



CHIROPRACTIC DIPLOMATIC CORPS

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*"If you fail to plan... you plan to fail!"*

**T O P I C**

CHIROPRACTIC DIPLOMATIC CORPS

# Tips On Practicing International Chiropractic

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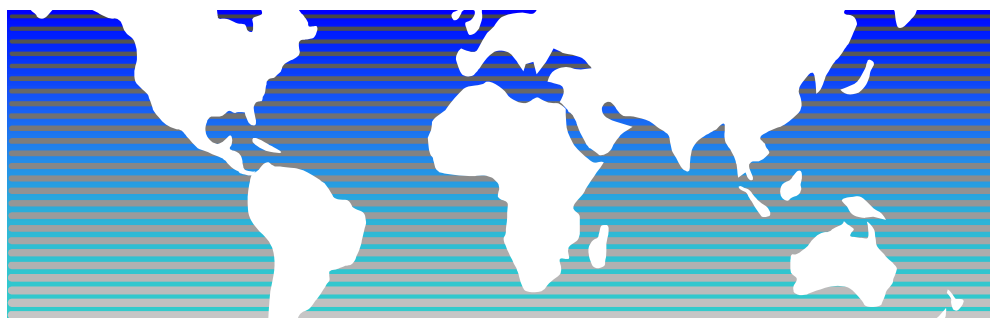
© Michel Y. Tetrault, DC 2000 - 2002  
800-15355 24th Ave - Suite 207  
White Rock, BC Canada V4A 2H9  
michel\_tetrault@hotmail.com  
Phone 800-600-7032

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**P**lanning on practicing in a foreign country is an exciting prospect. The following topics have been written by chiropractors from our consular list and others from different countries. The idea is to help put a little more reality into what you think you understand about setting up a foreign practice in an effort to share some of their experiences with you. The topics are written in a general context and not to be construed as a proven method of steps that apply anywhere and everywhere. Each country has its own laws, regulations and procedures. Ultimately YOU will become the best authority on "How-to" once you make the move, since procedures and regulations are subject to changes. This information is easily updated, so if you or someone you know has information which adds to these TOPICS your input will be appreciated.

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# 1 Selecting the Right Country

**I**t may come as a shock to our young or new people to the profession that chiropractic is only established in a handful of countries. (USA, Canada and Australia and ADVANCING IN a few in countries in Northern Europe and South Africa.) Although there are one or more DCs in some 100 countries, only 37 have laws that recognize chiropractic as a legitimate profession. Yet 76 countries have only one DC for every 100,000 to 2,000,000 people. There are 150 countries without DCs of which 120 are too poor, too small or too dangerous to try and establish practices.

Needless to say, making the right choice in selecting a country to open a practice is a serious matter. How do you select a country that is ideal for you?

Putting things in simple terms, the greater the familiarity and the genuine affinity between the doctor and the patient, the better the choice. Blood, family and national heritage hold the strongest bonds between people. Familiarity includes language, physical similarities and common interests. Ask yourself this question: "What group of people do I hold dear to my heart?" Unless you have actually traveled to a country or have personal experience with that culture it is difficult to know if you can genuinely care about them.

Once you can honestly say to yourself that there is a love for the people of a particular culture or country you will have begun to narrow down your choices. The next question to ask yourself is: "Can I make a decent living in that country?" The demographics (population and economy) will indicate your potential for success if you are willing to work hard.

How do you determine these facts? Go to a local bookstore and buy a travel book on the country (ies) of interest. There is a wealth of information there to familiarize you with many facts. Another source is the CIA World Book on line.

Next, take the opportunity to travel or even volunteer in a mission to your country of interest. This will either make or break your decision because it replaces fantasy with facts. It really is your "gut feeling" that will ultimately decide if all the facts are right for you.

Language is also an important factor in your decision-making. Here the question to ask yourself is: "Can I speak or learn to speak the local language?" In some countries like Norway, the Netherlands and Germany you are required to speak and write fluently in their language before being permitted to establish a permanent practice. Many countries are accustomed to having professionals who only speak English, but a doctor must rely on translators. Obviously, it is important for doctors to effectively communicate with their patients. This has always been especially true for the chiropractic practitioner. You will have to be the judge on how critical this issue plays in making your selection.

## Let us look at these questions again:

1. What group of people do you hold dear to your heart?
2. Can you make a decent living in that country?
3. Can you speak or learn to speak the local language?

Once you can fully answer these questions to your satisfaction it will become easier to narrow down your choices. After all, you can only be in one place at a time. Why not make a solid decision and plant some deep roots; your future patients deserve that? So does the profession and so do you!

## 2 Establishing Initial Contacts

**P**racticing abroad has many romantic notions attached to the idea. Reality puts the romanticism into a different light. There are no opportunities for a DC to simply practice a few months in an exotic land like some kind of "working vacation". There are occasional "missionary-type expeditions" that last a week or two through a school program, a nonprofit foundation or a Christian organization; but, these are the full financial responsibility of the volunteer doctor. If you are thinking that there are opportunities to practice for less than a two-year term, you will be disappointed.

Now that that is out of the way, there are an abundance of opportunities for doctors who plan on making a substantial move. The first thing you will need to do is get connected with someone in the destination country; or someone who comes from there and can help you plan your trip there.

The Chiropractic Diplomatic Corps' website has a separate page for each country known to have one or more DCs in practice. (see Global Statistics link below) On that page, in addition to current chiropractic statistics, you will find a contact doctor you can reach, as well. This information has been placed there for you to make a first contact with someone who has successfully set up a practice in the country of your interest. The purpose of having initial contacts is to help plan and prepare you for your trip to visit the country as soon as possible. There are many reasons why this is strongly recommended. The most important is to prevent you from failing.

