

**AN EXPLORATION OF THE CURRENT STATUS
QUO OF ANIMAL CHIROPRACTIC IN SOUTH
AFRICA**

by

Pieter Jacobus Bosman

January 2012

An Exploration of the Current status quo of Animal Chiropractic in South Africa

Dissertation submitted in partial compliance with the requirements for a
Master's Degree in Technology: Chiropractic
Durban University of Technology.

By

PIETER JACOBUS BOSMAN

I, Pieter JaCobus Bosman, declare that this dissertation represents my own work in both conception and execution (except where acknowledgements indicate to the contrary).

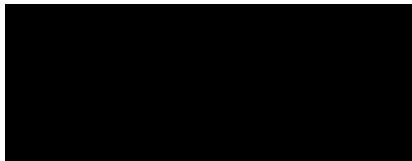
SIGNED: _____

DATE: _____

APPROVED FOR FINAL EXAMINATION

**SUPERVISOR: Dr L Wilson
MTech Chiropractic**

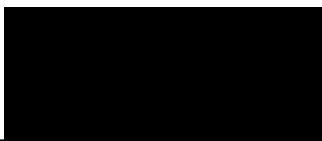
SIGNED:



DATE: 22 January 2012

**CO-SUPERVISOR: Prof D. Pratt
M.A. Applied Linguistics (cum laude) DTech Language Practice**

SIGNED:



DATE: 20 January 2012

ACKNOWLEDGEMENTS

The special thanks goes to my diligent and passionate supervisors. This thesis would not have been possible without your help. Firstly, Prof. Pratt who has guided me during this project and immersed me in her qualitative knowledge, thank you for this, you have inspired me in so many ways and gave me a taste of what is to come. Secondly, Dr. Wilson who has supported me throughout this project, thank you very much, your superior management and encouragement contributed greatly to the end result.

To the Bosman family, Joey, Louis, Narien, Carin, Dirk and Casper, your individual roles you have played within the last 6 years are irreplaceable. I owe my deepest appreciation to you all.

I would like to extend my gratitude to members of the Snow family who have supported and showed me compassion in so many ways. I especially wish to extend my deepest gratitude to Kirst who has challenged and supported me from day one. Thank you for everything.

To all my friends, you know who you are, thank you for all the fun as well as the thorny moments we went through together. It is these moments that define and intricately connect us all. I trust that you will each positively affect other people's lives as you have mine.

It is a pleasure to thank those individuals from Durban University of Technology, Health Sciences and Chiropractic for their assistance, which often goes unnoticed.

ABSTRACT

Background: Animal chiropractic, an internationally sanctioned profession, assists veterinarians with a complementary approach to animal healthcare therapy. Animal chiropractic in South Africa appears to be within its novel stages of development and no clear parameters define its present position. As a result of ambiguity and present concern dictated by veterinary regulation, animal chiropractic has not developed along well defined parameters, and it is thought that this study will contribute to achieving some clarity in this regard. The impetus for this study originated as a result of an increased awareness within the complementary and alternative medicine (CAM) field of these CAM therapies in the management of animal healthcare, and a growing interest in their application.

Objective: The purpose of the study is to identify the current status of animal chiropractic in South Africa and to explore ways in which the integration of animal chiropractic into the animal healthcare setting of South Africa might be achieved.

Method: This study is an interpretive investigation set in a post-positivistic paradigm and used a grounded theory approach. Data was collected from twelve semi-structured interviews (digitally voice recorded) with relevant stakeholders who were knowledgeable within their respective fields (animal chiropractic; veterinary health science; their respective governing bodies; and owners of animals which had received treatment from animal chiropractic). Questions addressed participants' perceptions and experiences of animal chiropractic with regard to the role it plays, current interprofessional interactions and developmental issues facing the profession. Qualitative analysis of the data was done using NVIVO 9 software (NVivo 9, developed in Australia, copyright 2011 QSR International Pty Ltd.). The purpose of the data collection was to obtain knowledge presently available within the proposed field in order to build a credible theory which might explain the current status of animal chiropractic in South Africa and the way forward to professional integration with mainstream animal healthcare practice.

Results: Applying a process of grounded theory methodology revealed that certain key prerequisites were needed for integration of animal chiropractic with mainstream animal healthcare to take place. Firstly, animal chiropractic practitioners had to be seen to have reached a certain level of **competence**, which could be achieved through a recognised educational programme and by following practising standards at the same (or similar) level as veterinary practitioners. Secondly, **acceptance** by the public and mainstream practitioners is vital, and requires that the need for animal chiropractic is well motivated, that the role of animal chiropractic is better defined, and that collaboration with mainstream professionals is implemented. Thirdly, animal chiropractic needs careful **regulation** in order for it to be controlled appropriately. This will require a suitable professional body to govern it, legislation to endorse it and guidelines to direct its actions. Lastly, **resources** must be available, such as enough animal chiropractors interested in entering the field, sufficient qualified instructors (i.e. experienced animal chiropractors) to provide tuition, adequate amenities, and sufficient time available for the profession to develop and the integration process to take place.

Conclusion: It would appear that, with CAVM therapies becoming popular, more people are becoming interested in animal chiropractic. The study suggests that, if the animal chiropractic profession makes provision for achieving the prerequisites of competence, acceptance, regulation and resources in terms of its future development, it might be possible to achieve professional integration with mainstream animal healthcare within the next ten years.

TABLE OF CONTENTS

| | |
|----------------------------|-----|
| Acknowledgements..... | ii |
| Abstract..... | iii |
| List of Tables..... | ix |
| List of Figures..... | ix |
| List of Abbreviations..... | x |

CHAPTER 1: INTRODUCTION

| | |
|--|---|
| 1.1 Introduction..... | 1 |
| 1.2 Context of the research..... | 1 |
| 1.3 General aims and scope of project..... | 2 |
| 1.4 Main themes of the research..... | 3 |
| 1.5 Value of the research..... | 4 |
| 1.6 Overview of dissertation..... | 5 |
| 1.7 Conclusion..... | 6 |

CHAPTER 2: LITERATURE REVIEW

| | |
|--|----|
| 2.1 Introduction..... | 7 |
| 2.2 Complementary and alternative medicine..... | 7 |
| 2.3 Complementary and alternative veterinary medicine..... | 8 |
| 2.4 Animal chiropractic..... | 11 |
| 2.4.1 Animal chiropractic: Historical perspective..... | 11 |
| 2.4.2 Animal chiropractic: Scope of practice..... | 12 |
| 2.4.3 Animal chiropractic: Education..... | 14 |
| 2.4.4 Animal chiropractic: Governance and legislation..... | 16 |
| 2.5 Interprofessional relations between animal chiropractors and veterinarians.. | 18 |
| 2.6 Developmental issues..... | 20 |
| 2.7 Professional integration..... | 22 |
| 2.8 Perceptions on animal chiropractic in general..... | 23 |

| | |
|---------------------|----|
| 2.9 Conclusion..... | 24 |
|---------------------|----|

CHAPTER 3: METHODOLOGY

| | |
|--|----|
| 3.1 Introduction..... | 25 |
| 3.2 Study design..... | 25 |
| 3.3 Participants..... | 27 |
| 3.3.1 Inclusion criteria..... | 29 |
| 3.3.2 Exclusion criteria for all participants..... | 30 |
| 3.4 Procedure and interview method..... | 31 |
| 3.5 Data analysis..... | 32 |
| 3.6 Trustworthiness..... | 34 |
| 3.7 Conclusion..... | 36 |

CHAPTER 4: RESULTS AND DISCUSSIONS

| | |
|---|----|
| 4.1 Introduction..... | 37 |
| 4.2 Participant details..... | 37 |
| 4.2.1 Terms used to refer to participants..... | 37 |
| 4.2.2 Participants' personal knowledge of animal chiropractic..... | 39 |
| 4.3 Principal categories and sub-categories emerging from the analysis..... | 40 |
| 4.4 Competence..... | 42 |
| 4.4.1 Education..... | 42 |
| 4.4.1.1 Importance of an animal chiropractic education..... | 42 |
| 4.4.1.2 Animal chiropractic education abroad..... | 43 |
| 4.4.1.3 Education and legislation..... | 44 |
| 4.4.1.4 Elements to consider regarding future education in South Africa.... | 44 |
| 4.4.1.5 Conclusions about the need for education..... | 45 |
| 4.4.2 Practice..... | 47 |
| 4.4.2.1 Animal chiropractic experience..... | 47 |
| 4.4.2.2 Incompetence in practice..... | 47 |
| 4.4.2.3 Grey areas in practice..... | 48 |

| | |
|--|----|
| 4.4.2.4 Conclusions about the need for practice..... | 49 |
| 4.5 Acceptance..... | 49 |
| 4.5.1 Need for the service..... | 50 |
| 4.5.1.1 The need for a social service such as animal chiropractic..... | 50 |
| 4.5.1.2 Conclusions about the importance of a need for the service..... | 51 |
| 4.5.2 Role played by animal chiropractic..... | 51 |
| 4.5.2.1 Current perceived role of animal chiropractic..... | 52 |
| 4.5.2.2 Conditions treated by animal chiropractic..... | 52 |
| 4.5.2.3 Animal species treated..... | 54 |
| 4.5.2.4 Conclusions about the role played by animal chiropractic..... | 55 |
| 4.5.3 Collaboration between animal chiropractors and veterinarians..... | 56 |
| 4.5.3.1 Current collaborative trends..... | 56 |
| 4.5.3.2 Interprofessional communication..... | 57 |
| 4.5.3.3 Poor interprofessional relationships..... | 58 |
| 4.5.3.4 The role of joint research in collaboration..... | 61 |
| 4.5.3.5 Factors which would improve interprofessional collaboration..... | 62 |
| 4.5.3.6 Conclusions about the importance of interprofessional collaboration..... | 64 |
| 4.6 Regulation..... | 65 |
| 4.6.1 Professional Body..... | 66 |
| 4.6.1.1 Viewpoints with regard to different professional bodies..... | 66 |
| 4.6.1.2 Importance of a regulating body..... | 68 |
| 4.6.1.3 Which regulating body should be in charge of animal chiropractic? | 68 |
| 4.6.1.4 Which professional association should represent animal chiropractic?..... | 69 |
| 4.6.1.5 Conclusions about professional bodies regulating animal chiropractic..... | 70 |
| 4.6.2 Legislation..... | 71 |
| 4.6.2.1 Current outlook on legislation..... | 71 |
| 4.6.2.2 Importance of legislation..... | 72 |
| 4.6.2.3 Malpractice..... | 72 |
| 4.6.2.4 Necessary legislation..... | 73 |
| 4.6.2.5 Organized..... | 73 |

| | |
|--|----|
| 4.6.2.6 Conclusions on the importance of legislation..... | 74 |
| 4.6.3 Guidelines/scope of practice..... | 74 |
| 4.6.3.1 The importance of guidelines..... | 75 |
| 4.6.3.2 Who should perform animal chiropractic?..... | 75 |
| 4.6.3.3 Para-veterinary professions..... | 76 |
| 4.6.3.4 Conclusions on guidelines/scope of practice..... | 76 |
| 4.7 Resources..... | 77 |
| 4.7.1 People..... | 77 |
| 4.7.1.1 Animal chiropractors..... | 77 |
| 4.7.1.2 Educational Staff..... | 78 |
| 4.7.2 Amenities..... | 78 |
| 4.7.3 Time..... | 78 |
| 4.7.3.1 Time needed for legislation..... | 78 |
| 4.7.3.2 Future of animal chiropractic in South Africa..... | 78 |
| 4.7.3.3 Conclusions on the importance of resources..... | 79 |
| 4.8 Conclusion..... | 80 |

Chapter 5: CONCLUSIONS AND RECOMMENDATIONS

| | |
|---|----|
| 5.1 Introduction..... | 84 |
| 5.2 Conclusions..... | 84 |
| 5.3 Recommendations..... | 86 |
| 5.4 Timeframe estimate for animal chiropractic integration into the animal healthcare field..... | 87 |
| 5.5 Conclusion..... | 89 |

| | |
|--|-----------|
| APPENDIX A: LETTER OF INFORMATION AND INFORM CONSENT..... | 91 |
|--|-----------|

| | |
|---|-----------|
| APPENDIX B: INTERVIEW QUESTIONS..... | 93 |
|---|-----------|

| | |
|---|-----------|
| APPENDIX C: INTERVIEW TRANSCRIPTS..... | 95 |
|---|-----------|

| | |
|---|------------|
| APPENDIX D: ETHICAL CLEARANCE CERTIFICATE..... | 155 |
|---|------------|

| | |
|--------------------------|------------|
| BIBLIOGRAPHY..... | 156 |
|--------------------------|------------|

LIST OF TABLES

| | |
|--|----|
| Table 4.1 Categories emerging from the grounded theory methodology..... | 41 |
|--|----|

LIST OF FIGURES

| | |
|---|----|
| Figure 3.1 Grounded theory process followed..... | 33 |
| Figure 5.1 Timeframe estimate for animal chiropractic integration into the animal healthcare field..... | 88 |

LIST OF ABBREVIATIONS

| | | |
|--------|---|---|
| AHPCSA | : | Allied Health Professions Council of South Africa |
| APGSA | : | Animal Physiotherapy Group of South Africa |
| AuVCA | : | Australian Veterinary Chiropractic Association |
| AVCA | : | American Veterinary Chiropractic Association |
| CAM | : | Complementary and Alternative Medicine |
| CASA | : | Chiropractic Association of South Africa |
| CAVM | : | Complementary and Alternative Veterinary Medicine |
| CVMG | : | Complementary Veterinary Medicine Group |
| IAVC | : | International Academy of Veterinary Chiropractic |
| IM | : | Integrative/Integrated Medicine |
| IVCA | : | International Veterinary Chiropractic Association |
| OFA | : | Options for Animals |
| SASP | : | South African Society of Physiotherapy |
| SAVC | : | South African Veterinary Council |
| SAVA | : | South African Veterinary Association |
| VMT | : | Veterinary Medicine Today |
| VSC | : | Vertebral Subluxation Complex |
| WHO | : | World Health Organisation |

CHAPTER 1: INTRODUCTION

1.1 Introduction

This Chapter first gives the context of the research, which investigates the current situation of animal chiropractic in the South African animal healthcare setting in order to suggest developmental means whereby it could become an integral part of animal treatment and complement the work done by veterinarians. The chapter next gives the main themes of the study, related to the role of animal chiropractic, the status of interprofessional relationships, and developmental concerns. A brief overview of each chapter is given before concluding.

1.2 Context of the Research

This dissertation investigates the current situation of animal chiropractic in the South African animal healthcare setting. Through considering various stakeholders' perceptions and information presently available, this study attempts to clarify factors animal chiropractic needs to associate itself with in order to form part of animal treatment and complement the work done by veterinarians. While this study focuses specifically on the animal chiropractic profession, it may also provide insight with regard to expansion of the alternative animal healthcare field.

Animal chiropractic, an uncommon but emerging profession worldwide, appears to be well established in certain countries but not yet so in South Africa (Taverner, 2011). Presently this field is in its fundamental stages of development and no clear parameters have been put into place to better identify its current status. This has predisposed animal chiropractic to some form of ambiguity regarding educational, regulatory and developmental aspects in the country (Taverner, 2011).

Animal chiropractic, also known as veterinary chiropractic, provides a complementary approach to various health and performance related difficulties experienced by animals (Schoen *et al.*, 1998; Haussler, 2000; AuVCA, 2011; OFA,

2011; AVCA, 2011; IVCA, 2011). Initiated in the United States of America (USA) through the amalgamation of veterinary and chiropractic principles, this profession was put into practice in the 1980s and was delegated by Willoughby (2002), the only qualified veterinarian and chiropractor at the time. The profession faced a series of critique and eventually obtained legitimacy from its veterinary counterparts some two decades thereafter (Willoughby, 2002). Ever since then the profession has developed and expanded internationally with education being made available in several countries. Animal chiropractic in South Africa appears to be in a similar position to that experienced 30 years prior in the USA. With no specific parameters being set in place, this field should consider which steps needs to be taken to promote development of the profession. It should be noted that animal chiropractic is not yet recognised as a profession in South Africa and will be referred to as the “animal chiropractic field” throughout when mentioned.

1.3 General Aims and Scope of Project

This study endeavours to investigate the current state of affairs considering animal chiropractic in South Africa with the view of suggesting that it could form an integral part of animal treatment and complement the work done by veterinarians. Because of its current stage of development, not much information is available on the state of animal chiropractic in South Africa other than a perception study conducted by Taverner (2011) entitled: “*The perceptions of veterinarians towards chiropractic and the chiropractic treatment of animals in South Africa*”. In this study an overall response rate of 13.8% from a relatively large veterinary sample group was achieved (245/1774), but did not provide a clear account of the veterinary group’s perceptions of animal chiropractic in South Africa (Taverner, 2011). Taverner (2011) therefore recommended that a follow up qualitative study should be done investigating emerging trends with regard to the attitudes of veterinarians and relevant stakeholders towards chiropractic and the chiropractic treatment of animals in South Africa.

Following Taverner's suggestion, this research set out to investigate these trends to provide further clarity on the current situation of animal chiropractic in South Africa. A grounded theory approach was adopted (Glaser *et al.*, 1967; Strauss *et al.*, 1990). This process is defined as "*a qualitative research method that uses a systematic set of procedures to develop an inductively derived grounded theory about a phenomenon*" (Strauss and Corbin, 1990: 24). Essentially, a theory is established which is grounded in the data (Heath *et al.*, 2004). This is done after various hypotheses have been repeatedly evaluated through constant comparative examination (Allan, 2003). According to Rahmat (2000) grounded theory is especially appropriate in transformation type research concerning areas such as health, social, technical, economic and ecological development, as well as public participation projects. In addition, the process is aimed at formulating a theory rather than to prove or disprove a specific hypothesis, and starts from the point of view of the data and not existing theories (Glaser *et al.*, 1967). However the findings of previous research on the state of chiropractic in South Africa (Bar-Gil, 2009; Wise, 2010) was used as "data", as suggested by Glaser (1998), who points out that the results of previous research constitute a type of data as a starting point. These data included certain key themes which were interrogated during the course of the research, along with further empirical work. However, the system of prerequisites considered necessary for the development of animal chiropractic in South Africa, and which emerged during the grounded theory process, revealed a different systemic structure and level of hierarchy from the themes initially considered.

1.4 Main Themes of the Research

Three fundamental avenues of discussion or themes provided initial information to the study. First and foremost, the role of animal chiropractic in South Africa; the second, inter-professional relations among animal chiropractors and veterinarians; and lastly, key developmental issues facing animal chiropractic's integration into the veterinary health care setting. Information obtained from these themes as well as data from key stakeholders was used to draw up a tentative theory to explain

the current status of animal chiropractic in South Africa and possible directions for development.

This mean that, at the outset, the investigation focused on the following:

- the role, if any, animal chiropractic had within the South African animal healthcare setting;
- the status of interprofessional relationships between animal chiropractors, veterinary professionals and the public in order to further define the profession's current position; and
- the issues surrounding the development of the animal chiropractic profession in South Africa.

As the process of grounded theory methodology was followed, however, these factors appeared in slightly different configurations and emphasis. It became apparent that the role played by various elements in achieving integration with mainstream animal healthcare was the key issue in the emerging theory.

1.5 Value of the Research

This study is intended to provide an introductory representation, or a foundation, of animal chiropractic in South Africa. This may help to formulate a better understanding of the profession in order to pursue further research within the field. In addition, this study may assist other alternative therapies interested in applying their principles to animal welfare by providing a tentative theory in the form of a practical framework. This framework however might need to undergo alterations and specific amendments prior to put into practice or when further research in the field is undertaken.

By establishing the current state of affairs of this field it may assist with development and benefit the animal chiropractic profession; the chiropractic profession; the veterinary profession; the public; and most importantly the animal

patients. These parties constitute the audience intended for this research. With chiropractic being an emerging field it is important to determine the issues at hand that are facing the legitimacy of its potential animal subspecialty, and to consider the perceptions of the chiropractic and veterinary community, as well as that of the public.

As a student of chiropractic venturing to undertake further studies within the animal chiropractic field, the researcher acknowledges that his views support the development and potential integration of animal chiropractic in light of its desirable and potential benefits to all. However, it is acknowledged that different perceptions will exist and that the study will attempt to explain these as objectively as possible. It is considered that the resultant findings will ultimately assist the endorsement of, or promote further growth within the animal chiropractic field of South Africa.

1.6 Overview of Dissertation

An outline of the study can be represented as follows:

Chapter 2: Literature Review

This chapter gives an overview of interrelated literature by showing how animal chiropractic developed abroad and what is presently known within South Africa today. The importance of perception and integration is considered, specifically with regard to the role of animal chiropractic, inter-professional relationships with mainstream healthcare practitioners, and developmental concerns.

Chapter 3: Methodology

This section delineates the research method utilized by this study, grounded theory methodology. It further introduces the participants and looks at the analysis procedure that was used in order to establish a tentative theory for animal chiropractic at present and its development in the future.

Chapter 4: Results and Discussions

This chapter presents the data that was obtained from various stakeholders under the categories which emerged from the analysis. Discussion of related categories follows, comparing similarities and differences in the perceptions of stakeholders. The results of using the grounded theory methodology are presented, and a tentative theory is generated for the current status and eventual development of animal chiropractic in South Africa.

Chapter 5: Conclusions and recommendations

Conclusions are given in the form of a synopsis of the emerging theory, and recommendations for future research and development are suggested.

1.7 Conclusion

Chapter 1 shows that this study is intended to provide an introductory representation of the state of animal chiropractic in South Africa and suggest directions for future development. In summing up the focus and scope of this research, it has been suggested that focusing on the current status of animal chiropractic in South Africa may assist with developmental areas, including its possible integration into mainstream animal healthcare. It has been indicated, however, that the initial themes investigated might change in the course of the research in the process of grounded theory methodology applied. This chapter indicates that this research may help to formulate a better understanding of animal chiropractic in order to pursue further research within the field, and may assist other alternative therapies interested in applying their work to animal healthcare.

CHAPTER 2: LITERATURE REVIEW

2.1 Chapter Overview

While the animal chiropractic field is established abroad, its indistinct and novel nature is affecting its position in South Africa. Through reviewing existing literature this research explores the current status of animal chiropractic in South Africa, with special emphasis on perceptions which may impact the integration with mainstream animal healthcare practice.

2.2 Complementary and Alternative Medicine

Healthcare can be divided into modern (conventional, orthodox, Western or allopathic) and traditional (indigenous, complementary or alternative) (Xue, 2008). Complementary and alternative medicine (CAM) represents a group of healthcare therapies which fall outside a country's tradition and are not integrated with their principal healthcare system (WHO, 2011). CAM therapies offer a non-pharmacological, holistic approach through prescribing natural healing products and advising patients towards wellbeing through lifestyle improvements (Kienle *et al.*, 2011). Such holistic forms of therapy work through the inherent homeostasis of an individual to promote the welfare of a patient as a “*whole*” (Schoen *et al.*, 1998; Hare, 1999).

There has been an increased awareness and usage of CAM therapies by people, especially in developed countries (Eisenberg, 1998; WHO, 2002; Boon *et al.*, 2006; Foxa *et al.*, 2010). CAM therapies are mostly guided by consumers and not by healthcare providers or healthcare sponsors (Caldis *et al.*, 2001). This trend may be credited to the consumer's experience of unease regarding side effects of drugs, superior public health access, the questioning of specific approaches used, and assumptions made by conventional medicine (WHO, 2002). Consequently the

availability of CAM therapies is increasing rapidly (Barry, 2006). Growing evidence also suggests its effectiveness and cost-efficiency (Vohra *et al.*, 2005).

South Africa is regarded as one of a small number of countries that have progressed towards the integration of CAM therapies into its healthcare legislative framework (Gqaleni *et al.*, 2007). Chiropractic is representative of such a CAM therapy and has expanded globally since its inception to being established in more than 70 countries worldwide (NBCE, 2010). Its application in animal welfare is also becoming more common (Willoughby, 1998; Hare, 1999; Haussler, 2000).

2.3 Complementary and Alternative Veterinary Medicine

Progresses in the development field of veterinary science are taking place (Schoen *et al.*, 1998; Jones, 2004), and as a result, new forms of therapies have been established in the last few decades (Lin *et al.*, 2003). One such advance is complimentary alternative veterinary medicine (CAVM) therapy, which provides a wide range of congruent therapeutic interventions to animal ailments. CAVM therapy is defined as a diverse group of therapeutic, preventive and diagnostic practices which include but are not limited to therapies such as:

Veterinary acupuncture, acutherapy, and acupressure; veterinary homeopathy; veterinary manual or manipulative therapy (i.e. therapies based on techniques practiced in osteopathy, chiropractic medicine, or physical medicine and therapy); veterinary nutraceutical therapy; and veterinary phytotherapy (AVMA, 2011a).

The year 2011 marked the 250 year anniversary of the veterinary profession (WVY, 2011). It is therefore safe to say that this profession has played a valuable role in contributing to animal healthcare worldwide. Recently within the USA the veterinary medical industry has responded similarly to the human medical industry by accepting and implementing CAVM therapies in animal healthcare (Schoen *et al.*, 1998; Lin *et al.*, 2003). This progression could be attributed to the contention that animals experience pain similar to that experienced by humans as they share

similar neural pathways and neurotransmitters (Hellyer *et al.*, 2007). However, largely anecdotal evidence as opposed to limited evidence-based research for animal chiropractic is presently available (Lin *et al.*, 2003). It could therefore be reasoned that CAM therapies which prove useful in humans could possibly have similar beneficial results when applied to animals. The majority of knowledge available to animal chiropractic has been extrapolated from human chiropractic theories, methods and research and may also support this notion (Haussler, 2000).

In 1980 the American Veterinary Medical Association (AVMA) initiated the movement towards CAVM when the veterinary acupuncture profession first approached the association for independence (VMT, 2001). As a result of rapid transformations in the CAVM field, a task force was created on behalf of the AVMA Executive Board in 1998 and produced a series of publicly reviewed guidelines (VMT, 2001). Accepted in 2001, these guidelines enabled veterinarians to make educated and well-judged decisions regarding the implementation of CAVM therapies in the treatment of animals within the constraints of veterinary medicine (AVMA, 2011b).

There is limited published research available for the majority of CAVM therapies and can predominantly be attributed to the difficulty of designing individualized treatment protocols and/or the lack of funding (Hare, 1999; Haussler, 2009a). Jones (2004) reasons that this could be problematic as a particular type of CAVM therapy could be utilized on different animal complaints because it had been successful on one prior occasion. He simultaneously cautions the veterinary profession that assumptions like these may lead to negligence, emphasizing the need for more evidence based medicine (Jones, 2004). Despite this limited research, the status of CAVM has grown among veterinarians and veterinary schools as well as the public sector, and, as a result of more client attention, there is a greater necessity for evidence-based research in the field (Wynn *et al.*, 2005).

The South African veterinary healthcare setting has also showed increased interest and demand for CAVM therapies (CVMG, 2010). Currently, the Complementary Veterinary Medicine Group (CVMG), established in the year 2000, acts as an awareness group under the auspices of the South African Veterinary Association (SAVA), and aims to inform the veterinary profession and general public about CAVM therapies for animals (CVMG, 2010). The CVMG also offers post graduate homeopathy, acupuncture and traditional Chinese medicine educational courses to veterinarians (CVMG, 2010).

The Animal Physiotherapy Group of South Africa (APGSA) (2011) has reported an increase in the treatment of animals with the use of animal physiotherapy. This profession is regulated under the auspices of the South African Society of Physiotherapy (SASP) and has been treating animals under veterinary referral for the past 13 years (APGSA, 2011). This has allowed animal physiotherapists to communicate directly with veterinary practitioners, ensuring a more controlled and effective practice. The animal physiotherapy profession shares some similarities with that of animal chiropractic (Hausler, 2000). In essence, animal physiotherapists treat neuromusculoskeletal conditions comparable to those mentioned in section 2.4.2 and make use of various modalities which may include:

ultrasound, laser, light therapy, electrical muscular stimulation, faradic stimulation, interferential therapy, TENS, cryotherapy, massage, myofascial release techniques, mobilization of joints, hydrotherapy, stretching, re-education of movement, proprioceptive re-education and therapeutic taping (APGSA, 2011).

Animal chiropractors also deal with mechanically-related problems of the neuromusculoskeletal system, which they address through the application of manual therapy to restore joint motion (Hausler, 2000).

It could be reasoned that if animal chiropractors were to have similar close relationships like those seen between physiotherapy and veterinary practitioners it

could possibly assist the animal chiropractic field to strive towards best-practice in the future. The veterinary medical field should investigate and become familiar with different CAVM therapies, so that in due course it can be incorporated into a new, integrated medical approach to animal healthcare (Schoen *et al.*, 1998). This may suggest a broader spectrum of diagnostic and therapeutic interventions available so that each animal can be treated selectively while at the same time ensuring that the chosen approach conforms to the owner's values (Schoen *et al.*, 1998; Haussler, 1999; Wimberley, 2009).

2.4 Animal Chiropractic

The following section looks more closely at animal chiropractic, in particular to its history, scope of practice; education as well as governance and legislation.

2.4.1 Animal chiropractic: Historical perspective

The application of chiropractic principles on animal models had been around since chiropractic's principal years, which dates back to 1895 in the USA (Palmer, 1944). A veterinary hospital provided a juncture where vertebral subluxation complexes (VSC) of cows, horses, dogs and cats were addressed (Palmer, 1944). Added interest in the field of animal chiropractic developed as more beneficial outcomes to animal treatment were obtained (Willoughby, 2002).

Options for Animals (OFA) was initiated in the 1980s, which represented the first group of animal chiropractors (Willoughby, 2002). Illegal practices on animals, however, led to state charges against the parties involved and disbandment of the group (Willoughby, 2002). The first equine (horse) chiropractic course was presented in 1986 and entailed a basic chiropractic and veterinary syllabus to assist professionals in each field to understand what each profession offered and lead to the formation of the AVCA (Willoughby, 2002).

