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**CHIROPRACTORS AS TRADITIONAL HEALERS:**

The World Health Organization defines traditional medicine *as including diverse health practices, approaches, knowledge and beliefs incorporating plant, animal, and/or mineral based medicines, spiritual therapies, manual techniques and exercises applied singularly or in combination to maintain well-being, as well as to treat, diagnose or prevent illness*<sup>1</sup>. (*emphasis added*) Can we characterize chiropractic within this context?

Admittedly, the second half of this definition certainly seems to place chiropractic's role within traditional health care practices. The first half of the definition on the other hand is clearly not within chiropractic's definition when we accept the profession's consensus in the ACC paradigm. However, there are countless numbers of DCs who see themselves as alternative practitioners and include adjunctive methods and materials that fall under *plant, animal, and/or mineral* substances. Although not included in the accepted definition of chiropractic the fact remains that many DCs expand their practice in the capacity of a holistic healer.

An interesting concept that may not be viewed as commonplace is how chiropractic developed as a local alternative to medicine. In the North American post-colonial culture that was practically devoid of indigenous community healers, chiropractors were sought out to fill this need. Other than the tribal medicine men of the native and indigenous people who exclusively served their culture, one can argue that in fact Chiropractic, along with Naturopathy and the earlier version of Osteopathy, were Canada's and America's traditional healing system. Homeopathy is an imported discipline to North America just like Acupuncture; and as immigration began to diversify along various ethnic roots these people brought along with them their traditional healers such as Latin curanderos, Indian ayurveda, traditional Chinese medicine, Arabian unani, Philippine hilots, etc.

The success of chiropractic in English-speaking countries has had much to do with economies that support a large middle-class but equally significant is the role played as the local traditional healer. The challenge comes with the sensitivities required to integrate chiropractic in new countries where traditional practices have been active forever. It has been the experience of many of today's pioneers in chiropractic that people have difficulty placing chiropractic as an alternative form of healthcare; mostly because chiropractic is an imported university level profession from the West that usually comes with a hefty price tag for care. People have relied on traditional community healers for centuries who deal with the daily musculo-skeletal problems. Naturally, chiropractors are not easily viewed as natural healers when the usual experience has been to turn to inexpensive lay healers. When it is understood that chiropractors are highly trained drugless practitioners that fall into a new and separate category it becomes easier to define the role chiropractors play in the health care of that country.

The fact that chiropractic is indeed distinct and unique is the only basis by which the profession can claim its rightful place in the world. Failing to understand this distinction explains why the profession has done poorly in many countries and has prevented the natural processes that lead to official recognition. Today's challenge is to properly define our role without getting lost in the whole CAM issue that is being addressed.

Many countries without former recognition of chiropractic have approached their local chiropractic leaders in an effort to include the chiropractic profession in its health care provider registration protocols. In the past decade there have been a dozen or more countries who have passed CAM legislation that has included chiropractic, at least by name; some with full description and have begun official registration and licensing steps.

The W.H.O. has defined three types of health system to describe the degree traditional, complimentary and alternative medicine is an officially recognized element of health care<sup>2</sup>:

- **Integrative** - officially recognized and incorporated into all areas of health care
- **Inclusive** - officially recognized but not yet fully integrated into all aspects of health care
- **Tolerant** - the national health care system is based entirely on allopathic medicine but some CAM practices are tolerated by law

Thanks to the efforts of Life University and the WFC there is a level of recognition at the W.H.O. that sets a good foundation for chiropractic to be "included" and eventually "integrated" into more and more countries. Do you think that chiropractic is a traditional healing discipline in the USA and Canada? An interesting subject of debate!

1. WHO Traditional Medicine Strategy 2002-2005, p.7, WHO 2002

2. WHO Traditional Medicine Strategy 2002-2005, p.8/9, WHO 2002

The Chiropractic Diplomatic Corps has maintained a Foreign Service Registry since 1998 with over 600 DCs signing up via our online web-based [registration form](#). It is hoped that as you become more familiar with this service you will encourage others to sign up and receive the benefits of the program. The purpose of this service has several aspects:

1. This gives interested DCs access to information acquired about chiropractic worldwide. Only qualified DCs are allowed to receive private contact sources and detailed information about the status of chiropractic in their countries of interest.
2. DCs who see themselves practicing outside their native country become part of a registered group of prospective doctors who can be notified directly when there is activity reported to us in their country of interest; i.e. associate positions, practices for sale, locums needed, new laws passed, terrorist dangers.
3. Those DCs who have undergone the necessary preparations to be available to practice abroad can avail themselves of the private personal coaching services of the Chiropractic Diplomatic Corps (no fee).
4. The number of registrants is substantial enough to use the entire data base to better understand the direction of where the profession can use these doctors, what countries need more focus, what areas of the world can attract qualified teachers as more DC schools open up, etc.
5. Other general statistical observations have been extrapolated that help to better prepare what type of information needs to be looked into; i.e. education, legislative status, visas, practice options...

Interviewing this group of chiropractors is one of the most rewarding aspects of this program. There were initial concerns of seeing a lot of DCs signing up who are "running away" from their life's mistakes but this has rarely been the case. Imagine the type of person that can adapt to another culture, willing to learn another language, open to new and different ideas. Mostly, what sets this group apart is their dedication to the profession they love and have the heart and determination to reach out to unknown populations. Helping these DCs to better understand the risks and rewards reduces their chance of failure - a benefit to the communities they will serve.

So far we find that there are 98 listed countries sought after in 52 different languages (leaving out 157 countries in a world that has at least one DC in some 100 countries). The interest varies greatly from region to region:

- 43% are interested in European countries
- 27% are interested in Latin American countries
- 26% are interested in the Asian/Pacific region
- 4% looking at Africa and the Middle-east

The higher interest in Europe is likely due to the higher percentage of DCs with ancestral roots in Europe. Cultural and family ties hold the strongest attraction for country selection. Next is language followed by personal experiences from earlier travels, often while participating in a short-term humanitarian mission.

A breakdown of this group of chiropractors worth mentioning relates to their education and experience:

- 67% are from Philosophical based schools
- 30% are from Musculo-skeletal focused schools
- 3% only are from schools outside North America
- 23% graduated over 10 years ago
- 36% graduated 3-10 years ago
- 41% are students or graduated less than 3 years ago

Every month now we hear of more DCs who have finally made the move and have begun serving people in their new home. This is occasionally something that happens in a matter of a few months but for the majority things take time. Time to gather more information, to travel and personally assess what things are like there. Time to get finances in order and to liquidate the "stuff" accumulated over the years. Relationship issues and the like all have some influence in getting the timing right.

Those of you reading this who had already experienced this life-style change certainly have your own stories to tell - something we invite you to do. Someday we will wish to include personal testimonial stories from our pioneer chiropractors that can encourage those sitting on the sidelines and only needing to see that it is possible. If this idea appeals to you and you have something to share [email the Director](#) anytime.

#### NEWSLETTER POLICY:

This newsletter is intended to inform and encourage the International growth of Chiropractic. If you know someone who may be interested in receiving this newsletter, please have them go to [www.ChiropracticDiplomatic.com/register](http://www.ChiropracticDiplomatic.com/register) and complete the Foreign Service Registry form, their address will then be added to future mailings. If you do not wish to receive this newsletter, simply notify us by replying to the delivery email.