

forms of religious bigotry. The declaration says that “no foundation therefore remains for any theory or practice that leads to discrimination between man and man or people and people, so far as their human dignity and the rights flowing from it are concerned.” It also deplored “all hatreds, persecutions, displays of anti-Semitism directed against Jews at any time or from any source.”

Over the past 40 years, there have been visible triumphs of the spirit and ideals of *Nostra Aetate*. Pope John Paul II took the message of *Nostra Aetate* to heart when he visited a synagogue in Rome in 1986, the first such visit by a Catholic Pope, and again when he visited Israel in 2000. But we need to ensure we carry this message of religious tolerance in our own hearts and in our own daily lives. We cannot sit idly by while anti-Semitic comments are made or other forms of religious bigotry and hate are spewed forth. We must continue to oppose these forms of hatred and support continued interreligious dialogue.

That is why I have introduced this resolution today. My resolution:

Commemorates the 40th anniversary of *Nostra Aetate*;

Celebrates the historic relationship between Jews, Catholics and other religions worldwide that has resulted;

Expresses the need for continued interreligious dialogue and cooperation between all people of all faiths; and

Condemns anti-Semitism and encourages the United States to be a leader in ending religious intolerance and discrimination worldwide.

Forty years after *Nostra Aetate*'s adoption we have a wonderful opportunity to celebrate the progress that has occurred in religious cooperation and tolerance and remind ourselves of the work that remains to be done. We can, and we must, continue to strive to be a more tolerant people. Our common humanity deserves and demands nothing less.

THE EROSION OF AMERICAN  
DENTAL HEALTH STANDARDS

HON. CHARLIE NORWOOD

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 6, 2005

Mr. NORWOOD. Mr. Speaker, when this House passed CAFTA, I objected to provisions that overturn the state licensing standards of doctors and dentists.

I was told that my fears—and those of the American Dental Association—were unfounded.

This, in spite of the fact CAFTA contains clauses that allow foreign dentists to challenge U.S. licensing standards in international tribunals.

Then according to the September 16 *San Antonio Express*, we had the CDC “working feverishly” to allow Mexican dentists to practice in Texas without a Texas Dental license, as part of Hurricane relief efforts. That is so easy to do under NAFTA.

Everyone realizes disaster relief is a unique situation. We must also realize that a precedent is now set—the U.S. Government stating that Mexican health care providers be allowed to circumvent our state licensing standards.

We can fully expect this precedent to be cited in future cases by those CAFTA tribunals.

Now we also have U.S. citizens without dental licenses, without even dental degrees, being allowed to circumvent the state licensing process in Alaska.

The Federal government has decided to overrule the Alaska Board of Dental Examiners, and to instead create a new federal license—a Dental Health Aide license.

According to the September 10 *Anchorage Daily News*, the Alaska Attorney General has ruled that these new federal regulations preempt state health licensing laws.

This allows dental health aides to practice in Native Health Clinics with licenses granted by the federal Community Health Aide Certification Board instead of the State of Alaska.

We again recognize a unique situation of remote Native villages.

However, as a licensed Dental Surgeon, I can testify to my colleagues that many of the procedures performed by dentists are surgical procedures, which should be performed only by someone who has graduated from an accredited dental school and is licensed to do so by their state.

There is a real need for dental health aides in remote locations for disease prevention and detection services, and coordinating necessary surgical care with a licensed dentist when needed.

The ADA and the Alaska Board of Dental Examiners have supported an expanded role for dental health aides in this limited and properly coordinated capacity.

But once again the Federal government has chosen to disagree and set a new precedent that undermines our historic dental licensing standards.

Mr. Speaker, dental health care quality is now on a very slippery slope as a result of these federal actions.

We need look no further than our southern border to see where this downhill slide will lead if we continue.

In the Mexican border towns, dental care costs less than half of what we pay here in the United States.

But according to travel industry warnings, 60% of those performing dental services are not properly licensed or trained, even by Mexican standards.

Accessing quality care under these eroded licensing conditions is simply a matter of luck of the draw.

In spite of the need to improve the overall American health care system, there is one thing we can all be proud of—we have the highest quality health care in the world.

And here is an awesome fact to consider as to the origins of these unparalleled quality standards.

The Federal government didn't have one darn thing to do with them.

They came entirely from the minds and hearts of physicians and dentists, who wanted to improve the quality of health care delivery and their professions.

They did so in the most appropriate way—through the states.

The licenses to practice medicine and dentistry throughout our Nation's history have been granted virtually exclusively by the States, not the Federal government.

Now the Federal government, which has convoluted and corrupted public health policy in countless instances, wants to slither into licensing—then share the spoils in trade agreements and international tribunals.

No one can doubt that there will be continuing harmonization of standards across many industries with our international trading partners.

But this body needs to resolve that at least in health care, the United States will lead that process, rather than follow.

We should export our standards—the highest, the toughest, the noblest in the world—rather than import incompetence, charlatanism, infection, and death.

Mr. Speaker, we don't need unqualified dental health aides cutting into people in Alaska.

We don't need to accept Mexican and Guatemalan dental licenses in Texas or Georgia, licenses highly likely to have been issued from the nearest false document mill spawned by illegal immigration.

Ironically, this body doesn't really need to do anything, other than keep the bureaucrats of the Federal government and the New World Order out of the way of our 50 sovereign States.

And it's past time we started doing just that.