

THE PIVOT REVIEW

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piv'ot (piv'ut) n. 1. a point, fixed pin, or short axis on the end of which something turns. 3. That upon or around which something turns or depends; the central, cardinal, or crucial factor, member, part, person, etc.

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More Thoughts on Chiropractic and Its Role in "Health Care"

Recently, I wrote a paper for Sherman College's Philosophical Conference discussing the pros and cons of chiropractic (particularly straight chiropractic) identifying itself as a part of health care. It was intended to create thought about our philosophy, to challenge some of our present perceptions as to what we do and why we do what we do, and to make us think. I am not sure it accomplished that purpose. On the contrary it seemed to create mostly knee-jerk reactions. In fact, one chiropractor had a rebuttal to my paper before it was even presented. What truly surprised me was the fact that many chiropractors, who I perceived as being the leaders in the straight movement, were opposed to the idea. Some were adamantly opposed. (If you have not yet read the paper, it can be found on the FACE website at www.f-a-c-e.com. *It would be helpful to read it before*

going on with this article. Some, who I believed thought "outside the box," surprised me with their fervent desire to desperately hold onto the health-care image. Perhaps we (objective) straight chiropractors are not as forward thinking as we try to let on. Perhaps we really want to hold onto the security blanket of health care.

Yet why embrace the health care system a system, that is so wrong? At least 98% of its thinking (apart from chiropractic) is outside-in philosophy and the system itself is controlled by medicine. It has a distorted respect for life, embracing euthanasia and abortion. It is willing to kill a fetus that in a few weeks will be a living, breathing human being in a effort to retrieve some cells that have only the remotest possibility of "curing" some disease in the distant future. Health care has virtually nothing in common with us except that we care for

In this issue...

- Revisiting Our Objective
- Tolerating the Intolerant
- A Lighthouse or a Flashlight

the human body. So many professions do that that I would think we would desire to be separate just to avoid confusion. What is more, health care has a financial reimbursement concept that is totally antagonistic to chiropractic philosophy--payment for a specified time, specified number of visits or until a medical condition goes away. Not only is it antagonistic to our philosophy, socialized medical reimbursement programs are antagonistic to the concepts of a free society. Medicare and drug reimbursement specifically are on the verge of destroying our economy. Finally, in many cases chiropractors have to lie on insurance forms to qualify for reimbursement. And still, we want to be associated with that system?

Apart from the wrongness of the outside-in philosophy that permeates the health care model and gives rise to the above-mentioned procedures and actions, chiropractic is not a natural fit for the health care model. That model is made up primarily of medicine and its alternatives. Chiropractic is not an alternative or a substitute for anything. Health care addresses conditions. In fact, we often joke of the irony that it is called health-care. Chiropractic does not address diseases or conditions. Stephenson makes that clear. Disease involves conditions. Even trauma involves conditions. DIS-EASE involves the lack of coordinated function. It is different from disease and different from trauma (Read Stephenson on Trauma). The subluxation cannot be compared to a broken leg (trauma), as one chiropractic philosopher has suggested.

Chiropractors, straight chiropractors, see people on a regular basis regardless of the presence or absence of symptoms or any other so-called criteria of health. We realize that the need for chiropractic

is not based on whether you are sick or healthy. While some people are trying to create specialties in chiropractic like pediatrics, most of us realize that such specialties are vastly different than their medical counterparts. All people need chiropractic--not just children or athletes or any other particular group. Of course, if an individual chiropractor wants to focus on a particular group that is fine. It is unfortunate, however, that these specialties end up being driven by a medical condition or conditions.

One chiropractic philosopher has recently suggested that because of our unique position we could just as easily be a religion. I guess if you do not see the difference between chiropractic and medicine or chiropractic and health care, there is no distinctness to chiropractic and it could just as easily be practiced as a religion. Another chiropractic philosopher also suggested we could just as easily be seen as a religion because we are so unlike medicine. His argument is that we have to be one or the other and so let's be health care. That was, in fact, the choice B.J. made many years ago when George Shearers and others wanted to go the religion route and avoid the legal problem of being health care. I see chiropractic as like nothing else. It fits into no category, it is totally distinctive and unique in its philosophy and practice.

