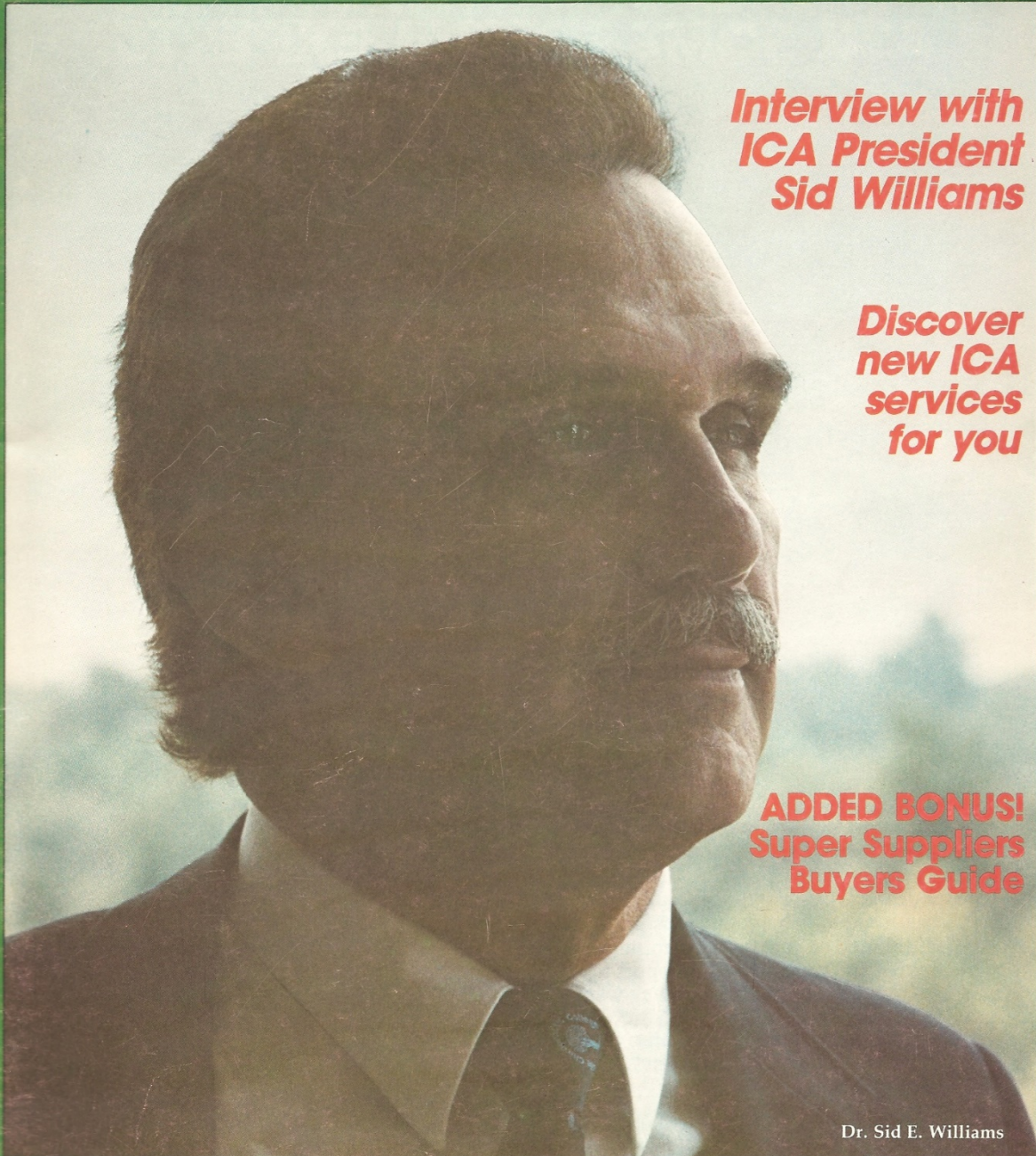


ICA[®] INTERNATIONAL REVIEW OF CHIROPRACTIC

Autumn/Winter 1982



**Interview with
ICA President
Sid Williams**

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Dr. Sid E. Williams

an interview with

SID WILLIAMS

Q: Why did you run for the office of president of the ICA?

A: My interest and participation in the ICA goes back to my student days at Palmer when I developed a keen interest in B.J. Palmer's work, philosophy, and dedication to the principles of chiropractic.

I have been involved with the ICA for 29 years and have attended every ICA convention since 1953. My wife, Dr. Nell, and I were at the Sarasota Convention in the early sixties so we could be close to B. J. during his last days when he was dying at his beach house on St. Armand's Key. Since his death, the enthusiasm, esprit de corps, and camaraderie in the ICA has dwindled. This loss greatly disturbs me.

I am and have always been concerned about what the ICA should and could be. We want to be recognized internationally as the largest and most respected professional organization representing

chiropractic. I want the fervor, the excitement, the enthusiasm, and the will to win put back into our association. I believe I can help restore these vital ingredients to the ICA and that is why I ran for the presidency.

Q: What will be the main priorities of your administration?

A: My main priorities are to provide ICA members with the service they have a right to expect from their professional association and to restore the ICA leadership in the areas of public relations and continuing education. I see the ultimate outcome of the achievement of these priorities to be the restoration of the confidence of chiropractors everywhere in the ICA as the leading and most appealing national association in their profession.

In the area of public relations, ICA must be more visible to the general public through the use of the

media via public service announcements, documentaries, interviews, publications, and through special awareness activities.

In the area of continuing education for the profession, we are working on establishing a series of our own specialty councils in order to provide both the new and veteran practitioners with pertinent information for improving their service to the patient and to the profession. We will encourage practitioners to participate in these programs as they become available.

Q: What type of specialty councils will be developed?

A: We have already approved the formation of the International Board of Chiropractic Spinal Roentgenologists (IBCSR). Chiropractors who complete the 300-hour instructional requirements and the subsequent exams will achieve dip-

lomite status in chiropractic spinal roentgenology.

This program will emphasize in-depth knowledge and skill which chiropractors can use daily in their office practices. This will prove to be of benefit to their patients as well as to the profession as our diplomates become recognized by the courts and by other professionals as being truly expert in their specialty areas. The first series of courses will begin in 1983.

Other diplomate courses under development will cover such areas as pediatrics, scoliosis management, technique, nutrition, and sports injuries. Once we get these programs under way, we will be able to better meet our members' needs for continuing education within their own professional association and to meet them within ICA's points of view. This will not only serve to strengthen the association, but our members' abilities as well. They will become even more qualified as chiropractic specialists in the structural aspects, conditions related to and the functions of the spine and recognized as such!