Be prepared to spend a little money on phone calls, Fed-Ex or faxes to get some information and increase the level of familiarity with your contact(s). Budget for a trip in the reasonable near future if you expect anyone to take your interests seriously. If you are not in a financial position to do the above, it is unlikely that you will prevail and should wait until you have adequate reserves of money, time and opportunities to begin this quest. Don't be discouraged. It is best to move from a position of strength; best for the profession and for you personally.

## 3 Legal Requirements

**W**hat are the legal requirements of setting up a practice in a foreign country? That will depend on the legal status of the profession in that country. (All countries will require an approved resident or working visa first) There are four scenarios:

1. Full legal recognition of the chiropractic profession.
2. No legislation protecting the DC title or defining the scope of practice, but it is lawful to practice your profession once your title or degree is verified and you set up a lawful business.
3. No requirements other than setting up a lawful business.
4. Chiropractic is illegal and you are on your own.

### 1) FULLY LEGAL

There only 37 countries which have gone through some legislative process to define the scope of practice and protect the title "chiropractor, DC, or it's equivalent Bachelor degrees." These countries are: Australia, Bahamas\*, Belgium, Bolivia\*, Canada, Cayman Islands, Costa Rica, Cyprus, Denmark, El Salvador\*, Fiji\*, Finland, France, Hong Kong, Iceland, Iran, Jamaica, Jordan\*, Lebanon\*, Liechtenstein, Mexico, Namibia, New Zealand, Netherlands\*, Norway, Panama, Puerto Rico, Saint Kitts & Nevis, Saudi Arabia, South Africa, Sweden, Switzerland, Trinidad & Tobago, United Arab Emirates, United Kingdom, United States, Venezuela\*, Virgin Islands-US, Zimbabwe. (\*without full title protection) To practice in these countries you can obtain a license to practice by making application, passing boards and taking a practical exam. You will have to inquire as to the specific requirements of your country of interest.

**2) SOMEWHAT LEGAL**

The following countries have accepted the chiropractic diploma as qualification to practice chiropractic: Argentina, Botswana, Brazil, Chile, Columbia, Dominican Republic, Ecuador, Germany, Ghana, Greece, Israel, Italy, Jamaica, Japan, Libya, Malaysia, Morocco, Mozambique, Peru, Philippines, Saipan, Singapore, Taiwan, Thailand, Uganda and Zambia. However, the actual license or certificate is not necessarily for chiropractic. It is more frequently issued for a natural healer, drugless practitioner or even a physical therapist or massage therapist.

**3) NOT ILLEGAL**

When it is otherwise not illegal to practice chiropractic (as it is in countries with Napoleonic Laws) and there is no official recognition of the profession, there are no laws to prevent you from practicing chiropractic. In fact, the Commonwealth countries are governed by "Common Law" which makes it legal to practice your profession. Once you meet the resident or work visa requirements, meaning that you can legally live and work in the country, all that is required is that you set up your practice by meeting all the local laws that apply to any business. There are many countries that require citizenship to own a clinic, therefore you could only work in another DC's office. There are disadvantages though. It is very difficult to run a regular practice. You have virtually no access to x-rays, ordering lab tests or other procedures that are under other providers' regulations. This tends to be handled by establishing a close working relationship with a local MD. It is recommended that you visit every\* chiropractor in the country to discover what they have learned about what is or is not permitted. (\*not everybody shares the same views)

**4) ILLEGAL (but somewhat tolerated)**

When it is illegal to practice chiropractic, the laws usually prevent anyone other than an MD to treat people. There are several countries where MDs have become DCs and limit their practice to chiropractic (i.e. Slovenia, Germany). France, Spain and Lebanon, for example, have seen slower growth because of this difficulty. There are 400 DCs in France and only 95 DCs in Spain. It is a risk but that does not seem to deter those who are there. Belgium capitalized on the growing need facing governments to acknowledge the many "complementary and alternative medical" providers in their country. Other countries like Swaziland state in their law that chiropractic is illegal.

This is also how Israel, Iran and Philippines are finding their governments extending an invitation whereby chiropractors can define their profession, for regulatory purposes. If this is done right, it can be an excellent first step. The key is to lobby for a full scope of chiropractic recognition without compromising or selling short the profession down the road. The important fact to remember here is that chiropractic is the most educated of the majority of the "alternative or traditional" providers. This turns out to be our strength. California in 1913 was recognized under the "Drugless Practitioner's" Act; which later became the Chiropractic Board. When we are the strongest or more educated group, we tend to dominate the "drugless" practitioners.

There are excellent opportunities for chiropractors to practice abroad. Begin the journey by taking an honest survey of yourself. Ask friends and family to help you get a realistic view of your strengths and weaknesses. Do you see yourself as a pioneer? Do you see yourself as a solid practitioner who can adapt in a foreign culture? Can you learn another language? Can you be happy living under different physical standards? The more you learn about yourself and about other cultures, the better of a decision you will make about setting up a foreign practice. Those of you who immigrated to North America, your questions are different. Why are you not back home, building the profession in the culture and language of your heritage? Are you going to leave it up to foreigners (well meaning, allbeit) to decide how chiropractic is to develop in your homeland?

The future growth of chiropractic will be in non-English speaking countries. There are over 6 billion people on this planet. Taking into account economic and socio-cultural factors, there is an estimated 350,000 chiropractors needed to service those people who can afford the care, today. Right now we are only caring for 20% of our potential patients. If you practice in California or Florida, you know first hand what it is like to practice where there is a surplus of chiropractors. Think it's getting crowded in America and harder to practice? Think again. Think differently. Think: " Do I have the right stuff to practice abroad?"

