

Michael McKibbin, DC, of Attadale, Australia.

AUSTRALIAN PATIENTS SEEK GREATER CHIROPRACTIC ACCESS

Editorial Staff

Containment and restraint are not new to the chiropractic profession. The efforts of the medical profession in that regard have impacted chiropractic not only in the United States, but around the world. Michael McKibbin, DC, an active chiropractor in Australia has made these observations:

Information Restraint

Like the USA we have, Australia wide, similar medically-sourced disinformation and no tax payer funded health program information. In this global marketing war the battleground is the mind of billions of consumers, saturated with the medical option, restraining their knowledge of chiropractic.

"Ethic" Restraint

Like the USA we have an Australian version of the nationwide ethic-based boycott. One still hears patients use that as an excuse given by their medical doctor for refusing to refer or to give compensation certification.

Economic Restraint

Like the USA, Australian health insurance is prejudiced in such a way to disadvantage patients attending a chiropractor. The economic restraint is a most keenly felt and effective method of containing access to chiropractors.

Minimum Standard Restraint

Like the USA, Australia has flawed registration acts that merely protect the title, not the practice, thus permitting medical charlatans to emulate what chiropractors do, (in public facilities to chiropractors are denied access), and to charge for that service under insurance cover that denies refunds to chiropractors.

O-M Restraint

A submission to legislators throughout Australia from our local AMA recommended that chiropractors be restrained to treating musculoskeletal disorders.

These restraints well and truly contain chiropractic throughout Australia.

In a effort to do something about this problem in Australia, Dr. McKibbin contacted Carmen Lawrence when she was a Member of Parliament candidate from the Fremantle area. As his potential representative, Dr. McKibbin felt that Dr. Lawrence should learn about the restraints facing the chiropractic profession.

Initially, Dr. McKibbin's efforts moved Dr. Lawrence to make the following commitment:

"I am writing to confirm that if I am elected to represent the people of Fremantle I will work hard to ensure that discrimination against public patient access to chiropractors within publicly funded health care is ended, and that chiropractic services are included in the Medicare, Comcare and Veterans Affairs rebate systems."

Hon. Dr. Carmen Lawrence

Candidate for Fremantle

Sharing the same concerns, one of Dr. McKibbin's patients arranged an article in a local newspaper regarding restraints. That was followed by a series of letters to the editor.

Dr. McKibbin invited the writers to make a video. Another patient, who is a radio personality, did the interviews while his wife did the camera work. The finished video was sent to Dr. Lawrence, petitioning her for an interview to discuss restraining patient access to chiropractic.

Dr. Lawrence listened intently as Dr. McKibbin and two of his patients spoke for three minutes each. They discussed the points and suggestions for remedying them, including modifications to restraint of trade legislation and anti-discrimination legislation.

Dr. Lawrence spoke favorably of employing DCs on a salaried basis to work in community health centers to provide chiropractic care for socioeconomically deprived people. The gain arising from the meeting is that an Australian federal Member of Parliament possess an understanding of the big picture of containment and its infrastructure, the restraints.

Afterwards, Dr. McKibbin made these comments in his newsletter:

"The Federal Minister for Human Services and Health, Dr. Carmen Lawrence, says that the most effective way for chiropractic services to make progress in gaining inclusion in the public health system is to demonstrate that chiropractors can work in the system in the same way as other health professionals, with equal or greater cost effectiveness.

"The push for inclusion in the public health system would also be enhanced if chiropractors favored a funding mechanism other than fee-for-service.

"Dr. Lawrence said she was sympathetic to the group's concerns, and had already met with the executive director of the Chiropractors' Association of Australia (CAA), Dr. John Sweaney.

"At that meeting it was agreed that the CAA would look into developing a proposal for grant funding for a pilot project to demonstrate that chiropractors can be included in the public health system as outlined above.

"Dr. Lawrence said her department, the Department of Human Services and Health, had been in touch with the CAA regarding a grant application."

Imagine what could happen if every DC (and their patients) put this much effort into putting an end to the restraints that hold back our profession.

