Finance Committee before Council decides on the proposals.

**The committee was reassured by the manner this was undertaken.**

We discussed the Master CE programme and were reassured that sponsorship is helping deliver the programme, and that countries where sponsorship was difficult to obtain were being assisted by wider distribution of sponsorship funds collected by cross subsidy.

We asked if a budget was allocated for an increase in sponsorship in general, following the policy of rejection of funds from companies associated with the sugar industry. We were told that development funding was allocated in the budget for this to happen in 2026.

**The committee were reassured this matter was being addressed.**

We asked about the risks associated with the franchise model for funding Congress, which has been used for the last 10 years, and were told that an evaluation was to take place on how it has worked and what improvements or changes could be made to ensure the continuity of funding, with a suggestion eventually being made to Council.

Obviously, the development of options for future FDI meetings and the outcome of the special committee on hybrid meetings will bear relevance to how this develops and many of the points raised in Open Forum 2 related to potential implications from decisions about this.

**The committee would welcome an update to Parliament next year on progress.**

We enquired about the funding for the two special committees as no allocation seems to be obvious in the budget. We were told that so far, the costs have been from within the current budget.

**The committee believed this may need further review on budget allocation depending on how this work progressed.**

Similarly, the special committee looking at membership fees will hopefully result in a fair and equitable way of funding FDI work.

The committee thanks the work of the Finance Committee, Council Officers and all FDI staff for their hard work and recommends the General Assembly approve the 2026 Budget.

Prof. Nour Habib

Dr Gabriela Ramirez Mendoza

Dr Jean-Philippe Haesler

Dr Adirek Sriwatanawongsa

Dr Eddie Crouch

**FDI HANDBOOK****CHAPTER 4: GENERAL ASSEMBLY MANUAL**

(This Manual is based on the FDI Constitution in effect from September 2005)

**1. COMPOSITION**

See Constitution par 2.1

**2. CERTIFICATIONS**

See Constitution par 2.2

**3. SPEAKER AND SECRETARY**

See Constitution par 2.3

The Executive Director is the secretary of the General Assembly.

**4. POWERS AND DUTIES OF THE GENERAL ASSEMBLY**

See Constitution par 2.4

**5. TRANSFER OF POWERS AND DUTIES IN AN EMERGENCY**

See Constitution par 2.5

**6. REGULAR AND SPECIAL MEETINGS**

See Constitution par 2.6

Meeting Dates

The dates for meetings of the assembly are normally determined more than one year in advance. Information with regard to these dates is normally extended to member associations at the previous congress.

Information about the dates for the mid-year meetings of the Council, Council Committees and Standing Committees, deadlines for the submission of reports, nominations, etc. are also circulated to member associations and others concerned.

## **7. REFERENCE COMMITTEES**

See Constitution par 2.7

The following principles should apply to Reference Committees:

- The main purpose is to allow for wider debate on identified topics
- Recommendations made are subject to adoption by the assembly
- Language should not be a barrier in the appointment of members
- Meetings held outside of the Open Forum may be require interpreters
- Different people would be appointed each year
- Members of the Reference Committee will be appointed by the President and President-elect with the approval of the General Assembly.
- A reference committee on finance and budget should exist although new members to be appointed annually.

## **8. RULES OF PROCEDURE**

See Constitution par 2.8

Parliamentary procedures vary greatly from one country to another; however, irrespective of the system, the basic objectives of an established set of rules of procedure are the same:

- to ensure the orderly and efficient conduct of business
- to safeguard the right of free discussion for all
- to assist in reaching decisions which reflect the viewpoint of the majority
- to protect the rights of both the majority and the minority
- to provide certain rules of procedure and conduct which are known in advance to all and which apply to all

The rules and procedures of the assembly are based on the rules of the Constitution and on the latest available edition of the “Standard Code of Parliamentary Procedure” by Alice Sturgis.

### **8.1 Reports**

#### **8.1.1 Agendas**

A tentative agenda for the meetings of the General Assembly shall be determined by the Executive Committee in consultation with the Speaker. The agenda shall be approved by the General Assembly and may be altered by general consent or majority vote of the delegates present and voting.

### 8.1.2 Definitions

Reports are any written documents submitted for consideration. They may include proposed resolution(s).

Issues are items for or on the agenda.

New business is an item which was not included in the circulated agenda(s).

Circulated means the day the documents are sent from or made available by the Head Office.

Be submitted means the day the documents are received at the head office.

### 8.1.3 Reports to be circulated by the Head Office

In order to be considered by the assembly, all reports shall be circulated to Member Associations at least sixty days in advance of each meeting.

To allow sufficient time for the translation of the General Assembly documents, the English edition must be finalised some ninety days prior to the meeting.

### 8.1.4 Reports to be received by the Head Office

Reports to be considered by the assembly shall be available to the Executive Director before the mid-year Council meeting. The purpose of this is to ensure that all reports that are to be considered by the assembly shall first be considered by the Council and then passed on to the assembly - with or without a recommendation.

The rules of procedure of the Council state that “all reports to the Council shall be submitted to the Executive Director not less than sixty days in advance of the meeting at which they are to be considered.”

The deadline for receipt of reports to be considered by the assembly shall be sixty days prior to the mid-year meeting of the Council. The Council normally applies these rules more flexibly.

If reports or resolutions are received less than sixty days prior to the Council mid-year meeting, they may be considered as new business at that meeting and then included in the documents circulated to the assembly.

If reports and resolutions are received after the Council mid-year meeting, these are not included in the circulated assembly documents. They will be presented directly to General Assembly A, either as additional comments to items already on the agenda or as new business. Such reports and resolutions are, if possible, translated and circulated to and considered by the Council at its A meeting during the AWDC.

### 8.1.5 Summary of the Constitutional rules and current procedures

- All reports to the General Assembly should be considered by the Council before circulation to the Member Associations - with or without a recommendation by the Council
- Reports to the General Assembly should be received at the head office at least sixty days prior to the mid-year meeting of the Council
- Reports to the General Assembly, received less than sixty days prior to the mid-year meeting of the Council may also be considered at this meeting
- Reports to the General Assembly, received after the mid-year meeting of the Council, are not circulated with the General Assembly documents, but will be presented
- The agenda and documents for the meetings of the General Assembly shall be circulated to the Member Associations sixty days prior to the meeting\*
- New business can be introduced at any session of the General Assembly

\*Due to the time required for translations, it is possible that some documents may not be available in all languages sixty days prior to the meeting. In all cases, the original English version will be available to all whilst the translations are being prepared.

### 8.1.6 Parliamentary procedure

#### Resolutions and motions

All items of business, introduced by the Council and requiring action by the assembly, shall be presented in the form of a resolution as in the following example:

***“Resolved, that the application of the XX Association for XX Membership be approved,...”***

Background information, explanations and arguments in relation to the proposed resolution are normally provided in reports and documents circulated to the assembly.

A proposal to the assembly by a voting member shall take the form of a motion, as for example:

***“I move that the Council be asked to report on.....”***

A specific rule regarding financial impact: Constitution 2.8.8

***“Financial Statement: All resolutions shall be accompanied by a financial impact statement setting forth, as near as can be ascertained, the financial consequences, if any, of the resolution.”***



Move, second, discuss and vote

The conduct of business in the assembly shall always follow this order:

- a. the **introduction of a resolution or motion** (with no other comments at this stage)
- b. the resolution or motion is **“moved”** by a voting delegate of the General Assembly
- c. the resolution or motion is **“seconded”** by a voting delegate. This is done by raising the hand in response to the Speaker’s question: “is there a **second** to the resolution/motion?” If the resolution or motion is **not** seconded by any of the voting delegates, then the resolution/motion will not be considered any further
- d. When the resolution or motion is moved and seconded, then the Speaker declares the issue open for **debate** or **discussion**
- e. When the discussion is finished, the Speaker calls for the **vote** on the presented, moved, seconded and discussed resolution/motion

Amendments

Any voting member of the assembly may suggest amendments to a prescribed resolution or motion.

All lengthy or complicated motions or amendments must be handed in writing to the Speaker.

A motion or an amendment to a motion – after it has been duly moved and seconded – can only be withdrawn by the mover with the consent of the seconder and the agreement of the assembly.

When an amendment to the main motion is set before the assembly; discussion shall be confined to that amendment.

An amendment must not be a direct negation of the original motion, but may be hostile to it.

If the amendment is carried, the main motion, as amended, becomes the substantive motion and is again open to amendment. When the substantive motion is put to the assembly and adopted, it becomes the official resolution or policy and any further debate ends.

Debate

Any member of the assembly, with the right to speak, may participate in debate on any question.

In debate, the member must address the motion or resolution which is currently under discussion. If the member extends debate beyond this or tries to introduce an entirely dissimilar item of business, the Speaker may rule the

member “out of order”. The member must cease speaking and wait to introduce the new item until there has been disposition of the current question.

Not more than one main or principal question may be considered by the assembly at any one time.

#### Point of order

The Speaker or any member of the assembly may raise a point of order when, intentionally or not, a violation of the rules of debate has occurred.

The point of order must be raised immediately following the alleged irregularity. It shall take precedence over all other business and shall be open to discussion.

#### Immediate vote

The Speaker shall have the discretion to decide when adequate discussion has taken place and when to **put the question** to the vote. Voting members of the assembly may wish to close the debate and may do so by moving a motion to **vote immediately**. This will require a seconder. It is not debatable and requires a two-thirds (2/3) affirmative vote to carry.

#### Present and voting

The phrase “delegates present and voting” means delegates casting a valid vote.

Delegates abstaining from voting or handing a blank or spoilt paper are considered as not voting. The same rules apply when any other method of voting is used.

#### Majority vote

In general, the assembly makes its decisions by majority vote (i.e. more than 50% of the votes); however, in certain situations, a further majority vote of two-thirds is required, for example on constitutional matters, election and expulsion of members and when a debate is to be curtailed (see Immediate Vote, above).

#### Motion to appeal

In the event of a dispute over a ruling by the Speaker, an appeal is permissible if requested immediately following the ruling.

An appeal requires a seconder, is debatable, cannot be amended and requires a majority vote in the negative to overrule the Speaker.

### Reconsideration

When the assembly decides on a main motion by taking a vote on it, this decision is usually final; however, an Assembly, just as an individual, has a right to change its mind. Accordingly, motions already voted upon can be reconsidered.

The motion to reconsider the vote on a motion, that was either carried or lost, can be proposed during the same or different session of the meeting at which it was voted upon and requires a three-quarters (3/4) affirmative vote of those present and voting.

### Closed sessions

A closed session of an assembly is a meeting only open to members of the assembly. Guests, such as staff, consultants or advisors may only attend if invited.

Closed Sessions of the General Assembly may be called by majority vote of the delegates present and voting.

### Minutes

Accurate, concise and complete Minutes are of vital importance. They are the official history and legal record of the proposals, reports and decisions of the members. The secretary of the assembly (the Executive Director), working under the direction of the president, is responsible for taking notes and preparing the minutes which shall be circulated for approval at the following annual meeting. The secretary shall record any corrections and then certify the minutes following approval by the assembly.

Debate on resolutions shall not be included in the minutes unless a dissenter wishes his/her negative vote, or his/her abstention from voting, recorded.

## **8.2 Presentation of new business**

See Constitution par 2.8.2

New business requires a two thirds vote for adoption.

## **8.3 Quorum**

See Constitution par 2.8.3

Thirty Regular Members or National Committees where applicable are required for a quorum.

#### **8.4 Privilege of the floor**

See Constitution par 2.8.4

Any member of the assembly, who wishes to speak, must ask the Speaker for the floor by raising the hand and/or by waiting at one of the microphones until recognised and asked to speak by the Speaker.

#### **8.5 Voting**

See Constitution par 2.8.5

Voting in the assembly will either be by a show of hands or by secret ballot (an electronic voting system is normally used). The Speaker will determine which method to use depending on the nature of the motion or resolution.

Delegates have the right to request a secret ballot. A secret ballot shall be conducted if one-third of the delegates present and voting support the request. When electronic voting is used, specific provision is not made for abstaining. Non-casting of a vote is seen as abstaining.

#### **8.6 Nominations**

See Constitution par 2.8.6

In order to be eligible for election to a standing committee, nominees should meet the majority of the specific criteria for each committee. The criteria also apply to other representatives who, at the discretion of a committee, may be elected to serve as consultants.

Members of the five standing committees should have a good working knowledge of English and should have a significant standing in their national association and/or the international dental community.

#### **8.7 Elections**

See Constitution par 2.8.7

The assembly has the right to appoint working groups and task teams (see Chapter 5 – Council, par 4) or to request the council to do so. The working groups and task teams may be established to consider matters which are not falling within the ordinary business of any standing committee. The resolution authorizing the working group or task team shall specify its duties, the number of members, calculated costs and indicate the estimated time-frame and mode of presentation.

**8.8 Financial statement**

See Constitution par 2.8.8

**8.9 Approval of the budget**

See Constitution par 2.8.9

**8.10 Suspension of rules**

See Constitution par 2.8.10

These rules except the rule governing a quorum, may be suspended by a two thirds vote.

**Additional Rules**

The rules contained in the latest edition of the 'Sturgis Standard Codes of Parliamentary Procedure' shall govern the deliberations of the General Assembly in all cases in which they are applicable and are not in conflict with the articles and regulations of the Constitution.

**Draft response to 2025 Budget Reference Committee Report**

| <b>Topics - Recommendations</b>                                                                                                                                                                                                                                                                | <b>FDI Council Action</b>                                                                                                                                                                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ol style="list-style-type: none"><li>1. It was recommended by the committee that these staff costs be totalled in the presentation of the budget.</li><li>2. The committee would welcome an update to Parliament next year on progress of the special committee for Hybrid congress</li></ol> | <ol style="list-style-type: none"><li>1 For each department the total staff costs have a total. For the multi-committee projects the detail is provided in the budget form and the narratives.</li><li>2 The World Dental Parliament Special Committee will provide an update and recommendations to the 2026 General assembly in Prague.</li></ol> |

## **Budget Reference Committee report Shanghai for Budget 2026**

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**The committee were reassured this matter was being addressed.**

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Dr Gabriela Ramirez Mendoza

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Dr Eddie Crouch



# President's Report

## General Assembly 2026: Assist. Prof. Dr Nikolai Sharkov

*This report was generated on 16 June 2026*

It is a privilege to address my first General Assembly as President of the FDI World Dental Federation. When I assumed this office, I set out the values that would guide my presidency: trust, unity, harmony, resilience, fieldwork, and transparency. These values were not intended to be aspirations alone. They were intended to guide our actions, strengthen our organization, and reinforce our role as the global voice of the dental profession.

In my acceptance speech, I quoted Lao Tzu: "A journey of a thousand miles begins with a single step." One year later, I have had the privilege of witnessing the many steps taken by our members, leadership, partners, and the profession in pursuit of our shared mission.

Over the past year, I have had the honour of representing FDI across the world, engaging with our members, meeting government leaders and policymakers, and advocating for oral health in international forums. In every setting, I have seen the growing influence of FDI and the increasing recognition that oral health must be an integral part of health policy, healthcare systems, and sustainable development.

The following report provides an overview of the activities, engagements, and priorities that have shaped the first year of my presidency.

### Engaging with members across regions

Throughout this first year, I have had the privilege of accepting invitations from member organizations across different regions of the world. These working visits have enabled me to connect directly with colleagues, gain deeper insight into their priorities and challenges, and witness firsthand the outstanding work being carried out across our profession.

I would also like to express my regret at being unable to accept certain members' invitations due to conflicting commitments. Whenever possible, I conveyed my support and appreciation by providing pre-recorded messages for participants at these events.

I am grateful to the member associations that welcomed me and shared their perspectives so openly. These exchanges have strengthened my understanding of the diverse environments in which our members operate, while also highlighting the shared aspirations that unite us as a global profession.

Many of these visits also provided opportunities to meet with Ministers of Health, government representatives, academic leaders, and other stakeholders. These exchanges reinforced the growing recognition of oral health as an integral part of overall health and highlighted the important role our member organizations play in advancing this agenda at the national level.

What struck me most was that, despite differences in geography, resources, and healthcare systems, the challenges and opportunities facing our profession are remarkably similar. The insights gained through these interactions have helped ensure FDI's work remains grounded in the realities of our members and informed by their experiences.

### Advancing oral health through global advocacy

One of the central responsibilities of the presidency is to ensure that oral health is represented in high-level policy discussions. I have been proud to represent FDI in international forums, engage with policymakers and health leaders, and advocate for the integration of oral health into broader health and development agendas.

## A defining moment in advocacy at the UN High-Level Meeting

A major achievement for FDI was the United Nations (UN) Fourth High-Level Meeting on Noncommunicable Diseases (NCDs) and Mental Health in New York. I was proud that FDI played an active role throughout the process, and I witnessed firsthand the importance of sustained advocacy at the highest political levels.

At the outset of negotiations, oral health was absent from the draft Political Declaration. Together with our members, partners, and supportive governments, we worked to ensure that oral health was not overlooked. Through coordinated advocacy and persistent engagement, oral diseases were ultimately included in both the preambular and operative sections of the final Political Declaration, a historic achievement and an important milestone for our profession.

This outcome demonstrates the impact we can achieve when we speak with a united voice. It also reminds us that progress cannot be taken for granted. As preparations begin for the 2027 UN High-Level Meeting on Universal Health Coverage (UHC), we must build on this momentum and continue advocating for oral health as an integral component of health systems and sustainable development.

## Vision 2030: Progress, challenges, and the path ahead

As we considered the opportunities ahead, we also took stock of our progress. The *Vision 2030* Mid-Term Analysis provides a comprehensive assessment of how our profession is advancing towards the goals set out in FDI's advocacy roadmap. The findings are encouraging. Across the world, member organizations are strengthening governance structures, influencing policy development, and advancing national oral health agendas.

At the same time, the analysis highlights an important reality: while commitment to oral health is growing, implementation remains uneven. The challenge before us is no longer simply securing recognition of oral health as a priority. The challenge is translating commitments into measurable action and meaningful outcomes for populations. The findings of the Mid-Term Analysis will help guide our strategic direction towards 2030 and ensure that FDI continues to respond to the evolving needs of its members.

## Ensuring oral health remains a priority on the global stage

The World Health Assembly remains one of the most important opportunities for FDI to engage directly with governments, WHO leadership, and global health partners. During the 79th World Health Assembly (WHA79), FDI ensured that oral health remained part of the discussions across a range of agenda items and policy debates.

WHA79 provided an important platform to strengthen relationships with Member States, engage with key stakeholders, and reinforce FDI's role as a trusted partner in advancing the global oral health agenda. These engagements are essential to maintaining momentum following the adoption of the *WHO Global Oral Health Action Plan 2023–2030* and ensuring that commitments made at the global level are translated into action within countries.

A significant milestone during the Assembly was the launch of the WHO Global Oral Health Coalition, which I was pleased to participate in. The Coalition represents an important step forward in strengthening collaboration and accelerating progress towards achieving the global oral health agenda. Bringing together governments, professional organizations, civil society, academia, and other stakeholders, it will serve as a platform for advocacy, knowledge translation, and the development of practical solutions to support implementation at the country level.

The launch of the Coalition sends a clear signal that oral health is increasingly recognized as a global public health priority. It also reflects a growing understanding that meaningful progress will require coordinated action and strong partnerships across sectors and regions.

Throughout WHA79, discussions repeatedly reinforced a message that FDI has championed for many years: oral health cannot be considered in isolation. It must be integrated into broader health systems, NCD strategies, primary healthcare, and UHC efforts. Encouragingly, this message is gaining increasing traction among policymakers and international partners.

Another highlight of WHA79 was the launch of FDI's *Oral Health at Work: A Roadmap for Prevention, Productivity and Workforce Well-being*, which demonstrates how oral health contributes not only to individual well-being, but also to workforce participation, productivity, economic resilience, and sustainable development.

As we move forward, I encourage member organizations and partners to engage actively with this work, advocate for its adoption at the national level, and share examples of successful implementation. The experiences and innovations emerging from our membership will be invaluable as FDI develops practical resources and supports countries in translating this roadmap into meaningful action.

*For more details, please refer to the Advocacy and Communications report.*

## Shaping FDI's future through the work of the Special Committees

As you know, two Special Committees have been established to examine issues of strategic importance to the future of FDI: the membership dues formula and the feasibility of holding the World Dental Parliament in a hybrid format.

Over the past year, both Committees have worked diligently to analyze the challenges, consult stakeholders, and develop a range of scenarios for consideration by FDI's General Assembly.

In parallel, the issue of proxy voting was discussed with FDI's leadership during the Mid-Year Meeting. Constructive exchanges took place, and we look forward to presenting this work to you.

The discussions before us are about far more than procedures or operational arrangements. They touch on fundamental questions of representation, participation, financial sustainability, and the way our organization will function in the years ahead. The decisions we make today will help shape the FDI of tomorrow.

As delegates, you have a collective responsibility to approach these discussions with an open mind and a long-term perspective. While views may differ on the best path forward, our common objective must remain clear: to strengthen FDI, preserve its ability to serve all members effectively, and safeguard the sustainability of our organization for future generations.

I encourage all members to engage actively in the discussions that will take place during this General Assembly and Open Fora. The recommendations presented by the Special Committees deserve careful consideration, thoughtful debate, and responsible decision-making.

FDI has always evolved by adapting to new realities while remaining true to its mission and values. I am confident that, through constructive dialogue and collective wisdom, we will make decisions that strengthen our organization and position it for continued success in the years ahead.

## Looking forward to reuniting at our upcoming FDI World Dental Congresses

### FDI World Dental Congress 2026: Prague

Prague offers an important opportunity for us to come together once again at the World Dental Parliament. Alongside our governance meetings, delegates are encouraged to participate in the FDI World Dental Congress (WDC), co-hosted by FDI and the Czech Dental Chamber.

The Congress will feature a rich scientific programme, a dynamic industry exhibition, and numerous sessions showcasing FDI's projects and initiatives, including work led by our Standing Committees. I encourage all delegates to take full advantage of these opportunities to learn, engage, and connect with colleagues from around the world.

## FDI World Dental Congress 2027: Mumbai

Preparations are already underway for the 2027 WDC, which will take place in Mumbai, India, from 21–24 October in collaboration with the Indian Dental Association.

We are proud to bring the Congress to South Asia and look forward to working with the Indian Dental Association to deliver another successful gathering for the global dental community.

## Knowledge exchange through our public health projects

With the commitment of FDI's experts and the support of our industry partners, our Public Health projects have continued to thrive in 2026.

I am pleased to highlight the following projects:

- **Educational Module for non-oral health professionals** (supported by Haleon)
- **HPV in Dentistry** (supported by MSD)
- **Oral Health for an Ageing Population** (supported by GC International and Nakao Foundation)
- **Oral Health within General Health, including Smile Grant** (supported by Colgate)
- **Oral Health Observatory** (supported by Haleon)
- **Tobacco Cessation** (supported by Lion Corporation)
- **World Dental Development Fund** (supported by Shofu)

To learn more about our projects, please consult the *FDI Projects Report*.

## Thank you

Before concluding, I would like to recognize the many individuals and organizations whose commitment strengthens FDI every day. I am grateful to my colleagues on the Executive Committee, Council, Committees, Working Groups, Task Teams, and Expert Groups for their expertise and unwavering dedication to FDI's mission. Their guidance and commitment continue to shape our work and our future direction.

To our member organizations, thank you for your active engagement and leadership. The strength of FDI comes from its members, and it is your work within countries and communities that drives progress in oral health around the world.

I would also like to acknowledge our partners across industry, international organizations, academia, and the broader global health community. Through collaboration and shared purpose, we have continued to elevate oral health on the global agenda and create new opportunities for impact.

Finally, I extend my sincere appreciation to the FDI staff. Their professionalism and tireless efforts are the foundation upon which our work is built.

Together, we continue to advance our shared mission of improving oral health worldwide.

Thank you.

# Executive Director's Report

## General Assembly 2026

*This report was generated on 16 June 2026*

Over the past year, FDI has been extremely active, with many positive developments and achievements across our work. At the same time, we have been looking ahead and considering how best to position the organization for the future. This report provides an overview of the key activities, milestones, and discussions that have shaped the past year and will help guide our future direction.

### A global network, a shared purpose

At the heart of FDI's work is its commitment to supporting its members and creating opportunities for them to engage beyond their national borders. Through advocacy, policy development, education, leadership opportunities, knowledge exchange, and international collaboration, FDI helps member organizations advance oral health and strengthen the dental profession within their own countries and territories.

From our base in Geneva, we engage with United Nations (UN) agencies, country missions, international organizations, civil society partners, and other stakeholders to ensure that oral health remains part of broader health discussions and priorities. This work helps bring the perspectives of our members to global decision-making forums while creating opportunities to advance issues that matter to the profession worldwide.

Today, FDI brings together 187 members across 132 countries and territories. This global network provides opportunities for members to learn from one another, share experiences, and contribute to international discussions on issues affecting the profession and oral health worldwide.

It is this combination of global reach, shared expertise, and active engagement that gives FDI its strength. When we come together under a common banner, we are able to speak with a collective voice that carries weight and credibility. The diversity, expertise, and engagement of our members continue to shape the organization's priorities and contribute to its impact around the world.

### Responding to member priorities

Member engagement extends beyond participation in FDI's activities and programmes; it also plays an important role in shaping the organization's future. Over the past year, members have asked us to examine two important issues: the membership fee formula and the possibility of introducing hybrid Parliament meetings.

In response, two Special Committees were established to explore options and assess different scenarios. Their work reflects FDI's commitment to listening to its members and ensuring that our structures and processes continue to meet the needs of a diverse and global membership. The head office has been providing logistical support to these two committees.

The recommendations emerging from these committees have the potential to influence the future direction, sustainability, and inclusiveness of FDI for years to come, but they will also have a financial impact. I would like to thank the committee members for their dedication and thoughtful contributions to these important discussions.

### Global advocacy to integrate oral health into overall health

Over the past year, we have seen encouraging progress in the recognition of oral health within the broader global health agenda. Developments such as the adoption of the **UN Political Declaration on Noncommunicable Diseases (NCDs) and Mental Well-being**, as well as continued implementation of the WHO Global Oral Health Action Plan, demonstrate growing momentum for oral health worldwide.

While these milestones are important, they are also the result of sustained work behind the scenes. Through strategic engagement with international organizations and partners, including IADR, the NCD Alliance, the World Health Professions Alliance, and many others, FDI continues to advocate for the integration of oral health into broader health policies and programmes. These partnerships strengthen our collective voice and help ensure that the perspectives of our members are represented in global discussions.

An important example of this work is our participation in the **WHO Global Coalition on Oral Health**, which supports implementation of the Global Oral Health Action Plan through advocacy, collaboration, and knowledge sharing. The Coalition provides an important platform to advance oral health within universal health coverage and NCD agendas while supporting countries in translating policy into action. FDI will co-lead the advocacy stream of this Coalition together with Global Self Care Federation, Fondation Université de Montpellier and WHO Collaborating Centre at UCL.

## Advancing the profession through evidence-based advocacy

This year also marked an important milestone with the decision adopted at the **Sixth Conference of the Parties to the Minamata Convention on Mercury to phase out dental amalgam globally by 2034**. Throughout the negotiations, FDI worked closely with partners to advocate for an evidence-based and equitable transition that protects patients, supports practitioners, and recognizes the differing realities of health systems around the world.

The final outcome reflects many of the principles that FDI has consistently promoted, including maintaining clinical judgement, ensuring continuity of care, and allowing countries sufficient time to prepare for the transition. This decision provides greater clarity for the profession and reinforces FDI's commitment to supporting members as implementation moves forward.

At the same time, we have continued to demonstrate leadership on other scientific and public health issues. In response to increasing global discussion surrounding fluoride, FDI has initiated the development of **a joint Position Statement with IADR**. This work reflects our shared commitment to ensuring that public health discussions remain grounded in the best available evidence and that our members are equipped with clear, science-based guidance. The initial draft of this Position Statement will be presented at Open Forum 3 during the World Dental Parliament in Prague.

For further updates, please refer to the *Advocacy and Communications Report*.

## World Oral Health Day: Celebrating a global movement

This year marked the conclusion of the three-year "A Happy Mouth is..." World Oral Health Day (WOHD) campaign. Over the course of the campaign, members, partners, oral health professionals, and members of the public around the world came together to raise awareness of the importance of oral health at every stage of life and to promote the benefits of maintaining good oral health throughout the lifespan.

The 2026 WOHD celebrations have once again demonstrated the strength and reach of our global community with members all over the world reporting activities and contributing to a campaign reach measured in the billions. In addition, the main campaign video has been viewed more than 22.9 million times.

These achievements would not have been possible without the commitment and creativity of our members, the support of our partners, and the engagement of the wider public. I would like to extend my sincere thanks to everyone who contributed to making this year's campaign such a success.



While we celebrate the achievements of the past three years, we are also looking ahead. Work is already underway to develop the next WOHD campaign, informed by research and stakeholder insights gathered over recent months. The next chapter of this important initiative will be officially launched during the WDC, where we will unveil a new campaign designed to continue mobilizing the global oral health community and advancing awareness worldwide.

For a full overview of this year's campaign, please refer to the *Advocacy and Communications Report*.

## Continuing Education

Continuing professional development remains a key pillar of FDI's work and an important area of value for our members and the wider dental community. Over the past year, our educational offerings have continued to grow in both reach and impact, providing learning opportunities for dental professionals at every stage of their careers.

Today, FDI offers a diverse portfolio of continuing education programmes, including our WDC, Regional Continuing Education (CE) events, the Master CE course in Adhesive and Aesthetic Dentistry, the Young Dentists Forum, and the FDI Oral Health Campus. Together, these initiatives support lifelong learning, professional development, and the exchange of knowledge across our global network.

## Providing continuing professional development opportunities through our Regional Congress

One development I would particularly like to highlight is Council's decision to hold one FDI Regional Congress each year. These events complement the WDC by bringing high-quality scientific programmes, professional exchange, and networking opportunities closer to our members in different regions of the world.

This year, we are particularly pleased to be returning to the African region with the FDI Regional Congress, which will take place in Mombasa, Kenya, from 21–23 October in collaboration with the Kenya Dental Association. The congress will provide an important platform for dental professionals from across the region and beyond to come together, share knowledge, and strengthen professional connections.

For a more detailed update, please refer to the *Continuing Education and Congress Report*.

## Celebrating the success of the International Dental Journal

The *International Dental Journal* (IDJ) continues to strengthen its position as a leading source of scientific knowledge for the global dental profession. In 2025, the journal celebrated its 75th anniversary, marking an important milestone in its long history of advancing dental science and supporting evidence-based practice worldwide.

The journal achieved an **impact factor of 5.2 in 2025** – a remarkable increase from 3.7 in 2024. It underscores IDJ's continued growth and standing within the global scientific community and reflects the quality of the research it publishes, the strength of its editorial leadership, and the valuable contributions of the researchers, reviewers, and authors who support its success.

Under the leadership of Prof. Lakshman Samaranayake, the IDJ has become an increasingly important asset to FDI and the profession. I would like to congratulate Prof. Samaranayake, the Editorial Board, reviewers, authors, publishers, and all those who contribute to the journal's success. Their efforts help ensure that FDI remains at the forefront of scientific leadership and knowledge sharing within the global oral health community.

For a more comprehensive report, please refer to the detailed update provided by Prof. Samaranayake in his report.

## Thank you

As I conclude this report, I would like to thank our members, leadership, committees, task teams and working groups, industry and institutional partners, and of course my team at FDI Headquarters for their continued commitment and support.

The past year has been one of significant activity and progress across our work. It has also been a year in which we have looked ahead and considered how best to position FDI for the future.

The achievements outlined in this report are the result of our collective efforts. I am grateful for your continued engagement and look forward to working together as we continue to strengthen FDI and advance oral health worldwide.



# Public Health Projects

## General Assembly report 2026

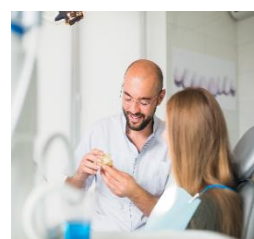
This report summarizes all activities undertaken across FDI's projects from the General Assembly report of September 2025 through June 2026.

### Educational Module for Other Healthcare Professionals

#### Project goal

To equip non-dental healthcare professionals (HCPs) with essential oral health knowledge and skills by developing targeted educational materials. to integrate oral healthcare into routine practice. The project covers oral anatomy, common oral conditions, prevention, early recognition, and appropriate management or referral, strengthening oral healthcare delivery at the primary care level.

<https://www.fdiworlddental.org/educational-module-other-healthcare-professionals>



#### Project progress and achievements

- A [15<sup>th</sup> fact sheet](#) on **Dentine Hypersensitivity** has been finalized and is supported by the International Pharmaceutical Federation (FIP) and the Global Self-Care Federation (GSCF). The accompanying [infographic](#) has also been completed and is available through the FDI website.
- [All fact sheets and infographics](#) continue to be actively promoted through social media to support dissemination and engagement among relevant audiences.
- In collaboration with FIP, a **webinar** held on 3 June highlighted the role of pharmacists in supporting oral care during pregnancy and older age.

#### Next steps

- An article on the project's rationale and the importance of interprofessional collaboration is being developed. It will be the first FDI article published in the World Medical Journal.
- **Two webinars** will be held in collaboration with the World Medical Association (WMA) and the International Council of Nurses (ICN).
- **Three additional fact sheets** will be developed and finalized on topics relevant to the ICN, WMA, and FIP.

#### Project stakeholders

| Stakeholder type    | Name/Composition        |
|---------------------|-------------------------|
| Corporate partner   | Haleon                  |
| Overseeing Expert   | Dr Nokukhanya Makwakwa  |
| Oversight committee | Public Health Committee |

## Human Papillomavirus (HPV) and Oral Health Integration

### Project goal

To drive advocacy to strengthen the role of oral health professionals in HPV prevention and to develop policy recommendations integrating HPV prevention in oral health services.

<https://www.fdiworlddental.org/hpv-human-papillomavirus-oral-health-prevention>



### Project progress and achievements

- A **white paper** advocating for the integration of oral health professionals into national HPV prevention strategies is being finalized. It provides practical implementation guidance to support the early detection of HPV-related cancers, strengthen patient education, improve vaccination coverage, and address policy, training, and stigma-related barriers.
- The HPV **communications plan** continues to be implemented to raise awareness about the project and promote available resources through FDI's website, newsletters, and social media platforms.
- **Three infographics** targeting dentists, patients, and policymakers are under development. In addition to being included in the white paper, they will be promoted and disseminated as standalone resources to extend the reach of its key messages.

### Next steps

- The **white paper will be translated** to support NDAs in policy development and stakeholder engagement.
- A **webinar** promoting the white paper will take place on 16 July through the Oral Health Campus. HPV Task Team members Dr Nisha D'Silva and Dr Kivanç Bektaş-Kayhan will explore the importance of integrating HPV awareness into everyday dental practice.
- An article for the *International Dental Journal* is being developed to highlight the white paper's key messages and is intended for publication as an editorial or commentary alongside it.
- A **proposal** for the next phase of the project is under development.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                  |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Merck                                                                                                                                                             |
| Task Team           | <ul style="list-style-type: none"> <li>• Dr Nisha D'Silva (Chair)</li> <li>• Dr Katalin Nagy</li> <li>• Dr Doniphan Hammer</li> <li>• Dr Kivanç Kayhan</li> </ul> |
| Oversight committee | Science Committee                                                                                                                                                 |

## Mental Health and Well-being in Dentistry

### Project goal

To promote mental well-being in dentistry by raising awareness, reducing stigma, and providing resources and training for dental professionals, students, and patients. This goal includes addressing the impact of patient dental phobia on practitioners and equipping both dental teams and patients with tools to manage mental health challenges and dental anxiety.



<https://www.fdiworlddental.org/mental-health-and-well-being-dentistry>

### Project progress and achievements

- A **scoping review**, "[The Relationship Between Burnout in Dental Care Professionals and Patient Safety](#)," was published in the *International Dental Journal* in April 2026.

### Next steps

- A session titled "**Supporting Those Who Care: Peer-Driven Wellbeing Solutions for Dental Students**" will take place at FDI's World Dental Congress 2026 (WDC26) on 7 September. The speakers are two members of the Mental Health and Well-Being Task Team, Dr Shannu Bhatia and Dr Amanda Johnston. The session will highlight how well-being can be meaningfully embedded across both the formal and informal curriculum, with a particular focus on the transformative role of peer support.
- A **proposal** for the next phase of the project has been developed and is being shared with partners to secure funding and ensure continued implementation and expansion of the initiative.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                                                                      |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | MPS Foundation (until December 2025)                                                                                                                                                                                  |
| Task Team           | <ul style="list-style-type: none"> <li>• Prof. Tim Newton (Chair) (until December 2025)</li> <li>• Dr Amanda Johnston</li> <li>• Prof. Matt Hopcraft</li> <li>• Dr Chisung Yuh</li> <li>• Dr Shannu Bhatia</li> </ul> |
| Oversight committee | Dental Practice Committee                                                                                                                                                                                             |

## Oral Health for an Ageing Population

### Project goal

To enhance oral healthcare for older adults through comprehensive, innovative approaches and strategic collaborations. This project aims to improve access to dental care and promote better oral health among older adults.

<https://www.fdiworlddental.org/oral-health-ageing-population>



### Project progress and achievements

- An **Advocacy Guide – Promoting Oral Health for an Ageing Population (OHAP)** was launched at WDC25. **French, Japanese and Spanish** translations were released in January 2026, expanding access to a resource that supports advocacy for integrating oral health into healthy ageing policies and broader health agendas.
- A **webinar** on oral health and healthy ageing was held in **January 2026**, focusing on the integration of oral health into long-term care systems, oral disease prevention, and the use of OHAP resources to support healthy ageing.
- The WDC26 session will address the **integration of oral health into long-term care models and community settings** for ageing populations and will include speakers from the OHAP Task Team, including Prof. Kakuhiro Fukai, Prof. Gerry McKenna and Prof. Judith Jones. The session will cover dental insurance and access gaps, as well as the use of OHAP resources to support oral health integration in long-term care settings.

### Next steps

- **IDJ Supplement:** the Task Team is drafting a supplement consisting of eight articles for publication by the end of 2026. It will provide an overview of achievements in oral health for ageing populations to date, highlight what still needs to be done, and present evidence that UHC cannot be achieved without addressing oral health for ageing populations.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                                                               |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | GC International                                                                                                                                                                                               |
| Task Team           | <ul style="list-style-type: none"> <li>• Prof. Kakuhiro Fukai (Chair)</li> <li>• Prof. Judith Jones</li> <li>• Dr Sophie Darteville</li> <li>• Prof. Hiroyuki Hirano</li> <li>• Prof. Gerry McKenna</li> </ul> |
| Oversight committee | Public Health Committee                                                                                                                                                                                        |

## Oral Health within General Health

### Project goal

In alignment with FDI's Vision 2030, this project aims to strengthen and accelerate countries' progress toward optimal health for all by engaging key stakeholders, including 1) patients and the general public; 2) oral and non-oral health professionals; 3) policymakers, NDAs, and other key stakeholders. The project seeks to integrate oral health into broader health systems, ensuring a more comprehensive approach to healthcare.

Additionally, the FDI Smile Grant, part of the project, promotes preventive oral care at the local level. This CHF 5,000 award recognizes two NDAs annually for their innovative and sustainable community-based outreach projects that improve oral health in their countries.



<https://www.fdiworlddental.org/whole-body-health>; <https://www.fdiworlddental.org/whole-mouth-health>

<https://www.fdiworlddental.org/fdi-smile-grant>

### Project progress and achievements

- A **white paper** providing evidence from the co-design process and practical recommendations to strengthen oral health literacy, support behaviour change, and advance person-centred prevention was launched in December 2025.
- **Two infographics** were launched in December 2025: one describing the co-design approach and the Whole Mouth Health (WMH) Arcade, and another presenting community perceptions of oral health, including its role in function, aesthetics, confidence, and overall well-being.
- A **webinar** on 10 March 2026, featuring Prof. Sarah Baker and Dr Aaron Davis, presented key findings from the white paper and discussed how co-design methodology can support the development of patient-centred oral health education.
- **Analysis of engagement data collected on the WMH Arcade:** Over 1,200 unique visitors have used the platform. Data analysis is identifying gaps in oral health literacy and facilitating the development of targeted resources. The Portuguese version of the **WMH Arcade** will also be released by July 2026.
- The **Whole Body Health (WBH)** platform: Under the guidance of Prof. Iain Chapple, the platform is undergoing a comprehensive content review to reflect the current state of evidence and ensure that information on the links between oral and systemic diseases remains up to date and scientifically robust.

### Next steps

- A **peer-reviewed manuscript** is scheduled for submission in Q3 2026, presenting an analysis of global engagement data from the WMH platform and Arcade, together with the project's co-design methodology and implications for oral health education and prevention.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                          |
|---------------------|---------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Colgate                                                                                                                   |
| Task Team           | <i>The Task Team(s) overseeing this work will need to be reappointed by Council once this current phase is completed.</i> |
| Oversight committee | Dental Practice Committee                                                                                                 |

## Oral Health Observatory

### Project goal

To collect standardized global oral health data, assess the needs of patients and dental practitioners at national and international levels, and identify key oral health trends. These insights will be used to inform and influence policymakers, driving greater investment in oral disease prevention, ultimately improving overall health outcomes.

<https://www.fdiworlddental.org/oral-health-observatory>



### Project progress and achievements

- A **workshop** with experts from the **Tanzanian Dental Association (TDA)** was held on 5 and 6 March 2026. Data analysis was conducted in collaboration with the OHO Task Team and is being used to support policy development and advocacy activities in Tanzania.
- A **10-year impact report** was developed to showcase the programme's achievements and global impact over the past decade, highlighting key milestones, country experiences and contributions to evidence-based oral health advocacy.
- The **Egyptian Dental Association** is collecting data across more than 20 dental clinics, with a target of 900 patients.
- In **Colombia**, data collection in the public sector is ongoing across 26 institutions, with more than 1,400 patients surveyed to date. The initiative will enable comparisons between public and private sectors and support the integration of oral health indicators into national surveillance systems.

### Next steps

- A session is planned for **WDC 2026** featuring Dr Michael Sereny (Chair of the OHO Task Team), Prof. David Williams and Dr Gemma Berege (TDA). The session will present the OHO's objectives and methodology, share key findings from data analysis, and showcase Tanzania as a case study demonstrating how national data can inform policy dialogue and advocacy.
- The **Nigerian Dental Association** will collect data through the implementation of the OHO questionnaire in four local dialects, including English Pidgin, Yoruba, Ibo and Hausa.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                               |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Haleon                                                                                                                                         |
| Task Team           | <ul style="list-style-type: none"> <li>• Dr Michael Sereny (Chair)</li> <li>• Prof. Georgios Tsakos</li> <li>• Prof. David Williams</li> </ul> |
| Oversight committee | Dental Practice Committee                                                                                                                      |

## Sustainability in Dentistry

### Project goal

To support the dental profession on its sustainability journey by providing educational resources and advocacy guidelines. <https://www.fdiworlddental.org/sustainability-dentistry>



### Project progress and achievements

- **MOOC 2** is currently being translated into Spanish, French, and Mandarin.
- The **Sustainability Ambassador Prize winners** were selected and contacted in March 2026.
- A **project audit** assessing its impact since its launch is underway to ensure that the next phase is developed in a strategically relevant and evidence-informed manner.

### Next steps

- **Develop a strategy** for the next project phase by Q3.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                                                                                     |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Partners: Sunstar, Haleon, Dentsply Sirona<br>Supporters: Colgate, Kulzer, SDI Limited                                                                                                                                               |
| Task Team           | <ul style="list-style-type: none"> <li>• Prof. Nicolas Martin (Chair)</li> <li>• Dr Mick Armstrong</li> <li>• Dr Duygu Ilhan</li> <li>• Dr Steven Mulligan</li> <li>• Dr Hasan Jamal</li> <li>• Asst. Prof. Donna Hackley</li> </ul> |
| Oversight committee | Dental Practice Committee                                                                                                                                                                                                            |



## Tobacco Cessation

### Project goal

To promote tobacco cessation and overall health by disseminating FDI resources in collaboration with NDAs, increasing awareness of the critical role oral health professionals play in tobacco cessation, and enhancing their knowledge and skills to deliver effective interventions in dental settings. Additionally, to raise public and professional awareness of the integral connection between oral health and overall health and well-being.



<https://www.fdiworlddental.org/tobacco-cessation>

### Project progress and achievements

- A reminder about the opportunity to host NDA-led tobacco cessation workshops was sent to members in May 2026. As in the previous year, up to seven NDAs can be selected to receive a CHF 1,000 tobacco cessation grant, enabling them to implement a workshop in their country in 2026.
- The **Nigerian Dental Association, Pakistan Dental Association, South Africa Dental Association, and Colegio de Cirujanos Dentistas de Costa Rica** are currently preparing to deliver workshops before the end of the summer.
- The **Slovenian Dental Association** will organize its workshop at the end of the year.
- The **Lebanese Dental Association** will organize a second workshop using the remaining funds from their 2025 workshop.

### Next steps

- **Three additional applications** are currently under review by the Tobacco Cessation Experts Group.
- A **session** titled “Tobacco and Emerging Nicotine Products Cessation Strategies: Empowering the Dental Team with Evidence” will take place at FDI’s WDC 2026 on 4 September. Speakers include Dr Dongbo Fu, Dr Purnima Kumar, and Dr Eduardo Bianco. The session will equip dental teams with evidence-based strategies to address tobacco use and the growing challenge of emerging nicotine products in clinical practice.
- A **proposal** for the next phase of the project has been developed to expand its scope to include both electronic nicotine delivery systems (ENDS) and electronic non-nicotine delivery systems (ENDDS). The proposal will be shared with partners to secure funding and support the continued implementation and expansion of the initiative.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                                          |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Lion Foundation                                                                                                                                                                           |
| Experts group       | <ul style="list-style-type: none"> <li>• Dr Dongbo Fu (WHO Adviser)</li> <li>• Dr Elham Kateeb (Council)</li> <li>• Dr Hiroshi Ogawa (Council)</li> <li>• Dr Simona Dianišková</li> </ul> |
| Oversight committee | Public Health Committee                                                                                                                                                                   |



## World Dental Development Fund

### Project goal

To support country-level efforts to improve oral health, primarily through establishing innovative prevention and access programmes in disadvantaged populations. The World Development Fund (WDDF) projects reflect the core values and principles of FDI.

<https://www.fdiworlddental.org/world-dental-development-fund>



### Project progress and achievements

During WDC 2025, Public Health Committee selected the following winners for project implementation in 2026:

- **NOMALnutrition** is a project in Oyo State, Nigeria, that integrates oral health into existing nutrition programmes serving vulnerable populations. Working with six local organizations, it provides oral health education, screening, and treatment alongside nutrition interventions for around 500 beneficiaries each month. The project focuses on preventing and identifying Noma and other oral diseases by training nutrition officers and distributing oral hygiene kits. By embedding oral health within established community programmes, it aims to achieve sustainable integration and expand access to care over the long term.
- **Integrating preventive oral health into the Chamas for Change Programme:** this pilot project in Bungoma County, Kenya, integrates preventive oral health education and care into the existing Chamas for Change programme, which supports maternal and child health. It will reach 300 pregnant women, 300 young children, and train 30 Community Health Promoters to deliver oral health education and basic preventive care. Focusing on the critical first 1,000 days of life, the project aims to improve oral health outcomes for mothers and children. The pilot will evaluate the feasibility and scalability of using the trusted Chamas platform to deliver integrated community-based oral healthcare.
- **Strengthening oral health awareness through dental therapist students in Tanzania:** this project aims to improve oral health awareness and access to care for 3,000 children across three regions of Tanzania through school-based education, screenings, and treatment. It will also train 90 final-year dental therapist students in community outreach, leadership, and preventive care. At least 600 children will receive free dental treatment through student-led field activities. By integrating outreach into dental training programmes and establishing school oral health clubs, the project seeks to build sustainable community-based oral healthcare and strengthen the future oral health workforce.

### Next steps

- The 2027 winners will be selected during WDC 2026 and announced in October.

### Project stakeholders

| Stakeholder type    | Name/Composition                                                                                                                                                                                   |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Corporate partner   | Shofu                                                                                                                                                                                              |
| Reviewers           | Public Health Committee reviewers: <ul style="list-style-type: none"> <li>• Prof. Elizabeth Shick (Vice Chair)</li> <li>• Prof. Islam Tarek Abbas Hassan</li> <li>• Prof. Youn-Hee Choi</li> </ul> |
| Oversight committee | Public Health Committee                                                                                                                                                                            |

## FDI funded projects

The Public Health, Advocacy and Communications team support the coordination of the Policy Statements, as well as the following projects, which are overseen by the standing committees and outlined in their respective reports:

### Dental Practice Committee

- DIY dentistry
- Illegal dental practice
- Oral health and STDs
- Violence in the Dental Practice

### Public Health Committee

- Refugee Oral Health Promotion and Care
- World Dental Development Fund
- Smile Grant

### Science Committee

- E-cigarettes and vaping
- Preventing Antimicrobial Resistance and Infections
- Osteonecrosis of the Jaw

# Advocacy and Communications Report

## General Assembly 2026

This report summarizes all the activities undertaken since the General Assembly (GA) report of September 2025 through June 2026.

### Implementation of FDI's advocacy strategy

The implementation of FDI's advocacy strategy is guided by the Advocacy Working Group and the Vision 2030 Implementation and Monitoring Expert Group (IMEG). As one of the three pillars of FDI's Strategic Plan (2024–2027), advocacy remains central to FDI's efforts to respond to a rapidly evolving policy environment, including growing government interest in oral health. The 2025–2027 strategy, now in its implementation phase, aligns relevant policy developments with the Vision 2030 pillars to identify opportunities for progress. It sets out key goals for the three-year period and is supported by annual workplans developed under the leadership of the V2030 IMEG.

Key achievements included securing the inclusion of oral health in the HLM4 Political Declaration and successfully advocating for the postponement of the dental amalgam phase-out date from 2030 to 2034. These outcomes strengthened FDI's position as a leading global voice for oral health and created important momentum for continued policy engagement. In this context, IMEG developed a workplan to build on these successes in 2026.

The main developments since the last GA are highlighted below.

### Driving Vision 2030

#### Vision 2030 Implementation and Monitoring Expert Group welcomed two new experts

Two new experts, Dr Dympna Kavanagh and Associate Professor Ankur Singh, were approved by Council and joined IMEG in September 2025.

Dr Kavanagh is currently the Chief Dental Officer in the Department of Health, Ireland. She is the Chair of the Platform for Better Oral Health in Europe and the immediate Past President of the Council of European Chief Dental Officers.

Dr Ankur Singh is an internationally recognized expert in oral health inequalities and public health policy. He is the Chair of Lifespan Oral Health at the University of Sydney and an Australian Research Council Discovery Early Career Researcher Award (DECRA) fellow.

The addition of new members to IMEG is part of FDI's efforts to sustain the recognition of oral health as a key element of the global non-communicable disease (NCD) agenda, while addressing existing priorities and emerging advocacy needs as the world adjusts to a significantly less funded global health agenda.

#### Vision 2030 at the midway mark: survey insights shaping the road ahead

Vision 2030 remains a cornerstone of FDI's advocacy strategy, and 2025 marked a critical midpoint for assessing advancement toward its goals. The Vision 2030 Mid-Term Survey gathered insights from our National Dental Associations (NDAs) to provide a global benchmark of progress. It covered key themes aligned with the World Health Organization's Global Oral Health Strategy and Action Plan, including governance, financing, service integration, risk factors, surveillance, and stewardship.

The survey was conducted online in English, French, and Spanish and received 88 responses.

### Survey participation overview

The table below summarizes the survey responses received by region. It also shows the total number of countries in each region and the corresponding response rate.

| Region        | Total no. of countries with NDAs in the region | Total no. of responding countries | Response rate |
|---------------|------------------------------------------------|-----------------------------------|---------------|
| Africa        | 29                                             | 15                                | 51.7%         |
| Asia Pacific  | 36                                             | 15                                | 41.7%         |
| Europe        | 48                                             | 39                                | 81.3%         |
| Latin America | 13                                             | 13                                | 100.0%        |
| North America | 6                                              | 6                                 | 100.0%        |

### Key findings

The topline survey results are available on the GA webpage, but some of the key findings are summarized below.

The results showed growing commitment but uneven implementation. Many countries strengthened governance structures and policy frameworks; however, translating these into accessible, publicly available, and integrated actions remained inconsistent. Financing continued to lag, particularly for preventive care, with significant disparities in coverage models and strong regional variation. While service delivery at the primary care level was widely available, enabling policies and workforce distribution did not always support equitable access, particularly for rural and vulnerable populations. Encouraging progress was observed in risk factor policies, clinical prevention measures, and global commitments such as the phase-out of dental amalgam, although these efforts were often under-resourced or unevenly implemented. At the same time, gaps persisted in data systems, digital integration, and antimicrobial stewardship, highlighting that while momentum towards Vision 2030 was evident, systemic capacity and equity remained key challenges.

## Collaboration with the Vision 2030 Industry Action Group on oral health in the workplace

FDI published its [Oral Health at Work](#) report to spotlight oral health as a critical yet often overlooked driver of workforce health, productivity and economic participation. The report was officially launched at a high-level side event during the 79th World Health Assembly (WHA79), in collaboration with the Governments of the Republic of Ireland, the Republic of Mauritius and Malaysia. Developed with support from the Vision 2030 Industry Action Group, the report highlights the importance of integrating oral health into workplace health and well-being strategies, outlining opportunities for employers, insurers and policymakers to foster healthier, more productive workforces through stronger cross-sector collaboration.

Drawing on policy analysis, literature reviews, case studies and stakeholder interviews, it identifies emerging implementation pathways and offers evidence-based, context-specific recommendations. Workplace oral health will be embedded within FDI's advocacy strategy to ensure its transition the report's recommendations are translated into action. Read the [press release](#) and access the [report here](#).

## Sessions at FDI's World Dental Congress

- **Understanding and addressing the determinants of oral health for realising Vision 2030 and UHC**  
5 September, 15:30 to 17:00
- **Towards sustainable dentistry: global best practices for phasing out dental amalgam by 2034**  
7 September, 16:30 to 18:00

Full details on the speakers and programme is available [here](#).

## Advancing oral health through global health platforms

### The 4th United Nations High-Level Meeting on the Prevention and Control of Non-Communicable Diseases (NCDs) and the Promotion of Mental Health and Well-being (HLM4)

The Fourth High-level Meeting of the United Nations General Assembly on the Prevention and Control of NCDs and the Promotion of Mental Health and Well-being (HLM4) took place on Thursday, 25 September 2025, in New York, USA. After more than a year of preparation, planning, and advocacy, FDI participated in this critical meeting to strengthen political commitment to the global oral health agenda. Throughout the High-Level meeting week, the FDI President, supported by the team, engaged closely with government representatives, the NCD Alliance, partners and other key stakeholders to ensure that oral health remained high on the global health agenda, further strengthening FDI's visibility and advocacy efforts on the global stage.

The Political Declaration of HLM4 was adopted with overwhelming support on 15 December 2025. FDI is proud to report that its sustained advocacy efforts, carried out in collaboration with partners over more than a decade, have paid off. For the first time in a UN meeting on NCDs, oral diseases were explicitly referenced in the Political Declaration, appearing in both the preambular (pages 2 and 6) and operative (pages 10 and 11) sections. This marked a historic milestone for the global oral health community and a major step forward in securing recognition of oral health as an integral part of the NCD agenda. [Read about the meeting's outcome and the impact of FDI's advocacy.](#)

### Joint advocacy ensures extension of global phase-out date from 2030 to 2034 and inclusion of key exemption

The Sixth meeting of the Conference of the Parties to the Minamata Convention on Mercury (COP-6) took place from 3 to 7 November 2025 in Geneva, Switzerland. At this meeting, participants reviewed progress since COP-5, and negotiated further measures to reduce mercury use and emissions globally. FDI has supported the Minamata Convention on Mercury since its inception in 2017 and participated in COP-6 to ensure that the needs of members and the communities they serve are taken into consideration for relevant policy discussions.

A landmark decision was reached at COP-6 where Parties agreed to set 2034 as the global phase-out date after which the manufacture, import, or export of dental amalgam will no longer be permitted. The final decision included a key exemption that ensured that even after phase-out of dental amalgam it can be used "when its use is considered necessary by the dental practitioner based on the needs of the patient."

The decision gives Parties nine years to adapt their national strategies and healthcare systems to this new framework. This aligns closely with FDI and IADR's long-standing position advocating for a coordinated and equity-focused phase-down that allows all countries, especially low- and middle-income nations, to strengthen capacity, build technical expertise, and ensure continuity of patient care during the transition. [Read the press release on the COP-6 Decision on dental amalgam.](#)

### FDI participates in the eleventh session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control

The 11th Conference of the Parties (COP-11) to the WHO Framework Convention on Tobacco Control (WHO FCTC) convened in Geneva from 17–22 November to review progress and strengthen implementation of both the Convention and its Protocol. Delegates from governments, international organizations, and civil society, including FDI examined a broad set of measures aimed at reducing tobacco use and addressing the environmental harms caused by tobacco production, consumption, and waste.

Parties also reviewed 20 years of progress under the WHO FCTC, the first treaty ever negotiated under the auspices of the WHO. FDI has engaged with the WHO FCTC since its adoption in 2005 and continues to support its implementation

through advocacy and capacity building programmes delivered to build the capacity of its members to deliver tobacco cessation interventions.

On Friday, 21 November, FDI co-organized a joint side event with the NCD Alliance titled “Strengthening Tobacco Control to Achieve SDG 3.4 on NCDs: A Global Imperative”. The session brought together Parties, non-Party States, parliamentarians, civil society, and international partners to examine how strengthened implementation of the WHO FCTC can accelerate progress toward the NCD-related Sustainable Development Goals and help fulfil the political commitments made at HLM4.

This high-level dialogue featured interventions from a Member of Parliament of Ghana and Mexico’s Representative to WHO. FDI was represented by Asst. Prof. Simona Dianišková, Vice-Chair of FDI’s Public Health Committee and member of the tobacco cessation expert group. She highlighted the impact of FDI’s tobacco cessation workshop programme, which has been implemented across 18 countries and territories, reaching over 1,100 oral health professionals, over the past five years. In her remarks, she encouraged governments to formally endorse and scale up FDI’s tobacco cessation workshops, and to work closely with NDAs and other health professional bodies to expand access to evidence-based cessation services across all levels of the health system.

At COP-11, Parties adopted several significant decisions to advance global tobacco control. These included commitments to forward-looking regulatory measures and actions related to holding the tobacco industry financially liable for the harm it causes to health and the environment. Parties were also encouraged to consider comprehensive regulatory frameworks for new and emerging nicotine and tobacco products, which continue to pose challenges for tobacco control efforts worldwide. COP-11 attracted a record number over 1,600 registrations, demonstrating growing global engagement and political interest in tobacco control.

## Aligned responses to the European Chemicals Agency’s public consultation on the harmonized classification of sodium fluoride

The European Chemicals Agency (ECHA) opened a [public consultation](#) (17 November 2025–16 January 2026) on the proposed harmonized classification and labelling of sodium fluoride under EU chemicals legislation. This followed the [submission of a dossier by ANSES, France](#) that proposed new hazard categories, including reproductive toxicity and endocrine disruption. If adopted, reclassification could have significant regulatory consequences for products containing sodium fluoride, including those used in oral healthcare, raising important public health considerations given fluoride’s proven role in preventing dental caries.

FDI, through its [Dental Materials & Products Surveillance Task Team](#), led a science-based submission for the consultation. IADR also responded and shared its response in advance with FDI so that both organizations could align on core scientific messages while reflecting their distinct mandates.

The consultation drew broad engagement from across the oral health and public health community, including WHO, the Platform for Better Oral Health in Europe, the Alliance for a Cavity-Free Future, the European Association of Dental Public Health, Cochrane Oral Health, the British Association for the Study of Community Dentistry and others. Member States such as the Netherlands, Germany and the Ministry of Health, Ireland, as well as industry associations also responded to the consultation. This mobilization underscores the importance of unified, evidence-based advocacy to safeguard access to essential, preventive tools in global oral health. FDI will continue to monitor this process to ensure the views and perspectives of its membership are heard.

- Learn more about the sodium fluoride registry of classification and labelling (CLH) process [here](#).
- Explore the comments received during the consultation [here](#) as well as the attachments [here](#).

## 158th Session of the WHO Executive Board

The [Executive Board of the World Health Organization](#) is a key decision-making forum where global health priorities are debated, negotiated and advanced. The [158th session of the WHO Executive Board \(EB158\)](#) was held in Geneva, Switzerland, from 2–6 February 2026. The meeting brought together Member States, observers from UN agencies, and



non-State actors, including professional associations, academic institutions, civil society organizations and philanthropic foundations. The WHO Secretariat provided technical briefings, progress reports and clarification to inform deliberations.

Over five days, participants examined 53 agenda items covering NCDs and mental health, neglected tropical diseases, antimicrobial resistance (AMR), universal health coverage (UHC) and primary health care. FDI leveraged EB158 as a strategic platform to advance urgent oral health priorities during multiple debates, including follow-up to the political declaration on the HLM4 and PHC. To learn more FDI's contributions, impact and the meeting's key outcomes, read the [EB158 news story](#).

## 79th World Health Assembly (WHA79)

The 79th World Health Assembly (WHA79), held under the theme “Reshaping global health: a shared responsibility,” addressed a broad range of priority areas spanning global health architecture reform, preparedness and response to health emergencies, the provision and promotion of health to advance UHC and overall well-being.

FDI engaged strategically across a range of agenda items, including NCDs, primary health care, immunization, well-being and health promotion, and health workforce. In its interventions, FDI highlighted the importance of integrating oral health into broader health frameworks and strengthening collaboration between oral health professionals and other health workers to address key areas such as AMR, tobacco control, and HPV-related conditions, while also promoting the inclusion of oral health in workplace well-being strategies. Read FDI's recap of WHA79 [here](#).

## 2026 High-level Meeting on HIV/AIDS

The High-Level Meeting on HIV/AIDS was held on 22–23 June 2026 in New York, marking an important milestone to review progress since 2021 and set renewed global commitments to end AIDS as a public health threat by 2030.

Oral diseases are among the earliest signs of HIV infection and continue to be one of the most unmet needs for people living with HIV. Individuals living with HIV are also at higher risk of conditions such as persistent HPV infection and related cancers, including oropharyngeal cancer. Integrating oral health into HIV responses can expand access to care, support early diagnosis, reduce stigma and strengthen community-based services, making it a practical and essential step toward more equitable and effective HIV care.

FDI continued to advocate for the inclusion of oral health in this critical global conversation. As part of the preparatory process, a multistakeholder hearing held on 14 May 2026 provided a platform for civil society, communities and partners to help shape the Political Declaration by putting forward priorities for inclusion. At Panel 4 on community leadership and inclusive governance, FDI and IADR called on Member States to integrate oral health into HIV and primary healthcare programmes, engage oral health professionals in governance, and invest in inclusive, community-led approaches to care. Read the IADR-FDI joint statement [here](#).

## Working in partnership

### FDI to co-lead advocacy in newly launched WHO Global Coalition on Oral Health

The WHO Global Coalition on Oral Health was officially launched during WHA79. First announced at the WHO Global Oral Health Meeting in Bangkok in November 2024, the Coalition is a collaborative platform designed to support countries in implementing [the Global Strategy and Action Plan on Oral Health \(2023–2030\)](#) and advancing progress towards UHC.

Built on a country-led, partner-supported and WHO-facilitated approach, the Coalition is structured around two core workstreams: Advocacy and Knowledge translation. The advocacy workstream aims to develop a unified, evidence-informed narrative to position oral health within NCD and UHC agendas and support national policy action. In parallel, the knowledge translation workstream focuses on turning evidence into practical, policy-relevant solutions through tools, case studies and the sharing of country experiences. FDI is confirmed to be the co-lead of the advocacy workstream

together with Global Self Care Federation (GSCF), Fondation Université de Montpellier, and WHO Collaborating Centre at University College London.

At the Coalition launch event, FDI President Asst. Prof. Dr Nikolai Sharkov highlighted the importance of moving from fragmented efforts to more coordinated action. He underscored how FDI and its members can support countries in advancing implementation and outlined key indicators of success for the Coalition in both the short and long term, reinforcing the role of partnerships in driving measurable progress in global oral health.

Explore the [Global Coalition on Oral Health: From pledge to action on UHC for oral health | Knowledge Action Portal on NCDs](#)

## World Health Professions Alliance webinar on AMR

The World Health Professions Alliance ([WHPA](#)) brings together the global organizations representing the world's dentists, nurses, pharmacists, physical therapists and physicians and speaks for 47 million health care professionals in 179 countries. WHPA works to improve global health and the quality of patient care and facilitates collaboration among health professions and major stakeholders.

People living with NCDs are more vulnerable to drug-resistant infections and often have higher exposure to antimicrobials. Given the diversity of NCD-related health settings and specialities, it is vitally important to improve AMR stewardship and continuity of care across the professions. FDI participated in the WHPA webinar on AMR hosted during [World AMR Awareness Week](#) (WAAW) 2025 on 20 November. The WHPA webinar built on the discussions and outcomes of HLM4, and speakers from the five main health professions discussed how interprofessional collaboration can be a key tool to respond to AMR and NCDs. [Watch the webinar recording](#)

## 2026 IADR/AADOCR/CADR General Session & Exhibition

At the 2026 IADR/AADOCR/CADR General Session & Exhibition in San Diego, USA, FDI and IADR co-hosted a joint session on 26 March titled "Empowering Dental Education for Advocacy: building the next generation of oral health champions." The session brought together leaders from academia, professional associations and the student community to explore how advocacy can be embedded within dental education. Discussions focused on aligning dental education with the global oral health agenda, strengthening policy awareness among future practitioners, and the need for a more structured approach to embedding advocacy in curricula, with dental schools positioned as key platforms to bridge research, policy and practice.

During the panel discussion, FDI Executive Director Enzo Bondioni highlighted the progress made in elevating oral health on the global policy agenda in recent years, alongside the persistent gap between commitments and implementation. He stressed the scale of unmet oral health needs and the importance of sustained advocacy to accelerate progress towards universal health coverage (UHC) and the integration of oral health into NCD prevention, primary health care systems, and broader health responses.



## World Oral Health Day 2026

The World Oral Health Day (WOHD) 2026 campaign marked the third and final chapter of the 2024–2026 cycle under the unifying tagline “A Happy Mouth Is...”.

Introduced in 2024, the campaign aimed to inspire lasting, positive change by highlighting the vital role oral health plays in living a healthier and happier life.

Each year of the campaign has focused on a different dimension of oral health, aligning with global health priorities and building on the momentum of the WHO Oral Health Resolution adopted in 2021:

2024: “A Happy Mouth Is a Happy Body” — highlighting the strong link between oral health and overall health.

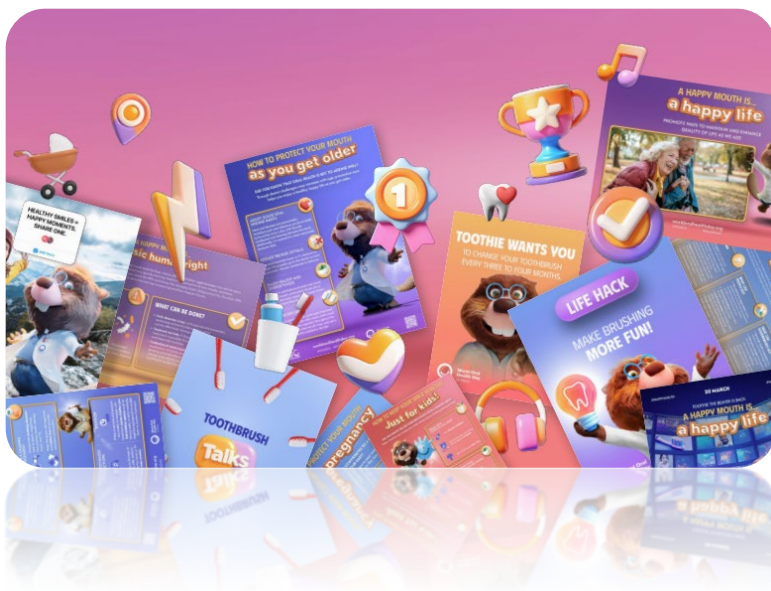
2025: “A Happy Mouth Is a Happy Mind” — emphasizing oral health’s impact on mental well-being.

2026: “A Happy Mouth Is... A Happy Life” — bringing these messages together to show how oral health supports wellbeing at every age and stage of life.

As the culmination of the three-year cycle, WOHD 2026 brought these themes together with one clear message: oral health is essential to living life to the fullest. A healthy mouth is the gateway to a healthy, happy life.

In 2026, the creative approach once again featured Toothie in the final instalment of this movie-style campaign. This time, a brand-new song drove the message forward, teasing audiences with the release of an exciting new campaign movie, “*A Happy Mouth Is a Happy Life*,” which highlighted how good oral health supports living life to the fullest for everyone, everywhere, regardless of age, income or where they live.

The 2026 WOHD campaign continued to be driven by the new 2024–2026 campaign strategy, with the following goals:



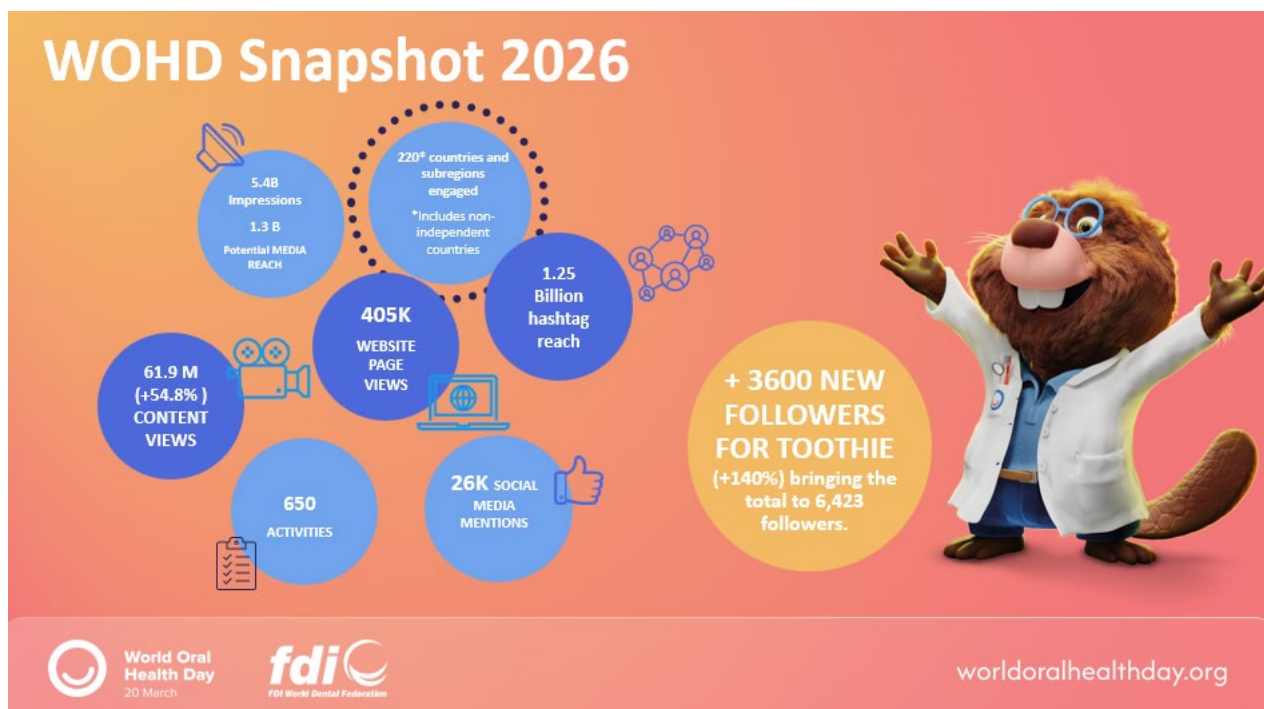
| WOHD campaign goals to achieve by 2026    |                                                                                                                                                                       |
|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. Amplified inclusive advocacy</b>    | World Oral Health Day is more inclusive and includes the voice of people living with oral health conditions.                                                          |
| <b>2. Worldwide members' celebration</b>  | Every FDI member association celebrates World Oral Health Day.                                                                                                        |
| <b>3. Amplified corporate impact</b>      | Every World Oral Health Day corporate partner/supporter drives oral health awareness through integration within employee education or workplace wellness initiatives. |
| <b>4. Global ambassador network</b>       | FDI has an established network of KOLs & Digital/Influencers which helps to drive oral health awareness and extends the campaign reach at a global level.             |
| <b>5. Expanded collaborative outreach</b> | Partners from the wider non-communicable disease and health professions communities actively roll out World Oral Health Day.                                          |

The campaign strategy is developed under the leadership of the [WOHD Working Group](#). All the material and resources produced can be viewed through the campaign website: [www.worldoralhealthday.org](http://www.worldoralhealthday.org)

## The final chapter of “A Happy Mouth Is a Happy Life” inspires action worldwide

Over the past three years, FDI has received tremendous support from people around the world who have helped amplify the WOHD messages. Building on the strong engagement generated throughout this campaign cycle, the third and final year of “A Happy Mouth Is a Happy Life” delivered significant global impact.

Some key results and highlights from the 2026 campaign are shared below.



### Goal 1: Amplified inclusive advocacy

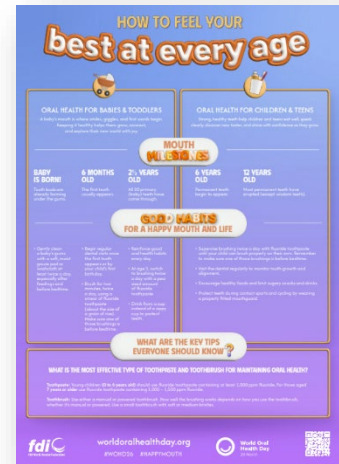
In 2026, FDI repurposed the resources developed and promoted in 2024 and 2025, which included the voices of individuals living with oral health conditions, to continue supporting WOHD's goal of amplifying inclusive advocacy. As in the previous year, Advocacy in Action cards were created, reflecting the work of various FDI projects, with each card linked to its dedicated project webpage. One card focused specifically on the importance of caring for your mouth at every stage of life, aligning with the 2026 campaign's message that good oral health supports a healthier, happier life.

1. [Promoting oral health and oral disease prevention for people with clefts](#) (Oral Health in Comprehensive Cleft Care)
2. [Promoting access to oral care for refugees](#) (Refugee Oral Health Promotion and Care)
3. [Raising awareness about Noma to save lives](#) (FDI Policy Statement: Noma – eradicating a preventable disease to save lives)
4. [Increasing awareness of how living tobacco-free benefits oral health, overall health and quality of life](#) (Tobacco or Oral Health)
5. [Raising awareness of the health benefits of reducing sugar consumption](#) (Two risk factors too many diseases)
6. [Increasing awareness of the importance of gum health](#) (Global Periodontal Health Project)
7. [Empowering everyone, everywhere to improve their oral health](#) (Whole Mouth Health)

8. [Raising awareness of the mouth-body-mind connection](#) (Whole Body Health)
9. [Promote ways to maintain and enhance quality of life as we age](#) (Oral Health for an Ageing Population)
10. [Promoting sports dentistry for better oral health outcomes](#) (Sports Dentistry)
11. [Raising awareness of caring for your mouth at every age](#) (Oral health – lifetime approach)
12. [Promoting mental health and well-being in the dental workplace](#) (Mental health and Well-being in dentistry)

In addition, a new factsheet was developed to provide practical tips for maintaining good oral health and feeling your best at every stage of life, in line with the campaign theme.

To further our goal of inclusivity, FDI continued to provide people with the option to swiftly and easily create some of the campaign materials online. They could then translate these materials into their own language using either the custom ['Happy Mouth' tool](#) or templates available on Canva.



These resources were shared widely with WOHD stakeholders so that they could help support dissemination efforts among their networks. In total, FDI counted a total of 79,000 download events on the website from September 2025 to March 2026, representing a 43% increase from the previous year.

## Goal 2: Worldwide members' celebration



In line with FDI's commitment to encouraging every member association to celebrate WOHD, FDI maintained regular communication with members throughout the campaign period. This included updates through the Member Liaison and Support Committee, targeted mailings, and information on key campaign milestones and available resources. Member associations played a central role in extending the global reach and impact of the campaign.

Reflecting the campaign's call for a multisectoral response to the burden of oral diseases and building on the success of the previous two years' WOHD webinars, FDI hosted a third webinar this year through the Oral Health Campus platform to further enhance the campaign's visibility and accessibility. The session provided an opportunity to explore the campaign's key messages in greater depth and empower a diverse audience to raise awareness of the importance of good oral health. Open to both FDI members and the wider public, the event encouraged broad participation.

Around 650 people registered with more than 300 attending live. The webinar is still available on demand:

<https://www.fdioralhealthcampus.org/webinar/world-oral-health-day-2026-a-happy-mouth-is-a-happy-life-insights-and-how-to-get-involved/>

Members were notably active this year, as demonstrated by the large number of activities reported on the WOHD map and strong engagement on social media. To date, around 650 activities have been recorded, over 50 more than last year, highlighting the enthusiasm and commitment of our members.

### Goal 3: Amplified corporate impact

Haleon, Solventum, Smile Train and Dentsply Sirona played an active role in promoting the 2026 campaign, helping to extend the reach of WOHD messages to broader audiences worldwide. Their continued collaboration as key partners was supported by a joint activation plan that highlighted shared priorities and aligned messaging. We greatly appreciated their ongoing commitment, which helped build momentum for the final year of the “A Happy Mouth Is a Happy Life” campaign and further strengthened its global impact.