Although we are branching out into new areas of education, ICA will continue to emphasize that chiropractic is unique in the health care delivery arena and must remain so! I believe our practitioners must keep in mind that the goal of ICA and their own personal goals should be to maintain and protect the chiropractic identity. If we are not truly vigilant in this area, we may find ourselves someplace other than where we would like to be! The ICA is committed to helping the profession protect that which has already been won through our hard work and to providing practitioners with all the tools necessary for service to their patients and to achieving professional fulfillment.

Q: There has been some criticism recently of the national practice-building programs. Do you believe that practice-builders serving the chiropractic profession should modify their programs to reflect both the increasing acceptance of chiropractic and the changing concepts of professionalism affecting all professions at this time?

A: There are a host of issues in that question!

Practice-building is a historical and current fact of life, not only in the chiropractic profession, but also in the legal, dental, and medical professions. All of them have had entrepreneurial practice-building management seminars on office procedures and related subjects. Regardless of the profession, there have always been those who have been able to run and show how to run a practice more efficiently.

In the past, practice-builders have filled a very important void for chiropractors. Until recently, chiropractors were placed at an

Diplomate courses will include pediatrics, scoliosis, nutrition, and sports injuries

economic disadvantage by the somewhat closed reimbursement policies of the insurance industry and by the medical profession. Until the insurance equality laws came into effect, many patients had to turn to hospitalization and the medical profession to receive coverage and reimbursement. In order to effectively compete for patients, chiropractors had to struggle to establish themselves as successful practitioners. Some chiropractors rose above the situation through their natural abilities in interpersonal relationships, business management savvy, etc. However, many practitioners, while well skilled technically in their profession, were not educated as to the business aspects of running a practice.

At that time, the national associations did not fully address the problem and failed to develop adequate management courses for doctors. Therefore, many struggling doctors found themselves turning to the entrepreneurs who stepped in and filled this void, just as others had done in the medical, dental and legal professions.

I believe practice-building should be based upon truth, propriety, and professionalism. This should be reflected in the practitioners' advertising and in their presentation of themselves. Everything we do in relation to our practices should be ethical and proper.

We should avoid being inflammatory and flamboyant, and rise above such promotional gimmickery as giving away buckets of fried chicken, etc. The type of tacky and unprofessional images created by such nonsense not only hurts practitioners in their community, but the profession as a whole. It even causes embarrassment for their patients who are in need of chiropractic services, but abhor these type of cheapening tactics.

Of course, appropriate management procedures should be based upon the needs of the profession. In chiropractic, they should be geared to focus upon service to the patient as the number one priority. After all, it is this attitude of "service first" to patients that will cause all that is required for conducting a successful and rewarding practice to follow.

Part of running an ethical practice is the refusal of any health care practitioner to charge unnecessarily high fees or provide unnecessary services. This does not mean chiropractors and other health care providers are not entitled to charging and receiving reasonable fees. After all, their needs must be provided for just as much as others'. And of course, they are needed to sustain our clinic's operations, take care of our families, our employees, finance our continuing education, contribute to our communities and our profession, etc.

As I stated before, however, service comes first and no patient in need of chiropractic care should be turned away for lack of funds.

One aspect of some of the practice-builders' techniques that I do not care for is the concept of "selling services." I'm sad to say that this practice is more related to a doctor's concern with insurance coverage than it is with the patient's needs. The problem is not new and certainly isn't limited to chiropractic. Unfortunately, it is also aggravated by our current third-party payment system.

This system can sometimes make the provision of health care services at an appropriate cost a special challenge to practitioners. But the good news is that meeting that challenge also happens to be one of the best practice-building techniques I can recommend! Chiropractors should seek to serve patients and get them well as quickly as possible, rather than encouraging the kind of malingering or exploitation that all too often can characterize the pattern of usage under the third-party payment system.

Q: Dr. Williams, you must realize that you are a controversial figure in chiropractic due to your long-time association with the D.E. Movement. Do you believe your relationship with D.E. conflicts in any way with your position as a leader in the chiropractic profession?

A: The controversial aspects of Sid E. Williams began a long time before the D.E. Movement began! Back in 1954 the administration of Palmer College of Chiropractic became upset with my enthusiasm and dedication to the ideals of chiropractic, ideals I had gleaned from B. J. Palmer, himself. In fact, a medical doctor on the Palmer School staff at that time labelled me as "the last of the chiropractic die-hards!" There is no doubt that I am a conservative in matters related to chiropractic. Being a conservative does not mean that I am a believer in stagnation. Ordered growth is the hallmark of the intellect each of us possesses.

The problem, as I saw it, was that some in the profession appeared to feel that they had to live down

chiropractic! They forgot our strengths in their concern over our developing profession's image so often sullied by the American Medical Association. Many chiropractors therefore abandoned our heritage for social acceptance at the expense of principle. They sought to adopt the TV image of medicine while ignoring medicine's shortcomings and chiropractic's strengths. While convenient, this practice did not serve to advance the best interests of our patients.

I felt that chiropractic offered a new idea, a new understanding and that, with proper communication, we could win new friends and

Practice-building should be based upon truth, propriety, and professionalism

silence our most vociferous detractors. Truth has a way of doing that. I knew that established medical procedures had failed to correct many of the problems afflicting the human species and that the clinical experience of chiropractors demonstrated conclusively that we had the answer to many of medicine's most notable failures.

Medicine's overuse of surgery, the flourishing drug industry, the unhealthy alliance between the drug industry and organized medicine, and the astronomical costs of inadequate medical health care all convinced me that duplicating its failures while ignoring our successes was a prescription for disservice to our patients and an invitation for professional suicide.

The controversy that has been

associated with me has stemmed from this difference of opinion, of vision! I assumed that some day we would raise our educational level, notwithstanding the AMA's efforts to "stifle" our educational institutions. Moreover, as our preoccupation with survival relaxed somewhat as the law and common sense took its toll on the nefarious AMA activities, I assumed our level of professionalism would rise. It is difficult to follow the Marquis of Queensberry Rules when organized medicine insists on hitting below the belt, eye gouging and kidney punches. I do not attempt to justify some practitioners' unethical behavior or their unbelievably poor taste in advertising. I merely state that those "warts" should not blind us to the fact that our profession has been a route for pain-free living for millions of human beings. That ultimate fact sustains me. I also profess to a certain fascination with the idea once sponsored and promoted by the Palmers:

"One cause, one correction, and one cure."

