It is an honor and a privilege to speak with you today, especially in honoring Dr. Joseph Janse and his many contributions to the chiropractic profession. I never personally met Dr. Janse, although he grew up in the small town of Huntsville, Utah, located in Ogden Valley, just twenty minutes from the city of Ogden where I practiced for more than twenty-two years. After studying Dr. Janse’s history and writings, it is clear to me that the chiropractic profession would not be where it is today without the leadership and foresight of this great chiropractic pioneer.

Dr. Janse has been described as a visionary, a scientist, an educator, and a clinical investigator. His role in chiropractic literally laid the foundation stones that have led to educational standards, model regulatory framework, and critical development in almost every facet of the profession. Today I would like to present some perspectives that I believe Dr. Janse would consider crucial to our plight as we face the challenges and opportunities of the twenty-first century in chiropractic.

Our current time has been termed the “Age of Possibility”. We enjoy the highest standards of living and the most advanced technology of any time before us. The chiropractic profession has attained a degree of recognition and influence that was almost unimaginable even twenty years ago. Yet, we face struggles and challenges from both inside and outside. At the same time, we have almost unlimited potential for continued progress if we make wise choices and maintain professional and educational integrity.

This is an era of paradox. We are faced with factors that on the surface seem contradictory, yet the truth and the way forward are discovered by seeking to understand the seemingly incongruous aspects encountered. As Yogi Berra says, “When you come to a fork in the road, take it”.

To adequately provide for our future, we need a few essential elements. We need to know who we are. We need to know where we are going. We must agree to disagree, and we must seek to understand our differences. We must learn to respect honest opinions that disagree with our view. Lastly, we all need to direct our conduct with integrity and reliability.

The future of chiropractic lies incorporated within many layers of paradox, and one of the most elementary is our identity. For decades we have operated as “outsiders”
in the health care delivery system, and yet today, we find ourselves becoming increasingly integrated into mainstream health care. We struggle with articulating who we are and what we do. Mostly we describe ourselves by explaining what it is that we don’t do. Typical definitions of chiropractic include the terms of “drugless” and “non-surgical” which actually are not definitive statements but rather terms of dissociation from convention. Even more confounding are the proclamations within the profession intended to divide and segregate some chiropractic professionals from others. We regularly encounter the idioms of “straight”, “mixer”, “subluxation-based”, and a myriad of other ineffective modifiers used to differentiate us from each other. The paradox seems to be this: The more we try to be different from one another, the more we need to find our commonality. In effect, our profession seems to be displaying multiple personalities, when in fact the presentations of divergence are merely components of the whole.

I don’t mean to oversimplify our situation, nor is it my intent to disregard the obvious. At times, individuals inside chiropractic operate with conflicting agendas. A few fail to demonstrate the degree of integrity necessary to positively advance the profession. Some individuals with proprietary interests masquerade as representatives of pseudo-legitimate professional organizations. This duplicitous behavior is harmful to the profession’s relationship with members of society. Chiropractic regulation cannot continue to tolerate this deception if we intend to maintain credibility and authority with the public.

Our identity, who we are, must be constructed proactively and decisively. What does a doctor of chiropractic bring to the health care table? What makes us different? How are we similar to other providers? What is the unique value we have to offer? All of these questions must be answered and incorporated into our statement of identity.

As a regulated and accredited profession, we have already established that a doctor of chiropractic is a primary care physician. For some, this statement generates unexplainable fear and consternation. Yet, the Standards of the Council on Chiropractic Education, the only nationally recognized chiropractic accrediting agency in the country, specifically includes this description, and it has been part of the CCE Requirements for Accreditation for almost a decade. Our educational standards have been recognized by the United States Department of Education and virtually every licensing jurisdiction in the country. Every accredited chiropractic college in the United States has voluntarily accepted this definition as a condition of accreditation. However, some college representatives have publicly denied our role in primary care, and some have openly objected to our designation as chiropractic physicians. The inconsistency revealed by such conduct is troubling.

Albert Einstein once said:

“Words are and remain an empty sound, and the road to perdition has ever been accompanied by lip service to an ideal. But personalities are not formed by what is heard and said, but by labor and activity.”
If a chiropractic college does not wish to accept and comply with established accreditation standards, it should voluntarily surrender its accreditation status. To function otherwise is disingenuous and deceptive.

As a profession, we have made attempts to describe what we do, and what our scope of practice is. One notorious example is the statement produced by the Association of Chiropractic Colleges commonly known as the ACC Paradigm. The ACC Paradigm could probably be more accurately viewed as the ACC Paradox. A paradigm is not reality. It is a viewpoint, a map, but it is not the terrain.

The ACC statement was created several years ago, and in the meantime, many changes have occurred to the landscape and environment of the chiropractic profession. When changes to the territory occur, an improved map is required. Reliance on outdated maps can lead to disorientation and confusion.

Although ACC Paradigm statements have attempted to address issues and to define the role of chiropractic, this attempt has also resulted in further splintering of groups within the profession, leading us to an inevitable paradox: *The more we attempt to describe ourselves with defining statements, the more flexible our definition must become if we intend to effectively respond to change.*

We must uphold our core commitment of serving the patient, and we should hold on to evidence-based methods and techniques that have been developed and refined. However, we need to be open to new ways of delivering and describing our services, and we cannot afford to limit our vocabulary to the terms and expressions of yesteryear. We must proceed with investigation and research. When new information is discovered, we need to accept the fact that changes must occur both in our manner of care and our explanation of the profession. We cannot cling to archaic terminology and practices when more effective and efficient approaches are evident. Change is the only reliable constant, and we must be adaptable to innovation and discovery.