Let me propose a hypothetical scenario. Suppose you could snap your fingers and suddenly everybody in the world understood what chiropractic was all about. They understood it was not about backaches or any medical condition. They did not associate it with "health care" except as it related to their over-all well being. They understood the need to come regularly and to bring their entire family in for lifetime care. Everybody in

your community and the world had the big idea. However, there is a catch, a trade-off. You have to give up a few things. First you have to give up insurance. You can see all the people you want but they have to pay out of their own pocket. Second, you have to disassociate yourself from health care. You cannot talk about chiropractic for conditions or diseases or prevention or health maintenance, but then you would not have to because people would know what chiropractic is. Third, you would have to give up the title "doctor." You would have the respect, the admiration and the love of your community but they would not call you doctor. Lastly, you would have to call yourself something other than a chiropractor. Here's the question that impacts upon your philosophy: would you do it? Would you accept that role? Would you snap your fingers? Despite the fact that we straight chiropractors know that the above hypothetical scenario would do the most for humanity, I wonder how many would be willing to do it. I wonder how many so-called straight chiropractors would.

Of course, we know that this scenario is beyond the realm of possibility, but then so was the practicality of my paper. Both the paper and this hypothetical situation are merely exercises to make us think about what we are doing or what we should be doing, whether we should be moving further and further from the medical model or embracing more and more of it. Apparently, some in the straight community are perfectly willing to accept the latter. ▲

Revisiting Our Objective

I believe it is helpful to re-examine our objective from time to time to reaffirm why we have an objective and to determine whether it is still valid. The straight chiropractic movement originally decided to define chiropractic by its objective because first, almost every profession does it and second, because there were so many different approaches and definitions (e.g., state, national, B.J.'s, Stephenson's) that it was all very confusing. If we had one objective, not only would it more clearly define us but we could also evaluate procedures and techniques as to whether they helped us meet our objective or not, hence whether they were straight chiropractic or not.

It was originally determined that our objective was to correct vertebral subluxation. While that was a limiting objective (in the sense that it prevented the "mixing" of modalities), it was realized that much of the practice of correcting vertebral subluxations was done as a therapeutic measure. In other words, chiropractors corrected vertebral subluxations to relieve back pain, treat other symptoms, cure disease, treat disease, prevent disease, straighten spines and for a myriad of other reasons. So our objective began to be clarified. Correcting vertebral subluxations without a stated reason is akin to being subluxation-based. Subluxation-based allows one to add other things to his/her practice. Correcting vertebral subluxation without a stated reason allows every chiropractor to determine for himself or herself why they are doing it. It still leaves a vagueness to what we do. It was suggested that we correct vertebral subluxations because they are a detriment to life. That is good.

It has non-therapeutic reasoning behind it. Others suggested that we correct vertebral subluxations to enable the innate intelligence of the body to be more fully expressed. Personally, I happen to like that one the best. It is as specific as you can get. It involves the physical application of chiropractic (correcting subluxations) and it involves and acknowledges the metaphysical component of chiropractic. Innate intelligence is something that is a fundamental aspect of our philosophy. It is totally foreign to medical practice. It sets us apart from every-

"Chiropractic is specific or it is nothing."

thing and everyone else. Physical therapists are correcting vertebral subluxations, as are medical doctors and osteopaths. They may not call it "correcting vertebral subluxations" but a "rose by any other name..." Besides, what if they started calling it a vertebral subluxation, would they then be practicing chiropractic?