Obviously, it is a dream and in this modern era is probably too simplistic for credibility. Nevertheless, for some ailments we know it to be true and for others we suspect it may be true. Our goal as chiropractors is to explore the human condition and establish the scientific limits to our hypothesis. As the New Zealand study concluded, we must develop, through scientific studies, an outline of "predictability" for both our techniques and the human response to those techniques.

There was a sign inside the Administration Building at Palmer which read, "Success consists of the climb." The problem is that too many people are waiting at the bottom not for the climb, but for an elevator to come take them up to the top.

There were still other signs, such as those situated along the staircase, which read, "I can," and "I will," and "I must." Then, up at the top, "I am!" I got the idea! "I am successful! I am anything that I want to be!" These two became my slogans. They were the key! This is the way I've been thinking, seeing myself,

I am in favor of DCs advertising with skill, dignity, and good taste



Dr. Williams discusses 1982 election results with California Rep. Tony Coelho, Chairman of the Democratic Congressional Campaign Committee.

and approaching life ever since! I think that this attitude, and my determination that came from the confidence that it gave me just naturally set me on a course that made me seem radical.

If you can envision your waiting room overflowing with satisfied patients, then you would naturally want to remove the barriers that would prevent the people from coming in — barriers that are mental, financial, and products of misinformation in nature. Many chiropractors were concerned with the economics of their practice: with how much income they could generate and how much they could collect! My emphasis, instead, was placed upon *service to the people!* I found, before the insurance equality laws were enacted, that the costs of X rays and physical and orthopedic examinations were a barrier to a great many patients' approach to a chiropractor.

The AMA's ethics ban on radiologists taking insurance-covered X rays for patients who wished to see a chiropractor was an unethical effort by the AMA to keep those patients "locked in" to an unproductive medical system.

In some areas this did not present a problem, but it did in areas where the doctor was money-conscious instead of service-oriented. If you put money first, it hurts your practice. So, I recommended to my friends that they advertise free examinations, including X rays when necessary, in personal mailouts only to their own patients. The purpose of this idea was to cause money hunger to leave their minds to promote a service-mindedness, for a greedy doctor cannot concentrate upon getting his patients well!

Unfortunately, some chiropractors did not follow my advice. They sent their advertisements to the newspapers. The altruistic purpose became subordinated to raw unadulterated greed. In hindsight I should not have been surprised knowing now that some professionals are so money conscious that they will sponsor chicken fries, free bargain offers, undersell their competitors and turn chiropractic into a circus barker's attraction. Instead of

hurting the entire profession through their greed and tawdry practices, they should focus upon giving service to their patients!

I am in favor of chiropractors advertising with skill, dignity, effectiveness, and with good taste. The communication of chiropractic-oriented information to a patient or potential patient is, to me, an absolute essential. Recently, some of my friends did not exercise this good taste, and I received some of the blame for the poor quality of advertising and reproduction employed by them. This is something that the national associations should remedy by teaching correct, tasteful advertising in seminars, along with ethical practice building, office management and other business-oriented courses. This could only enhance our professional image and help allay fears implanted in potential patients by the AMA. I have always listened to what B. J. had to say. In a couple of his epigrams he has stated, "printers ink makes people think," and "the more you tell, the more you sell."

I became even more controversial when people came flocking to my clinics as a result of my service principles and my structured patient education program. When this happened, I learned that envy is one of the most difficult of enemies to overcome. It is a great deterrent to human progress. There is much trouble because of it. As we became more and more successful in our chiropractic experience with an impressive and enviable flow of patients to our office, I could see and hear criticism in the wings, even among those who should have been sympathetic to us. Instead of finding out what we were doing and joining in, they allowed themselves to feel threatened by our success. I tried every way possible to reason and negotiate with them, but they had grown unreceptive.

I was misunderstood in the mid-sixties when I participated in a street demonstration for chiropractic in Baton Rouge, Louisiana. There were over 500 people who participated in a mock Cajun funeral, complete with casket and black-veiled ladies. We marched from downtown to the

Rotunda of the State Capital where we confronted Dr. Joseph Sabatier, the Chairman of the AMA's quackery committee. We didn't physically fight but we had a spit fight of heated words. But at least the Louisiana legislature received us well, and the governor made a speech to the two houses on health freedom. We felt we were tremendously successful in bringing productive attention to the injustices that were being imposed daily upon chiropractic and upon individual rights in Louisiana and other states. I admit, my tactics were designed to attract attention. Apparently some chiropractors believed they were overdone. If so, they were performed with serious intent and achieved a satisfactory level of success.

Sometimes I have been held to account for what others did. For example, some of my well-meaning colleagues bought hearses and painted hideous, gory signs on them (including big hypodermic needles). This was done in radical protest of what I considered to be the inadequate methods chosen by the national chiropractic associations and colleges to respond to the AMA's "contain and eliminate" campaign. Nearly every week there were negative, unanswered, slanderous articles in the news media about chiropractors and chiropractic. We were repeatedly called "quacks," "charlatans" and "cultists." Unfortunately, some of the hearses had "Life Foundation" on them. It was thought that this was what we were teaching in our D.E. meetings, but this was not true. We asked the doctors to leave the hearses at home and some of them quit coming to D.E. We regretted this because we loved and admired them very much. We also understood their passionate reaction to the AMA's attempt to destroy their dignity and self esteem. In some ways, however, we had to insist that our response be at a higher level than that of the sewer so carefully occupied by our detractors.

On another occasion we planned to take our \$65,000 chiropractic mobile unit to Davenport and to Palmer College. A friend of ours obtained a demonstration permit in

Davenport during the Lyceum time. Word got out that Sid Williams was coming to town with 400 mules and 400 blacks to protest the publishing of a certain chiropractic "white" paper. When the mobile unit arrived, it was met by plainclothesmen who were assigned to the Lyceum tent. They swarmed the unit, looking for the mules and the blacks! Of course there weren't any.

The delegation at Palmer Lyceum recognized the value of the mobile unit. They were impressed. We drove the unit from state to state, offering free chiropractic education and care to people wherever we went. During the ten years that we traveled, I'd say that we gave a million dollars worth of free

Minds, like parachutes, only work when open

chiropractic care, and we received much more than this in free publicity for the chiropractic profession, which added to its growth and recognition.

I have been subject to criticism from some in the chiropractic profession because they viewed me as somewhat of a threat to them and to their interests. Of course, I recognized the early weaknesses of the profession, but while others were hiding behind these, I was focused upon the good that the principles of chiropractic could do for the people. I have lectured all over the world, and I have always vigorously upheld the philosophy of the science of chiropractic. I have also always upheld the integrity and the credibility of the ICA.