Providing for the greater good of the patient must remain our highest purpose. As chiropractic regulators, you have been charged with the solemn duty to protect the health, safety and welfare of the public. The needs and wants of the profession must not obstruct this responsibility. You must ensure that ethical regulations are enforced, that high educational standards are maintained, and that doctors of chiropractic are competent to provide safe and effective health care. There is no higher calling. Do not be distracted by those that place the demands of the profession first, and the care of the patient second. Understand the deeper meaning of this paradox: *If the needs of the patient and the public are properly attended, the profession will prosper and grow.*

The need to provide a competent and accurate diagnosis for the patients we serve is self-evident. Diagnosis represents an ethical imperative, a professional privilege and responsibility, and a legal obligation. We cannot limit the profession to the analysis and correction of spinal subluxation. As doctors of chiropractic, we are responsible to our patient as a whole person, not simply as another subluxation. Clinical findings must be
interpreted for the patient, not merely reported. If we allow the profession to regress to the point that we limit our services to only the detection and adjustment of spinal subluxation, we have demoted our professional status and in fact become mere technicians. As an integral component of protecting the health and welfare of the public, chiropractic regulators must maintain and enforce the requirement that doctors of chiropractic provide a complete and competent diagnosis.

Some in the profession confuse the need to diagnose with the requirement to manage disease or pathology. On the contrary, the obligation to diagnose the potential cause of a patient’s presenting complaints provides the opportunity for referral and/or co-management of the patient. Dr. Janse is often credited with this paradoxical expression: “We should legislate as broadly as we are able to, so that everyone may practice as narrowly as they want to.” Each doctor of chiropractic should retain the right to limit his or her practice to specific areas of interest and expertise. Such limitation, however, cannot exclude the obligation to assess general health care, to examine areas of concern, to interpret clinical findings and indications, and to formulate an expert opinion consisting of a diagnosis of the patient’s health status. After such an evaluation and assessment has been made, the doctor of chiropractic provides advice and direction toward management of the patient’s health care needs, and decides which conditions are appropriately cared for with chiropractic methods and which will require the services of another provider.

Right now, the greatest challenge facing our profession seems to be our inability to communicate and cooperate among ourselves. Dr. Stephen Covey, author of “The Seven Habits of Highly Effective People” described the need to “Seek first to understand, then to be understood” as a necessary prerequisite to true communication and relationship building. When asked which habit presented the greatest challenge in his own life, Dr. Covey responded that he had most difficulty listening with the intent to understand, as the natural tendency seems to be listening with the intent to reply. We all seem to be convinced that we are right, and that we need to persuade everyone else that our views are correct. In order to meaningfully and effectively advance the profession, we must learn to understand each other. This will require us to put aside the insults and derogatory rhetoric, and to engage in thoughtful, sincere and open dialogue.

How do we accomplish this? Dr. Janse spoke of the need to “depersonalize our allegiances”, of “mitigating our emotional intensities”, and urged us all to “bring ourselves to the commitment to live and let live and to avoid the involvement of arguing and quarrelling”. His words were spoken more than fifty years ago, and they are just as true today as they were then.

Although situations constantly change and demand a different response each time, the virtue of understanding another’s viewpoint does not change. Dr. Covey states: “Values govern people’s behavior, but principles govern the consequences of those behaviors”. Values represent our subjective views and feelings. Principles are the external precepts that remain constant. The principles of honesty, respect, and integrity ultimately regulate the outcome of our conduct, whether or not we value them.
Dr. Viktor Frankl, in his book “Man’s Search for Meaning”, wrote:

“We need to stop asking about the meaning of life, and instead to think of ourselves as those who were being questioned by life—daily and hourly. Our answer must consist, not in talk and meditation, but in right action and in right conduct. Life ultimately means taking the responsibility to find the right answer to its problems and to fulfill the tasks which it constantly sets for each individual.”

I invite us all to consider the questions that are currently being posed for the profession. We cannot continue to repeat the actions that have brought us to this point if we expect to experience a different outcome. We cannot rely on outdated aphorisms and clichés to sustain our progression. As Max DePree wrote: “We cannot become what we need to be by remaining what we are”.

We all know what has been tried and failed before, but that does not give us license to give up. How we organize our view of the future will determine what sort of future the profession will have. The acceleration of change that we are currently facing demands that we embrace the chaos of contradiction. The answers to the profession’s questions will come through ethical conduct and conviction to what Dr. Frankl calls “right action”.

The integration of saying what we are and doing what we say will provide the key to discovering our next course. There is no other way to progress. As we consider this path, we find a final paradox: The future cannot be predicted by finding the answers; the outcome is determined by releasing the answers and embracing the questions. The answer today will be the question tomorrow, and clinging to that answer will ultimately restrict our development. If we remain open to uncertainty and respond with integrity, we will create a future of limitless possibility.

In closing, I would like to thank my friends Dr. Reed Phillips and Dr. David Wickes for helping me find research material on Dr. Janse’s life. I would also like to take this opportunity to announce that 2004 is the 100th anniversary for Western States Chiropractic College. Please accept my invitation to attend our Centennial Homecoming on June 4 through 6 in Portland, Oregon, or plan to visit us anytime this year and help us celebrate our anniversary as we cross the threshold to the next century of excellence in chiropractic education. Finally, I would like to express my appreciation to the leaders and members of the Federation of Chiropractic Licensing Boards for this opportunity to share my thoughts and to honor Dr. Joseph Janse. Thank you.