The Evolution of Higher Education in Chiropractic: A Survey 1906-74

PETER BLACHER, M.S.*

Medical orthodoxy has enjoyed a position of dominance in our health care education and delivery system throughout American history. Traditional medicine has had the political and financial clout to relegate dissident-challenger groups into sects or cults with little societal acceptance. However, amongst these challengers, chiropractic is unique. As a profession, chiropractic has survived and prospered despite the best efforts of orthodox medicine and specifically, the American Medical Association's conspiracy to eliminate it. Consistent with other professions, chiropractic prosperity has been facilitated by the tremendous strides in its educational arm, particularly over the last thirty years. This paper will briefly outline the history of chiropractic colleges and education, chiropractic accreditation and present day chiropractic colleges.

Credited as the "founder" of chiropractic is Daniel David Palmer (1845-1913), aka DD, a Canadian-born former schoolmaster, entrepreneur, apothecarian, grocer and magnetic healer. Palmer had practiced as a magnetic for some ten years in Davenport, Iowa. On September 18, 1895, Harvey Lillard entered Palmer's office. Lillard was the building's janitor and was deaf. Palmer inquired as to the cause of Lillard's deafness. Lillard explained that he had lost his hearing suddenly seventeen years earlier while working in a cramped or stooping position. He reported that he felt something give way and immediately lost his hearing. Upon examination, Palmer located a painful prominent vertebra which appeared out of place. Palmer applied a sharp thrust which repositioned the bone and within days, Lillard's hearing was completely restored. It is interesting to note that this story, with minimal variation, appears in nearly every article reviewed for this paper. Palmer founded the Palmer School of Chiropractic two years later in Davenport in 1897. In 1902 the school had four students among whom was D.D. Palmer's son, Bartlett Joshua Palmer, aka: B.J.

Since its beginnings, the estimates of the number of chiropractic schools that have been in existence have been exaggerated. Lin (1973, p. 77) reports estimates as high as 600. However, the exact number is unclear. Ferguson and Wiese (1988, p. 28) identified 436 separate school names. However, under further study by eliminating those that have had name changes, the list shrinks to 392 names. If schools outside the U.S. are eliminated, the list is reduced further to 346 schools. Ferguson and Wiese reviewed advertisements and school catalogs found in the Palmer College archives to develop their data, but caution that the data is not verifiable. There is some question as to the existence of some schools as legitimate institutions of higher education. The earliest graduates were certified to "teach and practice" and Ferguson and Wiese suggest that they did just that. Advertisements that they reviewed would solicit both patients and students. These authors were unable to verify that many of the schools identified indeed had any students. Some early schools were operated as correspondence courses. When measured against the prevailing standards for chiropractic schools at the time, and those with residency requirements, the quality of the education becomes suspect and documentation of any actual program difficult. B.J. Palmer commented on the problem:

"The curse of chiropractic is the army of scholastic pretenders, who, leech-like, have fastened themselves to the pedagogical phase of the vocation for the money there is in it" (Palmer 1916, 4-5).

In preparing a 1922 report to the Universal Chiropractors Association, an investigator visited the campuses of approximately 25 schools. When considering the number of full-time faculty, classroom hours, testing facilities, and evidence of "graft" as criteria for judging a school, several fell short of the Universal Chiropractors' standards. It is reported that many of these early institutions were indeed diploma mills (Universal Chiropractors Association 1922).

* Erie Community College, Buffalo, NY
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Correspondence to the author at 12 Bristol Drive, Williamsville, NY 14221.
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In order to develop the evolution of chiropractic education I have chosen to use Gibbons' categorization of periods of activity: the Tutorial Period, 1897-1905; the Classical Period, 1905-1924; the Proprietary Period, 1924-1960; the Professional Period, 1960 - (Gibbons 1980). A frequency distribution graph and a geographic distribution map for chiropractic schools was also produced by Ferguson and Wiese.

In a 1931 publication, Chittenden Turner identified D.D. Palmer's first pupils as Leroy Baker and Dr. William A. Seeley, a homeopathic physician. Palmer had decided to launch a formal program of instruction following a railroad accident in 1897, where he was injured (Turner, 1931, 26-28).

I then decided that I could no longer keep this science from the world... teaching "...a young man named Baker enough chiropractic to treat my injuries..." (D.D. Palmer 1908, 14).

The philosophy that Palmer imparted in his informal tutorial process of this period may be best reflected in the diploma that he bestowed upon those who had taken his course. It declared that the recipient had:

- Taken a course in chiropractic as taught in this school and passed the examination required. I consider (him/her) competent to teach and practice same (Gibbons 1980, 340).