In my world-wide lectures I have also strongly upheld the rights of the

sick to get well and to have the doctor and method of their choice. The separate and distinct differences that the chiropractic profession manifests are legislative parameters, and present a platform acceptable for today's conditions and will be secure for the future.

As one of my colleagues has written elsewhere in this issue, "Minds, like parachutes, only work when they are open." I have always tried to keep an open mind. I welcome constructive debate and the flow of new ideas. Ideas, of course, must be judged on their merits. Some things I have done were correct at the time but would be incorrect in a different context. I have made mistakes in the past, and I'm sure I will make more in the future. When I do, I hope my critics will at least recognize that I am deeply devoted to the profession, to its practitioners, and to the patients we all serve.

I'm not ashamed of my chiropractic position — I'm proud of it! Frankly, I could have surrendered my principles and then I could have been very popular with everybody. But I've always put chiropractic first, and I always will!

Q: Why did you become a chiropractor?

A: I have always wanted to be a doctor. When I was a young athlete in high school, I took care of the other players on trips and before games when they were injured or had colds, etc., because I simply enjoyed helping people. I did not know that I wanted to be a chiropractor until I came into contact with the profession a little later in my life.

My father was the one who introduced me to chiropractic. He was a patient of Dr. Dean of Moultrie, Georgia, who was the first chiropractor to be licensed in this state. My father attributed his excellent health to Dr. Dean.

The early practitioners of chiropractic that I met around that time also were so enthusiastic about their profession that I was greatly impressed by them, despite the severe

DCs should work toward a unity of purpose and a common cause

criticism of chiropractic I had heard from some members of the medical profession. These chiropractors spoke about their profession with such authority and sincerity that my natural curiosity was aroused. I am a chiropractor today because of men like Drs. T. O. Humber, J. K. Humber, George Rounds, and Tom Burnett, all chiropractors in the Atlanta area.

In the fall of 1946, I received a compound fracture of my right arm and then in the autumn of 1947, my collar bone was broken in the annual All-Star football game. By this time, I had become the proud recipient of a football scholarship at Georgia Tech, but because of the fractures, I was unable to play in the 1947 football season. Discouraged, I turned to Davenport . . . and to chiropractic.

My first sojourn to Palmer was short-lived, however, because I felt the urge to return to Georgia Tech and to continue my athletic scholarship. I am thankful that I did because I was given the opportunity to play two years as first string defensive end with the Tech Yellow Jackets. The 1951 team was undefeated — third in the nation, the Southeastern Conference champions, and winner of the 1952 Orange Bowl!

During my senior season in 1951, Bobby Dodd, Georgia Tech's Hall of Fame head coach, made this headline statement in the *Atlanta Journal*: "Sid Williams is the finest end in America for his size!" Of course, I appreciated that, but what he failed to add was that I was the *only* defensive end in America my size!

In 1953, Dr. Nell and I returned to Davenport to be in the first 36-month class at Palmer.

Q: In your opinion, what makes a chiropractor a success?

A: "Beauty lies in the eyes of the beholder", said Margaret Wolf Hungerford back in 1878. Like beauty, the determination of success depends upon how a person views it.

In my opinion, success consists of a delicate blend of friends, respect, health, appreciation, good will, love, acknowledgement in one's profession, wisdom, and understanding. Particularly understanding, as that is what enables the successful individual to achieve that delicate blend. "With all thy getting, get understanding," the Bible says in Proverbs 4:7.

Many have sacrificed their friends and loved ones for recognition, awards, and appreciation or power. But what good are these or all the money in the world if you lose your health as a result of overwork, and the love and confidence of your family and friends in the process?

When considering monetary gains, one thing is certain: Money does not necessarily lead to happiness, and you certainly can't take it with you! One of the richest men of our times, Howard Hughes, died lonely and isolated. Many wealthy and renowned performers such as Elvis Presley also led sad lives, again serving as testaments that money isn't everything.

I see success, rather, as that state of persistently moving steadily ahead in a positive direction. I firmly believe you can get anywhere you wish from where you are, but enjoying the trip there is an integral part of enjoying life and living "successfully." In fact, I think of success more in terms of how you live life than in what you have accumulated at the end of it!

When I am considering any of my so-called successes, I am reminded of the closing scene in the movie *Patton*, where the general is alone with his thoughts after having been relieved of his command of the army that marched triumphantly across Europe.

"For over a thousand years, Roman conquerors returning from the wars enjoyed the honor of the triumph, a tumultuous parade. In the procession came trumpeteers and musicians and strange animals from the conquered territories, together with carts laden with treasure and captured ornaments. The conqueror rode in the triumphant chariot, the dazed prisoners walking in chains before it. Sometimes his children,



Dr. Nell and Sid Williams celebrate after 1982 ICA elections in Atlanta, Georgia.

There is no limit to what you can accomplish if you don't mind who gets the credit

robed in white, stood with him in the chariot or rode on the trace horses. A slave stood behind the conqueror, holding a golden crown and whispering in his ear a warning that 'All glory is fleeting.'

I think of success more in terms of accomplishment, not credit or glory. In fact, the discoverer of chiropractic, D.D. Palmer, once noted that "There is no limit to what you can accomplish if you don't mind who gets the credit!"

Q: You created Life Chiropractic College in 1974 with a total enrollment of 22 students. Today, Life is the second largest chiropractic college in the nation. To what do you attribute this quick rate of growth?

A: That reminds me of the time when Congressman Larry McDonald spoke at a banquet held the night before Life's first commencement in 1977. In his speech, the Congressman mentioned that Life was an "overnight success." Dr. Nell, who was sitting beside me, nudged me in the ribs and whispered, "Thirty years is an awfully long night!"

The college really started one night after David Palmer's passing. I had gathered with friends in Florida and told them that it was now time to develop the college. My friends had heard of my plan before, but I wanted to be sure we were together in spirit in this major undertaking. During that meeting, we united behind the idea and committed ourselves to realizing our dream.

As if by coincidence, a building became available just outside of Atlanta in Marietta, Georgia, around that time. The only thing then that concerned me was the

\$15,000 per month rent and the \$4,000 a month power bill. Renting this building seemed comparable to seizing a 19,000 volt live wire! Obstacles notwithstanding, we began anyway, and grew from 22 students in 1974 to our present student population of over 1,600.

Dr. Nell, Dr. D. D. Humber and I have sown the seeds of our success at Life for more than 25 years. These fields were plowed with heartbreak, disappointment, frustrations, poverty and humility, yet we tried to make sure every seed was fertilized with love, tenderness, care, and consideration. Anyone who has paid the price we have, I think, deserves the right to expect a good crop. This is how you control your destiny and quicken your growth — by tending your crop with care and dedication. Some people sit around looking for their ship to come in, when they well know they never sent one out!