This association was confronted with barriers such as: lack of an acknowledged educational programme; practice standards and published research articles;

overpowering antagonism from political adversaries in the human chiropractic and veterinary fields; and the advocating of questionable forms of therapies branded as chiropractic by many practitioners (Willoughby, 2002). However, the AVCA persevered by focusing on the importance of both veterinary and chiropractic professions in the education and practice of animal chiropractic. As a result, animal chiropractic evolved as a sub-speciality of veterinary healthcare which progressed rapidly within the last decade and has increasingly shown benefit in the animal healthcare setting (Willoughby, 2002).

While animal chiropractic has become established in countries outside South Africa, development of the profession within the country has been slow, to the extent that there are only a few qualified practitioners working in the country at present (Taverner, 2011). In order for this profession to grow and develop it may have to consider international trends when taking initial steps towards integration.

2.4.2 Animal chiropractic: Scope of practice

Animal chiropractic can be defined as *“the science, art and philosophy concerned with good health through restoration and maintenance of a properly functioning neuromusculoskeletal system, without the use of drugs or surgery”* (IVCA, 2011). This is achieved through the implementation of manual therapy, more specifically, the location and correction of VSC by means of manipulation which is a specific, short lever, high velocity, controlled thrust by hand or instrument, and is directed at specific articulations (Haussler, 1999).

VSC can be explained as an abnormal relationship between two neighbouring articular structures as a result of functional or pathological basis, and may cause direct or indirect biomechanical and/or neurophysiological changes to surrounding structures and body systems (Haussler, 2000). Lameness is a common musculoskeletal diagnosis in animals and has serious wellbeing and monetary implications where it may present (Seitzinger *et al.*, 2000). VSC has been reported as a common cause of lameness, especially in the equestrian world (Taylor, 1999).

Paulekas *et al.* (2009) suggest that lameness, as well as other regularly encountered musculoskeletal pain syndromes and injuries, are ailments that might be successfully addressed by application of physical therapy such as chiropractic. Addressing VSCs therefore constitutes one of the primary objectives of animal chiropractic and the elimination thereof may often correct the source of acute or chronic pain syndromes in animals (IVCA, 2011).

The most widely used indications for animal chiropractic treatment, although these may vary considerably, include the following:

- chronic neuromusculoskeletal problems;
- acute ailments such as tension or stiffness;
- prophylactic treatment to maintain fitness;
- preservation of soundness in older animals;
- enhance performance ability of sport animals;
- chronic lameness such as bone spavin;
- navicular syndrome or tendon problems in the horse; and
- arthrosis, spondylosis, tendon or cruciate ligament problems in dogs (IVCA, 2011).

Further economic and welfare concern, specifically pertaining to equine performance industries, are matters such as back pain and diseases of the spine and pelvis, which predisposes these animals to reduced performance, decreased training days, and physical exhaustion (McGowan *et al.*, 2007).

The effectiveness of animal chiropractic and additional CAVM therapies has been demonstrated (Boldt, 2002; Haussler *et al.*, 1999; 2000; 2007; 2009a; 2009b; 2010; Sullivan *et al.*, 2008; Gomez-Álvarez *et al.*, 2008). Some studies have also been done in South Africa (Meuwese, 2005; Loots, 2008; Linden 2008). These studies have mainly been performed on horses. Still, further research is essential before endorsing such an intervention (Haussler *et al.*, 2007; Gomez-Álvarez *et al.*, 2008).

Clinical knowledge of back injuries in dressage and race horses generally supplied the veterinary profession with the potential to act together with other therapists such as animal chiropractors (Riggs, 2010). This may assist in supplying horse owners with more accurate diagnoses and appropriate therapeutic services (Riggs, 2010). Manual therapies that have proved useful in equine practice include: chiropractic, osteopathy, physical therapy, and touch and massage therapy (Hausssler, 2009b). All these therapies have been used in the human client population for decades (Hausssler, 2009b).

As mentioned before, techniques used in animal chiropractic are based on extrapolated human theories and practical applications thereof (Hausssler, 2000). Conditions such as back pain (Santilli *et al.*, 2006; Turner *et al.*, 2008), neck pain (Hurwitz *et al.*, 2010; Gross, *et al.*, 2010), and extremity disorders (Bergman *et al.*, 2004; Brantingham *et al.*, 2009) have proved beneficial in humans, and could potentially benefit animals as well. In addition, animal chiropractic has also shown advances in preventative care (Cooper *et al.*, 2007; Hoskins *et al.*, 2007), patient satisfaction (Boudreau *et al.*, 2006) and cost-effectiveness (Redwood, 2009).

2.4.3 Animal chiropractic: Education

Animal chiropractic represents a specialized field for both doctors of veterinary medicine and doctors of chiropractic, and is recognized as an adjunct to animal care rather than a substitute for traditional veterinary medicine (Murray *et al.*, 2009; Riggs, 2010; OFA, 2011; AVCA, 2011; AuVCA, 2011; IVCA, 2011). A post graduate qualification in animal chiropractic is not presently available in South Africa and can be obtained only abroad (Wimberley, 2009), especially in countries such as the USA, Canada, United Kingdom (UK) and Germany (IVCA, 2011). It has been estimated that the majority (90%) of all qualified animal chiropractors (veterinarians and chiropractors) have been educated through the International Academy of Veterinary Chiropractic (IAVC) (IAVC, 2011). Both basic and advanced courses are currently available, and these deal with large and small animals and are IVCA and AVCA endorsed. According to the AVCA (2011) a

graduate of basic approved animal chiropractic programmes are not certified and may not refer to themselves as certified animal chiropractors until they have passed certain requirements in a final examination.

The minimum duration for a qualification is a 210 hour syllabus which has been divided into six modules with both theoretical and practical examination components completed at the end of each respective module (IVCA, 2011). A brief example of an IAVC syllabus outline consists of a minimum 135 hours classroom and 75 hours laboratory work (IAVC, 2011). Subjects include: anatomy and biomechanics, functional neurology, animal chiropractic diagnosis, animal chiropractic adjusting techniques, management of animal chiropractic, chiropractic studies, veterinary studies, history and philosophy of animal chiropractic, ethics and legalities, and current research within the field (IAVC, 2011). By obtaining such a qualification practitioners will be competent in completing an accurate case history, carrying out a physical examination, formulating a diagnosis and management protocol, and delivering care within their respective scope of practice (IVCA, 2011).

A study investigating CAVM therapeutic courses offered in the USA veterinary schools found that only 7 of the investigated 27 veterinary schools offered educational programmes in CAVM (Schoen, 2000). The majority of respondents (87%) felt that acupuncture, nutraceuticals, nutritional supplements and physical therapy should be included in the syllabus, with 61% respondents indicating that chiropractic should be included, and another 44% of veterinary schools suggesting that homeopathy should be incorporated. Schoen (2000) also found that 6 of the responding schools had conducted research in CAVM.

According to Taverner (2011) only a small number of South African veterinarians possess a post graduate qualification in the field of CAVM therapy, and only one person has a degree in animal chiropractic. Of veterinarians (43/232), who have referred an animal patient/s to an animal chiropractor in the past 18 believed that

the animal chiropractors had a qualification, 13 did not believe they had a qualification and 12 of the respondents were unsure (Taverner, 2011). Taverner (2011) furthermore noted that majority (189/224) of veterinarians appeared to be in favour of an animal chiropractic course in South Africa, with a further half of the respondents indicating that they would be interested in attending such a course. They also felt that both qualified chiropractors and veterinarians should be allowed to attend and administer such a course (Taverner, 2011). The importance of both professions being involved in this profession is in keeping with many institutions abroad and may aid future development of animal chiropractic in South Africa (Taverner, 2011). It must be noted, however, that Taverner's response rate was just 13.8% for his 2011 study, which, although it may offer insight into veterinary perceptions, does not necessarily represent the views of the greater veterinary population.

2.4.4 Animal chiropractic: Governance and legislation

At present there are 20 states in the USA fully adhering to the AVMA Model Veterinary Practice Act of 2003 (Initial Act of 1964) by incorporating CAVM therapies into its definition of veterinary medicine, whereas 20 other states have authorized specific exemptions for regulated CAVM therapies (AVMA, 2011c). These exemptions may require some form of veterinary input such as referral or supervision (AVMA, 2011c).

The Allied Health Professions Council of South Africa (AHPCSA) is the legal body established in terms of the Allied Health Professions Act, 63 of 1982 (the Act). This council acts to facilitate the governance of all allied health professions, including chiropractic (AHPCSA, 2010). All qualified chiropractors need to be registered with the AHPCSA in order to treat humans (AHPCSA, 2010). The Act is specific to humans and does not concern the protection and promotion of animal health and welfare in South Africa (AHPCSA, 2010).

Any person in South Africa performing a Veterinary Act is required to be registered with the SAVC (Veterinary and Para-Veterinary Professions Act 19, 1982). “Veterinary Acts” include the diagnosing and treating of an animal for financial gain and this requirement protects the animal patient and its owner from possible ill-treatment, fraud and life-threatening misdiagnosis (Wimberley, 2009). Prior to animal chiropractic treatment, a veterinarian must first have examined the animal, must have made a diagnosis, and must have authorized that specific treatment (Wimberley, 2009). According to Wimberley (2009) only veterinarians are adequately educated in animal diseases, and human trained chiropractors, homeopaths and acupuncturists do not have sufficient training for animal healthcare unless they have obtained a recognised post graduate veterinary course in their respective field, and are registered with the SAVC. At present human trained chiropractors are, however, unable to register with the SAVC as there is no specified veterinary or para-veterinary faction for them to fall under (Taverner, 2011). Things are further complicated by animal chiropractors being able to obtain recognised degrees only abroad (Wimberley, 2009).

Taverner (2011) found that 183/229 of veterinary respondents suggested that animal chiropractors should treat animals under veterinary referral in South Africa, whereas 35/229 respondents thought animal chiropractors should practice independently. A small number of respondents (11/229) indicated that animal chiropractic should not be authorized to practice at all. In addition, the majority of respondents 141/226 and 131/227 were in agreement that the animal chiropractic profession should be incorporated into already established organisations such as the SAVC and South African Veterinary Association (SAVA) rather than the AHPCSA and the Chiropractic Association of South Africa (CASA) (Taverner, 2011). Approximately 30% of respondents (i.e. of the small sample) thought that both the AHPCSA and SAVC should govern over animal chiropractic in South Africa and that 28/227 thought that an independent association could be favourable (Taverner, 2011).

As mentioned before, human trained physiotherapists have collaborated closely with veterinary practitioners and the SAVC to encourage and essentially guarantee that legalities as determined by the SAVC are complied with. Minutes of the SAVC meetings in the year 1990 on the topic “animal physiotherapy” indicated that the SAVC confirmed that physiotherapists registered with the South African Medical and Dental Council could be permitted to practice physiotherapy on animals at the request of a veterinarian who would act as the client (SAVC, 1990). In the following year human physiotherapists were permitted to supply a financial account directly to the owner of the animal and not via the veterinarian. However, the veterinarian was still required to refer the animal to the physiotherapist and make the initial diagnosis (SAVC, 1991).

Currently animal chiropractic in South Africa has no structure in terms of a governing body, association, educational institution or even guidelines as to standards of practice. In that sense, most standards of practice are devised from human chiropractic procedures (Taverner, 2011) and/or international animal chiropractic bodies (IVCA, 2011). The fact that only 3 to 5 internationally qualified animal chiropractors currently practising in South Africa may contribute to a convoluted perception of the application of animal chiropractic (Korporaal, 2010).

2.5 Interprofessional Relations between Animal Chiropractors and Veterinarians

Interprofessional relationships have become essential in achieving successful healthcare (Gaboury *et al.*, 2009). Communication, knowledge of another profession's role, proficiency in one's own professional role, leadership, functioning as a team, and the negotiation of variances are key factors to consider when attempting successful interprofessional collaboration (MacDonald *et al.*, 2009). Brussee *et al.* (2001) emphasise that good communication between professionals is a result of cultured knowledge, trust, formerly held perceptions and future prospects of the parties concerned.

A relatively high average (64%) of South African veterinarians were found to have knowledge of animal chiropractic and the implementation thereof, which is suggested to be due to the influence and extrapolation from human chiropractic (Taverner, 2011). Some veterinarians also explicitly stated the use of some form of manipulative therapy technique in their treatment protocol (Taverner, 2011). These veterinarians referred mostly to physiotherapists (96/189) and homeopaths (82/189) (Taverner, 2011). Seeing that physiotherapists are professionals who assess and treat neuromusculoskeletal conditions, it may indicate a need for chiropractic intervention, as the two professions are somewhat similar (Haussler, 1999; Taverner, 2011). Animal chiropractic: Scope of practice Taverner (2011) argued that recently qualified veterinarians may have had more exposure to CAVM therapies, whereas older generation veterinarians may indeed possess some knowledge of these professions, but had not specifically implemented them.

According to Taverner (2011) a low level of interprofessional relationship exists among animal chiropractors and veterinarians in South Africa, with only a small number (44/232) of veterinarians having referred an animal patient/s to a chiropractor for complementary treatment. Mainly small animals (dogs or cats) (34/43) were referred as opposed to large animals (horse) (15/43). With regard to interprofessional communication, 13/43 of veterinary respondents who referred to animal chiropractors in the past reported good communication between themselves and the chiropractor, 16/43 reported an average communication, 10/43 reported poor communication, and 4/43 reported non-existent communication (Taverner, 2011). Once again it should be remembered that a low response rate of 13.8% was achieved in Taverner's (2011) study, and that it may not represent the views of the greater veterinary population.

Veterinarians are best equipped to make use of CAVM therapy, as their training and proficiency in the diagnosis and treatment of lameness is far superior to that shown by any other profession (Jones, 2004). However, Haussler (2000) suggests that chiropractic therapy supplies specialized treatment to joint dysfunction and

neuromusculoskeletal related disorders which are presently not incorporated into conventional veterinary medicine. From whence, then, does the reported scepticism against CAVM therapies arise?

Scepticism regarding a specific CAVM therapy is generated when a veterinarian discovers an undiagnosed lameness on inspecting an animal which has received continual CAVM therapeutic assessment and treatments (Jones, 2004). Criticism also arises when veterinary practitioners have proved incapable of treating animal patients, or have been reluctant to refer the customer to a CAVM veterinarian (Hare, 1999). As a result, many customers seek the assistance and recommendation from non-certified animal chiropractic practitioners, often without veterinarian supervision, which can lead to maltreatment of the animal (Hare, 1999; Haussler, 2000).

In order for animal chiropractic to grow, the profession had to cooperate very closely with veterinarians, as they represent the primary healthcare providers for animals (IAVC, 2011; IVCA, 2011; OFA, 2011; AuVCA, 2011). Given the early developmental stage of animal chiropractic in South Africa interprofessional relationships between the two professions might have been difficult to set up. It should therefore be considered as a cardinal step towards ensuring further development.

2.6 Developmental Issues

As with most professions, growth and development are strongly correlated with acceptance of practice standards from other professionals and also a niche market (Hillestad, 2004). Failure to properly define and thus position a profession, especially within the healthcare setting, would impede on future recognition and integration (Myburgh *et al.*, 2007). Therefore, legal and moral implications such as increased hostility between animal chiropractic and veterinary professionals might arise if an indistinct agenda for animal chiropractic presents itself.

The chiropractic profession has progressed significantly in South Africa and is becoming more widely recognised by private healthcare providers (Myburgh *et al.*, 2007). As a result of such progression, new avenues in chiropractic are being considered as post graduate fields of specialization. Unfortunately the animal chiropractic profession has been slow to develop and therefore remains in great need of a professional structure (Taverner, 2011). This could possibly be attributed to the absence of conformity, poor organization and the professional's inability to negotiate matters from a cohesive point of view. According to Kelner *et al.* (2004) these factors predisposes a profession to potential drawbacks when employing their role in a given setting. Similarly Myburgh *et al.* (2007) found in the human chiropractic setting that patients approved chiropractic on the basis of certain beliefs and philosophical outlook towards healthcare, and also their personal experience in the chiropractor's office. Yet, their assurance was weakened by the lack of the chiropractic profession to promote a particular model which defines their profession (Myburgh *et al.*, 2007).

En route to professional establishment, understanding the professional aim of a CAM therapy depends largely on the result of a political competition among the state, the public and the healthcare professions involved (Kelner *et al.*, 2004). Furthermore, it is essential to examine a profession as an integral part of a societal complex, as these societal structures contribute to professional development and influences the way the community responds to them (Kelner *et al.*, 2004). Animal owners, qualified trainers and service providers to animals are becoming more aware of the benefits that animal chiropractic offer (Willoughby, 1998; AuVCA, 2011; IVCA, 2011). As a result the animal owner or trainer plays a vital part in electing animal chiropractic therapy.

Haussler (2009a) suggested that the future of CAVM therapies rests mainly upon three possible directions that the veterinary profession may pursue when confronted with professions for which evidence of treatments are anecdotal, these being:

- to terminate the use of all therapies where evidence based treatments are absent;
- to proceed aimlessly, utilizing new or untested modalities that have some supposed or hypothetical grounds for supplying therapeutic benefit, without incorporating scientific judgment or evidence-based medicine principles; or
- to explore the claims and probable effectiveness of the different unproven modalities in well-designed, controlled studies in an attempt to incorporate or discourage their continued use.

Professional development through the formation of informed clinical decisions about the use of CAVM therapies will come into being only once evidence to support its role is provided (Haussler, 2009a). Research in the field could be achieved implementing a workforce that is supplied with adequate financial resources (Haussler, 2009a). Research therefore plays an important role in the development of this profession. It is therefore essential to note that animal chiropractic will need to grow and develop to become recognized and established especially due to diminutive numbers at present.

2.7 Professional Integration

Integrated or integrative medicine (IM) signifies a modern emerging field of medicine which integrates the best of both CAM therapy and conventional medicine (Coulter *et al.*, 2010). Integrity and acting rightfully towards patients, employees and other healthcare professionals are essential principles that CAM practitioners should employ at all time to ensure integration (Bar-Gil, 2009). Both CAM therapy and conventional healthcare require a mutual understanding that amalgamates rather than separate these respective fields (Bar-Gil, 2009). CAM therapies, however, require an advanced level of legitimacy in order to integrate with established healthcare professions (Myburgh *et al.*, 2008). It could be reasoned that similar matters apply to CAVM therapies and mainstream animal healthcare.

Education (academics), government (governmental health representative), business (medical insurance companies), competition (medical profession), practitioners and patients are fundamental building blocks of chiropractic's integration into the healthcare system of South Africa (Myburgh *et al.*, 2008). Some of these coincide with earlier mentioned key factors (educational, professionalism and legitimacy of the profession) which appeared to restrict the integration of animal chiropractic within the veterinary healthcare setting in the USA (Willoughby, 2002). Considering these issues with regard to integration might help to establish a better picture of the present status of animal chiropractic.

2.8 Perceptions on Animal Chiropractic in General

General perceptions have been presented by Chaffe (1997) in that they come to pass when an individual selects, organizes, and interprets information to establish a meaningful representation of the world. Perceptions can also be explained as fundamentals of thinking created from a variety of stimuli arising from the environment, language and social encounters (Fisher *et al.*, 2007). Schiff (1970) in some way supports this notion, but suggests that when it comes to examining perceptions of the environment, the importance is not in the neuro and physical aspects, but rather “social perceptions” which are affected by:

- the perceiver's past experience in general;
- his/her previous experience with that same/similar stimuli; and
- the state at the moment he/she is viewing the stimulus of interest.

It is not in the study's intention to establish a scientific theory of how key stakeholder's perceptions will be accounted for, but rather to recognize and appreciate that each participant's perceptions towards animal chiropractic holds ground in its own distinctive way. In order to explore current trends the study will apply a “social perceptions” approach as explained by Schiff (1970) and Fischer *et al.* (2007) and will refer to “perception” whenever doing so.

Quantitative approaches in research suggest a comprehensive description of specific methods used to assist the researcher in outlining a hypothesis that investigates practical relationships. Empirical or qualitative approaches on the other hand are able to recommend elements which might benefit from in-depth explanatory examination (Cupchik, 2001). Qualitative research allows for social occurrences to surface at an early phase of an investigation and can be used as a benchmark for further research (Myburgh *et al.*, 2007). Grounded theory can be applied to both quantitative and qualitative data (Glaser *et al.*, 1967). Taverner (2011) has quantitatively reflected veterinarians' views of the chiropractic profession, especially with regard to the inclusion thereof into the veterinary healthcare setting of South Africa. This study will focus more closely on qualitatively addressing participants' perceptions of the current status of animal chiropractic.

2.9 Conclusion

With animal chiropractic being an emerging CAVM profession in South Africa, it is important to determine the issues at hand that are presently obstructing and could potentially further prohibit its legitimacy, i.e. slowing down integration within the animal healthcare setting. The practice of animal chiropractic in South Africa is regarded as unclear, as no related governing body, educational standards or appropriate legislation that dictates and delineates its current status seem to exist. Ultimately, the animal chiropractic profession would like to practice legally and justifiably in South Africa. It can be assumed that exploring the current situation of this profession might have constructive benefits to animals, their respective owners, the veterinary medical field and other para-veterinary professions. This may in due course assist with further development of the chiropractic profession. This study therefore aims to explore the current status quo of animal chiropractic in South Africa, to devise a platform that will direct the way forward to professional integration with the veterinary healthcare profession.

CHAPTER 3: METHODOLOGY

3.1 Introduction

In this chapter the study design, methodology and data analysis utilised will be described.

3.2 Study Design

The research was qualitative in nature, set in a post-positivist (interpretive) paradigm (Urquhart, 2001), using a grounded theory approach (Strauss *et al.*, 1990; Glaser, 1998). Data was collected using semi-structured interviews.

Qualitative approaches are employed when a topic is not well known, or when limitations of a specific field are vague and unquantifiable (Morse, 2003). Qualitative research should be ethical, clear and logically articulated and should incorporate suitable and meticulous methods (Cohen *et al.*, 2008). If qualitative research is completed rigorously it can provide a clear cut explanation of how social or psychological occurrence comes about and may even assist in the forecasting of social trends (Fallon *et al.*, 2006). Furthermore qualitative research has been found to be progressively more popular in health and medicine (Sbaraini *et al.*, 2011).

The post-positivistic paradigm takes a comprehensive, more subjective look at occurrences and attempts to comprehend these by way of descriptive investigations (McKelvey, 2002). Most post-positivists consider that people construct their own view of the world based on their perceptions (Trochim, 2006). Post-positivistic research therefore establishes new knowledge and is capable of sustaining social trends that might bring about change in the world (Fallon *et al.*, 2006).

Grounded theory, a research method created by Glaser and Strauss, can be defined as: “a qualitative research method that uses a systematic set of procedures to develop an inductively derived grounded theory about a phenomenon” (Strauss *et al.*, 1990). This process explores social progression and attempts to appreciate diversity of interactions (Heath *et al.*, 2004). It basically provides a theory which helps explain a specific area of interest (Glaser, 1998).

Grounded theory has branched out into various fields since its inception, the most significant of these being the “Straussian” (Strauss and Corbin) and “Glaserian” (Glaser) theories (Heath *et al.*, 2004). These theories deviate from one another in that the data analysis of Strauss and Corbin involves in-depth analytical techniques which require a series of coding methods, while Glaser’s analysis is more data dependent and continuous in the coding methods used (Heath *et al.*, 2004). With regard to theoretical outcome, the “Straussian” theory is fully descriptive, whereas Glaser’s theory ends up being more conceptual in nature (Fernandez, 2004). As a result of each theory’s inherent theoretical and methodological nature, a mixture of both techniques should be approached prudently (Heath *et al.*, 2004). This study mainly made use of Glaser’s approach and did so for the following reasons:

- It follows classical grounded theory more closely (Glaser, 1992).
- All data is important and should be used, therefore “all is data” (Glaser, 2001:145).
- Induction is his main process and he makes use of deduction and verification methods to support this process (Glaser, 1992).
- A method focusing on conceptualization offers a better point of view by focusing on a specific area of interest rather than being people specific (Fernandez, 2004).
- The analysis is less multifaceted and more rewarding (Heath *et al.*, 2004).

Two fundamental principles of grounded theory highlighted by Urquhart (2001) and interpreted by Fernández (2004) are as follows. Firstly the researcher has to reserve any theoretical ideas regarding the research. By placing aside

preconceived ideas, the researcher does not start with an initial theory to prove or disprove, but rather the ensuing analyses of data will confirm, refute or extend the validity of the theory (Fernández, 2004). Secondly, key concepts of the investigation are developed through constant data comparison (Urquhart, 2001). As the researcher is generating new theories when analyzing the data, constant comparative methods are essential to implement (Borgatti, 2008). This compels the researcher to recognize as many consistencies as inconsistencies in the devised categories (Hatch, 2002; Fernández, 2004; Borgatti, 2008).

The data is analyzed, coded, and compared, and emerging concepts are grouped into categories and subcategories (Borgatti, 2008). These concepts have to be confirmed by all data, which leads to categories being continuously adjusted through further comparative measures (Borgatti, 2008). Grounded theory is therefore the evolution of the theory that is confirmed with data along the way and is not the testing of the theory after the grounded theory is completed (Schreiber *et al.*, 2001).

As grounded theory is aimed at formulating probable explanations, it searches for budding patterns through close reading and re-reading of data throughout the analysis process (Borgatti, 2008). As the study generates saturated data, it may lead to further reviewing of categories and core concepts formed at earlier stages (Trochim, 2006). Grounded theory does not have a well differentiated point for ending a study and the project could carry on ad infinitum (Trochim, 2006). The outcome is therefore presented when a thorough explanation of the grounded theory is produced. Further investigation within this field will provide new data and the theory will be improved or amended accordingly (Allan, 2003).

3.3 Participants

Sampling prerequisites of participants had to supply the researcher with a broad view of animal chiropractic in South Africa. It was determined that six different groups of participants from various parts of the country (KwaZulu-Natal, Western

Cape and Transvaal) would contribute with their personal background and experience. Therefore a broader geographical representation was achieved, which ultimately could provide a more generalized and enhanced understanding of the profession in South Africa. The participants are represented as follow:

- 1 Allied Health Professions Council of South Africa (AHPCSA) representative

This participant was considered to be valuable for the study as he had professional knowledge of the present legislation with regard to the chiropractic profession in South Africa.

- 1 South Africa Veterinary Council (SAVC) representative

Similarly to the AHPCSA representative, this participant had served on the board of the SAVC for several years and was familiar with the legalities of the veterinary profession in South Africa. It could also be assumed that, in order for animal chiropractic to practice on animals, they would need approval from the regulatory body of animal healthcare in South Africa, the SAVC.

- 1 Chiropractic Association of South Africa (CASA) representative

This participant was approached because of her superior knowledge and experience in the chiropractic milieu, and it was thought, in particular, that she might contribute some insights to the constitution of the animal chiropractic field, as it appears to be disorganised at present.

- 3 Animal chiropractors

The views of qualified animal chiropractors were thought to be important. These participants had all received education in the animal chiropractic fields and their personal views might contribute comprehensively to the study.

- 3 Veterinarians

The individual views of veterinarians were thought to be important for the reason that they are the primary healthcare providers for animals in South Africa.

- 3 Owners of animals treated by animal chiropractic

The owners/trainers of the animals could be considered as important contributors, as they represent the client and will ultimately make the decision as to whether or not animal chiropractic will be used.

3.3.1 Inclusion criteria

In order to participate, the following inclusion criteria were required:

Inclusion criteria for all:

- English speaking, as the interviews will be conducted in English. (In spite of South Africa's 11 different official languages, the lingua franca is predominantly English).
- Read and sign the letter of information and consent (Appendix A).
- Agreed to be interviewed and recorded.

Allied Health Professions Council of South Africa representative:

- Qualified chiropractor.
- Registered with the AHPCSA.
- Member of the professional board of chiropractic and osteopathy.

South African Veterinary Council representative:

- On the executive members board of SAVC.
- Member of the SAVC for a minimum of 5 years.
- Hold a veterinary qualification or an equivalent.

Chiropractic Association of South Africa representative:

- On the executive members board of CASA.
- Registered with the AHPCSA as a chiropractor.
- Familiarity with current legislation regarding chiropractic in South Africa
- Qualified chiropractor.

Animal Chiropractors:

- Two animal chiropractors registered with AHPCSA, which have obtained post graduate certification from the IVCA and currently practising as animal chiropractors in South Africa.
- One animal chiropractor who has obtained some form of training in the designated field.
- Working in the field of animal chiropractic for a minimum of 3 years.
- Treats a variety of animals.

Veterinarians:

- Registered with the SAVC.

Owners of animals treated via animal chiropractic:

- Where animal has received 3 treatments or more.
- The owners should be familiar with animal chiropractic.
- Where different animals (horses, dogs and cats) have been treated.

3.3.2 Exclusion criteria for all participants

- If the participant had not read and signed the letter of information and consent (Appendix A).
- If the participant had not agreed to be interviewed and recorded.

This study required targeting individuals that were knowledgeable in their respective fields and therefore made use of purposeful sampling methods (Babbie *et al.*, 2001). Where prospective subjects or participants were difficult to locate, snowball sampling or chain referral sampling method was utilized (Castillo, 2009). Snowball sampling signifies a non-probability sampling procedure which is cost effective, simple and requires minimal amount of planning (Castillo, 2009).

During the initial recruitment stages one of the animal chiropractic participants declined to partake as a result of personal reasons. However, shortly afterwards the researcher became aware that a participant qualified in both veterinary and animal chiropractic fields was available to take part, and would, moreover, be in a position to contribute valuable knowledge to the study. In order to accommodate this participant, specific inclusion criteria for “animal chiropractors” had to undergo amendment.

It was also suggested by one of the participants that the title of this study, which at that time contained the term “veterinary chiropractic”, be changed. This was brought to the researcher’s attention as the expression “veterinary chiropractic” was not considered appropriate, as it implies that animal chiropractors are veterinarians and have veterinary involvement, which is not necessary the case. The term “animal chiropractic” was therefore used instead. As indicated in section 2.4.3, an education in the animal chiropractic field could be approached by either a qualified chiropractor or veterinarian, and also further specify details with regard to qualification.