Recently, it has been suggested that we abandon the idea of defining ourselves by our objective and instead define ourselves by a *raison d'être*. I would tend to reject that idea based solely upon the fact that it is French and I cannot pronounce it. Those promoting the idea say that our area of interest is the vertebral subluxation and our *raison d'être* is correcting them. I think that is a step backward in the progress of straight chiropractic. It may create a wide umbrella under which many chiropractors, doing one thing for many reasons, can gather but it does nothing to clarify what we do. It is like "subluxation-based." It embraces

more people. Perhaps that is what those promoting this idea want to do, embrace more people. I would like to welcome more people into the straight movement but not at the cost of compromising our philosophy. I would like more people who are in agreement with our objective to join us. If we want to adapt a French word to explain our "reason for existence," that's fine. But let us realize that our area of interest is the vertebral subluxation and our *raison d'être*, our reason for existence, may be their correction, but specifically because they interfere with the expression of the innate intelligence of the body. Why we correct them is as important—if not more important than that we correct them. Without that defining

aspect to our reason—we risk becoming a modality, we lose our identity and that which truly makes us separate and distinct and therefore vitally necessary as a profession and as individuals. If we can find a way to make that more clear, more specific, let's do it. But let's not go backward and make it less specific. To quote B.J., "Chiropractic is specific or it is nothing." Whether it is technique philosophy or our objective, the more specific we become the more we become something as a profession. The less specific, the more we become nothing as a profession. ▲

Tolerating the Intolerant

It seems that intolerance is alive and well today. For all the hyperbole about the “hate-straight” and those of us who supposedly want to limit the freedom of chiropractors to practice a broad scope approach, the only tolerance I see is being demonstrated by the very group that’s being accused.

The problem begins with a true understanding of what tolerance is all about. Somehow the definition of tolerance has gone from meaning “I do not agree with your approach but I respect your right to prefer that approach or conduct yourself in that manner” to meaning “I accept your approach as being as valid or legitimate as mine.” Do you understand the difference? The true definition is, you are wrong but I respect your right to be wrong. The second

suggests that there is no wrong and that everybody can be right. Well, you can see that by holding to the orthodox definition, the straight chiropractor has been stripped of his tolerant position, while allowing people to practice as they choose. This was previously understood to be the practice of tolerance. Today tolerance seems to be defined as accepting any kind of approach to chiropractic as being valid whether or not it has a defining standard or principle. Straight chiropractors maintain the position that other approaches are not valid, and that they neither support them nor efforts that promote them. But since by virtue of the law it is legal to practice in other ways they will not infringe upon someone’s practice rights. Intolerance is trying to force someone to

adhere to your standards. Tolerance is allowing others to practice the way they want, even if you think it is wrong.

We also need to differentiate between legal and valid. Just because the law says various approaches to the practice of chiropractic are legal does not make them valid. As citizens, we respect the right of anyone to practice chiropractic any way they want within the law. That does not make it right, any more than chiropractic being illegal in the early part of the last century invalidated it. Let’s be clear that we do not agree with certain approaches to chiropractic but we acknowledge the legal right to practice in that manner. That is true tolerance. ▲

A Lighthouse or a Flashlight

We seem to have two very differing viewpoints within the straight chiropractic community. For the most part, we are in agreement as to what our objective is, i.e., to promote chiropractic as the correction of vertebral subluxations simply because they are detrimental to the inborn, intelligent expression of life. (Perhaps that is a new way of stating our objective. See *Re-visiting Our Objectives*.) The difference of opinion lies in how we go about promoting that objective to the chiropractic profession. Historically, the movement has taken what I call the lighthouse approach. We have been a strong, solid beacon of straight chiropractic, a light on a hill. We have said, “We will project the light and truth of straight chiropractic. The profession can chart its position by

that fixed point.” It can use us as a guide to the safe harbor of a successful profession or it can ignore us, make its own way and run the risk of seeing the ship chiropractic end up on the shoals of historical oblivion. I truly believe that because of our immovable position, chiropractic is today closer to what it should be than if we were not there. Those traditional chiropractors, the middle-of-the-road types, who are being drawn into the medical model, have seen us as a standard for the last 25 years. Sometimes we have been an embarrassing conscience to them, reminding them of where they should be and the direction they should be going rather than allowing themselves to be carried by the winds of medicalization, to drift along in the current of popular

trends and governmental and medical acceptance.