## 4 Visas and Sponsorships

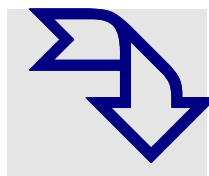
**A**nyone wishing to visit a country is granted a tourist or visitor's visa simply by showing a valid passport and often paying a small fee. If you intend to work in that country it is an entirely different matter than entering with a visitor's visa. In non-visitor cases it will be necessary that you contact the embassy or consulate office of that country nearest to you.

### Note

**The Chiropractic Diplomatic Corps strongly encourages you to take all the necessary steps to have a lawful authority to reside in the country of your interest, register appropriately as a business entity along with any legal Chiropractic authority before setting up practice.**

Inform the embassy of your wishes to set up a practice in their country. Write down everything they request of you. Work visas generally require that you have a local businessperson or corporation sponsor you. If you have friends or relatives in that country, they can sponsor a "residence visa" on your behalf. This may serve as an alternative way to enter the country. Once you have a residence visa you can set up your own practice. Realize that the party sponsoring you is stating to their government that they are taking personal responsibility that you will not become a burden to that country. You can imagine that strangers are not likely to become a sponsor on a whim just because you want to become an associate of theirs. In either case you will have to prove your ability to support yourself.

This raises a strong case for you to make a personal trip to that country to demonstrate your value and raise a prospective sponsor's confidence in your reliability. Besides, you also need to know if you personally "fit in" that culture, especially if you have not visited or lived in the country.



The process may begin with the sponsor's application being processed first; then, your visa application can be submitted. Once your work or residence visa is approved you will have a limited period of time to make your physical move or the visa will lapse. This means that you should only apply when you see yourself able to have the resources to move. On the other hand you must also realize that it may take months, even up to a year, to obtain landing rights. This is where many people get discouraged.

Every country will have different requirements. Contact someone who can guide you or you may get all the help you need through the embassy or consulate office. Patience and courtesy will go a long way in your favor.

## 5 Document Authentication

**I**n countries without formal recognition of chiropractic the government has difficulty in knowing just where to place the chiropractor. Frequently, all that is required is authentication that your credentials are what they say they are.

- A. Once you have applied for a work or residence visa the consular will advise you of which documents they require authentication.
- B. This process involves a series of steps:
  1. Copy your Doctor of Chiropractic Diploma (or equivalent) and the other documents requested.
  2. Have a notary public certify that the copy matches the original document and that you are in fact the person named on the diploma.
  3. Then, take the notarized copy to City Hall and have the City Clerk's office certify that the notary who notarized the documents is in fact authorized and registered to perform such witness.
  4. Then, take all these documents to the State Capitol to have the Secretary of State verify that the city you had the documents notarized is an official local government within your state.
  5. If there is no Consulate or Embassy office in your state or province, you may also be required to do the same at the Federal Government level.
  6. Then, have a letter drafted listing, word for word, what the diploma and other documents actually say. This letter is then translated into the official language of the country of destination.
  7. Now you can submit your professional qualifications to the proper authorities.





## 6 Foreign Practice Self Evaluation

**W**orking overseas can be a rewarding, enriching, satisfying, horizon-expanding experience if done correctly by the right person with adequate preparation and planning. Doing it successfully depends on your knowledge, your skill, your energy, your wants, goals and objectives, your finances and your determination. You'll need certain personal attributes to give you the best chances for success. Actually, these requirements are not much different from the requirements for success in many other undertakings.

### Part One: PERSONAL

1. Are you in good physical condition? Are you free of physical impairments? (Yes to both parts counts 10 points.)
2. Have you lived overseas before? If so, give yourself half a point per year lived overseas with your parents or while in the military. One point per year while on a church mission, with the Peace Corps or another service organization or a school exchange program. Three points per year if you went overseas on your own to learn a new language or broaden your horizons.
3. Do you tire easily when working on your feet? (No counts 1 point.)
4. Are you young, vigorous, and enthusiastic about your future in the profession or if not, are you able to hire people to help you get that way and with work along the way, such as painting the office, moving furniture and adjustment tables (Give yourself 1 point for a yes).
5. Are you accident-prone or suffer from "montezeuma's revenge" when dining out more than 1,000 miles from home? (No counts for 3 points.)
6. Do you have much free time to work on projects at home? Evenings? Weekends? (Take 10 points if you have at least 20 hours a week free.)
7. Do you want to live overseas enough to dedicate most of your leisure time for a year or more to adapt yourself to the new mores and customs you will encounter? (Add 10 points for a yes.)
8. Would you also be willing to invest most of your leisure time for a while in order to provide the necessary push to begin building your own practice? (Give yourself 5 points for a yes.)
9. Do you have the willpower to make yourself work and study and learn, even when you might rather be doing something else? (5 points if you answered yes.)
10. Would you be able to count on help and moral support from your family and friends, even if it's only someone who will agree to telephone you once a week or so? (5 points for a yes.)
11. Do you speak at least one foreign language? If not, did you pass your language courses in high school? (Yes to either question counts 5 points)
12. Would you take pride in building your own office in a culture different from your own and showing it to your family and friends, OR would you be just as happy working for another doctor in an office in your hometown? (2 point if you answered yes to the first part of this question.)
13. Do you have a record of successful planning and carrying out of projects in your former jobs, at home or in school? This could be in any field; the important thing is that you carried them through to successful completion. (Add 5 points to your total if your former teachers or supervisors would give you a yes.)
14. Do you find it easy to keep busy in your spare time without a boss looking over you or structuring your work? (5 points for this one if you answered yes.)
15. Would you and/or your family mind living in a small spare room in the office for a time if it were necessary to save on rent money? (5 points for a yes.)
16. Do you have a firm offer of employment from a doctor who has been practicing in the same location for at least 5 years, whose office fits your idea of how you would like to be practicing 5 years from now? (10 points if you answered yes to all parts of this important question.)
17. Do you have a good credit rating, and do you have at least \$3,000 saved (not credit cards) as a nest egg to tide you over while starting in a new country? (10 points if you answered yes to both parts.)