3.4 Procedure and Interview Method

Interviews may be seen as being constructive as they further explore trends, particularly in cases where previous questionnaire studies have been done (McNamara, 1999). Once the study was approved by the Faculty of Health Science research ethics committee, the researcher approached selected people via e-mail to invite them to participate in the study. The e-mail contained a concise description of the study, and outlined what would be expected of those invited if they participated. Once they had agreed to take part, participants were forwarded a letter of information and informed consent (Appendix A) which provided them with additional information concerning the interview procedure. A suitable interview appointment was then scheduled. Participants who were unwilling or unable to take part in the study were requested to refer the researcher to a relevant colleague/friend. From the 12 participants, only 2 participants were referred and

were all considered of a comparable standard to those who referred them (i.e. who were initially approached).

In consistency with the inclusion criteria, interviews were conducted in English. The interview procedure took place in the various participants' personal surroundings (e.g. office environment). On the interview day, the same letter of information and informed consent (Appendix A) was presented to each participant, requiring their signature prior to commencing the interview. Questions relating to the current status of animal chiropractic in South Africa were discussed in 20 to 45 minute long face-to-face interviews. These interviews were digitally voice recorded while ensuring that participant's anonymity and confidentiality were kept at all times. The participants were also entitled to end the interview at any stage they saw fit, without resulting in any detriment to them in the future. Recordings and hard copies were kept secure in the possession of the researcher during the study. On completion of the study the recordings were safely stored in a locked away facility at Durban University of Technology. The storage period will run from hand-in to 5 years thereafter, when these recordings and hard copies will be disposed of by authorized personnel.

3.5 Data Analysis

Figure 3.1 illustrates the grounded theory process followed by the researcher and shows how the researcher worked in "zigzag" fashion from data, to analysis, to the emerging theory and vice versa (Creswell, 2007:64). Three main themes came to the researcher's attention from previous studies during the data collection procedure and were implemented through the "all is data" principle (Glaser, 2001:145). Similar themes were applied by Bar-Gil (2009) and Wise (2010) and viewed significant for chiropractic. The themes (role of animal chiropractic; inter-professional relations; and developmental issues) were thought of as "initial categories" that guided the data collection, but for the reason that they followed a critical realist methodology they had to be set aside as they were considered

predetermined concepts which might have influenced the theory's outcome (Urquhart, 2001).

| Emerging theory | Analysis | Data |
|--|--|-------------------------|
| | | (From previous studies) |
| | (Critical realist analysis) | |
| role of animal chiropractic; inter-professional relations; developmental issues | | |
| | Categories initially guide data collection | |
| | | data gathered |
| | NVIVO analysis and data coding | |
| Initial categories and key factors emerge (e.g. competence, acceptance and regulation). | | |
| | Emerging factors re- examined providing concepts | |
| | | data as re-examined |
| | NVIVO regroup | |
| Different categories, ordering, and hierarchy emerge. | | |

Figure 3.1 The grounded theory process followed

Data was gathered through semi-structured interviews and were transcribed into word documents. The transcripts were slightly amended (i.e. cleaned of irrelevant data) to assist the analysis process. After the transcripts had been amended theoretical memos (in the form of rough notes) were used in trying to conceptualise and to generate possible theories before, during and after the NVIVO analysis procedure, and played a key part in arriving at the eventual theory (Glaser, 1998). The data was analyzed using NVIVO 9 software (QSR, 2011). Organizing of data into initial categories and key factors was done by coding.

Next, further analysis and re-examining of emerging factors from the data occurred which provided concepts that linked categories and subcategories. Further regrouping of categories using NVIVO provided a different ordering and allowed for the final hierarchy of categories and subcategories to emerge. This process resulted in a tentative theory explaining the current status of animal chiropractic in South Africa.

When the final categories had emerged, similarities were noted with elements of Makhubu's (2011) model of service delivery in terms of the functions necessary for animal chiropractic to take place. Makhubu's (2011) model further helped to distinguish between functional and applied aspects of the modelling, i.e. the hypothetical requirements and the ways in which they might be fulfilled. Differences were however present and could be attributed to the different contexts and focus of Makhubu's model and the one developed here. Please see section 4.8 for an account of Makhubu's functional model.

3.6 Trustworthiness

In order to ascertain the validity of a particular sample, the trustworthiness must be considered (Babbie *et al.*, 2001). Decrop (1999) suggests that the trustworthiness of a qualitative research investigation can be established by implementing key criteria by means of triangulation. Triangulation in the research context entails the use of two or more methods to verify whether they generate the same result

(Tiainen *et al.*, 2006). Triangulation also ensures that objectivity is met by restricting personal as well as procedural bias, and eventually augment generalisability of the phenomenon concerned (Trochim, 2006).

Various types of triangulation methods have been considered in social research (Tiainen *et al.*, 2006). Some of these have been reviewed by Denzin (1978) and illustrated by Decrop (1999), and includes the use different data sources, different techniques of data gathering and analyses, different frameworks, and different researchers implementing similar tasks to deal with trustworthy concerns. This study made use of data and methodological triangulation as it involved the use of a variety of sources to investigate the problem at hand. Interviews presented the primary means of data, whereas secondary data from published material, journals, minutes from meetings, magazine articles, recordings and field notes were also used.

In order to achieve further reliability it was important to demonstrate consistency and unity while directing the research interviews into specific avenues concerned with participant's knowledge. Detailed theoretical memos in the form of rough notes were used to ensure the authenticity of the theory (Glaser, 1998). The research questions were mainly open ended, using rubrics such as: What are your views on that? What is your opinion? Is there anything you would like to add? Is there anything that I have not asked you and that you feel is important to consider? Is there anything that you would like to ask me?

As far as researcher bias is concerned, as mentioned in Chapter 1, the researcher is a student of chiropractic undertaking higher degree studies within the area of animal chiropractic, and therefore acknowledges that his views are in favour of the integration of animal chiropractic into mainstream veterinary healthcare. However, he attempted to approach participants with the expectation that there would be diverse perceptions on the integration process, and that the more divergent they were, the more likely it would be that he would develop a model which would

accommodate different perspectives, and thus be more useful in showing a way forward.

3.7 Conclusion

This chapter has provided an overview of the methodological framework that assisted the researcher to approach what is thought to be one of the first studies of its kind. The introduction of a post-positivistic paradigm, an inductive grounded theory technique with semi-structured purposefully sampled interviews, detailed coding and the dissecting analyses of data provided a theory which goes some way towards both explaining the current practice of animal chiropractic in South Africa and suggesting a viable developmental path. Trustworthiness of the study was established by the incorporation of triangulation methods and provision being made for researcher bias.

CHAPTER 4: RESULTS AND DISCUSSIONS

4.1 Introduction

This Chapter includes key findings and the researcher's explanation thereof. Firstly, participants' details and how they will be referred to throughout is considered. A brief introduction to findings is then presented to ensure a clear layout of the four main categories and the respective sub-categories which emerged. Data supporting these categories, in particular, resemblances and discrepancies from amongst the six groups were compared, discussed and conclusions drawn. Various excerpts are referred to throughout the chapter to indicate that the analysis was grounded in the data. An overview of the results is provided in the conclusion.

4.2 Participant Details

4.2.1 Terms used to refer to participants

The study is committed to keeping each participant's personal information undisclosed and therefore group names representing their various professions were allocated to each stakeholder in order to maintain anonymity. It must not be assumed, however, that the views of the various stakeholders represented the official position of the various professions (see SAVC1's disclaimer below).

Allied Health Professions Council of South Africa (AHPCSA1) representative:

- Qualified chiropractor.
- Registered with the AHPCSA.
- Member of the professional board of chiropractic and osteopathy.

South African Veterinary Council (SAVC1) representative:

- On the executive members board of SAVC.
- Member of the SAVC for a minimum of 5 years.

- Hold a veterinary qualification or an equivalent.

SAVC1 made it clear that she did not speak on behalf of SAVC but only provided comments of years being on the council, i.e. assisting with what has previously been discussed in council and the knowledge of the SAVC Act (SAVC1 [75]).

Chiropractic Association of South Africa (CASA1) representative:

- On the executive members board of CASA.
- Registered with the AHPCSA as a chiropractor.
- Familiarity with current legislation regarding chiropractic in South Africa
- Qualified chiropractor.

Animal Chiropractors (AC1; AC2; AC3):

- Two animal chiropractors registered with AHPCSA, which have obtained post graduate certification from the IVCA and currently practising as animal chiropractors in South Africa.
- One animal chiropractor who has obtained some form of training in the designated field.
- Working in the field of animal chiropractic for a minimum of 3 years.
- Treats a variety of animals.

AC1 is both a veterinarian and animal chiropractor.

Veterinarians (V1; V2; V3):

- Registered with the SAVC.

Owners of animals treated via animal chiropractic (O1; O2; O3):

- Where animal has received 3 treatments or more.
- The owners should be familiar with animal chiropractic.
- Where different animals (horses, dogs and cats) have been treated.

Throughout this chapter the participants will be cited according to their transcript paragraphs (see Appendix C), will be indicated by their abbreviated form, and will be followed by the corresponding paragraph number in brackets.

4.2.2 Participant's personal knowledge of animal chiropractic

AHPCSA1 (8); CASA1 (6); AC1 (7); AC2 (7); AC3 (7); and V1 (7) were found to have a good knowledge of animal chiropractic, whereas SAVC1 (7); V2 (7); V3 (7); O1 (7); O2 (7); and O3 (7) were found to have limited knowledge. The data suggests that the participants representing the veterinary community and public had less understanding of the animal chiropractic field.

With regard to animal chiropractic exposure, AHPCSA1 (14) and V3 (11) had collaborated with chiropractic students through research, as well as providing guidelines to professionals interested to practice within the field; SAVC1 (15) had had limited exposure to the profession, with some interaction within clinical practice and a good knowledge of the veterinary Act; CASA1 (9) had personally treated dogs in private practice with no formal training, and had a good legislative knowledge in terms of animal chiropractic and current trends in the field; all three animal chiropractors AC1 (7); AC2 (7) and AC3 (7) had done post graduate animal chiropractic training abroad; V1 (7) had exposure in private practice and was associated with several animal chiropractic colleagues practising both nationally and internationally; V2 (11) had had limited exposure in the field; O1 (11) was a horse owner, ran a livery yard and had had exposure to animal chiropractic through her horses having received treatment; O2 (11) had had limited exposure to the field in that he had conversed with an animal chiropractor before, as well as having treatment done on his dog; O3 (11) ran a stable yard with race horses and utilized animal chiropractic for equine performance injuries.

4.3 Principal Categories and Sub-Categories Emerging from the Analysis

As mentioned in Chapter 3, the grounded theory methodology moved between the data and the theory which developed from analysis of the data (see Figure 3.1). The research started with the initial categories which were provided as data from other studies (Bar-Gil, 2009; Wise, 2010). However, as the data analysis progressed, it became apparent that, for a social service such as animal chiropractic to become accepted by and integrated with mainstream animal healthcare, there were certain prerequisites which had to be considered which did not fall neatly under the original categories. In this case, they pointed to key areas in the acceptance of animal chiropractic into mainstream animal healthcare and its eventual integration with it.

The framework for the emergence of the unfolding themes was provided by the initial categories derived from Bar-Gil (2009) and Wise (2010), namely: The role of animal chiropractic in South Africa; inter-professional relations among animal chiropractors and veterinarians; and developmental issues facing animal chiropractic's integration into the veterinary health care setting. Thereafter the initial categories were reduced in hierarchical level and became sub-categories to make way for new overarching categories. The four main new categories with their sub-categories are represented as follow: Competence (Education; Practice); Acceptance (Need; Role; Collaboration); Regulation (Professional Body; Legislation; Guidelines/Scope of Practice); and Resources (People; Amenities; Time).

| | | | | |
|-----------------------------|--|---|--|---|
| Grounded Theory Methodology | In order for the animal chiropractic profession to become integrated with mainstream animal healthcare, it became clear that the following prerequisites had to apply: | | | |
| Main Categories | <i>Competence</i> | <i>Acceptance</i> | <i>Regulation</i> | <i>Resources</i> |
| Sub-Categories | <ul style="list-style-type: none"> • Education • Practice | <ul style="list-style-type: none"> • Need • Role • Collaboration | <ul style="list-style-type: none"> • Professional Body • Legislation • Guidelines | <ul style="list-style-type: none"> • People • Amenities • Time |

Table 4.1 Categories emerging from the grounded theory methodology

The categories are interlinked and, in places, run into each other; in some cases they can be seen to be interdependent (for example, acceptance depends on competence, and to some extent, regulation).

The issue is that, as shown in Table 4.1, analysis of the data suggested that there were prerequisites which needed to be fulfilled before the animal chiropractic profession could become integrated with mainstream animal healthcare, as follows:

- A certain level of competence (which could be achieved through education and practice);
- Acceptance by the public and mainstream practitioners (this could be seen to require the need for such a service to be motivated, the role of animal chiropractic to be clearly defined, and collaboration with mainstream professionals);
- Regulation of the profession (by means of a professional body, legislation which dictates operating parameters, and guidelines for practice);
- Resources (in terms of staffing, amenities, and sufficient time available for the integration process).

In the next sections, evidence will be provided from the data to support the identification of the categories and subcategories in Table 4.1 as key prerequisites

for the integration of the animal chiropractic profession with mainstream animal healthcare.

4.4 Competence

Animal chiropractic education and practice were important considerations consistent with supporting competence, and will be introduced below. It can be seen that a lack of animal chiropractic education and practice may contribute to a perception of incompetence in the animal chiropractic sector. The data suggests it is essential for chiropractors to complete a recognized programme abroad in order to practice efficiently and legally in South Africa. Although this may be somewhat of an undertaking, in the long run it may prove useful as establishing competence, and, in this regard, may ground the profession more firmly within animal healthcare.

4.4.1 Education

The animal chiropractic profession in South Africa is presently facing some difficulty regarding education. There are people treating animals without any prescribed training or qualification (AHPCSA1 [18]). This may be attributed to a lack of formal education in the country and that post graduate training can be obtained only abroad (CASA [17]). Often, this lack of education may result in various people reporting that animal chiropractic treatment is ineffective (AC2 [89]; O1 [69]). AC2 (89) pointed out that this is not due to animal chiropractic being ineffective, but as a result of ill-equipped and unqualified animal chiropractors not doing their job properly. Therefore animal chiropractic education plays a role in establishing whether practitioners are competent enough to treat animals.

4.4.1.1 Importance of an animal chiropractic education

The importance of an animal chiropractic education is a key issue, and was observed similarly by the majority of participants. Without such an education, chiropractors trained in human healthcare would not necessarily be proficient, and

would merely be applying human chiropractic principles when treating animals, which would not suffice (AHPCSA1 [66]). CASA1 (20) stressed that both education and practical experience was important. Animal chiropractors generally supported pursuing official qualification and affiliation, although it might prove to be time consuming and expensive (AC1 [7]; AC2 [31]; AC3 [27]). SAVC1 (23); V1 (23); and V3 (27) indicated that veterinarians are the only practitioners allowed to treat animals legally, with V3 (27) stressing that post graduate qualification is the bare minimal requirement for a chiropractor to practice. V1 (23) thought that even after schooling animal chiropractors would still have limited knowledge of animal healthcare. All animal owners were pro-education (O1 [41]; O2 [95]; O3 [77]). O1 (73) also indicated that she would not let a veterinarian who is an unqualified animal chiropractor treat her horse for chiropractic indicated conditions.

4.4.1.2 Animal chiropractic education abroad

A variety of introductory and extended animal chiropractic courses are available abroad but can be undertaken only if one is veterinary- or chiropractic-qualified (AHPCSA1 [24]; CASA1 [17]; AC2 [31]). The shorter courses (see section 2.3.4) were found to be “*too short*”, whereas more extended courses were viewed as more “*in depth*” (AHPCSA1; [24]; CASA [18]; AC1 [87]; O1 [33]). The animal chiropractic group suggested that the shorter courses were not sufficiently educational (chiropractors are lacking in knowledge on animal biology and the related manipulations which will be effective specifically for animals, and conversely, veterinarians have less of an understanding of manipulation techniques); this group recommended that IVCA-affiliated programmes should be pursued (AC1 [11]; AC2 [31]; AC3 [31]). According to AC2 (27), education for animal chiropractic should be completed only at 3 specific schools abroad, and include the following: one school in Germany (IAVC, 2011) and two in the USA (OFA, 2011), with a brother school in England being mentioned. These schools were reported to be well integrated and strict, focusing on diagnostics and having equal numbers of veterinary- and chiropractic-qualified students (AC2 [27]). V1 (79); V3 (23); and O1 (33) were aware of such courses being offered abroad. V3

(23) was also aware of a course in Australia and O1 (33) knew of a less popular course offered in New Zealand. O2 (83) was unaware that animal chiropractic courses were available only abroad.

4.4.1.3 Education and legislation

It was thought that the SAVC and other regulatory bodies would consider the level of animal chiropractic education when they established legislative parameters (AHPCSA1 [24]; V3 [57]). This would clarify what level of education animal chiropractors might require to be able to practice in South Africa. A higher level of animal education would be warranted in order for chiropractors to be recognized, and completing various short courses was not seen as an option for the reason that the short courses were seen to be lacking in depth (AC2 [87]).

4.4.1.4 Elements to consider regarding future education in South Africa

AHPCSA1 (98) suggested that the chiropractic programme of University of Johannesburg (UJ) and the veterinary programme of Onderstepoort, University of Pretoria (UP) might provide a foundation for educational collaboration between the two professions. AC3 (81) also supported the idea of educational collaboration between the two professions. The veterinary profession could teach subjects such as anatomy, physiology, diagnostics and animal biomechanics, whereas chiropractic could give instruction on practical skills and techniques (AHPCSA1 [98]). SAVC1 (85) suggested that veterinary input and approval from the SAVC would be essential to establish such an education, whereas V3 (72) felt that the SAVC needed to approach regulatory bodies abroad to determine a suitable curriculum for the profession. Both the chiropractic and veterinary groups considered basic animal sciences such as anatomy and physiology important (AHPCSA1 [66]; CASA1 [17]; AC1 [27]; V1 [23]; V2 [87]).

SAVC1 (83) commented that the veterinary programme is comprehensive, whereas the animal chiropractic programme has a “*specified methodology*” and should be seen as a sub-section of the veterinary science. CASA1 (18) felt that

the programme should have a broad based education with specializations for various professional fields. This would accommodate other professions also interested in treating animals. Animal chiropractors thought that an IVCA approved curriculum was essential (AC1 [11]; AC2 [31]; AC3 [31]). The majority of animal owners supported the amalgamation of the education of the two professions. O1 (41) stressed the veterinary profession's educational significance, whereas O2 (111) thought the focus should be on chiropractic's practical aspect. O3 (79) suggested input from a combination of laymen, trained laymen and veterinarians to decide on such matters.

Such a course would need to be registered with the department of higher education and should be university governed to instil credibility (AHPCSA1 [98]; CASA1 [52]). CASA1 (52) suggested that the course should enrol at a neutral university which has no affiliation with chiropractic or veterinary science, whereas V2 (67) thought the SAVC should appoint such an institute. AC1 (87) felt that an independent school structure similar to that used abroad might work just as well. A need for animal chiropractic education in South Africa was expressed (AHPCSA1 [24]). However, the number of people interested in practising animal chiropractic and the lack of teachers available do not justify this need at present (AHPCSA1 [109]; AC1 [87]; AC2 [75]; V1 [79]; O3 [77]). AC2 (75) and V1 (79) therefore suggested that it is each individual's responsibility to seek education abroad until offered locally.

4.4.1.5 Conclusions about the need for education

All the groups, especially animal chiropractors and veterinarians, indicated that education was pertinent in order to treat animals effectively. This is in accordance with Taverner (2011). Uneducated human chiropractors contribute to incompetence by treating animals ineffectively, which in turn generates false perceptions of the profession. Being unqualified was mostly attributed to no formal education being available in the country which in turn was as a result of sparse

interest in the field, and required interested parties to seek training abroad, which might be expensive and time consuming.

Animal chiropractic was once in its initial stages of development in the USA and had no accredited educational programme, as is the case in South Africa at present (Willoughby, 2002). The first educational course was established through the amalgamation of both veterinary and chiropractic principles, and was available to both chiropractors and veterinarians (Willoughby, 2002). As the profession developed, it received a fair amount of scrutiny from the veterinary field and has evolved from a 100 hour to a 210 hour syllabus (Willoughby, 2002; IVCA, 2011). It is also vital to consider the issue of credibility linked to education, as well as the length of time required in order for the field to be accepted. This has been a major factor in the human chiropractic field, with much resistance from competing health disciplines (AHPCSA1 [70]). It appears vital for the animal chiropractic profession to establish a suitable educational curriculum in order to assist with legislative as well as developmental proceedings.

Suggested future educational considerations for animal chiropractic in South Africa include: the incorporation of basic animal sciences; amalgamation of chiropractic and veterinary education (veterinarians teaching animal sciences while chiropractors teach applied practical skills); input from a variety of educated and experienced animal chiropractors and veterinary practitioners, as well as animal trainers and owners; a suitable curriculum would be required to further legislation for this profession (the extended IVCA endorsed a curriculum that provides an in depth knowledge of animals). Such a course would have to be registered with the department of higher education, be university regulated, and should be available to both professions. Most of these views are presently included within IVCA parameters (IVCA, 2011).

4.4.2 Practice

Alongside education, it was found that practical experience could arguably contribute to competence. The following data was found to be specific to the way animal chiropractors practice today.

4.4.2.1 Animal chiropractic experience

There are presently two senior unqualified animal chiropractors with year's of experience and three younger qualified animal chiropractors in practice (CASA1 [19]). CASA1 (22) suggested that the qualified animal chiropractors might have less experience than those that have been in the field for many years and that education might not have given them sufficient clinical exposure. More experience in practical skills development is therefore essential in educational programmes (CASA1 [24]). This paralleled the views of AC2 (65) and O2 (111), whereas AHPCSA1 (42); AC1 (23); AC3 (31); V1 (31); V3 (27); and O1 (73) differed by attributing lack of experience to no animal chiropractic education. O3 (23; 19) recommended that some form of riding lessons, to improve post-treatment assessment of horses, should be included in their education syllabus. O2 (11) thought that animal chiropractors were experienced enough to treat animals and O3 (27) indicated that each animal chiropractor's experience is proportional to the amount exposure they have had. SAVC1 (35) was not able to comment and V2 (7) attributed his lack of knowledge to the fact that no animal chiropractors were practising in his area.

4.4.2.2 Incompetence in practice

The following represents the perceptions of veterinarians regarding incompetence of animal chiropractors:

a) "I have seen a lot of horses that are just lame horses that have been seen by their chiropractors 150 000 times and basically they have been treating just a lame horse, what is not suppose to happen..." (AC1 [19]).

b) *"He [animal chiropractor] also has been in a little bit of trouble with the Vet Council, because he really is not working under supervision of a vet..."* (AC1 [47]).

c) *"...a dog that had a disease called **granulomatous meningoencephalitis** which is inflammation of the spinal meninges and so the owner took her to a human trained chiropractor for manipulation, which really was not indicated and actually made it worse."* (V3 [35]).

d) *We have had dogs that you know apparently have had back pain and have been treated by the chiropractor but actually they can't get on it because they had a blocked bladder or something."* (V3 [37])

The above mentioned examples, as well as cases where prolapsed discs were present *"...be they thoracolumbar ones, or cervical ones..."* stressed the importance of an initial veterinary visit (V1 [39]). It was emphasised that the veterinarian needs to see the animal first and then decide whether or not the animal chiropractor can treat the condition (V3 [35]; V1 [31]). This data, especially 4.4.2.2 a), correlates with that suggested by Jones (2004) and raises uncertainty within the veterinary community regarding CAVM therapies.

4.4.2.3 Grey areas in practice

These grey areas contribute to an uncertainty of animal chiropractic practice in South Africa and require further exploration in order to promote consistency and for animal chiropractic to better define itself as a profession.

a) Diagnosis

If animal chiropractors diagnose incorrectly, they might end up hurting the animal. This is an essential consideration as it could justify the cases seen in 4.4.2.2. This extract from O3 explains why:

"...your intention is healing, but you might very well in that healing hurt a horse or aggravate the situation, or so called, diagnose it incorrectly. How to diagnose? ...even while you are working under diagnosis from the vet you are diagnosing something. So diagnosis is a grey area in my book...it is just too open." (O3 [73])

b) Lameness

Lameness appeared to be another undefined problem, as it was seen to contribute to animal chiropractic misconduct as shown in 4.4.2.2a). AC2 suggests that:

“...majority of lameness in horses is distal end lameness...from all the lameness probably 1 percent is something that you can actually address with chiropractic...” (AC2 [39])

c) Manipulation

The following demonstrates why manipulation was found to be open-ended and could add to confusion of the animal chiropractic profession:

“...manipulation is not only the domain of chiropractors...you can’t title protect manipulation, because that is a technique it is not a profession.” (CASA [43])

“...because they are doing manipulation on horses people think it is chiropractic and that is also a grey area...” (AHPCSA1 [34])

4.4.2.4 Conclusions about the need for practice

Lack of experience in practice could mostly be attributed to no animal chiropractic education. However, uneducated animal chiropractors who have achieved knowledge through years of experience should not be overlooked, as animal chiropractic, as with human chiropractic, requires motor development that comes with time and practice. Instances of animal chiropractic incompetence were stressed by the veterinary community, and it was concluded that an initial veterinary screening is necessary in order to exclude certain conditions that might be overlooked by animal chiropractors. Grey areas such as diagnosis, lameness and manipulation were seen to contribute to vagueness within animal chiropractic and needed to be clarified.

4.5 Acceptance

Acceptance by the public and mainstream practitioners presents another cornerstone supporting animal chiropractic’s possible integration into the animal healthcare of South Africa. This section looks into whether there is a need for such

a service at present. It will also attempt to obtain clarity with regard to the role of the profession and will investigate collaborative trends with mainstream professionals. The results suggest that acceptance by the public and mainstream practitioners are vital to support animal chiropractic's possible integration into animal healthcare setting of South Africa. This study found that a need for animal chiropractic profession exists, in particular, with regard to addressing neuromusculoskeletal difficulties experienced by animals. Advancing interprofessional collaboration is essential to achieve continual acceptance from the veterinary community, and various ways to achieve this need to be addressed. Animal chiropractic needs to closely associate itself with the veterinary community, as isolation may be detrimental to future development of the profession.

4.5.1 Need for the service

The present need for animal chiropractic services was considered, and indicated the level of interest of particular stakeholders. The data gave some indication as to whether there is such a need, which is discussed below:

4.5.1.1 The need for a social service such as animal chiropractic

The following views demonstrate the novelty of animal chiropractic in South Africa: The animal chiropractic profession is *"small and in its infancy"* (V3 [19]); a *"perceived need"* for the profession exists (AHPCSA1 [70]); there *"aren't more than a hand full that formally treats animals"* (CASA1 [20]); *"at the moment there is very, very little regard for animal chiropractic"* (AC2 [23]); and animal chiropractic *"is not fully understood by the public just yet"* (O1 [97]).

On the contrary, the following suggests the need for such a profession: *"...there is definitely a need for it, for good, good animal chiropractors"* (AC1 [95]); *"huge need for it because it is an evolving trait and people are becoming more holistic in everything"* (AC2 [83]); *"It most definitely have a role to play in South Africa"* (AC3 [23]); *"I would like it to become an integral part of treatment...to have the option of*

referring” (V1 [91]); “*definitely a need for it, without a doubt.*” (O2 [23]); and “*...a lot of students...interested and motivated...*” (AC3 [85]).

The preponderance of participants felt that there is a place for this profession within the animal healthcare setting of South Africa. All the participants (n=12) were in support of having their animals treated by means of animal chiropractic (AHPCSA1 [18]; SAVC1 [19]; CASA1 [13]; AC1 [13]; AC2 [19]; AC3 [15]; V1 [15]; V2 [15]; V3 [15]; O1 [19]; O2 [19]; and O3 [15]). The majority, however, felt that this should only happen if the animal chiropractor was “*properly qualified and knew what they were doing*” (AC1 [23]). Furthermore, veterinarians, similar to general practitioners (GP) tend to not focus on musculoskeletal conditions which supplies the animal chiropractic profession with a potential “*ambit*” to expand within the animal healthcare field (CASA1 [13]). AC1 (99) indicated that animal chiropractic makes up a big part of her daily practice which is mostly equine based, and is definitely worth pursuing (AC1 [99]). This may inspire veterinarians specializing within the equine field to become more interested in alternative approaches such as animal chiropractic. O1 (97) pointed out that, if something was the matter with her animals, getting in a chiropractor would be one of the first things she would consider.

4.5.1.2 Conclusions about the importance of a need for the service

Animal chiropractic can provide the veterinary community with a supplementary approach to musculoskeletal difficulties, an area not frequently focused on by veterinarians. Although animal chiropractic in South Africa appears to be in its infancy, a definite need for and interest in this profession was expressed by the majority of participants. It was interesting to note that all stakeholders would consider treating their animals by means of animal chiropractic, which suggests some form of confidence in this profession already exists.

4.5.2 Role played by animal chiropractic

In order to better identify with what it is that animal chiropractors do, the role of the profession needs to be considered.

4.5.2.1 Current perceived role of animal chiropractic

Animal chiropractors primarily address neuromusculoskeletal conditions presenting in animals (AHPCSA1 [30]); and have an advanced level of mechanical knowledge to do so (CASA1 [15]). SAVC1 (23); AC3 (19); V1 (19); V2 (19); and V3 (15) agreed that animal chiropractic provides the public and veterinary community with another musculoskeletal treatment option where conventional veterinary treatment may not have been successful before, or where the veterinary scope appeared to be limited to some extent. Animal owners thought that animal chiropractic treatment benefited musculoskeletal conditions in their animals, and indicated that this treatment is part of animal chiropractic's role (O1 [25]; O2 [23]; O3 [11]). However, even though the application of extrapolated human chiropractic principles and theories form the foundation of this profession, applying them independently is not an option, as anatomical and biomechanical differences are apparent and should be considered (AHPCSA1 [66]). It was noted that the majority of post graduate animal chiropractic educational institutions supported chiropractic as much as veterinary input in their education (IAVC, 2011; OFA, 2011; IVCA, 2011). It was also noted that animal chiropractic does not always alleviate certain conditions and that alternating between animal chiropractic and physiotherapy is beneficial (O3 [33]).