**Haleon** once again demonstrated its commitment to improving everyday health through prevention, education and increased access to care. Across Africa, Asia, Europe and the Middle East, Haleon teams delivered a wide range of initiatives, including awareness campaigns on dentine hypersensitivity, mobile dental services, free oral health screenings and educational programmes. Notable initiatives included the expansion of the Sensodyne Smile Bank convoys in Egypt, which have already reached more than 365,000 people, and the launch of Ngiting Tagumpay (“Smile of Success”) in the Philippines, providing free consultations, oral health education and 1,500 dentures to people in need.

**Solventum**, in partnership with the Chinese Stomatological Association (CSA), delivered a dynamic WOHD activation in Chongqing, China, bringing together teachers, students, parents, officials and advocates to champion prevention and lifelong oral health habits. The initiative generated strong national momentum, engaging more than 27 media outlets, reaching over 4.85 million people online and securing dedicated coverage on CCTV and CGTN French.

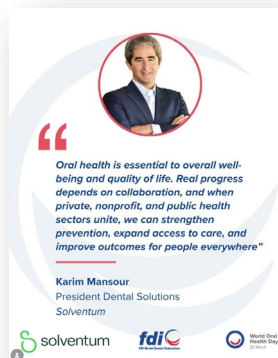
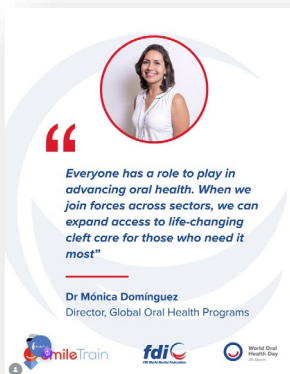
**Smile Train** launched a dedicated digital campaign from 14–20 March, culminating in the global rollout of #ShowYourSmile2026. Through collaborative content and powerful patient stories, the campaign highlighted the importance of comprehensive cleft care and reinforced the message that oral health is essential to confidence, communication and quality of life. The campaign generated more than 3.1 million impressions, 7,600 engagements and over 323,000 video views across social media platforms.

**Dentsply Sirona** marked its fifth year supporting WOHD by continuing to champion oral health as an essential component of overall health and well-being. Through strategic partnerships, social media outreach and community-based initiatives, the company helped raise awareness of oral health as a global priority and encouraged dental professionals to support lifelong oral health habits. Local activations included a collaboration with TeamSmile in Charlotte, North Carolina, which provided oral health education to children, while internal engagement activities mobilised Dentsply Sirona’s nearly 15,000 employees worldwide.

In addition, as every year, the FDI team worked closely with partners on a [joint media release](#) featuring quotes from partner leadership alongside statements from FDI leadership, including the FDI President and the Chair of the WOHD Working Group. The media outreach generated a potential reach of 1.3 billion. Key messages and quotes from each partner were also repurposed across social media channels to further amplify the campaign’s impact.







## Goal 4: Global ambassador network

In line with the WOHD goal of having an established network of key opinion leaders (KOLs) & digital/influencers to help drive oral health awareness, FDI continued to leverage its connections to help extend the campaign reach at a global level.

### FDI Leadership as WOHD Ambassadors

FDI leadership played an important role in amplifying World Oral Health Day messages globally through active participation in national and local events. On 20 March, FDI President Asst. Prof. Dr Nikolai Sharkov joined the Chinese Stomatological Association (CSA) in Chongqing, China, for the launch of the 2026 WOHD campaign.

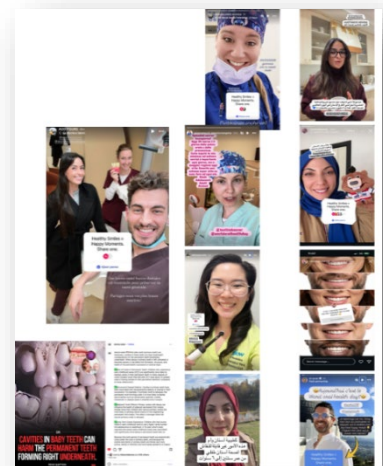
Held under the theme “A Happy Mouth is a Happy Life,” the event focused on promoting oral health among children and adolescents and integrating oral health awareness into schools, families and communities. Asst. Prof. Dr Sharkov delivered remarks during the official ceremony alongside representatives from national and local health and education authorities, CSA leadership and public health experts.



Supported by Solventum China and the Affiliated Stomatological Hospital of Chongqing Medical University, the event engaged more than 800 students through oral health education activities and free consultations delivered by leading oral health experts.

### Influence in action

In 2026, FDI **partnered with 16 influencers across 6 regions**, the campaign generated **1.6M reach, 12M impressions, 36.7K engagements, and 1.2M video views**, demonstrating global coverage and consistent content delivery. While total reach and engagement are lower than the 2025 peak, the 2026 campaign **outperformed 2024 across key KPIs**, including number of influencers, reach, engagements, and video views.



## Goal 5: Expanded collaborative outreach

### Social media

FDI was pleased to see that the social media buzz surrounding WOHD remained strong across multiple platforms on 20 March. A wide range of stakeholders took part, including FDI members, leadership, WHO, Chief Dental Officers, hospitals, educators, media outlets, partners, sister organizations, and governments, to name just a few.

The WOHD26 campaign delivered a strong and well-rounded performance across all key indicators, demonstrating success not only in reach and visibility, but also in the depth of audience response.

Content views rose from 40 million in 2025 to 61.9 million, representing an increase of more than 20 million views, while engagement also climbed from 6 million to 7.6 million. Reach expanded substantially as well, with hashtag reach totaling 1.25 billion compared to 1.1 billion the year before.

Perhaps more importantly, the qualitative metrics of the campaign showed that the content strategy was highly effective in driving meaningful audience response, not just reach and visibility.

The strength of the campaign is even clearer when looking at performance efficiency and content quality. Measured against total views, the campaign achieved an overall 15% engagement rate, meaning roughly 15 out of every 100 viewers took an action to engage, a result that is notably strong against typical platform benchmarks, particularly for health related communications content. The numbers show that the campaign's content was not only widely seen, but also effective at converting audience attention into active interaction. This gives us a strong qualitative indicator of performance and a clear view of how successfully the creative strategy resonated with audiences.

Toothie's Instagram following grew by 3,600 in less than three months, compared with 1,500 new followers during WOHD25, providing another clear indicator of year-on-year momentum and campaign impact. Taken together, these results reinforce the overall picture of a highly successful campaign.

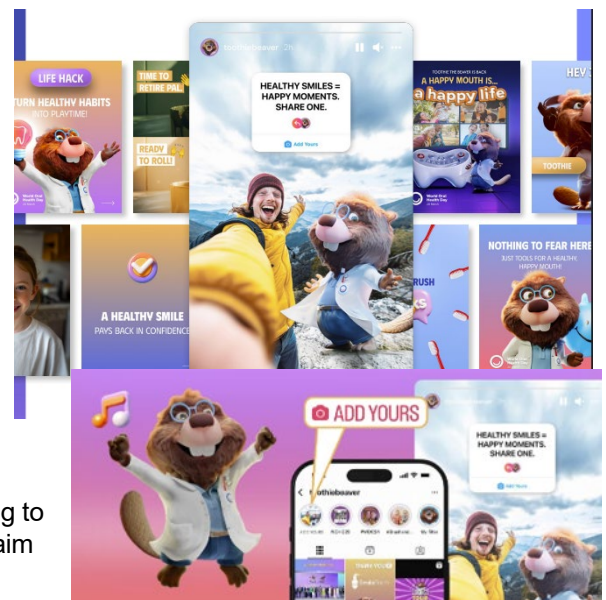
### Campaign song and "Add yours" sticker activation

A key takeaway from recent years is that social media users increasingly prefer low-effort forms of engagement. As platforms continue to evolve into entertainment-driven spaces, people are more likely to consume content passively than actively participate. This highlights the importance of designing future calls to action (CTAs) that are simple, intuitive and aligned with platform features that users already know and enjoy.

With this in mind, this year's digital CTA invited supporters around the world to help create a record-breaking chain of happy moments using Instagram's popular "Add Yours" sticker. Whether it was a snapshot of family life, a confident smile before a big moment or a joyful celebration with loved ones, participants helped demonstrate how a happy mouth supports a happy life at every stage.

The activation also encouraged participants to add the campaign song to their Instagram Stories when sharing their happy moments, with the aim of inspiring user-generated content and creative expression.

While the activation did not go viral as hoped, we were delighted to see the campaign song embraced at events and activities around the world, with many participants singing along or sharing it on social media. More than 200 users engaged with the "Add Yours" sticker, over 300 Instagram Reels featured the song, and the main campaign video generated 23 million views.



### Continued support from WHO and health professions community

Several governments actively participated in spreading the campaign message, including with ministries of health and public authorities using WOHD as a platform to promote prevention and strengthen oral health awareness. In China, representatives from the National Health Commission and local health and education authorities joined FDI leadership at the official WOHD launch event in Chongqing. [Saudi Arabia's Ministry of Health](#) marked the day through a dedicated awareness campaign, while [Ireland's Department of Health](#) shared key prevention messages through its social media channels. [Ghana Health Service](#) also organized nationwide activities and strategic partnerships to promote oral health.

The World Health Organization (WHO) further amplified WOHD through its headquarters, regional offices and country-level channels. WHO communications highlighted the importance of implementing the Global Oral Health Action Plan and integrating oral health into broader health agendas. To mark the day, [WHO hosted a global webinar](#) to launch its new guideline on environmentally friendly and less invasive oral health care for preventing and managing dental caries, while the WHO Regional Office for the [Western Pacific organized a dedicated webinar](#) on integrating oral health into primary health care.

Notably, [WHO Regional Director for Africa, Dr Mohamed Janabi](#), issued a dedicated WOHD message aligned with the campaign theme, calling on governments, partners, academia and civil society to accelerate implementation of national oral health strategies, strengthen workforce capacity and expand access to essential oral health services across the region.



## Next steps and WOHD 2026-2027 strategy

As 2026 marked the final year of the three-year “*A Happy Mouth Is...*” campaign cycle, FDI initiated a research process to inform the strategic direction of the next World Oral Health Day (WOHD) campaign.

The objective of the research was to gather qualitative insights from key stakeholder groups, including the WOHD Working Group, Member National Dental Associations (NDAs), partners and the FDI team, to identify future messaging priorities, emerging oral health issues, preferred creative approaches and opportunities to strengthen campaign participation and impact.

Consultations explored a range of topics, including potential campaign themes, action-oriented messaging, the role of personal storytelling, digital engagement strategies, toolkit effectiveness and approaches to increasing stakeholder ownership and amplification.

A total of 19 NDAs were selected for consultation based on campaign engagement data, membership size and the need to ensure broad geographic representation. Insights gathered from these consultations, together with learnings from the past three years of campaign implementation, have played a critical role in shaping the next phase of WOHD.

The research phase has now concluded, and a new three-year campaign platform and overarching creative concept have been approved by the WOHD Working Group. The FDI team and agency are currently refining the campaign strategy, messaging framework and creative approach ahead of the official launch at the FDI World Dental Congress, where the new campaign theme and supporting resources will be unveiled.



## Communications strategy

In 2025, **a new communications strategy 2026–2028 was developed**, as the previous version dated back to 2016. With the introduction of FDI's 2024–2027 organizational strategy and significant changes in the global health landscape over the past decade, a renewed and aligned approach was required.

The updated strategy aligns messaging and outputs with FDI's organizational priorities and introduces measurable objectives and key performance indicators (KPIs) to monitor progress and inform continuous improvement. It emphasizes targeted, high-impact communications to deepen audience engagement and strengthen stakeholder value, while clarifying roles, goals and workflows across teams.

The strategy also ensures greater consistency and coherence across platforms, initiatives and activities.

Three overarching communications goals have been defined for the 2026–2028 period. These are based on insights from the internal SWOT analysis and aligned with FDI's strategic plan, focusing on areas with the greatest potential to strengthen overall communications effectiveness:

| GOAL 1                                                                                                                                           | GOAL 2                                                                                                                                                  | GOAL 3                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Position FDI as the leading and trusted global authority on oral health and highlight its vital role in advancing overall health and well-being. | Develop and implement a comprehensive, integrated media strategy to expand visibility, strengthen message consistency, and enhance audience engagement. | Engage and empower FDI members to amplify the reach, credibility, and impact of unified oral health messages worldwide. |

Implementation of the strategy started in January 2026, marking the transition from planning to delivery and embedding a more coordinated, results-driven communications approach across the organization.

## Social Media Strategy

Building on the Communications Strategy 2026–2028, **a dedicated Social Media Strategy for 2026–2028 has been developed**. The strategy translates the broader communications goals into platform-specific actions aimed at strengthening FDI's visibility, increasing audience engagement, and ensuring greater coherence across digital channels. The strategy was informed by internal analysis, including a social media audit (SWOT), benchmarking, audience insights, and a thorough content analysis, while also taking into account previous research initiatives and current social media trends.

These insights helped identify the types of content and key moments that generate the strongest engagement across platforms and informed the definition of content priorities, as well as the development of clearer SMART (specific, measurable, achievable, realistic and timebound) objectives for each channel and reporting indicators to support a more structured and results-driven approach.

Given the growing volume of content and the need to better coordinate messaging and visual presentation across platforms, the strategy places particular emphasis on improving consistency and structure across FDI's social media presence. It also prioritizes consolidating and optimizing existing channels rather than expanding into new ones, in line with available resources and team capacity.

Key outputs will include the development of an updated and coordinated content calendar, a distribution strategy, and visual guidelines. In addition, new processes, templates, and shared repositories will be created to empower members, partners, and other stakeholders to further amplify key messages through their own channels.



Digital communications

FDI Website

FDI's website continues to serve as a key platform for disseminating essential information and as a central hub for members and stakeholders. Overall website traffic remained relatively stable compared to 2024. In 2025, the digital landscape underwent a fundamental shift with the global rollout of AI-powered search overviews. This technology often provides direct answers to general health queries on the search results page, leading to "zero-click" journeys for many users. While this contributed to a minor 5% adjustment in our total page views, our content is increasingly being recognized by AI systems as trusted source material, extending our reach even before users visit our platform. Other sites have reported decreases in website traffic of up to 20%. User engagement remained strong, with **37,000 resources downloaded** and a solid overall engagement rate recorded throughout the year (50%).

Demographically, the site attracts visitors from around the world, with the USA (10.65%), China (10.17%), India (5.53%), Mexico (5.49%), and Singapore (5.28%) leading the way. A total 61.8% of users access the site on desktop, while 37.1% do so on mobile. The majority of visitors are interested in the conference and events, followed by the members' page, WOHD, and the Sustainability in Dentistry project.

The data collected provides valuable insights into future improvements and communication strategies for the website.

|                  | 2021    | 2022    | 2023    | 2024    | Nov 2025 |
|------------------|---------|---------|---------|---------|----------|
| Website users    | 218,488 | 260,240 | 307,459 | 359,300 | 348,296  |
| Total page views | 580,543 | 563,453 | 615,445 | 686,171 | 636,615  |

WOHD website

The WOHD website continues to provide a wide range of resources to support action, including toolkits, posters, videos, and social media assets. From September 2024 to April 2025, these were **downloaded over 55,000 times** (+37% from 2024), demonstrating strong audience engagement.

While changes in analytics systems mean year-over-year comparisons are not directly equivalent, the continued growth in downloads indicates that users landing on the site were highly engaged and the campaign's reach remains impactful.

|                  | 2021    | 2022    | 2023    | 2024    | 2025    |
|------------------|---------|---------|---------|---------|---------|
| Website users    | 74,467  | 115,096 | 493,606 | 194,762 | 202,150 |
| Total page views | 284,723 | 320,665 | 940,721 | 448,942 | 456,411 |

Social media

To date, in 2025, increases across all FDI social media channels were observed compared to 2024: Facebook: 4.6%; X: 3.6%; LinkedIn: 18%; YouTube: 19.4%; Instagram (WOHD): 10%; Instagram Toothie: 66%; Instagram FDI: 183%.

As in previous years, **LinkedIn continues to be one of our fastest-growing platforms**, but in 2025 it was surpassed by Instagram, which recorded particularly strong growth compared to 2024.

For the Toothie and WOHD accounts, this increase can be attributed to the thousands of engagements generated during the WOHD campaign activation phase, which translated into new followers. Paid investments also performed well and contributed to this momentum.

Growth on the FDI Instagram account was even higher despite lower levels of paid promotion. This suggests that the increased volume of content published throughout the year played a key role, reinforcing the platform's preference for organic reach supported by consistent and regular posting.

| Platform                                   | 2021   | 2022   | 2023   | 2024   | 2025   |
|--------------------------------------------|--------|--------|--------|--------|--------|
| <b>Facebook</b> ( <i>likes</i> )           | 28,106 | 30,051 | 31,321 | 35,000 | 36,616 |
| <b>X (Twitter)</b> ( <i>followers</i> )    | 19,804 | 21,110 | 22,002 | 22,800 | 23,617 |
| <b>LinkedIn</b> ( <i>followers</i> )       | 25,436 | 34,159 | 40,978 | 48,696 | 57,437 |
| <b>YouTube</b> ( <i>subscribers</i> )      | 769    | 1,000  | 1,430  | 1,600  | 1,910  |
| <b>Instagram WOHD</b> ( <i>followers</i> ) | 3,853  | 5,304  | 6,726  | 7,824  | 8,592  |
| <b>Instagram FDI</b>                       | n/a    | n/a    | n/a    | 2,367  | 6,607  |
| <b>Instagram Toothie</b>                   | n/a    | n/a    | n/a    | 3,218  | 3,218  |

## Newsletters and mailings

In 2025, we observed a **steady increase in read rates across all our newsletters**. This positive trend reflects improvements in planning and coordination, with newsletters going out mostly on time and content being carefully curated to match audience interests. The most significant growth has been seen in Advocacy Updates, which increased from 23% in 2021 to 45% in 2025, thanks to the consistent delivery of timely and relevant advocacy news. Similarly, the Congress and Continuing Education Newsletter rose from 18% in 2021 to 37% in 2025, driven by close collaboration with the FDI Congress and Continuing Education team to ensure engaging and high-value content.

|                                               | Read rates by year %                                             |                                     |                             |                                |                                      |
|-----------------------------------------------|------------------------------------------------------------------|-------------------------------------|-----------------------------|--------------------------------|--------------------------------------|
| Newsletter type                               | 2021                                                             | 2022                                | 2023                        | 2024                           | 2025                                 |
| <b>FDI News</b>                               | 25%<br>(Unmanaged list: 12%;<br>managed list (opted in): 38%)    | 28%                                 | 30%<br>(Based on 12 issues) | 28%<br>(Based on 12 issues)    | <b>32%</b><br>(Based on 10 issues)   |
| <b>Letter from the President</b>              | 38%<br>(Based on three issues sent up until the end of November) | 44%<br>(Based on eight issues sent) | 47%<br>(Based on 8 issues)  | 43%<br>(Based on 10 issues)    | <b>45%</b><br>(Based on 11 issues)   |
| <b>Advocacy Update</b>                        | 23%<br>(Based on three issues)                                   | 48%*<br>(Based on three issues)     | 48%<br>(Based on 4 issues)  | 42%<br>(Based on three issues) | <b>45%</b><br>(Based on four issues) |
| <b>Congress and Continuing Education News</b> | 18%<br>(Based on eight issues)                                   | 28%<br>(Based on four issues)       | 31%<br>(Based on 10 issues) | 29%<br>(Based on 12 issues)    | <b>37%</b><br>(Based on 10 issues)   |

**International Dental Journal**

**Report to the General Assembly of the World  
Dental Congress**

*(Reporting Period - September 2025 to June 2026)*

**Prague, Czech Republic**



**Lakshman Samaranayake**

**Editor-in-Chief**

**Hong Kong**

**(Report completed on 1<sup>st</sup> July 2026)**



**International Dental Journal**

## Report to the Council and the General Assembly of the World Dental Congress

Prague, Czech Republic

(Reporting Period - September 2025 to June 2026)

### Executive Summary

This reporting period marks a defining milestone in the 75-year history of the *International Dental Journal (IDJ)*. The Journal has achieved record growth across all major performance indicators, consolidated its position as a Top Quartile (Q1) journal, and entered the top decile/tier (top 10%) of dentistry journals globally. These advances have been accompanied by major strategic publishing innovations, strengthened operational capacity and team work.

### Performance Highlights

- **Impact Factor:** Increased from 3.7 to **5.2** (+45%)
- **Global Ranking:** Now ranked **14<sup>th</sup> of 165** journals in Dentistry, Oral Surgery & Medicine (Clarivate)
- **Top Quartile (Q1):** Maintained in both Clarivate and SCIMAGO rankings
- **Citations:** Increased by **22%**
- **Full-text Downloads:** Increased by **17%** (2024–2025)
- **Manuscript Submissions:** Increased by **94.4%** (1,074 to 2,088; rolling 12 months) (ex-manuscripts referred from other Elsevier peer journals)
- **Record Publications:** 485 articles published in 2025 (+158% from 2024) to reach

### Strategic Developments

- **Artificial Intelligence Leadership:** First mainstream dental journal to formalise AI as a dedicated editorial domain; AI articles show significantly higher citation and download performance.
- **Editorial Capacity Expanded:** 83 editors across six continents, including 15 Associate Editors; Scientific Handling Editors appointed to manage only the referred manuscripts.
- **Operational Efficiency:** Median submission-to-publication time reduced from 265 to 185 days following implementation of Article Based Publishing (ABP).
- **Virtual Special Issues (VSIs):** Four active thematic collections with two additional VSIs in development.

- **75th Anniversary (Diamond Jubilee):** Successfully leveraged for brand reinforcement and global visibility.
- **Updated AI Guidelines:** Strengthened publication governance in response to emerging technologies.

### Strategic Position

IDJ's simultaneous growth in scale, selectivity, and citation performance demonstrates structural maturation rather than temporary expansion. The Journal has strengthened its academic standing, operational efficiency, and thematic leadership—particularly in digital dentistry and artificial intelligence—while maintaining rigorous peer review standards.

With entry into the top decile of global dentistry journals and sustained international submission growth, IDJ is now firmly positioned as a future-oriented, globally authoritative platform aligned with FDI's mission to advance optimal oral health worldwide.

This reporting period represents a landmark period in the 75-year history of the International Dental Journal (IDJ). During this period the journal achieved record growth across all major performance indicators, consolidated its position as a top-quartile (Q1) journal, while breaching into the top tier (10per cent) of all dentistry sector journals whilst implementing significant strategic publishing innovations.

## IDJ Report to the Council and the General Assembly of the World Dental Congress

(Reporting Period - September 2025 to June 2026)

### Introduction – Preamble

It is with great pride that I present this eleventh address to the FDI Council and sixth to the General Assembly of the World Dental Congress as Editor-in-Chief of the *International Dental Journal* (IDJ), a role I have had the honour of serving since January 2022.

The 2026 reporting year represents a defining milestone in the Journal's 75-year history. In June 2026, IDJ's Impact Factor increased significantly from 3.7 to 5.2, firmly establishing the Journal within the top tier (Q1) of dentistry publications. Notably, we have surpassed key peer journals, including *JADA* (2025 Impact Factor: 3.5), and extended our lead over *BMC Oral Health* (2025 Impact Factor: 3.8).

This academic advancement has been accompanied by exceptional submission growth. Over the last six months by June 2026, the Journal had received over 1,300 manuscripts, averaging more than six submissions per day. Since the 2022 baseline year, annual submissions have increased from 622 to 2200 reflecting 3.5 fold expansion. Open access publications rose by 40% in 2025, enhancing global accessibility and reach. The Journal's financial position has strengthened correspondingly, supported by increased publishing activity and a competitive article processing charge of USD 2,600.

These achievements reflect the collective commitment of our Editorial Board, reviewers, authors, and strategic partners. I remain deeply grateful to FDI leadership—particularly Mr. Enzo Bondioni and his team—and to the Elsevier publishing team led by Ms. Lindsay Allen for their steadfast support.

With sustained growth in scope and operational demands, we have reinforced editorial systems while preserving rigorous scientific standards. In the sections that follow, I will outline the Journal's progress during this reporting period and present our strategic priorities for the year ahead.

### Key Performance Indicators

- **The Impact Factor**
  - Clarivate Impact Factor Rankings: Top Centile Achievement
  - SCIMAGO Rankings: Top Quartile Maintained
  - Open Access Journal Rankings: Top Tier Status
  - CiteScore and Citation Performance
- **Manuscript submissions**
- **Acceptance-Rate and Capacity Strategy**

- **Artificial Intelligence Strategy and Competitive Positioning**
- **Full Text Downloads and Usage**
- **Geographic distribution of submissions**
- **Editorial outcomes**
  - Manuscript accept/reject rates
  - Editorial Timelines and Operational Efficiency
  - Editorial Workload
- **Publication Output**
- **Editorial Board Expansion and Composition**
- **Appointment of Scientific Handling Editors**
- **New Initiatives and their Impact**
  - 75th Anniversary (Diamond Jubilee): Brand and Strategic Positioning
  - Virtual Special Issues (VSI)
  - IDJ supplements
  - Media and Publicity
  - Writing workshops at the World Dental Congresses
  - Editorial Board Engagement and Governance
  - Management Issues and journal stake holder meetings
- **Concluding Remarks and EICs Summary**
- **Acknowledgements**

***Annex 1: Virtual Special Issues - Editorial Leadership***



## State of the *International Dental Journal*

(Reporting Period – September 2025 – June 2026)

### Key Performance Indicators

The following summary presents key performance indicators based on internationally accepted measures of journal standing, including traditional and alternative (altmetric) metrics.

### The Impact Factor

Two major citation platforms — **Clarivate (Journal Citation Reports)** and **SCImago (Scopus-based metrics)** — assess journal performance using related but methodologically distinct indicators. While both are widely recognised benchmarks of scholarly influence, the Clarivate Impact Factor (IF) remains the most internationally referenced metric in academic evaluation (Table 1).

#### *Clarivate Impact Factor – Top Centile Achievement*

The Clarivate Journal Impact Factor represents the rolling average number of citations received by articles published in the preceding three years. Within Clarivate’s classification system, IDJ is listed under the subject category “**Dentistry, Oral Surgery & Medicine.**”

As of the June 2026 Journal Citation Reports release:

- **Impact Factor increased from 3.7 to 5.2**
- **Absolute increase: +1.5**
- **Relative increase: +45% in a single year (a historical record)**
- **Current ranking (2026): #14 out of 165 journals**
- **Previous ranking (2025): #20 out of 157 journals**

This represents a significant upward movement in both absolute performance and relative standing.

As illustrated in Figure 1, the Journal’s trajectory has been steadily ascending over recent years, culminating in an exceptional acceleration in the most recent reporting cycle. The 45% year-on-year increase is particularly noteworthy and reflects strengthened citation performance across the portfolio.

Importantly, this progress has been achieved during a period of substantial expansion in publication volume. The Journal has significantly increased its annual output in recent years (see below), making the rise in citation impact even more compelling. The ability to grow both **scale and influence simultaneously** demonstrates the effectiveness of editorial strategy, rigorous peer review standards, and enhanced international visibility.

With its current position at **#14 of 165 journals**, IDJ has now firmly entered the **top tier or the top decile (top 10%)** of the Dentistry, Oral Surgery & Medicine category — marking a **major strategic milestone** in the Journal’s development and global stature.

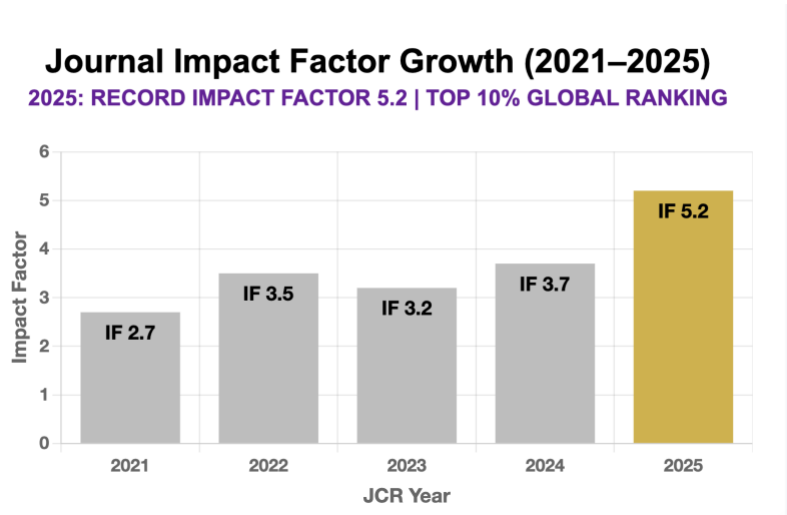


Figure 1: *International Dental Journal*: Annual Impact factor Trend 2022-2025 (Clarivate Ranking)

**Calculation of the 2025 Impact Factor:**  
Citations in 2025 to articles published in 2023 + 2024  
Number of articles published in 2023 + 2024

|                                                                    |   |       |   |     |
|--------------------------------------------------------------------|---|-------|---|-----|
| Citations in 2025 to items published in 2023<br>(583) + 2024 (891) | = | 1,474 | = | 5.2 |
| Number of citable items in 2023 (120) + 2024 (161)                 |   | 281   |   |     |

Table 1: Ranking Computation (from Clarivate)

*SCIMAGO Rankings: Top Quartile Maintained*

SCImago metrics, derived from Scopus data, use a distinct methodological framework and therefore differ slightly from Clarivate rankings. Nonetheless, they provide an important complementary indicator of journal influence and international standing.

In the latest reporting cycle, IDJ maintained its **top-quartile (Q1) status** (Figure 2) and recorded a significant upward movement in ranking. IDJ advanced **15 positions to 15th place among 201 journals** in the SCImago dentistry category, compared with **30th position among 271 journals in 2024** (Figure 3).

This marked improvement further confirms the Journal’s strengthening global profile and growing citation impact across multiple indexing platforms.

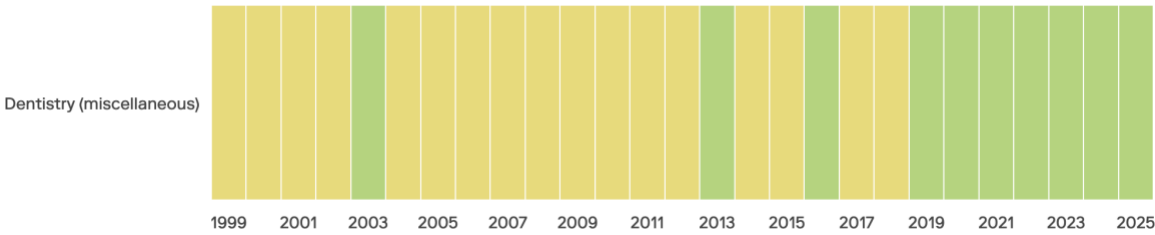


Figure 2: *International Dental Journal*: Annual Impact factor Trend 1999-2025 (Clarivate Ranking) IDJ maintains its top quartile status (as shown in green)

|                                                          | Title                                     | Type    | ↓ SJR                 | H index | Total Docs. (2025) | Total Docs. (3years) | Total Refs. (2025) | Total Citations (3years) | Citable Docs. (3years) |
|----------------------------------------------------------|-------------------------------------------|---------|-----------------------|---------|--------------------|----------------------|--------------------|--------------------------|------------------------|
| 1                                                        | International Journal of Oral Science     | journal | 3.506 <span>Q1</span> | 83      | 69                 | 171                  | 6452               | 2917                     | 171                    |
| 2                                                        | International Endodontic Journal          | journal | 2.539 <span>Q1</span> | 165     | 171                | 435                  | 8553               | 3735                     | 405                    |
| 3                                                        | Journal of Dental Research                | journal | 1.846 <span>Q1</span> | 233     | 211                | 504                  | 7856               | 3627                     | 479                    |
| 4                                                        | Japanese Dental Science Review            | journal | 1.802 <span>Q1</span> | 51      | 25                 | 98                   | 1559               | 907                      | 96                     |
| • 5 <sup>th</sup> to 12 <sup>th</sup> Journals not shown |                                           |         |                       |         |                    |                      |                    |                          |                        |
| 13                                                       | Journal of Evidence-Based Dental Practice | journal | 1.159 <span>Q1</span> | 50      | 99                 | 218                  | 3574               | 632                      | 113                    |
| 14                                                       | Journal of Prosthodontic Research         | journal | 1.159 <span>Q1</span> | 66      | 80                 | 264                  | 3283               | 1111                     | 233                    |
| 15                                                       | International Dental Journal              | journal | 1.064 <span>Q1</span> | 84      | 479                | 456                  | 20809              | 2183                     | 415                    |
| 16                                                       | Dental and Medical Problems               | journal | 1.032 <span>Q1</span> | 29      | 130                | 263                  | 5557               | 1148                     | 252                    |

Figure 3: *International Dental Journal*: SCIMAGO rankings of IDJ. In 2025 we reached the 15<sup>th</sup> position within 201 dentistry journals in this sector, as opposed to 30<sup>th</sup> of 271 journals in 2024 (from SCIMAGO)

Open Access Journal Rankings: Top Tier Status

Among fully open-access dentistry journals, the *International Dental Journal* currently ranks **6th out of 134 titles**, according to the latest SCIMAGO rankings. This maintains the Journal’s position from the previous year and firmly consolidates its standing within the **top 10% of open-access journals in the dentistry sector** (Figure 4).

This continued high placement reflects sustained citation strength, international visibility, and the Journal’s growing leadership within the open-access publishing landscape (Figure 5).

..

|   | Title                                                                                                                   | Type    | ↓ SJR                                                                                   | H index | Total Docs. (2025) | Total Docs. (3years) | Total Refs. (2025) | Total Citations (3years) | Citable Docs. (3years) |
|---|-------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------------------------------------|---------|--------------------|----------------------|--------------------|--------------------------|------------------------|
| 1 | International Journal of Oral Science  | journal | 3.506  | 83      | 69                 | 171                  | 6452               | 2917                     | 171                    |
| 2 | Japanese Dental Science Review         | journal | 1.802  | 51      | 25                 | 98                   | 1559               | 907                      | 96                     |
| 3 | Progress in Orthodontics               | journal | 1.759  | 58      | 52                 | 146                  | 2056               | 956                      | 146                    |
| 4 | Journal of Oral Microbiology           | journal | 1.440  | 67      | 114                | 180                  | 6770               | 1242                     | 179                    |
| 5 | Angle Orthodontist                     | journal | 1.433  | 120     | 86                 | 287                  | 1868               | 1095                     | 257                    |
| 6 | International Dental Journal           | journal | 1.064  | 84      | 479                | 456                  | 20809              | 2183                     | 415                    |
| 7 | Dental and Medical Problems            | journal | 1.032  | 29      | 130                | 263                  | 5557               | 1148                     | 252                    |

Figure 4: *International Dental Journal*: SCIMAGO rankings of IDJ amongst all open access journals. In 2025 we maintained 6<sup>th</sup> position out of 135 open access dentistry journals (from SCIMAGO), A summary infographic of all three of the above rankings are shown in Figure 5



Figure 5. Consolidated overview of the *International Dental Journal*’s 2025 performance across Clarivate (JCR), SCImago global dentistry rankings, and SCImago open-access dentistry rankings, highlighting its top-decade international standing.

CiteScore and Citation Performance

CiteScore, calculated by Scopus, measures journal impact by dividing the number of citations received over a four-year period by the number of documents published during the same timeframe (Figure 6). Unlike the Impact Factor, CiteScore is updated monthly and reflects a broader publication window. IDJ’s CiteScore demonstrated a consistent upward trajectory through 2024. However, in 2025 the metric decreased from **6.0 to 5.2** (Figure 7). This change is primarily attributable to a substantial increase in publication volume during the four-year accounting period, with total published items rising from **477 to 877**.

The decline does not reflect reduced citation activity; rather, it represents the mathematical consequence of publication growth temporarily outpacing citation accrual. As publication output continues to expand — with more than 700 articles published in 2026 alone — there may be further short-term pressure on the CiteScore metric unless citation rates increase proportionally.

Encouragingly, early citation data indicate that several high-impact thematic areas, particularly **Artificial Intelligence in Dentistry**, are attracting strong and accelerating citation activity (see below). This trend is expected to contribute positively to future citation performance and medium-term metric recovery.



Figure 6 Calculation of the CiteScore and the 2025 IDJ CiteScore.

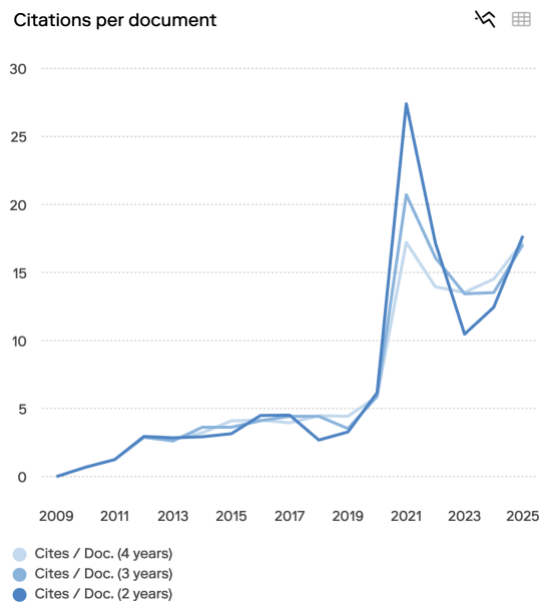


Figure 7. Citations per document (2-, 3-, and 4-year windows) 2009–2025.

The apparent decline in citations per document observed in 2023 reflects the substantial increase in publication output beginning in 2024. The large volume of newly published papers has not yet had sufficient time to accumulate citations, thereby temporarily lowering the average citations per document. This effect is expected to stabilise as the 2024–2025 publications mature and accrue citations over time.

Manuscript Submissions

The Journal continues to experience sustained and accelerating growth in manuscript submissions, with clear implications for editorial operations and acceptance strategy.

Annual submissions increased from 851 in 2024 to 1,717 in 2025, representing a 101.8% year-on-year rise. Current projections indicate approximately 2,200 submissions by the end of 2026, reflecting a further anticipated increase of 28.1% (Figure 8b).

Rolling 12-month data reinforce this trend. Submissions rose from 1,074 (1 May 2024 – 30 April 2025) to 2,088 (1 May 2025 – 30 April 2026), an absolute increase of 1,014 manuscripts (+94.4%). In operational terms, the editorial workload has effectively doubled within a single reporting cycle (Figure 8a).

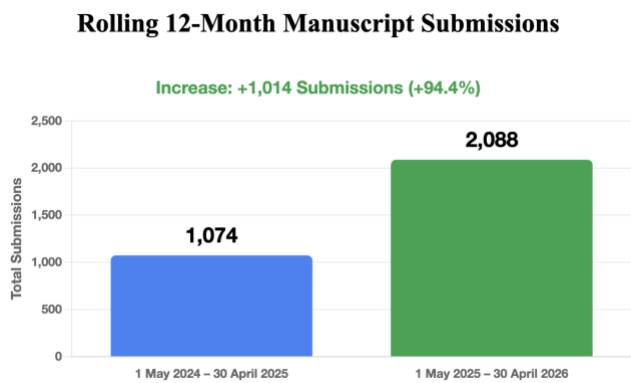


Figure 8a. Rolling 12 month manuscript submissions



Figure 8b: Manuscript Submissions: Number of manuscripts received (2021-2025)

Given that each manuscript typically requires multiple peer reviewers in addition to editorial assessment, this growth translates into a proportional increase in reviewer invitations, editorial decisions, and administrative processing. Without strategic controls, such expansion would exert upward pressure on turnaround times and acceptance volumes.

### Acceptance-Rate and Capacity Strategy

In response to the above, the Journal has adopted a calibrated acceptance-rate strategy to safeguard quality and impact. While submission volumes have expanded rapidly, acceptance thresholds have been maintained with increased selectivity to prevent dilution of standards and to manage publication capacity responsibly. Reviewer recruitment and editorial board expansion have been prioritised to maintain decision efficiency and uphold peer-review integrity (see below).

### Artificial Intelligence Strategy and Competitive Positioning

The Journal's decision to establish a dedicated **Artificial Intelligence (AI) in dentistry** subsection in 2024, followed by the launch of a **Virtual Collection on AI** in June 2025, represents a **deliberate first-mover strategy** within the dental publishing sector. To our knowledge, IDJ was the first mainstream dental journal to institutionalise AI as a defined editorial domain rather than treating it as incidental content.

Since implementation, the Journal has experienced measurable and accelerating growth in AI-related submissions and publications. This expansion has coincided with a substantial rise in Impact Factor, increased citation density, and broader international engagement—indicators that the strategy is not only topical but structurally advantageous.

AI publications demonstrate materially stronger performance metrics compared with general content:

- AI articles show a **62% higher mean citation rate** than non-AI articles (9.4 vs. 5.8 citations).
- AI review articles achieve 2.1–2.5 times higher downloads within six months of publication.
- AI-related content has increased from 0% of total publications in 2022 to **10.3% of citable items** in 2025—a more than four-fold rise in three years.

A notable example is *Samaranayake et al.*, “The Transformative Role of Artificial Intelligence in Dentistry” (*Int Dent J.* 2025;75(6)<sup>1</sup>), which has **received more than 175 citations within** two years, placing it among the most rapidly cited articles in the Journal's recent history. This level of citation velocity is competitive with leading specialty journals and reinforces IDJ's positioning as a thought leader in digital dentistry.

Projections suggest AI content may account for 15–18% of total publications by 2027 and potentially 20% or more by 2028, subject to sustained submission flow and editorial capacity.



### Strategic Implications for Market Position

In a competitive publishing environment, thematic leadership in AI provides IDJ with:

- Clear differentiation from peer dental journals
- Enhanced attractiveness to high-impact authors in digital health and computational dentistry
- Increased early-citation advantage
- Greater relevance to funding bodies and academic institutions prioritising digital innovation

The AI initiative has therefore functioned not merely as a content expansion, but as a strategic positioning lever—strengthening the Journal’s academic prestige, citation performance, and competitive standing within the global dental publishing hierarchy.

Continued investment in editorial expertise and reviewer capacity in this domain will be critical to sustaining first-mover advantage while preserving overall quality thresholds.

### Full Text Downloads and Usage

The increasing reach and impact of IDJ is reflected in rising article downloads and HTML views. As an open-access journal, IDJ is freely available from any location with internet connectivity. While download metrics do not guarantee articles were read, they provide strong usage trend indicators.

From 2022 to 2025, full-text downloads rose over 76 %, from 1,066,154 to 1,875, 692 The compounded annual growth rate (CAGR) over the last four years was 34.4% (Figure 9). These usage trends demonstrate the positive impact of our open-access policy.

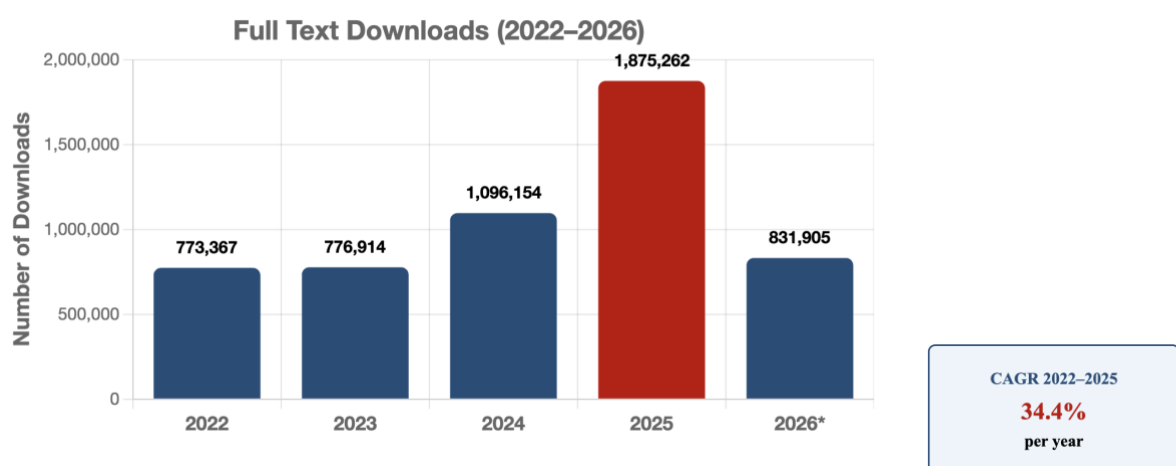


Figure 9: Full text downloads and usage of *International Dental Journal* (Data from ScienceDirect; \*2026 data upto May 2026)

## Geographic Distribution of Submissions

The geographic distribution of submissions in 2025 demonstrates both strong concentration and broad international engagement (Figure 10).

China was the dominant contributor, with 836 submissions, accounting for approximately 39–40% of total projected submissions for 1767. This represents a substantial lead over all other contributing countries.

The next tier of contributors comprised Iran (85 submissions), Thailand (67), Saudi Arabia (66), Turkey (56), and India (52). Together, these five countries contributed 326 submissions, representing approximately 15% of total projected annual submissions. Additional contributions were received from Korea (44), Japan (31), Hong Kong (30), and the United Arab Emirates (30), reflecting continued engagement across East and Southeast Asia as well as the Middle East.

Intriguingly, despite ongoing political and economic constraints, Iran remained one of the leading contributors, reflecting strong academic engagement with the Journal.

The data indicate a clear geographic concentration of submissions in Asia and the Middle East, with comparatively limited representation from North and South America. While the Journal’s strength in high-growth research regions is strategically advantageous, broader geographic diversification remains desirable. Increasing submissions from the Americas will be a strategic priority moving forward, supported by targeted outreach, expanded editorial representation, and enhanced regional visibility initiatives.

A more balanced geographic portfolio would enhance citation diversity, mitigate concentration risk, and strengthen the Journal’s long-term global positioning.

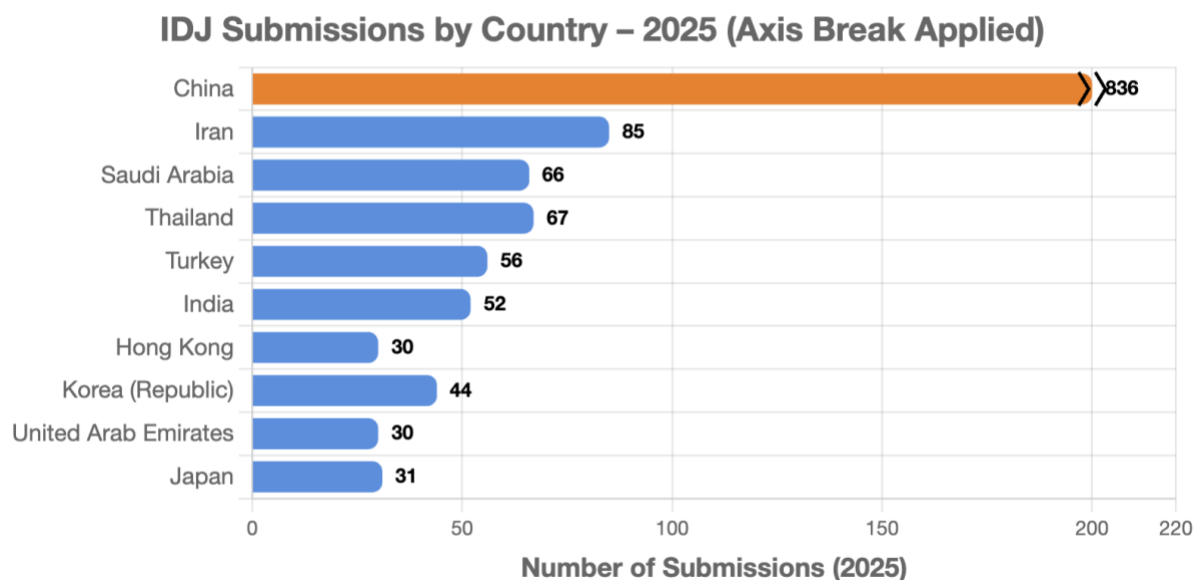


Figure 10 : Top ten countries for IDJ manuscript submissions 2025

Editorial Outcomes

Manuscript Accept/Reject Rates

Acceptance and rejection rates have evolved significantly between 2021 and 2025, reflecting both rising submission volumes and deliberate quality control measures.

In 2025, overall selectivity increased, with the overall rejection rate reaching 62%, compared with slightly lower levels in 2024 (Figure 11). This indicates that approximately one in three submitted manuscripts was accepted for publication, underscoring the Journal’s commitment to maintaining rigorous standards amid rapid submission growth.

Desk rejection rates (editor-in-chief decisions at initial submission) increased from 36% in 2024 to 49% in 2025 (Figure 11). This strengthened early-stage editorial triage has enhanced efficiency by directing unsuitable manuscripts away from full peer review, thereby preserving reviewer capacity for higher-quality submissions.

Importantly, these measures have been implemented in the context of a 111% increase in submissions, demonstrating that rising volume has not led to dilution of standards. On the contrary, increased selectivity is expected to contribute positively to citation performance and continued Impact Factor growth by ensuring that published content meets increasingly stringent quality thresholds.

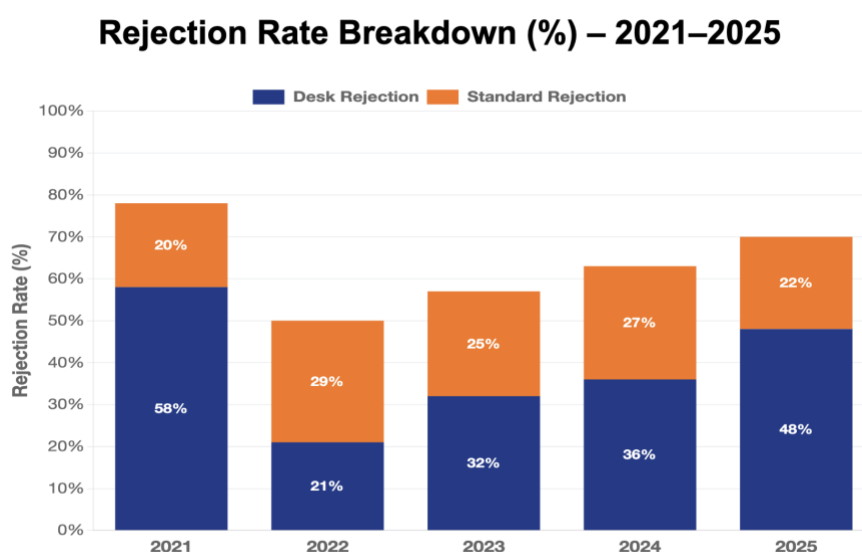


Figure 11: Breakdown of desk rejection and standard rejection of manuscripts 2021-2025

## Editorial Timelines and Operational Efficiency

Maintaining rapid editorial turnaround has been increasingly challenging given the substantial rise in submission volume, particularly during 2025. Despite this pressure, the Journal has sustained strong performance metrics.

The median time from submission to first decision by the Editor-in-Chief remained 5 days, while median time from submission to standard editorial outcome was maintained at 58–62 days (Figure 12). These timelines compare favourably with peer journals and reflect the effectiveness of strengthened editorial triage processes.

The significant growth in submissions has placed considerable demands on the editorial board and reviewer community. We **extend our sincere appreciation to all editorial members** for their sustained commitment and efficiency. In response to workload expansion, the number of Associate Editors was increased from 11 to 15 in 2026, following timely support and approval from FDI leadership. This expansion is expected to further stabilise—and potentially reduce—decision timelines.

Rapid publication remains a critical competitive advantage in attracting high-quality submissions. Despite record manuscript volumes in 2025, the Journal reduced publication lag by approximately 30%.

Median submission-to-publication time decreased from 265 days in 2024 to 185 days in 2025. This improvement was largely driven by the successful implementation of **Article-Based Publishing (ABP)**, which has enhanced production efficiency and accelerated online availability of accepted articles.

Collectively, these measures demonstrate that operational scalability has kept pace with submission growth, preserving both efficiency and author satisfaction.

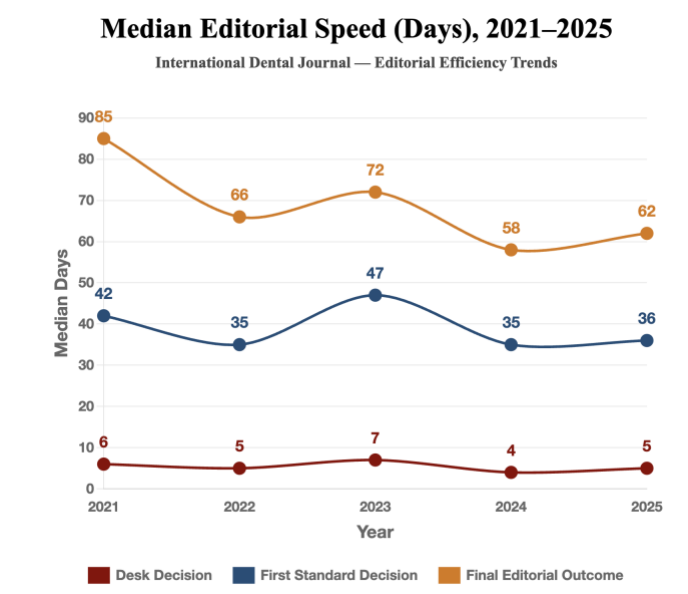


Figure 12. Mean editorial speed for accepted and rejected articles 2021 to 2025

## Editorial Workload

Editorial workload increased substantially between 2024 and 2025, directly reflecting the sharp rise in manuscript submissions.

The Editor-in-Chief's annual handling volume increased from 1,074 manuscripts (rolling 12 months: 1 May 2024 – 30 April 2025) to 2,088 manuscripts (1 May 2025 – 30 April 2026), **representing a 94.4% increase in workload within a single year**. This near doubling of submissions required initial assessment, triage decisions, and allocation oversight at significantly higher volume.

Associate Editor workloads rose correspondingly, with several portfolios increasing by more than 50%, and in some cases approaching two-fold expansion, depending on subject distribution. This reflects both overall submission growth and increased activity in high-volume areas such as Artificial Intelligence and digital dentistry.

Given the Journal's strengthened Impact Factor and emerging top-tier positioning, sustained high submission inflow is anticipated. The recent expansion of the Associate Editor cohort from 11 to 15 members in 2026 represents a necessary structural adjustment to ensure continued efficiency, preserve decision timelines, and maintain rigorous editorial standards.

The data indicate that editorial demand has transitioned from incremental growth to structural scale expansion, requiring ongoing monitoring of capacity, workload distribution, and reviewer resources to ensure long-term sustainability.

## Publication Output

Publication output increased substantially between 2024 and 2025. Total published manuscripts rose from 185 in 2024 to 485 in 2025, representing a 158% year-on-year increase—the largest single-year expansion in the Journal's history (Figures 13, 14).

The average number of articles per issue increased from approximately 30 in 2024 to approximately 80 in 2025. Early **2026 issues** (February, April, June, and August) **have exceeded 100 articles per issue**, reflecting continued high throughput.

This record publication volume reflects a convergence of operational and strategic factors:

- A near doubling of submissions (94.4% rolling 12-month growth),
- Maintenance of rigorous selectivity (62% rejection rate),
- Increased desk-rejection efficiency (49% in 2025), and
- Clearance of accumulated backlog following the transition to Article-Based Publishing (ABP), introduced in Volume 75, Issue 2.

Importantly, the expansion in publication output has not been driven by relaxed acceptance thresholds. Rather, it reflects improved editorial processing efficiency and production acceleration under ABP, which reduced median submission-to-publication time from 265 to 185 days (2024–2025).

Overall, 2025 represents a structural scaling of publication capacity rather than a temporary surge. Continued monitoring will be required to ensure that publication volume remains aligned with citation performance, impact metrics, and long-term quality strategy.

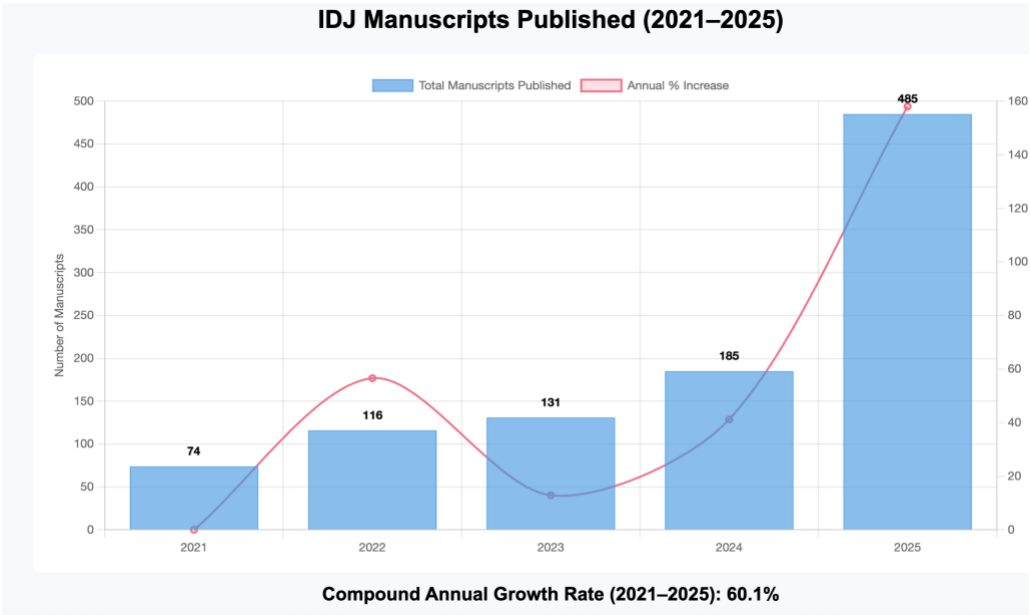


Figure 13 Compounded annual growth rate (CAGR) of published articles 2021-2025

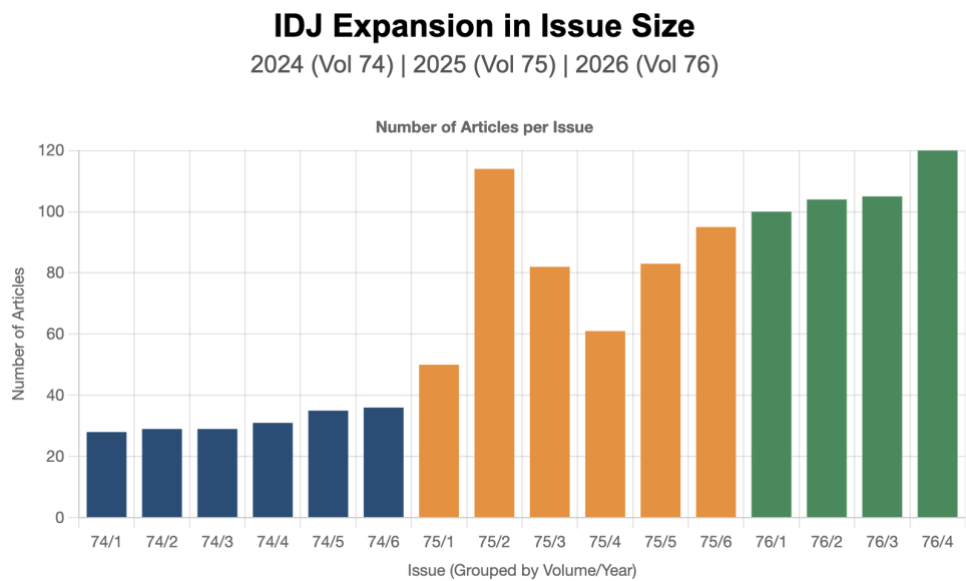


Figure 14. Expansion in issue size and average articles per issue 2024- to 2026 ( August)

## Editorial Board Expansion and Composition

The substantial rise in manuscript submissions, together with the strategic initiatives outlined above, has required a structured expansion of both the Associate Editorial Board and the wider Editorial Board.

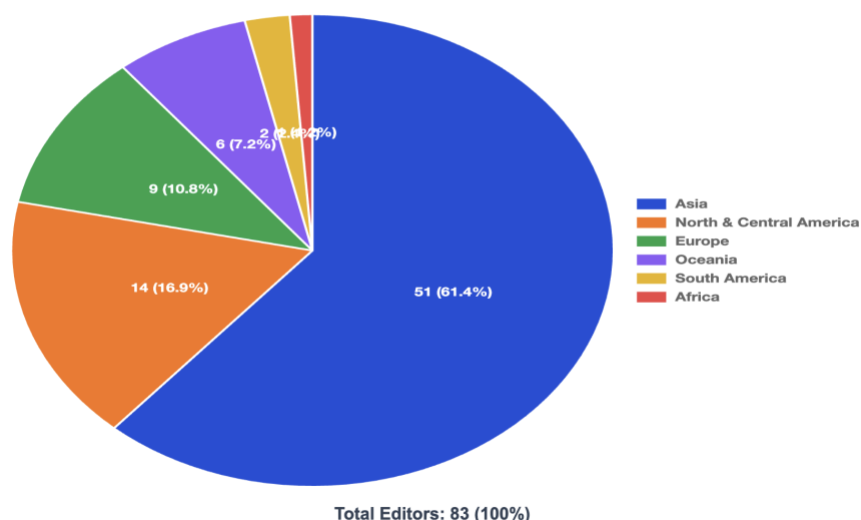
The Journal now comprises **83 editors across six continents**, including 15 Associate Editors overseeing major subdisciplines of dentistry. The increase in Associate Editors from 11 to 15 in 2026 was an important capacity adjustment to support rising submission volumes and maintain efficient decision timelines.

Geographically, 53% of editors are based in Asia, with North and Central America representing 16.9%, reflecting a strong Asia-Pacific editorial profile (Figure 15). The Board demonstrates solid gender and disciplinary diversity, encompassing a broad spectrum of clinical, academic, and research expertise.

Strategically, there remains an opportunity to strengthen editorial representation from Africa and South America to further enhance global balance and regional engagement.

I would like to formally acknowledge and thank FDI leadership for approving the expansion of the Associate Editorial Board and providing the necessary financial support. I also extend sincere appreciation to all Editorial Board members for their continued dedication and professional commitment to the Journal.

### Editorial Board Distribution by Continent



**Figure 15: Geographic distribution of the editorial board**

### *Appointment of Scientific Handling Editors*

To manage the increasing volume of manuscripts **transferred from other Elsevier peer journals** to IDJ, two Scientific Handling Editors—**Dr Bibin Jacob** and **Dr Deeksha Karkada**—have been **appointed by the publisher**.



These editors are responsible for overseeing manuscripts received through **inter-journal referral pathways** and for making final decisions on acceptance or rejection within this category. This arrangement ensures timely processing while preserving editorial standards.

The Editor-in-Chief retains overall editorial oversight of all referred manuscripts and monitors decision patterns and quality outcomes to ensure consistency with the Journal's policies, scope, and strategic direction.

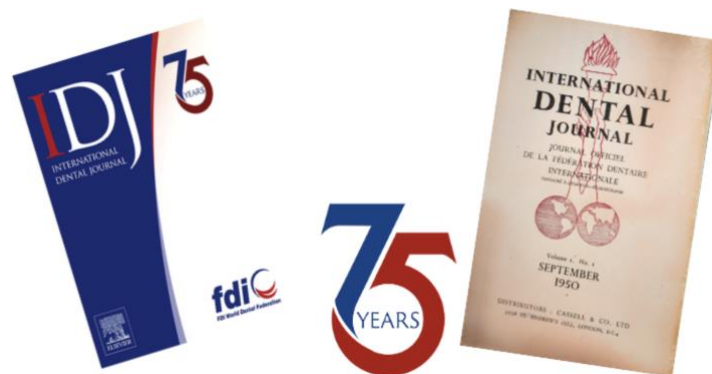
This structured delegation supports operational efficiency while maintaining centralised governance and quality control.

## New Initiatives and their Impact

### *75<sup>th</sup> Anniversary (Diamond Jubilee): Brand and Strategic Positioning*

The *International Dental Journal* published its **inaugural issue in September 1950** and has maintained an uninterrupted publication record for over 75 years. This sustained continuity represents a significant institutional asset, positioning IDJ among the **longest-standing international journals in dentistry**.

The 2025 Diamond Jubilee provided an opportunity not only for commemoration, but also for strategic brand reinforcement. A dedicated anniversary logo was developed and prominently displayed on the journal cover (Figure 16), visually signalling heritage and continuity. A curated record of past Editors-in-Chief was featured in the journal frontispiece, underscoring the depth of editorial leadership that has shaped the Journal's evolution.



**Figure 16: The 75th Anniversary Diamond Jubilee logo featured on the International Dental Journal front cover (left), alongside the inaugural issue published in September 1950.**

A coordinated communications campaign amplified the milestone. This included professionally designed digital assets prepared by the FDI media team and a short commemorative video highlighting IDJ's historical impact and global reach. A dedicated editorial reflected on the Journal's 75-year contribution to international dentistry and coincided with recognition of FDI's 125th anniversary—strategically aligning the Journal's legacy with that of its parent organisation (Figure 17).

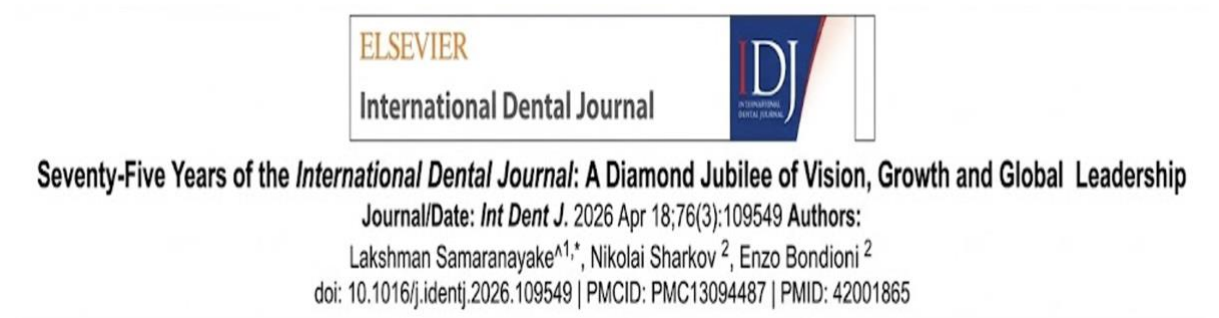


Figure 17: Celebrating the diamond jubilee of IDJ: Creation of a logo, and tracing the first edition of the journal published in September 1950. <https://doi.org/10.1016/j.identj.2026.109549>

Beyond celebration, the Diamond Jubilee strengthened IDJ's brand equity in a competitive publishing environment. At a time when new journals are rapidly entering the market, the Journal's 75-year legacy differentiates it from newer competitors and reinforces its standing as an established, authoritative platform for global dental scholarship. The anniversary initiatives therefore functioned not only as commemorative activities but as strategic instruments supporting reputation, positioning, and long-term competitive advantage.

#### *Virtual Special Issues (VSIs)*

As part of its strategic digital development, the *IDJ* has introduced Virtual Special Issues (VSIs) to enhance thematic visibility while maintaining the flexibility of continuous publication.

A VSI is a curated collection of articles centred on a defined theme or emerging research domain. Unlike traditional special issues—where articles are bundled and published within a single volume—VSIs aggregate previously published and newly accepted papers from across regular issues and present them online as a cohesive, high-visibility collection (Figure 18).

Currently, four VSIs are active, covering areas of strategic importance including i) *Artificial Intelligence in Dentistry*, ii) *Genomics and Digital Health*, iii) *Stem Cells and Regenerative dentistry*, and iv) *Reimagining Dental Education*. Two additional VSIs—focused on Smart Dental Materials and Implementation Dentistry—are in early development.

The VSI framework strengthens IDJ's positioning in high-growth domains, enhances discoverability and citation clustering, and supports international collaboration through thematic editorial leadership. It represents an agile, digitally aligned mechanism to consolidate scholarship, reinforce brand leadership, and advance the Journal's competitive standing within global dental publishing.



**Figure 18: A graphic of the current virtual special issues**

### *IDJ Supplements*

IDJ continues to publish sponsored Supplements to consolidate high-priority scientific and policy content within focused thematic areas. Supplements provide an important mechanism to curate authoritative reviews, consensus perspectives, and regionally relevant evidence, while broadening dissemination beyond the core subscriber base.

The most recent Supplement, published in October 2025, was titled *Promoting Oral Health for Older Adults in the Asia Pacific Region* and was sponsored by the Asian Academy of Preventive Dentistry (AAPD). This publication aligned with global demographic trends and regional preventive health priorities, reinforcing IDJ's commitment to ageing populations and public health advocacy.

A further Supplement, *Oral Health for an Ageing Population*, sponsored by an FDI Work Group, is currently in development. This initiative reflects strong alignment between the Journal and FDI strategic objectives, particularly in the context of WHO oral health resolutions and healthy ageing frameworks.

All Supplements continue to adhere to IDJ's peer-review and editorial governance standards, ensuring scientific integrity while enabling strategic partnerships.

### *Media and Publicity*

The media and publicity arms of both FDI and Elsevier remain closely engaged in promoting the *International Dental Journal* (Figure 19). During 2025–2026, IDJ benefited from structured institutional promotion across FDI communication platforms, highlighting key milestones including the Journal's Impact Factor increase to 5.2, its entry into the top decile (Q1) of dentistry journals, and its 75th Anniversary (Diamond Jubilee). The anniversary campaign featured coordinated digital assets, a commemorative logo, and an editorial celebrating IDJ's uninterrupted publication record since 1950.

In collaboration with FDI, the Journal also marked World Oral Health Day (20 March 2025) with a special curated issue comprising five articles. Supplements together with Virtual Special Issues further enhanced

thematic visibility in priority areas such as Artificial Intelligence, Genomics, Ageing, and Dental Pedagogy. While institutional promotion has been strong, benchmarking against peer journals indicates structural gaps in dedicated journal-specific social media identity and sustained multimedia engagement. A more continuous, journal-branded digital strategy would further strengthen global reach and impact.



**Figure 19: Examples of media publicity by FDI in 2025–2026 highlighting the IDJ’s impressive Impact Factor growth and celebrating its 75th Anniversary.**

### *Writing Workshops at the World Dental Congress*

The writing workshops initiated at the 2023 FDI World Dental Congress (Sydney) and subsequently continued in Istanbul (2024) and Shanghai (2025) have been highly successful, receiving consistently positive feedback from participants. These sessions have strengthened engagement with authors and reinforced IDJ’s educational and capacity-building role within the global dental community.

This initiative will continue at the Prague World Dental Congress in September 2026 with an interactive session entitled “*Manuscript Mastery: A Dialogue with Journal Editors.*” The faculty for Prague includes the Convenor and Chair, Professor Lakshman Samaranayake; Associate Editor Professor Liran Levin; the Publishing Executive of the *International Dental Journal*, Ms. Lindsay Allen; and Dr. Dr. Péter Hermann, Editor-in-Chief of *Fogorvosi Szemle* (Stomatologia Hungarica; Journal of the Hungarian Dental Association).

A special focus of the Prague workshop will be the responsible and ethical use of artificial intelligence (AI) in manuscript preparation, reflecting evolving publication standards and the growing importance of AI literacy among authors.

### *Editorial Board Engagement and Governance*

Journal management remains a collaborative process involving close coordination between the Editor-in-Chief, Associate Editors, Elsevier, and FDI leadership. Regular monthly meetings between the publisher’s team and FDI leadership ensure oversight of production performance and strategic industry developments, maintaining the Journal’s competitive standing.

An online meeting of Associate Editors was held in May 2026 to review journal performance, editorial processes, and strategic priorities. The meeting was attended by the Elsevier Journal Executive and representatives of FDI leadership, reinforcing aligned governance and shared oversight.

To further strengthen editorial cohesion, the Editor-in-Chief has organised, for the first time, an in-person Editorial Board meet-up during the forthcoming World Dental Congress (6 September, 14:00–15:00). Editorial Board members attending the Congress have been invited to participate in this informal session to enhance engagement, strategic alignment, and institutional dialogue. FDI leadership has also been invited, schedules permitting.

This initiative represents a constructive step in consolidating IDJ's editorial leadership community and strengthening governance engagement.

### Concluding Remarks and EIC's Summary

Amid intensifying competition within the global publishing landscape, IDJ continues to demonstrate resilience, strategic clarity, and forward momentum. **The past year marks a defining phase in the Journal's evolution.** We have achieved sustained growth in submissions, strengthened selectivity, expanded editorial capacity, and improved publication efficiency, all while upholding rigorous peer-review standards.

Our early and deliberate engagement with emerging domains—particularly Artificial Intelligence and digital dentistry—has enhanced citation performance and positioned IDJ at the forefront of innovation in oral health scholarship. At the same time, the celebration of our 75-year uninterrupted publication legacy reinforces the institutional credibility, continuity, and global trust that distinguish IDJ from newer entrants in the field.

These achievements represent not incremental advancement but strategic maturation. The Journal is consolidating its role as a future-oriented, globally authoritative voice in dentistry—aligned with FDI's mission to **advance optimal oral health worldwide**. I look forward to reporting further progress as we continue to strengthen impact, visibility, and leadership in the years ahead.

### Acknowledgements

I wish to express my sincere appreciation to the FDI team, led by Mr. Enzo Bondioni, together with Ms. Charanjit Jagait and Ms. Roshana Saleem, as well as the marketing and publicity teams of FDI, for their steadfast collaboration and institutional support.

I also extend my gratitude to Ms. Lindsay Allen and her publishing team at Elsevier for providing comprehensive data, performance metrics, and graphical analyses that underpin this report. Special thanks are due to Ms. Julia Bandeira, whose consistent and responsive engagement with authors, reviewers, and the editorial office ensures the smooth day-to-day functioning of the Journal.

Finally, I thank our distinguished Editorial Board members, our dedicated reviewers across all continents, and—most importantly—our authors. Their scholarly contributions remain the lifeblood and intellectual foundation of the *International Dental Journal*.

*Prepared by: Lakshman Samaranayake, IDJ Editor-in-Chief*

*1<sup>st</sup> July 2026*

## Annex 1: Virtual Special Issues and Editorial Leadership

### A. Artificial Intelligence and Dentistry

#### Executive Guest Editors:

- Prof. Thanaphum Osathanon  
Chulalongkorn University, Thailand
- Prof. Antoin Tichy  
University of Munich, Germany

### B. Advances in Genomics and Digital Health: Exploring Craniofacial and Orofacial Diseases

#### Executive Guest Editor:

- Prof. Dr. Thantrira (First) Porntaveetus, Chulalongkorn University, Thailand

#### Co-Guest Editors:

- Assoc. Prof. Ana Angelova Volponi, King's College London, United Kingdom
- Assoc. Prof. Shih-Kai Wang, National Taiwan University School of Dentistry, Taiwan
- Prof. Dr. Ji-Man Park, Seoul National University, South Korea

### C. Stem Cells and Regenerative Dentistry

#### Executive Guest Editor:

- Prof. Adam Ye, Wuhan University, Wuhan, China
- Prof Hanyo Huang, Columbia University, USA

### D. Reimagining Dental Education

#### Executive Guest Editor:

- Prof. Anand Marya Puthisastra University, Phnom Penh, Cambodia
- Dr Siddharthan Selvaraj, Puthisastra University, Phnom Penh, Cambodia
- Dr Dinghan Wang, National Yang Ming Chiao Tung University, Taiwan

### VSIs in Development (Editorial Appointments in Progress)

- *Intelligent Dental Materials*: Executive editor designate: Dr Bradley Christian, University of Sydney, Australia
- *Implementation Dentistry*: Executive editor designate: Prof James Tsoi, University of Hong Kong

# Dental Practice Committee

## General Assembly 2026

This report summarizes all the activities undertaken by the Dental Practice Committee (DPC) from the General Assembly report of September 2025 through June 2026.

### Policy statements 2026

Work is currently underway on two policy statements that will be presented to the General Assembly for approved in 2026.

1. **Basic Dental Education** (revision) led by Dr Marijan Denkovski and Dr Yan Si
2. **Radiation Safety in Dentistry** (revision) led by Dr Antonieta Muñoz Solís

### Dental Practice Committee Forum 2026

The 2026 DPC Forum at the FDI World Dental Congress (WDC) 2026, titled “Violence in Dental Practices,” will feature DPC Chair Dr Doniphan Hammer and committee member Dr Yan Si as speakers.

The session aims to share preliminary findings and current knowledge on patient-to-dental team violence, based on DPC’s ongoing work on this topic as outlined below. It will also provide an opportunity to initiate meaningful discussion on this critical yet under-addressed issue.

### Committee projects update 2026

#### Illegal Dental Practice – one pager

The Committee has built on work from previous years to develop a one-pager guidance document on illegal dental practices and reporting. The document has been finalized and is [available through this link](#).

#### Oral Cavity and Sexually Transmitted Diseases – one pager

The Committee has built on previous work to develop a one-page guide for patients on oral health and sexually transmitted diseases (STDs). The guide is currently undergoing final review and will subsequently made available on the FDI website.

#### DIY dentistry – one pager

In addition to the two one-page guides described above, the Committee plans to engage former DPC member Dr Jina Linton to develop a one-page guide for patients on DIY dentistry. Work on this deliverable has not yet commenced and is expected to be completed by the end of 2026.

#### Violence in the dental practice (project)

The Committee worked extensively to develop a global questionnaire on violence in dental practice. The questionnaire was finalized at the end of 2025 and launched in early 2026. Its objective is to establish a shared understanding of violence in dental settings and to collect data on its prevalence, forms, and management worldwide



To improve participation in regions with lower response rates, the survey was relaunched and translated into Spanish. A total of 96 responses were received, of which 78 complete responses were retained for analysis. Where multiple responses were submitted from the same country, these were consolidated into a single country-level response.

Following this aggregation, the final dataset comprised responses from 65 countries representing all major world regions. The findings will inform discussions at the DPC Forum during WDC 2026. In parallel, drawing on the survey results and research conducted over the past year, the Committee is developing a summary document containing recommendations for National Dental Associations (NDAs) on preventing and addressing violence in dental settings. The document is expected to be finalized by the end of 2026.

## Working Groups and Task Teams reporting to DPC

Full details of all the projects overseen by these Working Groups and Task Teams are included in the *Projects Report*.