Life Chiropractic College has grown from the proper seeds of good will, trust, dedication and sacrifice, and has helped many people to enjoy life more fully and to be more successful. Those people, and those friends who have contributed to Life with their enthusiasm and support have helped make the college an "overnight success."

Q: What advice do you have for chiropractic students who will be starting their own practice?

A: I can remember reading about Notre Dame University's Coach Devine. He was counselling a very talented quarterback who was not playing and was second-string. The young man was frustrated because he felt he was better than the first-string player and was

threatening to quit. Coach Devine advised the young man in this manner: "Son, my quarterback is on the field. Unless he is hurt or fails to live up to my expectations, he will remain my quarterback until the end of the season. My advice to you is to be ready when your time comes."

And that is my advice. *Be ready when your time comes.* Be prepared to work long and hard hours. Learn to love your work. Study hard now so you can confidently serve your patients to the best of your abilities.

Realize that the going will be tough at times; you'll have to be dealing with sick people, managing the financial aspects of your practice, keep up with advances in the field, and still maintain a high energy level with which you can care for your patients in the most effective and compassionate ways possible.

It isn't easy, but some doctors make practice much more difficult on themselves by not concentrating on the positive aspects and self satisfaction of serving others and maintaining a practice.

Also, choose goals that are right for you and strive with all your heart to meet them. The important thing in life is not so much where you are but where you want to go! And don't give up till you get there!

Q: In your opinion, what areas should chiropractic colleges improve their academic curricula?

A: Thus far, the curriculum in today's chiropractic college is being influenced by the national and state board examinations throughout the United States. These tests require the doctor of chiropractic to have the ability to differentially diagnose health disorders in the same ways a

medical doctor does. While such an academic focus is appropriate to be included in the educational background of one who is recognized as a primary and portal of entry health care provider, the nature of that focus needs to be examined very carefully for the future.

Too many of the examinations we required of our chiropractic students are more appropriate for medical students. As chiropractors, we need to be specialists in the biomechanical related neurophysiological relationships of the spine. Our curricula need to include courses which center around structural inflammation theory, spinal biophysics which integrate the view of the spinal structure and its control, noninvasive structural assessment, and the biomechanics of chiropractic adjustment. In addition to these biomechanical and physics-related studies, other courses should include bioelectric phenomena, somatosensory awareness, and field effect technique.

Certainly our colleges should also offer a wide range of courses that will qualify the chiropractor not only to address the biomechanical, neuromuscular aspects of the spine, but also any conditions in any part of the body that might be related, though far-removed from the spine.

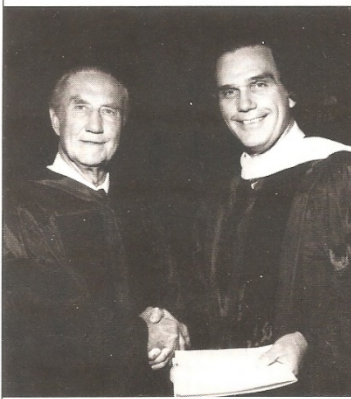
Furthermore, our curricula need to include scientifically based courses which will help the chiropractor determine whether the body has the capability to correct a pathological result following correction of a biomechanical, physiological condition. I suspect that many of our schools are weak in that area of their curricula.

There is also a great need to more carefully relate diagnostic procedures to "conditions related" to the chiropractic subluxation. This concept should be given more scientific credence through more research and through better matching of diagnostic procedures. We need additional courses in our curricula to reflect this — courses on subjects that haven't even been developed and codified yet!

In addition to assuring that chiropractic students will emerge thoroughly competent to find and correct the biomechanical, neuro-

muscular deficiencies of their patients, our curricula must also assure that they can effectively address themselves to those external circumstances that contributed to the subluxation in the first place. These circumstances include accidents, adverse environmental factors, poor nutrition, poor work-related posture, and other flaws in our daily life styles.

Furthermore, to be more completely prepared to address a patient's needs, our doctors' training should not only cover the basic courses of anatomy, physiology, neurology, pathology, physics,



Chiropractic supporter Sen. Strom Thurmond (left) receives Life College's first honorary degree from Dr. Williams.

biomechanics, and chiropractic techniques, but also courses in CPR, emergency first aid, ecology, nutrition, health maintenance, exercise physiology, psychology, etc.

This updating of our chiropractic studies will provide us with a more complete background in scientifically developed knowledge so necessary in our society, while still allowing our young doctors to focus upon the uniqueness of their profession as they take their rightful place among other primary health care providers. It should give them a feeling of confidence and self-esteem as well as the ability to resist attacks made on those qualities without feeling the dangerous need to more closely align themselves with competitive

health care providers who do not have their specialized, in-depth education and knowledge.

Chiropractors also can continue to take great pride in the fact that they are working noninvasively with the body's natural defense systems that are needed to restore and maintain health.

Q: Your wife, Dr. Nell Kimbrough Williams, and your two children also are involved in chiropractic. How?

A: Dr. Nell and I went to Palmer College on our honeymoon in 1953, and we have always worked together in chiropractic and also in other business enterprises. It has been a fun-filled, challenging and exciting life! It has not always been easy, however, but we "kept on keeping on," just as B. J. advised us to do, and we have always done so together.

Dr. Nell, as you may know, is Vice-President of Student Affairs at Life Chiropractic College. She has an extremely strong character and shares the ardent desires I've had to serve humanity through chiropractic and to see that chiropractic become a household word.

When Dr. Nell was pregnant with our daughter Kim, she still was in the office every day seeing patients. In fact, it was "business as usual" even on the day that Kim was born; she had adjusted 28 patients the morning she began experiencing labor pains!

Dr. Nell is a businesswoman, author, chiropractor, mother, public speaker, wife, and a determined, persuasive politician. All these characteristics, as you know, are difficult to find in just one person! She also is kind, gentle, loving, compassionate, and loyal, but when pushed to the limit, will speak her mind without hesitation!

We have been blessed with two fine, dedicated, loving children. Both Kim and Sid have accompanied us on our many lecture tours in the States and around the world. In fact, they have gone to so many chiropractic conventions and

meetings that they sometimes joke they "grew up in motels!"

My son Sid became an athlete at the age of seven, and the family went together to all his athletic contests. Kim was the cheerleader, Sid the contestant, and his daddy the coach. We were all "Sid-watchers" all through the years. Those were fun-filled times and we enjoyed every minute of it! Sid is now a junior at Georgia Tech, and he will be enrolling at Life Chiropractic College soon after his graduation.