Written and contributed by  
Dr. Frank Spencer, Spain.

18. Are you currently up to date on your student loan repayments? (10 points if you answered yes to this.)
19. Do you have a "clean" police record of nothing more than minor traffic violations? (10 points if you answered yes.)
20. While repaying on your loans, will the income in your new position allow you to keep current on your repayments and also survive in the new country during the first year? (5 points if yes.)

This was the most limiting part of the test and you must score high on it to be qualified for the rest. If you are not personally suited to live overseas, no amount of technical or mechanical or professional proficiency will get you through. Add up your score before you go on to the next section.

Score 70 = passing, 80 = good, 90 = excellent, 100 = superior.

The MUST questions are numbers 1,6,7,11, 17, 18, 19, 20 and 21. If your total score was 70 or more, you are personally suited to trying to practice overseas. But if you missed on any of the key questions, count living overseas as a high risk for you, at least until you can change answers to the key questions.

### Part Two: VISUALIZATION

21. Are you a fan of put-together take-apart puzzles such as jigsaw puzzles? Are you good at working mazes? (Give yourself half a point for a yes to each question.)
22. Can you imagine and plan how you'd transport 250 pounds of baggage through airports, train stations and bus depots? (Yes counts 1 point.)
23. Do you often try to figure out how certain things are put together and perhaps want to take them apart to find out? (1 point for a yes.)
24. Do you know where you want to be and what you want to be doing, both personally and professionally in 2 years? In 5 years? (Award yourself 2 points if you're clear and focused both personally and professionally 2 years from now, 10 points for both parts if today you know clearly, and have on paper, what you want 5 years from now.)
25. Have you already written (if only in school) a clear and concise business plan? (5 points if you, not your roommate, did it.)
26. Would you rather do research for a treatise on how a color television works or would you prefer doing a paper on the effectiveness of television commercials? (Add 3 points if you'd choose to figure out how it works.)
27. Are you able to communicate with people who might not be able to understand what you are saying on the first, or second or third try and not get yourself angry or frustrated? (3 points if yes.)

People are either USING their powers of visualization or have not yet begun developing them. You may claim all 20 points on this portion of the test if you scored 7 or better, or if you are certain by other indications that you are developing your capacity to visualize your intended future.

### Part Three: BUILDING AN OFFICE YOU'LL BE PROUD OF

There is something basic about the process of building a successful practice, no matter where in the world you do it. If done correctly using cues from models that have worked in other cultures, the practice will take shape quickly and provide a structure around which a person can build a most satisfying life. Needed is the ability to look at systems, other success models, and adapt them to your new environment. The techniques can be learned through reading, observing successful doctors already practicing in your old or new country, asking questions, and then trying out what you have learned in your own office.

28. Do you have good people skills? Can you converse with paupers and kings, and everyone in between? (5 point for a yes here.)
29. Have you cultivated the habit of putting your goals on paper and reviewing them monthly? Weekly? Daily? (Take 1 point, 2 points and 3 points, respectively, for each portion of this important question.)

30. If you had a choice, would you rather draw up plans or implement them? (1 point for implementing them.)
31. Before arriving in your new location, can you write up a detailed business plan, including how you'll manage living, learning, and marketing yourself in a different culture for your first 12 months there? (Here's THAT one again. 3 points only this time.)
32. Give yourself half a point for each of these books (listed by title and author) you now own and have read: Word of Mouth Marketing - Wilson, the Advanced Day Planner User's Guide - Smyth; Time Management- Winwood; Growing a Business- Hawken; The e Myth Revisited- Gerber; Positive Discipline, -Wiwood; Made in America - Walton, The Seven Habits of Highly Effective People - Covey; Maverick - Semler; Principle-Centered Leadership - Covey; Old Times on the Mississippi- Mark Twain; Guerrilla Marketing - Levinson; The Game of Work - Coonrad; Do-it-yourself Marketing for the Professional Practice - Sachs; Physical Examination of the Spine and Extremities - Hoppenfeld; Why Employees Don't do what they're Supposed To Do - Fournies; A Patient's Point of View - Esteb; My Report of Findings - Esteb; the One Minute Manager - Blanchard & Johnson; Parker System of Professional Service for the DC - Parker; How I Raised Myself from Failure to Success in Selling - Better; Get Ahead - Buzan; The Mind Map Book - Buzan; [You get the point, so add any other related books.]
33. Have you ever been a member of a small or part-time business? (Give yourself 10 points if you were an owner or in an upper management position, three points if you were in the sales or marketing arm of the business.)
34. If you were remodeling your office, doing the work yourself, would you tear out a wall you spent several hours building if you discovered it was not right? (Score 3 points if quality won out.)
35. Do you know someone you can go to for advice on practice building when you need it? (Add 3 points if the person is a good source of accurate information).
36. Are you willing to read, listen and learn about the principles of growing a business? (4 points if you are.)

Add up your score for this section:

Score 13 = passing, 20 = good, 27 = excellent, 35 = superior.

The important thing to remember is that if your score is low, you should have answered yes to question 36 because you have lots of extra work ahead of you learning about how to start, grow and manage a practice, especially in a foreign country. If you scored excellent or superior, you should have a minimum number of start-up in a new country, which represents a large part of being successful in any culture.

Scored less than 13 on this section? Better work with someone in your own country who can help you learn skills to be successful at home and overseas.