The tutorial period was essentially the initial instructional offerings by D.D. Palmer to his first followers. This group included physicians, osteopaths and midwives (Turner 27). Gibbons reports that the earliest known chiropractic diploma was issued to a homeopathic physician, Dr. E.E. Sutton in 1902, and signed by D.D. Palmer (Gibbons 1981, 235) Turner (27) cites diplomas from a school in Minneapolis, Minnesota and reports another Palmer School in Portland, Oregon issuing diplomas with identical scroll and embossing, all signed by D.D. Palmer between 1903 and 1905. This emphasizes the informal and casual way in which early chiropractic instruction was imparted. It also points to the presence of orthodox medicine in the evolution of chiropractic. In missionary fashion, Palmer and his early disciples went out to spread the word of chiropractic, comfortable with their competence "...to teach and practice same."

Although Ferguson and Wiese (29) identified seventeen school names during this tutorial period, and approximately 100 graduates, the majority of them were from Palmer's School in Davenport, Iowa where no formal curriculum could be found.

The Classical Period saw an explosion in chiropractic education both in the numbers of schools and graduates. In 1906 there were 17 schools in existence. By 1924, Reed (1932) (79) estimated that there were 79 schools, but Ferguson and Wiese documents only 64 (28). At Palmer, enrollment increased from 8 in 1906 to almost 2300 in 1921 (Lin, 76). Again, Ferguson and Wiese notes the inability to document the existence of many of the schools during this period which were in operation for more than one year (29). This suggests that many were not viable schools and may not have graduated any students, and explains the discrepancy between Reed's estimate of 79 schools and Ferguson and Wiese's estimate of 64.

At the beginning of this period the educational experiences of the chiropractic student were limited by the scant resources of the institutions. For example, in 1906, at Palmer, students would have 3 to 6 months of formal lecture in anatomy and physiology, symptomatology and diagnosis. There was no radiology because there was no machine, no dissection, except possibly small animals and no chemistry. After completion of these lecture courses, the students would be released to the Palmer Clinic for their clinical training. They graduated with a total of approximately nine months of training (Gibbons 1980, 344). It is likely that orthodox medical textbooks was printed in 1906 and was in very short supply. D.D. Palmer reportedly used the thousands page "People's Common Sense Medical Advisor" aka "Medicine Simplified" written by Dr. R.V. Pierce for most of his lecture courses. Dr. Pierce was chief of the Invalids' Hotel and Surgical Institute in Buffalo, NY (Gibbons 1980, 344).

Turner suggests that the rapid rise of schools during this period was a response to increasing public acceptance of the profession and provides examples of how some took advantage of this growing acceptance for personal gain at the expense of the profession's reputation. Noting specifically a "home study" institute in Chicago with the impressive title of American University, in 1919, its advertisements in popular magazines declared:

- Be a chiropractor. Learn at home. By the American University system of instruction you can become a doctor of chiropractic by studying in your spare time at home or in class at the university. You do not require special talent or advanced education.

(Universal Chiropractors Association, 1922).

Additional verifiable material on other chiropractic schools in existence during this period are extremely limited. However, excerpts from a 1922 Universal Chiropractors Association report indicates that many schools operated in rented rooms with minimal equipment.
and few books. The report is critical of the motives of some of the operators, although only 25 of Reed's estimate of 79 were actually visited. Commenting on the American School of Chiropractic in New York one investigator for the 1922 report wrote:

My opinion, with relation to chiropractic is that they have taken on this subject for its commercial possibilities and are not devoting any of their time to specializing on it... nevertheless their graduates are being turned out and practicing their mode under the name of chiropractic (Universal Chiropractors Association 1922).

On the Indiana Chiropractic College, the same investigator wrote:

Requirements for the degree: stick around for a while. I saw two diplomas in two so-called chiropractors offices from this school, although the school had been running for only four months. One of these men had been a farmer and had gotten his diploma four months ago." (Universal Chiropractors Association 1922).

Not all schools investigated received negative reports. Advanced School (New York), Carver Chiropractic School (New York), Los Angeles Chiropractic College and Chiropractic University (Kansas City) received favorable reports. These had established formal coursework requirements and extended over an eighteen month course of study. In spite of the questionable academics and short lifespan of many schools of this period, the eighteen month course became the norm. A few schools (National, Carver and Universal) offered an optional three or four year course.

It was also during this period that individual states began to enact legislation to license chiropractors. The first chiropractic licensing law was enacted in Kansas in 1913, but Arkansas was the first state to issue licenses to individual chiropractors in 1915. This trend toward credentializing chiropractors is consistent with the efforts of the International Association of Chiropractic Schools and Colleges which was established in Davenport, Iowa in 1917. Considered a pioneer chiropractic accreditation group, the IACSC sought to improve, upgrade and standardize educational programs and policies throughout the country (Gibbons 1980, 344).