4.5.2.2 Conditions treated by animal chiropractic

The following conditions were found to be indicated and contra-indicated in animal chiropractic treatment.

a) Indicated conditions

- *neuromusculoskeletal conditions* (AHPCSA1 [30]);
- *orthopaedic conditions* (V3 [31]);
- *back* (AC1 [35]) *or spinal problems* (SAVC1 [39]) such as:
 - *cervical* (AC2 [35]);
 - *thoracolumbar* (AC1 [15]);

- *sacroiliac* (O3 [33]);
- *pelvis rotation* (AC1 [35]);
- *hip dysplasia* (V3 [31]); *dropping hips* (O3 [33]);
- *tail* (AC2 [35]);
- *elbows* (V3 [31]);
- *nerve entrapment* (SAVC1 [39]);
- *disc injuries* (AC2 [35]);
- *facet joint dysfunction* (AC2 [35]);
- *lameness* (AC2 [35]);
- *degenerative changes* (AC2 [35]);
- *biomechanical aberrations* (gait) (CASA1 [26]);
- *marginal muscle wastage* (O3 [33]); *muscle spasm* (O3 [33]);
- *saddle fit issues* (AC1 [35]);
- *performance based injuries* (AC2 [35]);
- *prior to any surgery or invasive techniques* (V3 [15]); and
- *chronically recurring injuries* (V3 [15])

AC3 (15) indicated that animal chiropractic plays a vital role in the optimizing of animal health; O1 (19) found the implementation of maintenance care beneficial to her animals. It is also worth mentioning that a primary tool when assessing animals for injuries was body language (gait) analysis (AC2 [51]).

b) Contra-indicated conditions

Participants suggested that non-neuromusculoskeletal conditions fell outside the scope of the animal chiropractic profession (CASA1 [28]).

- *visceral or organic related conditions (tumours)* (AC3 [39]);
- *prolapsed disc* (V1 [39]);
- *fractures* (AC3 [39]); and
- *majority of lameness.* (AC1 [39])

According to AHPCSA1 (50) and CASA1 (28) not enough evidence validates animal chiropractic treatment of visceral conditions. It was also mentioned that animal visceral conditions present far differently from those of humans. This exemplifies such a case:

“If a horse starts to get colic you can’t just treat them and hope that they are going to get better, because they could die within twenty four hours.”
(AHPCSA1 [50])

4.5.2.3 Animal species treated

Types of animal species typically treated were equine, canine and feline. The bulk of participants showed knowledge of the equine field and, according to O1 (97) and V1 (87), this has received more exposure within animal chiropractic. AC1 (15) said that the bulk of her practice involved the treatment of horses but seldom dogs. AC2 (87) indicated that she specialized in stud and racing horses. V2 (19) thought that animal chiropractic mostly benefited horses and dogs. It was mentioned that small animal (canine and feline) treatment is not popular and can be attributed to them presenting more commonly with organic related conditions (AC1 [39]). It was suggested that an immature public perception regarding animal chiropractic contributed to this lack of popularity (O1 [97]).

a) Equine

Animal chiropractic treatment was found beneficial in the treatment of equine patients as it was thought to improve their performance (O1 [25]). Horses present mostly with performance based injuries which includes *“anything from lameness...facets to sacroiliacs.”* (AC2 [35]). Sore backs and spinal issues from riding or jumping are usually saddle-related and may be caused by *“...not bending the one rein versus the other rein, disuniting in a canter.”* (AC1 [35]); trauma and overuse in endurance horses as well as degenerative conditions in older horses were found to be prevalent (AC2 [35]). It was agreed that horses are subjected to a lot of abnormal gaits and strenuous physical exercise in their specific environment (O1 [19]; O3 [33]).

b) Canine

Animal chiropractic therapy in dogs was used less often. Dogs usually present with “lots of lameness, lots of degeneration, arthritic changes, disc injuries, cervical facet syndromes.” (AC2 [35]). These are usually “orthopaedic” problems such as “hip dysplasia, elbow problems, neck problems, muscle spasm” that may repeat themselves (V3 [31]). Some of these may progress to “completely hopeless cases” (AC1 [15]). This case-specific finding of animal chiropractic’s effectiveness in dogs was thought to be significant:

*“...my dog was injured and I phoned him [animal chiropractor] up and he said I should bring him straight away and **he saved my dog’s life**. He was completely disabled. He couldn’t move his back legs, couldn’t move his tail, he couldn’t move his toes...”* (O2 [31]).

c) Feline

Treatment of cats by animal chiropractic was found to be the least popular. In many instances cats present with organic or visceral related conditions such as cancer (AC2 [35]). Animal chiropractic intervention, as mentioned before, does not intend to treat such conditions, but was found to be useful in cases where problems associated with the cat’s tail presented (AC2 [35]).

4.5.2.4 Conclusions about the role played by animal chiropractic

In order for animal chiropractic to better recognize their present role it is vital for the profession to establish a specified representation or a model of the profession. An array of neuromusculoskeletal conditions seems to be addressed by animal chiropractic. However, no evidence at present supports the treatment of organic or visceral related conditions experienced by animals.

The majority of indicated conditions were found to correlate with those specified by the OFA (2011); IAVC (2011); and IVCA (2011). It was interesting to note that certain conditions such as disc injuries and lameness were factors which contributed to some veterinarians’ perception of animal chiropractic incompetency

in practice (Section 4.4.2.2). Lameness, particularly, presented in both indicated and contra-indicated segments, and might cause confusion when dealt with. As a result, uncertainty regarding what conditions animal chiropractic can and cannot treat exists, and needs to be thoroughly investigated. If not considered, it could potentially lead to the formation of ill-perceptions and prove detrimental in future development of the profession. From the literature it was found that animal chiropractors address mainly VSC (IVCA, 2011). This expression was not mentioned in the data, but the study suggests that it may play a valuable role when defining the primary premise of animal chiropractic treatment, and should be considered more closely.

According to the data and literature, the equine field appeared to be well recognized in the animal chiropractic world, predominating over less popular canine and the least popular feline fields. The majority of animal chiropractic research has also been done within the equine field, for example, by Boldt (2002); Haussler *et al.* (1999), (2000), (2007) (2009a) and (2010); Sullivan *et al.* (2008); Gomez-Álvarez *et al.* (2008); Loots (2008); and Linden (2008). This might be attributed to the competitive nature of equine sports, as a result of which horses and may present more frequently with performance based injuries.

4.5.3 Collaboration between animal chiropractors and veterinarians

The following represents current collaborative tendencies between animal chiropractors and veterinarians as viewed by participants.

4.5.3.1 Current collaborative trends

Some chiropractors worked closely with veterinarians, which meant a higher level of collaboration (AHPCSA1 [62]). SAVC (51) was not aware of any interprofessional relationships, and CASA1 (30) thought that any relationship is currently informal and abides by SAVC law.

From a veterinary point of view, AC1 (47) suggested that interprofessional relationships are dependent on the individual person. With some, collaboration is very good: “...if he [animal chiropractor] *thinks he is working with a lame horse, or he has seen a horse for a couple of times and he just doesn’t get anywhere he calls me up and we have a look at the horse together.*” (AC1 [47]); whereas with others, it is not so good: “...he [animal chiropractor] *really is not working under supervision of a vet at all and with him there is absolutely no feedback whatsoever.*” (AC1 [47]). V1 (55) and V3 (45) thought that collaboration was poor, while V2 (39) did not have any knowledge thereof. V3 (45) felt that collaboration with the recently qualified chiropractors had improved since the veterinary community addressed one of the chiropractic institutes regarding unqualified animal chiropractors treating animals without liaising with veterinarians (V3 [45]).

The data suggest that some veterinarians are more conventional and not interested in animal chiropractic; others show interest and become more interested once they see the positive results; and others are holistic-based practitioners who are interested (AC2 [47]; AC3 [47]; O2 [51]). O1 (61) suggested that collaboration was good; O2 (51) showed that some veterinarians might be unaware of animal chiropractic; and O3 (43) noted that in his yard animal chiropractors and veterinarians worked “*hand in hand*”. O3 (51) stressed the importance of professional collaboration in the treatment of conditions such as lameness.

4.5.3.2 Interprofessional communication

One participant stated that animal chiropractors and veterinarians communicate closely (AC1 [43]). AC2 (23) made the point that, veterinarians, as with GP’s, will not refer to just anyone, but rather a specific person whom they know or liaised with before. According to AC2 (47), it took a very long time to build a practice and gain the respect of certain veterinarians. If an animal chiropractor had been able to set up good relations with veterinarians then some might consent to treatment and refer occasionally (AC3 [47]). O1 (69) suggested that veterinarians are more

comfortable with chiropractors who contact veterinarians and discuss the case together.

Poor collaboration might be as a result of the animal chiropractic profession being nervous about communicating with veterinarians (V1 [55]). According to V1 (63), the veterinary profession still perceives animal chiropractic to be *“this violent treatment that is going to cause a lot of harm and that they must not touch certain conditions”*. This is a significant comment, as veterinarians are the primary healthcare providers for animals in South Africa, and having such a misconception of the animal chiropractic profession may inhibit referral. V3 (53) indicated that human trained chiropractors were not willing to communicate with veterinarians either through *“arrogance or ignorance”*.

O3 (51) suggested that there was a *“trans referral”* process between his veterinarians and alternative practitioners; and stressed the fact that they *“have”* to work together. The following passage explains this collaboration:

“...if I put them into a situation together, I would say to the physiotherapist to look for some hot spots on the quarters and then get the vet to inject them. Well, visa versa, then the vet might say I think you are right, the horse has got a sore back, let's say get the physiotherapist to get some hot spots and that...” (O3 [51]).

4.5.3.3 Poor interprofessional relationships

An important incident worth considering was that of O2's (31) dog getting injured and the veterinarian not suggesting any other alternative therapy prior to invasive surgery or *“putting the animal down”*.

“...my dog was...completely disabled...and the vet said that you can operate which is about 10 grand, or put him down...” (O2 [31]). *“...the vet really gave my dog no chance, no chance’, and when I took him [dog] back in again, he [veterinarian] was not that interested really. He was whatever-kind of thing.”* (O2 [63]).

O2 (51) preferred that the veterinarian should have suggested other treatment options for his dog. It could be reasoned that veterinarians who have no knowledge of animal chiropractic or may be unaware to what conditions they address may present the animal owner with limited options as to animal treatment. Seeing that O2's (31) dog responded favourably to animal chiropractic treatment, it might prove useful for animal chiropractors to assist veterinarians to promote animal health in related cases. Further poor interprofessional relationships can be attributed to:

a) Lack of knowledge about and exposure to the animal chiropractic profession

AC3 (61) recommended that the biggest problem contributing to poor interprofessional collaboration was lack of knowledge from the veterinarians, not knowing what animal chiropractic is and what it can do for the animals. The majority of ill-feelings from the veterinary group could be attributed to a lack of knowledge of the animal chiropractic profession (CASA [34]). The perception of encroachment on their professional scope is greater, and they dread that more is going to be taken away from them than what they might perceive (CASA [34]). This passage explains why:

“...their perception may be that there are more animal chiropractors than what there really are if they knew that there were less than ten in the country they would be less resistant towards it.” (CASA [35]).

AC1 (63) on the contrary suggested there was good exposure, especially at the bigger conferences where there was always a topic on alternative therapies such as acupuncture or chiropractic. Because of their mindset, certain veterinarians often don't attend these conferences and therefore have less knowledge about the chiropractic profession (AC1 [63]).

b) The mindset of professionals

AC2 (55) indicated that some veterinarians believe that *“the only way is the allopathic way”*. It is only after good exposure to alternative therapies like animal

chiropractic that they start to change their mindset (AC2 [55]). O3 (51) suggested that the veterinarians he worked with were “*open-minded*” enough to work with other groups of professionals.

(i) Old generation practitioners

Older chiropractors tend to work more in isolation because that was how the profession had developed (CASA1 [39]). V3 (45) confirmed this by noting that senior chiropractors treating animals were not necessarily going to change. AC1 (63) thought that many of the older generation veterinarians did not know anything about chiropractic and was partly due to their mindset not being open to alternative therapies. Some senior veterinary colleagues showed “*doubt and scepticism*” regarding animal chiropractic, and doubt that it actually has a place at all (V3 [53]). This might be on account of ignorance and some might be very negative and not refer their patients for chiropractic treatment (V3 [53]).

(ii) New generation practitioners

The younger practitioner seemed to be more in contact with or more familiar with the processes which may enable this relationship (CASA1 [34]). According to AC1 (91) younger veterinarians were more open-minded for alternative therapy; and will very much be open to referring to animal chiropractic (V3 [53]).

c) *Intrusion into veterinary domain*

Veterinarians perceived animal chiropractors much like physiotherapists, to be intruding on their domain and therefore creating interprofessional “*animosity*” (CASA1 [34]). This was also the case with SAVC1 (101) indicating that “...*people feel very threatened when somebody from outside says that they want to do this.*” and O3 (69) thought that some veterinarians considered para-veterinary groups as a “*threat to their business*”. Chiropractors not abiding by veterinary law and treating animals without veterinarians knowing exacerbated this situation (CASA1 [34]). O1 (69) also indicated that this animosity might be attributed to animal

chiropractors “*stealing business*” from veterinarians, making reference to one animal chiropractor who did not work with veterinarians and “*costs an absolute fortune*” (O1 [57]; V2 [47]).

d) Being uneducated

AC2 (23) indicated that there had been too many cases of “*unqualified people*”, “*mistakes*” and too many “*problems*” in the animal chiropractic world which might have contributed to some form of bitterness and the clouding of veterinarian’s referral judgment. AHPCSA1 (70) suggested that the lack of formal training of animal chiropractors contributed to poor interprofessional collaboration. Uneducated animal chiropractors were not speaking the same “*language*” when it came to discussing musculoskeletal events with veterinarians. O1 (69) suggested that animal chiropractors who did not have any veterinary experience affected interprofessional relationships negatively, a case in point being:

“*...an independent chiropractor that goes around and hammers the horse around and the horse does not really get better, the vets get a bit offended by that.*” (O1 [69]).

e) Legislation

AC2 (55) noted that a lack of legislation contributed to poor collaboration.

4.5.3.4 The role of joint research in collaboration

Research within the animal chiropractic field could allow for further collaboration between the two professions (SAVC1 [101]). AHPCSA1 (14) and V3 (11) indicated that they had done some form of collaborative research with students at university level. More research within the animal chiropractic field would validate or disprove animal treatments, making animal chiropractic more evidence based. CASA1 (28) and AHPCSA1 (50) suggested that evidence based research was necessary if any other conditions than neuromusculoskeletal conditions needed to be treated. Haussler (2009) suggested that one of the directions future development of animal chiropractic could go was through identifying whether or not treatment was

effective by using well-designed, controlled studies. Hare (1999) and Haussler (2009a) support this by indicating that limited published research is presently available within the CAVM field and could justify the need for such collaboration. This excerpt was found to be of interest and may support further research:

*“...chiropractors that do treat animals often report a lot of changes in **non-musculoskeletal** lesions. So, maybe that is an area where a heap of research needs to be done just to document what changes and what happens, so there are effects, but anecdotal at this point.”* (CASA1 [26]).

4.5.3.5 Factors which would improve interprofessional collaboration

AC2 (83) indicated the importance of interprofessional collaboration in the following piece:

“Animal chiropractors will never ever and never should intend to take the place of veterinarians. We work concurrently with them and we don’t work individually, which is why I think referral is a fantastic thing...You can’t just assume that doing something on your own...you need to walk hand in hand with them...the more attraction you have with each other the better for both the animal and the owner and everybody who is involved.”

This part highlights the importance of animal chiropractic being an adjunct to animal healthcare rather than a replacement of traditional veterinary medicine and is in keeping with the sentiments expressed by Murray *et al.* (2009); Riggs (2010); OFA (2011); AVCA, (2011); AuVCA, (2011); and the IVCA (2011).

a) Ways in which the animal chiropractic profession might improve collaboration

The following aspects were suggested by stakeholders as needing to be considered in order to assist with better collaboration.

(i) Communication

CASA1 (39); O1 (69); and V1 (91) suggested that the baseline was communication and education from both sides, to facilitate the integration of the profession. Trying to develop in isolation was not going to help the perception veterinarians currently have of the profession (CASA1 [39]). AC2 (79) advised establishing good quality personal relationships with veterinarians, whereas AC1 (59) stated that, by being

professional in what they do, animal chiropractors will assist communication and ultimately promote collaboration. Brussee *et al.* (2001) furthermore suggest that interprofessional knowledge, trust, prior perceptions and future possibilities to act together allow for good-quality interprofessional communication.

(ii) Knowledge

CASA1 (57); AC1 (91); AC3 (49); V1 (63); V2 (75); and O1 (89) suggested that animal chiropractors needed to explain to the veterinary community what it is that they are doing; and needed to do “*something just to get it out there*” (CASA1 [57]). SAVC1 (101) and V3 (55) agreed with this statement and felt that veterinarians who had an animal chiropractic education would be the best option to create awareness amongst veterinarians. Going to veterinary conferences could provide better exposure and professional interaction, although clinical club meetings, newspaper, journals and articles could also prove useful (CASA1 [57]; AC3 [85]; V1 [63]; V2 [75]). AC2 (79) recommended that CASA should get involved and forward educational material to the veterinary community. V1 (55) recommended that animal chiropractors needed to make themselves known within their region or city.

(iii) Education

It was suggested that all parties needed to be satisfied with educational parameters before an animal chiropractic programme was benchmarked (CASA [39]). In order for veterinarians to become more confident in referring to animal chiropractors it needed to be emphasized that animal chiropractors were following necessary educational guidelines and standards (AC3 [49]).

(iv) Legislation

Legislation would allow the common ground to be more transparent which would make communication between the professions a lot easier (CASA [35]). According to SACA1 (59) and AHPCSA1 (102), overcoming the stipulation of the SAVC Act

was imperative and needed to be in place before animal chiropractors approached veterinarians. According to V3 (57), human chiropractors needed to be aware that, if they treated an animal without being registered to the SAVC, they were actually breaking the law. This awareness might also ensure better collaboration. O1 (69) suggested that a standard where veterinarians referred or worked together with animal chiropractors should be in place.

b) Ways in which the veterinary profession might improve collaboration

CASA (39) suggested that veterinarians should express their need to know more about the animal chiropractic profession. Senior veterinarians especially needed to change their mindset (AC1 [91]). Veterinarians should become more aware that there were alternatives to conventional medicine (O2 [63]). Introducing veterinary student to CAVM therapies while they were still studying might prove useful (O2 [63]). SAVC1 (59) and V2 (7) did not have good knowledge of animal chiropractic, which further motivates the need to educate the veterinary community.

4.5.3.6 *Conclusions about the importance of interprofessional collaboration*

Collaboration among animal chiropractors and veterinarians appears to be central to establish future solidarity. At present, professionals are experiencing a mixture of good and poor relationships. A lack of animal chiropractic knowledge and exposure from the veterinary community seemed to be the primary cause of poor interprofessional collaboration. On the other hand, the unwillingness of animal chiropractors to work closely with veterinarians also contributes to poor collaboration. Further aspects contributing to poor collaboration includes: professional mindset, i.e. old generation veterinary practitioners being less open-minded to animal chiropractic (consistent with Schoen *et al.*, 1998), whereas old generation chiropractors tend not to collaborate with veterinarians (new generation practitioners seem to work well together, however); intrusion into the veterinary domain; unqualified animal chiropractors and lack of legislation. Better collaboration was found with qualified animal chiropractors as they could relate more closely to veterinarians.

Interprofessional collaboration could be promoted through educating the veterinary group as to what animal chiropractic is; stressing the importance of communication; adequate education; endorsing legislation; and encouraging integrative research. Veterinarians with animal chiropractic education were found to be the best candidates for creating such awareness with the veterinary group. It was also suggested that veterinarians should be introduced to CAVM at school, educating them on various alternatives to conventional medicine. The majority of these findings corresponded with the factors mentioned by MacDonald *et al.* (2009). Proficiency in one's own professional role; leadership qualities; and negotiation of variances were, however, further factors which should be considered when attempting successful interprofessional collaboration (MacDonald *et al.*, 2009).

The study also suggests that clear parameters defining collaboration should be established, i.e. is collaboration defined as veterinary screening prior to animal treatment, the discussing of the case by means of telephone prior or during the treatment or is it veterinary assessment of the patient after the initial treatment?

4.6 Regulation

According to CASA1 (35), animal chiropractors were practising as “*ghost practitioners*” which suggested the profession was working without any formal structure. This section deals with such matters and focuses specifically on stakeholders' views on the importance of a professional body and legislative measures as well as certain guidelines which need to be considered in order to instil such a social service. As will be described below, a well regulated and legislated profession with specific guidelines was found to be essential for future development of the animal chiropractic profession in South Africa. Without such regulatory foundations the profession would continue to be held back, which might be detrimental to professional development in the future.

4.6.1 Professional Body

AHPCSA1 (106) suggested that people felt safe knowing that there was control over a profession. At the moment there was no control and people were, as a result, hesitant to practice in the field (AHPCSA1 [106]).

4.6.1.1 Viewpoints with regard to different professional bodies

The following views were expressed with regard to different professional bodies:

a) SAVC

The main body that regulates anything to do with animals, i.e. treatment, prophylaxis and diagnostics is the SAVC (V3 [64]; AHPCSA1 [8]). Veterinarians, veterinary nurses and animal health technicians are all separate entities registered with the SAVC (V3 [64]). The SAVC regulates these veterinary and para-veterinary professions in the best interest of the animal, the profession and the public; it deals with disciplinary matters; standards of training; and registers professionals (SAVC1 [79]). According to AC1 (43) the SAVC has become is a lot more stringent than they were in the past, suggesting that unregulated treatment of animals will be monitored more closely.

In accordance with SAVC1 (7) the topic of animal chiropractic has not risen in SAVC discussions, but informal discussions of human trained physiotherapists wanting to treat animal as well as qualified veterinary nurses who want to do physiotherapy have (SAVC1 [55]). SAVC1 (101) suggested that *“one doesn’t want to reinvent the wheel”* with previous discussions such as these and suggest that animal chiropractic should collaborate with professions such as these on this matter. This passage indicates a likely way the SAVC may act when considering the inclusion of other professions:

“...one of trends in Council is to be inclusive...should there be other professions that want to come aboard, that it would be welcomed, but obviously through all the right channels, the correct process.” (SAVC1 [75]).

A separate and independent organization is therefore not the best choice for animal chiropractic (SAVC1 [75]). O3 (61) suggested that if animal chiropractors become a registered para-veterinary group then SAVC should be more flexible. Equally, if anybody steps out of line they should be reprimanded accordingly (O3 [61]).

b) AHPCSA

AHPCSA is well informed regarding current animal chiropractic proceedings (AHPCSA1 [8]). The AHPCSA Act only pertains to humans and no parameters have been laid down for animal treatment, because “*there hasn’t really been a need for it*” (AHPCSA1 [8]). Legislation therefore limits AHPCSA to address animal related matters (AHPCSA1 [34]). The SAVC addressed the AHPCSA concerned with AHPCSA-members treating animals without veterinary involvement (AHPCSA1 [54]). This letter was not directed at chiropractors, but homeopaths, acupuncturist and other uneducated and unauthorized professionals. The letter stated the following:

“...if it [animal treatment] is done in conjunction with a vet, they [SAVC] are not really that concerned about it as long as it is done in that parameter...” (AHPCSA1 [54]).

AHPCSA (54) suggested that this was a polite approach from the veterinary community as they could very easily “*stop it in its tracks if they wanted*”. According to AHPCSA1 (56) professions such as homeopathy and acupuncture which mostly treat animals are not taking responsibility to move legislative matters forward.

c) CASA

A “*task force*” has been put together by CASA in September (2010) and is currently trying to develop some form of legislation for animal chiropractic in conjunction with the AHPCSA, SAVC and SAVA (CASA1 [30]; AC2 [93]; AC3 [43]). There is also no banner under which animal chiropractors can register and supplies this task force with another situation to resolve (AC2 [93]).

Following the SAVC letter to the AHPCSA, the CASA task force approached the SAVC requesting to make an application under the para-veterinary legislation for animal chiropractic (AHPCSA [56]). They also made an application to the AHPCSA in June (2011) which concluded that the registrar from the AHPCSA will approach the registrar of the SAVC to schedule a meeting. This procedure will allow legislative matters to be discussed more easily (AHPCSA1 [58]).

4.6.1.2 Importance of a regulating body

No control of animal chiropractic in South Africa is a grey area (AHPCSA1 [104]). If something happens to an animal that has been treated by an animal chiropractor, the SAVC will take action and the AHPCSA could be brought into this matter (AHPCSA1 [8]). The SAVC then could “*gazette*” quickly that people may not treat animals because they already have the Act in place (AHPCSA1 [104]). This need to be avoided because undoing this is very complicated and will “*taint*” the name of the profession (AHPCSA1 [104]). This is also the “*worst scenario*” for any profession (AHPCSA1 [104]).

A similar situation presents itself within the equine dentistry field where a lot of lay dentists are treating horses that present with floating teeth (AC1 [43]). The SAVC might change legislation to the point where only veterinarians are allowed to treat these horses and they might do the same with chiropractic (AC1 [43]). Considering situations such as these might provide better insight to future regulation.

4.6.1.3 Which regulating body should be in charge of animal chiropractic?

The following data suggest which regulating body should be considered to possibly govern the animal chiropractic profession in South Africa:

a) SAVC as regulating body

SAVC1 (68); AC3 (75); V1 (71); V2 (59); V3 (64); O1 (77); and O3 (67) felt that SAVC should be in charge of animal chiropractic as veterinarians are the primary health providers for animals in South Africa. SAVC1 (68) suggested that legislation has to fall under SAVC governance and was not sure how separate legislation would function. O2 (71) thought that It could serve a “*bigger purpose*” for animal chiropractic to be registered with the SAVC; and too many departments could cause confusion (O2 [79]). Animal chiropractors, like nurses, can also have their own body but will have to fall under SAVC regulation (V2 [59]).

b) SAVC and AHPCSA as regulating bodies

AHPCSA1 (84) and AC2 (63) suggested that it should be a dual regulatory responsibility between SAVC and AHPCSA. You would have to be registered with AHPCSA and then with SAVC as a para-veterinary practitioner, otherwise there would be a loss of control (AHPCSA1 [58]). This might provide animal chiropractic with input from both parties and could benefit better collaboration.

c) Other

CASA1 (47) thought that there should be standard registration with the profession’s required statutory body, e.g. chiropractors with AHPCSA and physiotherapists with HPCSA, and whether or not there would be dual registration with the SAVC needs to be discussed. AHPCSA could also open a sub-register which notes who are animal chiropractors and work with the SAVC so that the council know who is treating animals (CASA1 [47]). AC1 (71) suggested that either professional body was fine, as long as somebody was responsible.

4.6.1.4 Which professional association should represent animal chiropractic?

A separate association could be disadvantageous to animal chiropractic as it was thought to sideline the profession (AHPCSA1 [92]). The lack of animal chiropractic numbers at present made it difficult to establish such an association (AHPCSA1

[92]). SAVC1 (79) suggested that the animal chiropractic would possibly have their own association. AC1 (71) suggested that any association was fine as long as the association was recognized, registered under one professional body and properly represented. CASA1 (48) indicated that the association could resemble an informal gathering of various discipline forms as a result of a central theme similar to the South African Sports Medical Association (SASMA), where different disciplines address sport related injuries. AHPCSA1 (92) also thought that this might prove useful and might promote interprofessional communication. AC3 (77) thought there should be a sub-category for animal chiropractic in both SAVC and AHPCSA.

4.6.1.5 Conclusions about professional bodies regulating animal chiropractic

The results showed a close resemblance to available literature focusing especially on the lack of animal chiropractic regulation, and the veterinary groups reiterating the importance of SAVC as a regulating body in animal chiropractic governance. Participants found it essential to have some form of governance over animal chiropractic in South Africa. AHPCSA1 (116) suggested that it could “*degrade*” a profession to develop without control.

Taverner (2011) suggested that animal chiropractic should be incorporated with an already established SAVC and SAVA rather than AHPCSA and CASA. The majority of participants (n=7), in keeping with Taverner (2011), suggested that the SAVC would play the central role in future governance of animal chiropractic in South Africa. This is not surprising as this council governs all animal treatment in the country. Others however felt that dual registration with AHPCSA was necessary in order to incorporate both professions and promote relationships at a governing level. This could also prove useful when considering other CAM therapies registered with the AHPCSA which would like to apply their therapy to animals.

With regard to establishing appropriate regulation, governance and an association, animal chiropractic should not attempt to develop in isolation, but rather collaborate with the veterinary field to avoid segregation. It appears that the CASA task force is presently working in close contact with the AHPCSA to ensure that the correct channels are being followed and that matters regarding a suitable professional body for animal chiropractic are adequately discussed. The SAVA, similarly to the AVMA may additionally establish a task force to review the model practice Act, and could assist the veterinary community with input regarding legislative matters (AVMA, 2011d).

4.6.2 Legislation

This extract reviews the current legislation of animal chiropractic in South Africa and is consistent with the Act 19 of 1982.

“...the veterinary and para-veterinary Act of 1982 which says very clearly that anyone who wishes to diagnose, treat or prevent the disease of an animal, must be registered to the SAVC. If they go ahead and do that without being registered they are liable to prosecution. The loophole around that if they are not registered and at this stage human trained chiropractors cannot register with the SAVC, the only way they can really legally treat animals in South Africa, is on recommendation or referral from a vet in the area. They are not allowed to take a call from the public and go and treat that patient without that patient had been seen by a vet and at least a diagnosis or a provisional diagnosis have been made.” (V3 [41]).

4.6.2.1 Current outlook on legislation

SAVC1 (47) stated that there was currently nothing in the veterinary and para-veterinary Act which accommodated animal chiropractic, and that anybody who was practising it would be doing so illegally. It was therefore important to start discussing a way to do it legally (SAVC1 [55]). In keeping with Taverner (2011) the majority of participants felt that chiropractors should work under veterinary referral (CASA1 [37]; AC1 [43]; AC3 [53]; V1 [51]; V3 [49]; O1 [61]). Contrary to this, O2 (47) felt that it should be the responsibility of the animal owner, not legislation, to decide whether or not a chiropractor should treat their animal, and did not see the need for referral from a veterinarian (O1 [55]). O3 (47) equally thought that, having

worked on horses all his life, he should know whether the horse required chiropractic treatment or not.