- **Oral Health Observatory Task Team:** Dr Michael Sereny (Chair); Prof. Georgios Tsakos; Prof. David Williams.
- **Sustainability in Dentistry Task Team:** Prof. Nicolas Martin (Chair); Dr Mick Armstrong; Dr Duygu Ilhan; Dr Steven Mulligan; Dr Hasan Jamal; Asst. Prof. Donna Hackley.

## Regional Continuing Education (CE) Programme

FDI's Regional CE Programme is designed for qualified dental practitioners and covers five regions: Africa, Asia Pacific, Europe, Americas, and the Middle East. The 2026 programme is globally stable with a slightly smaller number of NDAs supported compared to 2025 as of June. The programme format allows for virtual and in-person courses organisation and additional courses can still be planned for the second semester.

The current geopolitical situation in the Middle East however strongly impacted the delivery of the planned programme in the Middle East region, with the postponement of 5 out of the 6 programmes planned for the first semester.

### CE Programme Overview of planned & discussed courses for 2026 (as of June)

| Region       | Nb of courses planned | Nb of events | Nb of NDAs | Countries                                                                                                  |
|--------------|-----------------------|--------------|------------|------------------------------------------------------------------------------------------------------------|
| Africa       | 15                    | 12           | 8          | Uganda, Zimbabwe, Morocco, Niger, South Africa, Republic of Congo, Nigeria, Ethiopia.                      |
| Asia Pacific | 15                    | 12           | 11         | Cambodia, Malaysia, Hong Kong, Sri Lanka, Vietnam, Macau, Indonesia, India, Papua New Guinea, Fiji, China  |
| Europe       | 8                     | 8            | 8          | Bosnia and Herzegovina, Hungary, Bulgaria, Slovakia, Portugal, Azerbaijan, Türkiye, Kazakhstan             |
| Americas     | 6                     | 5            | 5          | Costa Rica, Chile, Colombia, Honduras, Jamaica                                                             |
| Middle East  | 10                    | 10           | 10         | Syria, Lebanon, Iran, United Arab Emirates, Egypt, Iraq, Jordan, Saudi Arabia, State of Palestine, Bahrain |
|              | 54                    | 47           | 42         |                                                                                                            |

The Regional CE programme is delivered with the leadership of FDI-appointed Regional CE Directors.

FDI Council appoints the Regional CE Directors based on the Education Committee Chair and the Executive Director's proposals. Regional CE Directors are appointed for a 2-year, renewable mandate, without limit to the number of terms of service.

| Year | Appointment                                                                                                                                                                                                                                            |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2025 | <ul style="list-style-type: none"> <li>Americas: Dr. Maria-Fernanda Atuesta Mondragon was appointed in January 2025 to replace Dr. Mauricio Montero.</li> <li>Middle East: Prof. Hani A. Salam</li> <li>Asia Pacific: Dr. Simon Ho Kam Yuen</li> </ul> |
| 2026 | CEP Regional Directors who need to be considered for re-appointment: <ul style="list-style-type: none"> <li>Europe: Prof. Hande Sar Sancakli</li> <li>Africa: Dr. Wendpoulomdé Aimé Désiré Kaboré</li> </ul>                                           |

## Master CE Programme

The FDI Master CE Programme on Aesthetic and Adhesive Dentistry, launched in May 2024 in the Middle East region, has been continuing its global rollout through 2026, with activities planned across all FDI regions.

The programme is structured into five flexible modules, allowing participants to complete training at different times and locations worldwide. It is supported by three industry partners and includes practical, hands-on learning components.

FDI members have the possibility to co-host one or several modules of the programme.

### Course overview as of June 2026

| Country | Date            | Module(s)                                              | Speakers                                    |
|---------|-----------------|--------------------------------------------------------|---------------------------------------------|
| Lebanon | 6 – 7 February  | Indirect aesthetic restorations                        | Dr. Camillo D'Arcangelo                     |
| Egypt   | 9 – 14 February | Full programme                                         | Dr Paulo Monteiro<br>Dr. Ajay Juneja        |
| India   | 9 – 13 February | Full programme                                         | Dr. Eraldo Pesaressi<br>Dr. Deepak Muchhala |
| Serbia  | 17 -18 April    | Direct aesthetic restorations                          | Dr. Carlos Fernandez Villares               |
| Greece  | 8 – 9 May       | Indirect aesthetic restorations                        | Dr. Dimitar Filtchev                        |
| Japan   | 31 May          | Minimally invasive and preventive aesthetic treatments | Dr. Keiichi Hosaka                          |

## Young Dentists Forum

The 4<sup>th</sup> edition of the Young Dentists Forum is scheduled to take place again within the FDI World Dental Congress and is set to unfold over a half-day programme on 5 September in Prague.

The programme will include lectures from emerging and seasoned speakers, an interactive discussion and a networking time. For the second year, a contest amongst FDI members was conducted to select the emerging speaker. 14 applications were received from following countries:

|             |                |                      |
|-------------|----------------|----------------------|
| Turkiye     | Lebanon        | Ireland              |
| South Korea | United Kingdom | Bosnia & Herzegovina |
| Uganda      | New Zealand    | Chile                |
| Morocco     | Uruguay        | Myanmar              |
| Hungary     | Costa Rica     |                      |

Applications were assessed by the Education Committee. Dr Eunhyuk Lee (South Korea) was awarded the first place and the opportunity of lecture within the forum with his lecture titled "Strategies for Aesthetic and Stable Anterior Implants: A Focus on Delayed Placement"

To encourage young speakers to take the stage, the second-best ranked applicant, Dr. Daniel Palkovics (Hungary), has been invited to lecture on the Oral health Campus.

The FDI Young Dentists Forum will feature a keynote lecture by Christina Radics (Spain), "Work-Life Harmony: Myths and Truths for a Balanced Life", followed by the panel discussion "Thriving, Not Just Surviving: Real-Life Skills for Young Dentists." This honest and practical session will explore how young

dentists can navigate the challenges of early career practice, maintain professional and emotional wellbeing, deliver high-quality patient care, and leverage technology to support both clinical excellence and a sustainable work–life balance. The forum will conclude with a networking cocktail, providing attendees with an opportunity to connect and exchange with peers and experts.

For the first time this year, FDI members were also given the opportunity to share national initiatives offered to young dentists, through the FDI Best Young Dentists Initiative Award.

This Award will recognise and reward member-led initiatives implemented in 2025 that demonstrate excellence in engaging young dentists at national level. Six applications were received from National Dental Associations in Antigua & Barbuda, Costa Rica, India, New Zealand, Tanzania, and the United Kingdom. The award winner will be announced at the NLO Forum in Prague.

## Oral Health Campus

The FDI Education Committee will organize two webinars on the Oral Health Campus during the second semester.

The 2026 Young Dentists Forum will be available to watch on demand on the campus from October 2026 and, to encourage young speakers to take the stage, the second-best ranked applicant of the FDI Young Dentists Speaker Contest 2026, Dr. Daniel Palkovics (Hungary), has been invited to lecture on the Oral health Campus.

Since 2024 members have the possibility to download a selection of webinars from FDI Campus and broadcast them on their national platforms. The Polish Dental Chamber is the first member to take this opportunity and has been broadcasting webinars on its national platform since 2025.

## FDI Regional Dental Congress



FDI will hold its Regional Dental Congress in partnership with the Kenya Dental Association in Mombasa, Kenya, from 21–23 October 2026.

The return of an FDI Regional Dental Congress to the African continent is a significant moment for our organization and for the global oral health community.

This congress will bring together dentists, members of the dental team, academics and researchers from across Africa and beyond. Through a comprehensive scientific programme, participants will have the opportunity to exchange knowledge, discuss emerging developments in dentistry and build connections that support both professional advancement and improved oral health outcomes.

## FDI World Dental Congress



The 2026 FDI World Dental Congress (WDC) will take place from 4 to 7 September in Prague jointly hosted with Czech Dental Chamber.

8000 delegates and visitors are expected to join the 4-scientific programme and exhibition.

The programme will count with over 50 international lecturers and over 100 sessions. It has been designed around the major transformations shaping dentistry globally, with a strong focus on artificial intelligence and digital workflows and their impact on clinical practice. AI-powered live translation will be available in 16 languages, marking FDI WDC 2026 in Prague the first FDI congress edition where such a level of accessibility is offered.

The 2027 WDC will take place from 21 to 24 October 2027 in Mumbai, India and will be co-hosted with the Indian Dental Association. The programme will place a strong emphasis on a world-class scientific programme focused on the future of dentistry, with key themes including artificial intelligence, digital workflows, preventive care, and global oral health policy.

In addition to scientific sessions and hands-on workshops, the congress will also feature sports and dynamic innovation hubs that move far beyond traditional congress programme and exhibition spaces.

The detailed programme is currently being developed and will be published by the end of 2026. Registration and abstract submissions will open in the fall.



# Membership Liaison and Support Committee (MLSC) Report

## Connecting with Dental Associations

MLSC Members are devoted to global collaboration, aiding members, and amplifying the reach and influence of FDI's work acting as the main points of contact for the FDI Member Associations within designated geographic regions. Following the formation of the new committee after the 2025 election and appointment process, members were assigned regions of contact as follows: Dr. Irene Marron-Tarrazzi — Latin America; Dr. Makiko Iwasaki — Asia-Pacific; Dr. Dasom Kim — Africa; Assist. Prof. Antoine Choufani and Dr. Sarkis Sözkcs — Europe; and Dr. Amanda Johnston — North America, Australia, and New Zealand.

## MLSC representation in Task Teams and Working Groups

Dr Sarkis Sözkcs has served as MLSC's representative in WOHD TT since September 2025.

## Working with National Liaison Officers (NLOs)

The NLO Report template was revised to better align with FDI's data collection needs and improve the comparability, measurability, and usability of information received from member associations. The revised template includes two data sections: one for publication in the General Assembly Binder and one for MLSC internal use.

The updated format will facilitate more efficient data analysis and support the development of regional dashboards and graphs, helping identify trends, shared challenges, and emerging priorities across member associations. Insights generated from the reports will support discussions during the NLO Forum and help inform future FDI initiatives and policy development.

To date, 111 NLO reports have been received, and their compilation is available on the General Assembly webpage.

The 2026 NLO Forum agenda, developed from feedback gathered through NLO reports and previous Forums, will focus on AI integration in National Dental Associations and membership engagement and retention.

## FDI Member Events calendar

FDI Member Events Calendar is constantly updated by the information received from FDI Member Associations: [Events calendar](#) | [FDI](#).

## Travel Grant 2025 - 2026

The aim of the Travel Grant project is to provide financial assistance to representatives from Low and Low-Middle Income country members to attend the World Dental Parliament.

Travel Grant recipients from thirteen National Dental Associations attended the World Dental Parliament in 2025: Afghanistan Dentists' Association, Bangladesh Dental Society, Ordre Nationale des Chirurgiens-Dentistes de la République Démocratique du Congo, Ethiopian Dental Professionals' Association, Kenya Dental Association, Lebanese Dental Association, Association Marocaine de Prévention Bucco-dentaire (AMPBD), Myanmar Dental Association, Nepal Dental Association, Association Rwandaise des Chirurgiens-Dentistes et Stomatologues, National Dental Association of Somalia, Sri Lanka Dental Association and Uganda Dental Association.

Eighteen Travel Grant applications were submitted by FDI Members in 2026, and MLSC allocated twelve grants to recipients from the following Associations: Afghanistan Dentists' Association, Association des Chirurgiens-Dentistes du Bénin(A.C.D.B.), Société Congolaise des Odontologues, Stomatologues et Chirurgiens Maxillo-Faciaux, Ghana Dental Association, Kenya Dental Association, Lebanese Dental Association - Tripoli, Nigerian Dental Association, Papua New Guinea Dental Association (PNGDA), National Dental Association of Somalia, Syrian Dental Association, Tanzania Dental Association and Zimbabwe Dental Association.

## Travel Grant promotional video

As part of ongoing efforts to expand participation in the FDI Travel Grant Program, the MLSC created a promotional video featuring testimonials from previous recipients. The initiative was designed to raise awareness of the program, encourage applications from a broader range of member associations, and support more equitable access to the FDI World Dental Congress (WDC). By featuring testimonials from previous recipients, the video helps potential applicants better understand the opportunities offered by the program and encourages greater participation. The [Travel Grant video](#) was published on the NLO Resources webpage and distributed with the invitation for 2026 Travel Grant applications.

## “Member Supports Member” project 2026

The "Member Supports Member" Project (MSM) allows member National Dental Associations and their individual members to support fellow member associations by covering their annual membership fee, providing assistance for attending the World Dental Parliament, or both. As of 2026 changes were introduced to the project's rules making the individual support anonymous.

Three National Dental Associations received support in form of their 2026 membership fees payment from anonymous representatives of the FDI Member Associations:

- Association des Chirurgiens-Dentistes du Bénin, (A.C.D.B.)
- Botswana Dental Association
- Papua New Guinea Dental Association (PNGDA)

Two National Dental Associations provided support to fellow member associations:

- Hong Kong Dental Association provided support to Lao Dental Association by paying its 2026 membership fee.
- Turkish Dental Association provided support to Syrian Dental Association by paying its 2025 membership fee.

## Continuous Connection and FDI Activity

MLSC members circulated to member associations in their designated geographic areas: the Vision 2030 survey, the survey on Violence in Dental Practices, information on the Young Dentists Forum Speaker contest and the promotion on WHO and FDI WDC. As part of the MLSC Policy Statement (PS) promotion initiative, they also distributed the newly approved PSs and translations to FDI members.



# Science Committee Report

## General Assembly 2026

Generated on 4 June 2026

This report summarizes all the activities undertaken by the Science Committee since September 2025. The work of the Science Committee is guided by the FDI Strategy and aligns with its *Vision 2030*. The Committee also provides evidence in support of FDI's projects and advocacy efforts where appropriate. Science Committee has already been collaborating with the other Standing Committees and will continue to do so.

## Science Committee Fora

### 2026

The 2026 Science Committee Forum entitled “**Does truth still matter? The role of science in dentistry**” will be held at the 2026 FDI World Dental Congress in Prague on **Sunday, 6<sup>th</sup> September**, from 15.30 to 17.30 in Hall D8–9. The session will be moderated by **Prof. Helen Whelton** (IADR representative on the Science Committee) and the following speakers are presenting:

- **Dr Donald Chi** (Australia) on “*The Potential of Public Scholarship to Address Fluoride Hesitancy*”
- **Dr Marcello Araujo** (United States of America) on “*Integrating Evidence-Based Dentistry into Dental Education for Optimal Practice*”
- **Dr Alonso Carrasco-Labra** (United States of America) on “*From Evidence to Action: AI Living Guidelines to Counter Misinformation in Clinical and Public Health Practice*”

### 2027

In 2026, the Science Committee Forum will be titled “**New medications, new promises and new problems: Managing oral complications during systemic therapy**”, with Prof. Kivanç Bektas Kayhan serving as chairperson.

## Policy Statements

In 2026, two Science Committee Policy Statements will be presented at the General Assembly in Prague, including:

- **Research and Scientific Integrity in Oral Health** (*New*), led by Prof. Falk Schwendicke
- **Bisphenol A in Dentistry** (*Revision*), led by Prof. Jeffrey Platt

## Paper on e-cigarettes and vaping

The paper on electronic nicotine delivery systems (ENDs) and oral health titled “**To Vape or Not to Vape: Oral Health in the Age of Electronic Nicotine Delivery Systems and Electronic Non-Nicotine Delivery Systems**” has been published in the *International Dental Journal* (IDJ). To promote the paper [an episode](#) featuring lead author Prof. Purnima Kumar was published in FDI's *Dental Check-up Podcast*.

## FDI-IADR Position Statement on Fluoride

FDI and IADR headquarters have coordinated to finalize the development timeline for the joint Position Statement on Fluoride. Representing FDI on the drafting task team is Prof. Helen Whelton, who serves as the IADR Representative on

the FDI Science Committee. The drafting group also includes Prof. Loc Do and Assoc. Prof. Livia Tenuta, representing IADR.

The draft Position Statement is scheduled for IADR approval by June 2027. Following approval by IADR, formal adoption will be deferred pending endorsement by FDI at the 2027 General Assembly. Once adopted by both organizations, the Position Statement will be jointly published, with simultaneous release in the *Journal of Dental Research* and the *International Dental Journal*.

## Committee Task Teams

### Preventing Antimicrobial Resistance and Infections Task Team

The Preventing AMR and Infections Task Team welcomes the inclusion of “universal access to....quality oral healthcare” as a measure to strengthen infection prevention and control within the **WHO Global Action Plan on Antimicrobial Resistance (GAP-AMR) 2026–2036**, which was adopted at the 79<sup>th</sup> World Health Assembly. This milestone reflects sustained advocacy by FDI to ensure oral health is recognized and integrated within global and national AMR strategies.

The “*Tackling Antibiotic Resistance: What Should Dental Teams Do?*” **Massive Open Online Course**, originally launched in 2021, has been updated by the task team to reflect new evidence and policy direction following the 2024 UN High-Level Meeting on AMR.

The task team is also relaunching the **Global Antimicrobial Resistance Dental (GARD) Researchers Network**, with plans underway to expand engagement and strengthen collaboration among researchers..

In addition, the task team has finalized a manuscript analyzing findings from a **2023 FDI Member Survey**.

### Dental Materials and Products Surveillance Task Team

On behalf of FDI, the Dental Materials and Products Surveillance Task Team (DMPSTT) prepared and submitted FDI's response to the European Chemicals Agency (ECHA) public consultation on the proposal to revise the harmonized classification of sodium fluoride under EU chemicals legislation. The consultation, driven by an ANSES (France) dossier proposing new hazard categories, including reproductive toxicity and endocrine disruption, closed on 16 January 2026.

Given the potential for downstream regulatory implications for products containing sodium fluoride, including oral health applications, FDI's submission focused on the totality of available scientific evidence, mode of action, exposure assessment, and real-world relevance. IADR kindly shared its comprehensive response to support alignment, and the DMPSTT led FDI's contribution to ensure consistency of scientific messaging while reflecting FDI's mandate. Prof. Helen Whelton, a member of the DMPSTT and FDI's expert for the joint FDI–IADR position statement on fluoride, provided additional subject-matter input.

Both FDI and IADR submitted separate, coordinated responses and are awaiting the outcome of ECHA's review. ECHA [published](#) the comments received during the sodium fluoride CLH consultation (see [here](#)) as well as the attachments (see [here](#)).

### Human papillomavirus (HPV) Task Team

*Please refer to the FDI Public Health Projects report.*

# Public Health Committee Report

## General Assembly 2026

This report summarizes all the activities undertaken by the Public Health Committee (PHC) from the General Assembly report of September 2025 through June 2026.

### Policy Statements

Two policy statements will be presented to the General Assembly in 2026 and were under review by member national dental associations (NDAs) at the time of writing this report:

1. **Lifelong Oral Health** (Revision) led by Prof. Youn-Hee Choi
2. **Minimal Intervention Dentistry (MID) for Managing Dental Caries** (Revision) led by Prof. Chun-hung Chu

### Public Health Committee Fora

#### 2026

The PHC-CDO Forum 2026 will take place on **6 September**, from **09.00–10.50 am** in **Room D7**. The title of the forum will be ***Oral Health for All: Uniting Global Action on the Road to UHC 2027***.

The PHC Vice-Chair Simona Dianišková will chair the session, and the speakers and topics include:

1. **Dr Dympna Kavanagh** (Chief Dental Officer, Ireland), will describe the international advocacy, diplomacy, and coalition-building efforts that secured meaningful inclusion of oral health in the 2025 UN High-Level Meeting Political Declaration on Non-Communicable Diseases and Mental Health.
2. **Dr Thanasak Thumbuntu** (Director of National Health Security Regional Office (NHSO), Thailand), will explain how Thailand has translated global oral health commitments into practical reforms in financing, service delivery, and prevention to expand equitable access to oral healthcare under universal health coverage.
3. **Dr Alexandre Deza** (Deputy Secretary-General of the French Union for Oral Health, France), will discuss how France has strengthened oral health within universal health coverage by shifting from reimbursement-focused dental care to prevention, early intervention, and equitable access through recent policy reforms.

#### 2027

The PHC-CDO Forum 2027 will focus on the growing global challenge that tobacco use and vaping pose to oral health.

### Committee projects update 2026

#### Educational module for other healthcare professionals

This project seeks to provide basic oral health knowledge and oral health care skills to non-dental healthcare professionals to enable them to include essential oral healthcare services in their routine work.

Full details are included in the *Projects Report*.

## Tobacco Cessation

This project aims to promote tobacco cessation and overall health by disseminating FDI resources in collaboration with NDAs, increasing awareness of the critical role oral health professionals play in tobacco cessation, and enhancing their knowledge and skills to deliver effective interventions in dental settings. Additionally, it seeks to raise public and professional awareness of the integral connection between oral health and overall health and well-being. Full details are included in the *Projects Report*.

## Refugee Oral Health Promotion and Care

A session titled “Oral Health in Fragile Settings: Integrating Care Within NCDs, Primary Health Care, and Humanitarian Response” is scheduled to take place on 6 September at the FDI World Dental Congress. The session will be moderated by Associate Professor Elizabeth Shick, and the speakers will include Dr Elham Kateeb (FDI Council Member), Dr Khaleda Zaheer (CEO of the Refugee Crisis Foundation), and Dr Hyewon Lee (Director of the Global Maternal and Child Oral Health Center at the Seoul National University Dental Research Institute).

FDI has renewed its engagement with UNHCR through joint communications marking World Refugee Day on 20 June. As part of this ongoing collaboration, FDI will speak at UNHCR’s Global Public Health Webinar on 15 July and will emphasize that access to oral healthcare is essential to promoting the health, well-being, and dignity of refugee populations.

## Grants overseen by PHC

- **World Dental Development Fund (WDDF):** The application deadline for the WDDF is 15 June each year. Funds for 2026 have been allocated to the selected countries, Kenya, Nigeria, and Tanzania, and project implementation commenced in January 2026. Applications for the 2027 cycle are being reviewed by PHC, and the winners will be selected at Congress. Full details are included in the *Projects Report*.
- **Smile Grant:** The application deadline for the Smile Grant is 1 February each year. The winners have been selected by PHC and will be announced at the World Dental Congress 2026 during General Assembly A.

## Working Groups and Task Teams reporting to PHC

- **Oral Health for an Ageing Population Task Team:** Prof. Kakuhiro Fukai (Chair); Prof. Judith Jones; Dr Sophie Darteville; Prof. Hiroyuki Hirano; Prof. Gerry McKenna.

## 5A. Letter from the Chair of the Governance Task Team, Dr Doniphan Hammer

Geneva, 6 July 2026

**To: FDI General Assembly Delegates**

**Re: Governance Task Team Report - Proxy Voting**

Dear Presidents and Representatives of FDI Regular Members, Dear Colleagues,

On behalf of the Governance Task Team (GTT), I am writing to let you know that, at our next General Assembly in Prague, I will present a project the GTT has been developing over the past several months: a proposal to establish a clear and fair framework for proxy voting at the FDI General Assembly.

The starting point for this work is a simple observation shared by many of you: our General Assembly is strongest when every Regular Member has a voice, regardless of the size of its delegation. Whether your association is represented by a single delegate or by a large team, your vote matters equally, and your presence — in person or through a trusted proxy — is what gives our decisions legitimacy.

The proposal we will present seeks to make that participation easier and more secure. It offers practical solutions for the moments when attending in person is simply not possible — for reasons of cost, environmental considerations or force majeure — while preserving the integrity, transparency, and fairness of our voting process. It is designed to serve small delegations and large ones alike, and to reinforce, not replace, the value of being present at the GA.

This project is, above all, a collective one. It has been shaped through discussion among GTT members and will continue to be refined with your input. What will be presented in Prague is a direction, not a finished text: it will remain open to discussion and amendment at the General Assembly. We see this as federative work in the truest sense — built with our members, for our members.

To allow the proposal to be tested responsibly, it is intended to be introduced for an initial period of three years, after which its implementation will be formally evaluated so that the FDI can decide, together, on its future.

We look forward to presenting this project in detail and hearing your views in Prague. In the meantime, we warmly encourage you to approach this initiative with the same spirit of collaboration and trust that has guided its development.

With my best regards,

Dr Doniphan Hammer  
**Chair, FDI Governance Task Team**

## 5A. PROXY VOTING

The primary aim of FDI is to have its members present at the General Assembly (GA) meeting. However, to ensure equitable representation of Regular Members with unequal resources (travel cost), streamline governance without sacrificing debate and consider issues of environmental responsibility and carbon footprint, it is becoming necessary to consider the issue of Proxy Voting.

Allowing Proxy Voting under defined conditions may improve participation and ensure continuity of governance without compromising the integrity of the voting process.

### A Three-Year Pilot Project

**The proposal is that Proxy Voting as presented in this document, if adopted by the General Assembly, be implemented as a pilot project for a period of 3 years, commencing on the date of their adoption.**

- During the pilot period, the proxy voting provisions shall apply as adopted by the GA.
- The GA and the Council shall monitor the implementation of the pilot project and collect information on its use, including the number of proxy requests, the circumstances under which proxies were granted, Regular Members' participation, and any operational or governance issues arising during the pilot period.
- Prior to the conclusion of the three-year pilot period, the Council shall present a report to the General Assembly evaluating the effectiveness of the proxy voting provisions and recommending whether they should:
  - be adopted as permanent solution to be included in the GA voting process in FDI Constitution;
  - be amended; or
  - be discontinued.

**Unless the General Assembly resolves otherwise, Proxy Voting provisions from this document shall expire automatically at the end of the three-year pilot period.**

### Definitions of Voting Members ("Delegates") and Regular Member according to the FDI Constitution:

Voting members of FDI ("**Delegates**") are members from FDI Regular Member Associations. A Delegate is a person appointed by a Regular Member Association to vote at any General Assembly Meeting, or to vote on resolutions presented by the Council for a remote vote.

**Regular Members** are national dental associations which are recognized by FDI as principal associations and significant representatives of the legal and certified dental profession in their own countries, who have fulfilled the requirements of membership. Other categories of FDI Membership (Associate, Affiliate and Supporting) do not have voting rights at the FDI General Assembly.

### Definition of **Proxy** according to the American Institute of Parliamentarians:

*“A proxy is a written authorization empowering another person to act in a meeting, for a member who signs the proxy. This means that a particular person is authorized to act on behalf of an absent member, including voting. The proxy holder may act in all ways for the absent member, including speaking in debate and making motions.”*

### Definition of **“Voting by Proxy”** according to the American Institute of Parliamentarians:

*“Voting by proxy means that a particular member or person is authorized to cast the vote of an absent member in a meeting or convention. The term “proxy” may mean either the statement authorizing a member to cast the vote of the member signing it or the member who cast the vote. The proxy voter may cast one vote for each proxy held.”*

*In nonprofit organizations, voting by proxy is legal in most states only if it is authorized by statute and provided by the charter and bylaws of the organizations. Directors of board members cannot vote by proxy in their meetings, since this would mean the delegation of a discretionary legislative duty which they cannot delegate.*

*A proxy may be in almost any form as long as its meaning is clear. It may be limited to one meeting, or motion, or issue, or person, or time, or it may be unlimited. All proxies, however, must conform strictly to the provisions of the statutes and charters, and to the bylaws of the organizations. The use of proxies in organizations in which all members have an equal vote is ill advised and is never permissible unless specifically authorized by the bylaws, charters, or statutes.*

*Other definitions of **“Voting by Proxy”** presented at the meeting: “Proxy voting is a mechanism that allows delegates to delegate their voting rights to another delegate of the same NDA during General Assemblies.”*



| Pros of Voting by Proxy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Cons of Voting by Proxy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• <b>Convenience and Accessibility:</b> Members who cannot attend meetings in person can still have their voices heard.</li> <li>• <b>Increased Participation and engagement:</b> More voices heard regardless of physical attendance, particularly for small members.</li> <li>• <b>Efficiency:</b> Streamline decision-making processes without needing every member physically present.</li> <li>• <b>Cost Savings:</b> Reduces the need for large-scale in-person meetings and logistics, saving money and travel expenses</li> <li>• <b>Environmentally friendly:</b> Reduces travel for members and, therefore, reducing carbon footprint</li> <li>• <b>Confidence:</b> Transparent and fair proxy voting procedures can boost trust amongst members and potentially improve the efficiency.</li> </ul> | <ul style="list-style-type: none"> <li>• <b>Complexity:</b> Not widely adopted by associations due to its complexity. To be successfully implemented a universal and fair approach must be defined.</li> <li>• <b>Disconnection:</b> Members delegating votes might not fully understand the issues, leading to uninformed decisions on their behalf. Leads to reduced attendance, poor or reduced debate, reduced personal interactions and relationships building.</li> <li>• <b>Concentration of Power:</b> Proxy Voting can lead to a small number of proxy holders gaining significant influence, undermining true democracy.</li> <li>• <b>Vote Manipulation and mistrust:</b> Proxies might be influenced or incentivized to vote in ways that don't reflect the true interests of members who delegated votes. They may not vote in the best interest of the member but rather for their own agenda. Any perceived manipulation can damage reputation of FDI and members.</li> <li>• <b>Conflict of Interest:</b> Proxies could face conflicts if they prioritize personal relationships or benefits over the proxy giver's preference.</li> <li>• <b>Reduced Accountability:</b> When votes are delegated, the sense of personal responsibility can diminish, making it harder to hold individuals accountable for poor decisions.</li> <li>• <b>Legal and Compliance Issues:</b> Organizations must ensure proxy processes comply with regulations, which can increase legal costs. In case of FDI it will have to be checked with a Swiss Lawyer. In some countries notarized letters are necessary.</li> <li>• <b>Risk of Poor Decision-Making:</b> If proxy voting leads to uninformed or biased outcomes, it could result in poor strategic decisions, harming the organizational performance in the long term.</li> <li>• <b>Impact:</b> on small delegations is the same in percentages as for the big delegations.</li> </ul> |

## Rules Governing Proxy Voting and Quorum

A proxy vote cast by a Regular Member is authorized only if the Regular Member is up to date on membership dues. *Only FDI Regular Members in good standing may cast votes via voting members of the delegations ("delegates").*

Proxy Vote is based on trust, confidentiality and independence.

Except for Regular Members that are part of a National Committee, a Regular Member may appoint any other Regular Member from any other country as its proxy to exercise its voting rights.

Quorum: The quorum for the transaction of official business is based on physical representation at the General Assembly. Proxy voting does not count towards establishing the quorum and it may be exercised once a quorum is confirmed.

The quorum for the transaction of official business at any meetings of the General Assembly is that 30 Regular Members or National Committees, where applicable, are represented at an in-person meeting of the GA.

## Proxy Voting within one delegation

**Allow proxies internally within one delegation of a Regular Member, up to a maximum 2 proxy votes to 1 delegate ratio.** *The request should come from the respective Regular Member. The possibility of allowing this ratio would allow larger delegations to reduce their travel costs by 50% or more.*

Example, if a Regular Member has a right to 6 votes, 3 delegates present at the meeting, would be able to cast 6 votes. However, if a member has 7 delegates, 3 voting members could cast all votes.

**Within a delegation of one Regular Member, a delegate may represent up to 2 proxy votes from the same Regular Member association.**

**Using Proxy Vote within one delegation does not prevent a delegate of a Regular Member casting a proxy vote of other Regular Members.**

**The eligibility of Proxy voting within one delegation would be revoked if a Regular Member remains absent for three consecutive years.**

## Proxy Voting for members with 1 vote only

**Allow Regular Members that have the right to 1 vote only, to nominate a Regular Member from another country to cast the vote on their behalf. This option would be limited to one General Assembly (GA) in a period of 3 years. *(they may use this option once in 3 years)***

A Regular Member supporting a Regular Member from another country through “Member Supports Member” project cannot allocate their proxy to the same Regular Member benefiting from their support.

Any Regular Member may receive only one proxy vote for the duration of one GA meeting.

*This does not apply to Regular Members who have 2 votes or more, they would have to send at least one delegate, and proxy would apply internally within one Regular Member delegation on up to a maximum of 2 proxy votes to 1 delegate ratio.*

## Proxy Voting within National Committees

**From FDI Constitution: “Regular Membership may be granted to more than one national dental association from the same country, provided a National Committee is agreed and maintained.”**

Within National Committees that have the right to more than 1 vote, the allocation of votes is governed by the relevant National Committee Agreement.

For example, if one National Committee has 2 associations sharing 5 votes and the distribution of those votes is determined by mutual agreement under the National Committee Agreement, a Regular Member may pass their votes only to another Regular Member from the same country that is a party to the same National Committee Agreement. They could proxy up to a maximum of 2 proxy votes to 1 delegate ratio.

For the National Committees that are entitled to only 1 vote, it was proposed that, where a Regular Member is unable to attend the General Assembly in person, its proxy vote may be assigned only to another Regular Member from the same country that is a party to the same National Committee Agreement.

According to FDI Constitution, in the event of disagreement within a National Committee, the matter should be referred to the Council for consideration and recommendation to the GA. However, in case of a proxy voting, the system should be administratively practical and not impose an undue administrative burden on the Council. Therefore, If the Regular Members that are parties to the National Committee Agreement cannot reach agreement, or if a Regular Member chooses not to assign its proxy vote to Regular Member from the same National Committee, their votes shall not be exercised by proxy.

**This option would be limited to one GA in a period of 3 years. *(they may use this option once in 3 years)***

## Proxy Voting in case of “Force Majeure”

If none of the delegates of a Regular Member are able to attend the GA in person due to government-mandated travel restriction, force majeure or other official travel ban that Regular Member may, for the affected GA only, allocate all its votes to only 1 delegate from another Regular Member attending the GA in person.

"Force majeure as used herein means any unforeseeable and irresistible act of nature, any act of war (whether declared or not), invasion, revolution, insurrection, terrorism, or any other acts of a similar nature or force, provided that such acts arise from causes beyond the control and without the fault or negligence" of the FDI Member.

*(Force Majeure Definition in place in this proposal is sourced from the United Nations Contract For The Provision of Goods.)*

**This arrangement may be used until the situation has been resolved.**

If all visa applications between the two countries are systematically denied, it will be treated as a case of “*Force majeure*”. However, if the denial is personal and specific to the individual, it cannot be considered as “*Force majeure*” reason.

## General

- If approved, a standard agreement and documentations for proxy voting will be developed by the Head Office, approved by the Council and distributed to GA including the transparent annual list of proxies.
- The Proxy Voting would apply to voting only at the General Assembly meetings.
- Any proxy vote may only be given to delegate(s) attending the GA in person.

**-END-**

## 6.1 Report by the Special Committee on Membership Subscription Formula

### Introduction:

Since the last General Assembly of the FDI in September 2025 in Shanghai, the Special Committee on Membership Subscription Formula has met a total of four times (5 November 2025, 7 April 2026, 4 June 2026, 23 June 2026) and provided a status report during the webinar on 7 April 2026. The purpose of these meetings was to carry out the tasks assigned by the General Assembly, which were as follows:

### Mandate from the General Assembly 2025:

The General Assembly tasked the Special Committee with presenting several concrete proposals for a revised regulation of membership fees.

The new formula should ideally integrate key elements such as the wealth factor, the number of members, and the cost per (represented) member, while also considering the complexity of these factors and their interactions.

The General Assembly explicitly stated that a wealth factor must be a core component of any proposal, as such a factor is used in all known contribution formulas of comparable organizations worldwide.

In addition, the German Dental Association (BZÄK) was asked to provide technical support through its Statistical Department.

### Working Method:

During its meetings, and with the involvement of the Statistical Department of the BZÄK, the Special Committee analyzed and discussed various models for calculating FDI membership fees. The aim was to review the existing contribution structure, evaluate possible adjustments, and develop scenarios that ensure both financial fairness and political feasibility within the General Assembly.

The starting point of the discussions was a comparison between the “basic contribution formula” (without reductions) and the currently applied FDI formula, including the reductions provided for in the Constitution.

The basic formula is based on three factors:

$$\text{Number of members} \times \text{Wealth factor} \times \text{Multiplier (“x”)}$$

The multiplier is set annually by the General Assembly and is determined by the organization’s budget requirements (currently about one-third of the FDI’s total budget).

The analysis showed that the two reductions currently applied already provide significant financial relief for the largest contributors. At the same time, it was found that abolishing the minimum contribution would lead to lower fees for those countries currently subject to the minimum contribution.

Another key finding was that any deviation from the pure basic formula ultimately represents a political decision that benefits certain groups of members while placing a greater burden on others.

A financial risk to FDI was identified that if any single NDO is contributing a very high percentage of revenue, this carries a significant risk. It was identified that the UN manages this risk by capping member contributions at 22% of member revenue.

## Discussed Scenarios:

A total of ten different scenarios were examined during the committee's deliberations, including:

- complete elimination of existing discounts ("Back to Basics"),
- an average contribution per member ("British Solution"),
- additional discounts for the largest contributors,
- introduction of a maximum contribution per member,
- various models in which Gross National Income (GNI) is replaced by other factors.

The discussion of these very different scenarios made it clear that each model has advantages and disadvantages and favors different groups of member organizations.

The possibility of a so-called "Dental GNI," a wealth indicator specifically tailored to the dental sector, was also briefly mentioned.

## Tasks for the Committee:

The Special Committee additionally instructed the FDI administration and the Statistical Department of the BZÄK to complete three central tasks during a special meeting in Berlin:

1. a deeper analysis of the components of the basic formula and the existing discount systems
2. examination of a "Dental National Income" (DNI) as a possible alternative to the current GNI
3. further development of various scenarios, particularly considering an actual contribution ceiling

### **Adjustment Options within the Basic formula**

As previously outlined, the existing contribution formula is based on three components:

#### **Number of members:**

The FDI Constitution clearly defines how the number of members is to be determined and reported. Only active dentists who are subject to membership fees to their home organizations are considered.

The reported figures are reviewed annually by the FDI administration. In cases of unusual deviations or unrealistic data, established verification procedures—including internal audits—apply. Therefore, there is practically no room for changes to this factor.

#### **"Wealth Factor (GNI)"**

The discussion in Berlin showed that no reliable method for determining a "Dental GNI" is available in the short term. Moreover, nearly all alternatives discussed so far ultimately rely on the existing GNI or on categorizations derived from it. For this reason, it is recommended to continue using the current linear GNI model rather than introducing complex categorizations.

#### **"Multiplier" ("X")**

The multiplier is determined directly by budget requirements. Since membership fees currently finance about one-third of the total FDI budget, there is only limited room for changes unless the FDI's budget structure fundamentally changes. This question, however, does not fall within the Special Committee's remit.

### **Adjustment Options outside the Basic formula**

In addition to the formula's core components, several instruments exist to adjust the contribution burden:

- special discounts for certain member organizations,
- minimum contributions at the organizational or member level,
- maximum contributions at the organizational or member level,
- a general contribution ceiling.

All these instruments require a political decision by the General Assembly. Their introduction or modification requires sufficient support and majority approval.

### **Possible Future Scenarios:**

To develop a model capable of achieving majority support in the General Assembly, a combination of various adjustment instruments appears sensible.

For this purpose, an Excel-based calculation tool was created. It allows simulation of different changes and shows the financial impact of individual measures and various combinations. This analysis can serve as a basis for developing balanced and politically viable reform proposals for the future design of FDI membership fees.

### **Conclusion:**

The discussions showed that the existing formula is fundamentally comprehensible and transparent. At the same time, various political levels exist that can influence the distribution of the contribution burden. Since every change creates winners and losers, the challenge will be to find a compromise that ensures both financial fairness and the necessary support within the General Assembly.

## **Summary of the Meeting of the Special Committee on Membership Fees on 23<sup>rd</sup> of June 2026:**

During this meeting, the SC discussed the following concrete measures to be suggested to the General Assembly:

To improve the existing formula, the committee suggests removal of the two reductions for participating large organizations with 50.000 members or more - namely, the 50% per-capita reduction for each member represented beyond 50.000 and the 10% reduction on the organization's total membership dues.

The following formula, which is already in use, could therefore apply to the calculation of contributions:

$$\text{Number of members represented by the organization} \times \text{GNI} \times \text{X-factor}$$

This formula could be supplemented by:

Capping maximum contribution per organization at 22% of the total membership dues of all members (which matches the UN model). This element is newly introduced and should regularly be checked.

A minimum contribution (this element is retained). It is proposed to increase the minimum contribution per organization. The committee proposes raising this to at least CHF 275.



A minimum contribution per represented member of the participating organizations is introduced (new element). It is proposed to set the minimum contribution at 0.10 CHF.

Both the minimum contribution per organization and the minimum contribution per represented member of the participating organizations are to be adjusted annually by the General Assembly.

The suggested maximum fee per represented member of the participating organizations was not supported by the majority of SC members.

## Justification:

Following the task given by the General Assembly, the SC suggests to simplify the existing formula by removing the two currently applicable reductions.

In addition, we suggest to introduce a maximum fee, currently 22%, implemented as a real ceiling, similar to the system used by the United Nations.

We also propose to the General Assembly a moderate increase in the minimum fee of at least 5% and ask the General Assembly to consider this amount annually as a fair balance between the different member organizations.

To both reflect the special situation in the different member countries and try to address the exceptionally large discrepancy in per-capita fees in the context of the economic situation of dental practices worldwide, we suggest introducing a minimum fee per dentist represented, which should be reviewed annually. The SC proposes starting with a minimum fee of CHF 0.1 per represented dentist.

This amount has been chosen so that it has no net effect. In other words, the introduction of this provision will not result in any organization being better or worse off. However, through annual discussion, this provision can minimize the large variance in per-capita contributions in the event of a disproportionately large increase.

The presentation will be presented at the "General Assembly A" in Prague, in the afternoon of 4<sup>th</sup> September. The debate and discussions will take place at that time.

We look forward to seeing you soon.

On behalf of the Special Committee on Membership Subscription Formula,  
Respectfully submitted,

Florian Lemor  
**Chair**

## 6.2 Report by the Special Committee on World Dental Parliament

### Background

In 2024, the General Assembly resolved to establish a Special Committee to explore ways to facilitate remote participation simultaneously alongside face-to-face participation (further in the text - hybrid participation) for FDI delegates in the Open Forum, General Assembly and NLO Forum in situations in which in-person attendance is not feasible or possible for some individuals.

### Workplan September 2025 – June 2026 and Members' feedback

Since its first report to the General Assembly in Shanghai in 2025, the Committee has continued to hold virtual meetings. Between October and November 2025, a survey was conducted to gather members' feedback and better understand their expectations regarding the preferred duration, format, and agendas of the main World Dental Parliament (WDP) meetings.

The Committee is grateful to the member associations that responded to the survey for their time and valuable input, which helped inform the development of possible shortened meeting schedules. The results of the survey were circulated to members on 17 February 2026.

#### The requests of most of members were to:

- ☐ Slightly shorten the duration of the Open Fora, where possible. This would mean having the possibility to watch video presentations of the candidates for Standing Committees online in advance of the voting and in addition to available nomination documents. (This does not eliminate the Q&A Session for the positions of President-elect, Treasurer and the Speaker of the GA).
- ☐ Dedicate General Assembly meeting to key reports only, while allowing sufficient time for debate and voting.
- ☐ Make meeting materials available in written form or in a video format for selected presentations (e.g. IDJ and Standing Committee reports, various projects, Vision 2030 and potentially some Executive reports (depending on duration of the schedule)).

***While meetings of the Standing Committees, Sections, Regional Organizations and other affiliated groups are not in the scope of the project, the delegates should have these networking opportunities in mind when considering potential changes to the WDP schedule.***

### Required System and technical solutions:

To further facilitate the work of the Committee, the office issued Request for Proposals (RFP) to 8 suppliers for potential meeting in two cities:

1. Geneva, Switzerland which serves as a benchmark for the costs;
2. Mumbai, India - the host the FDI World Dental Congress in 2027.

Suppliers from India and Europe were surveyed to ensure a competitive approach. Following the RFP, offers were received from seven companies covering services for video recording, broadcasting, platform implementation for remote participation, pre-event and on-site management, and chat functionality.

All proposals were analyzed based on following criteria: understanding of requirements, accuracy of the proposed timeline, platform accessibility, interpretation integration, integration of remote presenters, remote participant Q&A functionality, participant support, confidentiality and secure access, and overall organization and General Assembly speaker support. A thorough cost analysis was also conducted, taking into account not only pricing, but also tax and currency fluctuation. While two proposals were found to be complete, the most flexible and adaptable one for almost all destinations worldwide was selected. For further details, please refer to the **Budget Proposal Form** under Draft Budget Project Proposal Forms for the **World Dental Parliament Hybridization project**.

Since the financing of the pilot would be provided by FDI, it requires approval by the GA through FDI's standard budgeting process. If GA decide to explore one of the options for the **Pilot implementation**, members will be asked to vote again on a possible long-term implementation of the Hybrid WDP. This will require long-term financial and other resources and a step-by-step rollout.

Platform for Live-Broadcasting would include:

- ✓ participants' registration and individual password-protected access,
- ✓ live stream of presentations and discussions at GA and Open Fora,
- ✓ selection of languages - interaction in the same language as in-person participants,
- ✓ possibility to ask question, participate in Q&A session and contribute to debate, by to appearing in video and/or addressing the meeting via Chat,
- ✓ guaranteed access for participants from countries where the platform is available.

***Voting is not possible for participants who are joining the meeting remotely.***

**Time zone:** all remote participants will have to adjust to the time zone in which in-person meeting takes place.

## Identified options for consideration by the 2026 GA:

The Committee also evaluated a four-day meeting scenario, but it was found to be too short for a pilot, it might be implemented at a later stage if the first pilot works.

It is essential that, if the schedule is shortened, it is planned strategically to allow sufficient time for Council meetings between WDP meetings, to enable timely adaptations to report or resolutions, for which delegates may require change before a vote.

Due to the format of the NLO meeting, the NLO Forum interactive discussion time scheduled at the end of the Forum is not considered suitable for a hybrid format. The interactive setup, which is highly valued by National Liaison Officers and relies on group discussions, cannot effectively accommodate remote participants using the technology currently under consideration. The participants will be able to join the first part of the meeting dedicated to presentations.

Based on the feedback received, the time needed for sufficient debate for decision making of the GA, the Committee is proposing to the 2026 General Assembly to discuss **the following 3 options**.

The three scenarios presented are indicative only and have been developed as the basis for the budget *estimates*. Meetings shown in black are proposed to be available in hybrid format, while meetings shown in red are in-person only and are included to provide context and facilitate understanding of the overall programme. Blue notes highlight the meeting content, and (V) denotes meetings involving voting. Voting rights are limited to participants attending in person. The final meeting schedule, structure, formats, and durations will be decided by the FDI Council. Any changes to the final schedule may have budgetary implications.

**OPTION 1: WORLD DENTAL PARLIAMENT STANDARD SCHEDULE**  
(NO CHANGE AND NO POSSIBILITY OF A HYBRID MEETING)

| Activity | 17 October 2027                    |                                           | 18 October 2027        |                                        | 19 October 2027       |                       | 20 October 2027                            |                                                   |
|----------|------------------------------------|-------------------------------------------|------------------------|----------------------------------------|-----------------------|-----------------------|--------------------------------------------|---------------------------------------------------|
|          | Morning                            | Afternoon                                 | Morning                | Afternoon                              | Morning               | Afternoon             | Morning                                    | Afternoon                                         |
|          | (set-up)<br>Executive<br>Committee | (set-up and test)<br>Finance<br>Committee | Council<br>Advocacy WG | Open Forum 1<br>First time<br>attendee | General<br>Assembly A | General<br>Assembly A | Open Forum 2<br>Regional Orga.<br>Sections | Council<br>Committee (5)<br>BRC<br>Regional Orga. |

| Activity | 21 October 2027                                                                                                     |                                                                                                                                                          | 22 October 2027                                                                                                                          |                                                                        | 23 October 2027                                        |                       | 24 October 2027                                 |                                                                   |
|----------|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------|-----------------------|-------------------------------------------------|-------------------------------------------------------------------|
|          | Morning                                                                                                             | Afternoon                                                                                                                                                | Morning                                                                                                                                  | Afternoon                                                              | Morning                                                | Afternoon             | Morning                                         | Afternoon                                                         |
|          | NLO Forum<br>Committee (2-3)<br>Regional orga.<br>Section<br>Committee fora<br>FDI project sess.<br>Congress progr. | Committee (2-3)<br>Regional orga.<br>Section<br>WOHD Launch<br>Committee fora<br>FDI project sess.<br>Congress progr.<br>VIP reception<br>Opening Cerem. | Comm. Chairs WG<br>Council & chair<br>Council & sections/ RO<br>Regional Orga.<br>Committee fora<br>FDI project sess.<br>Congress progr. | Open Forum 3<br>Regional Orga.<br>FDI project sess.<br>Congress progr. | FDI project sess.<br>Congress progr.<br>Regional Orga. | General<br>Assembly B | Council<br>FDI project sess.<br>Congress progr. | Council<br>Executive Com.<br>FDI project sess.<br>Congress progr. |

Congress / Exhibition Overlap

**OPTION 2: WORLD DENTAL PARLIAMENT SCHEDULE (6 DAYS) HYBRID WDP PILOT 2027**

In this scenario, the parliament overall duration remains the same, but the dates shift for day to allow sufficient set-up and testing time. Remote participants connect for the onsite meeting times.

| Activity | 17 October 2027 |           | 18 October 2027                           |                                         | 19 October 2027                         |                                           | 20 October 2027       |                       | 21 October 2027                                  |                                                      |
|----------|-----------------|-----------|-------------------------------------------|-----------------------------------------|-----------------------------------------|-------------------------------------------|-----------------------|-----------------------|--------------------------------------------------|------------------------------------------------------|
|          | Morning         | Afternoon | Morning                                   | Afternoon                               | Morning                                 | Afternoon                                 | Morning               | Afternoon             | Morning                                          | Afternoon                                            |
|          | (set-up)        | (set-up)  | (set-up & Test)<br>Executive<br>Committee | (set-up & test)<br>Finance<br>Committee | Council<br>Advocacy<br>Working<br>Group | Open Forum<br>1<br>First time<br>attendee | General<br>Assembly A | General<br>Assembly A | Open Forum<br>2<br>Regional<br>Orga.<br>Sections | Council<br>Committee (5)<br>BRC<br>Regional<br>Orga. |

Congress / Exhibition Overlap

| Activity | 22 October 2027                                                                                                     |                                                                                                                                     | 23 October 2027                                                                                                                          |                                                                        | 24 October 2027                                        |                       | 25 October 2027 |                           |
|----------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------|-----------------------|-----------------|---------------------------|
|          | Morning                                                                                                             | Afternoon                                                                                                                           | Morning                                                                                                                                  | Afternoon                                                              | Morning                                                | Afternoon             | Morning         | Afternoon                 |
|          | NLO Forum<br>Committee (2-3)<br>Regional orga.<br>Section<br>Committee fora<br>FDI project sess.<br>Congress progr. | Committee (2-3)<br>Regional orga.<br>Section<br>Committee fora<br>WOHD Launch<br>Congress progr.<br>VIP reception<br>Opening Cerem. | Comm. Chairs WG<br>Council & chair<br>Council & sections/ RO<br>Regional Orga.<br>Committee fora<br>FDI project sess.<br>Congress progr. | Open Forum 3<br>Regional Orga.<br>FDI project sess.<br>Congress progr. | FDI project sess.<br>Congress progr.<br>Regional Orga. | General<br>Assembly B | Council         | Council<br>Executive Com. |

Congress / Exhibition Overlap

| 18 October 2027               |                                                                                                                                               | 19 October 2027                                                                                                          |                                                                                           | 20 October 2027<br>NLO only                                                                                                                         |                                                                                             | 21 October 2027                                                                                                                                       |                                                                                                                                                                             |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Morning                       |                                                                                                                                               | Afternoon                                                                                                                |                                                                                           | Morning                                                                                                                                             |                                                                                             | Afternoon                                                                                                                                             |                                                                                                                                                                             |
| Activity                      | (set-up)                                                                                                                                      | (set-up)                                                                                                                 | (set-up & test)                                                                           | (set-up Test)                                                                                                                                       | 9h – 12h<br>NLO Forum<br><br>12h -13h30<br>NLO Lunch                                        | 13h30 – 15h<br>WOHD Launch                                                                                                                            | Council A<br>Advocacy WG<br><br>Block for regional<br>organisation<br>meetings / section<br><br>With focus on policy<br>forum and any<br>topics subject to<br>future voting |
| Congress / Exhibition Overlap |                                                                                                                                               |                                                                                                                          |                                                                                           |                                                                                                                                                     |                                                                                             |                                                                                                                                                       |                                                                                                                                                                             |
| 22 October 2027               |                                                                                                                                               | 23 October 2027                                                                                                          |                                                                                           | 24 October 2027                                                                                                                                     |                                                                                             | 25 October 2027                                                                                                                                       |                                                                                                                                                                             |
| Morning                       |                                                                                                                                               | Afternoon                                                                                                                |                                                                                           | Morning                                                                                                                                             |                                                                                             | Afternoon                                                                                                                                             |                                                                                                                                                                             |
| Activity                      | 9h – 13h<br>GA A<br>(4h)<br>BRC appointment<br>(V)<br>Financial report<br>Next year Budget<br>Council candidates<br>Award and spec.<br>report | 14h – 17h: Council B<br><br>Block for regional<br>organisation meetings<br>/ section<br><br>Committee meetings /<br>fora | 9h – 12h<br>OF2 -3<br>(3h)<br><br>With focus on<br>finance,<br>general<br>interest topics | Block for regional<br>organisation<br>meetings / section<br><br>Committee meetings<br>/ block for regional<br>organisation<br><br>13h30 – 16h30 BRC | Council and<br>chairs<br><br>Block for<br>regional<br>organisation<br>meetings /<br>section | 13h30 -17h30<br>GA B<br>(4h)<br>Policy statements (V)<br>Election (V)<br>BRC report (V)<br>Certificates<br>Congress handover<br>(Presidency handover) | Council<br><br>Council<br>Executive Com.                                                                                                                                    |
| Congress / Exhibition Overlap |                                                                                                                                               |                                                                                                                          |                                                                                           |                                                                                                                                                     |                                                                                             |                                                                                                                                                       |                                                                                                                                                                             |

The presentation will be presented at the “General Assembly A” in Prague, in the afternoon of 4<sup>th</sup> September. The debate and discussions will take place at that time.

We look forward to seeing you soon.

On behalf of the Special Committee on World Dental Parliament,  
Respectfully submitted,

**Dr. Kirk Preston**  
**Chair**

## 7A. Financial Matters

### 7.1 Report from the Treasurer, Dr. Carol Gomez Summerhays



Dear Colleagues,

I was elected in September last year, and since then I have been entrusted with the finances of FDI.

I am pleased to present the 2025 financial results, the financial year generated a surplus of 312 KCHF. Members have continued to provide substantial financial support, as well as active participation in FDI's activities. The Shanghai Congress was a great success. Our thanks go to Chinese Stomatological Association for their excellent organization.

Our activities have remained within budget, demonstrating robust financial discipline. Our committees have been exceptionally active in pursuing projects, many of which span multiple years. This strategic long-term approach allows us to not only develop new resources but also to disseminate them more broadly, enhancing our impact and reach.

Regrettably, our public health projects fell short of their objectives. However, we are pleased to confirm that this shortfall in revenue has been fully offset by exceptional income generated by our international journal. The open-source model implemented several years ago, coupled with the diligent efforts of our esteemed editor, Prof. Samaranayake, has led to a record number of published articles, proving to be a significant success.

Finally, despite prevailing market instabilities, the strong financial performance of our investment portfolio has enabled us to generate a surplus, further strengthening our financial position. We allocated 400 KCHF to a reserve to support a development plan.

The financial statements have been prepared and reviewed under the Swiss Gap RPC21 standard and were audited by Deloitte SA, our external auditors appointed by the Council for the 4<sup>th</sup> year of their mandate. In 2025, the financial statements were approved by our auditors and are compliant with RPC21. The financial statements have been shared with the Audit Committee for their review. The Audit Committee is composed of three members of the General Assembly. Dr. Vetter-Scheidl (Austria), Dr. Akihiko Ito (Japan) and Dr. Doble (India). We organized a meeting with Deloitte and the Audit committee to present in detail the comprehensive report and to reply to any questions for more clarification. Their report is included in the GA binder, and the Chair will present the report at the General assembly to be approved by the vote of our members to finalize the process.

The Budget Reference Committee met in Shanghai and the General Assembly approved the 2026 budget. You'll find the responses to their recommendations in the binder.

In 2026, an approved reserve for development aims to bolster our partnership-driven revenue and diversify our funding streams. We will continue to monitor market conditions and adjust our strategy, accordingly, ensuring transparency and accountability in all financial activities.

The FDI World Dental Congress in Prague is shaping up to be a standout event with a good number of abstracts and an international slate of participants. Sincere thanks to the Czech Dental Chamber for their organization and support.

On the banking front, I have met with UBS representatives on several occasions. Due to the merger, the FDI completed the transfer of all its accounts from Credit Suisse to UBS at the end of last year. I have taken steps to ensure UBS remains a fully operational partner in service to NGOs like FDI. We will continue to monitor this relationship to uphold stability, security, and service quality.

The Finance Committee and Finance Department are reviewing our Finance Manual to ensure coherence across internal manuals and to reflect both internal developments and external changes. This work aims to improve consistency and usability for members and staff.

In June I was in Geneva to prepare the 2027 budget, which is included in the binder, and subject to your approval in Prague.

For the upcoming 2027 fiscal year, we are presenting a unique budget approach, offering several possible scenarios for your consideration. In all proposed scenarios, we have proactively allocated a contingency fund of 30,000 CHF to effectively cover any unforeseen expenditures. Notably, our projected surplus remains consistent at 43,800 CHF across all scenarios. These scenarios are the culmination of two years of dedicated work by two special committees. Both committees have successfully concluded their mandates and are ready to present their findings.

The Special Committee on Membership Subscription Fee Formula, chaired by Mr. Florian Lemor, has focused on refining the methodology for calculating our membership fees. On the other hand, the special committee for the Hybrid congress, led by Dr. Kirk Preston, will propose two scenarios, a 6-day pilot and a 5-day pilot, for the hybridization of the World Dental Parliament.

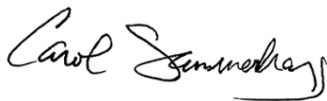
Furthermore, I am very pleased to announce the Council has decided to propose reduced membership fees. This strategic decision is underpinned by the strong revenue generated by the International Dental Journal and the potential successful implementation of our new fundraising plan. These initiatives collectively allow us to balance the budget and maintain a consistent surplus, thereby reinforcing our commitment to long-term sustainability.

I would like to extend my gratitude to all members of the Finance Committee, the Council, our officers, our committees, and the FDI staff for their hard work in securing such a robust financial position for FDI.

Additionally, I want to express my appreciation to all of you, our members, for your unwavering support and engagement. I remain available to answer any questions you may have about the 2025 financial results or our plans for the coming year.

We look forward to welcoming you to beautiful Prague this year and to a productive summer as we prepare for the year ahead.

Warmest regards,



Carol Gomez Summerhays, DDS  
FDI Treasurer  
[carolsummerhays@gmail.com](mailto:carolsummerhays@gmail.com)

## 7.2 Financial Statements 2025

***FDI Fédération Dentaire  
Internationale  
(IDF International Dental Federation),  
Vernier***

*Financial Statements for the year ended  
December 31, 2025  
and Report of the Independent Auditor*

## **Report of the Independent Auditor**

To the Council of

**FDI Fédération Dentaire Internationale (IDF International Dental Federation), Vernier**

### **Report on the Audit of the Financial Statements**

#### *Opinion*

We have audited the financial statements of FDI Fédération Dentaire Internationale (IDF International Dental Federation) (the “Association”), which comprise the statement of assets, liabilities and reserve funds as at December 31, 2025, and statement of receipts and operating expenditure, the cash flow statement, the statement of changes in reserve funds for the year then ended and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Federation as at December 31, 2025 and of its financial performance and its cash flows for the year then ended in accordance with Swiss GAAP FER (Core FER) and Swiss GAAP FER 21 and comply with Swiss law and the Association’s articles of incorporation.

#### *Basis for Opinion*

We conducted our audit in accordance with Swiss law and Swiss Standards on Auditing (SA-CH). Our responsibilities under those provisions and standards are further described in the “Auditor’s Responsibilities for the Audit of the Financial Statements” section of our report. We are independent of the Association in accordance with the provisions of Swiss law and the requirements of the Swiss audit profession. We have also fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### *Other Information*

The Council is responsible for the preparation of the other information. The other information comprises the information included in the annual report but does not include the financial statements and our auditor’s report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

*Council's Responsibilities for the Financial Statements*

The Council is responsible for the preparation of the financial statements which give a true and fair view in accordance with Swiss GAAP FER, the requirements of Swiss Law and the Federation's articles of incorporation, and for such internal controls as the Council determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Council is responsible for assessing the Association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern, and using the going concern basis of accounting unless the Council either intends to liquidate the Association or to cease operations, or has no realistic alternative but to do so.

*Auditor's Responsibilities for the Audit of the Financial Statements*

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SA-CH will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements can be found on the EXPERTsuisse website: <https://www.expertsuisse.ch/en/audit-report-for-ordinary-audits>. This description forms an integral part of our report.

**Deloitte SA**

Alexandre Dubi  
Licensed Audit Expert  
Auditor in Charge



Alexandre Ribordy  
Licensed Auditor

Geneva, March 24, 2026

Enclosure

- Financial statements (statement of assets, liabilities and reserve funds, statement of receipts and operating expenditure, cash flow statement, statement of changes in reserve funds and notes)

Statement of assets, liabilities and reserve funds as at December 31, 2025  
(in CHF)

|                                             | Notes | 2025             | 2024             |
|---------------------------------------------|-------|------------------|------------------|
| <b>Assets</b>                               |       |                  |                  |
| <b>Current assets</b>                       |       |                  |                  |
| Cash and cash equivalents                   | 2.1   | 4 096 117        | 3 821 088        |
| Accounts receivable, net                    |       | 410 397          | 465 155          |
| <i>Accounts receivable</i>                  | 2.2   | 413 642          | 468 067          |
| <i>Provision for bad and doubtful debts</i> | 2.3   | (3 245)          | (2 912)          |
| Prepayment and accrued income               | 2.4   | 703 592          | 271 214          |
| Other current assets                        | 2.4   | 42 587           | 9 048            |
| <b>Total current assets</b>                 |       | <b>5 252 693</b> | <b>4 566 505</b> |
| <b>Non-current assets</b>                   |       |                  |                  |
| Tangible fixed assets                       | 2.8   | 389 433          | 68 428           |
| Financial fixed assets                      | 2.9   | 3 782 293        | 3 402 460        |
| Guarantee deposits                          | 2.10  | 71 401           | 69 378           |
| <b>Total non-current assets</b>             |       | <b>4 243 127</b> | <b>3 540 266</b> |
| <b>Total assets</b>                         |       | <b>9 495 820</b> | <b>8 106 771</b> |
| <b>Liabilities and reserve funds</b>        |       |                  |                  |
| <b>Current liabilities</b>                  |       |                  |                  |
| Accounts payable                            | 2.5   | 328 251          | 347 804          |
| Other payables                              | 2.6   | 110 249          | 101 899          |
| Accrued liabilities                         |       | 132 120          | 129 426          |
| Provisions                                  | 2.11  | 38 500           | 46 000           |
| Deferred income                             | 2.7   | 682 026          | 705 362          |
| <b>Total current liabilities</b>            |       | <b>1 291 146</b> | <b>1 330 491</b> |
| <b>Non Current liabilities</b>              |       |                  |                  |
| Deferred income                             | 2.7   | 597 010          | -                |
| <b>Total non current liabilities</b>        |       | <b>597 010</b>   | <b>-</b>         |
| <b>Total liabilities</b>                    |       | <b>1 888 156</b> | <b>1 330 491</b> |
| <b>Reserve funds</b>                        |       |                  |                  |
| Restricted funds                            |       | 720 653          | 606 010          |
| Restricted funds in custody                 |       | 226 639          | 221 468          |
| <b>Total Restricted funds</b>               |       | <b>947 292</b>   | <b>827 478</b>   |
| General Reserves                            |       | 5 448 803        | 5 183 609        |
| Special Reserves                            |       | 900 000          | 500 000          |
| Net income for the year                     |       | 311 569          | 265 194          |
| <b>Total Unrestricted funds</b>             |       | <b>6 660 372</b> | <b>5 948 803</b> |
| <b>Total Reserve funds</b>                  |       | <b>7 607 664</b> | <b>6 776 280</b> |
| <b>Total liabilities and reserve funds</b>  |       | <b>9 495 820</b> | <b>8 106 771</b> |

The accompanying notes are an integral part of these financial statements.



## Statement of receipts and operating expenditure for the period ended December 31, 2025

(in CHF)

|                                                            | Notes   | 2025               | 2024               |
|------------------------------------------------------------|---------|--------------------|--------------------|
| <b>Income</b>                                              |         |                    |                    |
| Membership                                                 | 3.1 / 8 | 1 694 813          | 1 694 366          |
| Congress                                                   | 3.2     | 1 207 288          | 1 123 628          |
| <i>World Dental Congress</i>                               |         | 991 730            | 1 032 407          |
| <i>Regional congresses</i>                                 |         | 62 193             | -                  |
| <i>Master CE programme</i>                                 |         | 128 365            | 66 221             |
| <i>Young Dentists Forum</i>                                |         | 25 000             | 25 000             |
| Corporate partnerships                                     |         | 1 610 298          | 1 645 395          |
| <i>Unrestricted</i>                                        | 3.3     | 848 417            | 886 663            |
| <i>Restricted</i>                                          | 3.4     | 761 881            | 758 732            |
| Other income                                               | 3.5     | 596 992            | 199 464            |
| <b>Total income</b>                                        |         | <b>5 109 391</b>   | <b>4 662 853</b>   |
| <b>Operating expenditure</b>                               |         |                    |                    |
| Personnel costs                                            | 3.6     | (2 372 070)        | (2 521 316)        |
| Office                                                     | 3.7     | ( 369 128)         | ( 374 944)         |
| Travel & subsistence                                       | 3.8     | ( 632 649)         | ( 781 215)         |
| Operational                                                | 3.9     | ( 622 130)         | ( 702 960)         |
| Congress specific                                          | 3.10    | ( 151 768)         | ( 149 929)         |
| Communication/Web/Webinars                                 | 3.11    | ( 232 903)         | ( 248 069)         |
| Legal                                                      | 3.12    | ( 101 617)         | ( 68 684)          |
| <b>Total expenses</b>                                      |         | <b>(4 482 266)</b> | <b>(4 847 117)</b> |
| <b>Operational result</b>                                  |         | <b>627 126</b>     | <b>( 184 264)</b>  |
| Financial income/(expenses)                                | 3.13    | 227 517            | 186 052            |
| Exchange rate gain/(loss)                                  | 3.13    | ( 28 430)          | ( 3 129)           |
| <b>Net FDI Financial result</b>                            |         | <b>199 087</b>     | <b>182 923</b>     |
| <b>FDI result before change in fund capital</b>            |         | <b>826 213</b>     | <b>( 1 341)</b>    |
| Restricted income allocated to funds in custody            |         | 110 307            | 134 112            |
| Restricted income withdrawn from funds in custody          |         | ( 105 136)         | ( 126 122)         |
| <b>Result of the year for funds in custody</b>             |         | <b>5 171</b>       | <b>7 990</b>       |
| Restricted income allocated to restricted funds            |         | 915 246            | 949 953            |
| Restricted income withdrawn from restricted funds          |         | ( 800 602)         | ( 890 891)         |
| <b>Result of the year after change in restricted funds</b> |         | <b>711 569</b>     | <b>( 60 402)</b>   |
| (Allocation) to/ Withdrawn from special reserves           | 3.14    | ( 400 000)         | -                  |
| (Allocation) to/ Withdrawn from Membership fees fund       | 3.14    | -                  | 225 596            |
| (Allocation) to / Withdrawn to World Dental Dvpt fund      | 3.14    | -                  | 100 000            |
| <b>FDI Result of the year after funds allocations</b>      | 3.15    | <b>311 569</b>     | <b>265 194</b>     |

The accompanying notes are an integral part of these financial statements.

**Statement of receipts and operating expenditure for the period ended December 31, 2025**

(in CHF)

**Funds in Custody of FDI**

| <b>African Regional Organisation (ARO)</b> | <b>2025</b>  | <b>2024</b> |
|--------------------------------------------|--------------|-------------|
| Total income                               | 2 070        | 3 314       |
| Operational costs                          | ( 157)       | ( 3 027)    |
| Total operating expenditures               | ( 157)       | ( 3 027)    |
| <b>Operational result</b>                  | <b>1 912</b> | <b>287</b>  |

| <b>International Association of Dental Students (IADS)</b> | <b>2025</b>     | <b>2024</b>   |
|------------------------------------------------------------|-----------------|---------------|
| Total income                                               | 25 238          | 47 362        |
| Operational costs (travel)                                 | ( 31 912)       | ( 26 090)     |
| Other costs                                                | -               | ( 79)         |
| Total operating expenditures                               | ( 31 912)       | ( 26 169)     |
| <b>Operational result</b>                                  | <b>( 6 674)</b> | <b>21 193</b> |

| <b>Women Dentist Worldwide (WDW)</b> | <b>2025</b>  | <b>2024</b>  |
|--------------------------------------|--------------|--------------|
| Total income                         | 8 000        | 8 436        |
| Total operating expenditures         | ( 2 195)     | ( 4 026)     |
| <b>Operational result</b>            | <b>5 805</b> | <b>4 410</b> |

| <b>World Health Professions Alliance (WHPA)</b> | <b>2025</b>  | <b>2024</b>      |
|-------------------------------------------------|--------------|------------------|
| Total income                                    | 75 000       | 75 000           |
| Personnel costs/ Consultant                     | ( 54 872)    | ( 48 607)        |
| Communication/Web                               | -            | ( 12 120)        |
| Other costs                                     | ( 16 000)    | ( 32 173)        |
| Total operating expenditures                    | ( 70 872)    | ( 92 900)        |
| <b>Operational result</b>                       | <b>4 128</b> | <b>( 17 900)</b> |

|                                                   |              |              |
|---------------------------------------------------|--------------|--------------|
| Restricted income allocated to funds in custody   | 110 307      | 134 112      |
| Restricted income withdrawn from funds in custody | ( 105 136)   | ( 126 122)   |
| <b>Result of the year for funds in custody</b>    | <b>5 171</b> | <b>7 990</b> |

**Cash flow statement for the period ended December 31, 2025**  
(in CHF)

|                                                                               | 2025              | 2024              |
|-------------------------------------------------------------------------------|-------------------|-------------------|
| FDI Result of the year after funds allocations                                | 311 569           | 265 194           |
| Change in Restricted Funds in custody                                         | 5 171             | 7 990             |
| Change in Restricted/Unrestricted Funds                                       | 514 644           | ( 266 535)        |
| <b>Net operational result</b>                                                 | <b>831 384</b>    | <b>6 649</b>      |
| ./. Depreciation                                                              | 38 164            | 40 379            |
| ./. Net creation and dissolution of the provision for bad and doubtful debts  | 333               | ( 1 248)          |
| ./. Revaluation of securities to market value                                 | ( 219 058)        | ( 190 618)        |
| <b>Surplus/ (deficit) for the year (before change in net working capital)</b> | <b>650 823</b>    | <b>( 144 838)</b> |
| (Increase) / decrease in accounts receivable                                  | 54 425            | 64 207            |
| (Increase) / decrease in prepayments, accrued income and other current assets | ( 465 917)        | 31 922            |
| Increase / (decrease) in accounts payable                                     | ( 19 553)         | 63 195            |
| Increase / (decrease) in other payables                                       | 8 350             | ( 30 974)         |
| Increase / (decrease) in accrued liabilities                                  | 2 694             | ( 46 338)         |
| Increase / (decrease) in deferred income                                      | 573 674           | ( 11 037)         |
| Increase / (decrease) in provisions                                           | ( 7 500)          | 15 000            |
| <b>Net cash generated from operating activities</b>                           | <b>796 996</b>    | <b>( 58 863)</b>  |
| <b>Cash flow from investing activities</b>                                    |                   |                   |
| Investment in tangible fixed assets                                           | ( 359 169)        | ( 24 686)         |
| Investment in financial fixed assets                                          | ( 160 775)        | ( 188 328)        |
| Investment in guarantee deposits                                              | ( 2 023)          | ( 180)            |
| <b>Net cash used for investing activities</b>                                 | <b>( 521 967)</b> | <b>( 213 195)</b> |
| <b>Net increase / (decrease) in cash and cash equivalents</b>                 | <b>275 029</b>    | <b>( 272 058)</b> |
| Cash and cash equivalents at begining of the year                             | 3 821 088         | 4 093 146         |
| Cash and cash equivalents at year end                                         | 4 096 117         | 3 821 088         |
| <b>Variation</b>                                                              | <b>275 029</b>    | <b>( 272 058)</b> |

Statement of changes in reserve funds  
(in CHF)

| 2025                                                 | 01/01/2025        | Allocations        | Withdrawal        | 31/12/2025        |
|------------------------------------------------------|-------------------|--------------------|-------------------|-------------------|
| <b>1) FDI Restricted funds</b>                       |                   |                    |                   |                   |
| Continuing Education Programme                       | 97 566            | -                  | ( 5 829)          | 91 738            |
| Master CE Programme                                  | 41 978            | 128 365            | ( 65 984)         | 104 359           |
| Young Dentists Forum                                 | 25 365            | 25 000             | ( 24 131)         | 26 234            |
| World Dental Development Funds (WDDF)                | 132 000           | 20 000             | ( 50 000)         | 102 000           |
| Oral Health for Ageing Population (OHAP)             | 32 006            | 88 000             | ( 59 314)         | 60 692            |
| Oral Health in General Health                        | 66 467            | 131 000            | ( 109 809)        | 87 658            |
| Oral Health Observatory (OHO)                        | 54 940            | 107 000            | ( 92 494)         | 69 446            |
| Sustainability in dentistry                          | 72 614            | 110 000            | ( 130 444)        | 52 170            |
| Electronic Health Records (EHRs)                     | 10 085            | -                  | ( 10 085)         | -                 |
| Digital Cleft Care                                   | 14 795            | -                  | ( 14 795)         | -                 |
| Mental health and well being                         | 46 424            | 108 381            | ( 135 052)        | 19 753            |
| Non oral health educational module                   | 11 770            | 68 000             | ( 66 649)         | 13 121            |
| Smile Around the World (SAW)                         | -                 | 13 000             | ( 13 000)         | -                 |
| Tobacco cessation project                            | -                 | 11 500             | ( 11 500)         | -                 |
| Human PapillomaVirus project                         | -                 | 105 000            | ( 11 517)         | 93 483            |
| <b>Total FDI Restricted funds</b>                    | <b>606 010</b>    | <b>915 246</b>     | <b>( 800 602)</b> | <b>720 653</b>    |
| <b>2) Funds in custody of FDI</b>                    |                   |                    |                   |                   |
| African Regional Organisation (ARO)                  | 28 271            | 2 070              | ( 157)            | 30 183            |
| International Association of Dental Students (IADS)  | 90 642            | 25 238             | ( 31 912)         | 83 968            |
| Women Dentist Worldwide (WDW)                        | 7 107             | 8 000              | ( 2 195)          | 12 912            |
| World Health Professions Alliance (WHPA)             | 95 448            | 75 000             | ( 70 872)         | 99 576            |
| <b>Total Funds in custody of FDI</b>                 | <b>221 468</b>    | <b>110 307</b>     | <b>( 105 136)</b> | <b>226 639</b>    |
| <b>2024</b>                                          | <b>01/01/2024</b> | <b>Allocations</b> | <b>Withdrawal</b> | <b>31/12/2024</b> |
| <b>1) FDI Restricted funds</b>                       |                   |                    |                   |                   |
| Continuing Education Programme                       | 110 533           | -                  | ( 12 967)         | 97 566            |
| Master Continuing Education Programme                | -                 | 66 221             | ( 24 244)         | 41 978            |
| Young Dentists Forum                                 | 16 019            | 25 000             | ( 15 654)         | 25 365            |
| World Dental Development Funds (WDDF)                | -                 | 132 000            | -                 | 132 000           |
| Oral Health for Ageing Population (OHAP)             | 63 273            | 65 000             | ( 96 267)         | 32 006            |
| Oral Health in General Health                        | 70 961            | 105 000            | ( 109 494)        | 66 467            |
| Oral Health Observatory (OHO)                        | 30 000            | 96 000             | ( 71 060)         | 54 940            |
| Global Periodontal Health Project (GPHP)             | 44 810            | -                  | ( 44 810)         | -                 |
| Health and Safety in the Dental Workplace (HSDW)     | 20 872            | 44 000             | ( 64 872)         | -                 |
| Sustainability in dentistry                          | 113 920           | 156 000            | ( 197 306)        | 72 614            |
| Electronic Health Records (EHRs)                     | 76 560            | 21 000             | ( 87 475)         | 10 085            |
| Digital Cleft Care                                   | -                 | 91 254             | ( 76 459)         | 14 795            |
| Mental Health and Wellbeing in dentistry             | -                 | 95 477             | ( 49 053)         | 46 424            |
| Educational Module for non-oral health professionals | -                 | 40 000             | ( 28 230)         | 11 770            |
| Smile Around the World (SAW)                         | -                 | 13 000             | ( 13 000)         | -                 |
| <b>Total FDI Restricted funds</b>                    | <b>546 948</b>    | <b>949 953</b>     | <b>( 890 891)</b> | <b>606 010</b>    |
| <b>2) Funds in custody of FDI</b>                    |                   |                    |                   |                   |
| African Regional Organisation (ARO)                  | 27 984            | 3 314              | ( 3 027)          | 28 271            |
| International Association of Dental Students (IADS)  | 69 449            | 47 362             | ( 26 169)         | 90 642            |
| Women Dentist Worldwide (WDW)                        | 2 698             | 8 436              | ( 4 026)          | 7 107             |
| World Health Professions Alliance (WHPA)             | 113 348           | 75 000             | ( 92 900)         | 95 448            |
| <b>Total Funds in custody of FDI</b>                 | <b>213 478</b>    | <b>134 112</b>     | <b>( 126 122)</b> | <b>221 468</b>    |

**Notes to the financial statements, as at December 31, 2025**  
**(in CHF)**

**NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Introduction**

FDI Fédération Dentaire Internationale (the "Federation" or "FDI") prepares its accounts in compliance with the policies described in the following notes. Accounting policies of the Foundation have been prepared in accordance with the provisions of the Swiss Code of Obligations and in accordance with the Swiss GAAP FER (core FER), in particular Swiss GAAP FER 21 relating to accounting for charitable non-profit organisations.