#### **Part four: MECHANICAL**

While similar to practice building, the mechanical aspects of running an office require further knowledge. Team building, management, clerical and motivational are some parts of the work. While not all are needed to live overseas or run an office successfully, they are an indication of your self-reliance and ability to overcome minor difficulties without depending on someone else. All can be learned by reading and asking questions and then doing, but this part of the test will indicate how much you already know. Not many people would be able to successfully answer all the questions, so don't worry if you miss some.

37. Have you ever tinkered with old clocks or other mechanical contraptions? (1 point if you're a good tinkerer.)
38. Have you had any luck assembling children's toys from instructions? (A Christmas Eve mechanic earns 2 points).
39. Who fixes things at your house when they break? (1 point if it's you)
40. In today's world, the use of a computer is almost indispensable. Give yourself half a point for each program that you now know how to use: Word; Excel; Filemaker Pro; Adobe Printshop or another graphic program.

41. Did you play any team sports while in high school or college? (Give yourself 1 point for each year AND each team sport played.)
42. Have you ever overhauled an automobile engine, remodeled a kitchen, or done inventory in a store or business? (Give yourself 5 points if you were in charge, 2 points if you helped someone else do it.)
43. Have you ever done any electrical wiring around the house? (A yes here is worth 1 point.)
44. Have you ever been a teacher or teaching assistant in a school or technical institute? (Give yourself 1 point for a yes.)
45. Score half a point for each of these part time jobs you've had or activities you've done at any time in your life: Caddie at a golf course, paper boy/girl, retail sales clerk, any job in the construction trades, house cleaner, flight attendant, member high school senior play, yearbook staff,
46. Are you saddled with any credit card or high-interest consumer debt? Subtract 3 points for every thousand dollars you owe.

Add up your score for this section. Score 13 = passing; 20 = good; 27 = excellent; 35 = superior. Here as in the previous section, if your score is low, you must be willing to learn and adapt. If your score is excellent or superior, you should have no trouble overcoming the challenges you'll meet working overseas. If you score less than 13 on this section, consider first working a couple of years with someone in your home country.



#### FINAL SCORE

Tally your individual scores on all four sections of the test and find your overall test results below. In every case you should have gotten a minimum of 70 in the personal section and credit for all 20 points on the visualization section, as described at the end of them.

- 116 - Barely passing.
- Look over your individual scores to see where the weak points are and decide whether:
  - You want to have your own office overseas enough to work at improving your ability.
  - You'd be better off working on your own in your home country to first develop basic skills.
  - It would be best to work as an associate in your home country.
- 140 - A good score, especially if you maintained a passing grade or better in part 3 building an office and part 4 mechanical aspects.
- 165 - You are well qualified and need have no hesitation about whether you can work successfully overseas, for yourself or for an employer.
- 190 - You have mastered yourself and the abilities you'll need to build your own office in a culture different from your own. You should get a great deal of pleasure from working overseas and it should be relatively easy for you, particularly if you scored high on the personal section.

## 7 Humanitarian Missions

**S**hort-term humanitarian missions are increasing in both the number of countries served and in the frequency of events in each country. There are two main groups of participants: secular and non-secular. Although motivation may vary from group to group, the common thread is purely humanitarian.

People living ordinary lives with only the occasional extra-ordinary experiences that bring fulfillment and satisfaction are finding themselves attracted to experiences that have the potential to "transform" their lives. Transformational experiences sought by the religious participants help them reach a closer experience and relationship with God through service to the needy. Transformational experiences sought by individuals help nurture their humanitarian tendencies and possibly also are opportunities to get closer to God.

How about the patients in the target countries? Their needs are pretty simple: They want access to a doctor when they need one. A doctor who is affordable and who is willing to become a part of their community. It's really no different than what patients expect of their doctors where chiropractic is established.

### **The profession needs six things from short-term chiropractic missions:**

1. Attract qualified doctors who may become permanent additions to the country's roster. Let the DCs know that they are welcome to come back and become a part of the pioneer effort in that country.
2. Attract prospective students to the profession from the attention and PR produced by the event. Schedule regular "special student sessions" at local universities or have people return after the day's clinic hours for a student talk.
3. Local DCs need to be included in the planning stages and their clinic advertised to the patients who are treated by the mission team. (So patients will have a place to continue care.)
4. Respect the authority of the local DCs and tap into their contacts but mostly use the "dignitary" status of the mission to further the cause of establishing the profession in a more formal or official capacity.
5. Only bring licensed doctors to treat people and be fully documented at all times. The only exception is when a DC schools structures a clinic environment within the mission group and even then, only senior interns who qualify and receive school clinic credits.
6. Make the mission a series of highly publicized events in each location. High profile events reach more people and have the best results across the board.

Humanitarian missions have left many of the existing practicing DCs with mixed feelings. If we are to extend the concept of outcome oriented activities, there could be special consideration made for the doctors who are pioneering chiropractic in the developing countries targeted by mission groups. Understandably, pioneer DCs may not feel entirely comfortable with receiving too much attention since they actually live with the fear or the risk of sanctions by the local government should a chiropractic group create undesirable results. Always include the leadership of the existing DCs in any activities where chiropractic services are being delivered to the local population. They may have no interest in participating in the mission or it's planning; being tied up with their own practice and families. Or, just the opposite, they can be a valuable ally and a primary contact. Either way, they are entitled to be notified and invited.

Chiropractic is only regulated or officially recognized in about 30 countries. These are largely "northern countries" with an advanced industrialized economy. In the other 65 countries, where chiropractic is not legislated, there is nothing to stop anyone from misrepresenting themselves as chiropractors. This is why mission participants need to be documented.

