

# Spinal Health: The Backbone of Chiropractic's Identity

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## ABSTRACT

**Objectives:** The purpose of this commentary is to explore the concepts underpinning professional identity, assess their relevance to chiropractic, and propose a model by which a strong identity for the chiropractic profession may be achieved.

**Discussion:** The professional identity of chiropractic has been a constant source of controversy throughout its history. Attempts to establish a professional identity have been met with resistance from internal factions divided over linguistics, philosophy, technique, and chiropractic's place in the health care framework. Consequently, the establishment of a clear identity has been challenging, and the chiropractic profession has failed to capitalize on its potential as the profession of spine care experts. Recent identity consultations have produced similar statements that position chiropractors as spinal health and well-being experts. Adoption of this identity, however, has not been universal, perpetuating the uncertainty with which the public regards the chiropractic profession.

**Conclusion:** To gain public and professional acceptance, chiropractic must be unequivocal in declaring its scope, expertise, and intent. Failure to do so will lead to obscurity as other professions acquire necessary skills and position themselves as the custodians of spine care. (*J Chiropr Humanit* 2016;xx:1-7)

**Key Indexing Terms:** *Chiropractic; History*

## INTRODUCTION

Identity is that which defines us as individuals. The product of genetics, parenting, environment, social circumstances, and acquired attitudes, beliefs, and behaviors, identity represents those intrinsic and extrinsic factors that make us exceptional. When we share parts of our identities with others, we form social groups, bonded by common features and recognizable by cultural traits such as language, gestures, customs, and rituals.

Professional identity presents an enigma where people from different social groups come together to deliver a service. Although they may exhibit a general commonality of purpose, their attitudes to the provision of that service are informed by myriad other factors. In addition to how a profession may see itself, the public will develop its own perceptions of professional identity informed by what it

sees, hears, reads, and experiences. This may be creative or destructive, and any profession that is not mindful of its public persona may risk the ignominy of having an identity imposed on it.

For an idiosyncratic profession such as chiropractic, it is not difficult to see why few papers have been written on the subject of its professional identity. Its unsteady trajectory, punctuated by periods of external persecution and internal conflict, has meant that how it has presented itself to the world has been far from consistent.

## DISCUSSION

As a collector, Daniel David Palmer's accumulation of human specimens was one of his more macabre. At a time when philately was taking off, and bespectacled enthusiasts painstakingly mounted their precious postage stamps into prized albums, the founder of chiropractic had developed a fascination with osteology and began to amass a collection of human bones at his Palmer Clinic and Infirmary in Davenport, Iowa.<sup>1</sup> As much to attract visitors as to serve as an educational tool, Palmer's exhibition of human skeletons and spinal columns, exhibiting all manner of grotesque deformities and pathologic conditions, drew visitors from far and wide, helping to secure his reputation as a fountain of knowledge on all things osteologic.

D. D. Palmer's discovery of chiropractic in 1895, courtesy of his acquired knowledge and his legendary adjustment of

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Harvey Lillard,<sup>2</sup> focused his attention on the importance of the spine as it related to the nervous system and to health and disease. Although he encouraged manual joint adjustment of all joints of the body, it was the correction of displaced joints of the spine by hand and the theory of functional restoration of the nervous system that gave chiropractic its distinct identity at a time when other proposed methods of curing disease were far from cogent.

D. D. Palmer's son, Bartlett Joshua Palmer, devoted his life to advancing the chiropractic profession as an art, science, and philosophy. Having acquired the osteologic collection from his father, B. J. Palmer grew it over a period of 15 years to more than 20 000 specimens, comprising virtually every bony anomaly and pathologic condition known to exist in the early 1900s. Professors of anatomy from medical schools throughout the United States were regular visitors to Davenport, Iowa, to view the unique display. By 1927, the Council on Medical Education was proclaiming the Palmer exhibition to be "without doubt, the best collection of human spines in existence."<sup>1</sup>

B. J. Palmer undoubtedly understood the value of identity. As the "Developer of Chiropractic," he used marketing tactics and entrepreneurial skills that positioned chiropractic as a distinct healing art with expertise in spinal health and well-being.<sup>3</sup> Neither the Palmer School of Chiropractic nor other schools that had been established to satisfy the growing desire for chiropractic education promoted chiropractic as a means of treating back and neck pain but focused on the removal of vertebral subluxation to facilitate health and well-being and treat disease. This approach gave form to the chiropractic profession during a time of rapid medical advancement and organized hostility to the nonmedical health professions.