The accounts also applied with the article 69a of the Swiss Civil Code.

FDI is an association. The headoffice is located in Geneva in Switzerland since 2009.

**Basis of presentation**

The financial statements are prepared under the historical cost convention and on an accrual basis. Operating receipts are recorded as income on an accrual basis, according to the date of contract, or, if no contract exists, date of invoice. Revenues and expenses are classified based on the existence or absence of donor-imposed restrictions. Restricted income received is allocated to the Restricted Funds, while expenses incurred on restricted projects are withdrawn from the Restricted Funds, while expenses incurred on restricted projects are withdrawn from the Restricted Funds.

**Revenue recognition and prepaid expenses**

Revenues and expenses originated from services rendered in connection with specific events or major projects, are recognised as follows: When a specific event or major project is of substantially greater significance than event or project considered as being of a typical scale, for example the Congress, the recognition of revenue is postponed until the year when the significant event or project takes place and the related direct costs are accumulated in prepaid expenses until then.

**Foreign currency translation**

The Federation's accounting records are maintained in Swiss francs. Monetary assets and liabilities denominated in currencies other than the Swiss franc are recorded on the basis of exchange rates ruling at the balance sheet date.

Income and expenditure in currencies other than the Swiss franc are recorded on the basis of exchange rates at the transaction date.

**Accounts receivable**

Amounts recorded as accounts receivable represent amounts invoiced or earned contractually at each balance sheet date but not yet collected. A provision for bad debt of accounts receivable is established when there is evidence that the Federation will not be able to collect all amounts due.

**Financial fixed assets**

Financial fixed assets include investments that consist of equity and debt securities and that are traded by the Federation's authorized custodians in liquid markets. Investments are shown in the financial statements at market value at each balance sheet date. The breakdown per nature is compliant with the Finance Manual.

**Tangible fixed assets**

Tangible assets are stated at acquisition cost less depreciation. Depreciation is calculated and charged using the straight-line method to allocate their cost to their residual values over their estimated useful lives, which range from 3-5 years.

Contributions received related to tangible assets is allocated to deferred income. The deferred income is recognised in profit or loss over the useful life of the asset.

**Leasing**

Leases in which a significant portion of the risks and rewards of ownership are retained by the lessor are classified as operating leases and are charged to the statement of receipts and operating expenditure on a straight-line basis over the period of the lease. A lease over an asset where the Federation has substantially all the risks and rewards of ownership is classified as a finance lease. This finance lease is capitalized at the lease's commencement at the lower of the fair value of the asset and the present value of the minimum lease commitment. Each lease payment is allocated between the liability and finance charges so as to achieve a constant rate on the finance balance outstanding. The asset acquired under finance lease is depreciated over the shorter of the useful life of the asset and the lease term. The rent expense of an operating lease is recorded on a straight-line basis over the lease term of the contract. Periods of free rent, rent abatements, and rent contributions are spread over the the lease term as a reduction to the rental expense.

**Related parties**

The National Dental Associations as member of the FDI are considered as related parties. The members of the Council are also part of the related parties. The assets and liabilities of the related parties are presented separately in the notes to the financial statements.

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 2 - STATEMENT OF ASSETS, LIABILITIES AND RESERVE FUNDS DETAILS

|                                                                 | 2025             | 2024             |
|-----------------------------------------------------------------|------------------|------------------|
| <b>2.1 Cash and cash equivalents</b>                            |                  |                  |
| Petty cash                                                      | 712              | 16               |
| Banks                                                           | 4 095 405        | 3 821 072        |
|                                                                 | <b>4 096 117</b> | <b>3 821 088</b> |
| <b>2.2 Accounts receivable</b>                                  |                  |                  |
| Membership (Related parties)                                    | 14 352           | 8 439            |
| Partnership                                                     | 160 000          | 155 730          |
| Other (congress)                                                | 239 290          | 303 898          |
|                                                                 | <b>413 642</b>   | <b>468 067</b>   |
| <b>2.3 Provision for bad and doubtful debts</b>                 |                  |                  |
| Bad debts - membership fees                                     | ( 3 245)         | ( 2 912)         |
|                                                                 | <b>( 3 245)</b>  | <b>( 2 912)</b>  |
| <b>2.4 Prepayments, deferred costs and other current assets</b> |                  |                  |
| Prepaid Expenses                                                | 303 590          | 227 214          |
| <i>Direct costs for :</i>                                       |                  |                  |
| - <i>Projects next year</i>                                     | 219 591          | 158 750          |
| - <i>Congress next year</i>                                     | 83 999           | 68 464           |
| Accrued income International Dental Journal (IDJ)               | 400 000          | 44 000           |
| Withholding tax                                                 | 5 132            | 973              |
| VAT                                                             | 37 456           | 8 075            |
|                                                                 | <b>746 178</b>   | <b>280 262</b>   |
| <b>2.5 Accounts payable</b>                                     |                  |                  |
| Creditors                                                       | 322 782          | 116 208          |
| Related Parties (Membership)                                    | 4 197            | 225 596          |
| Related Parties (other)                                         | 1 272            | 6 000            |
|                                                                 | <b>328 251</b>   | <b>347 804</b>   |
| <b>2.6 Other payables</b>                                       |                  |                  |
| Social charges to be paid and other                             | 88 966           | 78 888           |
| Return of payments                                              | 21 283           | 23 011           |
|                                                                 | <b>110 249</b>   | <b>101 899</b>   |
| <b>2.7 Deferred income</b>                                      |                  |                  |
| <b><i>Current liabilities - short term</i></b>                  |                  |                  |
| Projects for 2026                                               | 37 543           | 138 730          |
| Membership fees 2026                                            | 69 106           | 38 967           |
| Congresses 2026                                                 | 425 000          | 527 665          |
| Other - New office cost contribution                            | 149 477          | -                |
| <b><i>Non current liabilities - long term</i></b>               |                  |                  |
| Other - New office cost contribution                            | 597 910          | -                |
|                                                                 | <b>1 279 036</b> | <b>705 362</b>   |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 2 - STATEMENT OF ASSETS, LIABILITIES AND RESERVE FUNDS DETAILS  
(continued)

2.8 Tangible fixed assets

|                                    | Office refurbishment<br>and equipment | Office furniture | IT Equipment  | New Office<br>renovation works<br>in progress | Total          |
|------------------------------------|---------------------------------------|------------------|---------------|-----------------------------------------------|----------------|
| <b>2025</b>                        |                                       |                  |               |                                               |                |
| <b>Fixed assets at cost</b>        |                                       |                  |               |                                               |                |
| Opening balance at 1 January 2025  | -                                     | 99 061           | 292 005       | -                                             | 391 065        |
| Acquisition                        | -                                     | -                | 1 225         | 357 944                                       | 359 169        |
| Write off                          | -                                     | -                | -             | -                                             | -              |
| Accumulated depreciation           | -                                     | ( 92 547)        | ( 268 255)    | -                                             | ( 360 801)     |
| Net book value at 31 December 2025 | -                                     | <b>6 514</b>     | <b>24 975</b> | <b>357 944</b>                                | <b>389 433</b> |

|                                    | Office refurbishment<br>and equipment | Office furniture | IT Equipment  | New Office<br>renovation works<br>in progress | Total         |
|------------------------------------|---------------------------------------|------------------|---------------|-----------------------------------------------|---------------|
| <b>2024</b>                        |                                       |                  |               |                                               |               |
| <b>Fixed assets at cost</b>        |                                       |                  |               |                                               |               |
| Opening balance at 1 January 2024  | -                                     | 99 061           | 267 318       | -                                             | 366 379       |
| Acquisition                        | -                                     | -                | 24 686        | -                                             | 24 686        |
| Write off                          | -                                     | -                | -             | -                                             | -             |
| Accumulated depreciation           | -                                     | ( 90 021)        | ( 232 616)    | -                                             | ( 322 637)    |
| Net book value at 31 December 2024 | -                                     | <b>9 040</b>     | <b>59 388</b> | -                                             | <b>68 428</b> |

2.9 Financial fixed assets

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|                                            |                  |
|--------------------------------------------|------------------|
| <b>2025</b>                                |                  |
| Opening balance at 1 January 2025          | 3 402 460        |
| Acquisition/redemption                     | 160 775          |
| Financial gain/(loss)                      | 219 058          |
| Market to Market value at 31 December 2025 | <b>3 782 293</b> |

|                                            |                  |
|--------------------------------------------|------------------|
| <b>2024</b>                                |                  |
| Opening balance at 1 January 2024          | 3 023 514        |
| Acquisition/redemption                     | 188 328          |
| Financial gain/(loss)                      | 190 618          |
| Market to Market value at 31 December 2024 | <b>3 402 460</b> |

2.10 Guarantee deposits

|                        |               |
|------------------------|---------------|
|                        | <b>2025</b>   |
| Rental deposit savings | 71 401        |
|                        | <b>71 401</b> |
|                        | <b>2024</b>   |
| Rental deposit savings | 69 378        |
|                        | <b>69 378</b> |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

**NOTE 2 - STATEMENT OF ASSETS, LIABILITIES AND RESERVE FUNDS DETAILS (continued)**

**2.11 Provisions  
2025**

| <b>Provisions</b>     | <b>01/01/2025</b> | <b>Allocations</b> | <b>Withdrawals</b> | <b>31/12/2025</b> |
|-----------------------|-------------------|--------------------|--------------------|-------------------|
| Provisions - vacation | 46 000            | -                  | ( 7 500)           | 38 500            |
| <b>Provisions</b>     | <b>46 000</b>     | <b>-</b>           | <b>( 7 500)</b>    | <b>38 500</b>     |

**2024**

| <b>Provisions</b>     | <b>01/01/2024</b> | <b>Allocations</b> | <b>Withdrawals</b> | <b>31/12/2024</b> |
|-----------------------|-------------------|--------------------|--------------------|-------------------|
| Provisions - vacation | 31 000            | 15 000             | -                  | 46 000            |
| <b>Provisions</b>     | <b>31 000</b>     | <b>15 000</b>      | <b>-</b>           | <b>46 000</b>     |



Notes to the financial statements, as at December 31, 2025  
(in CHF)

**NOTE 3 - STATEMENT OF RECEIPTS AND OPERATING EXPENDITURES DETAILS**

|                                           | 2025             | 2024             |
|-------------------------------------------|------------------|------------------|
| <b>3.1 Membership fees</b>                |                  |                  |
| Regular Member                            | 1 688 222        | 1 678 870        |
| Associated Member                         | 2 382            | 2 382            |
| Affiliated Member                         | 8 320            | 8 840            |
| Supporting Member                         | 11 120           | 11 120           |
| Bad debts                                 | ( 333)           | 1 248            |
| Write off/Discount/credit note            | ( 14 898)        | ( 8 094)         |
|                                           | <b>1 694 813</b> | <b>1 694 366</b> |
| <b>3.2 Congress Income</b>                |                  |                  |
| World Dental Congress                     | 991 730          | 1 032 407        |
| Regional congresses                       | 62 193           | -                |
| Master Continuing Education programme     | 128 365          | 66 221           |
| Young Dentists Forum                      | 25 000           | 25 000           |
|                                           | <b>1 207 288</b> | <b>1 123 628</b> |
| <b>3.3-3.4 Corporate partnerships</b>     |                  |                  |
| 3.3 Unrestricted Funds (WOHD/Vision 2030) | 848 417          | 886 663          |
| 3.4 Restricted Funds                      | 761 881          | 758 732          |
|                                           | <b>1 610 298</b> | <b>1 645 395</b> |
| <b>3.5 Other income</b>                   |                  |                  |
| International Dental Journal              | 526 520          | 173 454          |
| New Office cost contribution              | 40 000           | -                |
| Other recharges                           | 30 472           | 26 009           |
|                                           | <b>596 992</b>   | <b>199 464</b>   |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

**NOTE 3 - STATEMENT OF RECEIPTS AND OPERATING EXPENDITURES DETAILS**  
(continued)

|                                                | 2025             | 2024             |
|------------------------------------------------|------------------|------------------|
| <b>3.6 Personnel costs</b>                     |                  |                  |
| Salaries                                       | 1 860 754        | 2 038 205        |
| Other employee benefits                        | 10 106           | 11 493           |
| Social contributions                           | 409 440          | 435 720          |
| Temporary staff                                | 91 770           | 32 050           |
| Other personnel expenses                       | -                | 3 848            |
|                                                | <b>2 372 070</b> | <b>2 521 316</b> |
| <b>3.7 Office</b>                              |                  |                  |
| Office rent, services charges & parking        | 139 993          | 169 249          |
| Utilities                                      | 2 937            | 3 373            |
| Cleaning & office maintenance                  | 30 218           | 30 996           |
| Equipment hire & lease                         | 6 405            | 6 539            |
| Telecommunication & internet                   | 17 820           | 17 193           |
| Stationary & consumables                       | 3 613            | 4 731            |
| Courier & postage                              | 2 067            | 5 306            |
| Depreciation                                   | 38 164           | 40 379           |
| IT support                                     | 122 826          | 97 178           |
| Other                                          | 5 085            | -                |
|                                                | <b>369 128</b>   | <b>374 944</b>   |
| <b>3.8 Travel &amp; subsistence</b>            |                  |                  |
| Transportation (air, rail, road, taxis)        | 359 253          | 433 199          |
| Accommodation                                  | 158 517          | 231 870          |
| Per Diem                                       | 86 449           | 97 208           |
| Business representation (lunch, dinner, gifts) | 16 078           | 11 101           |
| Travel insurance                               | 4 995            | 5 419            |
| Other (Visas)                                  | 7 357            | 2 418            |
|                                                | <b>632 649</b>   | <b>781 215</b>   |
| <b>3.9 Operational</b>                         |                  |                  |
| Consultancy/lecturer                           | 439 728          | 509 898          |
| Translation/interpretation                     | 61 521           | 114 074          |
| Rental (venue, meeting rooms, etc.)            | 12 841           | 9 861            |
| Audio & visual                                 | 8 760            | 9 072            |
| Catering                                       | 30 534           | 16 431           |
| NDA support/project                            | 68 746           | 43 624           |
|                                                | <b>622 130</b>   | <b>702 960</b>   |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

**NOTE 3 - STATEMENT OF RECEIPTS AND OPERATING EXPENDITURES DETAILS**  
**(continued)**

|                                                      | 2025           | 2024           |
|------------------------------------------------------|----------------|----------------|
| <b>3.10 Congress specific expenses</b>               |                |                |
| Construction & furnishing                            | 83 621         | 70 915         |
| Transport & forwarding agent fees                    | 4 931          | 2 115          |
| Social programme                                     | 38 539         | 65 688         |
| Hostess                                              | 6 310          | 2 595          |
| Awards                                               | 13 867         | 3 700          |
| Other Congress costs                                 | 4 500          | 4 916          |
|                                                      | <b>151 768</b> | <b>149 929</b> |
| <b>3.11 Communication/web/webinars</b>               |                |                |
| Design & graphics                                    | 29 410         | 34 129         |
| Printing                                             | 5 420          | 2 739          |
| Bulk mailing                                         | 958            | -              |
| Promotional materials                                | 28 140         | 20 278         |
| Web maintenance/development & webinars               | 144 992        | 132 648        |
| Photo/Video                                          | 12 355         | 36 895         |
| Press                                                | 11 628         | 21 380         |
|                                                      | <b>232 903</b> | <b>248 069</b> |
| <b>3.12 Non-project</b>                              |                |                |
| Legal & professional fees                            | 70 062         | 37 184         |
| Audit fees                                           | 31 555         | 31 500         |
|                                                      | <b>101 617</b> | <b>68 684</b>  |
| <b>3.13 Net financial result</b>                     |                |                |
| Bank charges                                         | ( 21 328)      | ( 32 029)      |
| Financial income/(loss)                              | 248 845        | 218 081        |
| Exchange gain/(loss)                                 | ( 28 430)      | ( 3 129)       |
|                                                      | <b>199 087</b> | <b>182 923</b> |
| <b>3.14 (Allocation) to/Withdrawn from the funds</b> |                |                |
| Special Reserves                                     | 400 000        | -              |
| Fund for Membership fees                             | -              | 225 596        |
| World Dental Development Fund (WDDF)                 | -              | 100 000        |
|                                                      | <b>400 000</b> | <b>325 596</b> |

The membership fees special fund, created at the General Assembly 2024, has been be fully used in 2024 as per the General Assembly's decision to refund a part of the membership fee for 2024 to Regular and Associate members (not subject to minimum subscription fee), based on the difference between the multiplier used for 2024 and the new multiplier proposed for 2025. The refund will be taken out of a specially created restricted fund from the General Reserves. In 2025, the Council decided to allocate CHF 400,000 to the special reserve. This amount will be specially used to invest in developing fundraising activities with the development of a fundraising lead at FDI.

**3.15 Result of the year**

|                                                                         |                |               |
|-------------------------------------------------------------------------|----------------|---------------|
| Gain/(Loss) of the year                                                 | 311 569        | 265 194       |
| Gain/(Loss) Financial result                                            | 199 087        | 182 923       |
| Gain/(Loss) Operationnal result of the year before net financial result | <b>112 482</b> | <b>82 271</b> |

The result before net financial result for 2025 stated at CHF 112'482 vs CHF 82'271 in 2024

**Notes to the financial statements, as at December 31, 2025**  
**(in CHF)**

**NOTE 4 - TAXES**

In October 2010, FDI received confirmation from the Geneva Tax Authorities that it has been granted with an exemption from Communal and Cantonal taxes on its profits and capital as of 2009 for a period of ten years. In October 2018, this exemption is extended for an indefinite period.

In parallel, FDI obtained exemption for income and capital tax with respect to the Federal Direct Tax (IFD).

**NOTE 5 - ADDITIONAL NOTE DISCLOSURES IN ACCORDANCE WITH ARTICLE 69 CC**

|                                                                                                                                                                                                                                    | 2025                                   | 2024                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------|
| - Lease commitments not recorded in the balance sheet                                                                                                                                                                              |                                        |                         |
| At 31 December, the Federation had the following future aggregate minimum lease payments under non-cancellable operating leases for office equipment and office rent, which are not required to be reflected in the balance sheet: |                                        |                         |
| Payments to be made within one year                                                                                                                                                                                                | 167 699                                | 180 065                 |
| Payments to be made after more than one year                                                                                                                                                                                       | 628 870                                | 900 325                 |
|                                                                                                                                                                                                                                    | <u><u>796 569</u></u>                  | <u><u>1 080 390</u></u> |
| - In 2025 and 2024, the number of full-time equivalents did not exceed 50 on an annual average basis.                                                                                                                              |                                        |                         |
| - Amount due to the pension funds :                                                                                                                                                                                                | CHF 63 774 in 2025 (2024 : CHF 75 000) |                         |

**NOTE 6 - OTHER NOTE DISCLOSURES**

- Compensation and expenses reimbursement to Council members :

Total expenses reimbursed to Council members amounted to CHF 159 469 in 2025 (2024 : CHF 184 301)  
 In addition the President is entitled to a representation fee of CHF 24 000 in 2025 (2024: CHF 24 000)

- FDI's remuneration committee is responsible for the performance appraisal and the determination of the remuneration package of the Executive Director. This committee also makes recommendations regarding allowances and per diems for members of Council, Standing Committees, Working Groups and Task Teams. The management of the FDI is handled by the Executive Director. As permitted by Swiss GAAP FER 21.45, the disclosure of the compensation has been waived.

**NOTE 7 - SUBSEQUENT EVENTS**

No subsequent events identified

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 8 - MEMBERSHIP FEE DETAILS

The table below provides the detail of the membership fees in CHF for the years 2025 and 2024:

| Members                                                | Regular Member | Associated Member | Affiliated Member | Supporting Member | Total 2025 | Total 2024 |
|--------------------------------------------------------|----------------|-------------------|-------------------|-------------------|------------|------------|
| Afganistan                                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Albania                                                | 1 117          | -                 | -                 | -                 | 1 117      | 1 117      |
| Andorra                                                | 260            | -                 | -                 | -                 | 260        | 260        |
| Argentina                                              | 2 716          | -                 | -                 | -                 | 2 716      | 2 723      |
| Armenia                                                | 344            | -                 | -                 | -                 | 344        | 315        |
| Australia                                              | 51 526         | -                 | -                 | -                 | 51 526     | 51 179     |
| Austria                                                | 20 131         | -                 | -                 | -                 | 20 131     | 19 823     |
| Azerbaijan                                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Bahamas                                                | 260            | -                 | -                 | -                 | 260        | 260        |
| Bahrain                                                | 562            | -                 | -                 | -                 | 562        | -          |
| Bangladesh                                             | 2 023          | -                 | -                 | -                 | 2 023      | 2 023      |
| Barbados                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Belarus                                                | 704            | -                 | -                 | -                 | 704        | 707        |
| Belgium - Chambres                                     | 3 614          | -                 | -                 | -                 | 3 614      | 3 266      |
| Belgium - Society                                      | 6 608          | -                 | -                 | -                 | 6 608      | 5 972      |
| Belgium - Verbond                                      | 11 915         | -                 | -                 | -                 | 11 915     | 10 928     |
| Benin                                                  | 260            | -                 | -                 | -                 | 260        | 260        |
| Bolivia                                                | 276            | -                 | -                 | -                 | 276        | 273        |
| Bosnia & Herzegovina Dental Assoc                      | 260            | -                 | -                 | -                 | 260        | 260        |
| Association of Dentists in Republic of Srpska          | 260            | -                 | -                 | -                 | 260        | 260        |
| The Republic of Srpska Chamber of Doctors in Dentistry | 636            | -                 | -                 | -                 | 636        | 630        |
| Bosnia & Herzegovina Srpska Chamber                    | 765            | -                 | -                 | -                 | 765        | 688        |
| Botswana                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Bulgaria                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Bulgaria - AMSR                                        | 8 027          | -                 | -                 | -                 | 8 027      | 7 967      |
| Burkina Faso                                           | 260            | -                 | -                 | -                 | 260        | 260        |
| Cambodia                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Cameroon                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Canada                                                 | 69 581         | -                 | -                 | -                 | 69 581     | 67 303     |
| Chile                                                  | 5 373          | -                 | -                 | -                 | 5 373      | 5 069      |
| China                                                  | 39 641         | -                 | -                 | -                 | 39 641     | 39 641     |
| Chinese Taipei                                         | 6 859          | -                 | -                 | -                 | 6 859      | 6 686      |
| Colombia                                               | 1 716          | -                 | -                 | -                 | 1 716      | 1 719      |
| Congo, Dem. Rep.                                       | 260            | -                 | -                 | -                 | 260        | 260        |
| Congo, Rep                                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Cook Islands                                           | 260            | -                 | -                 | -                 | 260        | -          |
| Costa rica                                             | 4 282          | -                 | -                 | -                 | 4 282      | 4 199      |
| Croatia - Chamber                                      | 5 754          | -                 | -                 | -                 | 5 754      | 5 716      |
| Croatia - Society                                      | 947            | -                 | -                 | -                 | 947        | 941        |
| Cyprus                                                 | 2 611          | -                 | -                 | -                 | 2 611      | 2 030      |
| Czech Republic                                         | 15 006         | -                 | -                 | -                 | 15 006     | 13 517     |
| Denmark - DDA                                          | 17 493         | -                 | -                 | -                 | 17 493     | 18 035     |
| Denmark - APHD                                         | 2 596          | -                 | -                 | -                 | 2 596      | 2 585      |
| Ecuador                                                | 527            | -                 | -                 | -                 | 527        | 528        |
| Egypt                                                  | 1 163          | -                 | -                 | -                 | 1 163      | 1 145      |
| Estonia                                                | 2 148          | -                 | -                 | -                 | 2 148      | 2 134      |
| Ethiopia                                               | 260            | -                 | -                 | -                 | 260        | 260        |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 8 - MEMBERSHIP FEE DETAILS (continued)

| Members                 | Regular Member | Associated Member | Affiliated Member | Supporting Member | Total 2025 | Total 2024 |
|-------------------------|----------------|-------------------|-------------------|-------------------|------------|------------|
| Fiji                    | 260            | -                 | -                 | -                 | 260        | 260        |
| Finland                 | 13'603         | -                 | -                 | -                 | 13 603     | 13 540     |
| France                  | 85'492         | -                 | -                 | -                 | 85 492     | 86 450     |
| Gabon                   | 260            | -                 | -                 | -                 | 260        | 260        |
| Georgia                 | 1 331          | -                 | -                 | -                 | 1 331      | 1 335      |
| Germany                 | 159 039        | -                 | -                 | -                 | 159 039    | 160 474    |
| Ghana                   | 260            | -                 | -                 | -                 | 260        | 260        |
| Greece - Hell.Dent.Ass. | 17 692         | -                 | -                 | -                 | 17 692     | 17 628     |
| Greece - SSG            | 882            | -                 | -                 | -                 | 882        | 865        |
| Guam                    | -              | -                 | -                 | -                 | -          | 260        |
| Guatemala               | 1 073          | -                 | -                 | -                 | 1 073      | 1 074      |
| Haiti                   | 260            | -                 | -                 | -                 | 260        | 260        |
| Honduras                | 563            | -                 | -                 | -                 | 563        | 546        |
| Hong Kong SAR, China    | 7 930          | -                 | -                 | -                 | 7 930      | 7 733      |
| Hungary                 | 816            | -                 | -                 | -                 | 816        | 979        |
| Iceland                 | 1 174          | -                 | -                 | -                 | 1 174      | 1 049      |
| India                   | 8 873          | -                 | -                 | -                 | 8 873      | 8 835      |
| Indonesia               | 6 031          | -                 | -                 | -                 | 6 031      | 6 031      |
| Iran                    | 2 689          | -                 | -                 | -                 | 2 689      | 2 658      |
| Iraq                    | 5 420          | -                 | -                 | -                 | 5 420      | 5 420      |
| Ireland                 | 8 946          | -                 | -                 | -                 | 8 946      | 9 337      |
| Israel                  | 18 207         | -                 | -                 | -                 | 18 207     | 18 046     |
| Italy - AIO             | 10 115         | -                 | -                 | -                 | 10 115     | 9 983      |
| Italy - ANDI            | 70 120         | -                 | -                 | -                 | 70 120     | 69 202     |
| Ivory Coast             | 260            | -                 | -                 | -                 | 260        | 260        |
| Jamaica                 | 260            | -                 | -                 | -                 | 260        | 260        |
| Japan                   | 129 199        | -                 | -                 | -                 | 129 199    | 126 887    |
| Jordan                  | 282            | -                 | -                 | -                 | 282        | 276        |
| Kazakhstan Uted Kaz Ass | 639            | -                 | -                 | -                 | 639        | 755        |
| Kazakhstan Stom Asso    | 766            | -                 | -                 | -                 | 766        | 629        |
| Kenya                   | 260            | -                 | -                 | -                 | 260        | 260        |
| Korea                   | 39 337         | -                 | -                 | -                 | 39 337     | 38 809     |
| Kosovo                  | 625            | -                 | -                 | -                 | 625        | 618        |
| Kyrgyz Republic         | 260            | -                 | -                 | -                 | 260        | 260        |
| Laos                    | 260            | -                 | -                 | -                 | 260        | 260        |
| Latvia                  | -              | -                 | -                 | -                 | -          | 2 373      |
| Lebanon                 | 1 548          | -                 | -                 | -                 | 1 548      | 1 548      |
| Lebanon                 | 272            | -                 | -                 | -                 | 272        | -          |
| Luxembourg              | 1 901          | -                 | -                 | -                 | 1 901      | 2 155      |
| Macau SAR, China        | 260            | -                 | -                 | -                 | 260        | 260        |
| Malaysia                | 2 032          | -                 | -                 | -                 | 2 032      | 2 488      |
| Mali                    | 260            | -                 | -                 | -                 | 260        | 260        |
| Malta                   | 346            | -                 | -                 | -                 | 346        | 321        |
| Mauritania              | 260            | -                 | -                 | -                 | 260        | 260        |
| Mauritius               | 260            | -                 | -                 | -                 | 260        | 260        |
| Mexico                  | 3 594          | -                 | -                 | -                 | 3 594      | 3 091      |
| Moldova                 | 579            | -                 | -                 | -                 | 579        | 506        |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 8 - MEMBERSHIP FEE DETAILS (continued)

| Members                              | Regular Member | Associated Member | Affiliated Member | Supporting Member | Total 2025 | Total 2024 |
|--------------------------------------|----------------|-------------------|-------------------|-------------------|------------|------------|
| Mongolia                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Montenegro                           | 272            | -                 | -                 | -                 | 272        | 270        |
| Morocco                              | 260            | -                 | -                 | -                 | 260        | 260        |
| Mozambique                           | 260            | -                 | -                 | -                 | 260        | 520        |
| Myanmar                              | 260            | -                 | -                 | -                 | 260        | 260        |
| Nepal                                | 260            | -                 | -                 | -                 | 260        | 260        |
| Netherlands                          | 35 475         | -                 | -                 | -                 | 35 475     | 33 443     |
| New Zealand                          | 7 403          | -                 | -                 | -                 | 7 403      | 7 474      |
| Nicaragua                            | 260            | -                 | -                 | -                 | 260        | 260        |
| Niger                                | 260            | -                 | -                 | -                 | 260        | 260        |
| Nigeria                              | 572            | -                 | -                 | -                 | 572        | 567        |
| Macedonian Dental Society            | 260            | -                 | -                 | -                 | 260        | 260        |
| Macedonian Dental Chamber            | 498            | -                 | -                 | -                 | 498        | 496        |
| Norway                               | 32 090         | -                 | -                 | -                 | 32 090     | 32 326     |
| Pakistan                             | 912            | -                 | -                 | -                 | 912        | 923        |
| State of Palestine                   | 836            | -                 | -                 | -                 | 836        | 835        |
| Panama                               | 635            | -                 | -                 | -                 | 635        | 590        |
| Papua New Guinea                     | 260            | -                 | -                 | -                 | 260        | 260        |
| Paraguay                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Peru                                 | 7 651          | -                 | -                 | -                 | 7 651      | 7 390      |
| Philippines                          | 4 244          | -                 | -                 | -                 | 4 244      | 4 244      |
| Polish Chber of Phys/Dentists        | 24 331         | -                 | -                 | -                 | 24 331     | 23 623     |
| Poland Polish Dtl Soc                | 3 218          | -                 | -                 | -                 | 3 218      | 3 125      |
| Portugal OMD                         | 22 245         | -                 | -                 | -                 | 22 245     | 21 635     |
| Portugal SPEMD                       | 4 796          | -                 | -                 | -                 | 4 796      | 4 768      |
| Romania Dental Ass. Of Private Pract | 514            | -                 | -                 | -                 | 514        | 517        |
| Romania Society of Stomatology       | 260            | -                 | -                 | -                 | 260        | 260        |
| Russia                               | 19 450         | -                 | -                 | -                 | 19 450     | 24 776     |
| Rwanda                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Kingdom Saudi Arabia                 | 7 397          | -                 | -                 | -                 | 7 397      | 7 372      |
| Senegal                              | 260            | -                 | -                 | -                 | 260        | 260        |
| Serbia                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Seychelles                           | 260            | -                 | -                 | -                 | 260        | 260        |
| Singapore                            | 8 817          | -                 | -                 | -                 | 8 817      | 8 436      |
| Slovakia                             | 4 269          | -                 | -                 | -                 | 4 269      | 4 257      |
| Slovenia                             | 1 555          | -                 | -                 | -                 | 1 555      | 1 608      |
| Somali                               | 260            | -                 | -                 | -                 | 260        | 260        |
| South Africa                         | 1 131          | -                 | -                 | -                 | 1 131      | 1 380      |
| Spain                                | 84 097         | -                 | -                 | -                 | 84 097     | 81 570     |
| Sri Lanka                            | 437            | -                 | -                 | -                 | 437        | 425        |
| Sudan                                | -              | -                 | -                 | -                 | -          | 260        |
| Sweden                               | 20 364         | -                 | -                 | -                 | 20 364     | 20 283     |
| Switzerland                          | 25 840         | -                 | -                 | -                 | 25 840     | 23 991     |
| Syria                                | 260            | -                 | -                 | -                 | 260        | 260        |
| Tanzania                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Thailand                             | 4 396          | -                 | -                 | -                 | 4 396      | 4 363      |
| Timor Leste                          | -              | -                 | -                 | -                 | -          | 260        |

Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 8 - MEMBERSHIP FEE DETAILS (continued)

| Members                                            | Regular Member | Associated Member | Affiliated Member | Supporting Member | Total 2025 | Total 2024 |
|----------------------------------------------------|----------------|-------------------|-------------------|-------------------|------------|------------|
| Togo                                               | 260            | -                 | -                 | -                 | 260        | 260        |
| Tunisia                                            | 260            | -                 | -                 | -                 | 260        | 260        |
| Türkiye                                            | 23 989         | -                 | -                 | -                 | 23 989     | 23 876     |
| Uganda                                             | 260            | -                 | -                 | -                 | 260        | 260        |
| Ukraine                                            | 1 393          | -                 | -                 | -                 | 1 393      | 1 396      |
| United Arab Emirates                               | 2 596          | -                 | -                 | -                 | 2 596      | 2 585      |
| United Kingdom                                     | 49 105         | -                 | -                 | -                 | 49 105     | 49 663     |
| United States                                      | 383 779        | -                 | -                 | -                 | 383 779    | 383 310    |
| Uruguay                                            | 1 193          | -                 | -                 | -                 | 1 193      | 1 128      |
| Uzbekistan                                         | 260            | -                 | -                 | -                 | 260        | 260        |
| Vietnam                                            | 1 165          | -                 | -                 | -                 | 1 165      | 1 165      |
| Zimbabwe                                           | 260            | -                 | -                 | -                 | 260        | 260        |
| Asociacion Odontologica Argentina                  | -              | 423               | -                 | -                 | 423        | 423        |
| Egyptian Clinical Dental Society                   | -              | 423               | -                 | -                 | 423        | 423        |
| Chinese Taipei Dental Association                  | -              | 423               | -                 | -                 | 423        | 423        |
| Freier Verband Deutscher Zahnärzte                 | -              | 423               | -                 | -                 | 423        | 423        |
| Dental Section of the Hungarian Medical Chamber    | -              | 423               | -                 | -                 | 423        | 423        |
| Macedonian Society of Dental Medicine              | -              | 267               | -                 | -                 | 267        | 267        |
| Academy of Dentistry International                 | -              | -                 | 520               | -                 | 520        | 520        |
| Associação Dentária Lusófona (ADL)                 | -              | -                 | 520               | -                 | 520        | 520        |
| Assoc. Commonwealth legal Entities                 | -              | -                 | 520               | -                 | 520        | 520        |
| GADEF                                              | -              | -                 | 520               | -                 | 520        | 520        |
| Commonwealth Dental Assoc                          | -              | -                 | 520               | -                 | 520        | 520        |
| Intern. Association for Disability and Oral Health | -              | -                 | 520               | -                 | 520        | 520        |



Notes to the financial statements, as at December 31, 2025  
(in CHF)

NOTE 8 - MEMBERSHIP FEE DETAILS (continued)

| Members                                               | Regular Member | Associated Member | Affiliated Member | Supporting Member | Total 2025 | Total 2024 |
|-------------------------------------------------------|----------------|-------------------|-------------------|-------------------|------------|------------|
| Intern. Association of Dento-Maxillofacial Radiology  | -              | -                 | 520               | -                 | 520        | 520        |
| Intern. Association of Paediatric Dentistry           | -              | -                 | 520               | -                 | 520        | 520        |
| Inter Assoc Dental, Oral and Craniofacial Research    | -              | -                 | 520               | -                 | 520        | 520        |
| Intern. College of Dentists                           | -              | -                 | 520               | -                 | 520        | 520        |
| IFDAS Intern. Fed. of Dental Anesthesiology Societies | -              | -                 | -                 | -                 | -          | 520        |
| Intern. Society of Computerized Dentistry             | -              | -                 | 520               | -                 | 520        | 520        |
| Iranian-German Implant Association - IGIA             | -              | -                 | 520               | -                 | 520        | 520        |
| Internation Ass of Dental Students                    | -              | -                 | 520               | -                 | 520        | 520        |
| Academy of Osseointegration                           | -              | -                 | 520               | -                 | 520        | 520        |
| Pierre Fauchard Academy                               | -              | -                 | 520               | -                 | 520        | 520        |
| World Federation of Orthodontist                      | -              | -                 | 520               | -                 | 520        | 520        |
| Academy of General Dentistry                          | -              | -                 | -                 | 520               | 520        | 520        |
| European Dental Students Assoc.                       | -              | -                 | -                 | 520               | 520        | 520        |
| Young Dentists Worldwide                              | -              | -                 | -                 | 520               | 520        | 520        |
| Association of Dental Dealers in Europe (ADDE)        | -              | -                 | -                 | 740               | 740        | 740        |
| Australian Dental Industry Assoc.                     | -              | -                 | -                 | 740               | 740        | 740        |
| The British Dental Industr Asso                       | -              | -                 | -                 | 740               | 740        | 740        |
| Dental Trade Alliance                                 | -              | -                 | -                 | 740               | 740        | 740        |

NOTE 8 - MEMBERSHIP FEE DETAILS (continued)

| Members                                             | Regular Member   | Associated Member | Affiliated Member | Supporting Member | Total 2025       | Total 2024       |
|-----------------------------------------------------|------------------|-------------------|-------------------|-------------------|------------------|------------------|
| Federation of the European Dental Industry (FIDE)   | -                | -                 | -                 | 740               | 740              | 740              |
| Fondazione ANDI                                     | -                | -                 | -                 | 520               | 520              | 520              |
| Foundation Nakao                                    | -                | -                 | -                 | 740               | 740              | 740              |
| International Dental Manufacturers                  | -                | -                 | -                 | 740               | 740              | 740              |
| Japan Dental Trade Association                      | -                | -                 | -                 | 740               | 740              | 740              |
| Organization for Safety & Asepsis Prevention (OSAP) | -                | -                 | -                 | 520               | 520              | 520              |
| Georgian Implantological Association                | -                | -                 | -                 | 520               | 520              | 520              |
| American Dental Education Association               | -                | -                 | -                 | 520               | 520              | 520              |
| Balkan Stomatological Society                       | -                | -                 | -                 | 520               | 520              | 520              |
| Oral Health Foundation                              | -                | -                 | -                 | 520               | 520              | 520              |
| Global Scientific Dental Alliance                   | -                | -                 | -                 | 520               | 520              | 520              |
| <b>Sub-total</b>                                    | <b>1 688 222</b> | <b>2 382</b>      | <b>8 320</b>      | <b>11 120</b>     | <b>1 710 044</b> | <b>1 701 212</b> |
| Bad debts adjustment                                | 513              | ( 846)            | -                 | -                 | ( 333)           | 1 248            |
| Termination/Write off                               | -                | -                 | -                 | -                 | -                | ( 6 626)         |
| Discount/credit note                                | ( 14 898)        | -                 | -                 | -                 | ( 14 898)        | ( 1 468)         |
| <b>Total</b>                                        | <b>1 673 837</b> | <b>1 536</b>      | <b>8 320</b>      | <b>11 120</b>     | <b>1 694 813</b> | <b>1 694 366</b> |

## FDI - 2025

|                                                                  | <u>2025</u>        | <u>2025</u>                   | <u>2025</u>       | <u>2025</u>                  |              |
|------------------------------------------------------------------|--------------------|-------------------------------|-------------------|------------------------------|--------------|
|                                                                  | Expenses<br>Budget | Expenses Actual<br>(December) | Revenue<br>Budget | Revenue Actual<br>(December) | Footnotes    |
| CHF                                                              |                    |                               |                   |                              |              |
| <b>1. ADMINISTRATION</b>                                         |                    |                               |                   |                              |              |
| 1) Staff costs                                                   | 270'000            | 263'270                       | -                 | 10'000                       |              |
| 2) Office costs                                                  | 550'000            | 512'570                       | -                 | 45'401                       |              |
| 3) Other                                                         | -                  | -                             | -                 | -                            |              |
| <b>total</b>                                                     | <b>820'000</b>     | <b>775'840</b>                | <b>-</b>          | <b>55'401</b>                |              |
| <b>2. GOVERNANCE</b>                                             |                    |                               |                   |                              |              |
| 1) Membership                                                    | 10'000             | 4'485                         | 1'700'000         | 1'694'813                    | Footnote #1  |
| 2) Representation and President's travel                         | 85'000             | 67'046                        | -                 | 5'495                        | Footnote #2  |
| 3) Council and Committees Mid-year meeting                       | 170'000            | 139'868                       | -                 | 2'305                        |              |
| 4) Executive Committee                                           | 30'000             | 17'429                        | -                 | -                            |              |
| 5) Finance/Audit Committee                                       | 10'000             | 6'829                         | -                 | -                            |              |
| 6) Governance general                                            | 30'000             | 29'341                        | -                 | 7'148                        |              |
| 7) Contingency funds                                             | 20'000             | -                             | -                 | -                            |              |
| Staff costs                                                      | 405'000            | 405'000                       | -                 | -                            |              |
| <b>total</b>                                                     | <b>760'000</b>     | <b>669'999</b>                | <b>1'700'000</b>  | <b>1'709'761</b>             |              |
| <b>3. COMMITTEES</b>                                             |                    |                               |                   |                              |              |
| <b>Education committee</b>                                       |                    |                               |                   |                              |              |
| 1) Regional Continuing Education Programme                       | 20'000             | 25'879                        | -                 | 5'829                        |              |
| 2) Education Committee Webinars                                  | 13'000             | 11'207                        | -                 | -                            |              |
| 3) Evaluation of congress speakers                               | 3'000              | 1'783                         | -                 | -                            |              |
| Staff costs                                                      | 43'000             | 90'000                        | -                 | -                            |              |
| <b>total</b>                                                     | <b>79'000</b>      | <b>128'869</b>                | <b>-</b>          | <b>5'829</b>                 |              |
| <b>Public Health committee</b>                                   |                    |                               |                   |                              |              |
| 1) World Dental Development Funds (WDDF)                         | 50'000             | 50'000                        | 50'000            | 50'000                       |              |
| 2) Policy statements                                             | 3'000              | 1'184                         | -                 | -                            |              |
| 3) Refugee Oral Health Prevention and Promotion                  | 10'000             | 2'446                         | -                 | -                            |              |
| 4) Oral Health and Tobacco Cessation                             | 10'500             | 10'499                        | 11'500            | 11'500                       |              |
| 5) Educational Module for non-oral health professionals          | 36'000             | 60'649                        | 40'000            | 66'649                       |              |
| 6) Silver Diamine Fluoride from a PH perspective                 | 15'000             | -                             | 15'000            | -                            |              |
| Staff costs                                                      | 36'000             | 20'000                        | -                 | -                            |              |
| <b>total</b>                                                     | <b>160'500</b>     | <b>144'779</b>                | <b>116'500</b>    | <b>128'149</b>               |              |
| <b>Science committee</b>                                         |                    |                               |                   |                              |              |
| 1) Policy Statements                                             | 4'000              | 1'995                         | -                 | -                            |              |
| 2) IADR General session and Exhibition attendance                | 4'510              | 3'971                         | -                 | -                            |              |
| 3) Science Committee Forum                                       | 3'725              | 2'625                         | -                 | -                            |              |
| 4) Antimicrobial Resistance (ABR)                                | 10'000             | 3'337                         | -                 | -                            |              |
| 5) International Dental Journal articles to support PS           | 4'800              | 4'870                         | -                 | -                            |              |
| Staff costs                                                      | 25'000             | 30'000                        | -                 | -                            |              |
| <b>total</b>                                                     | <b>52'035</b>      | <b>46'798</b>                 | <b>-</b>          | <b>-</b>                     |              |
| <b>Dental Practice committee</b>                                 |                    |                               |                   |                              |              |
| 1) Policy Statements                                             | 3'000              | 1'668                         | -                 | -                            |              |
| 2) Access to Care                                                | 10'000             | 2'550                         | 10'000            | -                            |              |
| 3) Advice Sheet on Oral Health and Sexually Transmitted Diseases | 1'000              | -                             | -                 | -                            |              |
| Staff costs                                                      | 36'000             | 20'000                        | -                 | -                            |              |
| <b>total</b>                                                     | <b>50'000</b>      | <b>24'218</b>                 | <b>10'000</b>     | <b>-</b>                     |              |
| <b>Membership Liaison and Support committee</b>                  |                    |                               |                   |                              |              |
| 1) Travel Grant - Congress                                       | 25'000             | 23'594                        | -                 | -                            |              |
| 2) Member supports Member                                        | -                  | -                             | -                 | -                            |              |
| Staff costs                                                      | 40'000             | 40'000                        | -                 | -                            |              |
| <b>total</b>                                                     | <b>65'000</b>      | <b>63'594</b>                 | <b>-</b>          | <b>-</b>                     |              |
| <b>4. COMMUNICATIONS AND ADVOCACY</b>                            |                    |                               |                   |                              |              |
| <b>4.1) Communications</b>                                       |                    |                               |                   |                              |              |
| 4.1.1) International Dental Journal (IDJ)                        | 118'000            | 102'045                       | 165'000           | 526'520                      | Footnote #3  |
| 4.1.2) Public Relations and Multimedia                           | 64'000             | 48'632                        | -                 | -                            | Footnote #4  |
| 4.1.3) Website and Database                                      | 65'000             | 48'229                        | -                 | -                            | Footnote #5  |
| 4.2) World Oral Health Day (WOHD)                                | 419'500            | 308'790                       | 570'000           | 494'417                      | Footnote #6  |
| 4.3) Advocacy                                                    | 145'000            | 81'607                        | 320'000           | 320'000                      | Footnote #7  |
| Staff costs                                                      | 530'000            | 530'000                       | -                 | -                            |              |
| <b>total</b>                                                     | <b>1'341'500</b>   | <b>1'119'303</b>              | <b>1'055'000</b>  | <b>1'340'937</b>             |              |
| <b>5. MULTI-COMMITTEES PROJECTS</b>                              |                    |                               |                   |                              |              |
| 1) Oral Health within General Health                             | 330'000            | 93'309                        | 363'000           | 109'809                      | Footnote #8  |
| 2) Oral Health Observatory (OHO)                                 | 97'000             | 82'494                        | 107'000           | 92'494                       |              |
| 3) Oral Health in Comprehensive Cleft Care                       | 70'000             | -                             | 77'000            | -                            | Footnote #9  |
| 4) Oral Health for an Ageing Population (OHAP)                   | 84'000             | 51'314                        | 92'000            | 59'314                       | Footnote #10 |
| 5) Electronic Health Records (EHRs)                              | 83'000             | 9'997                         | 90'000            | 10'085                       | Footnote #11 |
| 6) Digital Cleft Care                                            | 83'000             | 1'743                         | 90'000            | 14'795                       | Footnote #12 |
| 7) Sustainability in Dentistry                                   | 142'500            | 117'444                       | 150'000           | 130'444                      | Footnote #13 |
| 8) Mental Health and Wellbeing                                   | 95'000             | 125'052                       | 105'000           | 135'052                      | Footnote #14 |
| 9) Ethics in dentistry                                           | 50'000             | -                             | 55'000            | -                            |              |
| 10) Dental Imaging Project                                       | 80'000             | -                             | 88'000            | -                            |              |
| 11) Web Application and Platform Maintenance                     | 16'000             | 15'564                        | -                 | -                            |              |
| 12) Smile around the world                                       | -                  | 12'000                        | -                 | 13'000                       |              |
| 14) Human Papilloma Virus (HPV) prevention project               | -                  | 10'517                        | -                 | 11'517                       |              |
| 14) Recognition Programme                                        | -                  | -                             | 400'000           | 34'000                       | Footnote #15 |
| <b>total</b>                                                     | <b>1'130'500</b>   | <b>519'435</b>                | <b>1'617'000</b>  | <b>610'510</b>               |              |
| <b>6. CONGRESSES AND CONTINUING EDUCATION</b>                    |                    |                               |                   |                              |              |
| 6.1) FDI Oral Health Campus                                      | 10'000             | 8'526                         | -                 | -                            |              |
| 6.2) Regional Congresses                                         | 46'000             | 38'164                        | 56'000            | 62'193                       |              |
| 6.3.1) World Dental Congress - Shanghai                          | 429'000            | 387'609                       | 995'000           | 991'730                      |              |
| 6.3.2) Other expenses                                            | 7'000              | 3'019                         | -                 | 124                          |              |
| 6.4) Young Dentists Forum                                        | 25'000             | 24'131                        | 25'000            | 24'131                       |              |
| 6.5) Master Continuing Education Programme                       | 60'000             | 65'984                        | 60'000            | 65'984                       |              |
| 6.6) Speakers platform                                           | 12'000             | -                             | -                 | -                            |              |
| World Dental Congress Staff costs                                | 345'000            | 294'000                       | -                 | -                            |              |
| <b>total</b>                                                     | <b>934'000</b>     | <b>821'433</b>                | <b>1'136'000</b>  | <b>1'144'161</b>             |              |
| <b>7. DEVELOPMENT</b>                                            |                    |                               |                   |                              |              |
| Travel and others                                                | 25'000             | 14'324                        | -                 | -                            |              |
| Staff costs                                                      | 175'000            | 175'000                       | -                 | -                            |              |
| <b>total</b>                                                     | <b>200'000</b>     | <b>189'324</b>                | <b>-</b>          | <b>-</b>                     |              |
| <b>Grand Total</b>                                               | <b>5'592'535</b>   | <b>4'503'592</b>              | <b>5'634'500</b>  | <b>4'994'747</b>             |              |
| <i>Operationnal loss</i>                                         |                    |                               | <i>41'965</i>     | <i>491 156</i>               |              |
| Special fund fundraising                                         |                    | 400'000                       |                   |                              |              |
| Financial result ( <i>bank charges excluded</i> )                |                    | 28'430                        |                   | 248'844                      |              |
| Net Result of the year (profit)                                  |                    |                               |                   | <b>311'569</b>               |              |

## 2025 Management report – Footnotes

As per the Budget Reference Committee's recommendation, the variances versus the budget should be explained in a footnote for programmes with a budget of CHF 50,000 or more with a variance of fifteen (15) percent or more, whether negative or positive. For 2025, the explanations are:

- 1) Governance – Representation and President's travel: there were less travels.
- 2) Governance – Midyear meeting: the meeting took place in Geneva and was less expensive as the FDI staff didn't travel.
- 3) Communications and Advocacy – International dental journal (IDJ): The costs were under budget as the travel expenses for the World dental congress were covered by the congress budget. However, the number of published articles increased, and income from royalties exceeded the budget by 360 kCHF.
- 4) Communications and Advocacy – Public Relation and Multimedia: we underspend on deliverables.
- 5) Communications and Advocacy – Website and database: in 2025 there were no developments costs for our internet or database, only maintenance fees.
- 6) Communications and Advocacy – World Oral Health Day: we received less income, so we adjusted our spending accordingly.
- 7) Communications and Advocacy – Advocacy. We underspend on activities.
- 8) Multi-Committees projects - Oral Health within General Health: the contract could not be renewed as budgeted, but a new contract has been signed for one year.
- 9) Multi-Committees projects – The project ended and the contract was not renewed.
- 10) Multi-Committees projects – Oral Health for an Ageing Population: there was less deliverables in 2025, but the projects is continuing till 2027. The unspent amount is added to a restricted reserve.
- 11) Multi-Committees projects – The project ended and the contract was not renewed.
- 12) Multi-Committees projects – Digital cleft care: The project ended and the contract was not renewed.
- 13) Multi-Committees projects – Sustainability in Dentistry: we received less income, so we adjusted our spending accordingly.
- 14) Multi-Committees projects – Mental health and wellbeing: the project started 2 years ago, and we are in line with the schedule. It's a 2-year project.
- 15) Recognition programme: We secured so far only one partner for one country and the income is below the objective.

### 7.3 Annual Report 2025



# 2025 ANNUAL REPORT

## FDI World Dental Federation



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A WORLD WITH OPTIMAL ORAL HEALTH



## MESSAGE FROM PRESIDENT ASSIST. PROF. DR NIKOLAI SHARKOV

I was honoured to assume the presidency in September 2025. FDI's vision is clear: a world with optimal oral health, with no one left behind. None of our global efforts would have impact without the tireless work carried out by our members at the national and regional levels. For this, I extend my sincere thanks.

Before reflecting on 2025, I wish to express my sincere gratitude to my predecessor, Dr Greg Chadwick. It has been a privilege to know and work with him over many years. I will use this platform to ensure that oral health continues to gain the recognition it deserves, guided by values that matter deeply to me: **trust, unity, harmony, resilience, field work, and transparency**. These are not slogans; they are daily practices that shape how we serve our profession and the public.

These values were put into action most visibly at the Fourth United Nations High-Level Meeting on Noncommunicable Diseases (NCDs) and Mental Health (HLM4). FDI was on the ground in New York for HLM4—a **defining moment for global health**—and I am proud to say that we played an active and influential role in shaping its outcomes. At the outset of negotiations, oral health was absent from the draft Political Declaration. FDI refused to accept that omission. Together with our members, partners, and champion governments, we mobilized strong advocacy to change this, turning it into a clear commitment that will support efforts to integrate oral health within national NCD strategies worldwide. This reaffirmed that oral health belongs in the same conversation as NCDs and mental health.

Our task now is to translate this political recognition into practical implementation at country level, particularly as oral diseases continue to affect billions of people worldwide and inequalities persist both within and between nations. This requires practical, people-centred action **grounded in prevention**. This means advancing concrete policies and services that include improving health literacy and behaviour change, access to affordable fluoride and effective hygiene tools, promotion of healthy diets, reduction of sugar consumption, tobacco control, and early detection integrated into routine health visits.

Through World Oral Health Day, FDI continues to speak with one voice to citizens and policymakers alike. In 2025, the campaign truly came alive, **reaching new heights on digital platforms** and inspiring millions with the call for better oral health for all. But awareness must

always be paired with action. Our campaigns succeed when they help people feel empowered to make changes, when they inspire professionals to advocate beyond the clinic, and when they encourage governments to back prevention with policy and funding.

FDI places great emphasis on sharing knowledge, exchanging experiences, and **learning from one another**. We had the opportunity to come together as a dental community at the FDI World Dental Congress in Shanghai, as well as to **strengthen connections** through two Regional Congresses—the first in Riyadh, Kingdom of Saudi Arabia, and the second in San José, Costa Rica. I also had the privilege of engaging directly with our members around the world.

Each of these encounters underscored a shared direction despite differing contexts. Members are focused on strengthening prevention, integrating more fully with wider health services, addressing workforce pressures, and engaging policymakers effectively. They are innovating in models of care and partnerships, and they look to FDI for practical support and global representation. Our strength lies in turning local experience into shared solutions so that no member has to start from zero.

Strengthening year-round dialogue remains a priority. My first Members' Briefing, alongside FDI Executive Director Enzo Bondioni, marked an important step in reinforcing ongoing engagement that helps us better understand the priorities and challenges faced by our members and **strengthens our collective voice** in advancing global oral health.

In the year ahead, I want to deepen this two-way communication even further. Listening is not a courtesy; it is strategy. It helps us identify emerging issues early, respond with relevance, and ensure that our advocacy reflects the realities on the ground and strengthen accountability by showing not only what we have done, but what we have learned. If we are to advance oral health globally, we must do so together: with shared ambition, shared responsibility, and shared pride in what the dental profession contributes to health, equity, and human well-being.

“Let us strive to integrate oral health into primary care, strengthen workforces where shortages are greatest, embed sustainability in everything we do, and ensure that digital tools bridge gaps rather than widen them.”



## MESSAGE FROM EXECUTIVE DIRECTOR ENZO BONDIONI

**As the world continues to navigate global uncertainties, oral health is making steady progress within the broader health agenda. Our strength lies in our membership. We are truly grateful for their trust, commitment, and engagement, which drive our advocacy, strengthen our programmes, and increase our collective impact across borders.**

The year started with great momentum as FDI co-hosted a highly successful Regional Congress in Riyadh. It became the **largest congress in the history of SIDC** and the largest FDI activity in the Middle East, marking a significant milestone. Building on this success, the next edition was held in San José—the first of its kind in the Americas. Alongside these regional events, we were proud to host over **30,000 participants at the FDI World Dental Congress** in Shanghai. From the scientific and exhibition programmes to the social events, feedback was overwhelmingly positive. We are grateful to our co-hosts, the Chinese Stomatological Association, for their efforts in making it an event to remember.

World Oral Health Day (WOHD) 2025 was another highlight of the year. The campaign focused on the important connection between oral health and mental well-being, a timely theme that aligned with one of the most important meetings of the year: the United Nations High-Level Meeting on Noncommunicable Diseases (NCDs) and Mental Health (HLM4). As the most prevalent NCDs globally, oral diseases have a significant impact on a person's mental health. The WOHD campaign helped draw attention to the need for integrated approaches to health, and thanks to our members, **WOHD activities were reported across the world.**

As well as the successful outcomes of HLM4, reported in the President's message, FDI made meaningful progress in its global advocacy efforts throughout 2025, driven by **consistent**

**and credible engagement with key health stakeholders** on behalf of our membership. Our presence in Geneva has been instrumental in facilitating close and regular contact with institutions central to global health governance. FDI's advocacy on dental amalgam secured an equity-focused, patient-centred approach to its phasing out, including an extension and a key exemption permitting its use when necessary after the phase-out. FDI also actively participated in the World Health Organization's (WHO) key annual meetings—the Executive Board and the World Health Assembly—demonstrating our ongoing commitment to working with WHO, Member States, and global health partners to ensure a future in which oral health is accessible to all.

Our ***International Dental Journal*** has continued to thrive under the leadership of Prof. Lakshman Samaranayake, with a rising impact factor and an increasing number of submissions, reflecting its importance as a trusted source of scientific knowledge. In the spirit of open dialogue and transparency, we also established two Special Committees to examine our membership dues formula and the feasibility of holding the World Dental Parliament in a hybrid format. These forward-looking initiatives are designed to ensure FDI's sustainability and responsiveness to our members' needs, and their work has progressed with focus and determination.

**“As I close this message, I express heartfelt thanks to the entire FDI community. Working collaboratively, within and beyond our professional community, is essential to advancing global oral health. Together, we can create sustainable solutions that improve oral and overall health for all.”**



# THE YEAR IN REVIEW

## Highlights of FDI's key activities and achievements in 2025.



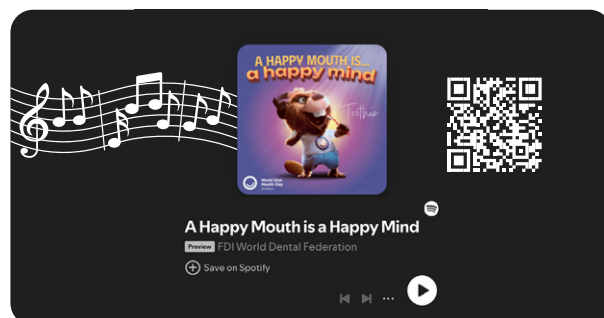
### JANUARY

- FDI Regional Congress - SIDC 2025 unites the global dentistry community in Riyadh with record-breaking attendance and the largest SIDC trade show to date.



- Member national dental associations (NDAs) are invited to apply for a CHF 1,000 grant to host a Tobacco Cessation workshop equipping dental teams to deliver effective tobacco cessation advice to patients in their practices.

- For the first time, Toothie releases a song supporting the WOHD campaign, which is played across Spotify and other music platforms.



- With only a couple of months to go, the countdown to World Oral Health Day (WOHD) begins, as FDI encourages everyone to explore WOHD 2025 resources highlighting the mouth–mind connection.
- Applications open for the speaker contest for the third edition of the Young Dentists Forum in Shanghai, reflecting FDI's efforts to empower young dentists to become tomorrow's leaders.
- Winners of the Sustainability Ambassador Prize are announced, with recipients showcasing their commitment to sustainability by completing the Massive Open Online Course (MOOC) on Sustainability in Dentistry and answering the final competition question.

### MARCH

- FDI launches a new Consensus Statement outlining strategies to unify dental and medical electronic health records to improve patient care, streamline health systems, and support global health policy goals.
- Co-organized with partner Henry Schein, a media briefing on the Consensus Statement on Integrated Electronic Health Records in Dentistry takes place during the International Dental Show in Germany.
- WOHD sparks a global conversation with the theme "A Happy Mouth is a Happy Mind," highlighting the connection between oral health and mental well-being, with campaign hashtags reaching an audience of 1.1 billion.



### FEBRUARY

- FDI joins the 156th World Health Organization's (WHO) Executive Board to advocate for oral health as a foundation for overall health, through joint statements developed with the International Association for Dental, Oral and Craniofacial Research (IADR).
- To advance the digitalization of cleft care, two videos on digital cleft care workflows are released and the MOOC in Digital Dentistry in Cleft Care becomes available in three additional languages.

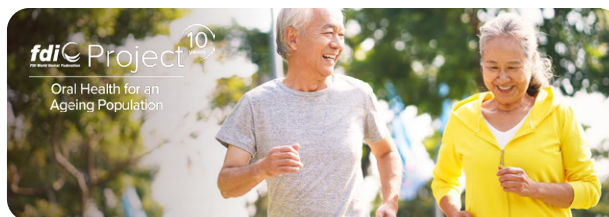


- FDI's WOHD webinar attracts 150% more attendees than the previous year, offering members and the general public practical ways to raise oral health awareness.
- FDI holds its first Member's Briefing of the year to share key updates and exchange ideas with members.
- In Kigali, Rwanda, FDI joins the 4th Global NCD Alliance Forum with IADR to emphasize oral health's role in the broader noncommunicable diseases (NCDs) agenda and co-organizes a side event on the key drivers of oral health policy and their implications for NCDs.



## APRIL

- FDI's Mid-Year Meeting convenes Council, Committees, and Working Groups to steer policy, advance initiatives, and set the course for the year ahead.
- As part of its initiative, "Educational Modules for Other Healthcare Professionals," FDI launches seven new fact sheets on oral health topics to increase interprofessional collaboration.
- Findings from FDI's global survey of dental students in over 50 countries are published, highlighting the need for tailored career planning and guidance early in dental education.

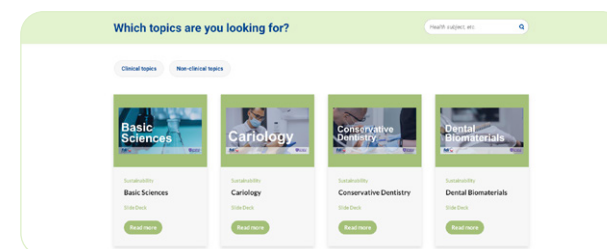


- FDI's Oral Health for an Ageing Population project celebrates its 10-year anniversary in 2025, marked by a series of activities, including the release of a video highlighting key achievements, milestones, and impact.
- FDI is appointed co-lead of the Advocacy and Communication workstream of the newly established Global Coalition on Oral Health, reinforcing its leadership in shaping global oral health advocacy.



## MAY

- FDI collaborates with IADR to keep oral health high on the agenda of governments at the 78th World Health Assembly (WHA78).
- FDI and IADR jointly launch "No Health without Oral Health," an advocacy document outlining recommendations for governments to prioritize oral health and recognize it as a fundamental component of the global NCD agenda.
- During WHA78, FDI mobilizes all of its networks to overturn the omission of oral health in the zero draft of the political declaration for the Fourth UN High-level Meeting on NCDs and Mental Health (HLM4).
- The FDI Regional Congress of the Americas in San José, Costa Rica, welcomes more than 1,300 participants from 26 countries, making it one of the most significant dental gathering in the region.
- FDI hosts a pivotal Oral Health Observatory workshop with experts from the Chinese Stomatological Association at its headquarters in Geneva to inform policy and advocacy initiatives in China.



- In collaboration with the University of Sheffield, FDI launches new educational resources supporting the integration of environmental sustainability into undergraduate and postgraduate dental curricula.
- FDI completes three global Tobacco Cessation workshops for dental and medical practitioners in Tunisia, Chile and Lebanon.

## JUNE

- From displacement to dental leadership, FDI publishes an inspirational personal story for dentists and their teams as part of its Career Management project.
- FDI contributes to oral health policy discussions at IADR's 103rd General Session in Barcelona, held in conjunction with the Pan-European Congress, and hosts a satellite session focused on accelerating partnerships to strengthen oral health surveillance and research.
- FDI's annual Sustainability in Dentistry Summit returns to share best practices and solutions for eco-friendly dentistry, alongside the launch of a second MOOC.
- The Lebanese Dental Association submits its national oral health action plan to the Ministry of Public Health, supported by data collected through FDI's Oral Health Observatory application.



- IDJ celebrates 75 years with an interview with Editor-in-Chief Prof. Lakshman Samaranayake on the journal's journey and future vision.



## JULY

- FDI continues to ramp up efforts to secure the inclusion of oral health in the upcoming UN HLM4, aiming to strengthen its global recognition as a key component of health and well-being.
- For the first time, the complete five-module Master CE Programme in Adhesive and Aesthetic Dentistry takes place in Mumbai, India.
- With two months to go, anticipation builds for the FDI World Dental Congress, and members and attendees are encouraged to explore the full scientific programme, curated to inform, inspire, and connect the global community.



## AUGUST

- A Tobacco Cessation workshop in Hong Kong provides an interactive, evidence-based learning experience to help integrate tobacco cessation counselling into everyday dental practice.



- FDI introduces fresh resources to help dentists tackle halitosis and identify oral signs linked to sexually transmitted infections.
- An FDI survey conducted with NDAs identifies illegal dental practice as a global health risk and calls on dental professionals, regulators, and policymakers to strengthen protections, empower communities, and ensure equitable access to safe, quality care.
- FDI drives oral health action at the WHO Regional Committee for Africa in Lusaka, Zambia, which represents 47 countries, leading to the endorsement of the Regional Framework for the accelerated implementation of the Global Oral Health Action Plan.



## SEPTEMBER

- The FDI World Dental Congress (WDC) in Shanghai brings together more than 30,000 participants from around the world, making it one of the largest to date and receiving overwhelmingly positive feedback across all aspects of the event.
- FDI holds its General Assembly and Parliament meetings in Shanghai, making key decisions for the organization.
- FDI's Young Speaker Contest winner shares insights on digital dentistry at the third Young Dentists Forum.
- An Oral Health Observatory workshop at WDC unites experts from eight countries participating in the project to exchange knowledge, share best practices, and strengthen collaboration.
- As FDI's *Vision 2030: Delivering Optimal Oral Health for All* reaches a critical midpoint, a review gathers insights from committees, members, and partners on key achievements, opportunities, and challenges, with findings presented at the World Oral Health Forum to guide next steps.







## OCTOBER

- IDJ publishes the results of FDI's school-based toothbrushing and handwashing programme in Cox's Bazar, Bangladesh — home to the world's largest refugee camp — showing that even in challenging humanitarian settings, preventive strategies can protect oral health and promote healthy hygiene habits.
- With support from the Fiji Dental Association, FDI takes part in the 76th WHO Regional Committee for the Western Pacific in Nadi, Fiji, representing over 37 countries and territories, to review and discuss the Western Pacific Implementation Plan for the Global Strategy and Action Plan on Oral Health.

- FDI's President shares insights on the outcomes of HLM4 at the German and Prague Dental Days and connects with the American Dental Association at the final SmileCon in Washington, with all parties united in the mission to support dentists and advance public health.



- Celebrating five years of workshops, FDI showcases the global impact of its Tobacco Cessation project and invites NDAs to apply to host a workshop before year-end.



## NOVEMBER

- FDI launches a new project to strengthen the role of dentists and dental teams in the global fight against human papillomavirus (HPV), one of the most widespread viral infections worldwide.
- Winners of the World Dental Development Fund are announced, with projects from Nigeria, Kenya, and Tanzania setting out to strengthen care in resource-limited communities or areas where access to dental services is limited.



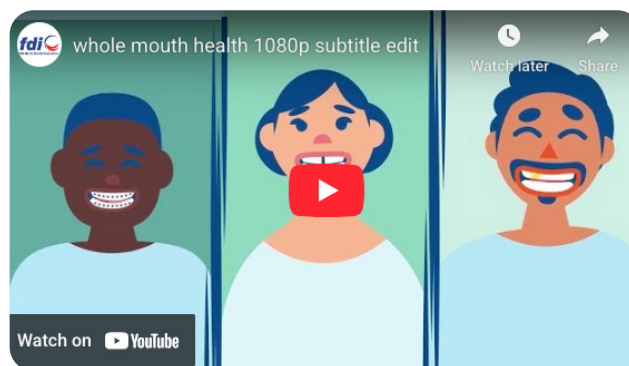
- FDI participates in a high-level dialogue at the Conference of the Parties to the WHO Framework Convention on Tobacco Control to strengthen measures to reduce tobacco use.
- FDI and IADR advocacy secures an extension of the global phase-out of dental amalgam from 2030 to 2034, including a key exemption allowing its use when necessary after the phase-out.
- FDI takes part in an interprofessional webinar hosted by WHPA, exploring ways to strengthen global action on antimicrobial resistance (AMR) during World Antimicrobial Awareness Week.
- FDI's President contributes to the 4th Global Oral Health and Climate Action Conference, hosted by the University of Pennsylvania, helping to drive the oral health and climate conversation forward.



## DECEMBER

- The FDI Oral Health Campus hosts a webinar to help non-dental professionals support improved oral health outcomes in the communities they serve.
- FDI's Mental Health and Well-being in Dentistry project launches a comprehensive package of resources: support for dental students, a framework for NDAs to develop mental health programmes for dental professionals, and a new e-learning course.
- The final Tobacco Cessation workshop of the year takes place in Malaysia.
- By the end of the year, FDI's Master CE Programme has successfully delivered 11 modules across 6 countries.

- FDI releases a video introducing the Whole Mouth Health project and its co-design approach, a two-part infographic series bringing the concept to life, and a white paper to promote person-centred healthcare worldwide.



A WORLD WITH OPTIMAL ORAL HEALTH



FDI STRATEGIC PILLAR

## KNOWLEDGE EXCHANGE

Knowledge exchange advances dentistry—through shared insight, ongoing learning, and meaningful collaboration.

## FDI World Dental Congress

The 2025 FDI World Dental Congress (WDC25) took place in Shanghai from 9–12 September, co-hosted by FDI and the Chinese Stomatological Association (CSA) and Reed Sinopharm. It marked the Congress's long-awaited return to China following the last jointly organized event in Shenzhen in 2006—and it was well worth the wait. Bringing together **more than 30,000 participants from around the world**, including delegates and exhibition visitors, WDC25 was one of the largest Congresses to date and the biggest since the COVID-19 pandemic.

Feedback across all aspects of the event, from the scientific and exhibition programmes to the social activities, was overwhelmingly positive. The international scientific programme featured a distinguished lineup of world-renowned experts, delivering cutting-edge insights and innovations across all major dental specialties. Each day was thoughtfully curated to offer a comprehensive learning experience that blended science, clinical excellence, and real-world application.

Spanning more than 44,000 m<sup>2</sup>, **the exhibition featured over 400 companies** showcasing their latest products and, for the first time, introduced dedicated educational content alongside product innovation sessions. This integrated approach created a richer, more dynamic experience for visitors and further strengthened the Congress's role as a global platform for learning, exchange, and innovation in dentistry.

### Young Dentists Forum

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Held annually at the FDI World Dental Congress, the FDI Young Dentists Forum empowers young dentists to become tomorrow's leaders. The third edition, which took place over a half-day, featured a keynote lecture by leading dental professional Dr Miguel Stanley, who shared his expertise in practice management and provided practical tools and strategies to help young dentists establish and grow successful clinics.

The forum also featured a presentation by FDI's Young Speaker Contest winner, Dr Luís Anes, who offered innovative insights into digital dentistry. **"My two greatest passions are digital dentistry and teaching, so it's a true honour to present at the FDI Young Dentists Forum,"** he said.

Alongside these engaging presentations, the forum concluded with an interactive panel discussion, exploring what it takes to build a strong, collaborative dental workforce and why becoming involved in organized dentistry early in one's career can make a lasting impact.

## A WEALTH OF EDUCATIONAL CONTENT

**109**

KEYNOTE  
SPEAKERS

from

**34**

NATIONALITIES

**88**

LECTURES

**21**

INTERACTIVE  
SESSIONS

**866**

ORAL  
COMMUNICATIONS  
PRESENTED

and

**1047**

POSTER  
COMMUNICATIONS  
PRESENTED

Discover the WDC25 abstracts in this special  
***International Dental Journal*** Supplement:



**In 2026, we are proud to host this event in Central Europe,  
set against the historic backdrop of Prague, from 4–7 September.**

## FDI Regional Congresses

In 2025, FDI held two highly successful regional congresses, one in Riyadh, Saudi Arabia and one in San José, Costa Rica, following preparations that began the previous year.

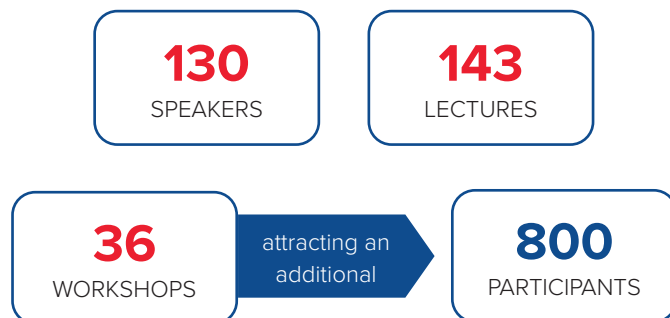


### Uniting the dental community in Riyadh

The year began with strong momentum with the opening of the highly anticipated FDI Regional Congress SIDC on 16 January 2025, co-hosted with the Saudi Dental Society. Taking place over three days of enriching educational sessions, it became the largest congress in the history of SIDC and the largest FDI activity in the Middle East, marking a significant milestone. More than 3,000 delegates participated in the scientific programme, while the trade show welcomed over 8,000 visitors.

A dedicated Innovation Zone was created to maximize interaction, allowing delegates to experience live demonstrations of groundbreaking products and solutions.

Reflecting the event's commitment to the growth of the dental profession, the Congress also included two dedicated interactive sessions focused on career development for young dentists. These sessions provided opportunities for discussion, mentorship, and networking, supporting emerging dental professionals as they shape the future of dentistry.



### Dental meeting of the Americas

The FDI Regional Congress of the Americas, co-hosted with the Colegio de Cirujanos Dentistas de Costa Rica, was held from 15–17 May at the National Convention Center in San José. This second landmark regional event of the year brought together representatives from across the continent, from Canada to Argentina; it welcomed more than 1,300 participants from 26 countries, making it one of the most significant dental gatherings in the region in 2025.

Final-year dental students from Costa Rica Dental School joined professionals from across the region to engage with the latest clinical insights and innovations. The presence of more than 50 government representatives further underscored the Congress's growing influence beyond the dental sector.

A major institutional meeting was held during the Congress: the annual assembly of FDI's Latin American Regional Organization (LARO). The gathering focused on strengthening collaboration and advancing oral health policies across the continent. FDI President Dr Greg Chadwick actively participated in the Congress, highlighting FDI's leadership in global efforts to reduce sugar consumption. The success of the Congress reinforced the strategic importance of FDI's role and presence in the region.



**Building on the success of these Regional Congresses, FDI will host at least one each year, collaborating with members and connecting with dental professionals around the world.**



Supported by



## FDI Master CE Programme

Launched in the Middle East in May 2024, the FDI Master CE Programme on Aesthetic and Adhesive Dentistry continued to enhance professional skills throughout 2025. By year-end, 11 modules had been delivered across six countries, with additional sessions scheduled for 2026.

The comprehensive programme comprises five modules, each combining expert-led lectures with hands-on training. Delivered in one-day sessions by internationally recognized speakers, the modules integrate theoretical knowledge with practical application. Participants earn Continuing Education (CE) credits and receive an FDI certificate of participation for each completed module.

In November, the programme was successfully delivered in Costa Rica, marking its first edition in the Americas. In India, all five modules were piloted consecutively over a week. FDI attended the programme in India to initiate a pilot evaluation, supporting potential format adjustments from mid-2026. In parallel, participant feedback continues to be collected through a dedicated app, enabling ongoing assessment of course delivery, products, and learning outcomes. This feedback will inform future analysis and guide recommendations for the programme's continued development.



## FDI Oral Health Campus

FDI's Oral Health Campus is the organization's official digital platform for education and professional learning. It offers both live and on-demand webinars delivered by leading dental professionals, enabling participants to earn CE credits. For those unable to attend live sessions, the on-demand format provides flexibility to complete learning at a convenient time. The platform offers global reach, engaging a community of more than 25,000 dentists worldwide. Furthermore, members can download selected webinars for broadcast on their national platforms.