According to CASA1 (6) steps have been taken in terms of formalizing animal chiropractic as a specialty. Both the chiropractic and veterinary groups should welcome legislation, as it would benefit both professions in the bigger scheme of things (AC2 [63]). AC2 (39) suggested that the lack of legislation could be attributed to no banner for the profession to fall under. O2 (47) and V2 (35) did not have much knowledge of current legislation.

4.6.2.2 Importance of legislation

Once legislation is in place it will be much easier to approach the regulating bodies (AHPCSA1 [102]). It will also indicate what conditions animal chiropractors can and cannot treat (AC2 [51]); and ensure a standard is well kept (AC2 [43]). This excerpt explains why legislation is the most important thing animal chiropractic should consider at present:

“Once we have the backing that legislation wise you are not transgressing any rule then it is much easier to approach professions, because we are not on the back foot.” (AHPCSA1 [102]).

4.6.2.3 Malpractice

Current legislation regarding animal cruelty is strict and nobody should want to fall outside of those parameters (AHPCSA1 [84]). AHPCSA1 (84) suggested that people underestimated the risk involved in treating animals. Horses are especially very expensive (e.g. 8 to 10 million Rand) and, with no insurance in place, it may cause problems if the animal is hurt (AHPCSA1 [84]). AC2 (87) agreed with this notion and stressed that incompetence usually featured in uneducated practitioners. Also, uneducated animal chiropractors were more nervous concerning regulations and possible confrontation from the veterinary community (AC2 [63]). If something went wrong with an animal treated by animal chiropractic

it was essential to have had veterinary clearance which eliminated organic or other issues (AC2 [51]).

4.6.2.4 Necessary legislation

The SAVC requested that AHPCSA submit information that would show that animal chiropractors were educated effectively so as to be able to treat animals as private practitioners (AHPCSA1 [36]). According to AC2 (87) there had to be clear rules and regulations and a higher level of understanding in education in order for animal chiropractic to gain any sort of recognition in the veterinary world. If/when these requirements were sanctioned and animal chiropractic was better integrated, the profession might possibly work with less veterinary dependency (V3 [57]). AHPCSA1 (72) indicated that the public perceived animal chiropractic as only done on horses, and suggested that, if legislation was going to be introduced, it would have to include all animals.

4.6.2.5 Organized

The future of animal chiropractic would depend on how well animal chiropractors establish themselves among each other, how responsive they are to what they are being told, and their willingness to advance their own agenda forward (CASA1 [62]). CASA1 (57) pointed out that if there was a group such as the task force approaching the veterinary community, it should do so in a organized fashion. Veterinarians needed to be kept informed with consistent, evidence-based and scrutinized research (CASA1 [57]). Communication with all the relevant parties and not just the traditional and non-traditional parties should be considered (CASA1 [65]). Learning from past experience through thoroughly investigating available courses abroad as well as considering similar situations that have been raised locally was important (CASA1 [65]). Joining forces with an ally like physiotherapy could prove useful in this regard (CASA1 [65]).

4.6.2.6 Conclusions on the importance of legislation

Obtaining legislation was an important consideration arising from participants throughout. No legislation at present could be attributed to no formal position for animal chiropractic to register under and is one of the matters currently being addressed by the CASA task force. Without legislation in place certain risks face the animal chiropractic profession, these include the following: the treating of animals without liaising with veterinarians (regarded as illegitimate); no professional insurance coverage (might present a dilemma if something should happen to animal treated by animal chiropractic); stunted and unprofessional development; and poor interprofessional collaboration.

Demonstrating that animal chiropractors are educated enough to treat animals as a sole practitioner could raise veterinarian's confidence and allow integration to occur more easily. Half of the participants (n=6) indicated that chiropractors should work under veterinary referral which presently seems the best option, as certain ailments might go unnoticed by animal chiropractors. Taverner (2011) also found that veterinary referral played an important role in animal chiropractic practice. Two of the animal owners, however, thought that it should be up to the owner to decide what treatment their animal may receive. This suggests the importance of the public's opinion when it comes to animal treatment. It should however be emphasized that close collaboration between animal chiropractors and veterinarians during this treatment was found to be important. Prior to approaching the SAVC for legislative undertakings, the profession needs to be well organized and well managed to ensure clarity and confidence in the profession itself.

4.6.3 Guidelines/scope of practice

The following section indicates the need for guidelines in order for the animal chiropractic profession to better identify their role in practice.

4.6.3.1 The importance of guidelines

AC2 (23) suggested that animal chiropractic had been portrayed as “*any hack can do it*”; and that people had for many years treated animals just “*off the cuff*” in South Africa (AHPCSA1 [116]). Laymen used the terms “*chiropractic*” or “*physio*” freely which created an incorrect impression of the profession in the public’s perception (V1 [91]). To make matters worse, the lack of legislation was allowing anybody to pretend to be an animal chiropractor (AC2 [51]). The following excerpts emphasise the importance of clarifying guidelines for animal chiropractic in South Africa:

“...what if it is not in their scope and they treat it anyway and you are paying R400 a consult for 15 minutes and your horse does not get better? What about that?” (O1 [61]).

“I don’t know where to draw the line with a man that comes along with a mallet and tries to put something into place. Is he a chiropractor, or is he? ...they acupuncture and they manipulate the horse and pull his tail this way and that way and then put needles in him...” (O3 [27]).

O3 (67) furthermore suggested that, if animal chiropractic had a transparent group which adhered to guidelines, they would not be seen as a threat by veterinarians.

4.6.3.2 Who should perform animal chiropractic?

Educated chiropractors are better suited to perform animal chiropractic as they have superior biomechanical knowledge of manipulation (AHPCSA1 [67]; AC3 [65]). CASA1 (69); AC1 (31); AC2 (59); O2 (67); and O3 (55) indicated that if both professions were adequately qualified, they should be able to practice animal chiropractic. Veterinary qualified animal chiropractors were considered to be better than chiropractic qualified animal chiropractors (O1 [73]; V1 [66]; V3 [27]). However, V2 (55) commented that a veterinarian could not “*be a specialist in everything*” these days, and that a place existed for animal chiropractors to perform their role. As a result of SAVC1’s (67) lack of animal chiropractic knowledge, she suggested that veterinarians should perform animal chiropractic because of their

background knowledge in anatomy, physiology, pharmacology, handling skills and animal behaviour. AC1 (31) suggested that one does not have to be a veterinarian to be a good animal chiropractor and indicated that there were a lot of physiotherapists doing well working with animals. Jones (2004) supported the idea that veterinarians should perform CAVM for the same reasons that were found in the veterinary community data. Haussler (2000), in agreement with most of the chiropractic group respondents, comments that animal chiropractic is a specialized treatment and requires chiropractic input.

AC1 (51) and V2 (43) pointed out that veterinary supervision was not always required because time did not always permit scheduling appointments. Collaborating and knowing where each profession's limits are, as well as contacting a veterinarian if the animal were not responding to treatment, should be considered (V2 [43]).

4.6.3.3 *Para-veterinary professions*

O3 (43) and AHPCSA (71) indicated that a lot of work done by veterinarians in the past was now being done by para-veterinary organizations such as chiropractic, physiotherapy and equine dentistry. O3 (43) suggested that, if adequately qualified, veterinarians should make room for these professionals because “...a vet doesn't always have time to stand on top of a horse and do what he has to”. As the treatment of animals and pets progressed, more specializations would become apparent (AHPCSA1 [72]).

4.6.3.4 *Conclusions on guidelines/scope of practice*

As a result of no guidelines, a misinterpreted representation of animal chiropractic seems to exist in both the veterinary community and the public. This may apprehend or delay integration with the veterinary profession and portray animal chiropractic inaccurately. Different views regarding who should practice animal chiropractic were obtained, and indicated that each participant drew preferences to their own profession. The common prerequisite, however, appeared to be

education, whether chiropractors or veterinarians wanted to practice animal chiropractic, they would have to be educated and accredited appropriately.

4.7 Resources

This section deals with the importance of resources in terms of sufficient numbers of trained people, proper amenities/equipment, and enough time available for the integration process to take place. Resources directly affect integration of the animal chiropractic field into the animal healthcare setting of South Africa. The data suggest that sufficient numbers of animal chiropractors, educational staff, amenities and time have to be considered within the development phases of this profession. A general positive outlook towards development in the near future was found.

4.7.1 People

Animal chiropractors and educational staff shortages were found to be key issues, and are discussed below.

4.7.1.1 Animal chiropractors

At present no other specialization within chiropractic legislation exists as a result of not enough interest in the field (AHPCSA1 [112]). The chiropractic profession is only now starting to get to the point where there are sufficient numbers to become specialists in particular fields (CASA1 [63]). Any educational programme needs critical mass to sustain itself (AHPCSA1 [110]; O3 [77]). AHPCSA1 (109) suggested that in 10 years time 20 or 30 people might be interested in animal chiropractic and education should only then be formally approached (AHPCSA1 [110]). AHPCSA1 (109) also suggested that such a programme needed to be financially viable, which only sufficient numbers could provide.

4.7.1.2 Educational Staff

AHPCSA1 (98); AC1 (87); AC2 (75); V1 (79) and O3 (77) suggested that the profession was years away from establishing an education as it requires instructors who are properly qualified and experienced in the field.

4.7.2 Amenities

This excerpt indicates that appropriate facilities to teach animal chiropractic are required:

“So you need to have the facilities; you have got to do dissection; you have got to do chiropractic sections; you have got to have it in a place where people are for one, not just lecturers, they do the deed...” (AC2 [75]).

4.7.3 Time

Time emerged throughout as an important factor to consider if/when animal chiropractic seeks inclusion into mainstream animal healthcare service.

4.7.3.1 Time needed for legislation

Participants suggested that the growth of animal chiropractic in South Africa was going to be slow and disorganized for a few years to come (AHPCSA1 [34]; SAVC1 [93]; AC2 [93]; AC3 [43]; V2 [79]; O3 [59]). Enough time should be provided for waiting periods, public comments and amendments (CASA1 [62]).

4.7.3.2 Future of animal chiropractic in South Africa

It was interesting to note what participants thought would happen in the next ten years' time with reference to animal chiropractic. AHPCSA (109) suggested that a small percentage of the chiropractic profession would be practising the profession and that legislation for it would hopefully be in place (AHPCSA1 [110]). SAVC1 (93) felt that 10 years was not enough time for animal chiropractic to be integrated as a para-veterinary profession.

Various participants felt that if the profession was managed properly there would be 'huge' potential for animal chiropractic to develop (CASA1 [62]; V1 [87]; O3 [97]) and be accepted (V2 [79]), as interest in the field exists (AC1 [99]; AC2 [83]; O2 [115]). AC2 (83) and O2 (115) suggested that it would develop, because animal chiropractic is a holistic field which is an evolving trait and that human chiropractic was getting more popular and therefore animal chiropractic should also (O2 [115]). The following passages suggest confident views of participants with respect to the future of animal chiropractic:

"It is growing and I think it will survive and become a profession on its own. There are a lot of students like yourself who is interested and motivated about animal chiropractic...steps are being taken by the task team to get the legislation for animal chiropractic sorted out in the country, so if all goes to plan, it will survive and be thriving" (AC3 [85])

"I think it is going to boom, grow, continue growing, branching out into new fields. Vets are branching into more narrower fields, developing expertise in more narrower fields. Definitely more chiropractors coming on board, veterinary and maybe human trained that have done a veterinary course, no doubt about it" (V3 [80]).

"...it will be huge, because first of all people love to spend money on their animals, anything that make your animal perform better or feel better...and I think chiropractic should be on top of the list, I really do..." (O1 [97]).

4.7.3.3 Conclusions on the importance of resources

Resources directly affect integration of the animal chiropractic into the animal healthcare setting of South Africa. The data suggested that sufficient numbers of animal chiropractors, educational staff, amenities, and time have to be considered within the development phases of this profession. Legislation in particular is a process that takes a long time but needs to be done appropriately by following the correct measures. A general positive outlook towards development in the next decade was expressed, and may suggest that these resources will grow within this period.

4.8 Conclusion

The data suggested that Competence, Acceptance, Regulation and Resources were essential categories which needed to be considered if animal chiropractic were to be recognized as an animal healthcare option in South Africa.

Having the correct education and delivering a certain standard of practice was found to be fundamental and together made up the category of Competence. Uneducated animal chiropractors might potentially devalue the profession, and perceived incompetence in the field creates a negative awareness within both the veterinary community and the public. Initial veterinary screening to prevent possible misdiagnosis was viewed as important, and was emphasized throughout the interviews by the majority of veterinary and chiropractic groups. Establishing baseline educational parameters was perceived as being useful in clarifying whether animal chiropractors were able to treat animals as sole practitioners. However, it appeared that there was not sufficient demand for education in South Africa to necessitate establishing educational parameters at present, and that interested parties would have to obtain education abroad until further development occurred. Some grey areas with regard to practice, especially nomenclature, were found to exist and should therefore be considered more closely as these might also lead to ill-perceptions about chiropractic.

Acceptance by mainstream practitioners and the public was found to be imperative for future development. A definite need for the profession was seen to exist, in particular, to provide the veterinary community with an alternative approach to treating neuromusculoskeletal conditions in animals. The role of animal chiropractic appeared to fit this niche, but was seen to require further definition, as an inconsistent representation of the profession was seen to exist. Indicated and contra-indicated conditions mostly addressed by animal chiropractic were outlined in Section 4.5.2.2a and 4.5.2.2b and related to those outlined by the IVCA. More clarity with regard to conditions such as lameness is warranted. With regard to collaboration, a lack of animal chiropractic knowledge seemed to be the motivating

factor for misinterpretation of the profession, as was the unwillingness of animal chiropractors to work closely with veterinarians. Both parties could therefore be seen to be contributing to professional misconceptions; personal mindsets and the existence (or not) of previous interprofessional relationships could be seen to affect collaboration directly. Recently qualified veterinarians were found to be more open-minded towards alternative therapies, while older generation veterinarians appeared to know less about alternative therapies. This was attributed to the fact that senior unqualified animal chiropractors tended to work more in isolation, whereas younger ones seemed to have worked more closely with veterinarians. It was found that both professions needed to conform to a mutual interactive environment if animal chiropractic were to have the opportunity to develop. Various suggestions to overcoming interprofessional barriers were introduced, and require further exploration. The concern remains that veterinarians are the primary healthcare providers for animals in South Africa and are therefore responsible for referring animals with certain ailments to animal chiropractors. Therefore, if any misconceptions or lack of knowledge regarding the animal chiropractic existed, it would directly affect the referral to animal patients to chiropractors.

It was agreed that a well regulated animal chiropractic profession would be required in order to ensure a sense of security and control for all parties involved. Without regulation the profession might develop unpredictably, which could lead to isolation. It was pointed out that the SAVC presently regulated all animal treatment in the country and would play an important role in establishing parameters for the profession. Correspondingly, the AHPCSA, which governs various CAM therapies interested in treating animals, would have to deliver input from its side and a dual-registration including both professions was seen as being advantageous. Obtaining legislation for animal chiropractic in South Africa appeared to be a key priority to ensure integration. The first step would involve presenting the SAVC with information suggesting that the animal chiropractic profession was sufficiently educated to treat animals. The absence of a formal banner under which animal chiropractic might register forms the second step, and is currently being looked at

by the CASA task force. Once legislation is in place further recommendations could be brought to the regulating party's attention. Developing in isolation could be detrimental to the animal chiropractic, and needs to be avoided at all cost. Clarifying guidelines for the animal chiropractic profession would further assist parties to identify with their scope of practice and where they stand as a profession in South Africa. There appeared to be a close relationship between Regulation, Competence and Acceptance, in that animal chiropractors need to be well educated, carefully monitored, and accepted by both the public and veterinary practitioners.

A general trend appearing from the data suggests that the animal chiropractic profession would grow within the next decade. However, staffing, amenities and time were found to be important resources necessary to allow animal chiropractic to become successfully integrated. Too few candidates interested in becoming animal chiropractors, as well as too few qualified and experienced chiropractic staff to teach animal chiropractic, is presently the case, and it would not be viable to establish training in the field just yet. Time is therefore essential to permit for growth and development within the animal chiropractic community itself, and will allow for the profession to become more organized prior to approaching legislation and ultimately integration with mainstream animal healthcare in South Africa.

In retrospect, the prerequisites emerging in the grounded theory methodology were seen to have parallels with the “*essential functions*” found in Makhubu’s (2011) model of service delivery: that is, according to Makhubu (2011:114) they are functions which must be carried out for service delivery to take place¹. As animal chiropractic provides a service to the public, it might be expected that certain of the functions considered essential for service delivery might also be relevant to the integration of animal chiropractic into mainstream animal healthcare.

¹ “...in order for interpreting service delivery to take place, it must be: 1. contextualised, 2. sanctioned, 3. resourced, 4. organised, 5. regulated” (Makhubu, 2011:114).

The grounded theory derived in this research identifies certain prerequisites for the integration of the chiropractic profession with mainstream animal healthcare. The eventual framework was related to the initial categories and their order of importance. The resulting theory or model of prerequisites for integration could be used in the integration of chiropractic practice in general with mainstream animal healthcare practice, and even, tentatively, any alternative healthcare practice with mainstream animal healthcare practice

CHAPTER 5: CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This Chapter draws conclusions from the findings presented in the previous chapter, and provides a synopsis of the study. Future recommendations and undertakings are also presented.

5.2 Conclusions

This study was initiated as an investigative measure to establish a theory which would explain the current status of animal chiropractic in South Africa. The study at first introduced the reader to the novelty of the animal chiropractic profession and showed how important it was to establish clarity with regard to current matters. It furthermore suggested that the animal chiropractic profession needed to become integrated with animal healthcare in order to complement the work done by veterinarians. This required integration with veterinary healthcare to supply animals with an alternative approach to the treatment of neuromusculoskeletal conditions. The theory that emerged from the study indicated that in order for the animal chiropractic profession to become integrated with mainstream animal healthcare, it had to fulfil certain requirements.

The study found that there is a perceived need for the animal chiropractic profession in South Africa, and that it could provide animals with another option when neuromusculoskeletal problems are addressed. In order for animal chiropractors to practice in South Africa they require the right education, practising skills and need to work under veterinary referral, i.e. they need to be competent in their field and be accepted by the public and mainstream animal healthcare practitioners. In addition, the role of the profession required better definition, allowing the profession to better identify with specific guidelines and adding to professional development. Interprofessional collaboration was found essential to avoid the profession from developing in isolation. Collaboration is dependent on

whether personal relationships have been established in the past; the level of knowledge veterinarians had of animal chiropractic; and the personal mindsets of both groups of professionals. Collaboration would also allow for veterinarians to become more confident in practising capability of animal chiropractors.

Animal chiropractic requires regulation in order for it to be controlled appropriately. It should avoid developing in segregation and needs to fall primarily under SAVC regulation, the reason for this being that the SAVC presently regulates all treatments of animals. Dual registration with the AHPCSA was found to be important and would allow for joint expansion of both groups. A separate association for animal chiropractic could further part the two professions, therefore a shared association independent from both professions, and driven by the same theme, might prove useful to promote interprofessional relations. In the future, such an association might supply other CAVM therapies with a structure that could further support interprofessional communication.

Obtaining legislation appears fundamental to allow future integration for animal chiropractic into mainstream animal healthcare. Having legislation in place would mean that the profession has some form of foundation that it could work from and would be much easier to approach the veterinary community. A critical situation faces the animal chiropractic community in that they need to obtain legislation before they can continue treating animals legally. An educational curriculum suggesting that animal chiropractors are sufficiently educated to treat animals effectively as sole practitioners needs to be established and presented to the SAVC in order to achieve legislation. Section 5.3.1 suggests a timeframe estimate for animal chiropractic integration into the animal healthcare field and highlights specific considerations with this regard.

The following resources were found essential and need to be available for the integration process to take place: sufficient interest in the animal chiropractic profession; adequate numbers of qualified and experienced animal chiropractors;

sufficient amenities; and a realistic time frame. At present all of these factors, apart from time, appear to be inadequate and unfortunately suggests that animal chiropractic will not be integrated within the near future. However, with alternative therapies in animals becoming popular, more people are becoming interested in CAVM therapies such as animal chiropractic and should allow professional growth to steadily increase. The study suggests that if the correct channels are followed, professional integration could possibly occur within the next ten years.

5.3 Recommendations

Key recommendations represent the practical element of this study. These elements, if applied, may prove to be useful if/when further steps in the animal healthcare field are taken. This study could possibly supply other professions in a similar position as animal chiropractic with possible guiding principles but would need to be modified to fit specific professional needs.

- Establishing a curriculum (IVCA endorsed) for animal chiropractic in South Africa would show the way forward for integration. Considering the views of veterinarians and chiropractors who have not yet obtained post graduate qualification in animal chiropractic but have done some form of training and have experience in the field might provide additional information for future development.
- Grey areas such as diagnosing, manipulation and animal conditions such as lameness contribute to uncertainty in the practice of the profession and require further exploration and defining in terms of specifying precisely where chiropractic stands with diagnosing and treating conditions. This will ultimately assist in further improving professional status of the animal chiropractic profession in South Africa.
- A needs analysis for an animal chiropractic service should be carried out to see if/where the need exists. Once the need for such a service has been

established, animal chiropractic is more likely to be accepted by veterinarians and the public. A survey to establish whether or not chiropractic students and veterinary students, as well as qualified practitioners, are interested in pursuing this profession should be carried out.

- Inter-professional collaboration between animal chiropractic and veterinarians can be promoted through joint research. A number of chiropractic students such as Meuwese (2005), Loots (2008) and Linden (2008) have pursued clinical based research with veterinary medical practitioners and may provide the basis for further work. Through establishing evidence based research animal chiropractic as a profession could become better defined and this might prove useful if/when sanctioning takes place.

5.4 Timeframe Estimate for Animal Chiropractic Integration into the Animal Healthcare Field of South Africa

Time was viewed as a resource and needs to be considered in order for integration to take place. A timeframe estimate suggesting what future steps the animal chiropractic profession might have to take to assist integration with animal healthcare is presented in Figure 5.1.

The year 2012 signifies the current position of animal chiropractic in South Africa. The study indicated that the CASA task force was established at the end of 2010 in order to obtain legislation and seek a banner for the animal chiropractic profession to fall under. In the meantime the AHPCSA has met with the task force to discuss how to approach the SAVC to obtain legislation. Some discussion between the AHPCSA and the SAVC has also taken place and resulted in the registrars from both these groups deciding to meet up in order to consider future matters regarding CAVM in South Africa. At this point in time the conclusions that will be drawn from this meeting will dictate further proceedings for animal chiropractic in South Africa.

This study may assist with the legislation process and suggests that the AHPCSA and the task force consider certain points that have been raised throughout.

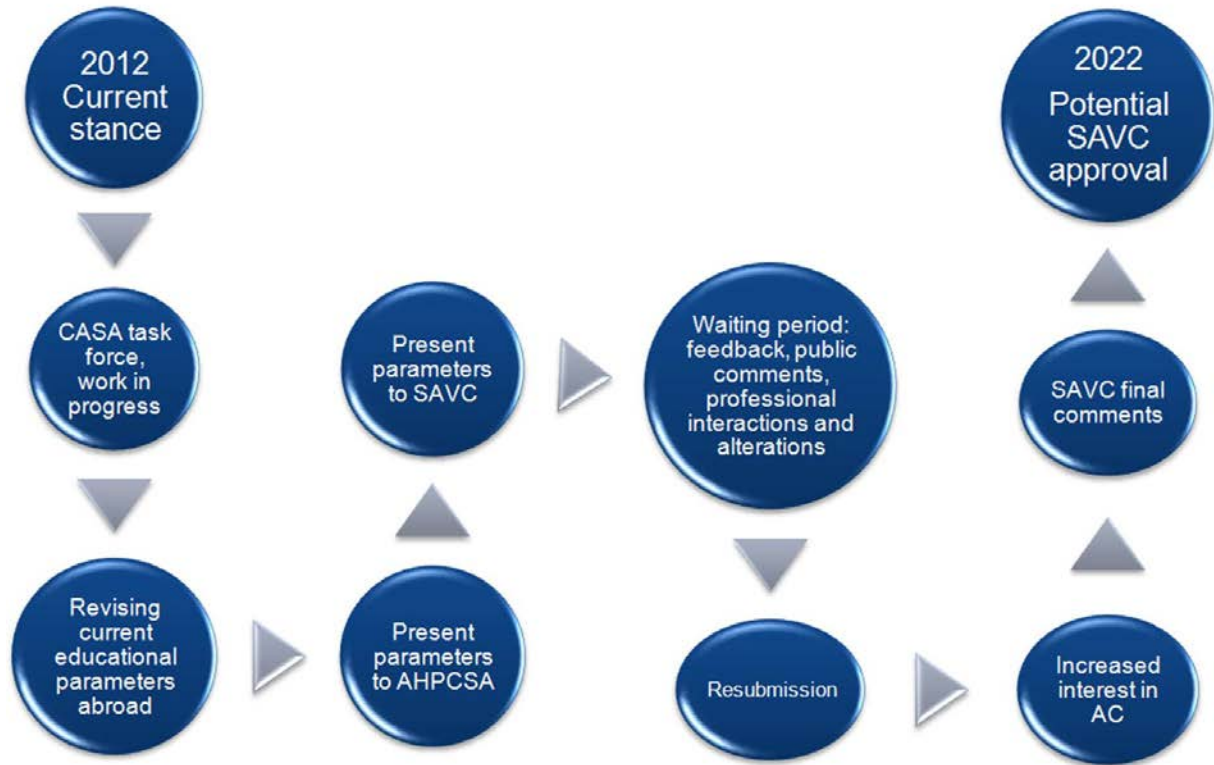


Figure 5.1 Timeframe estimate for animal chiropractic integration into the animal healthcare field.

It seems that the animal chiropractic profession needs to identify itself as its own profession and therefore should collect and establish appropriate information to do so. It appears from the data that an educational curriculum is most fundamental and will show whether animal chiropractors are competent enough to address animal ailments. All educational parameters which are currently providing education abroad (mostly IVCA endorsed) need to be revised in order to conform to SAVC standards. Approaching unqualified, experienced animal chiropractors currently in the field may also provide some form of input to the practical components of animal treatment. Considering animal chiropractic's development abroad as well as development of other professions, such as animal

physiotherapy, locally could avoid time consuming mistakes that have been made in the past. Any evidence based research suggesting animal chiropractic's effectiveness should also be measured. It might also be beneficial to approach other CAVM therapies (especially AHPCSA professions) interested in treating animals within the developing stages.

When these parameters are formulated they need to be presented to the AHPCSA and should be revised accordingly. Thereafter, the task force needs to present these parameters to the SAVC in a consistent and professional manner in order to make an amendment to the current veterinary and para-veterinary Act. A waiting period to allow for feedback, public comments, professional interactions and alterations should be considered, and this could take several years. Resubmission of alterations and other information will then be presented back to the SAVC and will await final comments. The study suggests that by the year 2022 the profession anticipates having legislation in place. In the meantime, the animal chiropractic profession is expected to grow with more people becoming interested in becoming clients or practitioners. Once there are enough qualified and experienced animal chiropractors willing to teach and a sufficient amount of students interested in pursuing this profession, new goals to establish educational training for the profession in South Africa can be put in place.

5.5 Conclusion

It can be seen that the research progressed in some measure from the starting parameters of the study, and that it was not so much that these parameters were not significant, but that they appeared re-arranged in a different configuration after the grounded theory process had been worked through. Their ultimate order in terms of categories and hierarchies was changed as a result of moving between data and theory in the process carried out in grounded theory methodology. In the perspective of the emerging theory, Competence, for example, assumed much greater significance than perceived formerly, as did Regulation, and it became apparent that these social systems have relevance at many levels. It must be

emphasized, however, that it is the role of these factors and their interdependence in various combinations which are seen as the keys to achieving the integration of animal chiropractic with mainstream animal healthcare. It is hoped that the resulting model will go some way towards providing a “road map” for the eventual integration process.

APPENDIX A: LETTER OF INFORMATION AND INFORMED CONSENT

Dear: *(Name of participant will be entered)*
Title of research study: An exploration of the current status quo of animal chiropractic in South Africa.
Principle investigator: Cobus Bosman
Supervisor: Dr. L. Wilson, M. Tech Chiropractic
Co-supervisor: Prof. D. Pratt, D. Tech Language practice, HED

Brief introduction and purpose of the study: Veterinary chiropractic, also known as animal chiropractic, provides an additional approach to various health and performance related difficulties experienced by animals.

This research involves an investigation into the current status quo of animal chiropractic in South Africa, exploring the role of animal chiropractic in the South African veterinary health. It will investigate inter-professional relations between animal chiropractors and veterinarians, as well as any developmental issues facing the animal chiropractic profession.

Outline of the procedures: This letter of information and informed consent will be allocated to you, which will require your consent prior to being interviewed. Please be aware that the interviews have to be voice-recorded for transcription and data analysis purposes. Follow-up telephonic interviews will be held to pursue additional issues arising from the data and to clarify emerging trends.

Risks and discomforts to the subject: There will be no risk or discomfort to you for your participation in this study.

Benefits of the research and benefits to you: The study will determine the current position of animal chiropractic in South Africa, and help to propose guidelines for further integration into the South African veterinary health care setting.

Reasons why the subject might be withdrawn from the study: You may stop participating in the study at any time, for any reason you may decide on. Your decision to stop participating, or to refuse to answer particular questions, will not affect your relationship with the researcher, Durban University of Technology, or any other affiliations associated with this project.

Confidentiality: All information you supply throughout the research will be regarded as confidential and your name will not appear in any report or publication of the research. The data will be safely stored in a locked facility for a period of 5 years, thereafter it will be terminated.

Remuneration and costs of the study: No financial compensation will be awarded to any participant involved in the study. In addition, no financial contribution will be required from relevant participants.

Persons to contact in the event of any problems or queries:

Supervisor: Dr. Laura Wilson, 031 373 2923
Co-Supervisor: Prof. Deirdre Pratt, 031 373 6603

Please contact the Faculty of Health Sciences Research Co-ordinator, Mr V. Singh at 031 373 2701 should you not be able to contact any of the above persons.