Reaching across borders, oceans, great distances and cultural differences presents many challenges. It takes resources and reserves of money, people, time and opportunities. We will likely continue to see an increase in foreign missions. How can these dedicated DCs meet the demands of today's mission needs? Networking and sharing experiences and resources is a good place to start. Adopting an updated mission structure is the next step to take, one that addresses the deficiencies of older models and also takes partial responsibility to be a stakeholder in the establishment of the profession of chiropractic in the target countries.

## 8 Promoting A Foreign Practice

**P**ROMOTING is the functional word here. Madison Avenue has trained the American masses to respond to pre-conditioned "sound bites" and "catchy phrases", cute logos and a myriad of marketing ploys and advertising tactics. North Americans accept marketing and advertising efforts by professionals within their context of cultural evolution. The land of opportunity gives professionals permission to engage in sales-like tactics, to corner their share of the market place. In most countries outside of North America, a doctor would offend the culture and folklore of the professional persona by advertising. The mistake is easily made to want to do "what worked back home."

So how does a chiropractor build a practice in a non-American culture? The old fashion way: getting results with your patients, and building a network of referral sources, i.e.: patients, friends, other doctors, business associates and of course, a good, visible location. Earlier, the word promotion was used as a "practice building tool." Let's look at the definition of the word Promotion.

### **Promotion**

The encouragement of the progress, growth or acceptance of something - increasing publicity

### **Publicity**

Information disseminated through various media to ATTRACT public notice. Public interest or notice is achieved by the spreading of such information

### **Publicist**

One who publicizes, i.e.: a press agent or publicity agent

Contact a local publicist or hire a local public relations person and together design a promotion strategy. Then invest both time and money to the same extent that you would budget for yellow page ads or some marketing project. Management consultants recommend between 5% and 15% of your gross collections budgeted for "Acquiring New Public." In the meantime you could read books on Public Relations and make inquiries into what the local professions are currently doing there to attract patients or clients to their offices.

*Please keep in mind that disseminating information for the purposes of promoting is not the same as "educating people." The object of publicity is the interest generated. More specifically, the goal of promotion is to get people who are "outside" the office to come "inside" your office. It is up to you to educate your patients after they are inside the office. Educating the public is a very expensive effort that falls onto large National Associations. As a solo practitioner your money needs to get people in the doors. Do a good service and let your well-educated patients spread the word of chiropractic.*

## 9 Building A National Association

**C**hristianity teaches us that "when two or more are gathered in My (Christ's) name; there I am." Those who believe this live with a feeling of peace and hope for the future. In Chiropractic, when two or more are gathered, there is frequently distrust, disagreement, dissension, and a host of non-productive attitudes that often prevail. The world's largest drugless healthcare profession has certainly attracted some independent and strong-minded individuals.

However, in today's world, countries that are successful in obtaining professional recognition and favorable legislation are those where all Chiropractic Groups come together for the sake of the profession. United Kingdom had to find a way to bring all factions under one roof, one voice, before finally obtaining full privileges and protection under the law.

**Here's what chiropractors in other countries have done to establish a strong National Association:**

- Agree to meet regularly and stick to it.
- Agree on a name and investigate the options, legal and otherwise, to establish a formal organizational structure.
- Put together By-Laws and hold elections.
- Work together and delegate tasks to each DC.
- Submit application to join the World Federation of Chiropractors (WFC).
- Put some start up money together and establish annual dues.
- Stay in touch and refer patients to each other when possible.
- Put together a bulletin or newsletter as the number of DCs grows.
- Greet all new DCs and seek 100% membership and participation.
- Glorify what everyone has in common and respect the differences.

85% of the world's chiropractors are in the USA, where there will always be, so it seems, two National Associations. Many of the individual States have two or three State Associations. This division is also becoming apparent throughout the world and will most likely continue as long as there continues to be an effort by many to attempt to reduce chiropractic into a "physical medicine" science. Most DCs in practice outside of the USA are concerned with the location and correction of vertebral subluxations. Let's hope all groups can concede to this reality and respect each other in spite of different adjunctive interests. There is an expression that says: "You can pick your friends, but you can't pick your family." It is not stretching the imagination too far to say that a profession in many ways is similar to a family. Now, is there harmony and understanding in all families? Not usually. Do people have to learn to simply accept their family members, regardless? Usually we tolerate those who offend us and set up clear boundaries as to just how much or little those offenders play in our lives. Your chiropractic family falls under the extended family role in your life equal to the degree of affinity and rapport shared between any two individuals. At least you don't have to live with them; but you could line up under one banner of solidarity for the profession's common cause. What are the barriers to the development of a single National Association? Differences? Egos? Bigotry? Distrust? You might be surprised to even find racism hidden behind claims for "nationalism" behind the cries of: "let's keep the foreigners out." There are also insecure claims that "there just aren't enough patients to support any more chiropractors." This has been heard from countries with as little as three or four chiropractors. When one group alienates some of its individuals, human nature solves the problem by polarizing these individuals together and a second Association seeking respect and fair consideration takes form. The success of any organization comes from proper leadership. Not everyone is a leader; in fact few people are comfortable with this role. The leader agrees to be the representative speaker for the profession; to take responsibility that a current agenda is established for the scheduled meetings; to moderate the meetings, and to encourage every member to express their opinion and to encourage every member to contribute their particular talents. In some sense it is almost a DUTY; in particular when you are the pioneer DCs for the country.

## 10 Lobbying for a Chiropractic Law

The following excerpts were taken during the WFC World Congress, in Auckland, New Zealand, May 1999:

### A) For a small country (by Dr. E. Papadophilus, Cypress)

1. Find out how many members are required to establish a legal association. Legal Advisor required.
2. If you do not have enough DCs, go ahead and organize "as if" anyway. You may have to simply function as a club with same requirements at first.
3. Print letterhead.
4. Meet with Minister of Health.
5. Submit documentation, usually to the Medical Director or Deputy Minister (also and MD).
  - o Get letters from dozens of countries' Minister of Health where Chiropractic is established.
  - o Contact other country National Associations for copies of established definitions and scope of practice.
6. Testify to the legislative committee and voting bodies.