Kim already is a graduate of Life, and we are very proud of her, too. She is now the head of the Department of Technique at the college. She is an excellent teacher and loves her work. We are delighted every day to see her strong dedication to

who were members of the Hong Kong Chiropractic Association. In Japan we spoke at both chiropractic colleges — one in Tokyo and the other in Nagoya. We thoroughly enjoyed meeting the fine people who are heading up these institutions.

Our return brought us through Alaska, speaking in Anchorage to an assembly of about 450 laymen. This was arranged for us by the Alaskan Chiropractic group and, according to the conversations after the meeting, our views were received well there. Furthermore, the newspaper reports were also favorable to us and to chiropractic.

Last winter we were invited by the South African Chiropractic Association to be the feature speakers at their convention in

population of this beautiful country had dwindled from sixteen to four, despite an excellent law and excellent practice opportunities.

Subsequent to our return from South Africa, we travelled to Europe where we spoke at the Anglo-European Chiropractic College in Bournemouth, England. We also lectured at the European Chiropractic Union Conference in Avignon, France, where we also met with their English counterparts. From there we went on to Rome and made another chiropractic presentation before an assembly of laymen and doctors of chiropractic. From there we travelled to Cairo, Egypt, where we spent several days visiting with health authorities. Our travels then took us to Tel Aviv, where we lectured to some 250 lay people. Israel's four chiropractors also attended the meeting.

While in that country, we took advantage of the opportunity to visit the Red Sea and to marvel at the historical Masada, a natural fortress defended by the Jewish people against the Roman Emperor. Leaving Israel, we headed to the Scandinavian countries, lecturing in Copenhagen, Oslo, and Stockholm. Shortly thereafter, we returned to the States via London, where we made still another talk to an assembly of laymen.

We learned a great deal about people on our voyage around the world as we talked to chiropractors, patients and potential patients. It is significant that there is a great and growing interest in natural healing world-wide. Because of the academic recognition and federal acceptance in the United States, chiropractic can now make great inroads in many areas of the world that were previously closed to it. Suffering billions are crying out for what chiropractic care can provide. I expect chiropractic to be available to them in the very near future.

On the European and Scandinavian trip, I had been appointed by President Reese as a special ICA representative. We had an ICA sign erected at each of our presentations. Many expressed interest in the ICA's views and what the ICA was currently accomplishing. Frankly, most of the chiropractors in foreign coun-

I feel ICA represents the views of most chiropractors

the ethics and principles which mirror what we have done and emphasized over the years.

Q: You and Dr. Nell recently took a world tour. What was the purpose of your trip? What did you learn?

A: In the fall of 1980, Dr. Nell and I were invited to lecture at the Australian chiropractic college in Sidney during its two-day convention. The students and faculty were very gracious in their response and we had the opportunity to reacquaint ourselves with many of our friends in that part of the world.

A portion of our trip also included visits and lectures in Jakarta, Manila, Singapore, Hong Kong, Tokyo and Kwangchow. During our visit to Hong Kong, we talked to a group of thirteen chiropractors

Bloemfontein. Again, we gave the presentation based on the philosophy of the science of chiropractic that I have mentioned before. I did enjoy the privilege of a one-and-a-half hour radio debate with an orthopedic surgeon from the University of Johannesburg. As you may know, there are no chiropractic regulatory laws in South Africa. An interesting commentary by the head of the medical authority in R.S.A. preceded our talk with this comment: "One thing that we are opposed to in chiropractic in South Africa is that (1) we do not know what they do and (2) they do not have a philosophy." His statement should be a challenge to us all!

Additionally, during our stay in the R.S.A., I gave talks in Durbin and Cape Town. I met with chiropractors in Zimbabwe, formerly Rhodesia. It was in Salisbury, Zimbabwe, that we noted, much to our dismay, that the chiropractic

tries were not ICA affiliates, but had been influenced instead by the American Chiropractic Association for various reasons. This is an area of challenge for the ICA today and one that must be addressed!

Q: In the past several years, a new group, FSCO, has been appealing to so-called "straight" chiropractors for membership. Do you feel that the ICA continues to represent the view of those chiropractors who find a philosophical home in FSCO?

A: I feel that ICA represents the views of most chiropractors who are associated with the Federation of Straight Chiropractors Organization. I believe the misunderstanding with the ICA originated from sponsorship of the Council on Chiropractic Education by the ICA and in the area of diagnosis as it pertains to the chiropractor's role as a portal of entry and primary health care provider.

I noted from conversations with some of the FSCO members that they are beginning to recognize that doctors of chiropractic have a legal right to render a chiropractic diagnosis within their specified area of expertise and can do so without violating any traditional or philosophical ideals of chiropractic. Certainly everyone recognizes the right of the dentist, the optometrist, or the podiatrist to diagnose areas within their scopes of competence and expertise. A medical doctor is expected and legally sanctioned to make a differential diagnosis of the entire person for the purpose of naming and treating the disease.

I would like to emphasize that, in my opinion, it is not the purpose of the chiropractic diagnosis to name and treat diseases. A chiropractic diagnosis has a primary purpose of determining the biomechanical dysfunction in the spine and any neurophysiological consequences resulting from that dysfunction, as well as to determine both the proximate and remote effects of these conditions in the body. I also believe it is our duty to provide referrals to other health care practitioners when necessary. This satisfies not only the respon-

sibility of a primary portal of entry provider, but the rational basis of chiropractic science as well. I believe that most of the members of the FSCO will concur with the ICA once they understand this specific concern.

There are also some members of SCASA who believe the CCE will ultimately lead to the destruction of the chiropractic profession as we know it. I am, of course, concerned about this but I do not believe that it will happen. I have been supportive of the Council on Chiropractic

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Education and of its Commission on Accreditation since it was recognized by the U.S. Office of Education. I believe that part of the American dream of education includes academic freedom. All academic institutions must pursue truth regardless of the consequences of that search for truth. Chiropractic colleges are not required to alter or change the traditional views of their profession in order to meet accrediting standards as long as chiropractic is taught as a responsible science, nor are they mandated to emphasize the clinical applicaton

of chiropractic in a standardized manner. The CCE, or any other accrediting agency approved by the United States Office of Education, must judge the institution only upon pre-established, recognized educational standards. It is my opinion that academic freedom does exist within the CCE. When I believe that it doesn't, I will do whatever I can to alert ICA members, the profession, the U.S. Office of Education, and any other interested parties. Until then, I believe the profession should insist that the CCE and its Commission on Accreditation continue to be recognized as the single accrediting agency for chiropractic schools and colleges.