Statement of agreement:

I,.....(full name)(ID number),
have read this document in its entirety and understand its contents. Where I have
had any questions or queries, these have been explained to me by Cobus Bosman
to my satisfaction. Furthermore, I fully understand that I may withdraw from this
study at any stage without any adverse consequences and my future health care
will not be compromised. I, therefore, voluntarily agree to participate in this study.

Participant's name (print).....

Participant's signature.....

Date.....

Researcher's name.....

Researcher's signature.....

Date.....

Witness name.....

Witness signature.....

Date.....

Thank you kindly for your time and participation.

APPENDIX B: INTERVIEW QUESTIONS

1.1 Preliminary questions

- 1) How would you describe your knowledge of animal chiropractic?
- 2) What exposure, if any, have you had in terms of animal chiropractic?
- 3) Would you have your animal treated by an animal chiropractor? Why?

1.2 Questions relating to the role/scope of animal chiropractic practice in the South African veterinary healthcare setting.

- 1) In your opinion, how would you define the role of animal chiropractic in South Africa?
- 2) Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?
- 3) Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?
- 4) What conditions do you think are treated by animal chiropractors?
- 5) What conditions are not in the scope of animal chiropractic?
- 6) What is your knowledge of the legislation regarding animal chiropractic in South Africa?

1.3 Questions relating to the interprofessional relationships between animal chiropractors and veterinarians

- 1) Can you comment on the current collaboration, i.e. inter-referral between veterinarians and animal chiropractors in South Africa? Please elaborate.
- 2) According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

- 3) In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?
- 4) In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

1.4 Questions relating to developmental issues

- 1) What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.
- 2) In your opinion what legal body should animal chiropractic register with? Please explain your answer.
- 3) With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? Why?
- 4) What further steps do you feel are necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?
- 5) Where do you see the profession in South Africa in the next ten years' time? Why?

1.5 Conclusion

- 1) Is there anything you would like to add?
- 2) Is there anything that I have not asked you and that you feel is important to consider?
- 3) Is there anything that you would like to ask me?

APPENDIX C: INTERVIEW TRANSCRIPTS

¶1: Chiropractic Masters Research Project Questions

¶2: “An exploration of the current status quo of animal chiropractic in South Africa.”

¶3:

¶4: Interview with AHPCSA1

¶5:

¶6: **Q.1.1 Preliminary questions regarding animal chiropractic in South Africa. How would you describe your knowledge of animal chiropractic?**

¶7:

¶8: I think we have got a fairly good take on what is happening in terms of the profession at large, but it has not really been addressed properly, because there hasn't really been a need for it. There are no parameters set. The way the Act (AHCSA Act) is written only pertains to humans. In terms of the treatment of animals that actually falls outside the scope of the Allied Health Professions Council because the Veterinary Controls Council will control any treatment related to animals, but because of the way that legislation is written there is nothing that we can really do.

¶9:

¶10: If something happens to an animal, the chances are that the Veterinary Controls Council will probably take action and the Allied Health can be brought into it. It is quite difficult to put guidelines down from that perspective.

¶11:

¶12: **Q1.2 What exposure, if any, have you had in terms of animal chiropractic?**

¶13:

¶14: Mainly to chiropractors who are doing it and research that have been done at University level. We have done a couple of trails with horses and in terms of discussions with some of the chiropractors who are interested in doing it, to discuss with them what the parameters are.

¶15:

¶16: **Q1.3. Would you personally have your animal treated by animal chiropractic? Why?**

¶17:

¶18: I would if I felt that the person was suitably qualified and I think that is the big thing in my personal opinion that would be the big factor at the moment. I think that there are people out there that are willing to treat pets like dogs and I don't really think that there is a lot of formal training out there. I don't think any of them have formal training. I think there are one or two that have gone overseas and have done good courses in such a thing, but for the most part I think it is people who are trying to apply the principles of human treatment on the animals, or they were shown by another chiropractor this is what you do with an animal.

¶19:

¶20: Just in terms of my own pets I don't feel comfortable with that, because if I take my pet to you just because it has a problem I expect the person to be trained at the level a vet would be trained at. I don't know if it is offered anywhere in the world to be honest (smile).

¶21:

¶22: I think there is the International Veterinary Chiropractic Association. They are probably the most stringent and I think and a couple of South Africans have done these courses and they really recommend it.

¶23:

¶24: You know it will be an interesting exercise, because one other thing that we have requested is that, because of the way the Veterinary Controls Council had suggested that we go through the process and when I discussed it with a colleague, I said to her that she needs to find out as much as possible about the courses that are out there, because there are people who want to do courses and this will actually set a baseline, because I think there are short courses in different areas that people are doing but I don't know if they are in depth enough really to allow us to go to the Veterinary Controls Council and that is what they are going to base it on.

¶25:

¶26: I think that a big factor will be looking at the education parameters of chiropractors who want to treat animals and they will probably look at it and say that this course is ok, but this course is not. So people who do that course will probably be given registration under the para-veterinary stipend. Those that do any other courses will actually not be able to do that, unless they have a sub-register as a technician where you work with a vet, which is the other option that could be looked at.

¶27:

¶28: Q2.1 Questions pertaining to the role and scope of animal chiropractic in the South African. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶29:

¶30: I think that they, or it would ultimately be the treatment of neuromuscular-skeletal conditions in animals. You know, dogs or cats or horse or whatever it is and I think that what we do with humans would be extrapolated to what we do with animals and I think that that would be the logical progression in terms of that scope.

¶31:

¶32: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?

¶33:

¶34: There is no training formally in South Africa and as I said a lot of people are doing it because they were shown by another chiropractor. I also think that one of the problems is that there are people out there that are treating horses, in particular horses, who are not even chiropractors, because they are doing manipulation on horses people think it is chiropractic and that is also a grey area, because the Council (AHPCSA) is also limited in terms to how we can address that, because if they call themselves a chiropractor and they are going to treat an animal it becomes quite difficult for the Council to act on them because they have not treated a human. So, I think that that is one of the things that in the long term need to be addressed, people who own horses, need to understand what the training should be in South Africa.

¶35:

¶36: I think it is a long way off, we first have to go through this process of getting legislation and education done, then people need to be trained effectively overseas and then we can start looking at maybe training in locally. If you look at what the Veterinary Council has requested us to submit, they want us to submit information that will show that we are trained effectively enough to be able to treat animals as a sole practitioner without having to go through the vet first.

¶37:

¶38: The first thing that we need to do is somehow get it legislated that chiropractors can treat animals, because you can't start a programme and teach people if they going to come out and not use the qualification. So I think from that perspective there needs to be a creation of control in that arena and once that is done then we will know what parameters are set in terms of what training needs to be done and where you can do it and as I have

said, once we have enough experience locally then we can start offering it in an institution and say that we have got people with expertise who can actually teach at that level, because if we were to start now there is nobody in South Africa who have that qualification or there is very few of them.

¶39:

¶40: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals?

¶41:

¶42: I think some of them are. There are one or two that have gone solely in treating animals, so I think that they probably have a lot of experience. I think some of those guys also have worked very closely with vets who do animal chiropractic. I do think that there are people who are treating animals and they don't have enough experience. I think that that obviously is also part of the training issue.

¶43:

¶44: Q2.4 What conditions do you think are treated by animal chiropractors?

¶45:

¶46: I would imagine neuromuscular-skeletal conditions.

¶47:

¶48: Q2.5 What conditions do you feel are not in the scope of an animal chiropractor? Please explain.

¶49:

¶50: I would say it is the same as with human chiropractic. I don't think that anyone should be claiming to treat visceral conditions, there is not enough evidence for it and also visceral conditions with animals progress very differently to humans. If a horse starts to get colic you can't just treat them and hope that they are going to get better, because they could die within twenty four hours.

¶51:

¶52: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶53:

¶54: The Veterinary Controls Council send a letter to our council (AHPCSA) pointing out the fact that they are aware of members of our Council who are treating animals. So, the letter was not directed at chiropractors, it was directed at homeopaths acupuncturist, a whole lot of different people who are treating animals, but they don't have formal training and they are not legislated or controlled in any way through Veterinary Controls Council to do it. They basically said that if it is done in conjunction with a vet, they are not really that concerned about it as long as it is done in that parameter, but I mean that is just a stopgap and you know it is quite a very, for a lack of a better term, it is a very nice approach from them, because they could very easily just come and say that it is not going to happen. They could stop it in its tracks and anyone who went against it would obviously be up for a lot of trouble, but I mean they have taken the approach of saying that you know it is happening but if it is done in certain parameters we are not too worried about it.

¶55:

¶56: So, there was the action group from CASA (Chiropractic Association of South Africa) who approached the Veterinary Controls Council and they have requested that they need to make an application under the para-veterinary legislation where they will want to assess the training and expertise, obviously that would mean going through a process where a legislative structure would be in place to control how it progresses. I think that the other professions actually need to do it, the guys like Homeopaths and Acupuncture who are actually using it and doing it, they are not taking it seriously and moving forward with it. So, I think you could end up with a new registrar who is on the other side of it and doesn't want

to take a soft approach, who walk in and say only vets treat animals, that's it, we take you off the books and that is why it needs to be legislated, because once it has been legislated, you can't reverse it very easily. That is why this process needs to be followed very carefully.

¶57:

¶58: The grouping did make an application to the board (AHPCSA) about a month ago and the agreement from that meeting was that the registrar from our Council will approach the registrar of the Veterinary Controls Council to set up a meeting. Our Council will sit with them and talk about how to do it, because in terms of protocol it is a better way to do it, because ultimately, the legislation should be that you will have to be registered with that Allied Health Professions Council and then be registered with the para-veterinary Council, or the Veterinary Council as a para-veterinary practitioner, because otherwise you are going to lose control of that as well. So, I think that is the long term process. Unfortunately it will probably be a slow process, you know how legislation works, but as long as things are in place to progress, I think that is important.

¶59:

¶60: Q3.1 Questions pertaining to inter-professional relationships between animal chiropractic and veterinarians. Can you comment on the current collaboration, in other words inter-referral relationships between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶61:

¶62: I can't comment personally, but I think that there are some that work very closely. I know that there are chiropractors that have worked in veterinary practices solely seeing animals and that means that there is a higher collaboration at that level, but you would have to speak to vets about that I suppose, to find out how much they know.

¶63:

¶64: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶65:

¶66: I think until the training is sufficient that is actually the right way to do it. You know that we (chiropractors) study for six years and we do two years of intensive anatomy and physiology of humans. To extrapolate that into animals is not really functional. Some of the physiology is the same, but certain anatomical, from a musculoskeletal perspective and biomechanically is very, very different. So to just extrapolate what we do on humans to animals, I don't think is functional, not at all.

¶67:

¶68: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶69:

¶70: I think that the barriers probably are the fact that we are not trained formally. You know it has been quite a long process to get acceptance in the medical profession, which I think we have made huge steps with, but that is partly because of the training that we get and the level of training that we can talk one on one with the doctors. When it comes to speaking to the vet we are not speaking the same language, because we have not been trained a level high enough to be able to have one on one discussions regarding musculoskeletal events. There is a perceived need for it. A patient of mine is a vet that specializes in rehabilitation, so she basically does physiotherapy on animals. She does acupuncture on horses, myofascial trigger points on horses, but she is a vet. So that is almost how their paradigm has moved in the veterinary arena. Things have changed a lot over the past few years, because you are getting sub-specialties within veterinary surgery,

so you are getting orthopaedic vets and neurological vets. They are much more specialized and it is becoming almost like with a human. If you go to your GP and he tells you, you have to go to your orthopaedic surgeon, or you need to see your physiotherapist, there is a referral on, whereas before vets did everything themselves and I think veterinary is becoming a lot like medicine, where it is too big for one person to know everything.

¶71:

¶72: So it is obviously a game that is a financial issue though, because it means that you are going one up in the tears and as the treatment of animals and pets progresses it will become more that way, because everybody thinks of chiropractic in animals that it is only done on horses, but that is not really the end of it you know, that is only one component of it. If it is going to happen it can't just be horses. You can't isolate yourself to one type of animal. If you are going to do it, you have got to do it.

¶73:

¶74: Q3.4 Ok. In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶75:

¶76: I think that animal chiropractors are probably better suited to do it, because we do have a much better knowledge of the biomechanics of manipulation. Having said that, it is a matter of integrating that with knowledge of anatomy and biomechanics of the animal who you are treating. So, on the one hand the vets have got that knowledge more than us, but we have got the skill in terms of actually performing the manipulation. So it will be like a GP performing a manipulation. They might have more knowledge on that medical component, but when it comes to the actual manipulation, we are the ones that got to do it and that is why we are trained at that level. It is more like a human where we don't have to rely on a GP to make a diagnosis and manipulate you know, we just become technicians and manipulate. We make the diagnosis, we make the decision of how to do it and if we are going to do it with animals, that is ultimately what we need to achieve as well.

¶77:

¶78: What are your views on vets completing their degree and also doing an animal chiropractic course and then manipulating?

¶79:

¶80: Well, I mean, if they were to do it, they would not be able to call themselves animal chiropractors, I mean they would be able to say that they use manipulation as one of their interventions maybe and there are probably vets out there using it in anyway, who work with horses. So, you know, I don't think that you would be able to stop them from doing it, because it is the same as medicine, they have got such a broad scope, if a medical practitioner does manipulate patients, there is nothing that anyone could do to him. His not going to call himself a chiropractor and there is nothing in their legislation that is going to stop him. So the parameters for vets are very, very big. They can pretty much do what they want to as long as they are not hurting animals. Their scope is very big and it is deliberate because it means that they can do anything basically.

¶81:

¶82: Q4.1+4.2 Developmental issues regarding animal chiropractic. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own? So do you feel indefinite that we should register with the Veterinary Council and Veterinary Council should be responsible for all the legislation?

¶83:

¶84: They have to, I mean that's why it is a dual programme with the Allied Health Professions Council where there needs to be regulations within our council which say as

well, if you are going to treat animals that you have to go through that process, because then there is a dual responsibility and I think it is really the key. If you look at legislation regarding animal cruelty it is pretty rigid and strict and you don't want to fall out of those parameters. People also underestimate the risk of what they do, because treat a race horse, but maybe they don't realize that those horses are worth 8 to 10 million rand. You hurt that horse and if you have got no insurance. Your malpractice insurance with the way it is now, you are not covered for animal treatment because it is not in your scope of practice and that is why the legislation needs to be put into place, because then you can approach the personal insurers, because then you can say that you are trained to do this as my scope and then obviously they need to change their structure, because if you do end up with a horse that gets hurt, there is going to be a lot of money involved with that sort of thing.

¶85:

¶86: **Association wise, would you recommend that maybe somebody from animal chiropractic and somebody from the veterinary profession be on an association?**

¶87:

¶88: So starting a separate Association which is?

¶89:

¶90: **Yes, almost like a para-veterinary association, if I use the example of the sports medicine course where they have a completely separate association and everybody just registers with them. So, people from chiropractic as well as people from Veterinary Council achieve, or are totally independent from the veterinary and chiropractic profession.**

¶91:

¶92: Yes, I don't know. I think your biggest problem would be numbers. To get an association going you are going to have quite a lot of people. I would say therefore it needs to be looked at, that once it is done is that there needs to be that the veterinary associations themselves or societies need to be approached to be asked to be allowed to be members, so that they could also go to workshops, or congresses or whatever and in that way get in, rather than wanting to start a separate thing, because that is really what has happened with SAMA. It is not a separate entity which is now chiropractic sports people, it is anyone interested in sports. It is physiotherapists, medical practitioners, chiropractors, massage therapists, whoever wants to be interested in sports, registers and they go to the same events and congresses and that obviously means that there is a lot of interdisciplinary communication as well and they are all getting the same information and that is what needs to be looked at.

¶93:

¶94: They need to try and get on with that, so that they can move towards that. I don't think a separate association would help at all, to be honest. I think it could be detrimental, because you know, it could actually make you side lined.

¶95:

¶96: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractic in South Africa? Why?**

¶97:

¶98: Once we reach a point where there is enough need for it firstly, but also where there is enough capacity within the country to do it then it can be started in the Universities that train chiropractic. I don't think it should be outside of that. You know, it can be done in collaboration like the University of Pretoria with Onderstepoort and UJ (University of Johannesburg) could collaborate to do it, where their expertise in terms of teaching of animal biomechanics and physiology and anatomy and basic diagnostic procedures are

trained by them and then we have the specialists in chiropractic who train chiropractic. So, the same sort of structure that we use within the Universities of South Africa is followed with that as well in the long term, but it needs to be done within the public institutions and control them, because then there is a level of credibility which is given to it, because it has to follow all the educational parameters of the specialization if you want to call it that way.

¶99:

¶100: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶101:

¶102: Well, I think maybe approaching them too much before we have gone through the Veterinary Controls Council is maybe a bit too premature, because ultimately it will always be a fallback position of: are you allowed to do it type of thing. I think that once we are at that position where we know that we can do it, then it needs to be done where they need to be approached and go to their congresses and do a presentation on what we do. I think at the moment, ultimately, it will still be a fallback position of are you really allowed to do it. Once we have the backing that legislation wise you are not transgressing any rule then it is much easier to approach professions, because we are not on the back foot. They are not going to ask you awkward questions of the training.

¶103:

¶104: With all of the council things. If you look at the role of what a council is, the role of the council is to protect the public. So the Allied Health Professions Council is not out there to protect our profession (chiropractic), it is to make sure what people do is safe and they don't hurt people. The Veterinary Controls Council, their responsibility is to make sure that people are safe and that they don't hurt animals. So from that perspective if something happens to an animal that is treated by an animal chiropractor and they see that this is what has happened, because there is no recourse to these people in terms of other legislation, that is the situation that is the worst scenario for any profession, because now you are in a position where there is no control and it is such a grey area and that is when they will say that that is it and we are taking it off the table and you may not do it and they can legislate and may not, much easier than they can register and yes you can. I mean, they can gazette very quickly that people may not treat animals, because they already have got the Act in place. They can promulgate it and gazette it very quickly and that is what you want to avoid, because then trying to get that reversed becomes a lot more complicated, because now the whole name of your profession is tainted already and that's why if it is in place and something goes wrong that spells out to that person who did wrong.

¶105:

¶106: So there is immediate recourse spell through one of the councils or both the councils, but it means that the people feel safe knowing that there is that control over what is happening, whereas now, there is no control, which means that the people are weary to do it because they are worried about that sort of thing.

¶107:

¶108: Q4.5 Where do see the profession in South Africa in the next ten years' time? Why?

¶109:

¶110: Looking at the international trends, I think there is massive opportunity to get it where we need to go. It will still be a small percentage of the profession that will do it; because our profession is small it means that the numbers will be small. There are less than 600 chiropractors in the country. So it means that in 10 years time we are going to look at maybe, maybe 800 chiropractors in the country and you know, if you are looking at 10 percent of that, it is probably not a lot, but 10 percent is probably way over estimating.

You are probably going to sit with 20 or 30 chiropractors that are going to be doing it and that is really where the discussion is going to come in about training in the country, because all institutions are based on money. It would be a non-subsidized programme and it will have to be financially viable to run such a programme and it will be envisaged to be long term, but if you are only getting one or two persons a year that are interested in doing it, is it really viable? And I think that that long term capacity is a thing in the profession as a whole, because the profession is small. I think there are less chiropractors than there are cardiologists.

¶111:

¶112: Chiropractic is a small profession and you need critical mass to be able to progress certain specialization, because there is no specialization within chiropractic in the legislation, because it is pointless to do that at this stage, because people can have an interest, but they can't specialize and I think in 10 years time, it would hopefully be legislated at a minimum that people can do it if they want to, with the right training.

¶113:

¶114: Q5.1 In conclusion, is there anything you would like to add, or anything that you would like to ask me that you feel is important to consider regarding animal chiropractic? Would you recommend to first sort out the legislation, put that in place and follow the right channels before you actually approach the SAVC?

¶115:

¶116: Yes absolutely, because it just protects what you are trying to do, because you don't want to go through a process and you end up where something does goes wrong, that inhibits whatever process that you wanted to achieve and also it means that once it is in law, it is very difficult to remove it, because it means that it is part of what you do, even though the risks are very low, a process still needs to be followed and I think for many years people who like to have been doing it just off the cuff and I think that you don't want any profession to be like that, because it degrades what a profession does and people just think that you are weekend seminar specialists and that is what you are coming in to do. Whether it works or not, they are still going to look at you at that level. So, in the long term, I think that it needs to be done and it has to go through that process.

¶117:

¶118: Thank you

¶1: Chiropractic Master's Research Project Questions:

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with SAVC1

¶4:

¶5: Q1.1 Preliminary questions regarding animal chiropractic in South Africa. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: Virtually non-existent. From a personal practice point of view when I was still in general practice I did come across that. Since being in academia, I do not actually deal with clinical cases of that nature anyway and from the Council's point of view, I don't recall it being discussed or having come up.

¶8:

¶9: Q1.2 What exposure, if any, have you had in terms of animal chiropractic? So have you at all heard about it?

¶10:

¶11: Yes, I have probably heard about it.

¶12:

¶13: Do you think it is basically chiropractic on animals, or what do you feel it is?

¶14:

¶15: Well, not having had human exposure to it either, I am probably very uninformed. I would imagine that it would involve a certain method of treatment of musculoskeletal problems, nervous or neurological problems.

¶16:

¶17: Q1.3 Would you have your animal treated by an animal chiropractor and why?

¶18:

¶19: Well yes, if it was somebody that was properly qualified.

¶20:

¶21: Q2.1 The next batch of questions regarding the role and scope of animal chiropractic practices in the South African veterinary health care setting. So, in your opinion, how would you define the role of animal chiropractic in South Africa?

¶22:

¶23: I think if you see it as another veterinary treatment option, definitely. I am just not too sure as to how people practicing chiropractic in animals would be authorized or allowed to do the treatment, because currently you have to be registered to the Veterinary Council to diagnose and treat animals. So while I see a role for the discipline, I am not sure that it would be practically possible. We needed to institute something like that.

¶24:

¶25: Is there currently a place where animal chiropractic can register at the South African Veterinary Council?

¶26:

¶27: No, there is no provision made for that.

¶28:

¶29: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?

¶30:

¶31: No, I can't really comment.

¶32:

¶33: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?

¶34:

¶35: I wouldn't be able to answer that.

¶36:

¶37: Q2.4 What conditions do you think are treated by animal chiropractors?

¶38:

¶39: Well, as I said and what I tend to associate chiropractors with back problems, so I would imagine musculoskeletal, pinched nerves, things like that.

¶40:

¶41: Q2.5 What conditions do you feel are not in the scope of an animal chiropractor? Please explain.

¶42:

¶43: Well, everything else (other than musculoskeletal injuries) (smile).

¶44:

¶45: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶46:

¶47: Well as far as I know there is no legislation regarding that. The veterinary and para-veterinary Act regulates what veterinarians and para-veterinarians are allowed to do and currently under that Act there is no provision made for it that are not qualified vets.

¶48:

¶49: Q3.1 The next group of questions relating to the inter-professional relationships between animal chiropractors and veterinarians in South Africa. Can you comment on the current collaboration i.e. inter-referral between veterinarians and animal chiropractors in South Africa?

¶50:

¶51: I am not aware of any such relationships.

¶52:

¶53: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶54:

¶55: I am not sure which law says that it is done specifically under veterinary referral, which legislation is that? There is nothing in the veterinary and para-veterinary Act that states that. I know that there have been informal discussions, not with chiropractic, with physiotherapists. In other words, human physiotherapists that want to work on animals and I think that there is a slow process going on there at this stage that is trying to determine how that can be done and also looking at veterinary nurses that are qualified veterinary nurses doing physiotherapy on animals and even that is not clarified and there we are talking of two qualified professions. So there is nothing regarding chiropractic at this stage and anybody who would be doing it on animals, would strictly speaking be doing it illegally. So, it would be important to start discussing a way of dealing with that so that it would not be done illegally.

¶56:

¶57: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶58:

¶59: It is difficult to comment with a complete lack of knowledge, lack of background knowledge that I have at this stage, because I don't know what sort of training animal chiropractors go through you know, so I really can't comment on it. The major obstacle would be to find a way to overcoming the stipulation of the veterinary and para-veterinary Act.

¶60:

¶61: Maybe somebody who is a qualified veterinarian and chiropractor can maybe bring something like that forward?

¶62:

¶63: Yes, yes that would be a very good starting point.

¶64:

¶65: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶66:

¶67: Again I can't comment because I don't know what an animal chiropractic practitioner has been taught to do and what the background is. So at this stage I would have to say a veterinarian, because they have the proper background in terms of anatomy, physiology,

pharmacology, handling skills, knowledge of behaviour of animals and those sorts of things and how to apply it.

¶68:

¶69: **Ok, yes. Let's say in the long run there could possibly be education for it. Do you feel from an educational point of view that if there are courses like your anatomies and physiologies that the chiropractic profession can engage in and possibly form something through that, if legislated?**

¶70:

¶71: There is nothing stopping a profession from being promulgated as a para-veterinary profession under our current Act and there is a process that has to be followed and if there is a qualification that is in existence that is training people that can then become the prescribed qualification for that profession, that can definitely be done.

¶72:

¶73: **Q4.1+4.2 The next group of questions regarding developmental issues. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own?**

¶74:

¶75: Well I think that it relates to veterinary issues and matters. I don't think it would be desirable to have it as a totally separate or independent organization. The Veterinary Council and I am not speaking on behalf of Council, I am a member of Council so I cannot give you any official comments, I can only tell you from the years that I've been on Council what we discussed and the knowledge of the Act obviously, but one of trends in Council is to be inclusive. Rather include under the umbrella of Council other professions that are involved with animals, so that they can all be included in the larger organization that can still possibly regulate themselves in a sense, it doesn't need to be a centralized sort of system. That is not the case at the moment, but this is something that Council has been talking about and that it is a feeling that should there be other professions that want to come aboard, that it would be welcomed, but obviously through all the right channels, the correct process.

¶76:

¶77: **In your opinion, speaking from an association's point of view, do you feel that if animal chiropractic would be instated, that it should be under veterinary association or should animal chiropractic seek its own association to represent itself?**

¶78:

¶79: Ok, so the association refers to not the statutory body. So the South African Veterinary Association is a separate independent organization and again no, it is not linked to Veterinary Council. It is a completely separate body that is represented on the Veterinary Council. Veterinary Council is the statutory body that regulates the veterinary and para-veterinary professions and the training standards and so on. It regulates the professions in the best interest of the animals, the profession and the public. It is like the Health Professions Council that deals with disciplinary matters, it makes sure that standard of training are up to standard, it registers professionals that have obtained their professional qualification, whereas the South African Veterinary Association is a voluntary organization where vets who want to be members of it will join so it represents majority of the vets in the country, it is not the only body in South Africa who does that and it is not a statutory body. It can't regulate the profession per say, it can represent a certain section of the profession and I would imagine that it is a veterinarian organization, where other professions have their own organizations. So I would imagine it to remain separate.

¶80:

¶81: Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa and why?

¶82:

¶83: Which ever tertiary institute wants to do it, I would imagine. I think it is a veterinary modality, so it has to be part of the veterinary science organization. The fact is that we have a programme currently, the BSc-programme that trains veterinarians with a broad base where they are capable of doing a lot of things when they qualify, whereas chiropractic is a specific thing and it focuses on one or two systems in particular and it has a specific methodology. So I would see that as an under sub-section of veterinary science. I am not too sure that it could possibly be offered at the same place where veterinary degrees are offered, but you know a university has to identify the need for these sort of things and it needs to be included in the budget and I don't see that as happening quickly, the faculty of veterinary science for example.

¶84:

¶85: So if there was another tertiary institute that wanted to offer this course and present it as a course for a para-veterinary profession like the veterinary nurses or animal health technicians, any tertiary institution can do that, as long as it is approved by the Veterinary Council. So you know if one looks at it broadly, anyone who is capable of doing it, can do it, but there have to be veterinary input, because I can't see it being done properly without some veterinary input.

¶86:

¶87: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa? So we mentioned before that somebody with both a veterinary degree and experience in the animal chiropractic field can come and bring it forth, or do a presentation.

¶88:

¶89: Yes, I think that could be good way to start, certainly with somebody within the profession that can explain it and create some awareness of that field and show how it works and certainly if courses are offered I am sure some practicing vets, I am sure that there would be quite a few that would be interested.

¶90:

¶91: Q4.5 Where do see the profession in South Africa in the next ten years' time?

¶92:

¶93: Well, it depends who does what. Certainly, you know, if there is good training involved and there is good cooperation between the veterinarians and chiropractors could be working side by side, but I think 10 years is a short time if one is looking into a real para-veterinary profession or incorporating it into the veterinary degree at this stage.

¶94:

¶95: Q5.1 In conclusion, is there anything that you would like to add, or that you would like to ask me, or is there anything that you feel that I haven't asked you?

¶96:

¶97: What sort of species is being treated?

¶98:

¶99: Yes, basically there is quite big experience in the field and a couple of clinical trials that have been done on horses. So specifically your race horses as well as jumpers and also small animals like dogs and cats, but theoretically I believe on any vertebrate is possible. The extent of research that has been done is not secure and the demand for the research is quite large. I think there have been one from the Durban sector and one from the Johannesburg sector of those chiropractic

students that actually got together with a vet and did research on it. I think one was for low back pain and lameness.

¶100:

¶101: Maybe it would also be an idea to do collaborative research with this faculty, because that would promote the field and create more trust, because people feel very easily threatened when somebody from outside says that I want to do this. So things can be done collaboratively for the benefit of the animals, because at the end of the day nothing could create a positive result, but I am just thinking, if it is human qualified chiropractors that want to go into the field of animals, it is actually analogous with the example of the physiotherapists that I mentioned earlier and I said there has been some process going on there, but we have to find out from Council's administration to dig up those minutes of those meetings and find out what was the outcome of that, because it would be the same sort of thing. Maybe one doesn't want to reinvent the wheel and maybe there are even other human trained disciplines who would want to in the future get involved with animals. So it might be worth while exploring ways for disciplines to work together, or that even a human trained professional can undergo specific additional training and then be either authorized or registered to work with animals. So there are ideas like that that can be discussed. I think the big thing is knowledge. If people know exactly what it all entails and they have got an opportunity to give input then it is more likely to being discussed. So I think if there are vets that are already doing it that is the best place to start to create awareness and they should speak at the conferences and remember other people can also come to the veterinary conferences and present papers.