### PLATFORM IMPACT IN 2024

**7**

WEBINARS  
HELD

**4,089**

TOTAL REGISTRANTS

**2,644**

WATCHED LIVE  
OR ON-DEMAND

### TOP THREE WEBINARS ATTENDED LIVE OR ON-DEMAND

**677 ATTENDEES**

Reducing dental carious lesions during the first three years of life

**443 ATTENDEES**

Neither Children nor Adults:  
Challenges of Adolescent Oral Healthcare

**421 ATTENDEES**

World Oral Health Day 2025:  
Insights and How to Get Involved



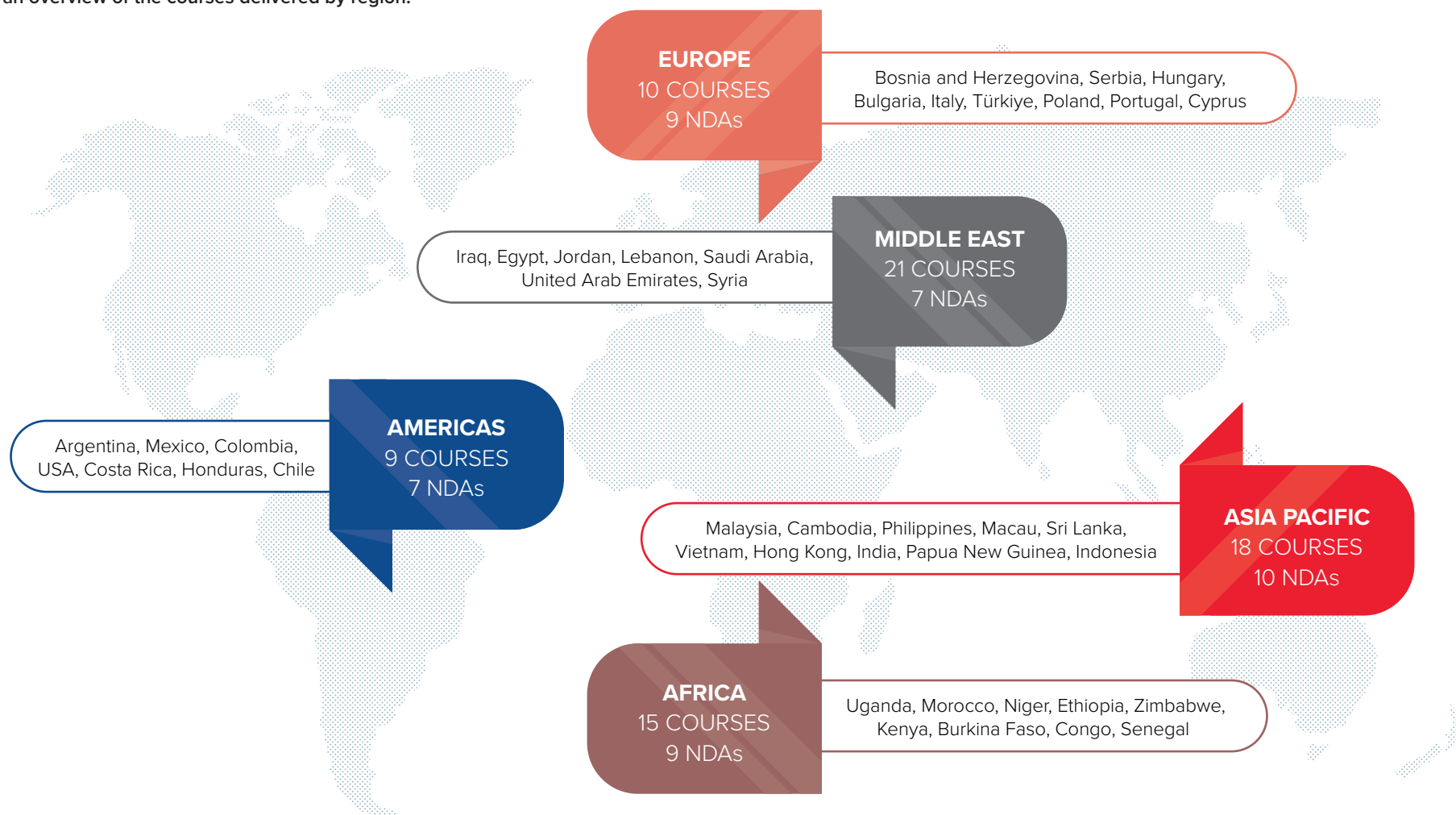


## FDI Continuing Education Programme

FDI's Regional CE Programme is designed for qualified dental practitioners and spans five regions: Africa, Asia Pacific, Europe, the Americas, and the Middle East. In 2025, the programme supported 42 national dental associations (NDAs) through the delivery of 74 courses. By stabilizing the number of partner NDAs, CE Directors were able to expand course offerings, and for the first time, Papua New Guinea participated in the programme.

Courses were delivered with the valuable support of 58 speakers. In response to regional instability in the Middle East, priority was given to courses led by local or regional speakers.

Here is an overview of the courses delivered by region:



The complete list of CE events is available at: [fdiworlddental.org/continuing-education-ce-programme](https://fdiworlddental.org/continuing-education-ce-programme)

## International Dental Journal

Marking a milestone year, the *International Dental Journal* (IDJ) continued to build on a long-standing publication legacy that began with its inaugural issue in September 1950. For more than 75 years, the journal has maintained uninterrupted publication, reflecting its enduring contribution to global oral health research. Now operating as an open access journal, IDJ is freely available worldwide to anyone with internet access and is experiencing continued growth in reach, visibility, and performance.

### Performance metrics

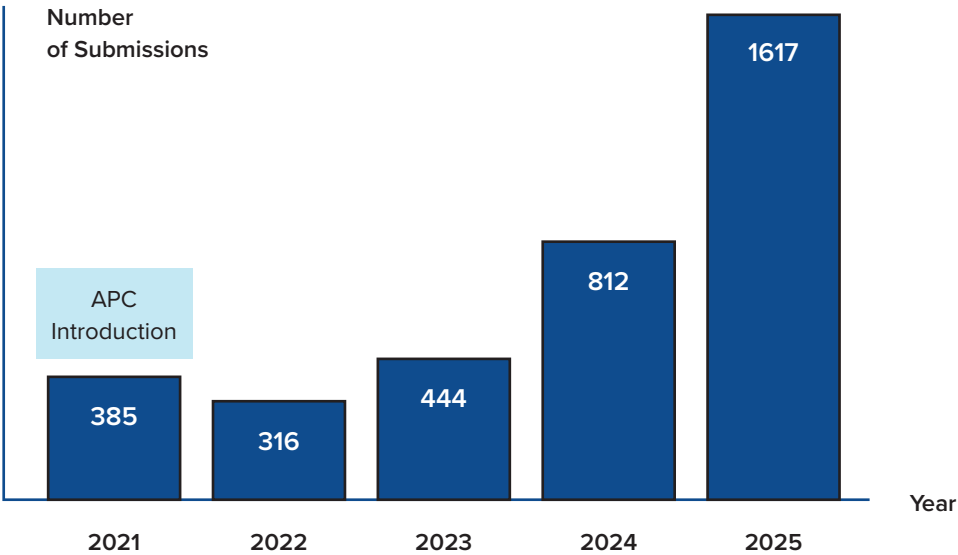
In June 2025, the Impact Factor of IDJ increased from 3.2 to 3.7. This substantial rise saw the journal surpass key peer publications and firmly positioned IDJ in the top quartile of journals in the field of Dentistry, Oral Surgery, and Medicine. Citation performance also improved markedly, with the journal's CiteScore increasing by 41%, from 4.1 in 2022 to 6.0 in 2025. This growth is likely attributable to the journal's strategic expansion beyond its original focus on oral epidemiology to encompass a broader scope. Notably, IDJ became the first dentistry journal to establish a dedicated platform for AI-related research.

The journal's expanding reach and influence were further reflected in increasing article downloads. While download metrics do not confirm that content was fully read, they provide a strong indicator of usage trends and audience engagement. Collectively, these performance indicators demonstrate the growing academic impact and visibility of the journal.

### Significant growth in manuscript submissions and articles published

Despite initial concerns that the introduction of the article processing charge (APC) in 2021 might reduce submissions, these concerns have proved unfounded. In 2025, manuscript submissions nearly quadrupled compared with 2021, making it a record-breaking year with the highest number of manuscripts ever received in the journal's history. China and Saudi Arabia were among the largest contributors, while the Americas remain underrepresented. Increasing submissions from this region will continue to be a focus going forward.

Quadruple submissions led to a record number of articles published.



### New initiatives introduced in 2025

In June 2025, IDJ launched article-based publishing (ABP), allowing articles to be published individually as soon as they are finalized. This model shortens the time from acceptance to publication. Following proof approval, each article is immediately assigned a citable Digital Object Identifier (DOI) and published online, ensuring timely dissemination of research.

In addition, IDJ announced a new initiative to produce Virtual Special Issues (VSIs), digital collections of articles focused on key themes. VSIs are continuously updated, easy to discover, and showcase cutting-edge research trends. The initiative began with two VSIs—Artificial Intelligence and Dentistry and Advances in Genomics and Digital Health—curated by leading international experts.

**Amid the rising tide of competitors in the journal landscape, IDJ stands strong, proudly maintaining its 75-year legacy and reputation while evolving with the times.**

## Education and Public Health Projects

Through a wide range of education and public health initiatives, FDI advances global oral health by strengthening prevention, expanding access to care, and responding to critical and emerging challenges worldwide.

The following pages highlight projects with outputs in 2025.  
Additional education and public health projects appear in the Innovation section of this report (p. 44–45).



Career Management



Educational Module  
for Other Healthcare  
Professionals



HPV



Mental Health and  
Well-being in Dentistry



Oral Health for an  
Ageing Population



Oral Health within  
General Health



Oral Health  
Observatory



Refugee Oral Health  
Promotion and Care



Tobacco Cessation



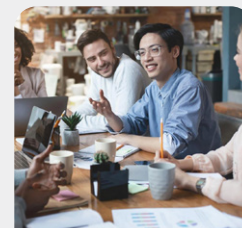
World Dental  
Development Fund



Integrated Electronic  
Health Records



Digital Cleft Care



Preventing AMR  
and Infections



Sustainability in  
Dentistry

For a comprehensive overview of all initiatives, visit [www.fdiworlddental.org/projects](http://www.fdiworlddental.org/projects)

Guided by FDI's *Vision 2030* and the World Health Organization's Oral Health Resolution, Strategy, and Action Plan, all projects contribute to a coordinated global effort to reduce the burden of oral disease.

## Career Management

FDI's *Vision 2030* emphasizes the importance of building a resilient oral health workforce through mentorship, collaboration, and continuous learning. Since 2023, the Career Management project has advanced this goal by helping dental students, dentists and dental teams navigate the diverse career pathways within dentistry and prepare for sustainable professional development.

### Understanding career aspirations of dental students

In collaboration with the International Association of Dental Students (IADS) and the European Dental Students Association (EDSA), FDI conducted a global survey of 2,340 dental students across more than 50 countries. The survey explored students' professional aspirations and the personal, socioeconomic, and cultural factors shaping career choices across different regions.

The findings, published in *Frontiers in Oral Health* on 11 April 2025, highlighted the need for dental schools and associations to provide tailored career planning and guidance early in dental education. Strengthening support—particularly in underserved regions—can help students make informed decisions aligned with their personal and professional goals, contributing to a more diverse and well-prepared global dental workforce.

[Read the article](#)



### Personal stories that inspire

The brochure *Beyond the chair: exploring diverse dental careers*, launched during the early stages of the Career Management project, showcases real-life experiences reflecting the breadth and impact of careers in dentistry. Building on this work, FDI published a compelling personal story in June 2025 on its news portal, featuring Dr Nyachio James Johnstone.

Dr Johnstone's journey spans from the tea farms of Kenya to the global stage of dental leadership. In his story, he highlights the many directions a dental career can take, often shaped by resilience, purpose, and a willingness to explore the unknown. As he powerfully reflected:

**“We carry the power to transform communities, not only through the care we provide but through the example we set—of resilience, compassion, and a commitment to sustainability. Oral health is not just about clean teeth; it's about public health, dignity, and human rights.”**

[Read his story](#)

**With ongoing advancements in technology, treatment methods and research, the domain of oral healthcare continues to evolve, providing an exciting and dynamic environment for professionals in the field.**



## Educational Module for Other Healthcare Professionals

Supported by

**HALEON**

Engaging a wide range of healthcare professionals in oral health promotion is key to improving access to care, particularly for marginalized and underserved communities. Simple, evidence-based interventions can prevent oral diseases, while collaborative, interprofessional approaches help integrate oral health into primary care and empower communities to take greater control of their oral health.

### New fact sheets on oral health

This initiative focuses on the development of targeted educational materials for non-dental healthcare professionals, equipping them with essential oral health knowledge and practical skills. The objective is to support the integration of basic oral healthcare into routine clinical practice across healthcare settings.

Building on the publication of five fact sheets in 2024, nine additional fact sheets were released in 2025. Endorsed by various health organizations, these resources address key oral health topics, including:

- Oral health of older adults
- Understanding dental caries
- Raising awareness of oral health and global oral health
- Basic oral health examination
- Child oral health
- Adult oral health
- Periodontal diseases
- Tobacco use and oral health
- Oral adverse drug reactions

All fact sheets were translated from English and made available in French, Spanish and Mandarin.

### Further collaborative efforts to advance oral health

In collaboration with the International Pharmaceutical Federation (FIP), the continuing professional development (CPD) Bites video series was launched in 2024 to strengthen oral health knowledge among pharmacists. Developed as concise and accessible CPD resources, the series reinforces the role of pharmacists in prevention, early intervention and patient education.

In 2025, two additional videos were released—in April and May—bringing the series to a total of five. These latest videos focus on *Child oral care* and *Tobacco and oral health*.

### Breaking silos in oral health: empowering all healthcare professionals webinar

On 3 December, the FDI Oral Health Campus hosted a webinar to help non-oral health professionals support improved oral health outcomes in the communities they serve.



**Together, we can make a meaningful impact on oral health in every community.**

# Human papillomavirus: Integrating Oral Health for Prevention

FDI launched this project in 2025 to strengthen the role of oral health professionals in the global fight against human papillomavirus (HPV). Despite its broad impact, HPV prevention is rarely integrated into oral healthcare, leaving gaps in awareness, early detection, and referral. This initiative seeks to address these gaps by advocating for the inclusion of dentists and dental teams in national policies and care pathways.

## Why including dentists and dental teams matter

HPV is one of the most widespread viral infections worldwide and a leading cause of cervical cancer—the fourth most common cancer among women and the fourth leading cause of cancer-related deaths, with an estimated 600,000 new cases and 340,000 deaths each year. However, the impact of HPV extends beyond cervical cancer, contributing to oral cancers, warts, and other lesions in the mouth. This makes the integration of HPV prevention into oral health both necessary and timely.

Dental professionals are often the first, and sometimes the only, providers to examine oral tissues where HPV-related lesions may appear. This places them in a unique position to support early detection, patient education, risk assessment, and timely referral, making their involvement critical to cancer prevention and broader public health efforts.

## Toward a more integrated and equitable approach

In late 2025, FDI began laying the groundwork to strengthen national capacity and expand the role of dental professionals in HPV prevention. A comprehensive global survey of FDI members is planned to map existing HPV policies, identify gaps, and establish baseline data. The assessment will examine current prevention strategies, levels of integration with oral health services, educational needs, and regional variations.

Findings from the survey will inform the development of targeted advocacy and awareness tools, supporting FDI's broader goal of embedding oral health within national HPV prevention policies.

By addressing long-standing gaps between oral health and HPV prevention, this initiative aims to strengthen advocacy, support evidence-based policy recommendations, and elevate the contribution of oral health professionals worldwide. In doing so, it positions dentists as essential partners in reducing HPV-related cancers and reinforces the need to formally integrate oral health into national prevention frameworks.



**Through this new project, FDI is committed to empowering the profession with the knowledge, tools, and policy support needed to advance HPV prevention, raise global awareness, and promote a more integrated approach.**

# Mental Health and Well-being in Dentistry

Supported by



Dental professionals and students face unique pressures that can strain their mental health and overall well-being, with potential impacts on the quality of care they provide. In light of ongoing concerns about mental health challenges faced by the oral health workforce, this project, initiated in 2021, remains a priority.

## New mental health resources for dental students

Following a detailed research phase with dental students across multiple regions, a suite of mental health and well-being resources was launched toward the end of 2025 to help create a more supportive, connected, and healthy learning environment for dental students globally. These resources translate student voices and evidence-based insights into practical tools that support students to recognize common mental health challenges, build supportive peer networks, and access appropriate help when needed.

[Access the resources here](#)



**Supporting dentists and dental teams is central to our work. Their skills and dedication drive progress, and we are committed to safeguarding their health and well-being.**

## Launch of a Wellness Resource Development Plan

Developed specifically for national dental associations (NDAs), the Wellness Resource provides a framework to guide the development of mental health programmes for dental professionals. The plan outlines a structured approach to supporting dental teams through resource development, awareness initiatives, and advocacy efforts. The ultimate goal is to ensure that wellness remains a central and sustained focus within the dental profession worldwide.

## Mental Health and Well-being in Dentistry Pledge

To further strengthen global commitment to mental well-being across the profession, FDI launched the Mental Health and Well-being in Dentistry Pledge to mobilize collective action and reinforce support for the oral health workforce and students. The pledge calls on NDAs and key stakeholders to prioritize mental health within their organizations and communities, and to integrate well-being into policies, education, and professional standards.

By signing the pledge, organizations commit to raising awareness, reducing stigma, and fostering supportive working environments that promote mental well-being across the dental community.

## New e-learning course on Mental Health in Dentistry

Alongside the new resources, FDI launched the e-learning course *Managing mental health from dental school to dental practice*. This free, interactive course is designed for dental students and professionals, equipping them with practical skills to understand mental health challenges in dentistry and to support themselves, their peers, and the wider dental community.

[Access the course](#)



## Oral Health for an Ageing Population

FDI launched this project in 2015 to address the oral health needs of the world's ageing population—an issue growing more urgent as societies face demographic change. Oral health is central to quality of life, and in 2025, marking the project's 10-year anniversary, we reinforced the importance of prioritizing oral health for older adults.

### Understanding the need for action

An [editorial](#) titled *Making the Right to Oral Health a Reality for Older Adults* was published in the June issue of the *International Dental Journal* (IDJ). It advocates for integrating dental care into universal health coverage, recognizing that healthy ageing not only improves individual well-being but also helps build societies grounded in safety and dignity.

Vulnerable groups, which includes older adults, often face significant barriers when accessing care. Integrating oral healthcare services into universal health coverage (UHC) can help reduce obstacles such as financial burden and improve health outcomes for all.



### Launch of a new advocacy guide

At the FDI World Dental Congress 2025 (WDC25), FDI launched a new [advocacy guide](#). Aligned with FDI's *Vision 2030*, the WHO Oral Health Resolution, Strategy and Action Plan, and broader global health frameworks, the guide reinforces a central message: universal health coverage cannot be achieved without integrating oral health for ageing populations. The guide provides a comprehensive strategy for policymakers, health professionals, and advocates, drawing on peer-reviewed research, evidence-based guidance on care delivery, and practical tools and resources developed through this long-standing project.

On 10 September, a session titled *Towards healthy longevity: new tools and strategies for oral health in older adults* took place at WDC25. The session explored oral frailty and how the project's resources can be applied in clinical practice.

### Celebrating progress and looking ahead

This project represents a decade of meaningful collaboration with partners GC International and the Nakao Foundation. To mark the 10-year partnership, a [video](#) was produced showcasing key achievements, milestones, and the impact of the Oral Health for an Ageing Population project to date.

It included a message from FDI's President, Dr Greg Chadwick, encouraging the exploration and sharing of the project's resources to help ensure older adults receive the care they need. The video also highlighted the programme's global reach, the development of practical tools and resources, and their role in advancing integration of oral health within broader healthy ageing frameworks. A message from Dr Makoto Nakao, Chairman of GC International, reaffirmed GC's long-standing commitment to the partnership and to improving oral health outcomes for older adults worldwide.

**Through continued collaboration and advocacy, FDI remains committed to a future in which healthy ageing includes healthy smiles for all — ensuring no one is left behind.**



## Oral Health within General Health

Guided by FDI's *Vision 2030*, this project supports countries in accelerating progress toward optimal health for all by integrating oral health into broader health systems. Each year, it also celebrates innovation and impact by recognizing two national dental associations through FDI's Smile Grant for sustainable, community-based initiatives that strengthen oral health.

### Insights from communities around the world

In December, FDI released a new video introducing the Whole Mouth Health project and the innovative co-design approach used to better understand how people in different communities define oral health and a "healthy mouth." Through participatory workshops held across four countries, the project gathered insights into real-world perceptions, needs, and challenges.

The [video](#) highlights:

- What a "healthy mouth" means and why it matters.
- How the co-design methodology brings community voices into oral health solutions.
- Key findings that will shape future education tools and strategies, as well as advocacy.

### Infographics: Community perspectives on a healthy mouth

A two-part infographic series was launched alongside the video.

#### 1. Infographic 1: The Whole Mouth Health Project and Co-design Methodology

This [infographic](#) presents the project's objectives, the innovative methodology used, and an introduction to the Whole Mouth Health Arcade—an engaging tool designed to support learning and behaviour change.

#### 2. Infographic 2: What Does a Healthy Mouth Mean to You?

This [infographic](#) highlights how individuals from diverse communities perceive oral health, including aesthetics, functionality, social confidence, and overall well-being.

### White paper: Insights and recommendations

A [white paper](#) accompanied these new tools, providing evidence of the co-design process and practical recommendations to strengthen oral health literacy, encourage behaviour change, and advance oral disease prevention. This white paper serves as a resource for policymakers, as well as dentists, dental teams and non-dental professionals seeking effective, person-centred interventions.

Together, these resources represent an important milestone in FDI's efforts to advance person-centred healthcare worldwide.



**FDI was proud to award the 2025 Smile Grant to the Australian and Philippine Dental Associations in recognition of projects that expand access to care through outreach and education.**

# Oral Health Observatory

Standardized oral health data is essential for developing evidence-based strategies to improve global oral health outcomes. Launched in 2014, the Oral Health Observatory is a global initiative that enables dentists worldwide to collect standardized data on patient behaviours, clinical indicators, and the impact of oral health on quality of life through a user-friendly mobile application.

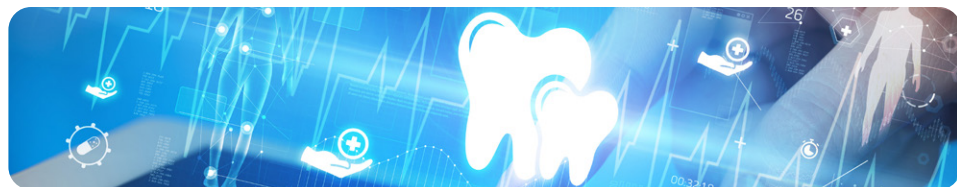
## FDI hosts workshop to inform policies and advocacy initiatives

In May, FDI convened an important workshop at its headquarters in Geneva, bringing together the Oral Health Observatory (OHO) Task Team and experts from the Chinese Stomatological Association. Over two days, participants examined key findings from oral health data collected in China using the OHO mobile application, exploring how these insights could inform oral health policy and advocacy initiatives.

The workshop featured contributions from leading Chinese dental experts, whose experiences underscored the adaptability of the OHO model across diverse healthcare settings and its potential to drive evidence-based improvements in patient outcomes and advocacy efforts.

Dr Liu Yi noted:

**“Participating in OHO has been instrumental in comparing China’s oral health data collection with international standards. This collaboration fosters a deeper understanding of oral health among the Chinese population.”**



**This project continues to demonstrate the value of collecting standardized oral health data in routine dental practice to inform policy and advocacy initiatives and ultimately improve patient outcomes worldwide.**

## Strengthening collaboration and expanding global participation

A second hands-on workshop took place in September during the FDI World Dental Congress in Shanghai, bringing together experts from eight countries at different stages of the project. The session provided a platform to exchange knowledge, share best practices, and strengthen collaboration across the global OHO network.

The OHO initiative continues to grow. Nigeria is preparing to commence data collection, while Kenya has already gathered data from over 700 patients across more than 20 clinics. The Egyptian Dental Association has begun data collection, aiming to reach 900 patients across 30 clinics. In Colombia, the dental association is collecting data from public institutions to compare findings between public and private facilities and support the integration of oral health indicators into national surveillance systems. Data from Tanzania is currently being analyzed, after which national oral health priorities will be defined and an advocacy strategy developed through a workshop with experts from the Tanzanian Dental Association in March 2026.

## Translating data into evidence and action

On 24 February 2025, the Indian Dental Association published *Assessment of Oral Health Status, Care-Seeking Behaviours, and Oral Health-Related Quality of Life among Indian Adults Using the World Dental Federation’s Digital Application* in the *Indian Journal of Dental Research*.

In June, the Lebanese Dental Association (LDA) published *Patient- and Clinician-Reported Oral Health Data in Primary Dental Care Practices in Lebanon* in the *Cureus Journal of Medical Science*. LDA also submitted its national oral health action plan to the Ministry of Public Health of Lebanon, supported by data collected through the OHO application.

In December, *Exploring Patient-Reported Gingival Health in Adults Using Standardised International FDI Oral Health Observatory Data* was published in the *International Dental Journal*.



# Refugee Oral Health Promotion and Care

Oral health is a right, not a privilege, and is crucial to the well-being of refugees, who are already vulnerable. They often face limited access to oral health education, disease prevention, and therapeutic dental care. Additionally, language barriers can hinder their health literacy. A unified approach is essential to create an enabling environment for action that truly leaves no one behind.

## School-based programmes improve oral health for refugee children in Bangladesh

Cox's Bazar in Bangladesh is home to the world's largest refugee camp, where the scale of displacement has created significant health needs among refugees, over 50% of whom are children. Previous studies have highlighted the high burden of oral diseases in refugee camps; however, there are few robustly evaluated school-based oral health programmes in these settings.

To address this gap, FDI joined forces with the Refugee Crisis Foundation to implement a school-based toothbrushing and handwashing initiative, alongside the application of silver diamine fluoride, a low-cost and effective method for managing dental caries in young children. Clinical examinations, as well as child and parental questionnaires, were completed at baseline and at a six-month follow-up.

The results of this work were published in the *International Dental Journal* (IDJ) in October 2025. By promoting daily toothbrushing and handwashing, the initiative achieved:

- Higher rates of consistent oral hygiene practices
- Reduced plaque levels and gum bleeding among children
- Arrested tooth decay in over half of the teeth treated with silver diamine fluoride

[Read the full article](#)

**Even in challenging humanitarian settings, low-resource interventions and preventive strategies can protect oral health and promote healthy hygiene habits.**



# Tobacco Cessation

Tobacco use remains one of the major challenges to global health. When FDI launched its Tobacco Cessation project in 2020, it set out with a bold vision: to empower dental professionals worldwide to become active players in the fight against tobacco use, a leading cause of preventable disease and death.

## Building capacity through education

FDI's Tobacco Cessation workshops educate and train dentists and dental teams to deliver effective tobacco cessation advice to patients in clinical settings. These interactive, evidence-based sessions include presentations on the health risks of tobacco use, practical training in the 5As (Ask, Advise, Assess, Assist, Arrange) and 5Rs (Relevance, Risks, Rewards, Roadblocks, Repetition) approaches, as well as role-playing exercises designed to strengthen real-world communication skills.

Each year, up to seven national dental associations (NDAs) may be selected to receive a CHF 1,000 tobacco cessation grant, enabling them to implement a workshop in their country. In 2025, five Tobacco Cessation workshops were facilitated in Tunisia, Chile, Hong Kong, Malaysia, and Lebanon.

In total, nearly 200 dental practitioners and students were trained in tobacco cessation in 2025.

## Celebrating the project's five-year impact

FDI's Tobacco Cessation workshop programme has delivered meaningful impact over its first five years. This impact was measured through pre- and post-workshop surveys, with the results compiled into a report and presented at the FDI World Dental Congress 2025, as well as at a key side event during the 11th Conference of the Parties to the World Health Organization Framework Convention on Tobacco Control (further details on this meeting are provided in the Advocacy section). Feedback from participants and NDAs confirmed the programme's strength, with all NDAs that completed post-workshop evaluations awarding the workshops the highest possible rating — a clear endorsement of the programme's effectiveness and relevance.

Between 2021 and 2025, these workshops reached:

**18**  
COUNTRIES AND  
TERRITORIES

**OVER  
1,100**  
PARTICIPANTS



**“ The workshop enabled me to integrate tobacco cessation as a priority issue in my clinical practice, rather than something secondary. It helped me understand that even a brief intervention can make a difference. ”**

Workshop participant

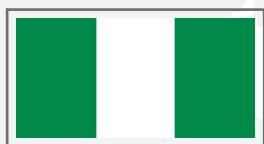
**The past five years have proven that when the dental community comes together, it can make a measurable difference in public health. The next five years promise to deepen that impact.**



# World Dental Development Fund

Each year, the World Dental Development Fund supports up to five projects with clearly defined goals to promote oral health, prevent disease, and strengthen care in resource-limited communities. Discover the 2025 winners and how they plan to advance oral health and well-being in their countries.

## Showcasing the winning projects:



### **NOMALnutrition: integrating oral health into nutrition programmes, Nigeria**

The NOMALnutrition project in Oyo State, Nigeria, will integrate oral health into existing nutrition programmes, reaching around 500 people each month, including children living on the street, the elderly, and rural populations. Implemented with six partner organizations, it will provide oral health education, screening, and treatment alongside nutrition interventions for current participants, while ensuring future beneficiaries continue to receive integrated care. Focusing on Noma, a severe oral disease linked to malnutrition and poverty, the project will train nutrition officers, distribute oral hygiene kits, and collect field data using WHO tools, with the aim of embedding sustainable oral health components within community nutrition initiatives.



### **Integrating preventive oral health into the Chamas for Change Programme, Kenya**

This pilot project in Bungoma County, Western Kenya—where access to dental services is extremely limited—will integrate preventive oral health education and care into the Chamas for Change programme. Working through 15 existing Chamas groups, it will reach 300 pregnant women in their first or second trimester and their 300 young children, while training 30 Community Health Promoters to deliver oral health education and basic preventive care. Targeting the critical “first 1,000 days” from pregnancy to age two, the project will test how oral health can be embedded into the programme’s curriculum, using WHO tools to evaluate feasibility, impact, and scalability, with the aim of informing future expansion across Kenya.



### **Strengthening oral health awareness through engagement of dental therapist students, Tanzania**

This project will improve oral health awareness and care among 3,000 children aged 6–14 across the Mbeya, Iringa, and Tanga regions of Tanzania, where access to dental services is limited and there is a severe shortage of dental professionals. Led by Miracle Corners Tanzania in partnership with local health colleges, the initiative will combine school-based education, screenings, and free dental treatment for at least 600 children, while training 90 final-year dental therapist students in community outreach, leadership, and preventive care. By embedding outreach activities into training curricula and establishing school oral health clubs, the project aims to build lasting oral health awareness and strengthen community-based care systems across the three regions.

## Beyond Public Health Projects: Resources for Education, Prevention and Patient Safety

FDI empowers dental teams with practical guidance and resources to promote oral health, prevent disease, and protect patients. From advice sheets on halitosis and sexually transmitted diseases to tackling illegal dental practice, these new resources will help safeguard communities and strengthen professional standards.

### Advice sheets on halitosis and oral signs of sexually transmitted diseases

In August 2025, FDI launched two new advice sheets to support dental teams in addressing common yet often sensitive oral health concerns: halitosis and the oral manifestations of sexually transmitted diseases (STDs).

#### Oral cavity and sexually transmitted diseases

This [advice sheet](#) equips dental professionals with practical guidance to identify oral signs associated with sexually transmitted infections, including chlamydia, gonorrhoea, syphilis, herpes, HPV and HIV. By highlighting the role of routine dental visits in early detection, referral and patient counselling, the resource supports dentists in contributing to timely diagnosis, prevention and stigma reduction, ultimately strengthening collaboration between oral health and wider healthcare systems.

#### Halitosis (bad breath)

Addressing a condition that affects a significant proportion of the global population, this [advice sheet](#) provides dental teams with a structured approach to diagnosing and managing halitosis. It outlines common oral and systemic causes, diagnostic methods and evidence-based treatment options, while also recognizing the psychological and social impact of the condition. The resource supports a holistic, patient-centred approach to care, helping restore both oral health and quality of life.

### Survey reveals illegal dental practice as a global health risk we can't ignore

Illegal dental practice, defined as providing dental care without the necessary registration or license by an appropriate authority, is a growing global concern. From unqualified individuals offering extractions in homes to beauticians fitting braces in salons, these practices put patients at serious risk of infections, permanent disfigurement, and even life-threatening complications.

FDI conducted a survey of national dental associations (NDAs) to assess the extent of illegal dental practice and the strategies in place to address this issue. A report based on the findings was published in August. Survey data from 49 NDAs globally found stark disparities in how countries define, regulate, and enforce laws against illegal dentistry. While 95% of respondents confirmed that regulations exist, only 49% believed they are effective, with nearly half citing weak enforcement, lack of resources, or cultural tolerance as major barriers. Alarming, 58% of NDAs reported cases of patient harm caused by unlicensed providers, underscoring the urgent need for stronger safeguards.

[Read the full survey findings report](#)

**Illegal dental practice undermines trust and endangers lives. Dental professionals, regulators, and policymakers must work hand-in-hand to strengthen protections, empower communities with knowledge, and ensure equitable access to safe, quality care.**





FDI STRATEGIC PILLAR

## 2. ADVOCACY

**Advocacy strengthens oral health literacy and builds political commitment—supporting coordinated action worldwide.**



# GLOBAL ORAL HEALTH ADVOCACY

Global health is evolving rapidly, bringing both challenges and opportunities for action. In this changing context, FDI plays a critical role in ensuring that oral health remains visible, relevant, and integrated within the broader global health agenda.

This section outlines how FDI advanced global oral health in 2025 through sustained advocacy at international policy forums — including the World Health Organization's (WHO) annual and regional meetings and a United Nations (UN) High-Level Meeting — as well as through advocacy-focused activities at FDI's World Dental Congress (WDC). FDI also leveraged collaborations with partners such as the International Association for Dental, Oral and Craniofacial Research (IADR), NCD Alliance and the World Health Professions Alliance (WHPA) to push for progress. Together, these efforts strengthened political commitment, elevated oral health on the global stage, and supported progress toward improved oral health worldwide.

## Driving Vision 2030: 5 years on, 5 years to go

*Vision 2030: Delivering Optimal Oral Health for All (Vision 2030)* remains a cornerstone of FDI's advocacy strategy, and 2025 marked a critical midpoint for assessing progress toward its goals. A survey gathered insights from FDI members and partners on both the achievements to date and the challenges and opportunities influencing implementation at global, regional, and national levels. The preliminary findings from this survey were presented and discussed at the World Oral Health Forum 2025 in Shanghai, providing an important moment of reflection and alignment as the global oral health community enters the second half of the *Vision 2030* journey.

Discussions highlighted that, while oral health has gained unprecedented visibility within the global health agenda, growing uncertainty in the global health landscape posed risks to sustaining progress. Strong national oral health leadership plays a key role in strengthening primary oral health care. China shared its advances, including the development of a national oral health policy, integration of oral health into broader health initiatives, and sustained government investment in national oral health programmes. The impact of Tanzania's expansion of universal health coverage (UHC) to include oral health services was also examined. More broadly, participants noted evidence linking oral health to economic well-being and the need for greater investment in the prevention and control of oral diseases. Collectively, these discussions reinforced the importance of advocacy and strategic collaboration to translate growing awareness into concrete policy change and achieve the "tipping point" for sustained action.

## FDI appointed co-lead of the Advocacy and Communication workstream of the Global Coalition on Oral Health

FDI was honoured to be invited to serve as co-lead of the Advocacy and Communication workstream of the soon-to-be launched Global Coalition on Oral Health, announced during the WHO Global Oral Health Meeting in Bangkok (the full report for which can be accessed [here](#)). The coalition, which brings together stakeholders from across sectors, provides a vital platform to sustain momentum and support the implementation of the [Global Oral Health Action Plan 2023–2030](#). As co-lead, working alongside the Global Self-Care Federation and Montpellier University, FDI has a central role in shaping the coalition's advocacy strategy and supporting countries to translate global commitments into action.



**Billions of people lack sustained and affordable access to even basic oral healthcare. FDI's advocacy strategy aims to change this.**

## Advancing oral health through WHO global and regional meetings

WHO's governing bodies—the Executive Board and the World Health Assembly—are key annual platforms for oral health advocacy. WHO regional committees, which convene annually, also play a critical role in setting regional policies, strategies, and frameworks. In 2025, FDI made its voice count at both the global and regional levels.

### FDI participates in the 156th WHO Executive Board

The 156th session of the WHO Executive Board (EB156) took place from 3–11 February 2025 in Geneva, Switzerland, bringing together Member States, WHO technical experts, representatives of other UN agencies and multilateral institutions, and non-State actors, including FDI and IADR.

The agenda comprised approximately 47 items and sub-items. EB156 reviewed comprehensive reports on WHO's work across a range of priority areas, including the prevention and control of noncommunicable diseases (NCDs), mental health and social connection, women's, children's and adolescents' health, oral health, the elimination of cervical cancer, the health and care workforce, and UHC. The [baseline report](#) for the WHO Global Oral Health Action Plan (2023–2030), released ahead of EB156, helped inform discussions on oral health.



Through joint statements with IADR, FDI highlighted opportunities to advance oral health through national and global action on NCDs, UHC, and nutrition.

Read FDI's full recap of the meeting and key outcomes [here](#). It may be worth noting that reduced funding for WHO affected the outcomes of the session and the Secretariat's capacity for follow-up action ahead of the World Health Assembly in May.

### Supporting One World for Health at the 78th World Health Assembly

The World Health Assembly, WHO's highest decision-making body, convened its 78th session (WHA78) from 19–27 May under the theme "One World for Health." FDI's delegation, which included President Dr Greg Chadwick, delivered targeted statements and engaged in high-level policy discussions, underscoring the urgent need for sustained and coordinated action on oral health.

Alongside its participation in official proceedings, FDI contributed to multiple side events addressing key priorities, including investment in the global health workforce and the integration of oral health into strategies for the prevention and control of NCDs. FDI also spoke at a high-level side event hosted by the Government of Malaysia, reinforcing the essential role of oral health within the broader NCD agenda. In collaboration with IADR, FDI co-hosted a session highlighting the Global Coalition on Oral Health – a platform for mobilizing multisectoral support and sustained action.

Read FDI's full recap of WHA78 [here](#)

### Driving oral health action at WHO Regional Committee meetings

Participation in WHO Regional Committees provides an important opportunity to promote accountability toward the global oral health agenda and the 2030 goals adopted by governments. FDI participated in the Regional Committee for Africa in August 2025 and the Regional Committee for the Western Pacific in October, with support from FDI member the Fiji Dental Association. Key outcomes from these meetings included the next steps for implementing the respective regional Oral Health Action Plans.

**FDI's active engagement on these platforms reflects our commitment to working with WHO, Member States, and global health partners to ensure a future where oral health is accessible to all.**

## The Fourth UN High-level Meeting on noncommunicable diseases and mental health and well-being

The Fourth High-level Meeting of the United Nations General Assembly on the Prevention and Control of NCDs and the Promotion of Mental Health and Well-being (HLM4) took place on Thursday, 25 September 2025, in New York, USA. After more than a year of preparation, planning, and advocacy, FDI participated in this critical meeting to strengthen political commitment to the global oral health agenda.

### Accelerating advocacy in the lead-up to HLM4

FDI and IADR jointly launched the advocacy document “No Health without Oral Health,” outlining clear recommendations for governments to prioritize oral health at HLM4 and recognize it as a fundamental component of the global NCDs agenda.



The release came at a critical moment, coinciding with the publication of the zero draft of the HLM4 Political Declaration—which, disappointingly, made no reference to oral health, the WHO Global Oral Health Meeting, or the landmark Bangkok Declaration on Oral Health. In response, FDI and IADR mobilized rapidly. During WHA78 in May, longstanding champions of the global oral health agenda were urged to highlight this omission in their official statements. FDI also engaged its leadership, encouraging direct outreach to Ministries of Health to advocate for the inclusion of oral health. Simultaneously, FDI provided national dental associations (NDAs) with targeted advocacy materials to support their engagement at the national level.

These coordinated efforts yielded immediate results. Several Member States explicitly addressed oral health during WHA78, prompting the HLM4 Political Declaration to be updated to acknowledge oral health, the global burden of oral diseases, and the need for a sustained response—including the scale-up of services to manage oral health. This outcome reinforced the effectiveness of unified advocacy.

### HLM4 Political Declaration addresses oral health extensively: a historic milestone

FDI was represented at the highest leadership level at HLM4. Throughout the week, the delegation engaged closely with government representatives, the NCD Alliance, partners, and other key stakeholders to keep oral health high on the global health agenda, strengthening FDI's visibility and advocacy impact on the global stage.

In addition to participating in key side events, FDI co-delivered a statement with IADR highlighting the critical links between oral health and NCDs, the importance of the common risk factor approach, and the need to address oral diseases—the world's most prevalent NCDs—within global and national health agendas.

FDI is pleased to report that sustained advocacy efforts spanning more than a decade yielded positive results. For the first time in a UN High-level meeting on NCDs, oral diseases were explicitly referenced in the Political Declaration, appearing in both the preambular (pages 2 and 6) and operative (pages 10 and 11) sections. These inclusions represent a historic milestone for the global oral health community and a major step forward in securing recognition of oral health as an integral component of the NCD agenda. The UN HLM4 Political Declaration was formally adopted on 15 December.

[Read the Political Declaration.](#)

**Building on this milestone, FDI will continue to work closely with its members and partners to ensure that the Political Declaration's recognition of oral health translates into concrete national actions and measurable impact.**



## Sugar and Tobacco: a shared challenge for oral health and NCD prevention

Sugar and tobacco are major risk factors for oral diseases and other NCDs. They contribute to issues such as dental caries, gum disease, tooth loss, oral cancer, and more. FDI remains committed to advocating for effective sugar and tobacco control policies, strengthening prevention efforts, and integrating oral health into the broader NCD agenda to achieve real and lasting improvements in oral and overall health.

### Sessions on sugar reduction strategies

Building on FDI's *Position on Free Sugars*, FDI co-sponsored a side event at HLM4—*Time to Act on Sugars: Advancing Health Equity and Tackling NCDs with a Focus on Oral Diseases*—with the governments of Malaysia, Ireland, France, Egypt, the Philippines, and Thailand. FDI also held two advocacy-focused sessions at the FDI World Dental Congress (WDC) in Shanghai to reinforce the role of evidence-based policy interventions in addressing excessive sugar consumption.



The first WDC session, *Sugar Reduction Strategies: From Policy to Cavity Free*, emphasized that effective sugar control requires a combination of “upstream” policy measures and “downstream” individual-level interventions. The interventions discussed included fiscal policies, product reformulation, and education to reduce both the frequency and quantity of sugar intake. Chief Dental Officers from China and England shared evidence of policy impact. China presented its comprehensive oral disease prevention measures, with sugar

reduction as a key priority, alongside fluoride use, improved access to oral healthcare, and strengthened surveillance systems. England showcased the public health benefits of the UK Soft Drinks Industry Levy, which has driven a near 50% reduction in sugar levels in taxed beverages since 2015, resulting in measurable reductions in childhood obesity, dental caries-related hospital admissions, and asthma admissions.

The second session, *From Evidence to Action: Reducing Excessive Free Sugar Consumption with Smart Policies*, reinforced WHO's package of evidence-based, cost-effective measures to reduce sugar intake and support policy implementation. Case studies from Fiji and China illustrated how coordinated, evidence-based sugar reduction policies can support the prevention and control of NCDs. Collectively, the sessions reaffirmed that sustainable sugar reduction requires political will, cross-sector partnerships, and policies that make low-sugar diets, health education, and safe water accessible and affordable.

### Contributing to global tobacco control

The HLM4 Political Declaration positioned tobacco as a target for fast-track action, aiming for 150 million fewer tobacco users worldwide by 2030. Against this backdrop, the 11th Conference of the Parties (COP11) to the WHO Framework Convention on Tobacco Control (WHO FCTC) convened in Geneva from 17–22 November to review progress and strengthen implementation of the Convention and its Protocol. FDI, alongside delegates from governments, international partners, and civil society organizations, contributed to discussions examining a wide range of measures to reduce tobacco use and address the health and environmental harms associated with tobacco production, consumption and waste. The meeting also marked 20 years since the adoption of the WHO FCTC, the first treaty negotiated under the auspices of WHO.

FDI has engaged with the WHO FCTC since its adoption in 2005 and continues to support its implementation through advocacy and capacity-building programmes (see p. 24 for FDI's tobacco cessation workshop programme). FDI highlighted the impact of these programmes at a joint side event co-organized with the NCD Alliance, *Strengthening Tobacco Control to Achieve SDG 3.4 on NCDs: A Global Imperative*. Discussions explored how stronger FCTC implementation can accelerate progress on NCDs and deliver on HLM4 commitments. COP11 concluded with the adoption of several significant decisions, including actions to strengthen regulation of emerging tobacco and nicotine products and to hold the tobacco industry accountable for its health and environmental harms, reflecting growing global momentum for tobacco control.

**FDI will continue to provide its members with the tools and support needed to champion optimal oral health in their countries and combat the sugar and tobacco epidemics.**



## COP6: advocacy on dental amalgam secures an equity-focused, patient-centred approach

In November 2025, a landmark decision was reached at the Sixth Conference of the Parties to the Minamata Convention on Mercury (COP6), extending the global phase-out date for the manufacture, import, or export of dental amalgam from 2030 to 2034. This milestone marked a major win for oral and public health and underscored the power of unified, science-based advocacy led by FDI and the International Association for Dental, Oral, and Craniofacial Research (IADR).

The decision reflected a balanced approach to phasing down dental amalgam worldwide. Crucially, it includes a key exemption aligned with FDI and IADR advocacy, which ensures that even after phase-out of dental amalgam, it can be used *“when its use is considered necessary by the dental practitioner based on the needs of the patient.”* This provision ensures patient care remains central to decision-making and safeguards access to essential restorative treatments where alternatives are not yet available or viable.

FDI and IADR, with support from the International Dental Manufacturers Association and the American Dental Association, worked to secure a fair and evidence-based outcome by engaging in and influencing discussions throughout the negotiations. Together, we emphasized that dental amalgam phase-down and eventual phase-out must consider country-specific challenges and capacities.

**“As we move toward the eventual phase-out of dental amalgam, it is essential that the needs of our members, and the patients they serve, remain at the heart of every decision.**

**This outcome provides much-needed time and clarity for our members to plan, prepare, and implement the necessary national policies. It reinforces FDI’s commitment to supporting the global dental community in maintaining continuity of care and advancing oral health equity during this important transition.**

- Mr Enzo Bondioni, Executive Director of FDI.

**Through these coordinated efforts, FDI has helped ensure an equity-focused phase-down that allows all countries, particularly low- and middle-income nations, to strengthen capacity, build technical expertise, and maintain patient care throughout the transition.**

## Partnering for a healthier future

Collaborative partnerships and interprofessional engagement are essential to advancing global oral health. By combining expertise, resources, and perspectives, these partnerships help create sustainable solutions that improve oral and overall health for all.

### FDI participates in the 4th Global NCD Alliance Forum

Held in Kigali, Rwanda, from 13–15 February 2025, the 4th Global NCD Alliance Forum brought together 700 delegates from 90 countries working in NCD prevention and care to strengthen the global NCD response.

Discussions centred on three key themes: inspiring leadership, mobilizing sustainable financing, and empowering communities. FDI, alongside IADR, reinforced the importance of integrating oral health into the broader NCD agenda and participated in two side events. The first, *Catalyzing the Global Response to Noncommunicable Diseases: Lessons from the Global Oral Health Agenda*, co-organized with IADR, addressed the key drivers of oral health policy from 2021 to the present and their implications for NCDs.

The second side event, *The Influence of Oral Diseases on Other NCDs and Public Health – Inspiration from Rwanda*, was organized by the forum co-host, Rwanda NCD Alliance. Participants explored the interlinkages between oral diseases and NCDs and learned about the impact of school toothbrushing programmes in Rwanda. FDI presented the outcomes of the WHO Global Oral Health Meeting, including the Bangkok Declaration and its recommendations.

### 2025 IADR/PER General Session and Exhibition

IADR hosted its 103rd General Session in conjunction with the Pan European Regional Congress (PER) in Barcelona, Spain, from 25–28 June 2025.

At the meeting, FDI promoted its upcoming World Dental Congress 2025 and actively contributed to several discussions on oral health policy. FDI hosted a satellite session, Partnerships to strengthen oral health surveillance and research, which highlighted the urgent need to address gaps in oral health information systems and research agendas identified in the [WHO Global Oral Health Action Plan baseline report](#) released in January 2025. The session brought together speakers from government, academia, industry, and civil society to discuss how stakeholders can bridge these gaps, the role of political will and leadership, and opportunities to scale up action through partnerships.

## Working in partnership with the World Health Professions Alliance



FDI is a member of the World Health Professions Alliance (WHPA), which brings together global organizations representing dentists, nurses, pharmacists, physiotherapists, and physicians worldwide, and altogether we represent 47 million healthcare professionals. In 2025, WHPA took part in key WHO meetings, as well as HLM4.

The global health workforce was a central focus of WHPA's advocacy at WHO's [7th Global Ministerial Summit on Patient Safety](#), held in Manila on 3–4 April, and subsequently at HLM4 in New York. At the WHO summit, WHPA emphasized a critical message: the safety of health professionals is intrinsically linked to patient safety. It also highlighted that progress in addressing global health workforce shortages remains slow and uneven across regions. This shortfall poses a significant threat to the safety and quality of healthcare worldwide and requires urgent attention.

At HLM4, WHPA called on governments to urgently invest in the health workforce to meet global NCD and mental health targets. It stressed that without sustained investment in education, recruitment, retention, and improved working conditions for health professionals, the commitments outlined in the Political Declaration cannot be achieved.



**Interprofessional collaboration is central to addressing NCDs, with oral diseases ranking among the most prevalent conditions globally. Integrated primary healthcare is critical for improving both oral and overall health. \_\_\_\_\_**



World Oral Health Day: a global call to action

Celebrated each year on 20 March, World Oral Health Day (WOHD) is a global movement to engage people everywhere in the importance of oral health. It highlights the close connection between oral health and overall well-being, while calling on governments and policymakers to take decisive action to improve access to safe, affordable, and equitable dental care. By bringing together communities, health professionals, and decision-makers, WOHD encourages collective action to ensure oral health is recognized as a fundamental right — not a privilege.



A Happy Mouth is a Happy Mind

In 2024, WOHD kicked off new three-year campaign, A Happy Mouth Is... The first year focused on highlighting the close connection between oral health and overall health.

In 2025, the campaign evolved to look beyond smiles to what lies behind them. Under the theme *A Happy Mouth is a Happy Mind*, FDI invited audiences worldwide to reflect on the powerful link between oral health and mental well-being. Building on the momentum of 2024 — when Toothie, FDI’s lovable beaver mascot, made its movie debut — the 2025 sequel brought Toothie back with a fresh twist: an original song that gave the message life and made it even more memorable.

WOHD website

[worldoralhealthday.org](http://worldoralhealthday.org)

The WOHD website continues to provide a wide range of resources to support action, including toolkits, posters, videos, and social media assets. From September 2024 to April 2025, these were downloaded over 55,000 times (+37% from 2024), demonstrating strong audience engagement. While changes in analytics systems mean year-over-year comparisons are not directly equivalent, the continued growth in downloads indicates that users landing on the site were highly engaged and the campaign’s reach remains impactful.

|                  | 2018    | 2019    | 2020    | 2021    | 2022    | 2023    | 2024    | 2025    |
|------------------|---------|---------|---------|---------|---------|---------|---------|---------|
| Website users    | 35,106  | 49,832  | 63,451  | 74,467  | 115,096 | 493,606 | 194,762 | 202,150 |
| Total page views | 139,626 | 198,435 | 245,341 | 284,723 | 320,665 | 940,721 | 448,942 | 456,411 |

Note: Data from 2023 are not directly comparable with 2024–2025 due to the transition from Universal Analytics (UA) to Google Analytics 4 (GA4). GA4 uses a different measurement model for users, sessions, and engagement, which affects reported metrics.

### WOHD 2025 snapshot

FDI continues to receive outstanding support from audiences worldwide, who help amplify WOHD's messages. As the campaign's creative elements rolled out across platforms, one thing became clear in 2025: digital spaces remain key to sparking global conversations. WOHD content across FDI's social media accounts alone generated more than 40 million views. Meanwhile, the official Toothie Instagram account saw a steady rise in engagement. For a campaign anchored in storytelling, the numbers below represent more than just visibility – they signal meaningful connection.

#### The Toothie Factor

- Over 169,000 profile visits
- 56,294 interactions
- A growing base of 3,200+ followers

[@ToothieBeaver](#)



\*From September 2024 to end of March 2025



### Achieving WOHD's five key campaign goals

#### Goal 1: Amplified inclusive advocacy

In 2025, FDI built on its 2024 resources to amplify the voices of people living with oral health conditions and help advance WOHD's goal of inclusive advocacy. Advocacy in Action cards highlighted projects ranging from oral care for refugees and cleft patients to raising awareness of gum health, noma, and the mouth–body–mind connection.

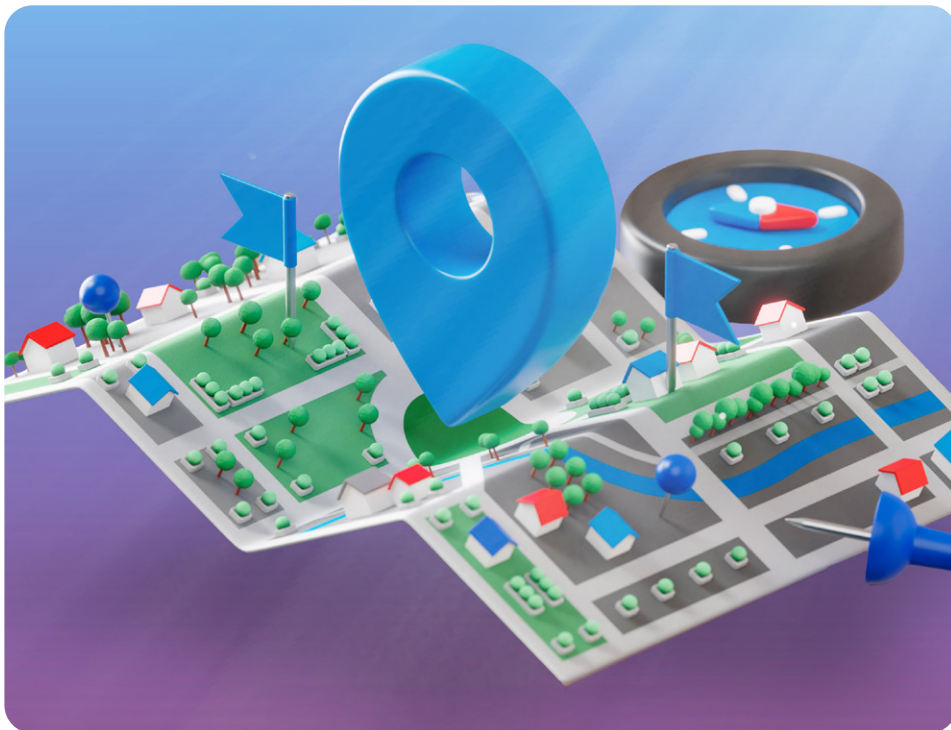
The campaign also explored new topics, such as dental anxiety, with fact sheets for dentists and patients. To enhance accessibility, materials could be customized and translated using online tools, including Canva and FDI's Happy Mouth tool. FDI also launched a [Call for Stories](#), inviting people worldwide to share experiences showing the transformative impact of oral health, with partners leading by example in sharing their own stories.

## Goal 2: Worldwide members' celebration

Members play a central role in expanding the global reach and visibility of WOHD. In line with FDI's commitment to encourage every member association to celebrate WOHD, regular communication was maintained throughout the campaign period. This included updates via the Membership Liaison and Support Committee, targeted mailings, and information on key campaign milestones and resources.

Building on the success of last year's first-ever WOHD webinar, FDI hosted a second session through its Oral Health Campus, providing a platform to explore the campaign's objectives and equip attendees with the knowledge and tools to get involved. Open to both FDI members and the public, the webinar drew 200 live participants — **150% more than last year** — with a total of 600 registrations. The session was also available to watch on demand.

Members were notably active in 2025, with around 600 activities reported on the WOHD map, nearly 100 more than the previous year, alongside strong engagement on social media. These efforts demonstrate the ongoing commitment of FDI's global network to actively engage communities worldwide and celebrate WOHD.



## Goal 3: Amplified corporate impact

FDI's WOHD partners played an active role in promoting the 2025 campaign, extending the reach of FDI's awareness messages to a broader audience. Their collaboration was supported by a joint activation plan that highlighted shared goals and messaging. Their enthusiastic participation strengthened the campaign's overall impact.

- **Haleon** supported a wide range of global initiatives — from setting a Guinness World Record for dental screenings in India, to launching mobile dental vans, digital assessments, and educational campaigns across Africa, the Middle East, Australia, the U.S., and Europe. Their efforts reached millions and reinforced the campaign theme, A Happy Mouth is a Happy Mind, through mindfulness-focused webinars and storytelling campaigns.
- **Smile Train** delivered a targeted digital campaign from March 10–24, generating 20.8 million impressions and nearly 9,000 engagements on social media. High-performing posts on Instagram and Facebook helped bring WOHD to a significantly broader online audience.
- **Dentsply Sirona** amplified FDI's messaging by sharing content on social media, providing free access to its Patient Education Toolkit, contributing to a video on oral and mental health, engaging employees globally, and implementing local initiatives for vulnerable communities.
- **Solventum**, in partnership with the Chinese Stomatological Association, organized a Smile Around the World event in Zhejiang Province, China, drawing over 500 attendees and reaching more than 450,000 viewers. Since 2018, this partnership has empowered nearly 10,000 children with essential oral hygiene education.

## Goal 4: Global ambassador network

Leveraging a network of influential voices and social media leaders is vital to raising oral health awareness in an increasingly digital landscape.

### FDI leadership as WOHD Ambassadors

A special message from FDI's President was shared with members for use on their social media platforms and at in-person events, helping to raise awareness of the importance of oral health. The video was also made available on the WOHD website as a resource accessible to all.

### Influence in action

In 2025, FDI partnered with eight influencers to amplify the campaign. Their content helped reach **2.6 million accounts** — an 85% increase — and generated an average of 134.5 engagements per post.



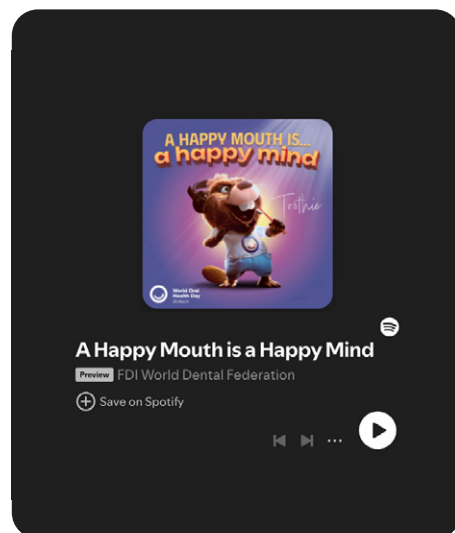
### Goal 5: Expanded collaborative outreach

FDI was pleased to see that the social media buzz surrounding WOHD remained strong across multiple platforms on 20 March. A wide range of stakeholders took part, including FDI members, FDI leadership, WHO, Chief Dental Officers, hospitals, educators, media outlets, partners, sister organizations, and governments, to name just a few.

The main campaign hashtags – #WOHD25, #HappyMouth, #BrushandBoogie – reached a global audience of 1.1 billion, and the campaign generated 6 million total engagements (shares, comments, saves), compared to an average of around 300,000 for campaigns of a similar scale.

#### Campaign song: *Brush and Boogie*

The digital campaign invited individuals to explore Toothie's new campaign track, Brush and Boogie, and share a reel or story showcasing their dance moves or biggest smile. The objective was to encourage user-generated content in support of oral health awareness. While the track did not achieve viral reach, it was positively received at events and activities worldwide, with many participants singing along or sharing the song on social media. Over 500 Instagram reels featured the track, which was played approximately 2,000 times across Spotify and other music platforms. Furthermore, the main campaign video was downloaded more than 3,200 times from the WOHD website.



#### Continued support from WHO and the health professions community

Several governments actively participated in disseminating the campaign message, including the Ministries of Health in Nigeria and Kenya, the Government of the Virgin Islands, the Government of India, and others.

The World Health Organization (WHO) continued its strong support for WOHD in 2025. WHO Headquarters, regional offices, and country-level accounts shared numerous messages across social media platforms. Notably, the Regional Directors for Africa and for South-East Asia issued statements referencing the campaign theme and encouraged countries to align with and implement regional and global oral health strategies. WHO Director-General Dr Tedros Adhanom Ghebreyesus also released a dedicated [video](#)

[message](#) on the day, calling on countries to reprioritize oral health as part of their commitment to **#HealthForAll**.

Additionally, in recognition of the day, WHO's IARC Oral Cancer Team released a [new video](#) highlighting the causes, burden, and symptoms of oral cancer. The video emphasized the importance of population-specific risk factors and prevention strategies and called on the global research community to accelerate collaborative efforts to better understand and prevent oral cancer worldwide.

#### Support from the United Nations

The United Nations' main account also posted about WOHD. To our knowledge, this marked only the second time the UN had acknowledged the day on its primary social media channels—an achievement of particular significance given the platform's extensive reach, including 16.5 million followers on X alone.

### World Oral Health Day Awards

Every year, FDI presents awards to honour those who have delivered exceptionally impactful campaigns. The 2025 winners were:

#### Best media campaign:

The Chinese Stomatological Association (CSA)

#### Most educational activity:

The Hong Kong Dental Association (HKDA)

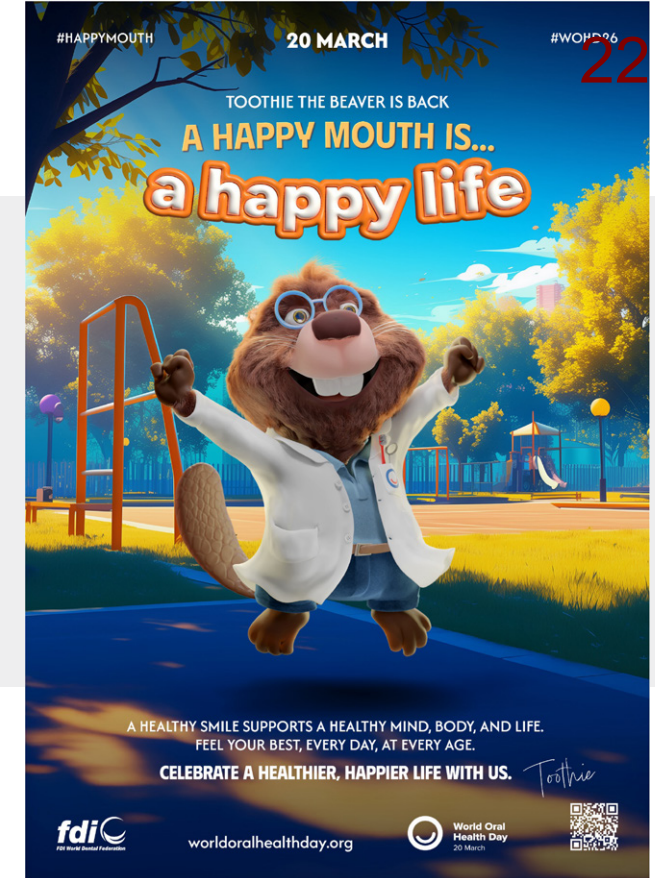
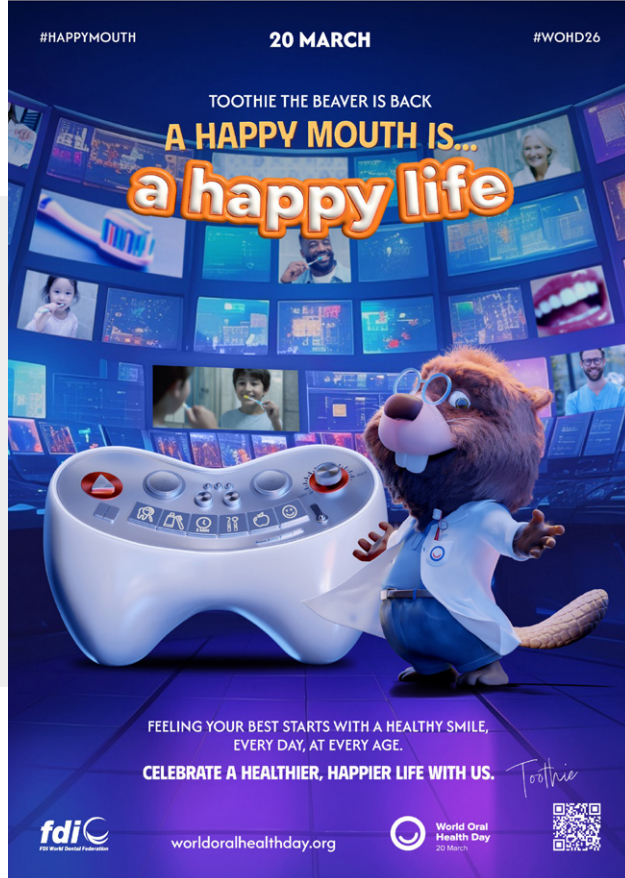
#### Most engaging community campaign:

National Oral Health Programme (NOHP) Puducherry

#### Best campaign by a dental students' association:

Dental Students Association of Kenya (DSAK)





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**World Oral Health Day**  
20 March

[www.worldoralhealthday.org](http://www.worldoralhealthday.org)

## WOHD 2026

The WOHD 2026 campaign was officially launched during the 2025 FDI World Dental Congress in Shanghai, ushering in the final chapter of the A Happy Mouth is... theme. As the culmination of the three-year cycle, WOHD 2026 will spotlight oral health as the foundation of lifelong well-being—from a baby's first teeth to a confident smile in older age—under the new strapline:

### A Happy Mouth is... A Happy Life

After all, oral health is far more than just healthy teeth; it shapes how we eat, speak, learn, and connect with one another.

The Partners for WOHD 2026 are:



**HALEON**



# DRIVING ACTION THROUGH COMMUNICATIONS

Effective communication remains central to advancing FDI’s vision of a world with optimal oral health. By delivering timely, relevant, and accessible information, FDI equips its members and wider stakeholders with the resources, guidance, and opportunities needed to support advocacy efforts and strengthen oral health systems at national and local levels.

## FDI website

[fdiworlddental.org](https://fdiworlddental.org)

FDI’s website continues to serve as a key platform for disseminating essential information and as a central hub for members and stakeholders. Overall website traffic remained relatively stable compared to 2024. In 2025, the digital landscape underwent a fundamental shift with the global rollout of AI-powered search overviews. This technology often provides direct answers to general health queries on the search results page, leading to "zero-click" journeys for many users. While this contributed to a minor 5% adjustment in our total page views, our content is increasingly being recognized by AI systems as trusted source material, extending our reach even before a user visits our platform. User engagement remained strong, with **37’000 resources downloaded** and a solid overall engagement rate recorded throughout the year (50%).

The website attracts a truly global audience. The largest share of visitors originated from the United States (10.65%), followed by China (10.17%), India (5.53%), Mexico (5.49%), and Singapore (5.28%). Desktop access accounted for 61.8% of visits, while 37.1% of users accessed the site via mobile devices.

In terms of content interest, conference and events pages generated the highest traffic, followed by the members’ page, World Oral Health Day (WOHD), and the Sustainability in Dentistry project. Insights gained from website analytics continue to inform future improvements and guide the refinement of FDI’s digital communication strategy.

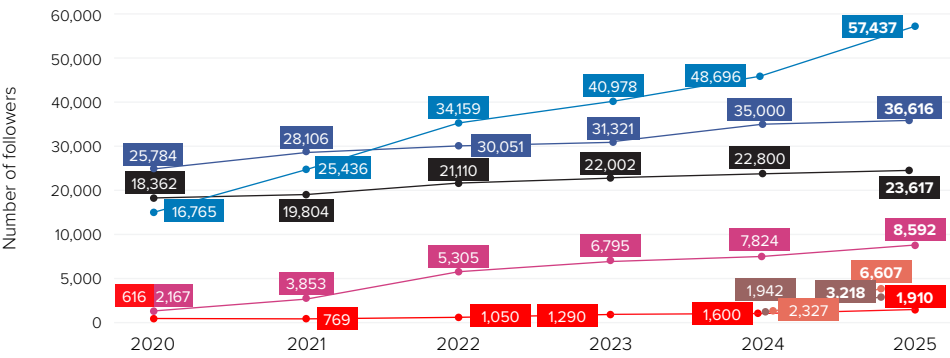
|               | 2022    | 2023    | 2024    | 2025    |
|---------------|---------|---------|---------|---------|
| Page views    | 563’453 | 615’445 | 685’778 | 646’615 |
| Website users | 260’240 | 307’459 | 359’300 | 348’296 |

## Social media

In 2025, FDI recorded growth across all social media platforms compared to 2024.

LinkedIn remained one of FDI’s fastest-growing platforms; however, in 2025 this growth was surpassed by Instagram, which showed particularly strong performance year on year. For the Toothie and WOHD accounts, this growth was largely driven by the high levels of engagement generated during the World Oral Health Day campaign activation phase, which translated into significant follower gains. Paid investments also performed well and contributed to sustaining this momentum.

Growth on the FDI Instagram account was similarly notable, despite lower levels of paid promotion. This suggests that the increased volume of content published throughout the year played a key role, reinforcing the platform’s preference for organic reach supported by consistent and regular posting.



Increase from 2024 to 2025

**Facebook (Likes)**  
[FDIWorldDentalFederation](#)  
 ↑ +1,000  
 +4.6%

**X (Followers)**  
[@fdiworlddental](#)  
 ↑ +700  
 +3.1%

**LinkedIn (Followers)**  
[fdiworlddental federation](#)  
 ↑ +7,618  
 +16%

**YouTube (Subscribers)**  
[fdiworlddental](#)  
 ↑ +310  
 +19%

**Instagram (Followers)**  
[worldoralhealthday](#)  
 ↑ +768  
 +10%

**Launched in 2024**

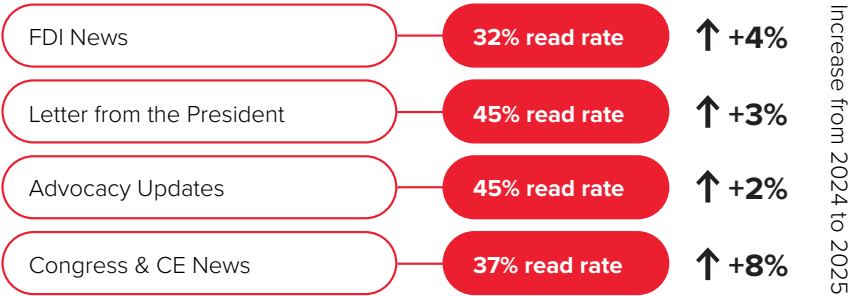
**Instagram (Followers)**  
[@fdiworlddental](#)  
 ↑ +3,390  
 +141.5%

**Instagram (Followers)**  
[@toothiethebeaver](#)  
 ↑ +1,276  
 +66%



Newsletters and mailings

In 2025, read rates increased steadily across all FDI newsletters. This positive trend reflects improvements in planning and coordination, with newsletters distributed more consistently and content more carefully tailored to audience interests. The most significant growth was recorded in Advocacy Updates, where read rates rose from 23% in 2021 to 45% in 2025, driven by the regular delivery of timely and relevant advocacy information. The Congress and Continuing Education Newsletter also saw strong gains, increasing from 18% in 2021 to 37% in 2025.



Database management

Significant progress was made during the year to strengthen and streamline FDI's communication and data management systems. Early efforts focused on resolving issues affecting the newsletter subscription process, ensuring users were correctly assigned to appropriate mailing lists. In parallel, contact group structures were rebuilt and optimized, and new mailing groups were created to reflect FDI's current leadership framework, including committees and task teams. As a direct result, the reach of Advocacy mailings expanded substantially, increasing from 1,299 to 2,987 recipients and enhancing engagement across the organization.

To support colleagues in maintaining accurate committee information, a practical usage guide for Managers was developed, with a focus on group and relationship management. Ongoing work to merge duplicate accounts continues to improve data quality, while the introduction of predefined searches now allows teams to quickly identify and target users based on operational needs.

Targeted communication campaigns and bulk mailings were also managed efficiently throughout the year, particularly in support of Advocacy Surveys and Policy Statements, ensuring messages reached the most relevant audiences. Collectively, these developments significantly improved the accuracy, reach, and effectiveness of FDI's communications activities in 2025.



Leadership support

The communications team worked closely with FDI leadership to develop presentations, speeches, key messages, event briefings, and related materials. These resources continue to support leaders in fulfilling their ambassadorial role and ensure that FDI's voice is communicated with clarity, consistency, and impact.





FDI STRATEGIC PILLAR

### 3. INNOVATION

Innovation shapes how we respond to evolving challenges—supporting health professionals to lead responsibly, sustainably, and with emerging technologies.

**The next four projects show innovation put into practice.**

# Integrated Electronic Health Records

Supported by

 HENRY SCHEIN®

Integrating dental and medical health records is an innovative yet necessary step toward coordinated patient care and more efficient health systems, with the potential to improve patient outcomes and support global health policy objectives.



## A global call to integrate oral health into Electronic Health Records

FDI launched a [Consensus Statement on Integrated Electronic Health Records \(EHRs\)](#) on 24 March, calling for the incorporation of oral health indicators into broader health records.

The Consensus Statement was developed by global experts from the Integrated EHR in Dentistry Task Team. It highlights eight key oral health indicators, including periodontal disease, caries, oral cancer screenings, oral health status, implant/device data, prescription data, allergies, and radiographic imaging. Given the strong link between oral health and general health, integrating these oral health indicators into medical records facilitates a more comprehensive and coordinated approach to patient care. By improving the detection and management of oral health conditions such as periodontal disease, this integration also supports the early detection and prevention of other health conditions, including diabetes. However, integrating oral health into EHRs presents challenges, including the need for standardization, interoperability, and data security. The Consensus Statement addresses these challenges and provides strategic solutions to overcome them.

In the press release accompanying the launch, FDI President Dr Greg Chadwick emphasized the necessity of incorporating oral health indicators into EHRs. He noted that this would not only improve patient outcomes but also strengthen interprofessional collaboration across the dental and medical fields.

[Read the press release](#)

## Driving global visibility and engagement for the Consensus Statement

On 26 March, a media briefing on the Consensus Statement, co-organized with Henry Schein, was held during the International Dental Show (IDS) 2025 in Cologne, Germany. A recording of the briefing is available [here](#). Alongside this, FDI implemented a comprehensive communications plan, including a dedicated social media toolkit.

**Through the release of this Consensus Statement, FDI took a significant step toward integrating oral health more effectively within broader health systems.**

## Digital Cleft Care

Supported by



Each year, 200,000 babies are born with cleft lip and/or palate, many without access to essential care. Without timely treatment, feeding, growth, and survival are compromised. Comprehensive cleft care is vital but complex, involving multiple procedures that place significant demands on all involved. Innovative, scalable solutions are essential to improve outcomes and expand access.

### Educating on the digitalized care pathway

To further extend its reach and impact, the Massive Open Online Course (MOOC) in Digital Dentistry in Cleft Care, developed during Phase 1 of the project, was made available in three additional languages: French, Spanish, and Portuguese.

This four-hour course provides scientific expertise and practical guidance to support the effective integration of the latest digital technologies across the cleft care continuum.

By the end of the course, learners are able to:

- Describe the benefits and applications of digitalization in comprehensive cleft care
- Understand the patient journey within a digitalized care pathway
- Recognize the role digitalization will play in the future of dentistry

[Access the MOOC in Digital Dentistry in Cleft Care](#)

### Showcasing digital workflows in cleft care

On 26 February 2025, two new videos were officially launched to bring digital workflows in cleft care to life:

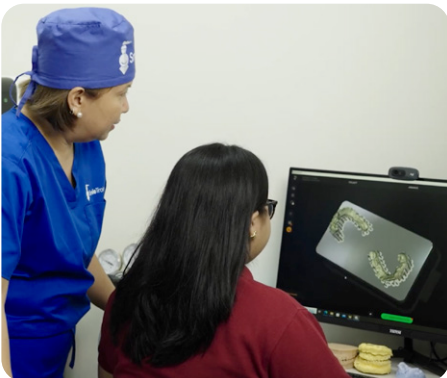
- Digital workflow in cleft care during the mixed dentition stage
- Protocols for the digital workflow in cleft care during the infancy stage

Developed using real patient cases, these videos demonstrate how digital workflows can enhance treatment procedures through the use of computer-aided manufacturing (CAM) devices, including milling and 3D printing technologies. The videos were actively promoted to ensure wide dissemination.

To watch the videos, visit our [Digital Cleft Care project page](#).

Learn more about Cleft Lip & Palate Digital Workflows on our website:

<https://digital-workflows.fdiworldddental.org>



**FDI is leading the transformation of cleft care through digital innovation.**



## Preventing AMR and Infections

Recognizing dentistry's responsibility for prescribing nearly 10% of all antibiotics used in human health, FDI has long championed the profession's role in tackling antimicrobial resistance. By positioning oral healthcare within the global AMR response, this initiative drives innovation through education, practical tools, and collaboration—empowering dental teams to protect patients today and preserve antimicrobials for the future.

### Strengthening global action on AMR during World Antimicrobial Awareness Week

Antimicrobial resistance (AMR) is one of the most pressing threats to global health. As resistance to antibiotics increases, so too does the risk for millions of people living with noncommunicable diseases (NCDs), who are more vulnerable to infection. In November 2025, building on the momentum of the 2024 United Nations General Assembly High-level Meeting on AMR, World AMR Awareness Week (WAAW) took place under the theme Act Now: Protect Our Present, Secure Our Future. The campaign called on governments, professionals, and communities to translate political commitments into tangible, accountable, life-saving interventions—and to think and work differently, recognizing that AMR cannot be addressed in isolation.