### B) For large countries (by Dr. Michael Pedigo, ACA-USA)

1. Learn how the Political System works in your country. (from lobbyists and elected representatives)
2. Identify the decision makers.
3. Make friends with the decision makers.
4. Have lobbyists and legislative consultants.
5. Play the "grass roots" cards, when applicable (Patients (Patient influence on voting officials.)
6. Be prepared to put money into the effort. (phone, letters, political contributions, time)
7. Persistence pays off (change tactics as needed, but ... )
  - o Be polite
  - o Be firm
  - o Be relentless
8. **Be Prepared, always.**
9. Be united as one Professional Association.
10. Know "how things work" and how to put timely pressure on the decision makers.



### C) Miscellaneous comments:

#### - by Dr. Tony Metcalfe, UK

Country officials may feel that the chiropractic profession requires applying the following:

- MATURE: demonstrate professional and personal maturity.
- 1 BODY: only one representative body; no dissention.
- UNIFIED EDUCATION: qualifications of a DC are uniform.
- PROVEN EFFICACY: documented research; some in your country.

#### - by Dr. Enrique Canut, Mexico

- Personal prowess makes a difference.
- Be diligent but DO NOT compromise.



## Some ABCs of Starting A Foreign Practice

- *The ABC's... No! Make that the WXYZ's of starting a foreign practice.*

Advising chiropractors about the many issues that come to play when looking to start up a foreign practice reveals a mnemonic that seems to apply here (similar to the OPQRS that is learned in preparation for conducting a thorough patient consultation). Call it the STUV-WXYZs of starting a foreign practice and it looks something like this:

- S** Speaking the local language. Chiropractic needs to be communicated - to be understood.
- T** Travel before deciding. Making a personal connection with the local people is critical.
- U** Understand the culture. The less difficulty you will have acclimating to the area.
- V** Visualize your clinic. See patients in waiting room, on the adjusting tables, etc.
- W** Who, what, when where and why - all apply here as they have never applied before.
- X** "X" marks the spot. Location could possibly be even more critical than you would ever think.
- Y** Yes, you have financial means and the approval of family or spouse.
- Z** The "Z" factor. Some call it "drive" some call it "motivation" - but if it's not there, beware.

**S**peaking the local language is often the first concern of English speaking doctors when contemplating where to set up a foreign practice. Many DCs have to limit their choices to English-speaking countries when they do not see themselves being able to learn another language. Others on the other hand may already speak a second or third language because of their family's cultural habits, travel or because of personal interests. Speaking a second language does in fact open up specific countries that would be considered more ideal simply because the language card is a trump card.

When patients understand the benefits of chiropractic they will refer others for care. In pioneer practices, where the average person on the street knows nothing about chiropractic, success is built on referrals and primarily referrals from patients. A satisfied patient may or may not refer but an informed and enthusiastic patient will. The doctor will have to be a good communicator.

There are countries where it is accepted that patients are seen by foreign speaking doctors through a translator; Saudi Arabia is a good example. Other countries like the Philippines, Singapore and some Latin American countries also will see a specialist doctor when a translator is available. The secret would be to train the staff very well in communicating the chiropractic story under these circumstances.

**T**raveling to the country being contemplated is highly recommended and as early as possible. Call it a reconnaissance expedition! It is amazing to hear frequently from doctors that say they want to practice in a place they have never been. Television travel shows are fascinating but certainly cannot substitute for the personal experience of spending time in a new place and meet the local people face-to-face. Even a brief visit can reveal much about a country and its people. What is of particular concern is whether a true feeling of empathy and genuine concern exists inside the prospective doctor's spirit for the local population. It is either present, or not, and will weigh into the ultimate fate of the practice venture.

Then there is the obvious confrontation revealing whether the prospective doctor can actually feel comfortable with the living conditions of their country of interest. First hand evaluation of clinic and home accommodations answers many physical and financial questions that need to be addressed early.

**U**nderstanding a culture is more about you than it is about the people you wish to serve and live around, at least in the early years of practice. Everyone has a certain ability to confront adversity and to tolerate a given level of change. Living in another country and getting used to the culture and the different standard of life can wear out a person's ability to adapt to daily challenges and ongoing irritations that accompany a drastically altered lifestyle. Unless one's tolerance for change can keep up with the degree of unfamiliarity that leads to frequent frustrations, the bottom suddenly falls beneath your feet and the next thing you know you find yourself returning home to the familiar - defeated.

Understanding the ways things are done in any country is paramount for establishing a successful marketing plan. Yellow page ads and coupons in local publications are not very appropriate in Asia and Latin America. How do you market your practice in the French Riviera or a small Swiss village? This article cannot possibly provide much specific information in this area other than raising the awareness that using local publicists who understand the way things are done in their 'milieu' is a better direction to take.

**V**isualization is a well accepted concept by successful people in sports, business and personal management. It involves mental imaging of an action or event with specific focus and intention. Visualization also is an integral part of developing the "Z-factor" or enthusiasm needed to make the new clinic a successful venture. On the more practical side, this also allows you to make better decisions about the details of your clinic: its size, location, patient flow, procedures, etc. Make scale drawings of the clinic plans. Extensively review maps of the country and city or cities you will be seeing patients. Think about every detail from patient flow to which charts or pictures you want to bring along and place on the walls.