Q: Over the years, there have been numerous attempts at fostering a unity movement in chiropractic. What, if anything, do you feel should be done to enable chiropractors to close rank and eliminate the divisiveness that has frequently served to waste chiropractic's resource on internal disputes and thereby stunt the full growth of the profession?

A: In my opinion, the first step that should be taken to reach our goal of unity is to form a mutually agreed upon definition of chiropractic, one that is recognized and accepted internationally. I feel very strongly about this. We need a clear and concise definition that at once clearly defines our parameters, yet allows some latitude within that definition. This is not an easy task, but one worthy of our best collective efforts.

This very same issue came up during the Chicago antitrust trial. Some of the more interesting observations made during that trial were given by a PhD-level specialist in health education. I feel his remarks were so pertinent to chiropractic in this stage of our development that I keep his comments close at hand as a reminder of the challenges that lay before us.

If I may, I would like to read to you an excerpt of his testimony. Here, Dr. Jarvis is responding to a question on the criteria he uses to

All academic institutions must pursue truth regardless of the consequences

evaluate claims that are made by health care providers in the consumer health marketplace:

"Well, I drew the parallel that whether you are looking at claims made to the public or claims made by scientists, you essentially apply the same criteria and essentially in science there are six things that we start with, and that is first definition, and, of course, with chiropractic we find problems immediately because chiropractors themselves haven't defined themselves, and indeed have at least two major professional organizations that are very much at odds over what constitutes a chiropractor, and trying to understand what a chiropractor is is very difficult. You almost have to ask each chiropractor to kind of get some idea of where they may fall on a continuum.

"The second thing you try to do once you know what something is is to try to determine its limitations, and I'm always interested in asking what a chiropractor can't do and again, you get different responses from different people because if you look at the literature that the chiropractic profession puts out for public education, there doesn't seem to be hardly anything that they can't do and yet there are some chiropractors who say that they should not involve themselves in organic diseases and others that say they can do as much as MDs do. So setting the limitations is extremely important, but that hasn't been done.

"Then a third thing that you try to do is determine how things work, and this is often confused with a theory about how things work. You know, if you ask somebody how something works, they usually want to describe some kind of a theory how something works and in a scientific process that is not what that refers to.

"Theories are part of the scientific process, but not in this particular in-

stance. Here we actually try to learn the mechanism, and this is the cause and effect mechanism."

I believe Dr. Jarvis' comments clearly point out some of the problem areas we as chiropractors must begin to address immediately.

On another level, I believe what some may call "divisiveness" can just as easily be viewed as healthy difference of opinion and discussion. I can't help but view a two-party system as one that produces a certain form of energy that comes out of competitiveness — an energy that causes things to happen. Issues grow out of this competitive difference of opinion. Once given visibility, these issues become more clearly defined and then can start moving towards agreements and resolutions! In my opinion, the ICA has not been aggressive or competitive enough in seeking the leadership role in the chiropractic profession.

Now, although I do not support the merging of the two associations, I don't mean they shouldn't maintain contact with one another and try to work together. In fact, one of my first official acts as the new president of the ICA was to send word to President Kendrick of the ACA, proposing a joint ACA-ICA legislative conference. I was surprised that it didn't materialize. I felt it would have been in the best interest of both organizations. We need to work together now and in all areas, national and state. I already have many years of experience working effectively with members of both the ACA and the ICA, so I know it can be done. We can work together now toward a unity of purpose and a common cause. If it seems we should merge, we can work on that later on.

Still, there are a couple of points that should be made about merging the two associations. There are certain dangers to merging. Unless it's

pretty clear that it would be to the best advantage of the ICA and its goals for us to merge, I think to do so may limit the individual chiropractor's representation to whatever that one party presented.

Also, when two organizations merge, the smaller group gives in more to the larger one. I want to see the ICA grow and become stronger before any such merger takes place. If any association is swallowed up, I want it to be the ACA, not the ICA!

Within our profession of chiropractic, I feel that we can achieve unity without losing our separate identities. With the individuality of each of our associations, we can give visibility to certain issues that might go unattended otherwise. The difference of opinion keeps these concerns not only in the minds of those of us within the profession, but also before those outside the profession. For example, I think it's good for everyone to hear and read about the issue of whether we ought to move closer to the medical community in our clinical procedures, or whether we ought to be more careful about clinical applications of basic chiropractic principles and techniques.

I'm also concerned that many of the principles that the ICA has worked so hard for over the years might become unclear, and much hard-won ground would be lost.

The history of the chiropractic profession has been anything but uneventful, as we all know. Many seem to feel that our differences impeded our progress. However, I view the progress that we have made out of this challenging environment of competition and individualism; we have been recognized and licensed in all 50 states. Insurance coverage for our patients is being recognized and expanded. Governmental agencies have recognized the chiropractic profession through the CCE, the Veterans

Bureau, and student loans. Research in the chiropractic sciences is expanding and is being discussed in the arena of scientific inquiry. For a profession so young, I feel the related scientific studies have been significant, often controversial. This controversy has served us well, however, and represents the anvil upon which our progress has been shaped.

So, "closing ranks" and "divisiveness" are not the issues that should be concerning us so much right now. Rather, the question of whether we can make our separate identities and strengths work in greater harmony in relation to those needs and issues that will most benefit the profession as a whole.

Q: Dr. Williams, you are an author, publisher, teacher, a family man, a practicing professional, the head of a college, and the president of a national association. How are you able to manage your time and to balance your responsibilities accordingly?

A: I have a loving wife, a supportive family, and a profession in which I take intense pride. With those as a context for my existence, I find it easy to generate the energy and enthusiasm necessary to carry out my varied responsibilities. Besides, years ago in my youth, I developed an intense desire to do whatever I attempted to the very best of my ability.

I recall that, as just a youngster, I played football only occasionally because I feared the violent physical contact. When some of the neighborhood boys discovered that, they would pick fights with me or even drive me from the playing field with rocks! I couldn't bring myself to fight back because I was concerned for their feelings. I actually viewed them as more vulnerable and weaker than I!

It wasn't until my junior year in high school that an inner feeling of confidence burst forth and took command. Because I shunned playing football as a youngster, it did not occur to me to go out for the

Tech High School team until a "can-do" attitude developed and prompted me from within. I wanted badly to overcome the weakness of my childhood, so I went out for summer football practice. I was a different person, with few of my former fears! This change enabled the real me inside to have power over my fears and to overcome them and set them aside. If the coach told me to tackle the ball carrier, that was all that was in my mind — a single purpose! If he said to block the tackle, that became my focus, and that's what I would attempt to do. I just did as I was instructed, without fear or hesitation, and it worked like magic! It seemed that I had overcome my past hesitancy, and had become like a free spirit. In the past I had always reacted to outside negative influences. I was like a yo-yo on a string, always being jerked. But no more! I was responding to the strength of my new "can-do" dynamic mental attitude! And what a difference it made! Even before the first ball game of the season, I was made a first-string end! By the end of the season, I was all-city in Altanta and all-state!

