

This marks the 12th edition in the first year's publication of our electronic newsletter, *The Chiropractic Advocate*. We trust you have been inspired as well as informed. The main Topics affecting the International growth of the chiropractic profession have been introduced over this short time prompting the second year to take on an alternate monthly format beginning January. You can revisit these archived editions on [the Chiropractic Advocate](#) website. We encourage more of our readers to make their personal contribution to a world that so desperately needs to receive the benefits of chiropractic care.



In this Issue:

- EDITORIAL: Sponsoring Pioneer Practices
- COUNTRY TOPIC: Bali and Italy
- Newsletter policy

SPONSORING PIONEER PRACTICES:

When things don't change... things don't change! And what creates change anyway? It's opportunities.

In a recent *Chiropractic Advocate* newsletter we talked about Bi-Cultural DCs that can serve as a supporting arm for International growth within their country of birth or ancestral origin. It was also mentioned that non-native individuals may have interests that can impact growth because of who they are and what they bring to the table. In some cases these DCs have the contacts and the money. For others it's their love of the language and the people of that culture. Others still, bring time and manpower to put something together. Still others simply have the money and are looking for a meaningful way to combine their passion for chiropractic and a great tax write off for taking regular trips to the tropics. Hopefully, this article will spark some new brainstorming efforts and to encourage these DCs to share their "gifts" in a collective manner and to see themselves becoming active much sooner. Are you one of these chiropractors?

One way to kick-start the profession is to set-up clinics that attract both semi-permanent or rotating DCs as the seasoned base-chiropractors and other DCs who come for short-term periods with the goal to interest them into eventually opening up in another town. Let's face it, there are a lot of DCs who say they want to be a part of the pioneer effort but can't put their ideas in motion, either because of their accumulated obligations and baggage or because it's simply too big of a leap to go at it alone. Consider these two options:

Syndicated groups of chiropractors may be the solution that brings the collective ingredients together: money, experience, time, appropriate language skills, contacts, prospective partnering DCs and clinic locations. The advantage of an official syndicated group of doctors is the legitimacy and long-term planning that is required. Standards of practice are much more easily implemented under contracted relationships. A DC group can effectively add a new clinic every year with the right people on board. Some estimates indicate that a \$25,000 investment in a clinic in a developing country can begin a cascading growth of clinics with only \$10,000 needed for each subsequent site when spaced to open a new one only once every year. Try to do that in America!

Co-ops create yet another possibility for the establishment of more permanent clinics abroad. This is a less formal association of DCs who share a country of common interest but in a more loosely structured agreement. What ties it all together is that a permanently placed DC serves as the anchor of the clinic and any humanitarian outreach programs sponsored by this cooperative group of DCs. An excellent source of short-term participating chiropractors are the newly graduated DCs who are waiting 3-9 months just to take their state or provincial boards. Instead of wasting this interim period, they could be a part of the cooperative's outreach sites where they can acquire extensive clinical experience in a short period of time.

Ground rules:

1. Always contact the country's National Association and keep them informed of what you are doing.
2. Screen your prospective DCs for any state licensure disciplinary actions
3. Don't let anyone's active licenses lapse during their time abroad
4. Verify that new graduates have finalized their graduation requirements
5. Provide orientation and logistical assistance to the newer members of the group
6. Keep adequate reserves of funds and potential back-up DCs

There are new pioneer clinic models that apply today and that work well in different cultures like Latin America. If you have any ideas to share on this topic or any questions about starting up your own group, [CONTACT US](#).

The whole world was shocked again by terrorist attacks, this time in the sacred paradise island of Bali of which CNN has likely provided you with all the gruesome details. What has been the impact on the chiropractors there? Dr. Dawson has a permanent practice and Dr. Leonardi runs regular short-term missions in Bali.

Dr. Tony Dawson, an Australian trained chiropractor, earlier this year took over a spa hotel in Ubud, Bali that was started many years ago by Dr. James Taylor, an American chiropractor. Dr. Dawson says that he is fine and will continue to pioneer chiropractic in Indonesia although the Spa Hotel will likely have a slower year.

One would expect the impact of such an event to put a damper on anyone pursuing their ambition to sustain the International growth of chiropractic. Let's listen to Dr. Louis Leonardi, a DC who is active in coordinating several foreign missions in Bali, India and Peru:

"The media's constant talk of war and bio-terrorism puts an even further strain on the idea of doing anything on an International level at great risk. It is difficult to say more at this time because of the fear that is being created, yes created in the USA. The problems we face today are truly global but if we do not continue to live our lives in freedom then soon we will be afraid to do anything. We can't go to NY, can't walk the streets of Washington DC... Bombs in Bali - when will it end? Where will it end?"

We cannot wait with abated breath that it will pass over soon. This is the world's dilemma and as individuals we must continue on and as a profession; we must now more than ever bring our message to the world. Our voice as chiropractors is the lone wolf in the desert trying to tell the world about the problems of the health of people. Healthy people are Whole people who are not so likely to kill others or to destroy society. These things happen for many, many reasons; but a chiropractic perspective recognizes that subluxated and unhealthy people that are sick need our help. Now is the time for courage and commitment to keep our vision of a truly healthy world."

Let those with courage in our profession act with purpose by filling every foreign mission opportunity scheduled for 2003. Here is a listing of the majority of International missions: [Worldwide Chiropractic Missions](#).

SPECIAL TOPIC: ITALY

When the local profession does not act decisively to protect our heritage and special training, there runs the risk that other professions will try to usurp the distinctive role chiropractic plays in healthcare. Italy is a good example of a good thing that has gone potentially very bad!

Just as the [Asociazione Italiana Chiroprattici](#) had made substantial progress earlier this year in obtaining favorable support for a fair and equitable law to regulate chiropractic in Italy, the climate went from warm to bitterly cold when organized medicine pushed for a new law that makes chiropractic a medical specialty that only MDs could practice. Most of us reading this find it so far removed from possible and yet there it is. Unregulated countries or those with poorly drafted or compromised chiropractic laws offer too much opportunity for disaster to strike at anytime. Is there a lesson for all countries to learn from this situation? If you are part of the leadership in your country, it would be prudent to establish a Legal Committee to review the potential risk you face under the currently drafted chiropractic laws in your country. Don't have a law yet? Start worrying or at least enact a committee with key DC individuals as members... along with proper legal counsel.

The degree of irregularities unique to Italy certainly explains why this country has become a war zone between chiropractic and organized medicine in Europe. There have been DCs practicing in Italy for many decades but slowly growing to just over 200 practicing today. 150 of them belong to the National Association while another 50 or more work for the *Static* clinics owned and operated by medical orthopedists. Then there is the school started in 1999 run by a DC that offers an MD to DC conversion course one weekend per month over two years. Messy indeed and a fertile ground for disaster! Sadly, there exists no International leadership in chiropractic capable of strategizing or guiding the profession away from this type of disaster. There are a few key individuals with a satellite view of the profession who have the global perspective adequate to put forward some solutions but without available funding nothing could happen anyway.

There are some 3,700 practicing DCs in Europe who are facing an uncertain future from this confrontation, who have every reason to be concerned and are supporting the fight in Italy. However, since 82% of chiropractors are in the USA and another 12% in Canada and Australia, it's not just up to the Europeans to invest in the War against Organized Medicine in Italy. Let every State Association donate \$1,000 to \$5,000 to the I-PAC on top of contributions from individual DCs. Those DCs of Italian heritage could also organize a [Country Support Group](#).

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 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.