¶102:

¶103: Thank you

¶1: Chiropractic Master's Research Project:

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with CASA1

¶4:

¶5: Q1.1 How would you describe your knowledge of animal chiropractic?

¶6: I would say probably average because there is no formalized animal chiropractic in South Africa at this point. From a personal point of view, I have treated animals before, so I have that sort of a background, but with no formal training. From a point of view of legislation, I know that there are steps have been put into place in terms of formalizing the whole ambit as a specialty, but then I also do know from an international point of view that there are various certifications and post graduate programmes that look at animal chiropractic or veterinary chiropractic on a international scale, so I would not say that I know allot, but I know that there is stuff happening.

¶7: Q1.2 What exposure, if any, have you had in terms of animal chiropractic?

¶8:

¶9: Yes, well I have only ever treated small animals, so, dogs predominantly, no horses or anything of that sort. The owners brought their dogs back because they thought the animals did get better (laugh/smile), so assuming that the animals showed some relief (laugh/smile).

¶10:

¶11: Q1.3 Would you have your animal treated by animal chiropractic? Why would you say so?

¶12:

¶13: I would say yes, it would depend on the type of animal obviously. Mostly the four legged variety would probably benefit the most. There are some animals that I think based on their lack of aerodynamic design, sometimes have issues that predispose them to back pain and that sort of thing, and also from a point of view of humans, humans obviously have certain biomechanical, I would not call them aberrations, but tendencies to musculoskeletal problems being bipedal. Where I think animals have a similar predisposition to musculoskeletal things based on their shape and form, that they have developed, but also from a point of view of musculoskeletal is also something that vets, like GP's tend to not focus very heavily on. So, it's an area or ambit where there is potentially room for growth, increase in dealing with animal problems and in some ways it is probably much like a colicky baby, where colic is defined as being something that we don't really know, it is a diagnoses by exclusion, but what is to say that the kid is not crying because they have neck or back pain. In the same way in animals go to show signs and symptoms of irritation, it is not necessarily anything that the vet looks at, it may be musculoskeletal.

¶14: Q2.1 With regard to the role and scope of animal chiropractic's practice in the South African veterinary health care setting. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶15: Much going back to the colicky example, I would say, if you look at a chiropractor who has been trained to treat animals that they would look at an area that potentially has not yet been looked at within the animal world, and I am figuring that the analogy holds true for a GP and a vets in terms of their assessment of musculoskeletal injuries in both their respective fields. They have some training, but maybe not a vast enough exposure to that type of condition that they actually fully understand it with the mechanics behind it. Not that chiropractors are necessarily the best people to take over, but I suspect that they have the greatest mechanical knowledge, which if trained appropriately could be applied most readily, in terms of the animals. But, I think that in terms of chiropractic, there is a field that could potentially open up, if done properly and if appropriately regulated.

¶16: Q2.2 Can you please comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?

¶17: It depends on the type of training. There are various training courses, some that last a whole month and others that take three years and currently in South Africa there is obviously nothing. So I think the best way forward for at least development in South Africa would be to look at all the possible training courses that are available, ensure that something is developed that looks at appropriate transitioning from human to animals, so going right back to anatomy and basic sciences as they may be different and structure a course that would be acceptable both by Chiropractic and Veterinary fraternities in terms of training and I don't think it should be a course that necessarily is only for chiropractors, it should be a course that also allows vets to be able to expand their own scope.

¶18: Essentially there would need to be some sort of a broad basic basis and then specialization into the various areas. So, in terms of the current training my gut feel is that the short courses are probably too short and the longer courses are predominantly from what I understand weekend courses so hence their length, it does not necessarily mean that they are any shorter or longer than the short course, need to be formalized in some areas they are, in some areas they aren't and in South African context particularly they

need to be within the education framework to have some form of valid recognition outside of the professions.

¶19: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?

¶20: Well, knowing the animal chiropractors in South Africa there aren't more than a hand full that formally treat animals. I would say that there are two of them that have years and years experience although no formal qualification, so their ability in terms of what they do must have accumulated through experience. I would think it would be unfair to say that their lack of training is necessarily at this point negatively impacts on what they do, because they would not continue in their field of treating animals if they were not getting results or benefits.

¶21: In terms of the younger ones, I think there are only perhaps three that have formal qualification in some way, shape or form and they range from a short course to a more extended programmes and I think they are having a variety of different experiences form good results to not so good results, and I do think that perhaps the type of exposure they have had and the type of practical training they have had is maybe part parcel of how much benefit they are getting and how their results vary from animal type to animal type. But not having looked at that in depth, I can't say that categorically.

¶22: I would therefore say that the younger people have less experience than those that have been there for many more years and I don't think that training, although has given them a taste of what they should be doing, has not necessarily given them the amount of clinical exposure that they should have had before they go out and treat animals.

¶23: So it is more a thing that you get with more experience?

¶24: I think so, purely because allot of what they do with treating humans or animals is like a motor development, so it is something that has to come with time and with practice, but I do think that there should be more exposure in some of the training programmes, because a two week exposure is almost zero, I don't know how many animals you can treat in two weeks.

¶25: Q2.4 What conditions do you think are treated by animal chiropractors?

¶26: I don't want to classify them as organic, but musculoskeletal is probably a better word. I don't think we have anything to say that we can treat non-musculoskeletal things in animals, we barely have enough information in humans as it is, but I would say we probably look at very similar biomechanical lesions or locomotor lesions that would be equivalent to what we have in humans. Although having said the non-musculoskeletal, there is not a whole heap of research, I do know that the chiropractors that do treat animals often report allot of changes in non-musculoskeletal lesions. So, maybe that is an area where a heap of research needs to be done just to document what changes and what happens, so there are effects, but anecdotal at this point.

¶27: Q2.5 What conditions do you feel are not in the scope of an animal chiropractor? Please explain.

¶28: At this point when we look at evidence based care, I would say, the non-musculoskeletal organic type conditions are most likely to be excluded until further

research show some benefits, purely because if the vets have a health management organization or medical aid for animals, they are going to apply the same principal.

¶29: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶30: At this point there is no formal legislation or legislation that currently exists is for humans only. I do know that there is a sub-committee of CASA that is currently working on trying to develop some form of legislation in conjunction with the Allied Health Professions Council, the Veterinary Council and the Veterinary Association. I don't know how far they have gotten. They were formally put on as a sub-committee in September last year, but since then there has been very little email communication unless they are just trying to source documents at this point in time. So there is work in progress. I think at the moment any sort of relationship that chiropractors have with vets is an informal relationship that abides by the current Veterinary Council laws where the vet has to screen the animals before hand and give approval for treatment. I don't think there is going to be much change in that side of the legislation, but at least from a protection point of view formal legislation for chiropractors would be essential in the long run.

¶31: To what extend do you feel animal chiropractors should have freedom to practice?

¶32: I think they should have the ability to practice, but they need to do so like any other profession within the constraints of the laws that currently exist. So if they are willing to consider laws or addition to laws within the Allied Health or a combination of Allied Health and Veterinary Council, they would realize that they would then either partial or not partial their practice depending on what they write and obviously once they put that law into place, they need to abide by whatever that is, so I don't think that there is necessarily any disrupting of freedom providing that they abide to what is theirs, if they don't, then obviously they are free to do what they want.

¶33: Q3.1 Questions pertaining to inter-professional relationships between animal chiropractic and veterinarians. Can you comment on the current collaboration, in other words inter-referral relationships between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶34: I think at present moment in time at best it is informal. I know that there are some issues with vets much like physiotherapists feeling like the chiropractor is intruding on their domain. So there is some animosity and I think that animosity in the past has only been fuelled by practitioners, chiropractors who haven't abided by veterinary law, where they have gone out to treat animals without the vet necessarily knowing about what's going on. So I think in terms of the relationship, the younger practitioner seems to be more in contact with or more familiar with the processes or both, so as to enable a positive relationship as to a negative relationship and having a look at a previous study I think that from the veterinary side that allot of past animosity and ambivalence is related to the fact that they have no idea what chiropractors do and therefore the perception of encroachment on their professional scope is greater, because they fear that more is going to be taken away than what they perceive. So I think from both sides there needs to be A: education and B: some form of communication to enable the integration to work together.

¶35: I think that their perception may be that there are more animal chiropractors than what there really are, if they knew that there were less than ten in the country they would

be less resistant towards it, or having been antagonistic towards it. But I also think that with legislation the common ground will be more transparent for all to see which also makes it a little bit easier for people to communicate. Wright now I almost think that the animal chiropractors are working as ghost practitioners and if you want a definition of that, go back to 1971 and you will know what ghost practitioners are (laugh), where they are doing work, but they are not formally in any structured process.

¶36: Q3.2 According to current legislation animal chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶37: At this point I think that it is probably the safest route to follow, purely due to the wide variety of training that they have received and in my mind also it is almost like having a partially supervised experiential training where the vet can at least exclude any serious pathology that the chiropractor may be completely oblivious to. In that way I think it is better until such time that there is some sort of formal training that is in this country that includes disease processes that are not necessarily musculoskeletal in origin, it could be tumours, cancers whatever else it may be. At this point it is a suitable transition phase for animal chiropractors and obviously the debate around whether stated goals would be part of the process going forward.

¶38: Q3.3 What are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶39: Well I think the baseline is communication, and then transparency. In terms of communication and that goes both ways. In terms of the vets that are expressing their need to know more, as much as the chiropractors trying to explain what they do. In terms of law, I think there needs to be some form of common ground in agreed to legislation that needs to be put in place. In terms of formal education, I think there needs to be something that everyone in the South African context is happy with, although you might want to benchmark on what international practice is at this point in time, I think that there needs to be some sort of formal adoption or something that everyone here is happy with, because if you are going to benchmark on something that is a two month course, the vets are not necessarily going to be happy with it because it happens in chiro does not mean to say that the vets are going to be happy with it.

¶40: You might need to benchmark on an education framework, agree on that, and then form a programme, because then at least in terms of education standards the two groups know what the structure is what we are happy with and then you fill the structure with what you need. But again, it has to be a process where everybody gets to sit around the table and everybody gets to input on the process. Trying to develop in isolation as chiropractors is not going to help the perception that vets currently have, it needs to be inclusive and that sometimes is where as chiropractors we fall short, particularly with no disrespect to the older chiropractors, but they tend to work more in isolation because that's been how the profession has developed. So, we need to try and make sure that if there are people in the committee that are that way inclined then we at least balance with them and then of course I think even prior to getting together a committee, we need to at least educate the people sitting on the committee as to what chiropractors do and allow them to understand that we are not taking away from what they have, we are trying to expand what is available to the animal.

¶41: So, in those terms I think that is probably the two biggest things, other than that I think it is just a matter of explaining numbers, geography, type of animals treated, that sort of thing to the veterinary populous.

¶42: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶43: I think that is a play on semantics quite frankly, because if by chiropractic you are only referring to manipulation then unfortunately manipulation is not only the domain of chiropractors. It is a technique or a method of treatment that any profession can use. Ideally though chiropractors tend to pry themselves are being the ones that can do it best and look at it in a conservative manner in such a way as to prevent further surgery or other sequelae that may result from the condition that the animal have, but that doesn't mean to say that like orthopaedic surgeons now manipulating under anaesthetic that there won't be sub-branch that develops within the veterinary sciences and that is something that you could perhaps control by legislation but the best you could have is title protection, so you can be a chiropractor and you can be linked to the scope of chiropractic, but you can't title protect manipulation, because that is a technique it is not a profession. So I don't think and that is why I said earlier, if a course was developed then it should be equally accessible for both professions, because it is not like a veterinarian is now going to try and adjust humans. They might (laugh), but it is not likely because they have no need to assess a patient, but I think that if both groups have a similar level of training up to a point in terms of the basic sciences in each of their professions and they do a post graduate then it is something that both can access with different amounts of prior knowledge.

¶44: There should be no reasons why both groups can't do it and I think again that it is one of things where if both groups do it you have a common ground and you understand one another and you have a way of moving forward. From a chiropractic point of view, people will probably resist that, from a veterinary point of view they will probably have like the physio's where they do weekend courses, of the almost 10 000 physio's in the country, I think maybe a handful of 100 actually do manipulation, because that is not their bread and butter, that is not where the focus of the training previously has been. So, I don't think that it is a threat to either side it is just a matter of people feeling comfortable. So going back to your question, I don't know whether the word chiropractic in first manipulation or manipulation and a whole bunch of other things, but if it refers only to manipulation I don't know whether we could isolate it to ourselves just because we call ourselves chiropractors.

¶45: Q4.1 The next questions regarding the developmental issues of animal chiropractic in South Africa. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.

¶46: I have got no problem with that provided that they make sure that at each point they follow due process and that they include stakeholders that should be included in that process and that would be the Veterinary Association, the Veterinary Council, potentially any international veterinary body if there is such a thing and then of course also from a chiropractic point of view making sure that the Association and the regulating structures, WFC (World Federation of Chiropractic) if necessary is included in that process, because long term, and I am talking long term probably 15 to 35 years from now, animal chiropractic may be in a position where we as a profession are now looking at a standardizing education across the world, we might need that at some point later. So, we

might need to look at least lodging it with international people, so that they know that there is a process and that it is happening, but everyone in the mean, those are just the two professions, you still then have the educational structures and the laws and regulations that are requested to them, so you might need to then also include someone from those areas, doesn't exclude or include physiotherapists that work with animals, it doesn't exclude or include occupational therapists that work with animals, so the broader the input, the better the output.

¶47: I think it would have to lodge with the respective profession, so if it is a physiotherapist, with the HPCSA if it's a chiropractor, with the Allied Health Professions Council because ultimately the base training for each of those professions is going to be human based anyway with a post graduate specialization. So there would have to be a base line registration with the required statutory council, so the Allied Health Professions Council in the first instance. Whether or not there would be a dual registration with the Veterinary Council would be something that would have to be up for debate, unless the Allied Health opens a sub register which notes who are animal chiropractors and sends that list to the veterinary council so they at least know who is within that domain, legal or not. But it would have to go back to the parent body in the first place and then to the subsidiary.

¶48: What may happen with the association is that if they have a sub group of people who are interested in animals they may then allow anyone with post graduate training in other fields to join that sub-group, but as an association they then have to go by their by-laws and rules which are different to that of the statutory people. So, there may be an informal gathering of various forms disciplines, it might be like SASMA, SASMA is one of those groups or associations that have come together as result of people from various different professions wanting to become involved in sport, so their central theme is sport. So it may be that in the future you may have that sub-group of what is now the Veterinary Association forming an allied veterinary, or whatever you want to call it, a separate association that deals with all practitioners involved with animals as opposed to just vets. So you may in 75 years have a veterinary association and an animal association for anyone who treats animals. So SASMA is the South African Sports Medicine Association, so they have no affiliate parent. The only requirement they have for belonging to SASMA is that you are registered with your statutory body and that you have a post graduate sporting qualification.

¶49: **Q4.2 In your option what legal body should animal chiropractic register with? Please explain your answer.**

¶50: Yes, I think again, you would have to like in the SASMA instance have them register with their statutory body, which is normally their principal qualification. So chiropractors will go with Allied Health and Biokenetisists to SBCSA, vets to Veterinary Council and if they have a post graduate qualification then belong to an Association group that is specifically for that interest or discipline. It doesn't mean to say that the statutory councils between them don't have something whereby they submit to one central group who their respective practitioners are.

¶51: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? Why?**

¶52: It will have to be a programme that is registered with the department of education, so it will reside with the department of education and the council of higher education. In terms of who would govern it, it would depend on which University would take ownership of such a programme, because once it has been registered then it is encumbered on the people that have put it together to find a University that will run the programme and that particular University would then have an advisory board made up of individuals that put the programme together, at least initially. So, it would kind of managed by that group of people and that University in the way forward. Ideally, but practically not always possible, it would be best to have that course run at a University that has neither affiliation with chiropractors or vets.

¶53: Purely because it is a natural arbiter and it is much like the whole NSAIDS course problem that we have at the moment. We are trying to put that post graduate course together and we have chosen a University that is willing to run with it, that houses neither chiropractic programmes, because it's an independent University that will run with it, it will have an advisory board and it will have the minimum education standards by which it has to run. So, based on that model, ideally if you don't want to force increased tension or overcome the animosity at least for the first couple of years, have it in an institution that is able to provide the resources, but is neutral in its delivery.

¶54: **So you feel that everything should be independent regarding to the legislation.**

¶55: Well I think just to deal with the historical issues, it would make it allot easier, because then there is no pull to want to dominate from either side, which can be concerned in the long run depending on who sits on the board and what sort of pull they do and don't have, so ultimately it is to eliminate the personal and potentially the professional clashing that could happen.

¶56: **Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?**

¶57: I think the biggest is communication and then obviously following the whole process to get the appropriate legislation, so that everyone feels like they all have been catered for. Any form of educating them, whether it is newspaper, journal, articles, going to the veterinary conferences and providing papers fall under whatever it is just something just to get it out there. It needs to be consistent. It needs to be saying the same thing the whole time. You can't just have a Joe Blogs coming along and says that you can adjust C0-C1 and you will be fine, or the animal will be fine. You need to have good research, solid research that can stand up to scrutiny and it needs to be a systematic approach, so the group that goes with it needs to decide are we going to go with media, are we going to go with conference presentations or are what are we going to go with and how they are going to deal with a variety of activities.

¶58: In my mind the most effective are well arranged conference proceedings where you can interact with the people. In terms of print media, allot of people just don't read it. If they don't have an interest in it, it is not going to go very far. They will stick it on a shelf and it will stay there, if they even subscribe to it. So, in my mind the conference proceedings is probably the best way of getting to a group of people, or at least getting them to talk.

¶59: **What about a platform? Internet-based.**

¶60: Again it assumes that all people have internet. Just looking the chiropractic profession, there is a handful or 10 percent of the people don't have no communication via

email and those are normally the people that have the greatest resistance towards change, purely because they do not have access to that type of information, but being limited in information they might be at the conference and also another advantage of being at a conference is that if the Association sends out summaries or things promotional material, you get it without it being a cost to yourself. So you have got to think about the gains that are unseen.

¶61: Q4.5 Yes, yes, thank you. Where do see the profession in South Africa in the next ten years' time? Why?

¶62: From an animal or a veterinary chiropractic point of view, I think it depends a large amount on how well the group of animal chiropractors becomes and how willing they are to push their own agenda forward. If I look at the non-steroidal anti inflammatory crowd and the Biopuncture crowd it has taken them exactly 8 years to get where they are now. If they listened to what they were told in 2004, they could be 5 years ahead of their agenda at this point and that is to go through the process of formalizing things and going through the process properly and register qualification and to make sure if they are above board and transparent with everything they do. So it depends on how responsive the animal chiropractors are to what they are being told and whether or not they are willing to follow through with the process, because the process is like a proposal research project. You hand it in, then you have to wait until you get it back and then you have to do your corrections. So it is a similar type of process that they will have to go through, but obviously there will be waiting periods and public comment periods and things like that which can be frustrating if you are pushing an agenda quickly. So stay in power and making sure it happens. If they do that, then they could be in a position that could potentially better their overseas counterparts if they do it properly.

¶63: Learn from the mistakes that they have made and move forward and they could also potentially put together a model that others could follow and when they look back, they would say that these are the steps that they should follow. In terms of the profession generally, I do think that there will be at least 3 or 4 areas of specialization that will have developed and when I say specialization, I mean for us as a post-qualification that would be, say sport, NSAIDS, or animal, or paediatrics or those type of things and I think in South Africa is only starting to get to the point where there only now is sufficient of us to become specialists in particular areas. Up until now we have purely been trying to feed the need and now people are trying to find nuances of things they actually have interest in. So, there might be more, but then again the professions will be a part of the same process of getting their qualification properly approved. So, in that way, the Biopuncture people as an example, they are 3 years behind the NSAIDS people and they might only get there later and it might not even be Biopuncture when we get there in 10 year's time and the reason I am saying that is because the Control's Council is putting a schedule together for homeopathic things and stuff that is not scheduled. So, we might have to follow the NSAID route more closely than the Biopuncture by the time we get to that point, because you might get homeopathic schedule 5 that you can't access. So, it also depends on where the global legislation goes, but in terms of potential, there is a huge amount of potential. It just needs to be managed properly to make it happen.

¶64: Q5.1 In conclusion, is there anything you would like to add?

¶65: I think the one point that you raised was the one where you have got to learn from past experience. They need to thoroughly investigate all the other courses, all the histories that are out there with animal chiropractic and make sure that they don't make the same

mistakes and if there are mistakes, try and improve on them where possible. I think the biggest thing is communicating with all the relevant parties and not those that are traditional and non-traditional relevant parties. I can almost guarantee you that they probably have not thought about including physiotherapists behind those other people that are trying to work on animals at this point and if you find anybody that is strong in the physiotherapy field as education goes who happens to treat animals; that is a strong ally, but that means breaking the mould and thinking outside the box.

¶1: Chiropractic Master's Research Project Questions

¶2: “An exploration of the current status quo of animal chiropractic in South Africa”

¶3: Interview with AC1

¶4:

¶5: Q1.1 Preliminary questions regarding animal chiropractic in South Africa at this point in time. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: I have done a one year course in Germany to obtain my qualification and will be qualified by the International Veterinary Chiropractic Association this coming August when I have to go overseas and sit for my exam, which is very expensive, but in the bigger scheme of things it makes sense to be properly qualified and not just have the certificate of that school. It is also good to be properly affiliated.

¶8:

¶9: Q1.2 What exposure, if any, have you had in terms of animal chiropractic?

¶10:

¶11: Yes, basically it is what most vets that are having additional qualification are doing. So there are a fair number of different courses and the one that I went to that is a one year module, is the longest one that you can find, because most of the other ones overseas are very short, which is necessarily not the proper qualification.

¶12:

¶13: Q1.3 Would you have your animal treated by an animal chiropractor and why?

¶14:

¶15: Yes and I mostly do horses because of the practice that I am running and very occasionally I do a couple of dogs and the problem is that the dogs I end up seeing are usually the ones that are completely hopeless cases. If you have a full grown 2 year old Great Dane, that will do well with chiropractic. I can alleviate a little of their thoracolumbar pain that they might have, but for actual problems in the neck, there is not a lot that I can do. So it is 99.9 percent because of the practice that we are running we are exclusively equine and .01 percent dogs. I do like 2 dogs a month, if that.

¶16:

¶17: Q2.1 The next set of questions regarding to the role and scope of animal chiropractic practice in the South African veterinary health care setting. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶18:

¶19: There is definitely a place for it. I find it in my day's work hugely beneficial because I do mostly lameness in sports horses and that was the only reason why I actually went on a mission and basically taking a year off and doing the qualification, because in the latest exam, with nerve dogs and joint dogs you always get to a certain point where you are missing the whole back issue. Especially in the performance horses like upper level dressage horse and the whole neck thing. So, in our work or in my line of work it is hugely

beneficial and has its point, the problem is that the qualification of an animal chiropractor is often times not required. In the way that I have seen a lot of horses that are just lame horses that have been seen by their chiropractors 150 000 times and basically they have been treating just a lame horse what is not suppose to happen and that is why it is better that the Vet Council is looking a little bit more into things to make sure it is under the supervision of a vet.

¶20:

¶21: **So you feel there is a definite need for it in the country?**

¶22:

¶23: Yes, no definitely, but they need to be properly qualified and they need to know what they are doing and not just do human chiropractic with some weekend courses and then think they can treat these horses.

¶24:

¶25: **Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?**

¶26:

¶27: My opinion is that a lot of the human chiropractors are not properly qualified to work on horses, because you do need, especially for performance horses, you do need a fair understanding of anatomy and physiology. I am a vet, so that is what I study for 5 and a half, 6 years, so we already have the techniques and I think there are exceptions. I don't want to talk cliché's because there are good people like in any profession, but I think a lot of them are lacking basic anatomy and physiology.

¶28:

¶29: **Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals?**

¶30:

¶31: No, I don't think so. I think that animal chiropractors that have obtained an International Veterinary Chiropractic Association degree are better, yes, definitely better, because also to get initially supervised you need a lot more horses. So there is for example one animal chiropractor here, he is very good and we actually work very well together. So, definitely, those ones are definitely better. I don't think that you necessarily have to be a vet to be an animal chiropractor, because there are for example good physio's that are not vets that are doing a very good job. As long as they have the proper background and done courses in their profession for a long enough time, then I think it is fine.

¶32:

¶33: **Q2.4 What conditions do you think are treated by animal chiropractors?**

¶34:

¶35: I can only answer the horsey part, because I deal with horses and that is usually the saddle, like sore back, not bending the one rein versus the other rein, disuniting in a canter, usually riding issues. Definitely much more musculoskeletal and mostly really these things under the saddle, that people pick up. So, the problem is if the people would have known that their horses were lame then they would not call the chiropractor out, they would call the vet out. So, very rarely I would have a scenario where the horses is actually head bobbing lame and that is why they call out the chiropractor. I do have cases where the chiropractor looks at a lame horse and just does not recognize the lame horse.

¶36:

¶37: Q2.5 What conditions do you feel are not in the scope of an animal chiropractor and please explain?

¶38:

¶39: Lameness, because majority of lameness in horses is distal end lameness and is mostly in our case population we have thoroughbreds off the track. So most of the horses it's wear and tear so they are getting osteoarthritis or it is soft tissue in their wrist that is catching up with them. So from all the lameness probably 1 percent is something that you can actually address with chiropractic, if however you take out this whole pelvis rotation thing that is a whole different thing. Usually if they are rotated in the pelvis it is not to the point where the owner is picking up lameness. I can see that the horses are not taking the first stride out on the side which it is rotated upwards, but the owner is never going to see that. So most of the proper lameness are distally located. In horses we see very little organic conditions, because I think that will be a lot more common in small animals that you have a connection between lumbar pain or subluxations and bladder issues.

¶40:

¶41: Q2.6 What is your current knowledge of the legislation regarding animal chiropractic in South Africa?

¶42:

¶43: They have to work under supervision of a vet and the Vet Council is a lot more strict now compared to years ago. Regarding the future it is difficult to say, because it might go the same way as horse dentistry for example. They might change the legislation at one point to the point where only vets are allowed to treat horses, because at one point there were a lot of lay dentists around that were treating horses with floating teeth and they might actually change it to the point where only vets are allowed to do teeth and they might do the same with chiropractic.

¶44:

¶45: Q3.1 Questions pertaining to inter-professional relationships between animal chiropractic and veterinarians. Can you comment on the current collaboration, in other words inter-referral relationships between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶46:

¶47: Depends very much on the individual person that you are working with, for example, I work very well together with Dr. Palmer. If he thinks he is working with a lame horse, or he has seen a horse for a couple of times and he just doesn't get anywhere he calls me up and we have a look at the horse together. He is one end of the spectrum. With him it works perfectly well, there is another who's name I really don't want to mention. He also has been in a little bit of trouble with the Vet Council, because he really is not working under supervision of a vet at all and with him there is absolutely no feedback whatsoever and I know that he has been looking at more than a small number of just lame horses and obviously that is not suppose to happen and I suppose that if that happens a couple of times, people are not going to call out a chiropractor anymore, because they think that it doesn't work and that chiropractor has been sitting on that horse for like 6 months and the horse is still lame.

¶48:

¶49: Sorry, just to highlight this fact, you mentioned that in South Africa the practice should be under veterinary supervision. Do you feel that it should be constantly like that? So that the vet should be there all the time?

¶50:

¶51: Not at all, because it is a time issue for both partners. It is very difficult to schedule properly. I think it is 100 percent ok if the chiropractor goes out and looking at a horse and then even treat it to see where it goes.

¶52:

¶53: **Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?**

¶54:

¶55: I very much support that. Again, especially with horses, there are a lot of issues that are with chiropractic very limited. For example, like a very big thing for us is lameness and lameness is very difficult to treat with chiropractic. So, I think it must be like that.

¶56:

¶57: **Q3.3 So, in your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?**

¶58:

¶59: It is mostly just the people, because usually there is not an issue whatsoever, usually we work well together to a point where even if I am a chiropractor as well and if I know for example that Dr. Palmer has seen a horse for chiropractic, I would never treat that horse for chiropractic. I will always send them back to him. So, as long as you behave professionally with each other, I think there should not be any issue.

¶60:

¶61: **Ok. Do you maybe feel that there is a lack in exposure at all from the veterinary side regarding animal chiropractic?**

¶62:

¶63: Yes definitely, especially a lot of the older vets will know absolutely nothing about chiropractic, but part of the problem is also mindset, because a lot of the older generation that are close to retirement now, they are notoriously, I don't want to use the word small-minded, but they are not specifically open to let's call it alternative therapies. So, there is very good exposure like on all the bigger conferences there is always a topic on alternative therapies, being acupuncture or being chiropractic. So for those, it is just a matter actually attending those conferences because often times their mindset and they just don't go to conferences anymore.

¶64:

¶65: **Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?**

¶66:

¶67: Both is fine, as long as they are properly qualified and have the proper background and information.

¶68:

¶69: **Q4.1 All right, questions regarding developmental issues. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? So, do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.**

¶70:

¶71: Either way is fine, as long as there is somebody responsible. They can have their own association as long as it is recognized and as long as there is just one body and not 25 different ones. It doesn't necessarily have to be under the Vet Council, like strictly under the Vet Council. If they had their own governing body that can hold those members responsible, that is 100 percent fine, because it would be the same thing, there is not much difference. As long as there is one governing body.

¶72:

¶73: **Q4.2 In your opinion what legal body should animal chiropractic register with?**

¶74:

¶75: They should yes. Yes, they should definitely. Any member of any health profession, I think should have a governing body, whatever it is. It doesn't necessarily have to be the Vet Council.

¶76:

¶77: **Ok, so with the actual association that represents animal chiropractic. There is the Veterinary Association of South Africa and Chiropractic Association of South Africa. Do you feel that it should fall under each one of those or completely separate than that?**

¶78:

¶79: I don't think it matters much, which association you are a member of, I don't think so, as long as they are properly represented.