Practicing abroad is not like moving to another town or city in the USA or Canada. The thrill and excitement of the adventure can quickly turn into a nightmare when you are not adequately prepared or do not have the adequate reserves of energy and tolerance for change we talked about in the former section.

**W**ho, what, when and why - all apply here as they have never applied before:

**Who** do you know in the country? Someone who can help you build a framework of logistical and emotional support. This can be a prospective partner, employer, family or other relative, friend of the family or other contact where trust has been established and there is a sincere interest in seeing things happen for you.

**What** information do you need to know to better prepare? What has to be resolved (financially, timing, language, etc.) before you can actually make the move?

**When** do you plan on taking a reconnaissance trip, wrapping things up where you are and when are do you actually starting seeing patients in the foreign practice?

**Why** have you decided to practice abroad? The risks of failure are higher if you are escaping or running away from something - or someone. Doing the right thing but for the wrong reason can easily backfire, simply because your degree of commitment may be lacking just when you need it most. If on the other hand, you have done your homework and feel strongly, almost overwhelmingly about your decision, it stands to reason your opportunity for success will create itself.

**X**marks the spot! The location of a chiropractic clinic has been an important success factor seen in industrialized countries where the substantial middle-class population has been able to support a large growing number of chiropractors. Where there is one DC for every 10,000 people or less (USA, Canada, Australia) the clinic location can usually be found in a retail center or a stand-alone building on a busy commercial street. Some DCs have forgone signage for space in a medical office building. In earlier days, it was not uncommon to see home-office set-ups for chiropractic clinics and often the best place in town was near the local hospital. Today, the pioneer practices in new countries face different challenges.

If a country's economy and humanitarian laws favor a larger middle-class, the locations for a chiropractic clinic will likely follow the same experiences seen in English-speaking countries. In countries where the middle-class is practically non-existent, a two class society has really only one group of people who will be able to pay for chiropractic care in private practices, namely the well-to-do folks. Here it is a mistake to try and locate a clinic using standards and criteria that work in the USA!

The locations that worked during the pioneer days in America, such as near the hospital and/or in a home-office on a busy street, may also be suitable for today's pioneer practices. In addition, it helps to study the habits of the local healthcare providers in the country and copy the location decisions made by local dentists and medical doctors in private practice.

When chiropractic is initially being introduced to a developing country, go where the prospective patients live and work. The wealthy that can well afford care expect first class facilities in a first class location such as in a street level office in a financial district, in a ritzy mall, in a stand-alone building within a large secure community, or rent an office just in front of the main entrance to the large secure communities. Once the DC population increases to where there is one DC for every 100,000 people, the newer practices will then be selecting the "second-best" locations still near wealthier communities, but smaller sized or in a central retail location that attracts people from these smaller secure communities.

Due to the great disparity between financial classes people who can afford to live in middle-class homes or in exclusive communities have demanded secure, segregated home developments. This does make it easier for the chiropractor to locate in a nice neighborhood and maintain a good quality of life, even though the rest of the population, often over 80%, lives in poverty-afflicted areas.

**Side Note:** Many DCs who understand these economic conditions and still chose to serve the poor, usually arrange a free clinic for a couple of days per month in a church or community building located in the poorer communities. By lowering the financial barrier this way, hundreds more people can be helped.

There is yet an alternative practice model being recommended by the Chiropractic Diplomatic Corps called the Dual Practice that may apply in situations falling between the two extreme options mentioned earlier. [The Dual Practice](#) consists of designing a combined "Private Clinic" and "Public Clinic" where all the patients can be seen in the office setting that meets their needs and expectations and all under one roof.

The [Private Clinic](#) has a first-class theme where patients have a nice waiting room and are seen by the doctor by appointment in an exquisitely decorated and equipped adjusting room and/or private office. These patients come in by appointment and pay the full office visit rate as they leave.

The **Public Clinic**, located under the same roof, has a separate waiting room and an open adjusting area set up for volume visits that is humbly decorated and basically equipped. Here patients sign in, pay a greatly discounted fee (1/5th) up front, take a seat and are seen on a first-come-first-seen basis. Clinics usually require that patients hear a mini-lecture before they are permitted to go into the adjusting area. An interesting approach that makes sense considering that the poor can only afford to return 2-3 times, even at these highly discounted rates. Referrals must be high to work.

In all situations calling for a clinic location decision, the doctor must have a clear perspective of the economic influences and have researched the habits of other private practitioners before committing to a location. As they say in Real Estate circles: "The three most important things to know about success are: location, location and location."

**Y**es, there is enough money and emotional support to undertake the challenge of opening a chiropractic clinic abroad. When this declaration is spoken with confidence - its time to get serious!

**Z**The "Z" factor refers to the degree of drive and enthusiasm needed to maintain the energy and focus for a successful venture - an important element of building the endurance required in facing the simultaneous challenges that confront the doctor setting up a foreign practice. When people travel on vacation there comes a time during the trip when everyone runs out of gas. These are dangerous times. Constantly having to cope with daily challenges can at times be daunting under the most familiar circumstances. Adapting to daily lifestyles of a foreign culture can wear out even the most experienced traveler. Making a living in these conditions increases the exposure and the risks of being overcome. This is effectively countered by the doctor's drive, reserves of energy and enthusiastic dedication.



**Hopefully**, this potpourri of information can be of use by prospective chiropractors with interests in establishing a foreign practice some day or even sometime this year. There is more support and infrastructure available today to assist DCs who can make the transition into a foreign practice than there was 10 or 20 years ago. Realistically, less than 5% of people have what it takes to fit into this ex-patriot category and who can take up the need for pioneer DCs throughout the world. This alphabet soup may have a cute title but this is a serious subject; one that can change the lives of millions of people now without access to regular chiropractic services.