The proprietary period (1924-1960) was so designated because the private ownership of schools during this period had the effect of isolating chiropractic from mainstream education and science. School owners resided in a world in which external hostility and internal controversies were common. Rivalries between schools raged and resentment by the medical establishment cost many schools support within the profession resulting in confusion and distrust by the public. To survive, chiropractic schools needed educational reform facilitated by the adoption of an accreditation system with clearly established standards for all schools. Both political and economic circumstances, including the depression and World War II, would contribute to the huge decline in the number of schools from 82 in 1925 to 22 in 1960 (Ferguson and Wiese, 29, 30).

As the "Fountain Head" of chiropractic, Palmer College was regarded as the Mecca for most chiropractic developments during the classical period of 1906-1924. This elite status changed dramatically in 1924 when B.J. Palmer, D.D. Palmer's son, introduced a machine called the neurocalometer. This device would measure heat differentials between two sides of a vertebra and thus could indicate precisely where vertebral adjustments should be made. B.J. Palmer sent a letter to every chiropractor listed announcing the perfection of this device. He indicated in his letter that unless chiropractors lived up to their professional obligations to chiropractic, then the entire profession would fail.

Many bought in. The instrument was not for sale, however. It could only be leased directly (and exclusively) through Palmer for $2,200, the first payment of which would be for $600 cash. Thousands of chiropractors sent money and travelled to Davenport to pick up the neurocalometer. The problem was that the device didn't work very well and most stopped using it. However, the lease agreement could not be amended and thus chiropractors were obligated to continue to pay Palmer on the lease. This caused a revolt within the profession resulting in the deme­nou­ment of both Palmer and his school as operating through sheer commercialism.

Palmer's credibility subsided. Angered chiropractors stopped sending students to the "Fountain Head" and enrollments declined dramatically. During the period of 1922 to 1927 enrollments at Palmer went from 2,300 students to less than 500 students respectively (Turner, 39-42). Followers of B.J. deserted him, including four of his most distinguished faculty members and textbook authors. In 1926, these four doctors organized Lincoln Chiropractic College in Indianapolis, Indiana (absorbed into National College of Chiropractic in Chicago in 1968). By 1929, the Palmer School had fewer than 300 students and was virtually bankrupt (Gibbons 1980, 345).

In 1927, the Council on Medical Education and Hospitals of the American Medical Association issued a scathing report on the chiropractic educational system, cit-
ing lax standards. This report followed the Flexner report of 1910 which was highly critical of the medical education of that period and is considered the catalyst toward raising the educational level of American medical education and revamping health education overall including chiropractic. (Ferguson and Wiese, 29).

During the 1930's, efforts by the National Chiropractic Association (NCA) were initiated to improve educational standards by establishing the Committee on Educational Standards (later renamed the Committee on Accreditation). In 1941 it named John Nugent as Director of Education. Nugent received a classical education at the University of Dublin and attended West Point. He was expelled from Palmer in 1922 by B.J. for "disloyalty, disrespect and insult to the president" but was reinstated by the faculty three weeks later. Nugent, reportedly, was "persuasive and articulate with the political instinct and ability to communicate with intellectual sectors who had consigned chiropractic as a distasteful cultist experience." (Gibbons 1980, 348)

Considered the Abraham Flexner of chiropractic, Nugent worked hard to strengthen chiropractic education. Visiting virtually every chiropractic school between 1935-1960, he advocated that smaller schools merge and that all schools become nonprofit and professionally owned with strengthened faculties and expanded clinical training. He maintained that all schools must teach "4 years of 9" (months) of instruction. By 1950, 46 of the 51 private school owners had surrendered their equities into nineteen colleges under terms negotiated by Nugent (Wardwell, 1988, 168). By 1960, the number of chiropractic schools had decreased to 22 (Ferguson and Wiese, 29). Nugent's efforts were successful in improving educational standards in chiropractic.

Nugent described himself as "the symbol of revolt against Palmer in this country" and said: "I criticize chiropractors severely and I am hated by many of them. (Gibbons, 1980). " B.J. once referred to Nugent as "the Antichrist of chiropractic" and many chiropractors agreed. John Nugent died in 1979 in the Bahamas.

Following World War II, the chiropractic schools were flooded by returning veterans supported by the G.I. bill. This influx aided schools considerably by providing of government funding for institutional expansion and financial stability. With the increased funding and the policies initiated by Nugent the overall college situation improved.

Reforms initiated during the Propriety Period continued during professional period. School consolidation and mergers were finalized and with the additional support, generated from increased enrollments, aided by the G.I. Bill, colleges renovated and acquired recognized teaching facilities.

For the first part of the 1960's, the reform strategies initiated by Nugent became implemented i.e., four year academic programs were a minimal standard. Entrance requirements were established, program standards were raised, the curriculum(s) were expanded and most schools had become nonprofit and professionally controlled. Surviving institutions expanded their facilities to accommodate the increasing numbers of applicants. Palmer embarked on a multi-million dollar expansion program which included major renovations and the acquisition of adjacent land for new construction. Completed in 1978, the D.D. Palmer Library Building is an impressive modern structure with an extensive collection, an archives and it houses the largest osseous collection in the world.