Against this backdrop, FDI participated in an interprofessional webinar hosted by the World Health Professions Alliance (WHPA). Speakers representing the five main health professions—dentists, nurses, pharmacists, physical therapists, and physicians—explored how interprofessional collaboration can serve as a powerful tool in responding to both AMR and NCDs, and how public health messaging must evolve to better empower professionals and communities alike.

[Watch the webinar recording](#)

### Explore FDI's project resources

WAAW also provided a timely opportunity to promote FDI's existing bank of AMR resources. These include practical tools and evidence-based resources such as a free interactive online course, support for developing antibiotic stewardship programmes, and a white paper outlining a framework to help dental teams tackle antimicrobial resistance in daily practice.

[Discover all the resources on the project page](#)



**FDI will continue to raise awareness and strengthen global efforts to tackle AMR. As a global oral health community, we share responsibility for stewarding antimicrobial use and safeguarding the future of patient care. \_\_\_\_\_**

# Sustainability in Dentistry

FDI champions sustainability in dentistry by promoting prevention-focused, high-quality care that minimizes environmental impact. Guided by its Policy Statement, FDI supports ethical, resource-efficient practices that reduce pollution, cut carbon emissions, and help protect future generations.

## New educational resources embedding Sustainability in Dentistry

Alongside teaching staff and students, FDI recognized the need to embed environmental sustainability into oral health professional education. As a result, in May 2025, and in collaboration with the University of Sheffield, FDI launched new educational resources to support the integration of sustainability into undergraduate and postgraduate dental curricula.

These include [customizable slide decks](#) covering topics ranging from cariology and prosthodontics to public health and ethics. Whether updating an existing course or creating a new one, educators can choose between editable formats for adaptation or ready-made versions for immediate use. A [practical user guide](#) complements the slides, offering step-by-step suggestions based on the open-access report [Curriculum Content for Environmental Sustainability in Dentistry](#). It helps educators understand not only what to teach, but also how to integrate sustainability meaningfully across subjects.

## Launch of second Massive Open Online Course

Building on the success of its first Massive Open Online Course (MOOC) on Sustainability in Dentistry, FDI announced the launch of its second course in June. Through MOOC 2, participants explore the environmental impact of oral healthcare and discover evidence-

based strategies to improve patient outcomes while reducing their ecological footprint. Upon completion, learners can also apply for the Sustainability Ambassador Prize—a recognition programme that allows participants to share their reflections and compete for one of two CHF 500 prizes. The first winners were celebrated in January 2025, following their completion of MOOC 1.

## Sustainability in Dentistry Summit

The virtual Sustainability in Dentistry Summit was held in June, in conjunction with World Environment Day. The Summit offered participants a platform to explore impactful initiatives that promote environmentally friendly practices in dentistry. Attendees also had the opportunity to learn from industry leaders, who shared best practices and showcased innovative approaches through engaging poster presentations.

## Celebrating the FDI Sustainability Award winners 2025

The FDI Sustainability Award plays a key role in encouraging and recognizing sustainability efforts within dental practices and among dental professionals worldwide. In 2025, FDI proudly honoured three winners for their leadership and commitment: Healthpoint Hospital (United Arab Emirates), the Australian Dental Association (Australia), and Dr Hindol Das (India).

**Improvements in oral health and well-being can be gained through prevention, screening and monitoring of systemic health conditions in environmentally friendly practices. Thus, optimal oral healthcare has two distinct outcomes: good oral healthcare outcomes and a reduced environmental impact.**

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SUNSTAR



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MITSUBI CHEMICALS GROUP



DELIVERING FDI'S STRATEGIC PILLARS

## KEY ENABLERS

Key enablers help realize FDI's mission—through effective governance, strong partnerships, engaged membership, and operational excellence.



# GOVERNANCE AND MEMBERSHIP

FDI's governance and leadership meetings play a central role in setting strategic direction, shaping policy, and advancing progress in global oral health.

In April, the FDI Mid-year Meeting took place in Geneva, Switzerland, where Council, Committees, and Working Groups convened to plan activities for 2026 and address imminent business matters. A few months later, in September, the General Assembly and Parliament meetings were held alongside the FDI World Dental Congress (WDC) in Shanghai. The 2025 World Dental Parliament included 408 FDI members from 86 countries, highlighting the organization's broad global representation.

## FDI Mid-year Meeting

Over five days, FDI's leadership reviewed policy statements, planned WDC sessions, and discussed projects aligned with FDI's strategic pillars — Knowledge Exchange, Advocacy, and Innovation. A key focus was how FDI should engage with the growing global discourse on fluoride. FDI remains committed to ensuring its policies and recommendations are grounded in the best available scientific evidence and continues to assess developments related to fluoride and its role in oral health, supporting its appropriate use as a safe and effective measure for preventing dental caries. Ongoing collaboration and proactive action will be essential as FDI advances on this issue.

Another key outcome of the meeting was Council approval of the members of two new Special Committees, established at the request of FDI's General Assembly. Further information on these committees is provided later in this section.

## General Assembly decisions

The General Assembly (GA) is the supreme legislative and governing body of FDI. It meets once a year and sets FDI policies, the strategic plan, missions and aims, and monitors progress toward achieving them. The GA also approves the annual budget, establishes the annual subscription for Regular Members, receives and takes action on reports from the Council, and elects Regular, Associate, Affiliate and Supporting Members, as well as Committee and Council members and the Speaker of the GA.

As a result of the decisions taken by the voting members at the meeting in Shanghai, the Council and Standing Committees are outlined below. As of September 2025, the composition is as follows:

### Council

#### Members

President

President-elect

Treasurer

Council members

Assist. Prof. Dr Nikolai Sharkov, *BLG*

Prof. Young Guk Park, *KOR, REP*

Dr Carol G. Summerhays, *USA*

Prof. S. M. Balaji, *SYC*

Prof. William Cheung, *HKG*

Dr Sophie Darteville, *FRA*

Assist. Prof. Duygu Ilhan, *TUR*

Dr Elham Kateeb, *PSE*

Dr Anna Lella, *POL*

Dr Mauricio Montero, *CRI*

Prof. Dr Hiroshi Ogawa, *JPN*

Prof. Dr Yi M Liu, *CHN*

Dr Gabriela Ramírez Mendoza, *MEX*

#### Non-voting members

Speaker of the General Assembly

FDI Executive Director

Dr Stephen Liew, *AUS*

Mr Enzo Bondioni, *CHE*

## Standing Committees

FDI has five Standing Committees, each with a particular sphere of activity and expertise. They report to Council.

### Dental Practice Committee

Chair: Dr Doniphan Hammer, *FRA*  
 Vice-Chair: Dr Stefanie Tiede, *GER*  
 Dr Hiroyuki Hirano, *JPN*  
 Dr Marijan Denkovski, *MKD*  
 Dr Yan Si, *CHN*  
 Dr Antonieta Muñoz Solís, *CRI*  
*Liaison Councillor*: Prof. Dr Yi M Liu, *CHN*

### Education Committee

Chair: Dr Antonio Estrada Valenzuela, *MEX*  
 Vice-Chair: Prof. Katalin Nagy, *HUN*  
 Dr Meshari Faraj Alotaibi, *SAU*  
 Prof. Jun Tsuruta, *JPN*  
 Dr Antonio Roma Torres, *PRT*  
 Prof. Tianmin Xu, *CHN*  
*Liaison Councillor*: Dr Anna Lella, *POL*

### Membership Liaison and Support Committee

Chair: Dr Irene Marron-Tarazzi, *USA*  
 Vice-Chair: Dr Makiko Iwasaki, *JPN*  
 Assist Prof. Antoine Choufani, *LBN*  
 Dr Amanda Johnston, *NZL*  
 Dr Dasom Kim, *KOR*  
 Dr Sarkis Sozkes, *TUR*  
*Liaison Councillor*: Dr Elham Kateeb, *PSE*

### Public Health Committee

Chair: Prof. Chun-hung Chu, *HKG*  
 Vice-Chair: Assoc. Prof. Simona Dianišková, *SVK*  
 Assoc. Prof. Elizabeth Shick, *USA*  
 Prof. Youn-Hee Choi, *KOR*  
 Prof. Islam Tarek Abbas Hassan, *EGY*  
 Dr Louisa Nokukhanya Makwakwa, *ZAF*  
 Dr James Taylor, *CAN*  
*Liaison Councillor*: Dr Sophie Darteville, *FRA*

### Science Committee

Chair: Dr Jeffrey Platt, *USA*  
 Vice-Chair: Prof. Dr Falk Schwendicke, *GER*  
 Dr Wendy Thompson, *UK*  
 Prof. Kivanç Bektaş Kayhan, *TUR*  
 Dr Walter Yu Hang Lam, *HKG*  
 Prof. Dr Verica Pavlic, *BIH*  
*Liaison Councillor*: Prof. William Cheung, *HKG*  
*ISO Representative*: Dr Benoit Soucy, *CAN*  
*IADR Representative*: Prof. Helen Whelton, *IRL*

## Two new Special Committees

In 2025, two new temporary Special Committees were established. The Special Committee on Membership Subscription Formula is evaluating the effectiveness and fairness of the current membership formula and exploring whether suitable alternatives could be considered by members. The Special Committee on World Dental Parliament is examining the viability of a hybrid model for Parliament. While the formation process took slightly longer than anticipated to ensure a sufficient pool of candidates, both committees commenced their work in 2025. Their work is critical to FDI's long-term sustainability and inclusivity, and further updates will be shared as their work progresses.

### Special Committee on Membership Subscription Formula

Chair: Mr Florian Lemor, *GER*  
 Dr Antonieta Muñoz Solís, *CRI*  
 Dr Morten Harry Rolstad, *NOR*  
 Dr Jim Boyle, *USA*  
 Dr Renier Putter, *ZAF*  
 Dr Chris Sanzaro, *AUS*

### Special Committee on World Dental Parliament

Chair: Dr Kirk Preston, *CAN*  
 Prof. Dr Marzena Dominiak, *POL*  
 Dr Juan David Pelaez Ossa, *COL*  
 Dr Mark W. Donald, *USA*  
 Prof. Jun Tsuruta, *JPN*  
 Prof. Tarek Abbas, *EGY*  
 Dr Ashok Dhoble, *IND*  
 Dr Yan Si, *CHN*



## New policy statements

In addition to welcoming new members, the GA voted on a series of new and updated policy statements, which are available on FDI's website in English, French and Spanish. These statements address a range of critical topics shaping global oral health, including:

1. [Advertising in Dentistry](#)
2. [Alignment of oral health care with ISO Standards](#)
3. [Caries management with Silver Diamine Fluoride](#)
4. [Digital Dentistry](#)
5. [Electronic Health Records](#)
6. [Noma – eradicating a preventable disease to save lives](#)
7. [Specialization in Dentistry](#)
8. [The Role of Supervision in Dentistry](#)
9. [The Use of Topical Fluoride for Caries Prevention](#)

FDI Policy Statements serve as an important advocacy tool to help advance oral health worldwide.

## Travel grant 2025

The Travel Grant aims to enable representatives of FDI Member organizations from low- and lower-middle-income countries to attend the World Dental Parliament. In 2025, 13 Travel Grant recipients participated, representing the following countries: Afghanistan, Bangladesh, the Democratic Republic of the Congo, Ethiopia, Kenya, Lebanon, Morocco, Myanmar, Nepal, Rwanda, Somalia, Sri Lanka, and Uganda. The 2025 Travel Grant provided 100% reimbursement of agreed airfare benchmarks.

A selection of recipients were invited to share their experiences through two-minute video testimonials, guided by a set of structured questions. Once all videos have been submitted, they will be collated and shared with FDI National Liaison Officers (NLOs). As a key link between FDI and its member associations, NLOs can use this resource to amplify the impact of the Travel Grant, share insights across the membership, and encourage continued engagement in FDI's global governance activities.

## Membership

FDI World Dental Federation is the largest membership-based dental organization in the world. It is the principal representative body for over one million dentists worldwide.

**190** Number of National Dental Associations and Specialist Groups

**134** Number of Countries



### Regular Members

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• Afghanistan Dentists' Association</li> <li>• American Dental Association</li> <li>• Antigua and Barbuda Dental Association</li> <li>• Armenian Dental Association</li> <li>• Asociación Dental Mexicana Federación Nacional de Colegios de Cirujanos Dentistas, A.C.</li> <li>• Asociación Odontológica Panameña</li> <li>• Asociación Odontológica Uruguaya</li> <li>• Associação Moçambicana dos Médicos Dentistas</li> <li>• Association Dentaire Française</li> <li>• Association Dentaire Gabonaise</li> <li>• Association Dentaire Haitienne et Orthodontie</li> <li>• Association des Chirurgiens-Dentistes du Bénin, (A.C.D.B.)</li> </ul> | <ul style="list-style-type: none"> <li>• Association des Chirurgiens-Dentistes du Burkina (ACDB)</li> <li>• Association des Chirurgiens-Dentistes du Niger</li> <li>• Association des Chirurgiens-Dentistes du Togo (ACDT)</li> <li>• Association des Medecins Dentistes Mauritiens</li> <li>• Association des Médecins-Dentistes du Grand-Duché de Luxembourg</li> <li>• Association des Odonto-Stomatologistes de Côte d'Ivoire (A.O.S.C.I.)</li> <li>• Association des Odontostomatologistes du Mali (AOSMA)</li> <li>• Association Marocaine de Prévention Bucco-dentaire (AMPBD)</li> <li>• Association Nationale des Chirurgiens-Dentistes</li> </ul> | <ul style="list-style-type: none"> <li>• Sénégalais (A.N.C.D.S)</li> <li>• Association Nationale des Odonto-Stomatologistes du Cameroun (ANOSC)</li> <li>• Association of Dentists in Republic of Srpska</li> <li>• Association of Public Health Dentists</li> <li>• Association Rwandaise des Chirurgiens-Dentistes et Stomatologues</li> <li>• Associazione Italiana Odontoiatri</li> <li>• Associazione Nazionale Dentisti Italiani</li> <li>• Australian Dental Association Inc</li> <li>• Azerbaijan Stomatological Association</li> <li>• Bahamas Dental Association</li> <li>• Bahrain Dental Society</li> <li>• Bangladesh Dental Society</li> </ul> | <ul style="list-style-type: none"> <li>• Barbados Dental Association</li> <li>• Belorussian Dental Association</li> <li>• Botswana Dental Association</li> <li>• British Dental Association</li> <li>• Bulgarian Dental Association</li> <li>• Bulgarian Scientific Association of Dental Medicine</li> <li>• Bundeszahnärztekammer (BZAOK)</li> <li>• Cambodian Dental Association</li> <li>• Canadian Dental Association</li> <li>• Chambre de Médecine Dentaire</li> <li>• Chinese Stomatological Association</li> <li>• Chinese Taipei Association for Dental Sciences</li> <li>• Colegio de Cirujano Dentistas de Chile</li> </ul> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## New membership applications

FDI continues to strengthen its membership by engaging with new national dental associations (NDAs). In 2025, FDI was pleased to welcome the following associations as Regular Members:

- Antigua and Barbuda Dental Association
- Bahrain Dental Society

## “Member Supports Member” project 2025

The “Member Supports Member” (MSM) project highlights the solidarity and collaboration within the global oral health community. Through this initiative, FDI members provide vital support to fellow NDAs facing financial challenges—covering annual membership fees, enabling attendance at the World Dental Parliament, or both. By fostering mutual aid, MSM strengthens connections across NDAs and promotes broader engagement in FDI activities.

FDI gratefully acknowledges the following associations and individuals for supporting their peers through the MSM initiative in 2025:

- Bulgarian Dental Association → Bulgarian Scientific Association of Dental Medicine
- Dr Carol Summerhays, American Dental Association → Botswana Dental Association
- Dr Michael Sereny, Bundeszahnärztekammer (BZAOK) → Association des Chirurgiens-Dentistes du Bénin
- Prof. Ihsane Benyahya, Association Marocaine de Prévention Bucco-dentaire (AMPBD) → Association des Odontostomatologistes du Mali (AOSMA)
- Dr Irene Marron-Tarrazzi, American Dental Association → Federación Odontológica del Paraguay

- Colegio de Cirujanos Dentistas de Costa Rica
- Colegio de Cirujanos Dentistas de Honduras
- Colegio de Odontólogos de Bolivia
- Colegio Estomatológico de Guatemala
- Colegio Odontológico del Perú
- Colegio Odontológico Nicaragüense
- Collegi d'Odontolegs i Estomatolegs d'Andorra
- Confederación Odontológica de la República Argentina
- Consejo General de Colegios Odontólogos y Estomatólogos de España
- Cook Islands Dental and Medical Association
- Croatian Dental Chamber
- Croatian Dental Society
- Cyprus Dental Association
- Czech Dental Chamber
- Danish Dental Association
- Dental Association of Bosnia & Herzegovina
- Dental Association of Malta
- Dental Association of Seychelles
- Dental Association of Thailand
- Dental Chamber of Federation of Bosnia and Herzegovina
- Dental Chamber of Kosovo
- Dental Society – Emirates Medical Association
- Egyptian Dental Association
- Estonian Dental Association
- Ethiopian Dental Professionals' Association
- Federación Odontológica Colombiana
- Federación Odontológica del Paraguay
- Federacion Odontologica Ecuatoriana
- Fiji Dental Association
- Finnish Dental Association
- Georgian Stomatological Association
- Ghana Dental Association
- Hellenic Dental Association
- Hong Kong Dental Association
- Hungarian Dental Association
- Indian Dental Association
- Indonesian Dental Association
- Iranian Dental Association
- Iraqi Dental Association
- Irish Dental Association
- Israel Dental Association
- Jamaica Dental Association

- Japan Dental Association
- Jordan Dental Association
- Kazakhstan Stomatological Association
- Kenya Dental Association
- KNMT (Dutch Dental Association)
- Korean Dental Association
- Lao Dental Association
- Lebanese Dental Association
- Lebanese Dental Association - Tripoli
- Macau Dental Association
- Macedonian Dental Chamber
- Macedonian Dental Society
- Malaysian Dental Association
- Mauritius Dental Association
- Moldavian Association of Stomatologists (MAS)
- Mongolian Dental Association
- Montenegro Dental Chamber
- Myanmar Dental Association
- National Dental Association of Somalia
- Nepal Dental Association
- New Zealand Dental Association
- Nigerian Dental Association
- Norwegian Dental Association
- OMD - Ordem dos Médicos Dentistas
- Order of Dentists of Albania
- Ordre Nationale des Chirurgiens-Dentistes de la République Démocratique du Congo
- Österreichische Zahnärztekammer (Austrian Dental Chamber)
- Pakistan Dental Association
- Palestinian Dental Association
- Papua New Guinea Dental Association (PNGDA)
- Philippines Dental Association
- Polish Chamber of Physicians and Dentists
- Polish Dental Society
- Romanian Dental Association of Private Practitioners (RDAPP)
- Romanian Society of Stomatology
- Russian Dental Association
- Serbian Dental Society
- Singapore Dental Association
- Slovak Chamber of Dentists
- Slovenian Dental Association
- Société Congolaise des Odontologues, Stomatologues

- et Chirurgiens Maxillo-Faciaux
- Société de Médecine Dentaire
- South African Dental Association
- SPEDM - Sociedade Portuguesa de Estomatologia e Medicina Dentária
- Sri Lanka Dental Association
- Stomatological (Dental) Association of the Kyrgyz Republic
- Swedish Dental Association
- Swiss Dental Association (SSO)
- Syndicat Tunisien des Médecins Dentistes de Libre Pratique
- Syrian Dental Association
- Tannlæknafélag Islands – The Icelandic Dental

- Association
- Tanzania Dental Association
- The Republic of Srpska Chamber of Doctors in Dentistry
- The Saudi Dental Society
- The Stomatological Society of Greece
- Turkish Dental Association
- Uganda Dental Association
- Ukraine Dental Association
- United Kazakhstan Association of Dentists
- Uzbekistan Dental Association
- Verbond der Vlaamse Tandartsen
- Vietnam Odonto-Stomatology Association (VOSA)
- Zimbabwe Dental Association

### Associate Members

- Asociación Odontologica Argentina
- Dental Section of the Hungarian Medical Chamber
- Egyptian Clinical Dental Society

- Freier Verband Deutscher Zahnärzte
- Macedonian Society of Dental Medicine
- Taipei Dental Association

### Affiliate Members

- Academy of Dentistry International
- Academy of Osseointegration
- Associação Dentaria Lusofona (ADL)
- Groupement des Associations Dentaires Francophones (GADEF)
- International Association for Dental, Oral, and Craniofacial Research
- International Association for Disability and Oral Health
- International Association of Dental Students

- International Association of Dento-Maxillofacial Radiology
- International Association of Paediatric Dentistry
- International College of Dentists
- International Dental Association "Commonwealth"
- International Society of Computerized Dentistry
- Iranian-German Implant Association - IGIA
- Pierre Fauchard Academy
- The Commonwealth Dental Association
- World Federation of Orthodontists

### Supporting Members

- Academy of General Dentistry
- American Dental Education Association
- Association for Dental Safety (ADS)
- Association of Dental Dealers in Europe (ADDE)
- Australian Dental Industry Association
- Balkan Stomatological Society
- Dental Trade Alliance
- European Dental Student Association (EDSA)
- Federation of the European Dental Industry (FIDE)

- Fondazione ANDI onlus
- Foundation Nakao for Worldwide Oral Health
- Georgian Implantological Association
- Global Scientific Dental Alliance
- International Dental Manufacturers
- Japan Dental Trade Association
- Oral Health Foundation
- The British Dental Industry Association
- Young Dentists Worldwide

## 2025 Report of the Auditor to the Council of FDI World Dental Federation

# Deloitte.

Deloitte SA  
Rue du Pré-de-la-Bichette 1  
1202 Geneva  
Switzerland

Phone: +41 (0)58 279 8000  
Fax: +41 (0)58 279 8800  
www.deloitte.ch

### Report of the independent auditor on the summary of financial statements

To the Council of

**FDI Fédération Dentaire Internationale (IDF International Dental Federation), Vernier**

#### *Opinion*

The summary financial statements, which comprise the statement of assets, liabilities and reserve funds as at December 31, 2025 and statement of receipts and operating expenditure for the year then ended are derived from the audited financial statements of FDI Fédération Dentaire Internationale (IDF International Dental Federation) for the year ended December 31, 2025.

In our opinion, the accompanying summary financial statements are consistent, in all material respects, with the audited financial statements, prepared in accordance with Swiss GAAP FER (Core FER), the Swiss Law and the Association's articles of incorporation.

#### *Summary Financial Statements*

The summary financial statements do not contain all the disclosures required by Swiss GAAP FER (Core FER), Swiss Law and the Association's articles of incorporation. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon.

#### *The Audited Financial Statements and Our Report Thereon*

We expressed an unmodified audit opinion on those financial statements in our independent report dated March 24, 2026.

#### *Council's responsibility*

The Council is responsible for the preparation of the summary of financial statements in accordance with the requirements of Swiss GAAP FER (Core FER), the Swiss Law and the Association's articles of incorporation.

#### *Auditor's responsibility*

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial statements based on our procedures, which were conducted in accordance with ISA-CH 810 "Engagements to Report on Summary Financial Statements".

#### **Deloitte SA**



Alexandre Dubi  
Licensed Audit Expert  
Auditor in charge



Alexandre Ribordy  
Licensed Auditor

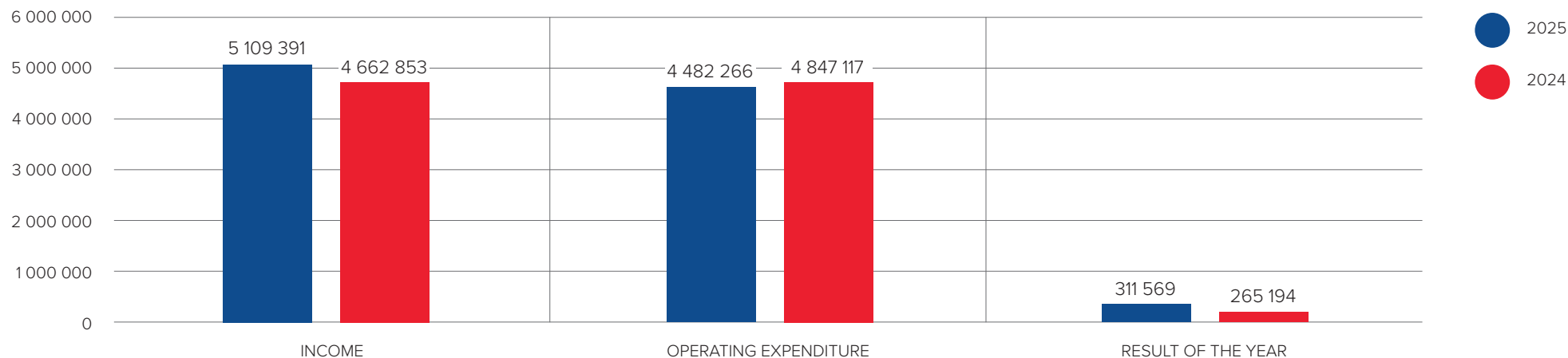
Geneva, March 24, 2026

#### Enclosure

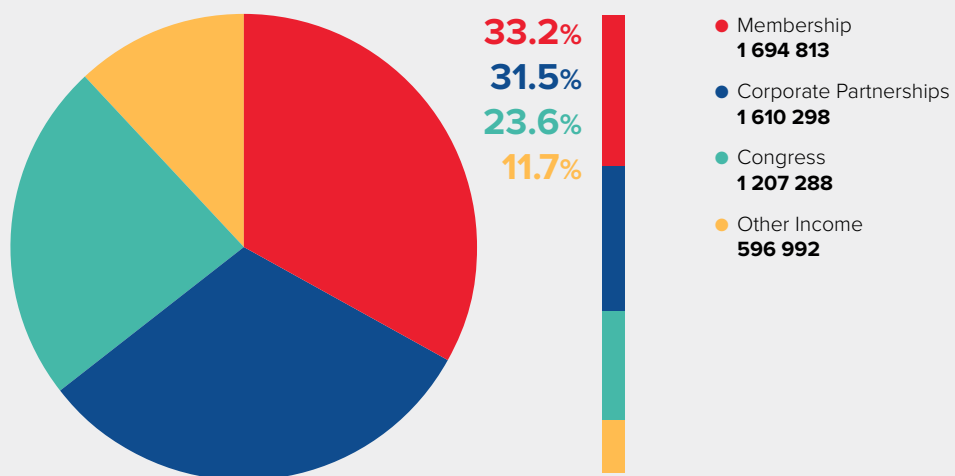
- Summary financial statements (statement of assets, liabilities and reserve funds, statement of receipts and operating expenditure)



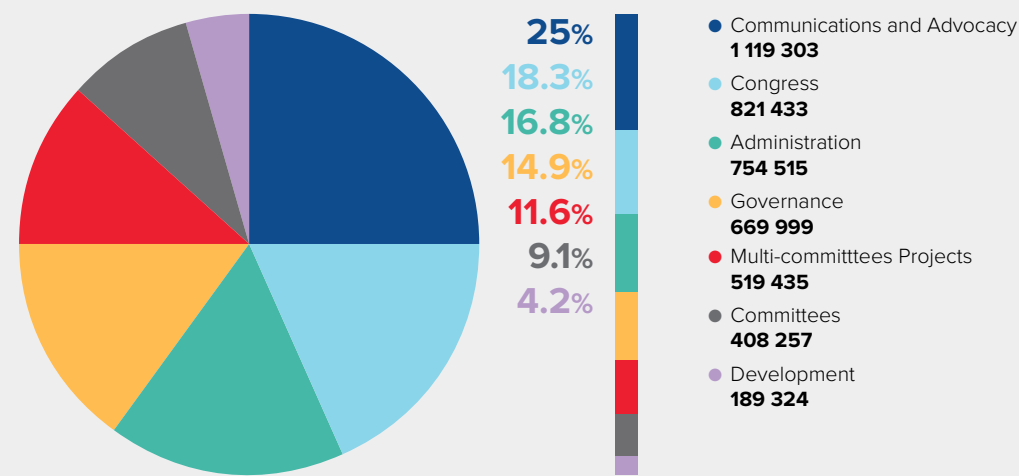
## History of Income, Operating Expenditure, and Result of the Year (CHF)



### Income 2025



### Operating Expenditure 2025



## Statement of Assets, Liabilities, and Reserve Funds

(in CHF at 31 December 2025)

| Assets                                      | 2025             | 2024             |
|---------------------------------------------|------------------|------------------|
| <b>Current assets</b>                       |                  |                  |
| Cash and cash equivalents                   | 4 096 117        | 3 821 088        |
| Accounts receivable, net                    | 410 397          | 465 155          |
| <i>Accounts receivable</i>                  | 413 642          | 468 067          |
| <i>Provision for bad and doubtful debts</i> | ( 3 245)         | (2 912)          |
| Prepayments and accrued income              | 703 592          | 271 214          |
| Other current assets                        | 42 587           | 9 048            |
| <b>Total current assets</b>                 | <b>5 252 693</b> | <b>4 566 505</b> |
| <b>Non-current assets</b>                   |                  |                  |
| Tangible fixed assets                       | 389 433          | 68 428           |
| Financial fixed assets                      | 3 782 293        | 3 402 460        |
| Guarantee deposits                          | 71 401           | 69 378           |
| <b>Total non-current assets</b>             | <b>4 243 127</b> | <b>3 540 266</b> |
| <b>Total assets</b>                         | <b>9 495 820</b> | <b>8 106 771</b> |
| <b>Liabilities and reserve funds</b>        |                  |                  |
| <b>Current liabilities</b>                  |                  |                  |
| Accounts payable                            | 328 251          | 347 804          |
| Other payables                              | 110 249          | 101 899          |
| Accrued liabilities                         | 132 120          | 129 426          |
| Provisions                                  | 38 500           | 46 000           |
| Deferred income                             | 682 026          | 705 362          |
| <b>Total current liabilities</b>            | <b>1 291 146</b> | <b>1 330 491</b> |
| <b>Non Current liabilities</b>              |                  |                  |
| Deferred income                             | 597 010          | -                |
| <b>Total non current liabilities</b>        | <b>597 010</b>   | <b>-</b>         |
| <b>Total liabilities</b>                    | <b>1 888 156</b> | <b>1 330 491</b> |
| <b>Reserve funds</b>                        |                  |                  |
| Restricted funds                            | 720 653          | 606 010          |
| Restricted funds in custody                 | 226 639          | 221 468          |
| <b>Total Restricted funds</b>               | <b>947 292</b>   | <b>827 478</b>   |
| General Reserves                            | 5 448 803        | 5 183 609        |
| Special Reserves                            | 900 000          | 500 000          |
| Net income for the year                     | 311 569          | 265 194          |
| <b>Total Unrestricted Funds</b>             | <b>6 660 372</b> | <b>5 948 803</b> |
| <b>Total Reserve funds</b>                  | <b>7 607 664</b> | <b>6 776 280</b> |
| <b>Total liabilities and reserve funds</b>  | <b>9 495 820</b> | <b>8 106 771</b> |

## Statement of Receipts and Operating Expenditure

(in CHF at 31 December 2025)

| Income                                                     | 2025               | 2024               |
|------------------------------------------------------------|--------------------|--------------------|
| Membership                                                 | 1 694 813          | 1 694 366          |
| Congress                                                   | 1 207 288          | 1 123 628          |
| <i>World Dental Congress</i>                               | 991 730            | 1 032 407          |
| <i>Regional congresses</i>                                 | 62 193             | -                  |
| <i>Master CE programme</i>                                 | 128 365            | 66 221             |
| <i>Young Dentists Forum</i>                                | 25 000             | 25 000             |
| Corporate partnerships                                     | 1 610 298          | 1 645 395          |
| <i>Unrestricted</i>                                        | 848 417            | 886 663            |
| <i>Restricted</i>                                          | 761 881            | 758 732            |
| Other income                                               | 596 992            | 199 464            |
| <b>Total income</b>                                        | <b>5 109 391</b>   | <b>4 662 853</b>   |
| <b>Operating expenditure</b>                               |                    |                    |
| Personnel costs                                            | (2 372 070)        | (2 521 316)        |
| Office                                                     | ( 369 128)         | (374 944)          |
| Travel & subsistence                                       | ( 632 649)         | (781 215)          |
| Operational                                                | ( 622 130)         | (702 960)          |
| Congress specific                                          | ( 151 768)         | (149 929)          |
| Communication/Web/Webinars                                 | ( 232 903)         | (248 069)          |
| Legal                                                      | ( 101 617)         | (68 684)           |
| <b>Total expenditures</b>                                  | <b>(4 482 266)</b> | <b>(4 847 117)</b> |
| <b>Operational result</b>                                  | <b>627 126</b>     | <b>(184 264)</b>   |
| Financial income/(expenses)                                | 227 517            | 186 052            |
| Exchange rate gain/(loss)                                  | ( 28 430)          | (3 129)            |
| <b>Net FDI Financial result</b>                            | <b>199 087</b>     | <b>182 923</b>     |
| <b>FDI result before change in fund capital</b>            | <b>826 213</b>     | <b>(1 341)</b>     |
| Restricted income allocated to funds in custody            | 110 307            | 134 112            |
| Restricted income withdrawn from funds in custody          | ( 105 136)         | (126 122)          |
| <b>Result of the year for funds in custody</b>             | <b>5 171</b>       | <b>7 990</b>       |
| Restricted income allocated to restricted funds            | 915 246            | 949 953            |
| Restricted income withdrawn from restricted funds          | ( 800 602)         | (890 891)          |
| <b>Result of the year after change in restricted funds</b> | <b>711 569</b>     | <b>(60 402)</b>    |
| (Allocation) to/ Withdrawn from special reserve            | ( 400 000)         | -                  |
| (Allocation) to/ Withdrawn from Membership fees Fund       | -                  | 225 596            |
| Withdrawn to World Dental Development Fund                 | -                  | 100 000            |
| <b>FDI Result of the year after funds allocations</b>      | <b>311 569</b>     | <b>265 194</b>     |

# BUILDING STRONG PARTNERSHIPS FOR OPTIMAL ORAL HEALTH

FDI extends its heartfelt gratitude to its 2025 partners for their generous and continued support.



Sustainability in Dentistry  
Oral Health within  
General Health  
Vision 2030



Sustainability in Dentistry  
World Oral Health Day  
Digital Cleft Care  
Master CE Programme



Oral Health for an Ageing  
Population  
Master CE Programme



Education Module for Other  
Health Professionals  
Oral Health Observatory



Recognition Programme



Vision 2030  
Young Dentists Forum  
Integrated Electronic Health  
Records in Dentistry



Vision 2030



Vision 2030



KULZER  
MITSUI CHEMICALS GROUP

Sustainability in Dentistry



Tobacco Cessation



Mental Health  
and Well-being



HPV: Integrating Oral Health  
for Prevention



Oral Health for an Ageing  
Population



Vision 2030



YOUR SMILE. OUR VISION.

Sustainability in Dentistry



World Dental  
Development Fund



Vision 2030  
World Oral Health Day  
Digital Cleft Care



Smile Around the World  
Vision 2030  
World Oral Health Day



Sustainability in Dentistry



Master CE Programme

# THE TEAM

## Executive Director

**Enzo Bondioni**

## Public Health, Advocacy and Communications

**Charanjit (Chaz) Jagait**

Public Health, Advocacy  
and Communications Director

**Nina Noest-Fowler**

Public Health Project Manager  
(Until May 2025)

**Rachael England**

Public Health Project Manager  
(Until August 2025)

**Masaki Fujita**

Public Health Project Manager  
(From February 2025)

**Tolulope Osigbesan**

Advocacy and Policy Manager  
(Until November 2025)

**Alain Riad**

Website & Visual Brand Manager

**Francesca Nava**

Campaign and Social Media Manager

**Roshana Saleem**

Communications Manager

## Congress and Continuing Education

**Laetitia Reymond**

Congress and Continuing Education Director

**Florence Fässler**

Congress and Education Manager

**Axelle Rose**

Congress and Education Manager  
(Until August 2025)

**Clara Vial**

Congress and Education Manager  
(From August 2025)

## Finance and Administration

**Celine Ormancey**

Finance and Administration Director

**Cindy Romand**

Finance Manager

## Governance and Membership

**Djerdana (Gina) Ivosevic**

Governance and Membership Director

**Maria Kramarenko**

Governance and Membership Manager

## Partnerships and Corporate Relations

**David Cooke**

Associate Director, Partnerships and Corporate Relations

**Editorial review:**

Ms Roshana Saleem, Communications Manager

**FDI World Dental Federation**

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**[fdiworlddental.org](https://fdiworlddental.org)**

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 [FDI World Dental Federation](https://www.linkedin.com/company/FDI-World-Dental-Federation)

 [fdiworlddental](https://www.instagram.com/fdiworlddental)

## 7.4 Report From the Audit Committee



**FDI AUDIT COMMITTEE REPORT****June 2026**

The FDI Audit Committee, chaired by Dr Ashok Dhoble, Indian Dental Association, India, was in receipt of the 2025 Financial Statements as well as other documents, including the FDI Financial Statements 2025, the Report from Deloitte to the Council and Audit Committee, the FDI Finance Manual, Terms of Reference of the Audit Committee, and the Audit Committee Reports of the years 2023 and 2024.

Based on the information received from all the documents, the Audit Committee recommends to the GA to approve the report and grant discharge. We do not have any further recommendations for the same.

**Dr. Ashok Dhoble**  
Indian Dental Association  
India

**Dr. Birgit Vetter-Scheidl**  
Österreichische  
Zahnärztekammer  
Austria

**Dr. Akihiko Ito**  
Japan Dental Association  
Japan

## 7.5 Forecast 2026



**Forecast**

**May 2026**

## FDI World Dental Federation

## Statement of assets, liabilities and reserve funds as at 31 May 2026

|                                             | 2026<br>Jan-May   | 2025<br>Jan-May  | 2025<br>Full year |
|---------------------------------------------|-------------------|------------------|-------------------|
| <b>Assets</b>                               |                   |                  |                   |
| <b>Current assets</b>                       |                   |                  |                   |
| Cash current accounts                       | 1 927 931         | 2 588 710        | 1 286 426         |
| Cash general reserves                       | 2 464 265         | 2 444 589        | 2 280 096         |
| Cash renovation works                       | 118 822           | -                | 529 596           |
| Accounts receivable, net                    | 1 134 344         | 818 817          | 410 397           |
| <i>Accounts receivable</i>                  | <i>1 134 344</i>  | <i>820 689</i>   | <i>413 642</i>    |
| <i>Provision for bad and doubtful debts</i> | <i>-</i>          | <i>( 1 872)</i>  | <i>( 3 245)</i>   |
| VAT and taxes                               | 32 895            | 5 272            | 42 587            |
| Prepayment and accrued income               | -                 | -                | 703 592           |
| <b>Total current assets</b>                 | <b>5 678 256</b>  | <b>5 857 388</b> | <b>5 252 693</b>  |
| <b>Non-current assets</b>                   |                   |                  |                   |
| Tangible fixed assets, net                  | 691 500           | 52 620           | 389 433           |
| Financial fixed assets                      | 3 782 293         | 3 402 460        | 3 782 293         |
| Guarantee deposits                          | 71 401            | 69 378           | 71 401            |
| <b>Total non-current assets</b>             | <b>4 545 194</b>  | <b>3 524 458</b> | <b>4 243 127</b>  |
| <b>Total assets</b>                         | <b>10 223 451</b> | <b>9 381 846</b> | <b>9 495 820</b>  |
| <b>Liabilities</b>                          |                   |                  |                   |
| <b>Current liabilities</b>                  |                   |                  |                   |
| Accounts payable                            | 163 967           | 103 268          | 328 251           |
| Other payables                              | 106 683           | 68 604           | 110 249           |
| Accrued liabilities                         | 38 147            | 31 346           | 132 120           |
| Deferred income                             | 249 662           | 100 260          | 682 026           |
| Provisions                                  | 38 500            | 42 564           | 38 500            |
| <b>Total current liabilities</b>            | <b>596 959</b>    | <b>346 043</b>   | <b>1 291 146</b>  |
| <b>Non Current liabilities</b>              |                   |                  |                   |
| Deferred income                             | -                 | -                | 597 010           |
| <b>Total current liabilities</b>            | <b>-</b>          | <b>-</b>         | <b>597 010</b>    |
| <b>Total liabilities</b>                    | <b>596 959</b>    | <b>346 043</b>   | <b>1 888 156</b>  |
| <b>Reserve funds</b>                        |                   |                  |                   |
| Restricted funds                            | 720 653           | 609 031          | 720 653           |
| Restricted funds in custody                 | 226 639           | 221 468          | 226 639           |
| <b>Total Restricted Funds</b>               | <b>947 292</b>    | <b>830 499</b>   | <b>947 292</b>    |
| General reserves                            | 5 760 372         | 5 448 803        | 5 448 803         |
| Special reserve                             | 900 000           | 500 000          | 900 000           |
| Net income / (loss) for the year            | -                 | -                | 311 569           |
| <b>Total Unrestricted Funds</b>             | <b>6 660 372</b>  | <b>5 948 803</b> | <b>6 660 372</b>  |
| <b>Total Reserve funds</b>                  | <b>7 607 664</b>  | <b>6 779 302</b> | <b>7 607 664</b>  |
| <b>Total liabilities and reserve funds</b>  | <b>8 204 623</b>  | <b>7 125 345</b> | <b>9 495 820</b>  |

## FDI World Dental Federation

## Statement of receipts and operating expenditures as at 31 May 2026

(in CHF)

|                                                   | 2026<br>Jan-May  | 2025<br>Jan-May  | 2025<br>Full year |
|---------------------------------------------------|------------------|------------------|-------------------|
| <b>Income</b>                                     |                  |                  |                   |
| Membership                                        | 1 687 640        | 1 695 978        | 1 694 813         |
| Congress and CE                                   | 761 399          | 980 543          | 1 207 288         |
| <i>World Dental Congress</i>                      | 725 000          | 925 000          | 991 730           |
| <i>Regional congresses</i>                        | 7 000            | 55 543           | 62 193            |
| <i>Young dentist forum</i>                        | 25 000           | -                | 25 000            |
| <i>Master Continuing Education</i>                | 4 399            | -                | 128 365           |
| Corporate partnerships                            | 551 928          | 1 451 706        | 1 610 298         |
| <i>WOHD/V2030 (Unrestricted)</i>                  | 377 543          | 705 917          | 848 417           |
| <i>Public health projects (Restricted)</i>        | 174 385          | 745 789          | 761 881           |
| Other income (International Dental Journal - IDJ) | 297 154          | 84 104           | 596 992           |
| <b>Total income</b>                               | <b>3 298 120</b> | <b>4 212 331</b> | <b>5 109 391</b>  |
| <i>Office renovation allowance not included</i>   | 659 185          |                  |                   |
| <b>Operating expenditure</b>                      |                  |                  |                   |
| Personnel costs                                   | 919 148          | 990 311          | 2 372 070         |
| Office                                            | 143 124          | 161 726          | 369 128           |
| Travel & subsistence                              | 301 799          | 301 661          | 632 649           |
| Operational                                       | 500 731          | 279 926          | 622 130           |
| Congress specific/events                          | 60 210           | 79 600           | 151 768           |
| Communication/Web/Webinars                        | 138 364          | 123 284          | 232 903           |
| Legal                                             | 23 360           | 18 921           | 101 617           |
| <b>Total expenses</b>                             | <b>2 086 735</b> | <b>1 955 428</b> | <b>4 482 265</b>  |
| <b>Operational result</b>                         | <b>1 211 385</b> | <b>2 256 903</b> | <b>627 126</b>    |
| Financial income/expenses                         | 10 801           | 13 006           | 227 517           |
| Exchange rate gain or loss                        | ( 2 093)         | ( 8 687)         | ( 28 430)         |
| <b>Net Financial result</b>                       | <b>8 708</b>     | <b>4 319</b>     | <b>199 087</b>    |

FDI - May 2026

|                                                             | 2026             | 2026              | 2026                  | 2026             | 2026             | 2026                 |
|-------------------------------------------------------------|------------------|-------------------|-----------------------|------------------|------------------|----------------------|
|                                                             | Expenses Budget  | Expenses Forecast | Expenses Actual (May) | Revenue Budget   | Revenue Forecast | Revenue Actual (May) |
| CHF                                                         |                  |                   |                       |                  |                  |                      |
| <b>1. ADMINISTRATION</b>                                    |                  |                   |                       |                  |                  |                      |
| 1) Staff costs                                              | 270'000          | 270'000           | 62'398                | -                | -                | -                    |
| 2) Office costs                                             | 550'000          | 550'000           | 196'367               | -                | -                | 662'105              |
| 3) Other                                                    | -                | -                 | -                     | -                | -                | -                    |
| <b>total</b>                                                | <b>820'000</b>   | <b>820'000</b>    | <b>258'765</b>        | <b>-</b>         | <b>-</b>         | <b>662'105</b>       |
| <b>2. GOVERNANCE</b>                                        |                  |                   |                       |                  |                  |                      |
| 1) Membership                                               | 10'000           | 10'000            | 5'833                 | 1'707'000        | 1'707'000        | 1'687'640            |
| 2) Representation and President's travel                    | 85'000           | 85'000            | 43'207                | -                | -                | 4'936                |
| 3) Council and Committees Mid-year meeting                  | 170'000          | 170'000           | 120'237               | -                | -                | -                    |
| 4) Executive Committee                                      | 30'000           | 30'000            | 26'509                | -                | -                | -                    |
| 5) Finance/Audit Committee                                  | 10'000           | 10'000            | 7'230                 | -                | -                | -                    |
| 6) Governance general                                       | 30'000           | 30'000            | 5'369                 | -                | -                | 2'224                |
| 7) Contingency funds                                        | 8'000            | 8'000             | -                     | -                | -                | -                    |
| Staff costs                                                 | 405'000          | 405'000           | 168'750               | -                | -                | -                    |
| <b>total</b>                                                | <b>748'000</b>   | <b>748'000</b>    | <b>377'135</b>        | <b>1'707'000</b> | <b>1'707'000</b> | <b>1'694'800</b>     |
| <b>3. COMMITTEES</b>                                        |                  |                   |                       |                  |                  |                      |
| <b>Education committee</b>                                  |                  |                   |                       |                  |                  |                      |
| 1) Regional Continuing Education Programme                  | 20'000           | 20'000            | 3'318                 | -                | -                | -                    |
| 2) Education Committee Webinars                             | 6'000            | 6'000             | -                     | -                | -                | -                    |
| Staff costs                                                 | 90'000           | 90'000            | 37'500                | -                | -                | -                    |
| <b>total</b>                                                | <b>116'000</b>   | <b>116'000</b>    | <b>40'818</b>         | <b>-</b>         | <b>-</b>         | <b>-</b>             |
| <b>Public Health committee</b>                              |                  |                   |                       |                  |                  |                      |
| 1) World Dental Development Funds (WDDF)                    | 50'000           | 50'000            | 15'000                | 50'000           | 50'000           | -                    |
| 2) Policy statements                                        | 2'000            | 2'000             | 497                   | -                | -                | -                    |
| 3) Refugee Oral Health Prevention and Promotion             | 10'000           | 10'000            | -                     | -                | -                | -                    |
| 4) Oral Health and Tobacco Cessation                        | 10'500           | 10'500            | 3'417                 | 11'500           | 11'500           | 11'500               |
| 5) Educational Module for non-oral healthcare professionals | 64'000           | 69'000            | 10'620                | 68'000           | 75'000           | 75'000               |
| Staff costs                                                 | 36'000           | 36'000            | 15'000                | -                | -                | -                    |
| <b>total</b>                                                | <b>172'500</b>   | <b>177'500</b>    | <b>44'534</b>         | <b>129'500</b>   | <b>136'500</b>   | <b>86'500</b>        |
| <b>Science committee</b>                                    |                  |                   |                       |                  |                  |                      |
| 1) Policy Statements                                        | 3'000            | 3'000             | 662                   | -                | -                | -                    |
| 2) IADR General session and Exhibition attendance           | 3'200            | 3'200             | 2'562                 | -                | -                | -                    |
| 3) Science Committee Forum                                  | 4'000            | 6'000             | -                     | -                | -                | -                    |
| 4) AntiMicrobial Resistance (AMR)                           | 10'000           | 10'000            | 5'442                 | -                | -                | -                    |
| 5) White paper on the Osteoneocrosis of the Jaw             | 7'200            | 7'200             | -                     | -                | -                | -                    |
| 6) Promotion of IDJ paper on e-cigarettes and vaping        | 3'000            | 3'000             | 1'952                 | -                | -                | -                    |
| Staff costs                                                 | 25'000           | 25'000            | 10'417                | -                | -                | -                    |
| <b>total</b>                                                | <b>55'400</b>    | <b>57'400</b>     | <b>21'034</b>         | <b>-</b>         | <b>-</b>         | <b>-</b>             |
| <b>Dental Practice committee</b>                            |                  |                   |                       |                  |                  |                      |
| 1) Policy Statements                                        | 2'000            | 2'000             | 657                   | -                | -                | -                    |
| 2) Do It Yourself dentistry                                 | 1'000            | 1'000             | -                     | -                | -                | -                    |
| 3) Oral Health and Sexually Transmitted Diseases (STDs)     | 1'000            | 1'000             | -                     | -                | -                | -                    |
| 4) Illegal dental practice                                  | 1'000            | 1'000             | -                     | -                | -                | -                    |
| 5) Violence in the Dental Practice                          | 6'000            | 6'000             | -                     | -                | -                | -                    |
| Staff costs                                                 | 36'000           | 36'000            | 15'000                | -                | -                | -                    |
| <b>total</b>                                                | <b>47'000</b>    | <b>47'000</b>     | <b>15'657</b>         | <b>-</b>         | <b>-</b>         | <b>-</b>             |
| <b>Membership Liaison and Support committee</b>             |                  |                   |                       |                  |                  |                      |
| 1) Travel Grant - Congress                                  | 25'000           | 25'000            | 338                   | -                | -                | -                    |
| 2) Member supports Member                                   | -                | -                 | -                     | -                | -                | -                    |
| Staff costs                                                 | 40'000           | 40'000            | 16'667                | -                | -                | -                    |
| <b>total</b>                                                | <b>65'000</b>    | <b>65'000</b>     | <b>17'005</b>         | <b>-</b>         | <b>-</b>         | <b>-</b>             |
| <b>4. COMMUNICATIONS AND ADVOCACY</b>                       |                  |                   |                       |                  |                  |                      |
| <b>4.1) Communications</b>                                  |                  |                   |                       |                  |                  |                      |
| 4.1.1) International Dental Journal (IDJ)                   | 116'000          | 124'000           | 35'516                | 185'000          | 500'000          | 286'880              |
| 4.1.2) Public Relations and Multimedia                      | 65'000           | 65'000            | 6'473                 | -                | -                | -                    |
| 4.1.3) Website and Database                                 | 60'000           | 60'000            | 22'797                | -                | -                | -                    |
| <b>4.2) World Oral Health Day (WOHD)</b>                    | 430'500          | 430'500           | 267'137               | 550'000          | 335'000          | 167'543              |
| <b>4.3) Advocacy</b>                                        | 141'000          | 141'000           | 75'792                | 360'000          | 360'000          | 170'000              |
| Staff costs                                                 | 530'000          | 530'000           | 220'833               | -                | -                | -                    |
| <b>total</b>                                                | <b>1'342'500</b> | <b>1'350'500</b>  | <b>628'549</b>        | <b>1'095'000</b> | <b>1'195'000</b> | <b>624'423</b>       |
| <b>5. MULTI-COMMITTEES PROJECTS</b>                         |                  |                   |                       |                  |                  |                      |
| 1) Oral Health within General Health                        | 125'000          | 125'000           | 23'311                | 140'000          | 140'000          | -                    |
| 2) Oral Health Observatory (OHO)                            | 97'000           | 80'000            | 62'699                | 107'000          | 88'000           | 88'000               |
| 3) Oral Health for an Ageing Population (OHAP)              | 88'000           | 88'000            | 22'339                | 97'000           | 97'000           | -                    |
| 4) Electronic Health Records (EHRs)                         | 96'000           | -                 | -                     | 105'000          | -                | -                    |
| 5) Sustainability in Dentistry                              | 135'000          | 135'000           | 21'468                | 150'000          | 150'000          | -                    |
| 6) Ethics in dentistry                                      | 63'000           | -                 | -                     | 70'000           | -                | -                    |
| 7) Human PapillomaVirus (HPV) prevention project            | 40'000           | 40'000            | 8'840                 | 45'000           | 45'000           | -                    |
| 8) Mental health and well being                             | -                | -                 | 12'554                | -                | -                | -                    |
| 9) Web Application and Platform Maintenance                 | 16'000           | 16'000            | 5'242                 | -                | -                | -                    |
| 10) Recognition Programme                                   | -                | -                 | -                     | 400'000          | 400'000          | 40'000               |
| <b>total</b>                                                | <b>660'000</b>   | <b>484'000</b>    | <b>156'453</b>        | <b>1'114'000</b> | <b>920'000</b>   | <b>128'000</b>       |
| <b>6. CONGRESSES AND CONTINUING EDUCATION</b>               |                  |                   |                       |                  |                  |                      |
| 6.1) FDI Oral Health Campus                                 | 10'000           | 10'000            | 3'473                 | -                | -                | -                    |
| 6.2) Regional Congress                                      | 27'000           | 25'000            | 4'442                 | 37'000           | 33'000           | 7'000                |
| 6.3.1) World Dental Congress - Prague                       | 346'000          | 346'000           | 146'751               | 925'000          | 925'000          | 725'000              |
| 6.3.2) Other expenses - social events                       | 83'000           | 35'400            | 487                   | 70'000           | 20'000           | -                    |
| 6.4) Young Dentists Forum                                   | 25'000           | 25'000            | 4'856                 | 25'000           | 25'000           | 25'000               |
| 6.5) Master Continuing Education Programme                  | 30'000           | 37'000            | 54'314                | 30'000           | 37'000           | 4'399                |
| 6.6) CE accreditation task team                             | 15'000           | 15'000            | 2'083                 | -                | -                | -                    |
| 6.7) Speakers platform                                      | 12'000           | 12'000            | -                     | -                | -                | -                    |
| Staff costs                                                 | 338'000          | 338'000           | 140'833               | -                | -                | -                    |
| <b>total</b>                                                | <b>886'000</b>   | <b>843'400</b>    | <b>357'239</b>        | <b>1'087'000</b> | <b>1'040'000</b> | <b>761'399</b>       |
| <b>7. DEVELOPMENT</b>                                       |                  |                   |                       |                  |                  |                      |
| Travel and others                                           | 25'000           | 25'000            | 11'002                | -                | -                | -                    |
| Staff costs                                                 | 175'000          | 175'000           | 72'917                | -                | -                | -                    |
| <b>total</b>                                                | <b>200'000</b>   | <b>200'000</b>    | <b>83'919</b>         | <b>-</b>         | <b>-</b>         | <b>-</b>             |
| <b>Grand Total</b>                                          | <b>5'112'400</b> | <b>4'908'800</b>  | <b>2'001'107</b>      | <b>5'132'500</b> | <b>4'998'500</b> | <b>3'957'227</b>     |
| Operationnal surplus/ loss                                  |                  |                   |                       | 20'100           | 89'700           |                      |
| Financial result (bank charges excluded)                    |                  |                   | 2'093                 |                  |                  | 17'144               |



## 7.6 Five-year budget comparison

| 5 YEARS BUDGET COMPARISON 2027-2023                                                          |  | 2027         | 2026           | 2025         | 2024         | 2023         |  | 2027           | 2026             | 2025           | 2024           | 2023           |
|----------------------------------------------------------------------------------------------|--|--------------|----------------|--------------|--------------|--------------|--|----------------|------------------|----------------|----------------|----------------|
| Scenario 1 - No hybridization of the World Dental Parliament CHF                             |  | Budget Costs | Forecast Costs | Actual Costs | Actual Costs | Actual Costs |  | Budget Revenue | Forecast Revenue | Actual Revenue | Actual Revenue | Actual Revenue |
| ADMINISTRATION                                                                               |  |              |                |              |              |              |  |                |                  |                |                |                |
| Travel & Subsistence                                                                         |  | 85'000       | 85'000         | 79'816       | 91'284       | 66'531       |  | -              | -                | -              | -              | -              |
| Office costs                                                                                 |  | 465'000      | 465'000        | 432'754      | 445'297      | 430'450      |  | -              | -                | 45'401         | 8'938          | 6'768          |
| Staff costs                                                                                  |  | 270'000      | 270'000        | 263'270      | 236'320      | 242'796      |  | -              | -                | 10'000         | -              | -              |
| total                                                                                        |  | 820'000      | 820'000        | 775'840      | 772'901      | 739'777      |  | -              | -                | 55'401         | 8'938          | 6'768          |
|                                                                                              |  |              |                |              |              |              |  |                |                  |                |                |                |
| GOVERNANCE                                                                                   |  |              |                |              |              |              |  |                |                  |                |                |                |
| Membership fees                                                                              |  | -            | -              | -            | -            | -            |  | 1'500'000      | 1'707'000        | 1'694'813      | 1'694'366      | 1'778'244      |
| Membership promotion                                                                         |  | 10'000       | 10'000         | 4'485        | 2'041        | 4'532        |  | -              | -                | -              | -              | -              |
| Representation and President's Travel                                                        |  | 85'000       | 85'000         | 67'046       | 92'415       | 67'404       |  | -              | -                | 5'495          | 2'560          | 1'650          |
| Executive Committee                                                                          |  | 20'000       | 30'000         | 17'429       | 29'483       | 15'144       |  | -              | -                | -              | -              | -              |
| Governance general                                                                           |  | 30'000       | 30'000         | 29'341       | 33'094       | 23'219       |  | -              | -                | 7'148          | -              | 670            |
| Council and committees Mid-year meeting                                                      |  | 170'000      | 170'000        | 139'868      | 201'462      | 175'289      |  | -              | -                | 2'305          | 660            | -              |
| Finance/Audit Committee/Remuneration Committee                                               |  | 10'000       | 10'000         | 6'829        | 5'899        | 3'077        |  | -              | -                | -              | -              | -              |
| Contingency funds                                                                            |  | 30'000       | 8'000          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 405'000      | 405'000        | 405'000      | 405'000      | 395'000      |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 760'000      | 748'000        | 669'999      | 769'394      | 683'665      |  | 1'500'000      | 1'707'000        | 1'709'761      | 1'697'586      | 1'780'564      |
|                                                                                              |  |              |                |              |              |              |  |                |                  |                |                |                |
| COMMITTEES                                                                                   |  |              |                |              |              |              |  |                |                  |                |                |                |
| Education Committee                                                                          |  |              |                |              |              |              |  |                |                  |                |                |                |
| Education committee webinars                                                                 |  | 6'000        | 6'000          | 11'207       | 11'183       | 11'309       |  | -              | -                | -              | -              | -              |
| Regional Continuing Education programme                                                      |  | 20'000       | 20'000         | 25'879       | 32'898       | 29'622       |  | -              | -                | 5'829          | 12'967         | 9'624          |
| Evaluation of congress speakers                                                              |  | -            | -              | 1'783        | 3'424        | 1'967        |  | -              | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 90'000       | 90'000         | 90'000       | 90'000       | 42'000       |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 116'000      | 116'000        | 128'869      | 137'505      | 84'897       |  | -              | -                | 5'829          | 12'967         | 9'624          |
| Public Health Committee                                                                      |  |              |                |              |              |              |  |                |                  |                |                |                |
| World Dental Development Fund (WDDF)                                                         |  | 50'000       | 50'000         | 50'000       | -            | 50'000       |  | 50'000         | 50'000           | 50'000         | -              | 50'000         |
| Policy Statements                                                                            |  | 5'000        | 2'000          | 1'184        | 2'135        | 1'320        |  | -              | -                | -              | -              | -              |
| Refugee Oral Health Promotion and Care                                                       |  | 10'000       | 10'000         | 2'446        | 4'000        | 9'917        |  | -              | -                | -              | -              | -              |
| Tobacco cessation                                                                            |  | 10'500       | 10'500         | 10'499       | 6'845        | 7'571        |  | 11'500         | 11'500           | 11'500         | -              | -              |
| Staff costs                                                                                  |  | 36'000       | 36'000         | 20'000       | 36'000       | 35'000       |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 111'500      | 108'500        | 84'129       | 48'980       | 103'808      |  | 61'500         | 61'500           | 61'500         | -              | 50'000         |
| Science Committee                                                                            |  |              |                |              |              |              |  |                |                  |                |                |                |
| Policy statements                                                                            |  | 4'000        | 3'000          | 1'995        | 1'423        | 1'299        |  | -              | -                | -              | -              | -              |
| IADR General session and Exhibition attendance                                               |  | 4'500        | 3'200          | 3'971        | 1'551        | 3'653        |  | -              | -                | -              | -              | -              |
| AntiMicrobial Resistance (AMR)                                                               |  | 10'000       | 10'000         | 3'337        | 2'769        | 196          |  | -              | -                | -              | -              | -              |
| International Dental Journal articles to support Policy Statements                           |  | 9'000        | 3'000          | 4'870        | -            | -            |  | -              | -                | -              | -              | -              |
| Science committee forum                                                                      |  | 7'200        | 6'000          | 2'625        | 1'271        | 3'336        |  | -              | -                | -              | -              | -              |
| White paper on the OsteoNecrosis of the Jaw (ONJ)                                            |  | -            | 7'200          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 25'000       | 25'000         | 30'000       | 25'000       | 24'000       |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 59'700       | 57'400         | 46'798       | 32'014       | 32'484       |  | -              | -                | -              | -              | -              |
| Dental Practice Committee                                                                    |  |              |                |              |              |              |  |                |                  |                |                |                |
| Policy statements                                                                            |  | 3'000        | 2'000          | 1'668        | 2'198        | 2'626        |  | -              | -                | -              | -              | -              |
| Quality in dentistry*                                                                        |  | 4'000        | -              | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Access to Care                                                                               |  | -            | -              | 2'550        | -            | -            |  | -              | -                | -              | -              | -              |
| Developing and Delivering Dentistry (DDD)                                                    |  | -            | -              | -            | -            | 5'013        |  | -              | -                | -              | -              | -              |
| Do-It-Yourself (DIY) dentistry                                                               |  | -            | 1'000          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Oral Health and Sexually Transmitted Diseases (STDs)                                         |  | -            | 1'000          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Illegal dental practice                                                                      |  | -            | 1'000          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Violence in the Dental Practice                                                              |  | 5'000        | 6'000          | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 36'000       | 36'000         | 20'000       | 36'000       | 35'000       |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 48'000       | 47'000         | 24'218       | 38'198       | 42'639       |  | -              | -                | -              | -              | -              |
| Membership Liaison and Support Committee                                                     |  |              |                |              |              |              |  |                |                  |                |                |                |
| Travel grant congress                                                                        |  | 25'000       | 25'000         | 23'594       | 24'591       | 22'659       |  | -              | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 40'000       | 40'000         | 40'000       | 40'000       | 39'000       |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 65'000       | 65'000         | 63'594       | 64'591       | 61'659       |  | -              | -                | -              | -              | -              |
| COMMUNICATIONS AND ADVOCACY                                                                  |  |              |                |              |              |              |  |                |                  |                |                |                |
| Communications                                                                               |  |              |                |              |              |              |  |                |                  |                |                |                |
| International Dental Journal (IDJ)                                                           |  | 134'000      | 124'000        | 102'045      | 106'930      | 104'338      |  | 535'000        | 500'000          | 526'520        | 173'454        | 138'577        |
| Public Relations and Multimedia                                                              |  | 69'000       | 65'000         | 48'632       | 60'829       | 43'351       |  | -              | -                | -              | -              | -              |
| Website and database                                                                         |  | 69'000       | 60'000         | 48'229       | 41'208       | 68'962       |  | -              | -                | -              | -              | -              |
| World Oral Health Day (WOHD)                                                                 |  | 430'500      | 430'500        | 308'790      | 424'735      | 391'134      |  | 550'000        | 335'000          | 494'417        | 474'459        | 575'052        |
| Advocacy and Vision 2030                                                                     |  | 176'000      | 141'000        | 81'607       | 98'805       | 151'459      |  | 360'000        | 360'000          | 320'000        | 283'451        | 285'412        |
| Staff costs                                                                                  |  | 530'000      | 530'000        | 530'000      | 550'000      | 515'000      |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 1'408'500    | 1'350'500      | 1'119'303    | 1'282'507    | 1'274'244    |  | 1'445'000      | 1'195'000        | 1'340'937      | 931'364        | 999'041        |
| MULTI-COMMITTEES PROJECTS                                                                    |  |              |                |              |              |              |  |                |                  |                |                |                |
| Talk to a dentist                                                                            |  | -            | -              | -            | -            | 423'264      |  | -              | -                | -              | -              | 440'218        |
| Oral Health within General Health                                                            |  | -            | 125'000        | 93'309       | 95'494       | 121'524      |  | -              | 140'000          | 109'809        | 109'494        | 143'524        |
| Strengthening Oral Health Education, Awareness and Leadership for Health Systems Integration |  | 131'000      | -              | -            | -            | -            |  | 141'000        | -                | -              | -              | -              |
| Oral Health Observatory (OHO)                                                                |  | -            | -              | -            | 40'810       | 50'530       |  | -              | -                | -              | 44'810         | 55'530         |
| Partially Dentate Patients (PDP)                                                             |  | 114'000      | 80'000         | 82'494       | 62'050       | 75'514       |  | 125'000        | 88'000           | 92'494         | 71'050         | 82'295         |
| Health and Safety in the Dental Workplace (HSDW)                                             |  | -            | -              | -            | -            | 41'392       |  | -              | -                | -              | -              | 41'392         |
| Oral Health in Comprehensive Cleft Care                                                      |  | -            | -              | -            | 60'872       | 25'563       |  | -              | -                | -              | 64'872         | 33'563         |
| Oral Health for Ageing Population (OHAP)                                                     |  | -            | -              | -            | -            | 64'032       |  | -              | -                | -              | -              | 65'721         |
| Educational module for other healthcare professionals                                        |  | 86'000       | 88'000         | 51'314       | 88'267       | 80'244       |  | 94'000         | 97'000           | 59'314         | 96'267         | 89'144         |
| Electronic Health Records (EHRs)                                                             |  | 71'000       | 69'000         | 60'649       | 24'230       | 1'843        |  | 75'000         | 75'000           | 66'649         | 28'230         | -              |
| Sports dentistry                                                                             |  | -            | -              | 9'997        | 78'475       | 41'890       |  | -              | -                | 10'085         | 87'475         | 48'890         |
| Oral Health and Cancer                                                                       |  | -            | -              | -            | -            | 2'000        |  | -              | -                | -              | -              | 2'000          |
| Sustainability in dentistry                                                                  |  | -            | -              | -            | -            | 21'811       |  | -              | -                | -              | -              | 21'811         |
| Mental Health and Wellbeing                                                                  |  | -            | 135'000        | 117'444      | 182'306      | 126'060      |  | -              | 150'000          | 130'444        | 197'306        | 145'060        |
| Toothbrushing Methods                                                                        |  | -            | -              | 125'052      | 41'053       | -            |  | -              | -                | 135'052        | 49'053         | -              |
| Digital Cleft care                                                                           |  | -            | -              | -            | -            | 84'061       |  | -              | -                | -              | -              | 94'965         |
| Mouthwash in oral care                                                                       |  | -            | -              | 1'743        | 68'459       | 42'518       |  | -              | -                | 14'795         | 76'459         | 42'518         |
| Smile around the world (SAW)                                                                 |  | -            | -              | -            | -            | 76'107       |  | -              | -                | -              | -              | 79'450         |
| Human Papillomavirus (HPV)                                                                   |  | -            | -              | 12'000       | 12'000       | -            |  | -              | -                | 13'000         | 13'000         | -              |
| Recognition programme                                                                        |  | -            | 40'000         | 10'517       | -            | -            |  | -              | 45'000           | 11'517         | -              | -              |
| Web Application and Platform Maintenance                                                     |  | -            | -              | -            | -            | -            |  | 400'000        | 400'000          | 34'000         | 132'204        | 555'453        |
| total                                                                                        |  | 16'000       | 16'000         | 15'564       | 16'014       | 3'072        |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 418'000      | 553'000        | 580'083      | 770'031      | 1'281'425    |  | 835'000        | 995'000          | 677'159        | 970'221        | 1'941'532      |
| CONGRESSES AND CONTINUING EDUCATION (CE)                                                     |  |              |                |              |              |              |  |                |                  |                |                |                |
| Oral Health Innovation & Breakthrough Pilot Project*                                         |  | 12'000       | -              | -            | -            | -            |  | -              | -                | -              | -              | -              |
| FDI Oral Health Campus                                                                       |  | 10'000       | 10'000         | 8'526        | 8'659        | 8'814        |  | -              | -                | -              | -              | -              |
| Young Dentists Forum                                                                         |  | 25'000       | 25'000         | 24'131       | 19'154       | 11'886       |  | 25'000         | 25'000           | 24'131         | 15'654         | 8'981          |
| Regional congresses                                                                          |  | 27'000       | 25'000         | 38'164       | -            | -            |  | 37'000         | 33'000           | 62'193         | -              | -              |
| FDI World Dental Congress (WDC)                                                              |  |              |                |              |              |              |  | 925'000        | 925'000          | 976'350        | 1'032'407      | -              |
| Organisation/Travel/Promotion                                                                |  | 361'000      | 346'000        | 369'235      | 388'860      | 442'832      |  | -              | -                | -              | -              | 996'969        |
| Other congress expenses                                                                      |  | 83'000       | 35'400         | 21'393       | 12'577       | 32'662       |  | 70'000         | 20'000           | 15'504         | 10'410         | 21'340         |
| World Dental Parliament Hybridization (Scenario 1 - No Hybridization)                        |  | -            | -              | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Master Continuing Education Programme                                                        |  | 75'000       | 37'000         | 65'984       | 19'244       | -            |  | 75'000         | 37'000           | 65'984         | 24'244         | -              |
| Speakers Platform                                                                            |  | 12'000       | 12'000         | -            | 9'537        | -            |  | -              | -                | -              | -              | -              |
| CE accreditation task team                                                                   |  | 15'000       | 15'000         | -            | -            | -            |  | -              | -                | -              | -              | -              |
| Young Dentists Community*                                                                    |  | 50'000       | -              | -            | -            | -            |  | 50'000         | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 338'000      | 338'000        | 294'000      | 338'000      | 275'000      |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 1'008'000    | 843'400        | 821'433      | 796'031      | 771'194      |  | 1'182'000      | 1'040'000        | 1'144'162      | 1'082'714      | 1'027'290      |
| DEVELOPMENT                                                                                  |  |              |                |              |              |              |  |                |                  |                |                |                |
| Travel and others                                                                            |  | 50'000       | 25'000         | 14'324       | 17'737       | 16'868       |  | 250'000        | -                | -              | -              | -              |
| Staff costs                                                                                  |  | 365'000      | 175'000        | 175'000      | 175'000      | 170'000      |  | -              | -                | -              | -              | -              |
| total                                                                                        |  | 415'000      | 200'000        | 189'324      | 192'737      | 186'868      |  | 250'000        |                  |                |                |                |
| Grand total                                                                                  |  | 5'229'700    | 4'908'800      | 4'503'592    | 4'904'890    | 5'262'660    |  | 5'273'500      | 4'998'500        | 4'994'747      | 4'703'790      | 5'814'818      |
| Surplus/loss                                                                                 |  |              |                |              |              |              |  | 43'800         | 89'700           | 491'156        | -888'745       | 115'478        |
| Special reserves                                                                             |  |              |                | 400'000      |              |              |  |                |                  |                | 225'596        |                |
| Other income/costs (Financial result)                                                        |  |              |                | 28'430       | -22'616      | -95'383      |  |                |                  | 248'843        | 218'081        |                |
| Result of the year                                                                           |  |              |                |              |              |              |  |                |                  | 311'569        | 265'194        | 456'777        |

## 7.7 Budget 2027 including budget forms

## BUDGET 2027 – Hybridization of the World Dental Parliament

This year we are presenting three budget scenarios. It is necessary to consider whether the General Assembly would like to implement a pilot for the hybridization of the World Dental Parliament. If we proceed with a pilot, two scenarios have been prepared: one with a 5-days programme and one with a 6-days programme. These two scenarios will show a higher membership budget line to absorb the cost of the pilot, while continuing projecting the same modest profit to allow risk mitigation and unforeseen expenses. Please refer to the budget forms for any further details.