Although I never had the talent to be a really great football player, I was at least a successful player because of that obsession to do everything to the best of my ability. Furthermore, I did whatever I was told with a joyous attitude and with my "game face" on all the time. My former coach reminded me of this not too long ago and emphasized that he felt desire and determination to be my chief assets. Once I began moving dynamically, it seemed I no longer had the problems others have, such as the need to conform or be accepted — to fit in. My thoughts never seemed to be prompted from outside as did others', but from within, according to my desires. I became able to think selectively, and I became better able to control what I would think, and then to concentrate on what I had to do. It was, and is, as though I am looking at the world from somewhere behind my eyes. My body and my mind are being used as instruments by the "real me" inside. I do have to be careful, though, not

to tilt too far with this inner state, lest I neglect family and other business and social responsibilities. Like B.J., I'm constantly "slipping and checking."

Anyone can develop this "can-do" mental attitude, but most are too much involved with the trivialities of the world. They do what B.J. warned us not to do with his epigram: "Don't take yourself too damned seriously!"

To explain further, one can be in a crowd and be completely surrounded by conversation and not hear the surrounding chatter at all. One can hear, yet not hear; always conscious, but apart from the superficial thoughts that are passing by. I refer to this as though I'm the umpire in my own ball game. As the pitcher throws his thoughts across my plate, "They ain't nothing till I call'em!"

Once I do select a thought or project, however, it goes on into my inner self, beyond my consciousness. Consequently, I don't have the strain and tension that would be present if I operated only from the conscious mind. When I view a project with my "can-do" attitude, the signals necessary to physically complete it come in the form of the proper actions to take. If you *know* you can do, you receive "can-do" ideas. On the other hand, if you think that you can't, you will receive "can't-do" ideas! It's like the law of gravity, knowing how to affect a new compound when it is created. The law of gravity already knows. It's the same with your attitude. Most busy, successful people will know exactly what I'm talking about, for that's how they get things done, too. They approach their projects through the subconscious mind and then, through desire, the ideas necessary for accomplishment begin to flow.

My family and I have always moved together as one. A good, dedicated, competent staff which works as one will understand how discipline is necessary for balanced accomplishment. They know how to turn out the work and when they lose themselves in a common purpose, it is then that they find themselves immersed in a spirit of love — selfless love. The secret is to

stay in the center where the calm is. The solution is to just "be".

Q: What do you consider your biggest accomplishment?

A: Throughout the world there has been a great deal of emphasis on the intelligence quotient of individuals. This theoretically means that a person who possesses a high I.Q. has an advantage over the average person and thus has a greater than average chance to succeed in life. In my experience, however, this does not necessarily guarantee success or financial accomplishment.

A person with a high I.Q. is to be admired and has his place in business, but I believe that the "failure quotient" or the "F.Q." has been the most important attribute in my life. I have failed so many times in attempting so much, that I would have quit because of discouragement a long time ago if I had not had such a high F.Q. My reaction to temporary defeat has always been to alter my plans, make adjustments, and continue to look for the light at the end of the tunnel. Sometimes even the light in the tunnel has been another train on my track blocking my way!

Many people, when they meet temporary defeat, lie down and quit, but this is not my nature. Although this is not a physical accomplishment, it is a lesson in self discipline that I have learned in life which has contributed to the overcoming of obstacles and to the accomplishments that I have enjoyed in my career.

I acquired this trait and characteristic from my mother who was burdened with much desire, pride, and determination. She insisted that I keep my hands to the plow and not look back once committed to the task.

Temporary defeat to me is something to be learned from — a valuable experience, a shedding process, an elimination of failure ideas and methods, a time to re-adjust one's course and then regroup for another assault!

Temporary defeat should roll off a person like water off a duck's back. He should be like the butterfly which sheds its cocoon and goes on with new life to become a thing of beauty.

This is the reason I consider my greatest accomplishment to be my attitude when faced with temporary defeat. Defeat isn't bitter unless you swallow it.

Q: You have often repeated the saying that "nothing happens unless first a dream." What is your dream for your future? The future of ICA? Of chiropractic?

Just "be!"

A: That quote by Carl Sandburg was used by President Reagan in his "first 100-day" speech to the American public. The President was emphasizing that he intended to help continue to fulfill the American dream which began two hundred years ago when the Bill of Rights was formulated and the Constitution adopted. I also like the quote because it not only emphasizes the ideal behind a dream, but the unfolding of the dream from the original seed to its fruition.

As for my dreams, I dream that, through the advances of chiropractic, people will be able to experience a less painful and more satisfying life style. I also hope that more and more people recognize and experience the value and benefits of chiropractic health care.

Another dream of mine is for increased cooperation between the professions as we work cooperatively together for a common good. By working together, we can influence society in ways that may change behavior and increase good will among men. This could lead to a reduction in health care costs, mental institutions, and court calendars!

My ideals for the profession also include having the ICA recognized world-wide as the leading American

professional chiropractic organization. It is already known world-wide, but it doesn't yet command the respect and recognition it needs from the press or the government or from some chiropractors themselves. To achieve that, we are going to have to become the strongest in membership size and, to do that, we are going to have to offer the most in public relations and in services to our members! We must give our members the kind of quality of services that they need and expect from a professional national association. If we do, the organization will grow in strength and power, and can become even more instrumental in getting chiropractic out to the people!

Having gained that respect, ICA will become recognized by the media — radio, television, newspapers — who will seek advice, services, and information which can be provided by ICA headquarters in Washington, D.C.

It is my firm conviction that the ICA has maintained over the years this dream for chiropractic more than any other chiropractic organization. There are always more things than can be done, but ICA has always upheld the principles of chiropractic and sought to protect the rights of the sick to get well with the doctor and method of their choice. The ICA must continue their dream of a better and healthier society and must help continue the American dream of life, liberty and the pursuit of happiness. It must include in this idealism for the American citizen the right to health. It must continue to perpetuate chiropractic as an alternate system of healing that is outside the invisible medical government which permeates the medica, society, academia, government, churches and schools.

As for myself, I look forward to working on many upcoming, exciting new projects that I have planned for the association, and to working with and for ICA members and for chiropractic. Together we can continue to build upon the terrific strides the profession has made within the past few decades and to work for a happier and healthier future for all! ☞