



## Editorial

# Building back better oral health delivery system: Why dental volunteering would matter for the post-COVID world

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The COVID-19 pandemic has tested the health-care delivery system as well as overall well-being of communities, especially the underserved at an unprecedented scale. It has exposed vulnerabilities in health-care capacities, markets and jobs, welfare systems, political agility, the inclusion of disadvantaged groups, community cooperation, and more.<sup>[1]</sup> Organized dentistry has been affected on a large scale.<sup>[2]</sup> In the post-pandemic situation, the vulnerabilities have to be addressed.<sup>[3]</sup> This provides an opportunity to ensure that the new order or the post-COVID world is an improvement on the last. The existing oral health delivery system needs to be revisited.

At this juncture, we should focus on developing new patterns. This should identify strengths, weakness, study opportunities, challenges and threats to evolve an inclusive, resilient, and better agenda. Such an agenda should be centered by a strong social fabric within communities. At this juncture, dental volunteering is at the key intersection of these qualities. We are aware of the existing urban-rural oral health divide across the globe and the need for dental volunteerism, in developing and developed parts of the world.<sup>[4,5]</sup>

The local benefitting community would have knowledge and insights to take collective ownership of the local oral health problems. They should play a key role in organizing oral health delivery services and mobilize self-sustaining models to develop the dental care system. However, due to alternate priorities, there may be insufficient investment in volunteering infrastructure and sufficient measurement of its impact. It, therefore, becomes a secondary consideration for those involved in developmental operations. But that would not be an excuse.

The *UN framework for the immediate socio-economic response to COVID-19* points that “volunteer groups often play an indispensable leadership role in the response, notably in reaching out to vulnerable people, and in getting to remote places. They can amplify responses.”<sup>[6]</sup> This underlines the need for volunteerism and could be translated to oral health-care too. We need to ensure that dental and oral health-care professionals as a volunteering community need to revitalize, re-invent itself and rebuilt a safer, stronger and better system that benefits the community.<sup>[7-9]</sup> For this, perhaps, a global discussion on the future of oral health volunteering could not be more aptly timed. Perhaps, our organization and parent body can lead this discussion. Such deliberations could unite the global community around a commitment to position volunteering as a leading development solution. For this movement to succeed, we must motivate ourselves and mobilize our own dental communities. Those with time and resources must channel the determination to overcome this crisis and create a better world.

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