### Budget Scenario 1: Budget without a pilot

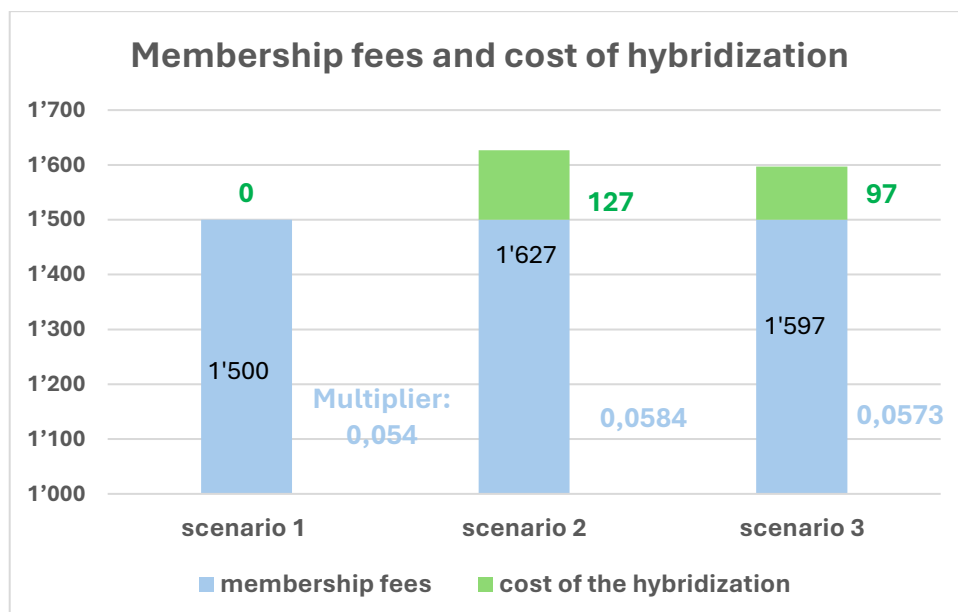
- We have reduced the membership fees to 1,5 million CHF, a 19.4% decrease compared to 2025, with a multiplier at 0.054
- The membership fee reduction is driven by two factors: higher income secured with the International Dental Journal (IDJ) and a substantial reduction in projects-related expenses.
- The budget forecasts a modest profit of 43'800 CHF

### Budget Scenario 2: 6-day pilot

- The membership fee budget is increased to 1,627 million CHF, a 12,8% decrease compared to 2025 and a multiplier at 0.0584
- The estimated cost of the hybrid pilot (127'000 CHF) is added to the membership fee budget line
- Since voting was not planned for this pilot, the cost of voting will be built in if the pilot proceeds to Phase II
- The budget forecasts a modest profit of 43'800 CHF

### Budget Scenario 3: 5-day pilot

- The membership fee budget is increased to 1,597 million CHF, a 14.5% decrease compared to 2025 and a multiplier at 0.0573
- The cost of the hybrid pilot (97'000 CHF) is added to the membership fee budget line
- Since voting was not planned for this pilot, the cost of voting will be built in if the pilot proceeds to Phase II
- The budget forecasts a modest profit of 43'800 CHF



## FDI - 2027 BUDGET

Scenario 1 - No World Dental Parliament Hybridization

\*Membership fees based on a decrease of -19% of the multiplier at 0,054

|                                                                   | 2027 Budget<br>Expenses | 2027 Budget<br>Revenue | 2027 Budget<br>Net |
|-------------------------------------------------------------------|-------------------------|------------------------|--------------------|
| CHF                                                               |                         |                        |                    |
| <b>1. ADMINISTRATION</b>                                          |                         |                        |                    |
| Office costs                                                      | 550'000                 | -                      | (550'000)          |
| Staff costs                                                       | 270'000                 | -                      | (270'000)          |
| <b>Total Administration</b>                                       | <b>820'000</b>          | <b>-</b>               | <b>(820'000)</b>   |
| <b>2. GOVERNANCE</b>                                              |                         |                        |                    |
| Membership fees                                                   | -                       | 1'500'000              | 1'500'000          |
| Membership promotion                                              | 10'000                  | -                      | (10'000)           |
| Representation and President's travel                             | 85'000                  | -                      | (85'000)           |
| Council and Committees Mid-year meeting                           | 170'000                 | -                      | (170'000)          |
| Executive Committee                                               | 20'000                  | -                      | (20'000)           |
| Finance/Audit Committee                                           | 10'000                  | -                      | (10'000)           |
| Governance general                                                | 30'000                  | -                      | (30'000)           |
| Contingency funds                                                 | 30'000                  | -                      | (30'000)           |
| Staff costs                                                       | 405'000                 | -                      | (405'000)          |
| <b>Total Governance</b>                                           | <b>760'000</b>          | <b>1'500'000</b>       | <b>740'000</b>     |
| <b>3. COMMITTEES</b>                                              |                         |                        |                    |
| <b>Education Committee</b>                                        |                         |                        |                    |
| Regional Continuing Education programme                           | 20'000                  | -                      | (20'000)           |
| Education Committee Webinars                                      | 6'000                   | -                      | (6'000)            |
| Staff costs                                                       | 90'000                  | -                      | (90'000)           |
| <b>total</b>                                                      | <b>116'000</b>          | <b>-</b>               | <b>(116'000)</b>   |
| <b>Public Health Committee</b>                                    |                         |                        |                    |
| World Dental Development Fund (WDDF)                              | 50'000                  | 50'000                 | -                  |
| Policy statements                                                 | 5'000                   | -                      | (5'000)            |
| Refugee Oral Health Promotion and Care                            | 10'000                  | -                      | (10'000)           |
| Tobacco Cessation                                                 | 10'500                  | 11'500                 | 1'000              |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| <b>total</b>                                                      | <b>111'500</b>          | <b>61'500</b>          | <b>(50'000)</b>    |
| <b>Science Committee</b>                                          |                         |                        |                    |
| Policy statements                                                 | 4'000                   | -                      | (4'000)            |
| IADR General session and Exhibition attendance                    | 4'500                   | -                      | (4'500)            |
| Science Committee Forum World Dental Congress                     | 7'200                   | -                      | (7'200)            |
| Preventing AntiMicrobial Resistance (AMR) and infections          | 10'000                  | -                      | (10'000)           |
| IDJ articles to support Policy statements                         | 9'000                   | -                      | (9'000)            |
| Staff costs                                                       | 25'000                  | -                      | (25'000)           |
| <b>total</b>                                                      | <b>59'700</b>           | <b>-</b>               | <b>(59'700)</b>    |
| <b>Dental Practice Committee</b>                                  |                         |                        |                    |
| Policy statements                                                 | 3'000                   | -                      | (3'000)            |
| Quality in Dentistry*                                             | 4'000                   | -                      | (4'000)            |
| Violence in the Dental Practice                                   | 5'000                   | -                      | (5'000)            |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| <b>total</b>                                                      | <b>48'000</b>           | <b>-</b>               | <b>(48'000)</b>    |
| <b>Membership Liaison and Support Committee</b>                   |                         |                        |                    |
| Travel Grant - World Dental Congress                              | 25'000                  | -                      | (25'000)           |
| Member Supports Member                                            | -                       | -                      | -                  |
| Staff costs                                                       | 40'000                  | -                      | (40'000)           |
| <b>total</b>                                                      | <b>65'000</b>           | <b>-</b>               | <b>(65'000)</b>    |
| <b>Total Committees</b>                                           | <b>400'200</b>          | <b>61'500</b>          | <b>(338'700)</b>   |
| <b>4. COMMUNICATIONS AND ADVOCACY</b>                             |                         |                        |                    |
| Communications                                                    |                         |                        |                    |
| International Dental Journal (IDJ)                                | 134'000                 | 535'000                | 401'000            |
| Public Relations and Multimedia                                   | 69'000                  | -                      | (69'000)           |
| Website and Database                                              | 69'000                  | -                      | (69'000)           |
| World Oral Health Day (WOHD)                                      | 430'500                 | 550'000                | 119'500            |
| Advocacy                                                          | 176'000                 | 360'000                | 184'000            |
| Staff costs                                                       | 530'000                 | -                      | (530'000)          |
| <b>Total Communications and Advocacy</b>                          | <b>1'408'500</b>        | <b>1'445'000</b>       | <b>36'500</b>      |
| <b>5. MULTI-COMMITTEES PROJECTS</b>                               |                         |                        |                    |
| Strengthening Oral Health Education, Awareness and Leadership for |                         |                        |                    |
| Health Systems Integration                                        | 131'000                 | 141'000                | 10'000             |
| Oral Health Observatory (OHO)                                     | 114'000                 | 125'000                | 11'000             |
| Oral Health for an Ageing Population (OHAP)                       | 86'000                  | 94'000                 | 8'000              |
| Educational module for other healthcare professionals             | 71'000                  | 75'000                 | 4'000              |
| Web Application and Platform Maintenance                          | 16'000                  | -                      | (16'000)           |
| Recognition programme                                             | -                       | 400'000                | 400'000            |
| <b>Total Multi-Committees Projects</b>                            | <b>418'000</b>          | <b>835'000</b>         | <b>29'000</b>      |
| <b>6. CONGRESSES AND CONTINUING EDUCATION PROGRAMME</b>           |                         |                        |                    |
| Oral Health Innovation & Breakthrough Pilot Project*              | 12'000                  | -                      | (12'000)           |
| FDI Oral Health Campus                                            | 10'000                  | -                      | (10'000)           |
| Young Dentists Forum                                              | 25'000                  | 25'000                 | -                  |
| Regional Congress                                                 | 27'000                  | 37'000                 | 10'000             |
| World Dental Congress Mumbai                                      | 361'000                 | 925'000                | 564'000            |
| Social events - other expenses                                    | 83'000                  | 70'000                 | (13'000)           |
| World Dental Parliament Hybridization                             | -                       | -                      | -                  |
| Master Continuing Education (CE) programme                        | 75'000                  | 75'000                 | -                  |
| CE accreditation task team                                        | 15'000                  | -                      | (15'000)           |
| Speakers Platform                                                 | 12'000                  | -                      | (12'000)           |
| Young Dentists Community                                          | 50'000                  | 50'000                 | -                  |
| Staff costs                                                       | 338'000                 | -                      | (338'000)          |
| <b>Total Congresses and Continuing Education Programme</b>        | <b>1'008'000</b>        | <b>1'182'000</b>       | <b>186'000</b>     |
| <b>7. DEVELOPMENT</b>                                             |                         |                        |                    |
| Travel and others                                                 | 50'000                  | -                      | (50'000)           |
| Staff costs                                                       | 365'000                 | 250'000                | (115'000)          |
| <b>Total Development</b>                                          | <b>415'000</b>          | <b>250'000</b>         | <b>(165'000)</b>   |
| <b>Grand total</b>                                                | <b>5'229'700</b>        | <b>5'273'500</b>       | <b>43'800</b>      |
| Surplus                                                           |                         | 43'800                 |                    |

\* New projects

## FDI - 2027 BUDGET

Scenario 2 - with the World Dental Parliament Hybridrization - 6 days

\*Membership fees based on a decrease of -13% of the multiplier at 0,0584

|                                                                   | 2027 Budget<br>Expenses | 2027 Budget<br>Revenue | 2027 Budget<br>Net |
|-------------------------------------------------------------------|-------------------------|------------------------|--------------------|
| CHF                                                               |                         |                        |                    |
| <b>1. ADMINISTRATION</b>                                          |                         |                        |                    |
| Office costs                                                      | 550'000                 | -                      | (550'000)          |
| Staff costs                                                       | 270'000                 | -                      | (270'000)          |
| <b>Total Administration</b>                                       | <b>820'000</b>          | -                      | <b>(820'000)</b>   |
| <b>2. GOVERNANCE</b>                                              |                         |                        |                    |
| Membership fees                                                   | -                       | 1'627'000              | 1'627'000          |
| Membership promotion                                              | 10'000                  | -                      | (10'000)           |
| Representation and President's travel                             | 85'000                  | -                      | (85'000)           |
| Council and Committees Mid-year meeting                           | 170'000                 | -                      | (170'000)          |
| Executive Committee                                               | 20'000                  | -                      | (20'000)           |
| Finance/Audit Committee                                           | 10'000                  | -                      | (10'000)           |
| Governance general                                                | 30'000                  | -                      | (30'000)           |
| Contingency funds                                                 | 30'000                  | -                      | (30'000)           |
| Staff costs                                                       | 405'000                 | -                      | (405'000)          |
| <b>Total Governance</b>                                           | <b>760'000</b>          | <b>1'627'000</b>       | <b>867'000</b>     |
| <b>3. COMMITTEES</b>                                              |                         |                        |                    |
| <b>Education Committee</b>                                        |                         |                        |                    |
| Regional Continuing Education programme                           | 20'000                  | -                      | (20'000)           |
| Education Committee Webinars                                      | 6'000                   | -                      | (6'000)            |
| Staff costs                                                       | 90'000                  | -                      | (90'000)           |
| <b>total</b>                                                      | <b>116'000</b>          | -                      | <b>(116'000)</b>   |
| <b>Public Health Committee</b>                                    |                         |                        |                    |
| World Dental Development Fund (WDDF)                              | 50'000                  | 50'000                 | -                  |
| Policy statements                                                 | 5'000                   | -                      | (5'000)            |
| Refugee Oral Health Promotion and Care                            | 10'000                  | -                      | (10'000)           |
| Tobacco Cessation                                                 | 10'500                  | 11'500                 | 1'000              |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| <b>total</b>                                                      | <b>111'500</b>          | <b>61'500</b>          | <b>(50'000)</b>    |
| <b>Science Committee</b>                                          |                         |                        |                    |
| Policy statements                                                 | 4'000                   | -                      | (4'000)            |
| IADR General session and Exhibition attendance                    | 4'500                   | -                      | (4'500)            |
| Science Committee Forum World Dental Congress                     | 7'200                   | -                      | (7'200)            |
| Preventing AntiMicrobial Resistance (AMR) and infections          | 10'000                  | -                      | (10'000)           |
| IDJ articles to support Policy statements                         | 9'000                   | -                      | (9'000)            |
| Staff costs                                                       | 25'000                  | -                      | (25'000)           |
| <b>total</b>                                                      | <b>59'700</b>           | -                      | <b>(59'700)</b>    |
| <b>Dental Practice Committee</b>                                  |                         |                        |                    |
| Policy statements                                                 | 3'000                   | -                      | (3'000)            |
| Quality in Dentistry*                                             | 4'000                   | -                      | (4'000)            |
| Violence in the Dental Practice                                   | 5'000                   | -                      | (5'000)            |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| <b>total</b>                                                      | <b>48'000</b>           | -                      | <b>(48'000)</b>    |
| <b>Membership Liaison and Support Committee</b>                   |                         |                        |                    |
| Travel Grant - World Dental Congress                              | 25'000                  | -                      | (25'000)           |
| Member Supports Member                                            | -                       | -                      | -                  |
| Staff costs                                                       | 40'000                  | -                      | (40'000)           |
| <b>total</b>                                                      | <b>65'000</b>           | -                      | <b>(65'000)</b>    |
| <b>Total Committees</b>                                           | <b>400'200</b>          | <b>61'500</b>          | <b>(338'700)</b>   |
| <b>4. COMMUNICATIONS AND ADVOCACY</b>                             |                         |                        |                    |
| Communications                                                    |                         |                        |                    |
| International Dental Journal (IDJ)                                | 134'000                 | 535'000                | 401'000            |
| Public Relations and Multimedia                                   | 69'000                  | -                      | (69'000)           |
| Website and Database                                              | 69'000                  | -                      | (69'000)           |
| World Oral Health Day (WOHD)                                      | 430'500                 | 550'000                | 119'500            |
| Advocacy                                                          | 176'000                 | 360'000                | 184'000            |
| Staff costs                                                       | 530'000                 | -                      | (530'000)          |
| <b>Total Communications and Advocacy</b>                          | <b>1'408'500</b>        | <b>1'445'000</b>       | <b>36'500</b>      |
| <b>5. MULTI-COMMITTEES PROJECTS</b>                               |                         |                        |                    |
| Strengthening Oral Health Education, Awareness and Leadership for |                         |                        |                    |
| Health Systems Integration                                        | 131'000                 | 141'000                | 10'000             |
| Oral Health Observatory (OHO)                                     | 114'000                 | 125'000                | 11'000             |
| Oral Health for an Ageing Population (OHAP)                       | 86'000                  | 94'000                 | 8'000              |
| Educational module for other healthcare professionals             | 71'000                  | 75'000                 | 4'000              |
| Web Application and Platform Maintenance                          | 16'000                  | -                      | (16'000)           |
| Recognition programme                                             | -                       | 400'000                | 400'000            |
| <b>Total Multi-Committees Projects</b>                            | <b>418'000</b>          | <b>835'000</b>         | <b>29'000</b>      |
| <b>6. CONGRESSES AND CONTINUING EDUCATION PROGRAMME</b>           |                         |                        |                    |
| Oral Health Innovation & Breakthrough Pilot Project*              | 12'000                  | -                      | (12'000)           |
| FDI Oral Health Campus                                            | 10'000                  | -                      | (10'000)           |
| Young Dentists Forum                                              | 25'000                  | 25'000                 | -                  |
| Regional Congress                                                 | 27'000                  | 37'000                 | 10'000             |
| World Dental Congress Mumbai                                      | 361'000                 | 925'000                | 564'000            |
| Social events - other expenses                                    | 83'000                  | 70'000                 | (13'000)           |
| World Dental Parliament Hybridrization - 6 days                   | 127'000                 | -                      | (127'000)          |
| Master Continuing Education (CE) programme                        | 75'000                  | 75'000                 | -                  |
| CE accreditation task team                                        | 15'000                  | -                      | (15'000)           |
| Speakers Platform                                                 | 12'000                  | -                      | (12'000)           |
| Young Dentists Community                                          | 50'000                  | 50'000                 | -                  |
| Staff costs                                                       | 338'000                 | -                      | (338'000)          |
| <b>Total Congresses and Continuing Education Programme</b>        | <b>1'135'000</b>        | <b>1'182'000</b>       | <b>59'000</b>      |
| <b>7. DEVELOPMENT</b>                                             |                         |                        |                    |
| Travel and others                                                 | 50'000                  | -                      | (50'000)           |
| Staff costs                                                       | 365'000                 | 250'000                | (115'000)          |
| <b>Total Development</b>                                          | <b>415'000</b>          | <b>250'000</b>         | <b>(165'000)</b>   |
| <b>Grand total</b>                                                | <b>5'356'700</b>        | <b>5'400'500</b>       |                    |
| Surplus                                                           |                         | 43'800                 |                    |

\* New projects



FDI - 2027 BUDGET

Scenario 3 - with the World Dental Parliament Hybridrization - 5 days

\*Membership fees based on a decrease of -15% of the multiplier at 0,0573

|                                                                   | 2027 Budget<br>Expenses | 2027 Budget<br>Revenue | 2027 Budget<br>Net |
|-------------------------------------------------------------------|-------------------------|------------------------|--------------------|
| CHF                                                               |                         |                        |                    |
| 1. ADMINISTRATION                                                 |                         |                        |                    |
| Office costs                                                      | 550'000                 | -                      | (550'000)          |
| Staff costs                                                       | 270'000                 | -                      | (270'000)          |
| Total Administration                                              | 820'000                 | -                      | (820'000)          |
| 2. GOVERNANCE                                                     |                         |                        |                    |
| Membership fees                                                   | -                       | 1'597'000              | 1'597'000          |
| Membership promotion                                              | 10'000                  | -                      | (10'000)           |
| Representation and President's travel                             | 85'000                  | -                      | (85'000)           |
| Council and Committees Mid-year meeting                           | 170'000                 | -                      | (170'000)          |
| Executive Committee                                               | 20'000                  | -                      | (20'000)           |
| Finance/Audit Committee                                           | 10'000                  | -                      | (10'000)           |
| Governance general                                                | 30'000                  | -                      | (30'000)           |
| Contingency funds                                                 | 30'000                  | -                      | (30'000)           |
| Staff costs                                                       | 405'000                 | -                      | (405'000)          |
| Total Governance                                                  | 760'000                 | 1'597'000              | 837'000            |
| 3. COMMITTEES                                                     |                         |                        |                    |
| Education Committee                                               |                         |                        |                    |
| Regional Continuing Education programme                           | 20'000                  | -                      | (20'000)           |
| Education Committee Webinars                                      | 6'000                   | -                      | (6'000)            |
| Staff costs                                                       | 90'000                  | -                      | (90'000)           |
| total                                                             | 116'000                 | -                      | (116'000)          |
| Public Health Committee                                           |                         |                        |                    |
| World Dental Development Fund (WDDF)                              | 50'000                  | 50'000                 | -                  |
| Policy statements                                                 | 5'000                   | -                      | (5'000)            |
| Refugee Oral Health Promotion and Care                            | 10'000                  | -                      | (10'000)           |
| Tobacco Cessation                                                 | 10'500                  | 11'500                 | 1'000              |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| total                                                             | 111'500                 | 61'500                 | (50'000)           |
| Science Committee                                                 |                         |                        |                    |
| Policy statements                                                 | 4'000                   | -                      | (4'000)            |
| IADR General session and Exhibition attendance                    | 4'500                   | -                      | (4'500)            |
| Science Committee Forum World Dental Congress                     | 7'200                   | -                      | (7'200)            |
| Preventing AntiMicrobial Resistance (AMR) and infections          | 10'000                  | -                      | (10'000)           |
| IDJ articles to support Policy statements                         | 9'000                   | -                      | (9'000)            |
| Staff costs                                                       | 25'000                  | -                      | (25'000)           |
| total                                                             | 59'700                  | -                      | (59'700)           |
| Dental Practice Committee                                         |                         |                        |                    |
| Policy statements                                                 | 3'000                   | -                      | (3'000)            |
| Quality in Dentistry*                                             | 4'000                   | -                      | (4'000)            |
| Violence in the Dental Practice                                   | 5'000                   | -                      | (5'000)            |
| Staff costs                                                       | 36'000                  | -                      | (36'000)           |
| total                                                             | 48'000                  | -                      | (48'000)           |
| Membership Liaison and Support Committee                          |                         |                        |                    |
| Travel Grant - World Dental Congress                              | 25'000                  | -                      | (25'000)           |
| Member Supports Member                                            | -                       | -                      | -                  |
| Staff costs                                                       | 40'000                  | -                      | (40'000)           |
| total                                                             | 65'000                  | -                      | (65'000)           |
| Total Committees                                                  | 400'200                 | 61'500                 | (338'700)          |
| 4. COMMUNICATIONS AND ADVOCACY                                    |                         |                        |                    |
| Communications                                                    |                         |                        |                    |
| International Dental Journal (IDJ)                                | 134'000                 | 535'000                | 401'000            |
| Public Relations and Multimedia                                   | 69'000                  | -                      | (69'000)           |
| Website and Database                                              | 69'000                  | -                      | (69'000)           |
| World Oral Health Day (WOHD)                                      | 430'500                 | 550'000                | 119'500            |
| Advocacy                                                          | 176'000                 | 360'000                | 184'000            |
| Staff costs                                                       | 530'000                 | -                      | (530'000)          |
| Total Communications and Advocacy                                 | 1'408'500               | 1'445'000              | 36'500             |
| 5. MULTI-COMMITTEES PROJECTS                                      |                         |                        |                    |
| Strengthening Oral Health Education, Awareness and Leadership for |                         |                        |                    |
| Health Systems Integration                                        | 131'000                 | 141'000                | 10'000             |
| Oral Health Observatory (OHO)                                     | 114'000                 | 125'000                | 11'000             |
| Oral Health for an Ageing Population (OHAP)                       | 86'000                  | 94'000                 | 8'000              |
| Educational module for other healthcare professionals             | 71'000                  | 75'000                 | 4'000              |
| Web Application and Platform Maintenance                          | 16'000                  | -                      | (16'000)           |
| Recognition programme                                             | -                       | 400'000                | 400'000            |
| Total Multi-Committees Projects                                   | 418'000                 | 835'000                | 29'000             |
| 6. CONGRESSES AND CONTINUING EDUCATION PROGRAMME                  |                         |                        |                    |
| Oral Health Innovation & Breakthrough Pilot Project*              | 12'000                  | -                      | (12'000)           |
| FDI Oral Health Campus                                            | 10'000                  | -                      | (10'000)           |
| Young Dentists Forum                                              | 25'000                  | 25'000                 | -                  |
| Regional Congress                                                 | 27'000                  | 37'000                 | 10'000             |
| World Dental Congress Mumbai                                      | 361'000                 | 925'000                | 564'000            |
| Social events - other expenses                                    | 83'000                  | 70'000                 | (13'000)           |
| World Dental Parliament Hybridization - 5 days version            | 97'000                  | -                      | (97'000)           |
| Master Continuing Education (CE) programme                        | 75'000                  | 75'000                 | -                  |
| CE accreditation task team                                        | 15'000                  | -                      | (15'000)           |
| Speakers Platform                                                 | 12'000                  | -                      | (12'000)           |
| Young Dentists Community                                          | 50'000                  | 50'000                 | -                  |
| Staff costs                                                       | 338'000                 | -                      | (338'000)          |
| Total Congresses and Continuing Education Programme               | 1'105'000               | 1'182'000              | 89'000             |
| 7. DEVELOPMENT                                                    |                         |                        |                    |
| Travel and others                                                 | 50'000                  | -                      | (50'000)           |
| Staff costs                                                       | 365'000                 | 250'000                | (115'000)          |
| Total Development                                                 | 415'000                 | 250'000                | (165'000)          |
| Grand total                                                       | 5'326'700               | 5'370'500              |                    |
| Surplus                                                           |                         | 43'800                 |                    |

\* New projects

## Administration

### **Responsible:**

Head office  
Finance and administration department

### **Rationale, Background and Need:**

The head office is located in Geneva, Switzerland since 2009.  
In 2026, FDI moved to new premises as the landlord has terminated the lease to transform the premises into living quarters. The costs for the move have been fully covered by the landlord who also granted a compensation for the difference of the rent.  
Audit fees are estimated to be compliant with GAAP RPC21 standards audit report (full audit).  
The FDI permanent staff is based on 16 positions. The social charges are based on 23% of gross salaries.  
The administration is the actual overhead and represents only 16% of the costs (including office costs).

### **Objectives:**

The objective of the administration is to support the operations of the FDI.

### **Action Plan:**

The Head Office is up and running.  
The budget is continuously managed.  
Administration processes are continuously refined.

HR: performance reviews are standardized, job descriptions are refined, staff is allocated according to needs, and new positions are filled with best possible candidates.

### **Budget:**

Office costs for 550 kCHF, including rent premises, depreciation, IT/telecom costs, legal and audit fees, Bank charges.  
The budget takes into consideration the inflation in Switzerland.  
The depreciations have been increased due to the renewal of our IT in 2026.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                                              | Amount          |
|--------------------------------------------------|-----------------|
| <b>INCOME</b>                                    |                 |
|                                                  |                 |
| <b>Total Income</b>                              | <b>0</b>        |
|                                                  |                 |
| <b>EXPENSES</b>                                  |                 |
| Office rent, services/utilities                  | 225 000         |
| IT and Telecommunication costs                   | 95 000          |
| Other office costs (office supplies, postage...) | 15 000          |
| Legal and audit fees                             | 70 000          |
| Travel and accommodation                         | 85 000          |
| Depreciation                                     | 25 000          |
| Bank charges                                     | 35 000          |
| Staff costs                                      | 270 000         |
| <b>Total Expenses</b>                            | <b>820 000</b>  |
| <b>Total Net</b>                                 | <b>-820 000</b> |

## Membership Promotion

### **Responsible/Committee/Task Team:**

Membership Liaison and Support Committee  
Governance & Membership department

### **Rationale, Background and Need:**

Operational budget required for membership services and promotion:

- design and layout of FDI Membership infographics (2 planned for 2027)
- design and print of the leaflet/brochures or handouts if needed
- NLO and membership certificates;

This budget also serves FDI membership in other Organizations (i.e. IADR) and support to attendance at relevant meetings.

This budget also serves for FDI membership in other Organizations (i.e. IADR) and support to attendance at relevant meetings.

### **Objectives:**

Production and distribution of FDI Membership and NLO materials for better understanding of FDI membership values, involvement of Members and NLOs and increased visibility of FDI.

### **Action Plan:**

Identify Non-Members Association and groups (annual exercise).

Identify relevant expenses and correspondence for translation at the beginning of the year and allocate funds within the budget.

### **Outcome:**

Listed FDI Membership materials and NLO materials are produced and circulated to members.

### **Timeline:**

Potential members and correspondence for translation is confirmed and varies throughout the year.

Related work on infographics including a workshop with the Council conducted by the end of second quarter of 2027.

**Strategy – Focus area:** Knowledge exchange / Advocacy

| Chf                                                           | Amount         |
|---------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                 |                |
|                                                               |                |
| <b>Total Income</b>                                           | <b>0</b>       |
|                                                               |                |
| <b>EXPENSES</b>                                               |                |
| Production of FDI Membership and NLO certificates             | 1 500          |
| Production of 2 FDI Membership Value infographics             | 3 000          |
| Membership Value proposition consultancy                      | 3 500          |
| Other (recognition plaques, specific translations or travels) | 2 000          |
| <b>Total Net</b>                                              | <b>-10 000</b> |

### Representation and President's travel

**Responsible/Committee/Task Team:**

Executive Committee  
Governance & Membership department

**Rationale, Background and Need:**

FDI President serve as the principal official representative of the FDI in its relations with members, governments and international organizations. The President's travel is an important part of the Presidential term, with the purpose to endure ties between the FDI and Member Associations, to contribute to ongoing cooperation with other representatives and to advance a range of FDI activities. President's attendance at the Executive Committee and Mid-Year meeting might be allocated in this budget.

If unavailable to attend at important event, the President may appoint President-elect or a suitable member of the Council to represent FDI using this budget.

This budget also covers the President's representation fee and use of mobile phone as per Finance manual.

**Objectives:**

Strong ties with members and increased visibility of FDI.

**Action Plan:**

The events and meetings are identified at the beginning of each year and as the invitations are received. Each invitation is revised and representation must be approved by the Executive Committee.

The Executive Committee identifies events throughout the year and confirms which events FDI's participation should be confirmed.

**Outcome:**

The President attends members' events and prominent global events and represents FDI.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation



| Chf                                         | Amount         |
|---------------------------------------------|----------------|
| <b>INCOME</b>                               |                |
|                                             |                |
| <b>Total Income</b>                         | <b>0</b>       |
|                                             |                |
| <b>EXPENSES</b>                             |                |
| Travel & Accommodation                      | 58 000         |
| Representation (President's) fee            | 24 000         |
| Mobile Phone and other representation costs | 3 000          |
| <b>Total Expenses</b>                       | <b>85 000</b>  |
| <b>Total Net</b>                            | <b>-85 000</b> |

### Council and Standing Committees 2027 Mid-Year meeting

**Responsible/Committee/Task Team:**

Executive Committee  
Governance & Membership department

**Rationale, Background and Need:**

The basis for the work of the Council and Standing Committees is laid down in the Constitution. The council represents the administrative authority of the FDI and initiates, conducts, delegates, monitors and coordinates all business of the FDI.

**Objectives:**

Constitutional requirements as listed above.

**Action Plan:**

Action plan is identified annually, in accordance with FDI Strategy, annual Action plan and dates of the World Dental Parliament of each year.

**Outcome:**

The Council and Committee meetings and Plenary Session are organized in accordance with FDI annual Action plan.

**Timeline:**

The time, place and number of meetings is determined annually by the Council. The Council meets with the Committees twice a year, during WDC and at the FDI Mid-Year meeting. The Mid-Year meeting is usually held in April / May, over a period of five to six days depending on the number of items on the agenda, number of meetings and consequent to time and cost implications. Plenary Session for all Council and Standing Committee members is organized at every Mid-Year meeting.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                                                                                                                                                                                                                                                    | Amount          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>INCOME</b>                                                                                                                                                                                                                                          |                 |
|                                                                                                                                                                                                                                                        |                 |
| <b>Total Income</b>                                                                                                                                                                                                                                    | <b>0</b>        |
|                                                                                                                                                                                                                                                        |                 |
| <b>EXPENSES</b>                                                                                                                                                                                                                                        |                 |
| Travel, Hotel Accommodation & Subsistence                                                                                                                                                                                                              | 110 000         |
| Due to ever increasing travel costs, this budget is for the expenses of the Council, Committee members and staff only.<br><i>(Attendance of CE Programme Directors or other presenters at the meeting (IDJ, V2030) is not included in this budget)</i> |                 |
| Rental (venue, meeting room, AV, conference package)                                                                                                                                                                                                   | 40 000          |
| Social Programme                                                                                                                                                                                                                                       | 20 000          |
| <b>Total Expenses</b>                                                                                                                                                                                                                                  | <b>170 000</b>  |
| <b>Total Net</b>                                                                                                                                                                                                                                       | <b>-170 000</b> |

### Executive Committee

**Responsible/Committee/Task Team:**

Executive Committee  
Governance & Membership department

**Rationale, Background and Need:**

The duties of the Executive Committee are:

- To provide guidance to the Executive Director to take urgent leadership decisions that cannot be made by staff and cannot be referred to the Council due to time constraints. All decisions taken in this manner are reported to the Council within two weeks and ratified by the Council at its next meeting.
- To support the Executive Director with aspects such as the completion of agendas for the Council and General Assembly meetings.
- To advise and support the Executive Director in the accomplishment of the strategic plan.
- To review and provide guidance as required on other contractual agreements.
- To ensure that the Council has all the information to make informed decisions.
- To fulfil individual duties as described in the Constitution.

**Objectives:**

Constitutional requirements as listed above.

**Action Plan:**

Action plan is identified in accordance with FDI Strategy and annual Action plan set by the Council.

**Outcome:**

As of 2027, in addition to online meetings and meetings at the Mid-year and World Dental Congress, the Executive Committee holds at least 1 face-to-face meeting, usually in February, to discuss the previous year reporting to Council and plan for Mid-Year and Council business ahead.

**Timeline:**

Timeline is set annually and in accordance with FDI Strategy and Business meetings calendar of the year.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                             | Amount         |
|---------------------------------|----------------|
| <b>INCOME</b>                   |                |
|                                 |                |
| <b>Total Income</b>             | <b>0</b>       |
|                                 |                |
| <b>EXPENSES</b>                 |                |
| Travel & Subsistence            | 16 000         |
| Rental (venue, meeting room...) | 3 500          |
| Other expenses                  | 500            |
| <b>Total Expenses</b>           | <b>20 000</b>  |
| <b>Total Net</b>                | <b>-20 000</b> |

### Finance Committee/Audit Committee

#### **Responsible:**

Finance Committee  
Finance & Administration department

#### **Finance Committee**

The Finance Committee is composed of the Treasurer and 3 other members of Council, with the Executive Director as an ex officio member. The task of the Committee is to oversee the preparation of the annual budget for the consideration of Council and to make recommendations to Council about the financial affairs of FDI World Dental Federation.

#### **Objectives:**

Monitor budget 2027 implementation, review 2027 quarterly reports presented by office, to be sent to NLO's,  
Review 2026 accounts and external audit report.  
Prepare 2028 budget in accordance with the strategy.

#### **Audit Committee**

The Audit Committee shall, under the direction of Council, assess financial control and processes, risk management protocols and review the previous year's financial reporting. It shall report annually to the General Assembly.

#### **Role and Responsibilities:**

The Audit Committee shall, under the direction of Council:

- Assess financial control and processes.
- Assess risk management protocols.
- Review past financial reporting.
- Report annually to the General Assembly.

#### **Composition and terms of office:**

The Audit Committee shall consist of 3 Delegates of the FDI General Assembly with experience in finance issues to be appointed annually by the Council.

3 Delegates of the General Assembly (staggered approach / alternating years)

Annual appointment by the Council (Special Committee)

Committee Members shall be appointed annually with a maximum term of two years.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation



| Chf                    | Amount         |
|------------------------|----------------|
| <b>INCOME</b>          |                |
|                        |                |
| <b>Total Income</b>    | <b>0</b>       |
|                        |                |
| <b>EXPENSES</b>        |                |
| Travel and subsistence | 10 000         |
| <b>Total Expenses</b>  | <b>10 000</b>  |
| <b>Total Net</b>       | <b>-10 000</b> |

## Governance General

### **Responsible/Committee/Task Team:**

Council

Governance & Membership department

### **Rationale, Background and Need:**

To answer the high demand and need of Spanish and French speaking Member Associations, these funds are mainly allocated for translation of FDI internal and external communication, working documents and reports and documents for the General Assembly: main reports, minutes and any other communications and correspondence of importance. The funds are also used to produce FDI gifts and Awards and support any Governance related travels and attendance at relevant meetings.

In 2027, translations costs for NLOs are re-allocated to this budget. (Translation of specific membership mailings, guidelines, and promo material for National Liaison Officers (NLOs) and increased volume of translations of NLO reports.)

### **Objectives:**

Identify and translate the most relevant documents and communications for NLO and Membership.

Design and produce FDI Awards and gifts.

### **Action Plan:**

The action plan is identified in accordance with the FDI Constitution, communication plan and annual business meetings.

### **Outcome:**

Translated documents, reports and assets. Produced FDI Awards and gifts.

**Timeline:** A timeline is identified annually in accordance with the FDI Constitution and annual business meetings.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                                 | Amount         |
|-------------------------------------|----------------|
| <b>INCOME</b>                       |                |
|                                     |                |
| <b>Total Income</b>                 | <b>0</b>       |
|                                     |                |
| <b>EXPENSES</b>                     |                |
| Translation of governance documents | 25 000         |
| Design and promo material           | 3 000          |
| Certificates and Awards             | 2 000          |
| <b>Total Expenses</b>               | <b>30 000</b>  |
| <b>Total Net</b>                    | <b>-30 000</b> |

### Regional Continuing Education Programme

#### **Responsible/Committee/Task Team:**

Continuing Education (CE) Regional Directors / Education Committee (EdC)  
Congress & Continuing Education department

#### **Rationale, Background and Need:**

There is a need for FDI to support the Continuing Education (CE) Programme in the 5 regions, to ensure that the educational needs are fairly addressed in all regions, and that underserved regions could receive the appropriate support, even in absence of sponsors.

#### **Objectives:**

- To assist/support NDAs in the development of quality CE programmes, adapted to their needs
- To develop CE programmes disseminating FDI focus areas.
- To support CE Directors and NDAs in organizing face-to-face and virtual meetings.
- To provide CE Directors with digital tools to uniform needs assessment, feedback collection and promotion.
- To promote the CE programme across all NDAs and continue to raise awareness on FDI continuing education's mission

#### **Action Plan:**

- CE Directors to survey and address educational needs with NDAs within their regions
- CE Directors input into the revised continuing education strategy
- Modernize the training offer to include platforms for in-person and virtual meetings
- Implement the needs assessment results and feedback collection tools to adapt content to the closest needs of the NDAs and their dentists
- Create easy-to-use communication tools to support CE Director with their trainings' promotion

The 20 KCHF FDI contribution will be allocated to region according to the needs.

#### **Outcome:**

- To improve access to CE programme in all underserved regions
- To improve quality of CE programme activities and events

KPIs: At least 10 training sessions are organized yearly in every region. 80% of the training sessions are self-funded. Where not possible FDI will complement up to 20kCHF  
Implementation of the 5-year strategic plan including KPIs.

#### **Timeline:**

1 November 2026: first draft of the annual project per region is available

28 February 2027: finalized programme per region is available

30 June 2027: mid-year assessment of all programmes implemented and FDI financial support assessment for the 2nd semester.

**Strategy – Focus area:** Knowledge exchange/membership

| Chf                              | Amount         |
|----------------------------------|----------------|
| <b>INCOME</b>                    |                |
|                                  |                |
| <b>Total Income</b>              | <b>0</b>       |
|                                  |                |
| <b>EXPENSES</b>                  |                |
| FDI Contribution to CE Programme | 20 000         |
| <b>Total Expenses</b>            | <b>20 000</b>  |
| <b>Total Net</b>                 | <b>-20 000</b> |

### Education Committee Webinars

**Responsible/Committee/Task Team:**

Education Committee  
Congress & Continuing Education department

**Rationale, Background and Need:**

The Vision 2030 report addresses the importance of Education that will create a profession with the knowledge, skills and attributes to contribute appropriately to the effective prevention and management of oral diseases.

Development through Continuing Education (CE) is essential and enables dentists to maintain up-to-date clinical and theoretical knowledge of the art and science of dentistry.

This budget form and these webinars are complementing the CE Programme implemented by the regional CE Directors and are organized by the Education Committee.

**Objectives:**

Develop 2 webinars in areas where a guidance for best practice is needed.

To avoid overlap with congress programme, topics will be selected once the WDC2027 Scientific programme is finalized. The Education Committee will aim at developing innovative webinar formats such as inter-professional discussions or case discussions.

**Action Plan:**

- Select speakers based on their expertise and their potential to attract a large audience as well as their region.  
EDC will select speakers from different continents and backgrounds.
- Deliver one webinar every 6 months in 2027 on the FDI Oral Health Campus.

**Outcome:** 2 webinars

**Strategy – Focus area:** Knowledge exchange

| Chf                   | Amount        |
|-----------------------|---------------|
| <b>INCOME</b>         |               |
|                       |               |
| <b>Total Income</b>   | <b>0</b>      |
|                       |               |
| <b>EXPENSES</b>       |               |
| Production costs      | 6 000         |
| <b>Total Expenses</b> | <b>6 000</b>  |
| <b>Total Net</b>      | <b>-6 000</b> |



### World Dental Development Fund (WDDF)

**Responsible/Committee/Task Team:**

Public Health Committee  
Public Health department

**Rationale, Background and Need:**

The World Dental Development Fund (WDDF) was established in 1999 under the supervision of PHC. The aim of the WDDF is to improve oral health globally, primarily through the development and implementation of innovative prevention and access-to-care programmes targeting disadvantaged populations. Since its inception, the Fund has supported projects that promote and advance oral health across a variety of settings.

All WDDF-supported projects reflect the core values and principles of FDI. Projects are expected to align with local, regional, or national strategic health priorities within the respective country and should be developed in consultation with local authorities and relevant stakeholders. Priority is given to projects that demonstrate long-term sustainability and the potential for lasting impact.

**Objectives:**

- Encourage NDAs and non-member organizations in low- and middle-income countries to develop and implement relevant oral health projects.
- Provide financial support for projects that positively impact the oral health of disadvantaged populations worldwide

**Action Plan:**

Award the WDDF to up to five NDAs or non-member organizations to support the implementation of projects promoting oral health in low- and middle-income countries and/or among disadvantaged populations in 2027.

**Outcome:**

Successful completion of five FDI-funded projects aimed at improving the oral health of disadvantaged populations in low- and middle-income countries.

**Timeline:**

- September 2026: winner selection.
- December 2027: completion of 2027 projects.

**Strategy – Focus area:** Knowledge exchange / advocacy

| Chf                        | Amount        |
|----------------------------|---------------|
| <b>INCOME</b>              |               |
| Partner funding            | 20 000        |
| WDDF fund                  | 30 000        |
| <b>Total Income</b>        | <b>50 000</b> |
|                            |               |
| <b>EXPENSES</b>            |               |
| 2x Partner funded projects | 20 000        |
| 3x FDI funded projects     | 30 000        |
| <b>Total Expenses</b>      | <b>50 000</b> |
| <b>Total Net</b>           | <b>0</b>      |

### Policy Statements - Public Health Committee

**Responsible/Committee/Task Team:**

Public Health Committee  
Public Health department

**Rationale, Background and Need:**

Topics are chosen in areas of fundamental importance to the dental profession.

**Objectives:**

Revise four existing policy statements (PS) and produce one new one line with current evidence

**Action Plan:**

Five policy statements will be prepared for submission and adoption during the General Assembly at the World Dental Congress (WDC) 2027.

Detailed workplan is determined by the Policy Statements pathway and timeline.

**Outcome:**

Publication and dissemination of five Policy Statements in 2027 through FDI's website, the International Dental Journal, and FDI's member networks and communication channels.

**Strategy – Focus area:** Advocacy

| Chf                                                              | Amount         |
|------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                    |                |
|                                                                  |                |
| <b>Total Income</b>                                              | <b>0</b>       |
|                                                                  |                |
| <b>EXPENSES</b>                                                  |                |
| Translation of new/revised statements<br>(French/German/Spanish) | 5 000          |
| <b>Total Expenses</b>                                            | <b>5 000</b>   |
| <b>Total Net</b>                                                 | <b>- 5 000</b> |

## Refugee Oral Health Promotion and Care

### **Responsible/Committee/Task Team:**

Public Health Committee & Public Health department

### **Rationale, Background and Need:**

Advancing oral health among vulnerable populations is a core priority of FDI Vision 2030, and this project is essential to advancing that commitment. As global displacement rises, refugees and displaced populations continue to face major barriers to healthcare, including oral healthcare, which remains insufficiently integrated into humanitarian response plans, primary healthcare systems, and national equity policies. Recent Vision 2030 survey findings revealed significant gaps in equity governance: only around half of surveyed countries reported policies addressing refugees or displaced populations, while over one-third of respondents were unaware whether oral health was included in such policies. Although oral health is sometimes incorporated where protective policies exist, major awareness and implementation gaps persist.

These findings highlight the need for stronger evidence, advocacy, and local engagement to better understand oral healthcare delivery and lived experiences in humanitarian and low-resource settings. Qualitative evidence from refugees, vulnerable communities, and frontline providers remains particularly limited. Building on work initiated in 2026, the Refugee Oral Health Project will continue data collection across Sudan, Libya, Palestine, Bangladesh, Syria, Colombia, and Afghanistan, while expanding analysis, dissemination, and advocacy in 2027. The project will generate context-specific evidence to inform policy, strengthen workforce capacity, support integration of oral health into humanitarian and primary care systems, and strengthen NDA advocacy and collaboration with humanitarian actors.

### **Objectives:**

- Generate qualitative evidence on oral health needs, barriers, and service delivery challenges in humanitarian settings.
- Document the lived experiences of displaced populations, community members, and frontline oral health providers to better understand oral health inequities.
- Strengthen the capacity of participating NDAs and local oral health professionals in advocacy, and humanitarian oral health engagement.
- Produce policy-relevant recommendations to support global and national advocacy efforts on refugee and displaced population oral health.

### **Action Plan:**

- Continue interviews and data collection across participating countries.
- Develop country and global policy briefs linked to Vision 2030 findings and the FDI oral health in humanitarian settings guide.
- Present findings during Refugee Oral Health session at WDC27.
- Develop recommendations for future capacity-building and policy integration initiatives.

### **Outcome:**

- Multi-country qualitative dataset from selected humanitarian and displacement-affected settings.
- Identification of key barriers affecting access to oral healthcare, including financial, cultural, workforce, and system-level challenges.
- Support NDAs to adapt and disseminate the FDI Guide on Oral Health in Humanitarian Settings within their national contexts.
- Increased visibility of participating NDAs through conference presentations, publications, and global dissemination activities.

**Strategy – Focus area:** Advocacy / Knowledge exchange

| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
|                       |                |
| <b>Total Income</b>   | <b>0</b>       |
|                       |                |
| <b>EXPENSES</b>       |                |
| Deliverables          | 10 000         |
| <b>Total Expenses</b> | <b>10 000</b>  |
| <b>Total Net</b>      | <b>-10 000</b> |

## Tobacco Cessation

### **Responsible/Committee/Task Team:**

Public Health Committee  
Public Health department

### **Rationale, Background and Need:**

FDI supports oral healthcare teams in helping tobacco users quit as part of their professional role and in recognizing tobacco cessation as an integral component of dental practice. Building on the extensive range of resources already developed, FDI plans to continue providing funding to selected NDAs to deliver “train-the-trainer” workshops for their members.

FDI will provide educational materials and financial support to seven NDAs to facilitate the implementation and expansion of these training programmes. This support will help equip oral health professionals with the knowledge and skills needed to effectively support patients in tobacco cessation and promote healthier lifestyles.

### **Objectives:**

- Increase awareness of the role of dentists and dental teams in tobacco cessation.
- Strengthen the knowledge and skills of oral health professionals to provide tobacco cessation interventions in dental settings and advocate for tobacco cessation at the national level.

### **Action Plan:**

Building on the extensive resources already developed, funding will be provided to selected NDAs to deliver “train-the-trainer” workshops for their members using FDI educational materials and guidance.

### **Outcome:**

- Delivery of seven NDA-led tobacco cessation workshops globally.
- Successful delivery of a tobacco cessation session during FDI’s World Dental Congress 2027.

### **Budget:**

This project will only go ahead if corporate partner funding for the full amount can be secured.

**Strategy – Focus area:** Knowledge exchange



| Chf                                                       | Amount        |
|-----------------------------------------------------------|---------------|
| <b>INCOME</b>                                             |               |
| Partner funding                                           | 11 500        |
| <b>Total Income</b>                                       | <b>11 500</b> |
|                                                           |               |
| <b>EXPENSES</b>                                           |               |
| Project management                                        | 1 000         |
| World Dental Congress Tobacco Cessation session (Speaker) | 2 500         |
| NDA workshops                                             | 7 000         |
| <b>Total Expenses</b>                                     | <b>10 500</b> |
| <b>Total Net</b>                                          | <b>1 000</b>  |

### Policy Statements – Science Committee

**Responsible/Committee/Task Team:**

Science Committee  
Comms & Advocacy department

**Rationale, Background and Need:**

Topics are chosen in areas of fundamental importance to the dental profession.

**Objectives:**

Revise two existing Science Committee Policy Statements and propose two new ones.

**Action Plan/Timeline:**

Four policy statements will be prepared for submission and adoption during the General Assembly (GA) at the World Dental Congress (WDC) 2027.

Detailed workplan is determined by the Policy Statements pathway and timeline.

**Outcome:**

Publication and dissemination of four Policy Statements in 2027 through FDI's website, the International Dental Journal, and FDI's member networks and communication channels.

**Strategy – Focus area:** Advocacy

| Chf                                    | Amount        |
|----------------------------------------|---------------|
| <b>INCOME</b>                          |               |
|                                        |               |
| <b>Total Income</b>                    | <b>0</b>      |
|                                        |               |
| <b>EXPENSES</b>                        |               |
| Translation<br>(French/German/Spanish) | 4 000         |
| <b>Total Expenses</b>                  | <b>4 000</b>  |
| <b>Total Net</b>                       | <b>-4 000</b> |

### IADR General Session & Exhibition Attendance

**Responsible/Committee/Task Team:**

Science Committee  
Comms & Advocacy department

**Rationale, Background and Need:**

In 2027, the International Association for Dental, Oral and Craniofacial Research (IADR) will hold its 105th General Session & Exhibition in Melbourne, Australia from 23–26 June.

**Objectives:**

FDI's Executive Director attends the IADR meeting every year. In addition, the Science Committee proposes that the Chair of the Committee also be present during this meeting, as the topics discussed are in line with the Committee's interests and work.

**Action plan:**

Attend the meeting and engage in all necessary sessions and discussions.

**Outcome:**

Report back on any research and topics of interests that are relevant to the work of the committee.

**Strategy – Focus area:** Knowledge exchange

| Chf                      | Amount        |
|--------------------------|---------------|
| <b>INCOME</b>            |               |
|                          |               |
| <b>Total Income</b>      | <b>0</b>      |
|                          |               |
| <b>EXPENSES</b>          |               |
| Travel and accommodation | 4 500         |
| <b>Total Expenses</b>    | <b>4 500</b>  |
| <b>Total Net</b>         | <b>-4 500</b> |

## Science Committee Forum

### **Responsible/Committee/Task Team:**

Science Committee  
Comms & Advocacy department

### **Rationale, Background and Need:**

Each year the Science Committee organizes a forum at FDI's World Dental Congress (WDC) to present the latest evidence and emerging developments on key topics in dentistry. In 2026, the committee proposes a session exploring the impact of systemic therapies and new medications, such as GLP-1s, on oral health.

Working title: New medications, new promises and new problems – Managing oral complications during systemic therapy.

### **Objectives:**

- To examine the emerging evidence on the oral health effects of systemic therapies and novel medications, including GLP-1 receptor agonists and other agents used in the management of chronic systemic diseases.
- To increase awareness among oral health professionals of the prevention, identification, and management of oral complications associated with systemic therapies, and their implications for dental treatment planning and patient care.

### **Action Plan/Timeline:**

April 2026: Identification of forum topic and complete session form.

June–October 2026: Identification of potential speakers.

June–November 2026: Contact / informally invite speakers.

December 2026: Approval of speakers.

Feb–Sept 2027: Promote session via FDI communication platforms.

July 2027: Collect draft PowerPoints from session speakers.

October 2027: Session takes place at the FDI's WDC.

### **Outcome:**

Session takes place at the FDI World Dental Congress in October 2027, resulting in:

- Improved knowledge and awareness among oral health professionals regarding the oral manifestations and complications associated with systemic therapies and emerging medications, including GLP-1 receptor agonists.
- Enhanced clinical preparedness for the prevention and management of medication-related oral complications, leading to more informed and patient-centred dental care.
- Greater visibility of FDI's scientific leadership on emerging oral health challenges through dissemination of current evidence and expert discussion.

**Strategy – Focus area:** Knowledge exchange

| Chf                    | Amount        |
|------------------------|---------------|
| <b>INCOME</b>          |               |
|                        |               |
| <b>Total Income</b>    | <b>0</b>      |
|                        |               |
| <b>EXPENSES</b>        |               |
| Travel and Subsistence | 6 300         |
| Registration           | 900           |
| <b>Total Expenses</b>  | <b>7 200</b>  |
| <b>Total Net</b>       | <b>-7 200</b> |



## Preventing AntiMicrobialResistance (AMR) and Infections

### **Responsible/Committee/Task Team:**

Preventing AMR and Infections Task Team and Science Committee.

### **Rationale, Background, and Need:**

AntiMicrobialResistance (AMR) is one of the most serious threats to global health, projected to cause 10 million deaths annually by 2050. This growing crisis is a key priority for FDI, particularly because dentists are responsible for up to 10% of all antibiotic prescriptions. To address this challenge, FDI launched the AMR Action Statement and Pledge, providing National Dental Associations (NDAs) with a platform to commit to actions aligned with the WHO Global Action Plan and the recommendations outlined in the FDI White Paper on AMR.

It is essential that FDI continues to play an active role in shaping policy responses and remains engaged in relevant AMR discussions to ensure the dental profession contributes meaningfully to global efforts to combat antimicrobial resistance.

### **Objectives:**

- Promote responsible antibiotic use in dentistry.
- Increase awareness of AMR and antimicrobial stewardship (AMS).
- Advocate for the inclusion of oral health perspectives in global AMR policy frameworks.
- Promote the prevention of oral infections as a means of promoting optimal use of antibiotics in dentistry.
- Promote research on AMR and AMS in dentistry, facilitating collaboration and exchange.

### **Action plan:**

- Develop and disseminate awareness tools.
- Strengthen education and training.
- Amplify advocacy and policy engagement.
- Support GARD network activities.

### **Outcome:**

- Assets and resources will be developed to support NDAs' work on AMR.
- Influence on relevant policy frameworks.

**Strategy – Focus area:** Advocacy / Knowledge exchange

| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
| Partner funding       | 0              |
| <b>Total Income</b>   | <b>0</b>       |
|                       |                |
| <b>EXPENSES</b>       |                |
| Deliverables          | 10 000         |
| <b>Total Expenses</b> | <b>10 000</b>  |
| <b>Total Net</b>      | <b>-10 000</b> |

### International Dental Journal (IDJ) articles to support Policy Statements

**Responsible/Committee/Task Team:**

Science Committee

Comms & Advocacy department

**Rationale, Background, and Need:**

Three review articles will be submitted to the International Dental Journal (IDJ) to provide the evidence and rationale underpinning the new Science Committee 2026 Policy Statement on Research and Scientific Integrity in Oral Health, and the 2027 Policy Statements on Xerostomia and Interoperability.

**Objectives:**

- To synthesize and evaluate the current evidence related to research integrity, xerostomia, and interoperability in oral healthcare in order to provide the scientific rationale and contextual background underpinning the Science Committee's 2026 and 2027 policy statements.
- To work synergistically with the IDJ to enhance visibility and readership of FDI's Policy Statements.

**Action Plan:**

Submit the papers to the IDJ for publication in 2027.

**Outcome:**

- Publication of three evidence-based review articles in the IDJ that provide the scientific foundation and contextual rationale for the Science Committee's Policy Statements.
- Strengthened credibility and dissemination of FDI Policy Statements through the integration of current scientific evidence on research integrity, xerostomia, and interoperability in oral healthcare.
- Increased visibility, readership, and engagement with FDI policy statements and the IDJ through coordinated collaboration between the Science Committee and the journal.

**Strategy – Focus area:** Knowledge exchange

| Chf                                  | Amount        |
|--------------------------------------|---------------|
| <b>INCOME</b>                        |               |
|                                      |               |
| <b>Total Income</b>                  | <b>0</b>      |
|                                      |               |
| <b>EXPENSES</b>                      |               |
| Article Publishing Charges (APC) x 3 | 9 000         |
| <b>Total Expenses</b>                | <b>9 000</b>  |
| <b>Total Net</b>                     | <b>-9 000</b> |

### Policy statements – Dental Practice Committee

**Responsible/Committee/Task Team:**

Dental Practice Committee

Public Health department

**Rationale, Background and Need:**

Topics are chosen in areas of fundamental importance to the dental profession

**Objectives:**

Revise three existing policy statements (PS) in line with current evidence.

**Action Plan:**

Three policy statements will be prepared for submission and adoption during the General Assembly at the World Dental Congress 2027.

**Outcome:**

Publication and dissemination of three Policy Statements in 2027 through FDI's website, the International Dental Journal, and FDI's member networks and communication channels

**Strategy – Focus area:** Advocacy

| Chf                   | Amount        |
|-----------------------|---------------|
| <b>INCOME</b>         |               |
|                       |               |
| <b>Total Income</b>   | <b>0</b>      |
|                       |               |
| <b>EXPENSES</b>       |               |
| Translation           | 3 000         |
| <b>Total Expenses</b> | <b>3 000</b>  |
| <b>Total Net</b>      | <b>-3 000</b> |

## Quality in Dentistry - NEW

### **Responsible/Committee/Task Team:**

Dental Practice Committee  
Public Health department

### **Rationale, Background and Need:**

FDI Vision 2030 highlights the importance of delivering appropriate, high-quality, evidence-based, integrated, and person-centred oral healthcare for all. FDI has previously developed policy statements and tools related to quality in dentistry, including a Quality Improvement Toolkit developed following the adoption of the 2017 Policy Statement on Quality in Dentistry. However, approaches to quality improvement continue to vary considerably across countries and practice settings, and defining quality in dentistry remains complex. Given that FDI's existing work on quality in dentistry dates back several years and considering the evolving landscape of dental practice and the progress made under Vision 2030, there is a need to review current FDI resources and frameworks to ensure they remain relevant, up to date, and reflective of contemporary priorities and challenges in dental practice.

### **Objectives:**

- Assess whether the current FDI *FDI Quality in Dentistry Toolkit* remains relevant and aligned with contemporary priorities in oral healthcare and Vision 2030.
- Develop an updated and refreshed version of the Toolkit.

### **Action Plan:**

- Review and update the existing FDI Quality in Dentistry Toolkit to ensure it reflects relevant literature and developments in dental practice; and Vision 2030 priorities related to the delivery of quality in oral healthcare.
- Consult with relevant FDI committees and experts to identify key considerations, priorities, and additional opportunities for updates.
- Consolidate the findings and proposed updates into a revised Quality in Dentistry Toolkit.
- Translate and distribute the toolkit through FDI channels, meetings, and member communications.

### **Outcome:**

Updated FDI Quality in Dentistry Toolkit aligned with current priorities, developments, and Vision 2030 objectives, supporting oral health professionals globally in delivering high-quality oral healthcare. New translations of the toolkit will also be developed.

**Strategy – Focus area:** Knowledge exchange/Innovation



| Chf                                         | Amount        |
|---------------------------------------------|---------------|
| <b>INCOME</b>                               |               |
|                                             |               |
| <b>Total Income</b>                         | <b>0</b>      |
|                                             |               |
| <b>EXPENSES</b>                             |               |
| Review and update (English version)         | 2 000         |
| Translation and design (Spanish and French) | 2 000         |
| <b>Total Expenses</b>                       | <b>4 000</b>  |
| <b>Total Net</b>                            | <b>-4 000</b> |

## Violence in the Dental Practice – Phase II

### **Responsible/Committee/Task Team:**

Dental Practice Committee  
Public Health department

### **Rationale, Background and Need:**

Violence in dental settings is an often-overlooked issue that can take multiple forms, including:

1. Violence directed at dental professionals by patients;
2. Inappropriate conduct by clinicians toward patients; and
3. Domestic violence identified through signs observed in the clinical setting.

This highlights the importance of awareness, training, and appropriate support mechanisms within dental practice.

Phase I of the project, carried out in 2026, focused on violence directed at dental professionals by patients and accompanying persons. A survey examined incidents affecting dentists, assistants, hygienists, and administrative staff within dental practices. The findings informed the development of a summary document highlighting key global findings, and top-line recommendations to be shared with NDAs, with the aim of helping prevent and manage violence in dental settings while promoting a culture of safety, respect, and open communication.

Phase II: DPC will review the outputs and findings of Phase I to determine the most appropriate next steps for the project.

### **Objectives:**

Following the review of Phase I outputs, the project will pursue one of the following two directions:

Option 1 – Continued focus on violence directed from the patient to the dental team

Develop additional resources, guidance, or awareness activities related to violence directed at dental professionals by patients or accompanying persons, with the aim of supporting the well-being, safety, and professional practice of dental teams.

OR

Option 2 – Exploration of domestic violence in dental settings

Explore the role of dental professionals in recognizing and responding to signs of domestic violence, including identifying potential gaps in awareness, guidance, training, or professional support.

### **Action plan:**

- Review and consolidate findings from the Phase I survey on violence in dental settings.
- Identify key gaps, priorities, and opportunities for future work in consultation with relevant FDI stakeholders.
- Develop and disseminate educational materials based on the direction identified following the Phase I review

### **Outcome:**

By the end of the project, dental teams will be better equipped to respond to, and report incidents of violence.

**Strategy – Focus area:** Innovation/Knowledge exchange

| Chf                   | Amount        |
|-----------------------|---------------|
| <b>INCOME</b>         |               |
|                       |               |
| <b>Total Income</b>   | <b>0</b>      |
|                       |               |
| <b>EXPENSES</b>       |               |
| Design                | 2 500         |
| Translations          | 2 500         |
| <b>Total Expenses</b> | <b>5 000</b>  |
| <b>Total Net</b>      | <b>-5 000</b> |

### Travel Grant

**Responsible/Committee/Task Team:**

Membership Liaison and Support Committee (MLSC)  
Governance & Membership department

**Rationale, Background and Need:**

For Grant recipients:

- To enable Members from Low and Low-Middle Income Countries to have access to the General Assembly and other FDI business meetings.
- To give Individuals the opportunity to attend the scientific programme and the exhibition, which will enable participants to take new scientific developments back to their dental associations and countries.
- To learn more about FDI.
- For FDI World Dental Congress (WDC) participants:
- To allow congress participants to learn more about least developed and low-income countries with poor dental infrastructure.
- To assess and better understand the needs of Associations facing challenges attending WDC

**Objectives:**

Obtain detailed post-attendance report from Travel Grant recipients for evaluation by MLSC.

**Action Plan:**

- Procedure launch in March 2027, which includes sending application forms to all qualifying countries
- Response from the NDAs by Mid-year 2027
- Assessment of candidates by MLSC during Mid-year 2027
- Informing the candidates of the Committee's decision by end of May
- Participation of the successful candidates in FDI WDC 2027
- Submission of the Travel Grant reports and reimbursement claims by the Travel Grant recipients by early November 2027
- Evaluation of the reports by MLSC and reimbursement of the travel expenses to the Travel Grant recipients by end of November 2027.

**Outcome:**

Representatives of the Associations – FDI Members from Low and Low Middle Income countries participate in the General Assembly and other World Dental Parliament meetings, attend part of the scientific programme and the trade exhibition, which enables them to take part in the decision-making process, learn more about FDI and take new scientific developments back to their dental associations and countries.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                         | Amount         |
|-----------------------------|----------------|
| <b>INCOME</b>               |                |
|                             |                |
| <b>Total Income</b>         | <b>0</b>       |
|                             |                |
| <b>EXPENSES</b>             |                |
| Translation of applications | 1 000          |
| Travel costs                | 24 000         |
| <b>Total Expenses</b>       | <b>25 000</b>  |
| <b>Total Net</b>            | <b>-25 000</b> |

### Member Supports Member

**Responsible/Committee/Task Team:**

Membership Liaison and Support Committee (MLSC)  
Governance & Membership department

**Rationale, Background and Need:**

FDI Member Association supporting another FDI Member Association is already taking place. This initiative allows members who are facing difficulties to remain in FDI membership, to participate in activities and meetings.

**Objectives:**

To provide a platform for FDI Members and their representatives to support other FDI members in their own country or in another country. The support can include:

- Payment of annual membership fee for a period of a minimum of one calendar year.
- Support for the attendance of WDC: travel cost and/or accommodation and/or scientific course and/or registration to attend WDC.
- Combinations of all mentioned above.
- The aim of this project is to support FDI members facing difficulties. The Head Office will give all necessary information to all NDA's willing to participate to this programme.
- Target Groups: Regular and Associate members and members of a member (individual support will be anonymous).

**Action Plan:**

- In early 2027, FDI will issue a call for support to all members, sharing the names of unsuccessful Travel Grant applicants as well as NDAs facing challenges in covering travel expenses for the FDI Congress. Additionally, the list will include members who are struggling to pay their membership fees. This information will be provided to NDAs who wish to help upon their request.
- By end June 2027, informs members receiving support.

**Outcome:**

- For representatives of the associations: FDI members facing financial challenges are allowed to participate in the General Assembly and other business meetings. They can also attend portions of the scientific programme and the trade exhibition, providing them with the opportunity to engage in the decision-making process, enhance their understanding of FDI, and bring new scientific advancements back to their respective dental associations and countries.
- For associations: FDI members who are encountering financial difficulties in paying their membership fees will have their fees covered, allowing them to retain their membership in FDI.

**Strategy – Focus area:** Knowledge exchange

| Chf            | Amount |
|----------------|--------|
| INCOME         |        |
|                |        |
| Total Income   | 0      |
|                |        |
| EXPENSES       | 0      |
|                |        |
| Total Expenses | 0      |
| Total Net      | 0      |



### International Dental Journal (IDJ)

#### **Responsible/Committee/Task Team:**

IDJ Editor in Chief  
Comms & Advocacy department

#### **Rationale, Background and Need:**

IDJ became a gold open access publication in 2021, with no subscription charges. The journal's revenue is now primarily generated through article processing charges (APCs) paid by authors, as well as the number of Supplements commissioned and published. The EiC continually implements new strategies to broaden the journal's reach and encourage both article submissions and readership. These efforts include expanding the journal's scope and diversifying the types of articles accepted. As a result, the IDJ's impact factor increased from 2.607 in 2021 to 3.7 in 2025. This progress places IDJ in the top quartile (Q1) of journals in the fields of Dentistry, Oral Surgery, and Medicine, marking a historic milestone in our 75-year legacy.

#### **Objectives:**

- Strengthen editorial capacity
- Maintain regular publication frequency
- Procure supplements
- Enhance visibility and impact
- Maintain the scientific quality and integrity of the journal
- Ensure financial sustainability

#### **Action Plan:**

- Maintain the capacity of the editorial board to support article review processes and ensure adherence to the publishing schedule.
- Maintain high editorial standards to safeguard the journal's scientific integrity and quality.
- Hold regular meetings between the Editor-in-Chief (EiC) and Associate Editors to address challenges and strengthen the scientific quality of published articles.
- Conduct regular strategy calls with the EiC and Elsevier team to identify opportunities and ensure the efficient and timely production of each issue.
- Work with FDI leadership and committees to identify publication and promotional opportunities.
- Identify opportunities to develop supplements through FDI projects.
- Ensure a financially sustainable publication model by encouraging article submissions and securing supplements.
- Develop and implement a comprehensive promotional plan to increase the journal's visibility, readership, and impact factor.
- Hold a dedicated session during FDI's World Dental Congress (WDC).

#### **Outcome:**

- Six issues of IDJ published (February, April, June, August, October, December).
- Increased number of articles submitted and published.
- Increased readership and referencing of IDJ.
- Improved engagement of the editorial board and more proactive reviewing.
- Improved impact factor.
- IDJ session held during WDC.
- Financially viable journal.

**Strategy – Focus area:** Knowledge exchange

| Chf                                                | Amount         |
|----------------------------------------------------|----------------|
| <b>INCOME</b>                                      |                |
| Article Publishing Charges (APC)/Content Royalties | 470 000        |
| Editorial incentive                                | 30 000         |
| 1 Supplement                                       | 35 000         |
| <b>Total Income</b>                                | <b>535 000</b> |
|                                                    |                |
| <b>EXPENSES</b>                                    |                |
| Editor in Chief                                    | 70 000         |
| Associate editors                                  | 30 000         |
| IDJ Admin costs                                    | 12 000         |
| Editorial work for FDI supplements                 | 2 000          |
| Article Publishing Charges FDI supplement          | 10 000         |
| Meetings and Travel                                | 10 000         |
| <b>Total Expenses</b>                              | <b>134 000</b> |
| <b>Total Net</b>                                   | <b>401 000</b> |

## Public Relations and Multimedia

### **Responsible/Committee/Task Team:**

Comms & Advocacy department

### **Rationale, Background and Need:**

To promote FDI to all stakeholders and increase the impact of both our external and internal communications, in line with FDI's Strategic Plan, we need to invest in promotional activities. This will help raise FDI's profile and its standing as one of the leading organizations in oral health.

### **Objectives:**

- Support the implementation of FDI's Communication Strategy.
- Protect and maintain FDI's brand integrity.
- Raise the profile of FDI and become the global "go to" experts in oral health.
- Optimize communications with all internal and external stakeholders so they are kept informed and engaged with FDI activities.
- Leverage opportunities to promote FDI and its activities.
- Optimize FDI media opportunities.
- Implement new tools to extend FDI's reach.

### **Action Plan:**

- Develop and implement a comprehensive digital communications strategy encompassing all FDI activities.
- Develop tools, resources, and promotional materials to strengthen the visibility and recognition of the FDI brand.
- Disseminate FDI promotional materials and giveaways throughout the year at key meetings and events.
- Grow the reach and visibility of FDI resources across target audiences and platforms.
- Engage influencers and strategic partners to amplify FDI messaging and campaigns.
- Develop a media strategy and subscribe to relevant media distribution and monitoring services.
- Measure the impact of communications activities using appropriate monitoring and evaluation tools, and adapt efforts as needed.

### **Outcome:**

- Increased visibility for FDI and its activities.
- Increased awareness of oral health.
- Increased reach and media presence.
- Tailored strategies according to those that are the most impactful by tracking results.
- 10% annual increase in social media followers across platforms.
- Influencers engaged and helping to disseminate FDI messages.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                                                                                  | Amount         |
|--------------------------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                                        |                |
|                                                                                      |                |
| <b>Total Income</b>                                                                  | <b>0</b>       |
|                                                                                      |                |
| <b>EXPENSES</b>                                                                      |                |
| Promotional material/giveaways                                                       | 10 000         |
| Annual report: writing and design                                                    | 15 000         |
| FDI Booth at World Dental Congress*                                                  | 15 000         |
| Digital and media strategy development & implementation                              | 10 000         |
| Subscription services (Meltwater, Hootsuite, Buzzsprout, Spotify, QR code generator) | 6 000          |
| Image purchasing                                                                     | 3 500          |
| Social media boosting                                                                | 3 500          |
| Trademarks                                                                           | 3 000          |
| Photography/filming at meetings                                                      | 3 000          |
| <b>Total Expenses</b>                                                                | <b>69 000</b>  |
| <b>Total Net</b>                                                                     | <b>-69 000</b> |

\*Shared with Projects

### Website and database

#### **Responsible/Committee/Task Team:**

Comms & Advocacy department

#### **Rationale, Background and Need:**

The website is often the first interaction people will have with FDI, so the experience must be a positive one, with users finding the information they need as quickly and easily as possible. This will motivate them to become loyal visitors and hopefully recommend the site to others. FDI will ensure ongoing website and other online developments to optimize the user experience and ensure that we stay on top of any technological advances.

The database of contacts also needs to be comprehensive and accurate so that we can communicate as broadly as possible to help to build FDI's credibility and reach.

#### **Objectives:**

- 1) Increase FDI's online presence
- 2) Increase website traffic and engagement.
- 3) Provide timely and engaging material and information
- 4) Accurate and comprehensive contact database.
- 5) Increased number of engaged contacts in the database.
- 6) More targeted communications.

#### **Action Plan:**

- Website (CMS): ongoing developments in line with industry standards and technological advances.
- Online tools: develop online tools as relevant to optimize user experience.
- Statistics and monitoring tools: continuous implementation of website statistical analysis/tracking tools to monitor reach and adapt strategies, as relevant, to increase impact.
- Domain names: manage domain name registrations.
- Database (CRM): troubleshoot & implement any necessary updates/changes as well as roll-out strategies to boost numbers such as targeted emails to non-subscribers who read FDI communications.

#### **Outcome:**

- Optimized user website experience.
- Implemented new digital media tools and strategies to drive traffic.
- 10% annual increase in website traffic.
- Effective database management.
- Smooth running of all online platforms.

**Strategy – Focus area:** Knowledge exchange / Advocacy / Innovation

| Chf                                  | Amount         |
|--------------------------------------|----------------|
| <b>INCOME</b>                        |                |
|                                      |                |
| <b>Total Income</b>                  | <b>0</b>       |
|                                      |                |
| <b>EXPENSES</b>                      |                |
| <b>FDI Website</b>                   |                |
| Support bundle                       | 20 000         |
| Maintenance                          | 4 000          |
| Security updates                     | 10 000         |
| Domain names and other subscriptions | 13 000         |
| Server hosting                       | 2 000          |
| <b>Database</b>                      |                |
| Civipus platform fee                 | 14 000         |
| Helpdesk                             | 5 000          |
| <b>Tools</b>                         |                |
| Podio subscription                   | 1 000          |
| <b>Total Expenses</b>                | <b>69 000</b>  |
| <b>Total Net</b>                     | <b>-69 000</b> |

## World Oral Health Day (WOHD)

### **Responsible/Committee/Task Team:**

WOHD Working group  
Comms & Advocacy department

### **Rationale, Background and Need:**

The need for WOHD was first identified in a Policy Statement adopted by the General Assembly in 2007 and updated in 2012. It was agreed that “FDI World Dental Federation will encourage, and support activities and initiatives aimed at increasing awareness for oral health as well as the impact of oral diseases on general health, well-being and economy.” It was also declared that, in support of these activities WOHD would be celebrated annually on 20 March. FDI encourages all stakeholders to use WOHD as a platform to develop community, national, regional, and global activities aimed at improving oral health. Today, WOHD is one of the largest oral health awareness campaigns and serves as an important platform for communicating FDI’s advocacy messages and supporting the objectives outlined in FDI’s Strategic Plan

### **Objectives:**

- Develop and implement the 2027 campaign strategy, integrating key learnings from the previous year’s campaign with increased investment in digital media.
- Develop and implement a globally relevant campaign that FDI members can adapt and amplify locally.
- Improve oral health literacy.
- Expand WOHD engagement and brand awareness, to increase campaign reach and impact.
- Establish targeted communications for key stakeholders to optimize campaign uptake.
- Deliver a campaign that attracts partners and supporters to make it financially sustainable.

### **Action Plan:**

May 2026: campaign strategy development

May 2026–March 2027: development and release of campaign resources and implementation of strategy.

September 2026: campaign launch.

March 20, 2027: World Oral Health Day.

April–June 2027: WOHD evaluation and selection of WOHD Award winners.

### **Outcome:**

- Defined WOHD 2027 campaign strategy and creative.
- Implementation of 2027 campaign
- Increased campaign reach.
- Increased member engagement.
- Increased awareness on oral health.
- Increased engagement across all stakeholders.
- Increased digital media impact and influencers engagement.

**Strategy – Focus area:** Advocacy



| Chf                                                                                                    | Amount         |
|--------------------------------------------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                                                          |                |
|                                                                                                        |                |
| Partner funding                                                                                        | 550 000        |
| <b>Total Income</b>                                                                                    | <b>550 000</b> |
| <b>EXPENSES</b>                                                                                        |                |
| <b>Campaign management (consultant)</b>                                                                |                |
| Campaign material and resources development<br>(creative direction, copywriting, and proofing)         | 45 000         |
| <b>Campaign development and implementation</b>                                                         |                |
| WOHD Website developments                                                                              | 20 000         |
| Design and layout of campaign toolkit                                                                  | 40 000         |
| Translations                                                                                           | 10 000         |
| Videos : Main campaign video with social media cuts<br>and gifs (now includes 3D animation of Toothie) | 40 000         |
| -Digital strategy development and implementation for<br>Meta (Facebook/Instagram)                      | 25 000         |
| -Digital strategy development and implementation for<br>Google (Search/YouTube) and website            | 10 000         |
| -Paid ads implementation (consultant)                                                                  | 8 000          |
| Influencers                                                                                            | 9 000          |
| Media strategy                                                                                         | 20 000         |
| WOHD podcast/webinar                                                                                   | 3 000          |
| WOHD Awards (x6)                                                                                       | 20 000         |
| Production and printing (including roll ups etc.)                                                      | 6 000          |
| Giveaways                                                                                              | 5 000          |
| WOHD Launch                                                                                            | 10 000         |
| WOHD Evaluation                                                                                        | 13 000         |
| Trademark                                                                                              | 1 500          |
| Staff costs                                                                                            | 145 000        |
| <b>Total Expenses</b>                                                                                  | <b>430 500</b> |
| <b>Total Net</b>                                                                                       | <b>119 500</b> |

## Advocacy

### **Responsible/Committee/Task Team:**

Advocacy Working Group and Vision 2030 Implementation and Monitoring Expert Group (V2030 IMEG)  
Comms & Advocacy department

### **Rationale, Background and Need:**

Advocacy is a pillar of FDI's Strategic Plan (2024–2027), reflecting the organization's commitment to responding to an evolving global policy environment. Following the completion of the Vision 2030 mid-term evaluation survey in 2025, FDI will use insights from members, committees, and partners to refine priorities and guide implementation efforts from 2026 onwards.

These findings will inform FDI's advocacy strategy for 2025–2027, aligning emerging oral health policy developments with the core pillars of Vision 2030 and the WHO Global Oral Health Action Plan. The strategy will support measurable objectives and key initiatives, including FDI's work to reduce sugar consumption as a major risk factor for dental caries following the adoption of the Position on Free Sugars in 2023. It will also build on recent advocacy outputs, including FDI's Oral Health in the Workplace report, to strengthen engagement with employers, policymakers, and other stakeholders on integrating oral health into broader health and wellbeing agendas.

In 2026, FDI will focus on translating these priorities into action through collaboration with members, policymakers, and industry partners, while promoting best practices and public-private partnerships to advance universal health coverage for oral health by 2030.

### **Objectives:**

Help deliver on the overarching advocacy goal of FDI's strategic plan "Mobilize advocacy efforts to increase oral health literacy and achieve political commitment and action on oral health for all".

### **Action Plan:**

- Use Vision 2030 as the main driver of FDI's advocacy strategy.
- Work with FDI leadership to implement the strategy and related action plan.
- Leverage key opportunities to profile oral health.
- Engage FDI's Vision 2030 Industry Action Group (IAG) in the implementation of the advocacy strategy.
- Ensure presence and influence during Conference of the Parties to the Minamata Convention on Mercury.
- Implement FDI's sugar strategy.
- Ensure FDI members are informed and engaged with advocacy efforts.

### **Outcome:**

- Advocacy strategy 2025–2027 implemented.
- Oral health profile raised on the global health and development agenda.
- Members supported their advocacy efforts.
- FDI key partner and influencer at UNEP, WHO, NCDA and WHPA level.
- Occupational oral health embedded into FDI's advocacy strategy with pilot projects launched.
- The role of private sector in helping to achieve UHC for oral health recognized.

**Strategy – Focus area:** Advocacy

| Chf                                                                                                     | Amount         |
|---------------------------------------------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                                                           |                |
| Partner funding                                                                                         | 360 000        |
| <b>Total Income</b>                                                                                     | <b>360 000</b> |
|                                                                                                         |                |
| <b>EXPENSES</b>                                                                                         |                |
| Membership with advocacy platforms (WHPA/NCDA)                                                          | 41 000         |
| Consultant                                                                                              | 30 000         |
| <b>Meetings and events</b>                                                                              |                |
| Advocacy – International Organizations (Includes IADR, World Health Assembly and UN related activities) | 20 000         |
| Meetings end events (including World Dental Congress and IMEG)                                          | 35 000         |
| Sugar and occupational oral health advocacy                                                             | 20 000         |
| Production, design, translation and layout of material                                                  | 15 000         |
| Media and promotion                                                                                     | 15 000         |
| <b>Total Expenses</b>                                                                                   | <b>176 000</b> |
| <b>Total Net</b>                                                                                        | <b>184 000</b> |

## Strengthening Oral Health Education, Awareness and Leadership for Health Systems Integration

### **Responsible/Committee/Task Team:**

Public Health Committee and Vision 2030 Implementation and Monitoring Working Group

### **Rationale, Background and Need:**

Since 2021, coinciding with the launch of FDI's Vision 2030, significant momentum has built around the global oral health agenda. The adoption of the landmark WHO Resolution on Oral Health, followed by the WHO Global Oral Health Strategy and Action Plan (2023–2030), has firmly positioned oral health within the broader noncommunicable disease (NCD) and universal health coverage (UHC) agendas, further reinforced at the Fourth United Nations High-Level Meeting on NCDs (UNHLM4). In response to this heightened political commitment and implementation urgency, this project adopts a systems-oriented approach to support countries in translating global commitments into sustained national action through three mutually reinforcing pillars: Pillar 1 – Oral Health Education; Pillar 2 – Support Policy and Guidance; and Pillar 3 – Build Global Leadership and Awareness. Pillar 2 directly supports Vision 2030, and the associated budget is reflected in the corresponding budget form, while this budget form consolidates Pillars 1 and 3.

### **Objectives:**

- Increase understanding of the links between oral health, NCDs, and overall well-being.
- Strengthen NDA capacity to deliver evidence-based oral health education, advocacy, and prevention-focused community initiatives.
- Support the integration of oral health into primary healthcare systems, UHC agendas, and broader NCD frameworks.
- Strengthen leadership capacity among NDAs and oral health leaders to translate policy commitments into sustained national action.
- Foster accountability, cross-country collaboration, and global advocacy to advance oral health

### **Action Plan:**

- Continue maintaining, updating, and disseminating evidence-based educational resources through the Whole Body Health platform, aligned with the latest research and global guidance.
- Facilitate global knowledge exchange, oral health literacy, and prevention-focused education.
- Award two annual Smile Grants of CHF 5,000 to NDAs implementing innovative community-based oral health prevention projects.
- Deliver structured leadership and capacity-building activities for NDAs and oral health leaders.
- Support NDAs in translating workshop learning into advocacy actions and policy-shaping initiatives at national level.
- Strengthen guidance and support for integrating oral health into national health systems, UHC agendas, and NCD frameworks.