Questioning of chiropractic's professional identity is by no means new. Almost from the naissance of the profession, an internal dichotomy emerged comprising "straights"—whose metaphysical and vitalistic approach confined chiropractic to the removal of vertebral subluxation and the restoration of Innate Intelligence (a life force considered by vitalists to be responsible for the organization and healing of the body)—and "mixers"—whose methodology was broad scope and mixed diagnostic, treatment, and philosophical constructs drawn from a range of health professional approaches and attitudes.<sup>4</sup>

Historically, mixers did not subscribe to a single cause of disease and employed a diverse range of treatment approaches, which included but were not limited to the correction of vertebral subluxation. Fierce debates ensued between straights and mixers. B. J. Palmer, a proponent of straight chiropractic, at one time even claimed that any practice not following his "hole-in-one" adjustment of the upper cervical spine, regardless of any other techniques employed, sullied the identity of chiropractic.<sup>5</sup>

The development of the scientific method transformed health and health care. The late 19th and early 20th

centuries saw dramatic advances in medical knowledge, and its application saved millions of lives.<sup>6</sup> Causes of disease were identified. Because of measures such as sanitation, the provision of clean drinking water, and improved nutrition, housing, and working conditions, premature death rates fell, and diseases that had killed millions were brought under control through health education and vaccination programs.

Groundbreaking discoveries, technological advances, and the pursuit of knowledge led to relentless progress in health care delivery. Science flourished, and within a few generations, beliefs about health and disease were transformed. Gone were the beliefs that disease was a form of punishment from higher powers,<sup>7</sup> replaced by germ theory and modern scientific methodology.<sup>8</sup> Incontrovertible evidence meant that medical training evolved, catalyzed by the damning Flexner Report of 1910,<sup>9</sup> which harmonized training and cleaned up medical schools across the United States. Investment in scientific research, the emergence of evidence-based practice, and the harnessing of technology all served to transform the practice of medicine.

Although not immune to scandal, the medicine of today is unrecognizable from that of 100 years ago. Its practitioners are among the most trusted individuals in society, and the cultural authority of biomedicine has long been secured. Whether such trust and authority is fully deserved is not the subject of this paper. Other commentators have exposed collusion with big pharma, ruthless acts of protectionism, and systematic attempts to contain and eliminate other nonmedical health professions.<sup>10</sup> Nevertheless, harmonized education, a willingness to be self-critical, and the acceptance of evolutionary change has been coupled with a cultural shift from medical paternalism to patient autonomy.<sup>11</sup>

It is erroneous to consider health simply as a medical matter. The provision of health in societies is as much political, ethical, economic, and social as it is about the delivery of care to populations. In establishing an identity for any health profession, consideration of wider societal concepts is necessary to provide context. Chiropractic is no exception.

For more than 120 years, chiropractic has survived against the odds. Outside the United States, it remains a relatively small player in the health care market, and within the United States, its practitioners and proponents have been abused, persecuted, discriminated against, and imprisoned for their beliefs and practices.<sup>12</sup> It may be said that during the period of chiropractic's development, its identity (or to be more precise, its identities) has served as a testament to its enduring appeal to those seeking a drug- and surgery-free solution to spinal disorders.

Despite its survival, the chiropractic profession remains fractured. The scientific proponents of the profession insist on the adoption of modern science and evidence-based practice to inform their clinical decision making and patient

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