In 1963, National College of Chiropractic moved from an inner-city Chicago site to a new location in suburban Lombard, Illinois. Despite opposition from the country medical society. National built a $15 million campus with a compact administration, on-campus housing, a student center, and the first in-patient facility associated with a chiropractic college (Biedeman 1983, 18). This became a 48-bed patient research center complete with residency programs. Los Angeles College of Chiropractic acquired a new campus in Whittier. One of the more interesting aspects of chiropractic growth has been the acquisition of campuses from denominational schools. Logan College acquired a 100 acre former seminary in suburban St Louis in 1973. Logan recently opened a multi-million dollar research building on the same site (Bulletin, Logan 24).

In 1976, the two Cleveland college institutions in Kansas City and in Los Angeles acquired new facilities from religious organizations (Gibbons 1980, 350).

Although voluntary efforts at self-regulation began in 1935, it is during this Professional Period that educational accreditation and respectability really comes to fruition. In 1974, the United States Office of Education and Departments of Health, Education and Welfare recognized and gave status to the Council on Chiropractic Education (DEE) as the recognized accrediting agency for chiropractic. In 1976 the CCE was recognized by the Council on Postsecondary Accreditation. The CCE is an autonomous national organization, organized exclusively for educational purposes. Specifically, the CCE:

1. Provides the guidelines and assistance necessary to implement the high standards which it advocates.
2. Establishes criteria of institutional excellence for educating primary, portal-of-entry, health care providers.
3. Inspects and accredits colleges through its commission on accreditation.
4. Publishes lists of those institutions which conform to its standards and policies. (CEE-1930).

Fourteen colleges hold CCE accreditation. Palmer in Davenport, Iowa remains the largest chiropractic college with a student enrollment of 1,580 and 416 graduates in 1987. Total enrollment in all U.S. chiropractic colleges was 10,420 in 1985, awarding 2,898 D.C. degrees in 1984 (Wardwell, 169). Based on present enrollment, it is anticipated 3,150 D.C. degrees will be conferred in 1990.

Because chiropractic colleges have so far not been supported by public funds (except for financial aid to students), they have been dependent on tuition for the bulk of their financial support. This severely limits their ability to progress rapidly, but they are showing gains in academic respectability. Wardwell (171), reports that a congressionally mandated survey in 1979 found that tuition and fees account for 68.2 percent of the income for chiropractic colleges, but averaged only 9.9 percent of the total income reported by eight other types of professional educational programs ranging from 4.0 percent in medicine to 36.4 percent in podiatry.

Academic respectability is however, on the rise for chiropractic colleges. Most have sought and been granted either full or candidate accreditation status from regional associations such as the Middle States Association. Also, nine schools award bachelor’s degrees. In 1986 Palmer received accreditation from the North Central Association of Colleges and has recently opened a master of science in anatomy program. At least eight colleges offer full time residencies in various areas including: radiology, orthopedics, nutrition, sports injuries and physical fitness (Wardwell, 170).

The board of trustees of the University of Bridgeport, Connecticut, authorized the establishment of a college of chiropractic on its campus in 1990. This would be the first university in this country to affiliate a college of chiropractic. New York College of Chiropractic renovated the former Eisenhower College in Seneca Falls, New York for its relocation in 1991. The new facility is nearly six times as large as the present Long Island campus.

Adversity has been a consistent characteristic of both chiropractic practice and chiropractic education since D.D. Palmer "discovered" chiropractic in 1895. In 1976, five chiropractors filed suit against the American Medical Association, nine medical organizations and one hospital accreditation group for violation of the Sherman Antitrust Act. These chiropractors contended that the medical organizations had organized and participated in an illegal boycott against the chiropractic profession. One principal means used by the AMA to achieve its goal was to make it unethical for medical physicians to professionally associate with chiropractors. Under Principle 3 of the AMA’s Principles of Medical Ethics, it was unethical for a physician to associate with an "unscientific practitioner", and in 1966 the AMA’s House of Delegates passed a resolution calling chiropractic an unscientific cult.

In 1967 the AMA’s Judicial Council issued an opinion under Principle 3 holding that it was unethical for a physician to associate professionally with a chiropractor. In 1987, a permanent injunction order against the AMA was issued by Susan Getzeder, District Judge-Illinois and found that the AMA, the American College of Radiology and the American College of Surgery did participate in a conspiracy against chiropractic and was in violation of the nation's antitrust laws. The chiropractic profession has survived adversity, as is illustrated by this case, and I will suggest that there are parallels to chiropractic education. Chiropractic is well entrenched in our health care delivery system and its educational arm should anticipate its continued contributions toward same.
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