### **Outcome:**

- Increased understanding of the relationship between oral health, NCDs, and overall health, together with improved oral health literacy and prevention-oriented behaviours.
- Strengthened leadership capacity, knowledge transfer, and establishment of local oral health champions among participating NDAs.
- Improved NDA capacity to advocate for evidence-based oral health policies and monitor implementation of global commitments.
- Greater integration of oral health priorities within national health systems, UHC agendas, and NCD frameworks.
- Increased sharing of best practices, peer learning, and cross-country collaboration to drive national and global oral health action.

**Strategy – Focus area:** Knowledge exchange / Advocacy

| Chf                                                     | Amount         |
|---------------------------------------------------------|----------------|
| <b>INCOME</b>                                           |                |
| Partner funding                                         | 141 000        |
| <b>Total Income</b>                                     | <b>141 000</b> |
|                                                         |                |
| <b>EXPENSES</b>                                         |                |
| <b>Pillar 1 - Oral Health Education</b>                 |                |
| Smile Grant                                             | 10 000         |
| Oral Health and Whole Body Health platform              | 10 000         |
| Communications and social media campaign                | 5 000          |
| <b>Pillar 2 - Build Global Leadership and Awareness</b> |                |
| Deliverables                                            | 66 000         |
| Project management                                      | 40 000         |
| <b>Total Expenses</b>                                   | <b>131 000</b> |
| <b>Total Net</b>                                        | <b>10 000</b>  |

## Oral Health Observatory (OHO)

### **Responsible/Committee/Task Team:**

OHO Task Team and Dental Practice Committee

### **Rationale, Background and Need:**

OHO is a global initiative established in 2015 to collect standardized oral health data through a mobile application used in dental clinics. The project gathers information on oral health, quality of life, health behaviours, and related factors from patients and dentists. To date, more than 12 countries have participated, with data collected from over 10,000 patients. The findings support evidence-based oral health policies and advocacy activities in collaboration with National Dental Associations (NDAs). In 2026, the project entered a new phase with the publication of a 10-year impact report and the development of a long-term strategy to guide future priorities, implementation, and global impact, supporting the project's work going forward, including in 2027.

### **Objectives:**

- Conduct data collection in a new country to expand the global dataset on oral health services, patients' oral health, oral health-related quality of life, and related indicators.
- Organize workshops for NDAs in participating countries to support the development of oral health policies and advocacy activities.
- Organize an OHO Summit at WDC 2027 in Mumbai, bringing together participating NDAs, WHO, and policymakers to support the interpretation and use of OHO data.
- Leverage the data analysis framework developed in 2026 to support NDAs in analyzing collected data.
- Increase the number of countries and regions using the OHO application to collect oral health data at the dental clinic level and strengthen global policy and advocacy efforts.

### **Action Plan:**

- Continue implementing the long-term strategic plan developed in 2026.
- Roll out data collection in a new country and complete data collection and analysis in selected countries.
- Organize in-person workshops and an OHO Summit with participating countries, NDAs, WHO, and policymakers to support data interpretation, analysis, and the development of policy and advocacy activities.
- Support NDAs in using the data analysis framework developed in 2026 to independently analyze data for policy development and advocacy.
- Continue supporting and promoting policy and advocacy achievements in countries that have completed data collection and analysis.

### **Outcome:**

- Use of OHO data to inform oral health policies, advocacy campaigns, and service improvement at national and global levels.
- Strengthened national surveillance systems to provide reliable oral health data for policymaking.
- Continued expansion and increased visibility of OHO as a key driver of national and global oral health advocacy.
- Support the Vision 2030 surveillance indicator.

**Strategy – Focus area:** Knowledge exchange / Advocacy

| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
| Partner funding       | 125 000        |
| <b>Total Income</b>   | <b>125 000</b> |
|                       |                |
| <b>EXPENSES</b>       |                |
| Project management    | 40 000         |
| Deliverables          | 64 000         |
| Communications        | 10 000         |
| <b>Total Expenses</b> | <b>114 000</b> |
| <b>Total Net</b>      | <b>11 000</b>  |



## Oral Health for an Ageing Population (OHAP)

### **Responsible/Committee/Task Team:**

OHAP Task Team and Public Health Committee

### **Rationale, Background and Need:**

The OHAP project was launched in 2015 to strengthen the role of the oral health community in promoting healthy ageing in response to the rapid ageing of the global population. The project advocates for integrating oral health into broader disease policies and healthy ageing frameworks.

Over the past decade, FDI has developed a wide range of evidence-based resources and practical tools for oral health professionals, community health workers, policymakers and patients, including guidance on frailty and oral function for older adults. In 2027, the project will continue to advance the integration of oral health into long-term care systems to improve equitable access for older adults.

### **Objectives:**

- Strengthen the integration of oral health into long-term care and promote community-based oral health programmes for older adults.
- Continue promoting screening methods, including the frailty guide to assess oral frailty among older adults in community care settings.
- Promote multidisciplinary collaboration to identify individuals at risk of oral frailty and provide patient-tailored, integrated care to prevent oral diseases.
- Promote a life-course approach to oral health in ageing populations.
- Expand the use of resources developed in previous phases by increasing adoption across countries and regions, thereby sustaining global momentum for improving oral health among older people.

### **Action Plan:**

- Compile and promote case studies of community-based programmes that improve older adults' access to oral healthcare and support progress towards universal health coverage.
- Continue raising awareness and increasing uptake of the Frailty Guide among young dentists and oral health professionals to support earlier identification of oral health risks and strengthen preventive, person-centered care.
- Continue promoting the use of the exercise brochure to help maintain oral function among older adults, supporting healthy ageing and improved quality of life.
- Further disseminate the advocacy guide developed in 2025 to support National Dental Associations and oral health advocates in engaging policymakers and stakeholders on integrating oral health into healthy ageing policies.
- Organize a session at the 2027 World Dental Congress to share project progress, new resources, and global best practices related to healthy ageing and oral healthcare for older adults.

### **Outcome:**

- Improved oral health, oral function, and quality of life among older adults.
- Increased awareness of the importance of oral health in healthy ageing, alongside stronger multidisciplinary collaboration in the care of older adults.
- Enhanced integration of oral health into long-term care systems, community settings and healthy ageing policies.
- Strengthened knowledge sharing, capacity building, and global collaboration on oral healthcare for ageing populations.

**Strategy – Focus area:** Knowledge exchange/Advocacy

| Chf                   | Amount        |
|-----------------------|---------------|
| <b>INCOME</b>         |               |
| Partner funding       | 94 000        |
| <b>Total Income</b>   | <b>94 000</b> |
|                       |               |
| <b>EXPENSES</b>       |               |
| Project management    | 40 000        |
| Deliverables          | 43 000        |
| Communications        | 3 000         |
| <b>Total Expenses</b> | <b>86 000</b> |
| <b>Total Net</b>      | <b>8 000</b>  |

### Educational Module for Other Healthcare Professionals

**Responsible/Committee/Task Team:**

Public Health Committee

Public Health department

**Rationale, Background and Need:**

Oral healthcare should not be confined to dentists and dental teams alone. A broader range of healthcare professionals must be engaged to effectively promote oral health within communities and take a more active role in disease prevention. Strengthening collaboration across the healthcare workforce ensures consistent, accurate messaging and enhances the reach of oral health promotion efforts.

Equipping non-dental healthcare professionals with foundational oral health knowledge, along with basic skills in screening, assessment, and referral, can significantly expand access to care and improve overall health and well-being at the community level.

To address this need, 15 fact sheets targeting non-dental healthcare professionals have been developed, with three additional fact sheets planned for 2026. These resources provide essential oral health knowledge and practical guidance to support professionals in integrating oral health into their daily practice. To maximize accessibility and usability, the fact sheets have been translated into French, Spanish, and German, and adapted into concise, one-page infographics. The fact sheets are endorsed by eight international organizations representing a range of healthcare professions, which also support the dissemination of these resources. Complementary video materials have been produced in collaboration with the International Pharmaceutical Federation (FIP). A joint webinar held in December 2025 successfully showcased the project and its outputs. Building on this momentum, three additional interprofessional webinars are planned for 2026 in collaboration with FIP, the International Council of Nurses (ICN), and the World Medical Association (WMA).

**Objectives:**

Enhance the global accessibility of the 16 factsheets for other healthcare professionals.

**Action Plan:**

- Strengthen and expand collaboration with FIP, ICN, and WMA.
- Develop comprehensive educational resources for pharmacists, nurses, physicians, and other healthcare professionals, such as a Massive Open Online Course (MOOC) and/or short educational video series.
- Foster interorganizational collaboration by organizing and participating in joint sessions at major professional events and congresses.

**Outcome:**

- Improved interprofessional collaboration and oral health knowledge across professions.
- Improved access to oral disease prevention, education, and timely referrals.

**Strategy – Focus area:** Knowledge exchange/Advocacy

| Chf                   | Amount        |
|-----------------------|---------------|
| <b>INCOME</b>         |               |
| Partner funding       | 75 000        |
| <b>Total Income</b>   | <b>75 000</b> |
|                       |               |
| <b>EXPENSES</b>       |               |
| Project Management    | 15 000        |
| Deliverables          | 56 000        |
| <b>Total Expenses</b> | <b>71 000</b> |
| <b>Total Net</b>      | <b>4 000</b>  |

### Web Application and Platform Maintenance

**Responsible/Committee/Task Team:**

Public Health department

**Rationale, Background and Need:**

FDI has developed, and is currently developing, a range of web applications and platforms available on the FDI website for NDAs and other end users. To ensure that these online tools remain fully functional and secure, they require ongoing maintenance after project completion by the external agencies that developed them. The necessary updates include core updates, plugin updates, security updates, bug fixes, and QA testing. This budget form provides a summary of the FDI web applications and platforms requiring maintenance and hosting after project completion, with no additional partner income anticipated in 2027.

**Objectives:**

Ensure that web applications and platforms developed by FDI remain in good working order and can continue to be used by NDAs and other end-users via the FDI website. Including:

- ONCOLlab Mobile App
- Digital Cleft Care – Digital Workflows
- Others as needed on a case-by-case basis

**Action Plan:**

- Purchase maintenance packages with external agencies.
- Cover ad-hoc costs for tool maintenance with external agencies.
- Ensure hosting costs

**Outcome:**

Web applications and platforms on the FDI website are maintained by external agencies to ensure their functionality.

**Strategy – Focus area:** Knowledge exchange

| Chf                                                                                | Amount         |
|------------------------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                                      |                |
|                                                                                    |                |
| <b>Total Income</b>                                                                | <b>0</b>       |
|                                                                                    |                |
| <b>EXPENSES</b>                                                                    |                |
| Maintenance packages and ad-hoc costs for web application and platform maintenance | 16 000         |
| <b>Total Expenses</b>                                                              | <b>16 000</b>  |
| <b>Total Net</b>                                                                   | <b>-16 000</b> |

### Recognition Programme

**Responsible/Committee/Task Team:**

Council

**Rationale, Background and Need:**

Leveraging the value of FDI's name and brand by allowing partners-controlled use of the FDI logo in association with their products. A three-year contract is secured for Sri Lanka with the objective to expand to a wider Asia.

**Objectives:**

To increase FDI's unrestricted income.

**Action Plan:**

- Offer companies the use of FDI's name and logo under strict conditions.
- Work with Science Committee to ensure the efficacy of the product or service including an analysis of the product contents including an assessment of any scientific studies.
- Science Committee approves any supporting statement used to accompany the FDI logo.

**Outcome:**

Increased funding for FDI

**Strategy – Focus area:** Knowledge exchange



| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
|                       |                |
| <b>Total Income</b>   | <b>400 000</b> |
|                       |                |
| <b>EXPENSES</b>       |                |
|                       |                |
| <b>Total Expenses</b> | <b>0</b>       |
| <b>Total Net</b>      | <b>400 000</b> |

### Oral Health Innovation & Breakthrough Pilot Project - NEW

**Responsible/Committee/Task Team:**

Oral Health Innovation & Breakthrough Task Team

**Rationale, Background and Need:**

Innovation is transforming oral health by creating more accessible and affordable solutions through a diverse ecosystem of universities, startups, incubators, and informal settings. This variety of innovation sources requires organized scouting mechanisms to identify and nurture promising ideas at every stage, including those emerging outside traditional pathways. The FDI Congress could serve as an ideal testing ground where innovators showcase early-stage concepts to practitioners and industry leaders while facilitating crucial connections with investors. By bringing together all key stakeholders in one venue, this global platform has the potential to accelerate the adoption and scaling of breakthrough oral health solutions

**Objectives:**

The project explores opportunities to potentially integrate an innovation component into the FDI World Dental Congress, building on Indian Dental Association (IDA)'s existing initiatives. The proposed "Innovation Nexus" concept would showcase prototypes, feature tech demos, and host "Meet the Innovators" sessions to recognize breakthrough technologies. This platform could serve as a bridge connecting innovators with industry partners, investors, and funding sources to help bring cutting-edge oral health solutions to market faster.

**Action Plan:**

- Support and pilot the 2027 implementation within WDC27, hands-in-hands with IDA
- Guide the 2027 Project Selection and maintain consistent and appropriate use of the FDI brand throughout
- Analyze the model possibilities in view of a possible annual roll-out.

**Outcome:**

- An Innovation Programme is developed alongside the WDC27 programme
- A sustainable business model is developed in view of a long-term implementation

**Timeline:**

June 2026: Task Team Creation

September – December: Collaboration Framework Definition

January – October 2027:

November – December 2027: final report and business model recommendations

**Strategy – Focus area:** Knowledge Exchange /Innovation

| Chf                            | Amount         |
|--------------------------------|----------------|
| <b>INCOME</b>                  |                |
|                                |                |
| <b>Total Income</b>            | <b>0</b>       |
|                                |                |
| <b>EXPENSES</b>                |                |
| Task Team onsite participation | 12 000         |
| <b>Total Expenses</b>          | <b>12 000</b>  |
| <b>Total Net</b>               | <b>-12 000</b> |

### FDI Oral Health Campus

**Responsible:**

Congress & Continuing Education department

**Rationale, Background and Need:**

An FDI Oral Health Campus has been set up, which is a customized e-learning platform and an opportunity for FDI to communicate more broadly about its activities and projects as well as reach a broader audience base. The platform has been set up through Dental Tribune International (DTI) and provides an unparalleled opportunity for currently more than 250,000 dentists worldwide to meet other dentists and their team members online in order to learn.

The e-learning courses can be ADA CERP accredited and the platform will feature live and archived webinars as well as discussion forums.

**Objectives:**

- Leverage the FDI Oral Health Campus to provide credited e-learning opportunities that extend the reach of FDI's projects and activities.
- This budget form is for the maintenance of the oral health campus. All the webinars and sessions will be outlined in their respective budget forms

**Action Plan:**

All webinars will be outlined in different budget forms

**Outcome:**

The oral health campus is up and running

**Strategy – Focus area:** Knowledge exchange

| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
|                       |                |
| <b>Total Income</b>   | <b>0</b>       |
|                       |                |
| <b>EXPENSES</b>       |                |
| Maintenance fee       | 10 000         |
| <b>Total Expenses</b> | <b>10 000</b>  |
| <b>Total Net</b>      | <b>-10 000</b> |

### Young Dentists Forum

**Responsible/Committee/Task Team:**

Education Committee & Young Dentists Community Task Team  
Congress & Continuing Education department

**Rationale, Background and Need:**

The first edition of the Young Dentist Forum was launched in Sydney in 2023 during the World Dental Congress and has taken place within each edition of the FDI World Dental Congress since then.

The forum presents a unique opportunity for young professionals to engage on topics of interest for their generation. The programme includes an internationally recognized speaker and also give a chance to an emerging speaker, selected via an NDA contest, to present in this unique international setting.

This project has been supported with industry funding for the past four years and we are actively working on continuing to engage with industry.

**Objectives:**

- Encourage young dentists (graduates of less than 10 years) to attend the World Dental Congress
- Organize lectures and presentations of interest to them
- Invite young speakers to give them opportunities to lecture in front of large audience
- Invite good young lecturers to be future Congress speakers
- Showcase opportunities for young professionals to become active in the FDI
- Offer Young Dentist the opportunity to create and nurture their social and professional network
- Nurture future leaders of our profession

**Action Plan:**

- Organize at minimum a special 2.5-hour session within the scientific programme of the World Dental Congress called Young Dentists Forum
- Invite at least one international speaker and two emerging speaker for the session:
- Invite speakers, FDI and industry representatives to participate in a panel discussion
- Focus on topics that may interest young dentists such as technology and practice management related
- Selection of speakers via an NDA contest.
- Offer networking activities
- Build awareness on the forum via a dedicated promotion plan
- Broadcast the forum on the FDI Oral Health Campus

**Outcome:**

- Attract more attendees to the World Dental Congress especially among the younger generation of dentists
- Nurture the future leaders of our profession
- Nurture future congress speakers

**Timeline:** Forum is scheduled to be held once a year during FDI World Dental Congress and will therefore take place between 21 and 24 October 2027 in Mumbai

**Strategy – Focus area:** Knowledge exchange

| Chf                    | Amount        |
|------------------------|---------------|
| <b>INCOME</b>          |               |
| Partner funding        | 25 000        |
| <b>Total Income</b>    | <b>25 000</b> |
|                        |               |
| <b>EXPENSES</b>        |               |
| Speaker logistics      | 7 000         |
| Networking & Promotion | 9 000         |
| Broadcasting           | 3 000         |
| Project management     | 6 000         |
| <b>Total Expenses</b>  | <b>25 000</b> |
| <b>Total Net</b>       | <b>0</b>      |



## Regional Congress

### **Responsible/Committee/Task Team:**

Education Committee

Congress & Continuing Education department

### **Rationale, Background and Need:**

The size and scope of the FDI World Dental Congress limits its potential implementation in certain countries region. This creates a gap in the delivery of regional / global educational programme for general practitioners. The 2025 piloted regional congresses have demonstrated that a smaller regional format can bridge this gap and that for FDI members and regional dentists, an annual regional congress provides valuable opportunities for collaboration, professional engagement, and access to high-quality international education and innovation.

### **Objectives:**

Re-establish the regional congresses in the FDI continuing education calendar and develop a set of piloting tools to facilitate local implementations.

### **Action Plan:**

- Implement digital tools to facilitate registration reporting, web and digital promotion
- Support the scientific programme development
- Create a regional promotion plan
- Deliver one successful edition in 2027 and assign destinations for 2028 and 2029

### **Outcome:**

- Offer additional continuing education opportunities at regional level
- Offer NDAs an additional and more affordable opportunity to collaborate within FDI congress programme
- Raise awareness on FDI knowledge exchange mission
- Offer additional networking opportunities for dentists at regional level
- Collect data, test digital management systems and nurture the regional congress collaboration framework

### **Timeline:**

- Call for Co-hosting proposals: February 2026
- 2027 Co-host appointment: June 2026
- Announcement and preparatory work: from July 2026
- Delivery date: between June and December 2027 – depending on selected co-host

**Strategy – Focus area:** Knowledge exchange

| Chf                            | Amount        |
|--------------------------------|---------------|
| <b>INCOME</b>                  |               |
| Organization flat fee          | 25 000        |
| Registration variable fee      | 5 000         |
| Software access                | 5 000         |
| ADA-CERP accreditation package | 2 000         |
| <b>Total Income</b>            | <b>37 000</b> |
|                                |               |
| <b>EXPENSES</b>                |               |
| Promotion                      | 3 000         |
| Organization & Software        | 13 000        |
| FDI Booth branding             | 1 000         |
| Project management             | 10 000        |
| <b>Total Expenses</b>          | <b>27 000</b> |
| <b>Total Net</b>               | <b>10 000</b> |

## FDI World Dental Congress 2027 Mumbai

### Scenario 1 – No Hybridization of the World Dental Parliament (WDP)

#### **Responsible/Committee/Task Team:**

Education Committee

Congress & Continuing Education department

#### **Rationale, Background and Need:**

The FDI is organizing the WDC in conjunction with the Indian Dental Association (IDA). The organization is based on a franchise model in which IDA is responsible of all logistical aspects. The Scientific Programme is jointly organized by FDI and IDA.

The budget includes a franchise fee of 500 KCHF and an additional amount of 425 KCHF to be used according to FDI's needs to cover promotion, organization and FDI officials 'travel costs.

#### **Objectives:**

Promote the congress internationally and attract international participants. Organize the FDI business parliament meetings and support the LOC with organizational aspects including the Scientific Programme

#### **Action Plan:**

FDI HO will design and share with NDAs all relevant material, such as congress flyers and preliminary programme. Jointly with IDA, FDI HO will also produce a sponsorship & exhibition guide. Direct promotion will be done by congress staff at international tradeshow and on all FDI channels.

#### **Outcome:**

- Provide knowledge exchange to all participants of the congress
- Provide networking opportunities to all members
- Deliver a state-of-the-art scientific programme, including ADA CERP Credit
- Provide industry with a platform to interact with FDI members
- Increased awareness of FDI projects

#### **Timeline:**

Promotion June 2026 to October 2027

Organization March 2026 to November 2027

**Strategy – Focus area:** Knowledge exchange/Advocacy

| Chf                                                                                   | Amount         |
|---------------------------------------------------------------------------------------|----------------|
| <b>INCOME</b>                                                                         |                |
| IDA Franchise Fee                                                                     | 500 000        |
| IDA Promotion, Travel & Organization support                                          | 425 000        |
| Sponsorship social programme                                                          | 70 000         |
| <b>Total Income</b>                                                                   | <b>995 000</b> |
| <b>EXPENSES</b>                                                                       |                |
| <b>Promotion</b>                                                                      |                |
| Printed Material & goodies                                                            | 10 000         |
| Digital Promotion & special flash sales                                               | 20 000         |
| Tradeshow participation                                                               | 95 000         |
| <b>Travel Expenses FDI officials</b>                                                  |                |
| Transportation                                                                        | 100 000        |
| Accommodation                                                                         | 28 000         |
| Per diem                                                                              | 38 000         |
| Visas                                                                                 | 5 000          |
| <b>Organization</b>                                                                   |                |
| Freight & Congress material                                                           | 10 000         |
| Speaker platform – adjustment to local host system                                    | 2 000          |
| ADA CERP & CE Platform                                                                | 10 000         |
| IDJ Abstract supplement                                                               | 10 000         |
| Site visits                                                                           | 10 000         |
| Local host (full trip) & congress director (+2nights & per diem) participation to MYM | 2'000          |
| CE Directors travel to MYM for scientific programme kick-off with local host          | 15 000         |
| FDI booth                                                                             | 6 000          |
| <b>Social Events</b>                                                                  |                |
| Gala dinner officials                                                                 | 6 000          |
| General Assembly lunch                                                                | 30 000         |
| VIP Reception                                                                         | 25 000         |
| NLO Lunch                                                                             | 15 000         |
| <b>Other expenses</b>                                                                 |                |
| Congress bids, legal fees, R&D                                                        | 7 000          |
| Staff costs                                                                           | 338 000        |
| <b>Total Expenses</b>                                                                 | <b>782 000</b> |
| <b>Total Net</b>                                                                      | <b>213 000</b> |

## World Dental Parliament Hybridization – 6-Days version

### Budget Scenario 2

#### **Responsible/Committee/Task Team:**

World Dental Parliament Special Committee

#### **Rationale, Background and Need:**

Offer a way to facilitate remote participation simultaneously alongside face-to-face participation for FDI delegates in the Open Forum, General Assembly and NLO Forum in situations in which in-person attendance is not feasible or possible for some individuals.

Proposal based on the usual 6-day Parliament programme.

#### **Objectives:**

Offer an opportunity to FDI members appointed representatives who cannot join the World Dental Parliament (WDP) 2027 in Mumbai in person to:

- Follow the presentations via a livestream
- Contribute to the programme as remote speaker if needed
- Participate to the Q&A, with the possibility to appear in video to ask questions / make comments.
- Offer the same languages selection options as for in-person participants
- Since voting was not planned for this pilot, the cost of voting will be built in if the pilot proceeds to Phase II.

#### **Action Plan:**

- September – December 2026: Supplier contracting
- January – March 2027: platform set-up and testing
- From March 2027: Parliament registrations open
- April 2027: technical site-visit
- June 2027: Remote participants guidelines ready
- August 2027: General Assembly Speaker online briefing and training
- September 2027: Remote participants online preparatory webinar
- 16-17 October 2027: onsite pre-testing
- 19 – 24 October 2027: World Dental Parliament 2027

**Timeline:** September 2026 – October 2027

**Strategy – Focus area:** Membership and Knowledge Exchange

| Chf                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Amount          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>INCOME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| <b>Total Income</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>0</b>        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| <b>EXPENSES</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| Extra day of General Assembly room rental for the testing on 17 October                                                                                                                                                                                                                                                                                                                                                                                       | 20 000          |
| Extra day of General Assembly standard AV equipment and team for the testing on 17 October                                                                                                                                                                                                                                                                                                                                                                    | 5 500           |
| Platform for Live-Broadcasting, including: <ul style="list-style-type: none"> <li>- participant registration and individual password-protected access</li> <li>- live-stream of presentation and speaker / Q&amp;A session</li> <li>- language selection (FR/ENG/GE/SP/JP)</li> <li>- possibility for remote participant to ask question</li> <li>- guaranteed access for participants from countries with platform limitation (China, Iran, etc).</li> </ul> | 25 000          |
| Video Recording Equipment                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5 500           |
| Technicians, Project Management & staff Travel                                                                                                                                                                                                                                                                                                                                                                                                                | 35 000          |
| Wired Internet connection 30Mbps                                                                                                                                                                                                                                                                                                                                                                                                                              | 4 000           |
| Back-up wired internet connection 30Mbps                                                                                                                                                                                                                                                                                                                                                                                                                      | 4 000           |
| Technical site visit - Technical provider<br>(to be scheduled at same time as the voting test site visit to avoid cost for FDI Congress and Governance Director)                                                                                                                                                                                                                                                                                              | 7 000           |
| Contingency                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 21 000          |
| <b>Total Expenses</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>127 000</b>  |
| <b>Total Net</b>                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>-127 000</b> |

## World Dental Parliament Hybridization – 5-Days version

### Budget Scenario 3

#### **Responsible/Committee/Task Team:**

World Dental Parliament Special Committee

#### **Rationale, Background and Need:**

Offer a way to facilitate remote participation simultaneously alongside face-to-face participation for FDI delegates in the Open Forum, General Assembly and NLO Forum in situations in which in-person attendance is not feasible or possible for some individuals.

Proposal based on a revised 5-day Parliament programme. Please refer to the World Dental Parliament Special Committee report in the General Assembly binder for the simulated 5-day parliament schedule.

#### **Objectives:**

Offer an opportunity to FDI members appointed representatives who cannot join the World Dental Parliament (WDP) 2027 in Mumbai in person to:

- Follow the presentations via a livestream
- Contribute to the programme as remote speaker if needed
- Participate to the Q&A, with the possibility to appear in video to ask questions / make comments.
- Offer the same languages selection options as for in-person participants
- Since voting was not planned for this pilot, the cost of voting will be built in if the pilot proceeds to Phase II.

#### **Action Plan:**

- September – December 2026: Supplier contracting
- January – March 2027: platform set-up and testing
- From March 2027: Parliament registrations open
- April 2027: technical site-visit
- June 2027: Remote participants guidelines ready
- August 2027: General Assembly Speaker online briefing and training
- September 2027: Remote participants online preparatory webinar
- 16-17 October 2027: onsite pre-testing
- 18 – 23 October 2027: World Dental Parliament 2027

**Timeline:** September 2026 – October 2027

**Strategy – Focus area:** Membership and Knowledge Exchange



| Chf                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Amount                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| <b>INCOME</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                   |
| <b>Total Income</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>0</b>                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                   |
| <b>EXPENSES</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                   |
| Extra day of General Assembly room rental for the testing on 17 October                                                                                                                                                                                                                                                                                                                                                                                       | N/A<br>Already in congress budget |
| Extra day of General Assembly standard AV equipment and team for the testing on 17 October                                                                                                                                                                                                                                                                                                                                                                    | N/A<br>Already in congress budget |
| Platform for Live-Broadcasting, including: <ul style="list-style-type: none"> <li>- participant registration and individual password-protected access</li> <li>- live-stream of presentation and speaker / Q&amp;A session</li> <li>- language selection (FR/ENG/GE/SP/JP)</li> <li>- possibility for remote participant to ask question</li> <li>- guaranteed access for participants from countries with platform limitation (China, Iran, etc).</li> </ul> | 25 000                            |
| Video Recording Equipment                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5 500                             |
| Technicians, Project Management & staff Travel                                                                                                                                                                                                                                                                                                                                                                                                                | 35 000                            |
| Wired Internet connection 30Mbps                                                                                                                                                                                                                                                                                                                                                                                                                              | 4 000                             |
| Back-up wired internet connection 30Mbps                                                                                                                                                                                                                                                                                                                                                                                                                      | 4 000                             |
| Technical site visit - Technical provider<br>(to be scheduled at same time as the voting test site visit to avoid cost for FDI Congress and Governance Director)                                                                                                                                                                                                                                                                                              | 7 000                             |
| Contingency                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 16 500                            |
| <b>Total Expenses</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>97 000</b>                     |
| <b>Total Net</b>                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>-97 000</b>                    |

### Master Continuing Education Programme

**Responsible/Committee/Task Team:**

Regional Continuing Education Task Team  
Congress & Continuing Education department

**Rationale, Background and Need:**

The regional continuing education strategy reassessment conducted in 2022 has showcased a need for a CE course standardized offer, applicable to all regions. The Master CE Programme on Aesthetic and Adhesive Dentistry was created to fill this gap and successfully piloted between 2024 and 2026. The programme is set to continue a long-term basis.

**Objectives:**

Co-host hands-on modules with FDI members in as many countries as possible and deliver state-of-the-art practical training to general practitioners.

**Action Plan:**

- Identify FDI members to co-host one or several modules of the programme
- monitor and adjust the scientific proposal to embrace latest innovation in the field
- Curate the partnership with industry supporters and ensure equipment delivery
- Promote the courses, monitor and measure the delegate experience

**Outcome:**

- Complement FDI educational offer with a hands-on globally accessible programme
- Offer additional continuing education opportunities at regional level
- Offer NDAs a turnkey continuing-education alternative on top the regional tailor-made CE courses
- Raise awareness on FDI knowledge exchange mission
- Offer ADA-CERP courses, acknowledged by FDI in the regions
- Offer additional networking opportunities for dentists at regional level

**Timeline:**

NDA selection and partnership: for each course – 3-6 months prior course date.

Promotion: for each course – 2 months prior course date

**Strategy – Focus area:** Knowledge exchange

| Chf                          | Amount        |
|------------------------------|---------------|
| <b>INCOME</b>                |               |
| Partner funding              | 60 000        |
| Registration Fee share       | 15 000        |
| <b>Total Income</b>          | <b>75 000</b> |
|                              |               |
| <b>EXPENSES</b>              |               |
| Logistics & Course promotion | 50 000        |
| Task Team meeting            | 7 000         |
| Project Management           | 18 000        |
| <b>Total Expenses</b>        | <b>75 000</b> |
| <b>Total Net</b>             | <b>0</b>      |

### CE Accreditation Task Team

**Responsible/Committee/Task Team:**

CE accreditation Task Team  
Congress & Continuing Education department

**Rationale, Background and Need:**

Various entities are currently offering CE /CPD points for healthcare profession training at global and regional level. However, none of the existing system offers a clearly established global dental training certification system, that can be implemented for global training courses but also used as reference for national use.

With its scope of work, FDI can have the credibility and authority to lead and establish education standards. FDI members' activities can be a catalyst at national level and FDI educational activities could also benefit from this additional asset.

**Objectives:**

- Evaluate the needs and opportunities offered by an in-house accreditation system
- Assess implementation feasibility

**Action Plan:**

- Pursue the needs evaluation and market opportunities for FDI to have its own CE accreditation system
- Assess interest and define the value proposition for FDI members
- Define the corresponding business model, including the resources and level of investment needed
- Propose an implementation timeline

**Outcome:**

Present a possible CE Accreditation strategic report by September 2027.

**Timeline:**

June 2026: Task Team creation  
July 2026 – July 2027: Assessment work  
September 2027: Project Proposal

**Strategy – Focus area:** Knowledge exchange

| Chf                   | Amount         |
|-----------------------|----------------|
| <b>INCOME</b>         |                |
| <b>Total Income</b>   |                |
|                       |                |
| <b>EXPENSES</b>       |                |
| Task Team meeting     | 10 000         |
| Project management    | 5 000          |
| <b>Total Expenses</b> | <b>15 000</b>  |
| <b>Total Net</b>      | <b>-15 000</b> |

### Speakers Platform

**Responsible/Committee/Task Team:**

Education Committee  
Congress & Continuing Education department

**Rationale, Background and Need:**

The speaker platform has initially been developed to support the world dental congress speakers' recruitment and management. With the planned expansion of the regional CE Programme, Regional congress and master CE programme, the platform use should be extended to all continuing education activities.

**Objectives:**

Develop and maintain a speaker database for all continuing education activities.

**Action Plan:**

- Set-up a speaker portal for all events
- Track the speaker selection and speaker evaluation in the portal
- Centralize the speaker communication for each event through the system
- Create an overall pool of speakers, to ease selection for all events

**Outcome:**

- Access potential speakers' profile information online at anytime
- Facilitate the speaker selection and management
- Offer the speaker a personalized dashboard with centralized information on his collaboration with FDI
- Support members in their speakers' research

**Timeline:**

Transition to new system: March 2026  
Daily use: from April 2026 – onwards

**Strategy – Focus area:** Knowledge exchange

| Chf                                  | Amount         |
|--------------------------------------|----------------|
| <b>INCOME</b>                        |                |
|                                      |                |
| <b>Total Income</b>                  | <b>0</b>       |
|                                      |                |
| <b>EXPENSES</b>                      |                |
| Annual licence (up to 1000 contacts) | 12 000         |
| <b>Total Expenses</b>                | <b>12 000</b>  |
| <b>Total Net</b>                     | <b>-12 000</b> |



### Young Dentists Community – NEW

**Responsible/Committee/Task Team:**

Young Dentists Community Task Team  
Congress & Continuing Education department

**Rationale, Background and Need:**

The development of the global dental workforce is key to achieving FDI Vision 2030, with young dentists playing a central role in shaping the future of the profession. The annual FDI Young Dentists Forum offers an opportunity to connect with young dentists but the geographical rotation limits FDI reach. A complementary online community approach could create continuous touchpoints with young dentists throughout the year, fostering engagement, mentorship, collaboration, and access to educational and professional opportunities beyond occasional in-person events. By strengthening connections through digital platforms, FDI could better support young professionals while staying responsive to emerging trends and challenges in dentistry

**Objectives:**

- Facilitate Knowledge Sharing & Professional Growth
- Foster a feeling of connection to a larger community
- Increase Exposure to various career opportunities
- Expose Young dentists to diverse perspectives & best practices

**Action Plan:**

- Create a web-based community platform where monthly content can be freely available for young dentists
- Develop and implement educational content, mentoring and networking opportunities through the platform
- Measure engagement and adjust content plan accordingly
- Collaborate with industry to fund the project and co-create certain content streams

**Outcome:**

- Complement FDI educational offer with a specific content for young practitioners
- Offer NDAs a complimentary networking and educational platform for their young members
- Raise awareness on FDI knowledge exchange mission
- Connect young professionals with industry
- Develop new collaboration models, such as mentorship

**Timeline:**

Upon successful enrolment of 4-5 industry partners, the community platform can be launched within 2 months and the content plan developed by the task team can be rolled out over a 3-year period, with monthly activities

**Strategy – Focus area:** Knowledge Exchange

| Chf                             | Amount        |
|---------------------------------|---------------|
| <b>INCOME</b>                   |               |
|                                 |               |
| <b>Total Income</b>             | <b>50 000</b> |
|                                 |               |
| <b>EXPENSES</b>                 |               |
| Platform set-up                 | 20 000        |
| Promotion                       | 5 000         |
| Content / Programme development | 5 000         |
| Project management              | 20 000        |
| <b>Total Expenses</b>           | <b>50 000</b> |
| <b>Total Net</b>                | <b>0</b>      |

## Development

### **Responsible/Committee/Task Team:**

Partnerships & Corporate Relations department

### **Rationale, Background and Need:**

The Development Department supports the organization in securing funding through partnerships, mainly with industry but the aim is to diversify income sources. In 2026 the Council decided to invest in a new fundraising plan.

### **Objectives:**

The objective will be to grow revenue to fund FDI activities. The income should come from a portfolio of corporates, foundations and/or governmental organizations. A new strategy will be developed in 2026/2027, to be implemented in the next 3-4 years.

### **Action Plan:**

1. Retain and grow current partners.
2. Expand & diversify the FDI partner base: focus will be set on the following sectors
  - Dental Industry: remains the core target and natural partner of FDI
  - Industry at large (insurances, bank, etc.)
  - Foundations
  - Others

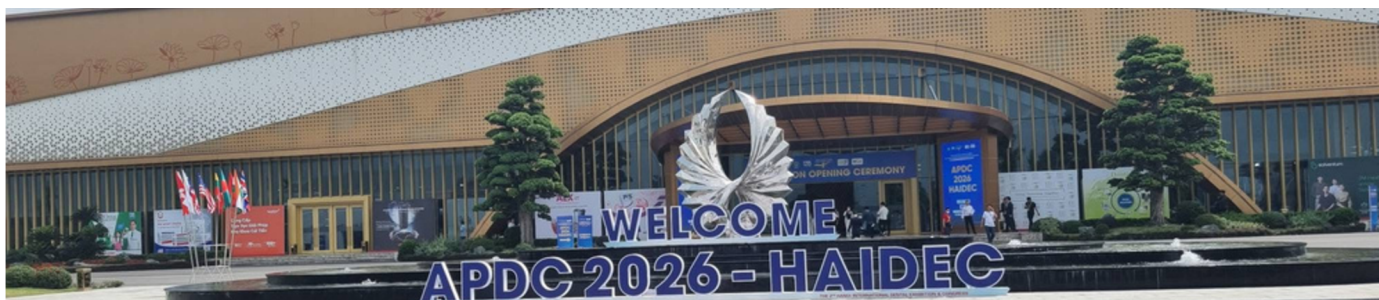
A new position has been created in 2026 to support the fundraising efforts of the organization.

### **Outcome:**

Increase funding for FDI

### **Strategy – Focus area:** All

| Chf                   | Amount          |
|-----------------------|-----------------|
| <b>INCOME</b>         |                 |
| Funding               | 250 000         |
| <b>Total Income</b>   | <b>250 000</b>  |
|                       |                 |
| <b>EXPENSES</b>       |                 |
| Travel & Others       | 50 000          |
| Staff                 | 365 000         |
| <b>Total Expenses</b> | <b>415 000</b>  |
| <b>Total Net</b>      | <b>-165 000</b> |



The 47<sup>th</sup> Asia Pacific Dental Congress 2026 Hanoi was successfully held bringing together National Dental Association Presidents, International Relations Representatives, dental practitioners, traders and allied partners from the Asia Pacific region.



The primary agenda of the congress was the conduct of the APRO Council and Delegates meetings. Representatives from member associations convened to review the activities of the Federation, receive reports from the Executive Committee, discuss matters concerning membership and governance, and deliberate on strategic initiatives that will strengthen the role of APDF/APRO in promoting oral health and organized dentistry throughout the region. Constructive discussions reflected the collective commitment of APDF/APRO members toward enhancing professional standards, supporting advocacy efforts, and addressing common oral health issues within the Asia-Pacific community.



One of the most significant milestones of the congress was the election of officers and council members for the incoming term. Through a transparent and democratic process, member associations exercised their voting rights to select the leaders who will guide the Federation in achieving its strategic goals and further strengthening regional cooperation. The newly elected officers and council members assume the responsibility of advancing the vision and mission of APDF/APRO while fostering camaraderie among member associations.



In addition to the governance activities, the congress featured a scientific program that facilitated the exchange of knowledge, innovations, and best practices in dentistry. The combination of scientific learning and organizational deliberations contributed to the overall success of the congress and reinforced the value of regional cooperation. The successful conclusion of the 47th APDC reflects the continued strength and unity of the Asia Pacific dental community.

Respectfully submitted,  
Dr. Fernando M. Fernandez

## ERO REPORT FOR THE FDI GA PRAGUE 2026

Dear FDI President, dear Councillors, dear FDI Delegates, please let me report about the most relevant achievements and actions of the European Regional Organization (ERO FDI) from September 2025 to June 2026.

ERO had 2 Plenary sessions in Shanghai on Sept 8, 2025, and the second one on April 24/25, 2026, in Sofia, Bulgaria, the next Plenary will be held in Prague on Sept 5, 2026 (morning), WG meetings and Board meeting on Sept 3, 2026.

**REPORT OF THE PRESIDENT - most important issues during the mandate after Shanghai till June 30, 2026, by the ERO Board.**

### **Board meetings after Shanghai:**

- 2025 - 3 meetings - 1 in presence / 2 online
- 2026 - 8 meetings (including this in Sofia) - 1 in presence / 7 online

Meetings in Presence:

Shanghai late Summer 2025

Berlin Oct 30, 2025

Sofia Spring 2026

### **SOFIA ERO PLENARY 2026**

#### **Welcome of guests**

We had the privilege that Nick Sharkov (President-FDI), Enzo Bondioni (CEO FDI) and Duygu Ilhan (Liaison Officer FDI-ERO) attended the assembly.

We were also honoured to welcome the Vice Minister of Health of the Republic of Bulgaria, Petar Gribnev, and the Deputy Mayor of Sofia, Irina Dakova, who delivered special greetings in person. In their addresses, they emphasized the crucial role of oral health within the broader framework of public health and underlined its significance at the highest levels of health policy and leadership. They acknowledged the valuable work being done by dental professionals and international organizations to advance oral health globally.

Warm thanks to the Bulgarian hosts — Dr. B. Milanov, Dr. R. Iliev, Dres. O. and I. Gladkov/a — for their hospitality and excellent organization of the meeting and accompanying events.

#### **Achievements in general built on the work of the Former ERO Board**

- Development of new website, to fill it with information from the Dental World and NDAs, Zoom Meetings FORA with NDA and to increase contacts with FDI Regional Organisations. On June 29, the ERO Board had an online meeting with ARO.
- Social media – ERO is active on Facebook, LinkedIn, Instagram and Twitter - a dedicated Task Team was established.
- Finances are in a good state, and a Finance Task Team was established.
- Results of taskforce of ERO and CED named “Corporate dentistry”.
- The EU Manual of Dental Practice was updated by ERO Countries.
- The Text of the ERO “Ethic code” was approved by the Sofia Plenary unanimously.
- FDI relationship and coordination in management and policy was increased.
- ERO/EDSA award – liaising with EDSA and defining this year’s topics: *The Role of Dentists in Tobacco Cessation and Oral Health for Elderly Patients* – support of Dental Education Survey.
- The ERO Board is organising with EDSA a webinar in October 2026 on dental practice management.
- Re-Establishment of the contacts with ESDE (European Society of Dental Ergonomics).
- AI platform for simultaneous translation has been identified and tested with success. It will be used in the very near future to increase and develop relationships in mother tongue language.



- Main topics of concern emerging from the reports of NDAs: corporate dentistry, education of young dentists, insufficient insurance systems, increase of costs, dental education and practice quality.
- New Members: Irish Dental Association, Association of Dentists in the Republic of SRPSKA, The Republic of SRPSKA Chamber Doctors in Dentistry and Uzbekistan Dental Association / NDAs that left: Belgium: Chambre de Médecine Dentaire (Belgium), Dental Chamber of Kosovo
- Board Members attended at "The Central European Congress in Prague Oct 10, 2025 ; BZAK General Assembly in Berlin Nov 13, 2025; CED Plenary Nov 19, 2025 in Bruxelles; ADF Nov 25, 2025 in Paris ; IDA Annual Congress Dec 9, 2025 in Tel Aviv; Congress of Preventive Dentistry March 19, 2026 in Bucharest; National Congress of Romanian Society of Stomatology March 20, 2026 Bucharest at Romanian Parliament with FEDCAR President; ADEE ERO CED FEDCAR Meeting on education of the future in Dentistry Feb 25/26, 2026 Copenhagen; GC celebrating 105 anniversary and opening a new factory March 25, 2026 Bruxelles; ERO Plenary Sofia April 24,25, 2026; Balkan Stomatological Society May 7-9, 2026 Thessaloniki, Greece; Szeged Symposium May 12, 2026 ; CED Meeting May 21-23, 2026 Limassol; First Georgian Dental Innovation Forum, Tbilisi May 29/30, 2026 ; BaSS June 12/13, 2026 Larnaca; Meeting at the Head Quarters of FDI June 16, 2026 Geneva.

#### Working groups:

- **Ageing population** – toothbrushing app on ERO website [www.erodental.org](http://www.erodental.org) and poster in preparation
- **Relations between dental practitioners and universities** – Several projects: Inter professional education and collaborative practice/the procedure of specialization/Organization and regulation of orthodontic specialization in the ERO member countries/Collaboration in bridging theory and practice – several articles have been published
- **WG Oral Health and General Health** – a short guide to the relevant themes and ideas on how to support ideas and advocacy for better integration and the move to prevention of the risk factors of dental disease/integration of oral health care into primary health care/preventive oral care and its funding
- **Liberal Dental Practice** – relaunching survey on corporate dentistry/dental chains – a survey to find out what younger dentists preferably chose as working structure and a survey on advertising practices.
- **Integration** - unification of undergraduate education, according to education standards and educational programs; approximate equalization of requirements for postgraduate education in Eastern European countries and approximation to the European or world standard of certification and accreditation; ensuring the widespread implementation of preventive programs, educating the public, especially children of pre-preschool and school age, governmental preventive programs, responsible attitude to oral health.
- **Continuing medical education in dentistry** - survey on the future needs of undergraduate dental students and another one on theoretical and practical gaps in training and how deficits can be remedied.
- **Dental Team** – digitalisation of dentistry - survey on continuing education for dental assistants – survey regarding increasing bureaucracy in dentistry.
- **Digitalization in dentistry** – E-Health - Artificial Intelligence – survey on the topic of "Basic education in digital dentistry in dental courses in Europe/Tele dentistry – Tele consultation/definition of digital dentistry – position paper of the use of AI in dentistry.

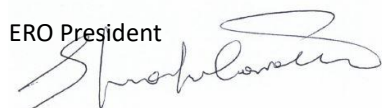
#### ERO Board is composed as follows:

Edoardo Cavallé – President  
 Paula Perlea – President-elect  
 Doris Seiz – Secretary General  
 Oleg Gladkov – Councillor  
 Ariel Slutsky – Councillor

ERO Board is very grateful to the FDI, namely to the President, Nikolai Sharkov, the Executive Director, Enzo Bondioni and to all FDI Office staff for excellent cooperation and support during the whole year and incoming future.

On Behalf of ERO Board

ERO President



Dr Edoardo Cavallé

Monza, June 30, 2026

## FDI General Assembly Binder 2026

### Oral Health Foundation

Over the last year, the Oral Health Foundation has continued to advance its mission of improving oral health and wellbeing for everybody. Guided by our Strategy to 2030, we have focused on strengthening prevention, reducing inequalities, and embedding oral health more firmly within wider health systems and policy discussions.

A major milestone this year was the 50th anniversary of Smile Month, the UK's largest and longest-running oral health campaign. To mark the occasion, we launched a landmark report, *From Treatment to Prevention*, examining the progress made in oral health over the past five decades and exploring the actions needed to improve outcomes over the next fifty years.

The report brought together evidence, expert opinion and public health insight to highlight the importance of prevention-focused healthcare systems, earlier intervention, improved oral health literacy and greater integration between oral health and general health. It also identified practical measures that governments, health services, professionals and communities can take to reduce the burden of oral disease and improve quality of life.

To support this vision, we launched the Prevention Pledge, a call-to-action encouraging organisations, professionals and policymakers to place prevention at the centre of future oral health strategies. The initiative was launched at a special anniversary event in London, bringing together leaders from dentistry, healthcare, education, industry and public policy to discuss the future of oral health and the collective action required to deliver lasting change.

Smile Month continued to mobilise thousands of organisations across the dental, healthcare, education and community sectors. The campaign generated thousands of downloads of educational resources and inspired hundreds of community-based activities, helping to raise awareness of the importance of good oral health and healthy behaviours among people of all ages.

Throughout the year, we have continued to champion the integration of oral health within wider healthcare pathways. Building on growing evidence linking oral health to systemic



conditions, we have increasingly focused on opportunities to embed oral health within prevention and management programmes for chronic diseases, particularly diabetes. We believe oral health must become a routine part of conversations about overall health and wellbeing, rather than being treated in isolation.

Our advocacy work has continued at both national and international levels. Through our ongoing involvement with the Platform for Better Oral Health in Europe, we have supported efforts to ensure oral health remains visible within wider health policy discussions, particularly around non-communicable diseases, healthy ageing and health inequalities.

Mouth Cancer Action Month remains one of our most important public health initiatives. The campaign, held in November, continues to raise awareness of the signs and symptoms of mouth cancer, encouraging earlier detection and improving understanding of risk factors among both the public and healthcare professionals.

The Oral Health Foundation's educational programmes and resources continue to reach communities across the world. Our materials are now used in more than 60 countries, while our website, digital channels and partnerships help millions of people access trusted, evidence-based oral health information every year.

Our Product Accreditation programme remains a cornerstone of our work, supporting consumer confidence in oral healthcare products through independent scientific assessment. More than 1,000 products worldwide have now successfully completed the programme.

As an independent charity, we remain grateful to our trustees, staff, volunteers, supporters and partners whose commitment makes our work possible. By working together across professions, sectors and countries, we can continue moving from treatment towards prevention and create a future where everybody can enjoy the benefits of a healthy mouth.

For partnerships or collaboration, contact George Eracleous: [georgios@dentalhealth.org](mailto:georgios@dentalhealth.org).

# iADH

International Association  
for Disability & Oral Health

## 2025-2026

### REPORT



The International Association for Disability and Oral Health (iADH), and its more than 7000 members, remains steadfast in its mission to promote equitable, high-quality oral healthcare for individuals with disabilities. iADH bridges systemic gaps in dental care through global collaboration in research, education, and advocacy: enhancing quality of life for people with special healthcare needs.

## Congress & Fellowship Recognition

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In 2026, iADH will resume its biennial international congress, a cornerstone event uniting members from across the globe. The 25th iADH Congress will be held in Dublin, Ireland (August 20–22), gathered leading experts in Special Care Dentistry under the theme: **Inclusion Health: Prioritizing, Diversity, Equity and Oral Health**. Over 500 participants from more than 40 countries are expected to attend.

The third cohort of iADH Fellowship recipients has been finalized, and they will be awarded their Fellowship Diplomas during the upcoming congress. This initiative underscores iADH's ongoing commitment to elevating professional standards and honoring leadership in Special Care Dentistry.

## Education & Innovation

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In 2025, iADH launched a webinar on Qualitative Research on Disability organized by the Research Committee. The session featured two distinguished scholars — **Professor Alison Dougall and Professor Sasha Scambler** — both of whom have contributed substantially to qualitative methodology, disability-inclusive research, and epistemological debates in health sciences. Their combined perspectives offered attendees a rich, grounded, and deeply reflective introduction to qualitative inquiry, particularly within vulnerable and special care populations.

This webinar attracted over 150 registrants from 30 countries, offering practical insights into inclusive, interdisciplinary oral health research. Strong engagement confirmed members' appetite for accessible, applied learning opportunities. Both series will continue in 2026 with expanded themes including virtual reality, inclusive curricula, and digital ethics in oral health.

## Research & Clinical Tools

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Research is a pillar of iADH's mission. A major milestone was the release of the validated iADH Universal Case-Mix Tool, which offers a standardized, inclusive approach to assessing patient complexity in Special Care Dentistry. The iADH has developed and circulated a Web App to facilitate its implementation. This WebApp (uCMT App) can be accessed via this link:

<https://play.google.com/store/apps/details?id=com.penta.iadhmixtool&hl=en-US&pli=1>

To strengthen international research collaboration, iADH is developing a networked research infrastructure, enabling clinical and academic centres worldwide to connect via a centralized database for shared protocols, data harmonization, and joint studies.

To date more than 70 research groups are currently registered. This provides a unique platform for launching multicenter studies and fostering international collaborative research.

On the advocacy front, former iADH Chair Dr. Denise Faulks represented the association at a high-level policy meeting in Brussels, successfully advocating for the inclusion of disability-focused oral health priorities within emerging European oral health strategies. Follow-up consultations are continuing throughout 2026 as part of the European Oral Health Action Plan. Furthermore, iADH has officially applied for membership in the WHO Disability Health Equity Network. These collaborative milestones significantly strengthen the association's capacity to align clinical, academic, and policy initiatives globally

At the start of 2026, iADH began actively updating its vision and mission statements to ensure they remain relevant and impactful. Drawing on valuable feedback gathered from our members, the finalized statements will be officially presented at the 25th iADH Congress in Dublin

## Recognition and Systemic Change

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iADH continues to partner with Oral-B to launch the Disability Champions Award Programme. This initiative recognizes dental practices across Europe that demonstrate excellence in accessibility and inclusive service delivery.

Together, iADH and Oral-B are advancing systemic change in how dental care is delivered to individuals with disabilities and their caregivers. The recent project of this partnership is the development e-learning module of Autism and Oral Health published in the Wiley Oral Health Knowledge Hub for Autism.

## Looking Ahead

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In 2026 and beyond, iADH will continue to expand its global network, strengthen its research and training infrastructure, and lead advocacy efforts to ensure that the voices of people with disabilities are central in oral health policy. The next 25<sup>th</sup> iADH conference which will be held in Dublin, Ireland in 2026 will further strengthen this vision and continuously provide a platform for global networking.

As the global voice for Special Care Dentistry, iADH reaffirms its commitment to reducing health disparities, promoting inclusive dental practices, and empowering professionals to serve all populations with dignity and excellence.

**Professor Pedro Diz Dios**  
**President,**  
**iADH 2024-2026**

**Professor Young J Kim**  
**President Elect,**  
**iADH 2024-2026**

## 2026 IADR/PER General Session & Exhibition

The [104<sup>th</sup> General Session & Exhibition of the IADR](#) was held in conjunction with the 55<sup>th</sup> Annual Meeting of the AADOCR and the 49<sup>th</sup> Annual Meeting of the CADR on March 25-28, 2026, in San Diego, USA. The Distinguished Lecture Series speakers were Dariush Mozaffarian, Tufts University; Luda Diatchenko, McGill University; and Silvio Gutkind, University of California, San Diego. The meeting gathered more than 4,300 delegates from 88 countries.

## IADR Publications

The [Journal of Dental Research](#) (JDR) 2-Year Journal Impact Factor™ climbed to 6.6, increasing its ranking to #5 of 165 journals in the “Dentistry, Oral Surgery & Medicine” category. The JDR 5-year JIF is now 7.8, ranked #5 of 165, with an Article Influence score of 1.640, and an Eigenfactor of 0.01055. The JDR is #1 in total citations, with a total of 26,196 in 2025. In the same category, the *JDR Clinical & Translational Research* (JDR CTR) 2-Year JIF is now 2.0, ranking it at #81 of 165. Its 5-year JIF stayed at 2.8, ranking it #55 out of 165, with an Article Influence score of 0.586, and an Eigenfactor of 0.00114. The JDR CTR had 1,155 total citations in 2025.

The perspective article, “[Generative Artificial Intelligence: Opportunities, Risks, and Responsibilities for Oral Sciences](#),” was jointly published in the *JDR* and *JADA Foundational Science* in October, highlighting the potential of generative AI in dental, oral, and craniofacial research while cautioning against its misuse and ethical pitfalls. In December, the JDR announced the publication of a special issue, “The Oral-Systemic Relationship: Lessons Learned and the Road Ahead,” providing a comprehensive understanding of the relationship between oral and systemic health.

## 2027 IADR/APR General Session & Exhibition

The IADR will host its [105<sup>th</sup> General Session & Exhibition](#) in conjunction with the 7<sup>th</sup> Annual Meeting of the IADR Asia/Pacific Region in Melbourne, Australia, on June 23-26, 2027. The event will feature oral and poster presentations, Hands-on Workshops, Keynote Addresses, and Symposia presented by worldwide experts.

## IADR Activities at the 79th World Health Assembly (WHA79)

Here is a brief summary of [IADR Activities at the 79<sup>th</sup> World Health Assembly](#) in May 2026.

- IADR delivered and supported interventions and constituency statements as part of WHA79 agenda items 12.1, 12.3, 12.5, 12.9, 12.10, 15.2, 15.4, and 15.5, emphasizing the need to integrate oral health into prevention-oriented health systems, strengthen research and implementation science, address shared risk factors, and ensure that oral health is reflected in broader health policy discussions.
- UN Member States of Brazil, Egypt, France, Mauritius, and the Philippines co-hosted a side event that launched the *Global Coalition on Oral Health*. Co-sponsored by IADR, the event earmarked the Coalition as a WHO convened platform for multisectoral action to support the implementation of the Global Oral Health Action Plan 2023-2030.
- IADR participated in a side event hosted by FDI in collaboration with the Governments of the Republic of Ireland, the Republic of Mauritius, and Malaysia. The event launched FDI’s new report, *Oral Health at Work: A Roadmap for Prevention, Productivity and Workforce Well-being*, highlighting the growing importance of integrating oral health into workplace health and well-being strategies.
- IADR President Jenny Gallagher participated in the *World Health Professions Alliance* event, which provided an opportunity to position oral health within broader discussions on health workforce investment, prevention, productivity, and health system strengthening.

## IADR Champions Oral Health at the United Nations General Assembly

At the UN Fourth High-Level Meeting on NCDs and Mental Health in September 2025, [IADR and FDI delivered](#) a verbal intervention in Panel 1 urging governments to take bold, multisectoral action to address the social and commercial determinants of oral disease and called for strong fiscal measures to reduce risk, raise revenue, and strengthen health systems. With a written intervention in Panel 2, IADR and FDI highlighted the importance of integrating oral health into essential benefit packages, aligning financing strategies with the WHO Global Oral Health Action Plan (2022–30), and closing equity gaps in access to care.

## Sixth Conference of the Parties (COP6) to the Minamata Convention on Mercury

At the [COP6 to the Minamata Convention on Mercury](#) in November 2025, Parties set 2034 as the date after which the manufacture, import, or export of dental amalgam will no longer be permitted. This major win for oral and public health underscores the power of unified, science-based advocacy. FDI and IADR worked tirelessly to secure a balanced outcome by actively engaging in discussions throughout the negotiations.

## Official IADR Statements Adopted at March 2026 Council Meeting

- IADR [Ethics in Artificial Intelligence \(AI\) in Dental, Oral, and Craniofacial Research](#) Policy Statement
- Revision to [IADR Policy on Sugar-Sweetened Beverages](#)
- [Noma Research](#) Policy Statement
- IADR Position Statement on [Salivary Biology and Diagnostics](#)

## 2025 IADR Annual Report

For further reading about IADR activities, please see the [2025 IADR Annual Report](#).



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**Speaker of the Council**  
Peter Korch III



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Dear President Sharkov and Members of the Assembly,

June 2026

On behalf of the International College of Dentists (ICD), an Affiliate Member of FDI, we are pleased to submit this annual summary outlining key initiatives and progress made over the past year.

**Humanitarian Impact**

Through our [Global Visionary Fund](#) partnership with Henry Schein, ICD-supported grants contributed to the treatment of 15,000+ individuals and the delivery of 10,000+ procedures valued at about \$700,000 US in 2025. In addition, dozens of ICD Fellow-led oral health outreach projects were provided pro-bono worldwide.

**Global Relations and Advocacy**

- ICD holds Special Consultative Status with the **U.N. ECOSOC** and intend to explore formal engagement as a non-state actor with the World Health Organization to advance collaborative solutions for oral health worldwide.
- We have finalized a partnership with [Colgate-Palmolive](#) to strengthen global dental infrastructure, train emerging health advocates through the [Global Oral Health Leadership Institute](#) and maximize the deployment of resources to at-risk communities
- ICD established a partnership with the 17,000-member Taiwan Dental Association, which contributed \$30,000 to the [Global Capital Campaign](#) to fund home-based care equipment and dental student scholarships in Taiwan.

**Education and Scholarships**

- In 2026, ICD continues its **Global Oral Health Leadership Institute** with nearly 20 diverse participants from around the world, including FDI leaders. The program emphasizes interdisciplinary leadership, innovation and sustainable solutions. Stakeholders' Day will be held in London in October, in collaboration with King's College and Henry Schein, featuring international presenters and panels on AI, technology and sustainability in oral health.
- In 2025, a record 18 scholarships were awarded under the [ICD Dental Student Scholarship](#) program to U.S. and international dental students, totaling \$45,000 in financial aid.
- Our [Antimicrobial Resistance and Dental Safety](#) program continues to share expert guidance on antibiotic resistance and infection control, including FDI materials and initiatives.

**Strategic Direction**

We are dedicated to broadening our global reach by modernizing organizational infrastructure and expanding collaborations with industry partners. This growth supports our long-term goal of working in unison with FDI to address key public health concerns, including antimicrobial resistance and systemic care gaps. Our international community of Fellows remains steadfast in its commitment to recognition, dental education and clinical service.

We appreciate the ongoing support of FDI and look forward to future opportunities to collaborate and build sustainable health equity across the globe.

Warm regards,

  
Dr. Julio Rodriguez  
ICD Global President

  
Chelsea Segren, ICD  
Executive Director

## FDI World Dental Federation - General Assembly Report, June 2026

IDM represents 1,900 manufacturers and suppliers across Europe, the United States, Canada, Brazil, Japan, Mexico and Australia. It advocates for members' interests with governments and global organisations. Collaboration with FDI remains a priority, particularly in advancing sustainability objectives, supporting the World Dental Congress and strengthening industry's contribution to FDI Vision 2030.

The global dental market continues to expand. In 2025, it was valued at USD 41.03 billion and is projected to grow from USD 44.71 billion in 2026 to USD 118.36 billion by 2034. Dental consumables remain the largest segment, projected to account for 81.22% of the market in 2026, while equipment growth is being supported by CAD/CAM, imaging, digital workflows and AI-enabled practice solutions. North America remains the largest region, with 39.18% share in 2025; Asia-Pacific accounted for 22.04% and continues to offer growth opportunities as investment, awareness and access to care expand.

Demand is underpinned by the global burden of oral disease and by patient expectations for preventive, restorative, orthodontic and aesthetic care. WHO estimates that oral diseases affect nearly 3.7 billion people worldwide, with severe periodontal diseases affecting more than one billion cases. These needs reinforce the importance of a resilient, innovative manufacturing base able to deliver safe, effective and affordable products.

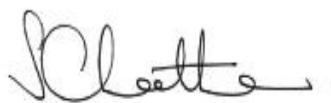
At the same time, research, development and manufacturing are becoming increasingly complex. Manufacturers must meet more stringent and divergent regulatory requirements, prove quality and safety across global supply chains, reduce environmental impact and maintain innovation while controlling costs. Without proportionate, science-based regulation and international alignment, development timelines may lengthen, innovation may slow and treatment costs for patients may rise.

IDM and its members support continued collaboration with FDI and other stakeholders in three priority areas:

- **Sustainable oral healthcare:** prevention-focused, resource-efficient practice and products.
- **Innovation and digital transformation:** responsible adoption of AI, imaging, CAD/CAM and integrated workflows.
- **Regulatory convergence and access:** high-quality dental products that remain available, affordable and safe for patients worldwide.

IDM remains committed to the development, manufacture and supply of high-quality dental products, and to working with FDI to advance Vision 2030, sustainability in dentistry and the World Dental Congress.

Yours faithfully,



Samantha Cheetham IDM-President



## **The Pierre Fauchard Academy**

The Pierre Fauchard Academy was founded in 1936 by Minnesota dentist Elmer S. Best. Dr. Best wanted to help the profession gain control of its own literature and assure its independence from commercial interests. His passionate concern for the search for knowledge and the raising of professional standards laid the groundwork for the beginning of the Academy.

Named in honor of the pioneering physician Pierre Fauchard, often referred to as the "Father of Modern Dentistry," the Academy embodies Dr. Fauchard's vision of elevating the standards of dental care worldwide.

Pierre Fauchard's contributions to dentistry in the 18th century laid the groundwork for the practices we uphold today. He emphasized the importance of education, innovation, and ethical practice—values that remain at the heart of the Academy. Through its mission, the Pierre Fauchard Academy seeks to recognize and support dental professionals who embody these principles.

The Academy brings together a diverse community of dental practitioners, educators, and researchers from across the globe. Together, we foster collaboration, share knowledge, and advocate for the best practices in oral health. With an emphasis on leadership, our initiatives focus on education, research, and outreach, ensuring that all dental professionals have access to the resources they need to thrive and lead their organizations. Now with over 6,000 Fellows across the globe, the PFA is making a significant impact on the oral health for millions of people.

Our commitment to lifelong learning encourages all members to pursue ongoing education, enhancing their skills and ultimately improving patient care.

Our website has a growing collection of online programs available to PFA Fellows at no cost.

The Elsevier Patient Education library is available for all Fellows to use.

Our official journal – Dental Abstracts – is a bi-monthly publication that provides dental information from around the world in short abstracts. Links to the full articles are then available for further reading. In addition, scientific articles from Wiley and Springer publishers are available without firewall to all Fellows.

Our Foundation, the PFA Leadership Foundation, provides grants to dentists around the world for philanthropic programs and provides small scholarships to dental students.

Fellowship in the PFA does not end with a certificate on the wall and a pin on your lapel. Our hope is that this fellowship will serve as a catalyst for Fellows to want to be, do, and give more in service to their family, profession, and community.

As we look to the future, let us remain committed to the ideals that Pierre Fauchard championed. Let us strive for excellence, uphold the highest ethical standards, and foster an inclusive environment. Together, we can elevate the profession and make a lasting impact on the health and well-being of individuals around the world.

Contact:

Robert Cattoi  
International Executive Director  
[rcattoi@fauchard.org](mailto:rcattoi@fauchard.org)

## **REPORT ON FDI SECTION OF DEFENSE FORCES DENTAL SERVICES 2026**

The FDI Section of Defense Forces Dental Services (SDFDS) was established in 1904 as the military section of the FDI World Dental Federation, providing a global forum for the exchange of ideas, innovations and concepts relevant to dentistry in the defense forces. The Members of the Executive Committee are nominated and elected at the SDFDS Annual Meeting by attendees once every 3 years, with the next election due in September 2026. The current Chair is Capt (Navy) Nanda van de Kraats-van Klink from the Netherlands supported by 4 other executive members representing Australia, Brunei Darussalam, Canada and the USA. The SDFDS Webpage has been comprehensively updated to promote the Section and appeal to a wide diversity of members and future delegates.

Last year, it hosted its Annual Meeting in Xi'an, the People's Republic of China from 5<sup>th</sup> to 8<sup>th</sup> September 2025, just prior to the World Dental Congress in Shanghai. It was jointly hosted at the Sofitel Xi'an on Renmin Square Hotel by the Chinese People's Liberation Army (PLA) Stomatological Committee, the Third Affiliated Hospital of Air Force Medical University and the SDFDS Executive Committee. The annual meeting brought together a total of 50 foreign and 150 local Dental Officers from 24 countries which included: Australia, Bangladesh, Belgium, Brunei Darussalam, Finland, Germany, China, Guinea, Indonesia, Ivory Coast, Japan, Kenya, Malaysia, Netherlands, Nigeria, Norway, State of Palestine, Senegal, Singapore, Sri Lanka, Thailand, Timor Leste, the United Kingdom and Zimbabwe.

A Welcome Reception was held at the Grand Ballroom of the Sofitel Xi'an on Renmin Square Hotel in Xi'an where delegates were welcomed by the Chair of the SDFDS Executive Committee and the Chair of the Local Organising Committee, Sr Col. Niu Lina from the PLA. The Scientific Programme was held over two days at the Convention Center of the same hotel where a total of 32 presentations were delivered across 4-themed sessions; Operational Military Dentistry, Optimising Clinical Care, Innovation in Military Dental Scientific Research and Strategising Service Delivery. In addition, and for the first time, a total of 162 poster presentations were on display, showcasing mainly local research being carried out. The scope of presentations supported the three Strategic Pillars of the new FDI Strategic Plan 2024-2027, namely; Knowledge Exchange, Advocacy and Innovation, particularly in the context of military oral health provision. Towards supporting the pillar of Knowledge Exchange in particular, the annual meeting continues to build a robust community of skilled, engaged and informed dental professionals and partners, specifically in the field of military dentistry.

On the Cultural Day, the SDFDS Meeting delegates had the opportunity to visit the Third Affiliated Hospital of Air Force Medical University Stomatological Hospital of Xi'an, and the International Museum of Stomatology which is the largest stomatological museum in the world and recognised as the most influential specialised museum in the dental field. The delegates also had the privilege to visit the World-Famous Emperor Qinshihuang's Mausoleum Site Museum to see the Terracotta Warriors, renowned as the eighth wonder of the world. This was followed by an evening dinner of local Xi'an Cuisine and visit to the Grand Tang Mall, China's only large-scale pedestrian street featuring Tang Style architecture against the backdrop of the prosperous Tang culture. Attendees continued to benefit from the social and professional interaction with their military dental peers throughout the day, sharing with others their common and diverse experiences in the delivery of oral health care in military settings.

The meeting ended with a presentation on the next SDFDS Annual Meeting in Prague, Czech Republic, followed by the Closing Ceremony. The next SDFDS Annual Meeting will take place from 31<sup>st</sup> August to 3<sup>rd</sup> September 2026 at the Diplomat Hotel Prague in the Czech Republic. Almost 90 foreign military delegates from 30 countries have to date registered to attend the meeting! Two sponsors have been secured to financially support the conduct of the meeting; Aseptico USA and Laschal Surgical Instruments USA, who will be delivering short presentations and showcasing their latest products at the meeting. The Election for new or re-elected

Members of the SDFDS Executive Committee, held every 3 years, is also scheduled to take place at the SDFDS Annual Meeting in Prague this year.

We welcome all military dental professionals worldwide to participate in the 2026 SDFDS Annual Meeting or any future meetings to gain knowledge, get connected and be inspired! For further information, visit the SDFDS Webpage at <https://www.fdiworldddental.org/section-defense-forces-dental-services> or email us at [sdfd.services@gmail.com](mailto:sdfd.services@gmail.com).







## ANNUAL REPORT FROM THE CHAIR

1. The CDO/DPH Section of the FDI is a forum for Chief Dental Officers (CDOs) as well as scientists, educators, practitioners and researchers working in the oral health domain. CDO is a generic term that refers to the officially appointed most senior civilian federal government official in each country responsible for national oral health advice.
2. The CDO/DPH Section is a content-based global collaboration led by national CDOs, with participation by practitioners, administrators and researchers as Section Members. It is not to be confused with the Public Health Committee (PHC) of the FDI. That said, the sitting Chair of our Section holds a statutory position as a member of the PHC. The By-laws of the CDO/DPH Section reflect the unique roles and circumstances of our membership.
3. The Global CDOs list is available on our Section's [webpage](#) (under "Global Chief Dental Officers"). Our Section strives to keep our list of global CDOs up to date, but changes take place periodically in national CDO position incumbents and that information may not be immediately available to us. We encourage and ask FDI members to help us continually update this list by contacting our Section Secretary, Dr C.K. Chng, at [CHNG\\_Chai\\_Kiat@moh.gov.sg](mailto:CHNG_Chai_Kiat@moh.gov.sg).
4. We continued our close collaboration with the WHO Dental Officer, working together to ensure that oral health has a place on the NCD, SDG and UHC agendas of the WHO and UN. On 25 September 2025, the UN convened the 4th UN High-Level Meeting on NCDs in New York. Beyond the engagement of CDOs advising their respective Member States, and the WHO Dental Officer working concurrently in a global coordinating role, the FDI-IADR advocacy partnership did significant work to ensure that appropriate oral health content was included in the final draft of the Political Declaration document from this Meeting. Then, on 18 May 2026 in Geneva during the 79<sup>th</sup> World Health Assembly, the WHO Dental Officer led the formal launch of the *Global Coalition on Oral Health* as a WHO-convened forum for collaborative, multisectoral action to support Member States in implementing the WHO *Global Oral Health Action Plan*. Beyond some CDOs and other Member State representatives, key Non-State Actors were present, including of course FDI and IADR.
5. Our Section Chair participated in the FDI PHC meetings during the year, including the in-person mid-year meeting in Geneva, with much related work activity between meetings. The PHC is engaged in activities such as World Dental Development Fund projects, planning related to the FDI *Vision for 2030* and WHO *GSAPHO*, preparing and reviewing FDI Policy Statements and other FDI products, and planning the annual PHC/CDO Forum that takes place during the FDI World Dental Congress (WDC).
6. As part of the 2025 WDC in Shanghai, an in-person Annual Business Meeting (ABM) of the Section was held on 08 September 2025, and included presentations from ADA-HPI, ACFF Global, and FDI HQ. The 2025 ABM Minutes, and speaker presentations, are available on our Section's [webpage](#) (under "Past Meetings"). Section Executive Board elections were also held during this meeting; results are available on our Section's [webpage](#) within the 2025 ABM Minutes (under "Past Meetings"). The 2025 joint annual FDI PHC/CDO Forum was then held on 09 September 2025 and featured speakers from China, England and Norway.
7. I look forward to seeing you all in Prague at the 2026 FDI WDC. While we had hoped to be able to offer our 2026 Section ABM in synchronous hybrid format, so as to include as many in the global CDO community as possible, we have been advised once again that the bandwidth available at the WDC venue will likely be insufficient; hence, we shall once again hold an in-person meeting, and make PDFs of the speakers' presentations available on our webpage thereafter. The 2026 ABM Agenda and CDO Master schedule are available on our Section's [webpage](#) (under "FDI World Dental Congress").



Dr James Taylor (Canada)  
Chair

CDO/DPH Section Secretary: Dr C.K. Chng (Singapore) at [CHNG\\_Chai\\_Kiat@moh.gov.sg](mailto:CHNG_Chai_Kiat@moh.gov.sg)

## Annual Report 2025/2026

### Women Dentists Worldwide, Section of the FDI

#### Executive Board

Assoc.Prof. Simona Dianišková, Chair, Slovakia  
 Dr. Nokukhanya Makwakwa, Vice-Chair, South Africa  
 Dr. Patricia Gonzales, México  
 Dr Yolande Koffi Gnagne, Ivory Coast  
 Dr. Jung Hoi-In, Republic of Korea  
 Dr Ewa Siewierska-Chomeniuk, Poland  
 Dr Vineeta Chugh, India  
 Prof. Katalin Nagy, Hungary

Women Dentists Worldwide (WDW), a Section of the FDI World Dental Federation, serves as the global voice for women in dentistry. It advocates for gender equity, supports professional development, and promotes the advancement of women into leadership positions within the dental profession. Through international collaboration, research, and education, WDW contributes to building a more inclusive, diverse, and equitable global oral health workforce.

The theme of the WDW Forum at the 2026 FDI World Dental Congress is **"From Innovation to Independence."** The programme will feature a two-hour scientific session in the morning with distinguished speakers from Poland, Türkiye, Germany, and the Czech Republic. This will be followed by an expert session focusing on the importance of proper breathing techniques for overall health and well-being. During the General Assembly, supplementary elections will be held to fill two vacant positions on the WDW Board: one position reserved for a representative from Latin America and one open position available to candidates from all regions.

#### WDW Social Media and Communication Strategy

*The WDW Social Media and Communication Strategy was launched during this reporting period and is coordinated by **Dr. Vineeta Chugh (India), WDW Board Member.***

##### 1. Social Media Strategy

#### Objective:

To strengthen WDW's global digital presence and foster engagement among women dentists worldwide through consistent, informative, and inspiring communication across social media platforms.

## 2. International Women's Day Campaign

### **Objective:**

To celebrate International Women's Day by highlighting the achievements, leadership, and contributions of women dentists around the world.

## 3. World No Tobacco Day Campaign – "What Women Need to Know"

### **Objective:**

To raise awareness of the impact of tobacco use on women's oral and general health and to promote prevention through education and advocacy.

## Scientific Activities and Publications

### 1. Global Surveys

The Women Dentists Worldwide (WDW) Section invited National Dental Associations (NDAs) to participate in a global initiative assessing the status, opportunities, and challenges faced by women dentists worldwide. Two complementary surveys were conducted: one directed to National Dental Associations and another distributed to individual women dentists.

The evaluation and analysis of the survey data are currently underway, and the results will be presented in due course.

WDW extends its sincere appreciation to all National Dental Associations and individual participants who contributed to this important initiative.

### 2. Scientific Publication

In June 2026, the WDW Section published a scientific research article in the *International Dental Journal* entitled:

### **"Women Dentists in Education, Specialization, and Leadership: A Global Survey."**

The study collected data from National Dental Associations regarding workforce participation, academic representation, specialization, and women's involvement in leadership positions within the dental profession.

The publication is available on the FDI website under the Women Dentists Worldwide (WDW) Section

## **Board Activities and International Cooperation**



The WDW Board consists of eight active and dedicated dental professionals who meet regularly online to advance the Section's strategic objectives. Since the 2025 FDI World Dental Congress in Shanghai, the Board has held five official meetings, with an additional meeting scheduled for August 2026.

Throughout the reporting period, the Board focused on strengthening communication, increasing the visibility of WDW, expanding international collaboration, and developing strategic partnerships.

During this period, WDW signed two Memoranda of Understanding (MoUs): one with **Leading Ladies in Dentistry** and another with its industry partner **Curaden**. A further collaboration agreement with **Align Technology** is currently under preparation.

In addition, WDW is finalising a Memorandum of Understanding with the **Indian Dental Association** concerning the **Abhaya** initiative, an important project dedicated to the health, safety, and empowerment of women dentists. Members of the WDW Section will have the opportunity to learn more about the Abhaya initiative during the 2027 FDI World Dental Congress in Mumbai.

Submitted by  
Assoc. Prof. Simona Dianišková,  
Chair , Women Dentists Worldwide  
June 2026