Our thinking has always been that we will be a small group but a strong one projecting a large bright light of philosophical truth. We will not, in fact we cannot, move. Our principle does not allow it. We will sit here and wait for chiropractors to come to us, to be drawn by the very fact that we are unmovable and clear on our professional objective, penetrating the darkness of confusion in the profession.

There is another viewpoint in the straight chiropractic community, a rather recent one: the flashlight groups’ argument is that we are not reaching enough of the profession, we have a limited exposure, that our message is so logical that if more could hear it, more would accept it.

We have to carry our light to the four corners of the chiropractic profession. We must get out and shine it everywhere and if we do not, we will always be small, and most important, we will never impact the profession and the world with straight chiropractic. However, to some of them, carrying our light to the profession means associating with and dialoguing with those who see chiropractic quite differently than us, and

even embracing some who see it only slightly different than us. Their position is that we must search out and meet people where they are,

bring them in and help them change at their pace. The lighthouse group says that in doing that we give credibility to their approach, we acknowledge the validity of other approaches to chiropractic, and worst of all, we give credence to the idea that there are different gradations of straight chiropractic. The truth is that as far as true chiropractic is concerned, in our opinion, we are in the light and everyone else is in the dark. They maintain that to get together, to associate with and to sit down with the other approaches, diminishes our light. A flashlight can never be as bright as a lighthouse. The flashlight group counters that if our principle and philosophy is strong enough, we should welcome the opportunity to share it in a forum that includes the entire spectrum of chiropractic thinking. They argue that many straight chiropractors are involved with the rest of the profession in areas like being on state boards, being active members of less than straight state and local organizations and teaching at chiropractic colleges.

Should not we all be similarly involved?

Lighthouse chiropractic has gotten us to where we are today. We are the only professional group that is both consistent with chiropractic's historical roots and one that will not be drawn into medical oblivion. Both sides would agree with that. The flashlight group would also add that it has kept us as a small organization, unable to develop and carry

well, a flashlight or lighthouse that has no light is equally worthless.

I suppose by now you as a reader are waiting for the wise old sage to tell you what we should do. If you are, you are confusing your Joes. I don't have the answer. I have friends in the lighthouse and those carrying flashlights. I see both arguments. I am old enough to see the success, the safety and the wisdom of the lighthouse approach and

young enough to want to see this movement grow larger than 1% of the profession. I don't have the answers. But I believe as a

movement we

can come up with the answers as to whether we want to be a lighthouse or a flashlight. I further believe we need to sit down and start talking about the issue. At this time it has created a schism in the straight chiropractic community and heaven knows that as small as we are we do not need anything dividing us. The vast majority of chiropractors who ever were a part of the straight chiropractic community are no longer actively supporting it. It is not because the movement has changed any in the last 25 years. True, some of them have passed on. Others have lost their light. But I am sure others have gotten a clear impression we should be a lighthouse or a flashlight and we as a movement cannot decide. Let's make up our mind and move on. ▲

The vast majority of chiropractors who ever were a part of the straight chiropractic community are no longer actively supporting it

out programs to promote straight chiropractic. The straight national organization with a history of more than 25 years, until recently, was still, more often than not, omitted when all national organizations were listed. To them not being mentioned with the others is an insult. To the lighthouse group it is, "So what, who wants to be listed in the same breath as those organizations anyhow." Lighthouse chiropractors want to emphasize our difference from every other organization. Flashlight chiropractic wants to embrace those chiropractors who have the vertebral subluxation in common with us and then point out our differences. Lighthouse chiropractic maintains that every flashlight straight organization in history that has tried to embrace others has misplaced their light and become a non-straight organization. The flashlight chiropractors counter that no other previous organization has had a clear objective and a clear mission. They further argue that if we are maintaining the light of our objective we can take it anywhere. If we lose that light,

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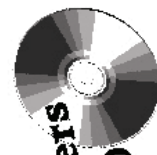
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