¶80:

¶81: **Ok. Do you feel like from both sides there should be people that establish, are you quite happy with something like that?**

¶82:

¶83: Yes, yes.

¶84:

¶85: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa and why?**

¶86:

¶87: That is a difficult question and I think that you are years away from answering that question. I mean you obviously need instructors, you need properly qualified people that have been working in the field for years that have that amount of experience that can train other novices. It could be the same as overseas. It could be pretty much an independent school, however it must be affiliated with International Veterinary Chiropractic Association to have the proper curriculum, because otherwise it always ends up being these ridiculous weekend courses or short courses, which I think for the profession they are really bad.

¶88:

¶89: **Q4.4 So, what further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?**

¶90:

¶91: Number one is, the people that are doing animal chiropractic they need to be good in the field and they need to actually properly communicate with a vet from their side and from the vet's side and I think most of the young vets are open-minded for alternative therapists, but the older ones they need to have a bit of a different mindset maybe. So I think it is a little bit of both.

¶92:

¶93: **Q4.5 Where do see the profession in South Africa in the next ten years' time? Why?**

¶94:

¶95: I think it will improve, because the interest is definitely there. So as long as they make an effort to get proper qualification I think it will grow and there is definitely a need for good, good animal chiropractors.

¶96:

¶97: **Q5.1 In conclusion, is there anything you would like to add, or anything that you would like to ask me that you feel is important to consider regarding animal chiropractic?**

¶98:

¶99: No, not really. I think we have gone through most of it. For me, for my daily practice, it is hugely beneficial and together with the lameness exams that I am doing it is a big chunk

of my daily work. So for me, it is definitely worthwhile and I see very good responses, definitely, very good responses. So for me, it is fabulous and I really enjoy it.

¶100:

¶101: Thank you

¶1: Chiropractic Master's Research Project Questions:

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with AC2

¶4:

¶5: Q1.1 Preliminary questions regarding animal chiropractic's status in South Africa. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: Very good, I am a certified animal chiropractor. I studied in the States at Options for Animals in 2007 and I completed their examination board and then I also went to do my International Veterinary Chiropractic Association exam, so I got my accreditation from them too.

¶8:

¶9: Q1.2 What exposure, if any, have you had in terms of animal chiropractic?

¶10:

¶11: Well, it is a small world, so really, you know it is all word of mouth most of my practice. I also have been on television, I have had a half a hour interview on TV and I have been on radio, 567 Cape Talk.

¶12:

¶13: Q1.3 Would you have your animal treated via animal chiropractic?

¶14:

¶15: If it was me, yes.

¶16:

¶17: Do you believe it works?

¶18:

¶19: Oh absolutely. The proof is in the pudding.

¶20:

¶21: Q2.1 Questions regarding the scope of animal chiropractic, especially in the veterinary health care setting. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶22:

¶23: Nonexistent. I have been in the animal world for about just over 4 years maybe 5, and at the moment there is very, very little regard for animal chiropractic, but one thing you have to understand, it is exactly like the human world where a GP will not just refer to a chiropractor, they will refer to a particular person. The same thing happens in the veterinary world. Is that they will not just go: "Oh go see a chiropractor". They'll say, "phone Dr. Riedel", because there have been too many unqualified people, too many mistakes, too many problems. So I build up a very good referral basis, but it is because of me, not animal chiropractic perse because of what it has been portrayed as in this country, as kind of any hack can do it.

¶24:

¶25: Q2.2. Can you comment on the training of animal chiropractors in the assessment of animals?

¶26:

¶27: There are 3 good schools. One in Germany, two in America and there is a brother school in England. They are the only ones I would really look at. I believe in old school chiropractic as far as animals go, not the use of machinery, activators and things like that. Hands on, diversified if you really want to go with that and they are really big on diagnostics, it is a very well integrated course, at least half of their students are veterinarians that learn about chiropractic, and they are very strict. So, you need to get 70 or 80% to pass and during your course you have, every module you write an exam and if you don't get 70% for that exam, any of those exams, you can't write your final. So it is very strict.

¶28:

¶29: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?

¶30:

¶31: If they have attended those schools, yes they do. Anybody beyond that, no I don't, because I don't think that the level of education or the practical element is enough. In order to be qualified as an animal chiropractor or go and study, you have to be a certified chiropractor or veterinarian. So if you are an animal chiropractor, you can also actually hold a Doctor of Veterinary Science. So you don't have to actually be a chiropractor perse that is a miss conception, because I have a load of friends that are veterinarians in the states, who are animal chiropractors.

¶32:

¶33: Q2.4 What conditions do you think are treated by animal chiropractors?

¶34:

¶35: Feline I see more organic cases and problems with their tails, because that is their balance control. They are not so bad, we don't see many cats, dogs, lots of lameness, lots of degeneration, arthritic changes, disc injuries, and cervical facet syndromes. Horses we see lots of performance based injuries. I would think the best way to cover most things, because anything from lameness to saddle fit to facets to Sacroiliac's. You do get many warm bloods that have a lot of problems with jumping. Endurance horses that have issues because of the distance, mainly trauma and overuse and then degeneration in the older years.

¶36:

¶37: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶38:

¶39: There is almost none. Reason being is that there is no banner for us to fall under. You can't register and there is no legislation for us. So, with the Veterinary Council you either have to be or fall under basically vet nurses, which we are not or veterinarians, there is no other parameter perse. What I do in my practice is I get a veterinary referral for every animal that comes through my door, so they need to get a referral from their vet in order to see me first.

¶40:

¶41: If there was a place where you could belong to or register?

¶42:

¶43: With pleasure, I would welcome a place for animal chiropractors to register under Veterinary Council it in fact, because it will get rid of the 'rubbish' basically and in order to become part of something you would have to have the correct qualification. So I would welcome it with open arms.

¶44:

¶45: Q3.1 The next batch of questions just regarding to professional relationship with vets and animal chiro's. Can you comment on the current collaboration in other words inter-referral between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶46:

¶47: I can't comment on South Africa in general, because I don't know, but personally it has taken a long time to build up, or to gain respect from the vets, or certain vets. Some don't want to know at all because they are very straight and they are not interested in alternative or any other techniques. Exactly the same as the medical profession. So you get a bit of each. Then you get the guys that are a little bit interested and then you make a big difference and they become more interested and then the guys that are more holistic based, who are interested. So I have got a good base of referral from vets. Look, they are either going to accept you or they are not, and you are not going to change the world. They either are pro or they are not. They open their minds or they close them.

¶48:

¶49: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶50:

¶51: I agree with it. I think that if there was a place made for us it wouldn't be so necessary, so you wouldn't have the hassle, because you would also know what you can and cannot treat. So diagnosis would not be a problem, but currently because there is no legislation and almost anybody can pretend to be one, it has to be in place, which is exactly why I do what I do and also you don't want to be the fall guy. If something goes wrong, you want it to have been checked out by the vets first to eliminate organic issues, or anything else, because you are only really looking at the musculoskeletal issues. Body language is the most important and watching gait and gait analysis and reflexes and things like that. You do get a very different feel than if you just have a pet that you play with, but yes, ultimately you want to have the organic clearance from the vet.

¶52:

¶53: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶54:

¶55: Lack of legislation and mindset. Vets have been taught and they believe that the only way is the allopathic way and if they can't find it on an x-ray or they can't fix it with a drug then it is not fixable. Only until when they have had good exposure to something like chiropractic, do they start changing their mindset.

¶56:

¶57: Q3.4 In your opinion who should perform animal chiropractic, veterinarians or animal chiropractors?

¶58:

¶59: Anyone who has studied and is capable, either or. I have seen both and both can be equally good or equally bad.

¶60:

¶61: Q4.1 Developmental issues regarding animal chiropractic. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own?

¶62:

¶63: I think it should be both. I don't think it has to be complicated. I think it has to be, this is what I studied this is what I have done; this is how I am up to date. You know, you are

never scared if you have the right stuff. You only really doing a baddy if you haven't got the qualification behind you and those are the people who are more scared and nervous about this, because if you have done the graft, it doesn't matter which side of the fence you are on and in fact both sides should want the legislation, but it works from both fronts, that would be ideal and it has to be recognized by both. I think that it is a good thing. As long as it goes across the board into the veterinary world, because it is pointless having some sort of legislation under chiropractic when we are still not even accepted on a veterinary front, because it needs to be concurrent with both fronts. I think it is important within the chiropractors, yes, but I think it is more so important on a veterinary front.

¶64:

¶65: **So you would want someone from each profession to sit on the board or something like that?**

¶66:

¶67: Yes, someone from each profession sitting on the board or have a list of qualifications which have to be adhered to. Yes.

¶68:

¶69: **Q4.2 Ok, in your option what legal body should animal chiropractic register with?**

¶70:

¶71: Both the Veterinary Council and the Allied Health Professions Council.

¶72:

¶73: **Q4.3. With no current training for this profession in this country who do you think should be responsible for the education of animal chiropractors in South Africa?**

¶74:

¶75: I think the individual needs to be in charge of that. So if you really want to be an animal chiropractor you need to go overseas and study it. There is not enough people to teach it in South Africa. This is huge undertaking and until you have really seen what they do overseas, it is not the same. So you need to have the facilities, you have got to do dissection, you have got to do chiropractic sections, you have got to have it in a place where people are for one not just lecturers, they do the deed and there is not enough people in this country to do that and there are not enough good people in the country who would be willing to sacrifice their practices to teach.

¶76:

¶77: **Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?**

¶78:

¶79: I think educational type stuff would be good, if CASA could get involved to send out educational things, but ultimately it comes down to the personal experience of the vets. So, if they have had a good or a bad experience. Media-based advertising is a waste of time. When you get into human practice one day you will realize that you actually need no advertising budget, because it makes no difference and everything is word of mouth. So, it works exactly the same in the animal field, you are your best advert.

¶80:

¶81: **Q4.5 Where do see the profession in South Africa in the next ten years? Why?**

¶82:

¶83: It will definitely grow. There is a huge need for it because it is an evolving trait and people are becoming more holistic in everything. From raw food diets for their dogs from their kibble-based food. To holistic vets, to acupuncture that is growing in the animal world. Everything is evolving slower than in the human world, but it is evolving into a more natural holistic front, so people will be looking for more alternatives than just putting their dogs on

Rimadyl when it becomes arthritic. One of the things that you have got to realize is that animal chiropractors will never and never should intend to take the place of veterinarians. We work concurrently with them and we don't work individually, which is why I think referral is a fantastic thing. You can't just assume that doing something on your own, you need to walk hand in hand with them. So, the more attraction that you have with each other the better for both the animal and the owner and everybody who is involved.

¶84:

¶85: Q 5.1 In conclusion, is there anything you would like to add, or anything that you would like to ask me that you feel is important to consider regarding animal chiropractic?

¶86:

¶87: If they really want to legislate animal chiropractic in South Africa there has to be very clear rules and regulations. So, you can't take a whole stack of different techniques or a whole stack of different educational levels and try to integrate them. There has to be a higher level of understanding in education in order for us to gain any sort of recognition in the veterinary world. You can't go off and do a couple of weeks courses and think that now you are a certified student, because in the world that I am in more than half of my practice is animals and I specialize in stud and racing horses. Now those horses are worth more than you and I ever will be, ever, and if you start having people coming in who lack education on any level...

¶88:

¶89: I believe there should be an examination for your practical component additionally to what you have done, so that the people can see what and how you treat and that it should be necessary that you do need a international recognition to work here, because that is the only way you are going to maintain the standard and the biggest trouble so far is that the people say that: "I've had this chiropractor, I have had that chiropractor and the horse doesn't get better, the dog doesn't get better", but it is because the people are not doing it right. It has got nothing to do with chiropractic.

¶90:

¶91: The next logical step? Is to be recognized first and then maybe put a council together?

¶92:

¶93: Well that is what the Chiropractic Task Force is working on at the moment, is to try and get some sort of banner where we could fall under. In this country it is going to be slow and I think it is going to be disorganized for a few years still to come. I just hope that people don't become opportunistic in that time, but people aren't stupid either and it is just like I said. It is a very small world, so everybody get to know each other.

¶94:

¶95: Thank you.

¶1: Chiropractic Master's Research Project Questions

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with AC3

¶4:

¶5: Q1.1 Preliminary questions regarding animal chiropractic in South Africa. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: My knowledge of animal chiropractic is very good. I am a human chiropractor. I have been practicing for ten years in human chiropractic and I have done post graduate qualification by the International Academy of Veterinary Chiropractic, it is a six month post grad course done in Germany and I did that in 2006 and I have done examinations with the International Veterinary Chiropractic Association (IVCA) and is certified with them. I have been practicing on animals since then. So in my mind, very good.

¶8:

¶9: **Q1.2 Ok, what exposure, if any, have you had in terms of animal chiropractic?**

¶10:

¶11: I have been dealing with animals then for four years, yes.

¶12:

¶13: **Q1.3 Would you have your animal treated by an animal chiropractor? Why?**

¶14:

¶15: Yes, most definitely, just to optimize their health, optimize their musculoskeletal function and treat any injuries that can be helped with animal chiropractic.

¶16:

¶17: **Q2.1 Questions relating to the role or scope of animal chiropractic practice in the South African veterinary health care setting. In your opinion, how would you define the role of animal chiropractic in South Africa?**

¶18:

¶19: Animal chiropractic in South Africa gives animal owners another option in terms of treating musculoskeletal conditions. Many musculoskeletal conditions can benefit from animal chiropractic, whereas the traditional veterinary route may not always alleviate the problem. It may also be treating symptoms, rather than getting to the cause of the problem. So it gives the owner an alternative to treat musculoskeletal problems.

¶20:

¶21: **So you feel that there is a role for it in South Africa?**

¶22:

¶23: Most definitely have a role to play in South Africa.

¶24:

¶25: **Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals?**

¶26:

¶27: Correctly trained animal chiropractors are well trained in the assessment of animals. They are trained to assess basically movement disorders and joint disorders in animals, which is what chiropractors treat. So if you are a properly trained animal chiropractor, which means post graduate education and certification by internationally recognized bodies, then they are very well trained, yes.

¶28:

¶29: **Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify?**

¶30:

¶31: Yes if they are adequately trained and gone through the necessary training regime.

¶32:

¶33: **Q2.4 What conditions do you think are treated by animal chiropractors?**

¶34:

¶35: Mainly musculoskeletal conditions and nerve entrapments can be treated by animal chiropractors.

¶36:

¶37: **Q2.5 What conditions do you feel are not in the scope of an animal chiropractor? Please explain.**

¶38:

¶39: Conditions not in the scope of animal chiropractic are pathologies, so things like tumours, fractures, organic conditions.

¶40:

¶41: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶42:

¶43: At this stage there is no direct legislation regarding animal chiropractic in South Africa and we have a long way go to sort that out. Basically a body, or a task team has been set up through the Chiropractic Association of South Africa (CASA) and that task team's aim is to change or get legislation in place for animal chiropractic in South Africa.

¶44:

¶45: Q3.1 Questions pertaining to inter-professional relationships between animal chiropractic and veterinarians. Can you comment on the current collaboration, in other words inter-referral relationships between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶46:

¶47: Yes, at this stage if an animal chiropractor has been able to set up good relationships with vets then some vets are open to it and may refer occasionally. If contacted by the animal chiropractor, most of them are open to basically giving consent in a way to referral to treat the animal. Some vets are not open to it at all.

¶48:

¶49: I think educating the vets from an animal chiropractic point of view as to what animal chiropractic is and what we treat and explaining to them that we have the necessary education and that we are following the necessary educational guidelines and standards. This will give them more confidence in them referring to us.

¶50:

¶51: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶52:

¶53: Vets are the primary health providers for animals in South Africa and their education allows them to do this. Animal chiropractic education does not qualify you to become a vet, so you are not able to diagnose pathologies. The post graduate education does allow you to identify pathologies and identify what is able to be treated by a chiropractor and actually what is able not to be treated by a chiropractor. So the primary health provider is the vets and yes, if the correct relationships are developed, a referral basis will work for animal chiropractic.

¶54:

¶55: So do you feel that inter-relationships between the two is important in the continual assessment and treating of the animal?

¶56:

¶57: Yes, inter-professional relationships are very important.

¶58:

¶59: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians and how do you feel those obstacles can be overcome?

¶60:

¶61: The biggest lack is knowledge from the vets, not knowing what animal chiropractic is and what it can do for the animals. So to overcome that, it would be a case of educating the vets, possibly setting up talks with the vets maybe at some of the meetings that vets have and educating them on animal chiropractic.

¶62:

¶63: **Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?**

¶64:

¶65: Animal chiropractors, because their palpation skills are that much superior to veterinarians. A well trained and well experienced veterinarian who is trained in animal chiropractic could develop the same palpation capabilities over a number of years. Gold standard will therefore be an animal chiropractor because of their experience and palpation skills.

¶66:

¶67: **Q4.1 The next questions pertaining to developmental issues. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.**

¶68:

¶69: I think it should fall under veterinary legislation as vets are the primary health providers for animals in the country and I think they should still have their say in how animals are being treated and looked after in the country.

¶70:

¶71: **Q4.2 In your option what legal body should animal chiropractic register with? Please explain your answer.**

¶72:

¶73: Veterinary Council.

¶74:

¶75: **Just with regarding to associations as well, like chiropractic has the Chiropractic Association of South Africa and veterinarians also similarly has the Veterinarian Association of South Africa, do you personally feel that there should be a sub-category under one of these associations if there was an association, or do you think that it should be separate from both entities?**

¶76:

¶77: It is a difficult question, because it should still be linked to chiropractic and then there is obviously the overlap with the Veterinary Council, so ideally, there should be a sub-category in both councils.

¶78:

¶79: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? Why?**

¶80:

¶81: It should be a combination of both veterinary education and chiropractic education. It is important as an animal chiropractor to be able to recognize veterinary pathologies that would be best trained by the veterinarians, or chiropractic skills, who would be best trained by the chiropractors.

¶82:

¶83: **Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?**

¶84:

¶85: Possibly set up seminars or talks. That would be your best tools also just developing on a personal basis with vets as possible and if they are receptive to it, obviously there would be good relationships and educating them as you go on. A lot of them are receptive and some are not at all. So some of them won't even entertain you. It is a case of educating those that are willing to listen to you.

¶86:

¶87: **Q4.5 Where do see the profession in South Africa in the next ten years' time? Why?**

¶88:

¶89: It is growing and I think it will survive and become a profession on its own. There are a lot of students like yourself who is interested and motivated about animal chiropractic. I am aware of a few that are studying overseas at the moment and steps are being taken by the task team to get the legislation for animal chiropractic sorted out in the country, so if all goes to plan, it will survive and be thriving.

¶90:

¶91: **Q5.1 Just in conclusion. Is there anything you would like to add, or that you would like to ask me?**

¶92:

¶93: No, it is fine.

¶94:

¶95: Thank you

¶1: Chiropractic Master's Research Project Questions

¶2: **"An exploration of the current status quo of animal chiropractic in South Africa"**

¶3: Interview with V1

¶4:

¶5: **Q1.1 Preliminary questions regarding animal chiropractic. How would you describe your knowledge of animal chiropractic?**

¶6:

¶7: I think I have a fairly good knowledge of animal chiropractic. I have been exposed to it for a long time. Although I have not been taught chiropractic, I have a reasonably good understanding.

¶8:

¶9: **Q1.2 What exposure, if any, have you had in terms of animal chiropractic?**

¶10:

¶11: I have not only been exposed to a couple of chiropractors who use chiropractic on animals and then I have a veterinary colleague who has done chiropractic training. So as far as animal chiropractic I have met a number of people in South Africa as well as overseas.

¶12:

¶13: **Q1.3 Would you have your animal treated by an animal chiropractor? Why?**

¶14:

¶15: Yes I would. It would obviously depend what the problem was. If I did not feel that I could treat the animal successfully myself or I felt that there was no other approach, then I would certainly approach a chiropractor.

¶16:

¶17: **Q2.1 The next batch of questions regard to the role and scope of animal chiropractic in the South African. In your personal opinion, how would you define the role of animal chiropractic in South Africa?**

¶18:

¶19: Well, at present it is obviously not used very much. I think it should become, well a type of treatment that would be out of referral, because I would not expect the average vet to understand very much about chiropractic, but it should be regarded as an option to

treatment and probably realistically it would only be used to where other means of treatment haven't been successful, but I think that if there was more understanding about it, then possibly the profession would use it more. It is not going to be a first choice.

¶20:

¶21: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?

¶22:

¶23: Well look, I think the main thing here is that, as far as animals concerned, under the veterinary act of course it is only qualified vet that is allowed to treat an animal, so from that point of view it is very important that it is done under the umbrella if you like of a veterinary surgeon. Obviously a chiropractor who is trained in animal chiropractic has to understand more about the anatomy of each species which is quite complex, but presumably, if they have done formal training, they are able to evaluate the animal to a degree, but there is as always a limit to the amount that they are able to do, or a limit to the amount that they might understand, given that they are not vets.

¶24:

¶25: Ok, so you feel that it is essential that they have that basis of basic anatomy and physiology.

¶26:

¶27: Yes, yes, it is essential that they have that basis of basic anatomy and physiology.

¶28:

¶29: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?

¶30:

¶31: No, not necessarily, because you know we as vets have done 5, 6 years formal training, to get to the point of appreciating what we are seeing and an animal chiropractor may well come in from a different perspective, but may not be able to appreciate all the different types of problems. So, that is why I think it is essential that they work with a vet. It is very important and to try and have a good working relationships.

¶32:

¶33: Q2.4 What conditions do you think are treated by animal chiropractic?

¶34:

¶35: Well, I would imagine those people will approach an animal chiropractic for a dog that has so called spinal problems, hip problems and neck problems. I would think it is more sort of mobility problems. Musculoskeletal problems as oppose to functional problems.

¶36:

¶37: Q2.5 What conditions do you feel are not in the scope of animal chiropractic?

¶38:

¶39: Well, again I think that it would come to that they shouldn't start treating an animal without making sure that it has been to their vet first and that there is no danger that they could cause any problems. For instance with disc prolapsed, be they thoracolumbar ones, or cervical ones, there must always be care taken to see if there has been some veterinary input and there maybe conditions that an animal chiropractor may not be able to appreciate, what the condition is and what the prognosis is et cetera.

¶40:

¶41: Especially with organic conditions.

¶42:

¶43: Yes, yes, no for sure.

¶44:

¶45: So you feel that it is essential that the veterinarians first diagnose and then walk a path with chiropractors as they treat.

¶46:

¶47: Yes, yes, it is essential that the veterinarians first diagnose and then walk a path with chiropractors as they treat.

¶48:

¶49: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶50:

¶51: Well, my knowledge is based on the veterinary Act, that's together with the Allied Health Professions Act that they were in an agreement whereby an animal chiropractor must work under the supervision of a vet or at least with contact with a vet. So for them to work on an animal without veterinary referral would be frowned upon (smile).

¶52:

¶53: Q3.1 Questions regarding inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration, so in other words the inter-referral between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶54:

¶55: Well just from my personal experience, it is very poor. I can't speak for the other parts of the country, but my experience in Durban, despite the fact that I do complementary therapy, it is very poor. Maybe a lack of appreciation of how important it is to communicate to other professionals and maybe they are a little bit nervous of doing so. I think it is important that somebody who would like to do animal chiropractic but who is not a vet make themselves known to the veterinary profession within the city for instance of Durban and I think they would be better received if they did that.

¶56:

¶57: Q3.2 According to current legislation, as we said, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶58:

¶59: I think that is the correct way eventually.

¶60:

¶61: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶62:

¶63: Well, I think like everything else, more information about animal chiropractic being made available to the veterinary profession. We have clinical club meetings, maybe somebody would like to do a presentation of how chiropractic could be helpful. I think the reason that inter-professional relationships are not great is just pure misunderstanding and misconception. It is not all together unusual to have problems (smile and laugh). So exposure to chiropractic, more explanation of how it could be helpful. The veterinary profession in my opinion still has the concept that it is going to be this violent treatment that is going to cause a lot of harm and that they must not touch certain conditions.

¶64:

¶65: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶66:

¶67: Well, if there are vets that would be trained in chiropractic, for me that would be the best, but obviously if there is not a veterinarian around who has trained chiropractic, then a chiropractor who trains in animal chiropractic would be the next best option.

¶68:

¶69: Q4.1 Regarding developmental issues, what is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? And do you feel that this should fall under veterinary legislation or that it should be on its own?

¶70:

¶71: Well, I don't know about all the ins and outs of that kind of legal situation. I still think that you would be bound to fall under the veterinary Act. I think that would have to be and again, it is just so important to work with the veterinary profession as opposed to trying to do something on the side and then create a whole lot of trouble. So, I am not sure how that separate legislation could work and that you would have to approach the Veterinary Council, but I think that they will always go back on the prerequisite of a veterinary consultation or veterinary communication. I don't know if there are the numbers of people who are doing it to make it viable at the moment, but certainly that might be the way to go at some point.

¶72:

¶73: Q4.2 So in your opinion, what legal body should animal chiropractic register with?

¶74:

¶75: Veterinary Council.

¶76:

¶77: Q4.3 Ok, with no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? Why?

¶78:

¶79: Well, to my knowledge the courses available for chiropractors to train in animal chiropractic are either in Europe or in the States and at this point in time and that would carry on being the case until there would be sufficient numbers. You would need well qualified people to be teaching. So ultimately, if that was possible then that would be correct. It is a slow growing profession and the numbers in this country will regrettably or the numbers of chiropractors plus the demand is maybe not going to justify an actual course.

¶80:

¶81: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶82:

¶83: Well, education, exposure, certainly a good article or talks at clinical clubs, that kind of thing.

¶84:

¶85: Q4.5 Where do see the profession in South Africa in the next ten years and why?

¶86:

¶87: I would think, you know, that it may grow slowly. I think there is more scope with equine chiropractic maybe than in small animals. So, I would hope that in ten years' time there would be more acceptance of it. So realistically animal chiropractic is a very small party.

¶88:

¶89: Q5.1 In conclusion, is there anything that you would like to add regarding animal chiropractic from your perspective?

¶90:

¶91: I would like it to become an integral part of treatment, certainly for musculoskeletal problems to have the option of referring to chiropractors, but I am biased (smile/laugh).

Most people are going to be very suspicious. I do think it is really important for this communication you know. I just feel like with everything, the communication is so important, because if you don't have communication that is when bad feelings arrive that people get fed up with and it is a common thing, not only in this country, you will have lots of people that claim to be able treat animal for various things, whether it is herbal things, or homeopathy, or massage techniques, there is a whole bunch of people out there with different treatment and that is where all professions need to be very cautious to make sure that people understand that if you are administering treatment to an animal as an animal chiropractor and you have had training in human chiropractic the vet is being involved and you are doing the optimum for the animal at the time and it is not something that you can do over a weekend course or something, but certainly in the equine field, there is lots of people out there, lay people, who have done a week's course in massage or soft tissue techniques and they sort of use the word physio or chiropractic very loosely. So it is also about educating the public and making sure that the public understands what it means to go to the chiropractor, what it means to approach one and most people as far as the public go will approach a chiropractor because they themselves have seen a chiropractor.

¶92:

¶93: Thank you

¶1: Chiropractic Master's Research Project Questions

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with V2

¶4:

¶5: Q1.1 Preliminary questions regarding animal chiropractic's status in South Africa. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: Yes, my knowledge is not very good, because in our area there is not many of our clients that make use of it and there is not a practicing chiropractor in our area.

¶8:

¶9: Q1.2 What exposure, if any, have you had in terms of animal chiropractic?

¶10:

¶11: None.

¶12:

¶13: Q1.3 Would you have your animal treated by animal chiropractic? Why?

¶14:

¶15: Yes, if it would benefit the animal it is fine.

¶16:

¶17: Q.2.1 Questions regarding to the role and scope of animal chiropractic in the South Africa. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶18:

¶19: I think there is a place for them in South Africa to work with animals, because our treatment is usually limited to some extend and I think it can benefit the animal, well mostly the horse and the dog, yes I think it can benefit very much. I'm just thinking of knowledge towards the chiropractors what they can do. We are not very educated in the role of chiropractic work in animals.

¶20:

¶21: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals?

¶22:

¶23: I can't comment, no.

¶24:

¶25: Q2.3 Ok, so do you think that animal chiropractors are experienced enough regarding the treatment of animals?

¶26:

¶27: Yes, it is a difficult question because we haven't got any track record of most chiropractors that does work in the veterinary field.

¶28:

¶29: Q2.4 What conditions do you think are treated by animal chiropractic?

¶30:

¶31: It is usually with physical exercises and injuries and we see a lot of back injuries in horses, or muscle related injuries and in that field I think an ordinary veterinarian is not so well equipped and that chiropractic could maybe be of more benefit in that areas.

¶32:

¶33: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶34:

¶35: I don't know.

¶36:

¶37: Q3.1 Questions regarding inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration, so in other words the inter-referral between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶38:

¶39: No, no. I haven't, no.

¶40:

¶41: Q3.2 Ok, according to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶42:

¶43: I think, yes, so far we don't know very much about the chiropractors (smile) that work with animals and I think also from the client's side, I don't know, but there is some clients of us that definitely use chiropractors and they are satisfied with that, but it is difficult for me to say. I don't think that it is necessary for a vet to first see the animal, as long as each professional know where their limits are and because at the end of the day I just think if the animal can benefit from it then the owner can ask the chiropractor to come and have a look and if he can't get to a certain diagnosis the vet's can also come in and have a look.

¶44:

¶45: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? So, maybe obstacles that can be overcome?

¶46:

¶47: Yes, I think most of the obstacles is only (smile) money related (laugh).

¶48:

¶49: Oh ok (smile). Do think that that is the only obstacle, or maybe that there is animosity or some kind of feeling that animal chiropractors are encroaching on their profession?

¶50:

¶51: I think that conception is true, but in this modern world of ours you can't actually dictate your clients these days of who they must call. As long as they get some service from somebody they will call that person.

¶52:

¶53: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶54:

¶55: Yes, you can't do everything these days. You can't be a specialist in everything. So I think there is a place for the animal chiropractor to do his side of the work.

¶56:

¶57: Q4.1 Ok, regarding developmental issues. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or do you feel that animal chiropractic should have its own legislation?

¶58:

¶59: Yes, I think if it concerns the animal then it must be more under the veterinary health, I would say, that the chiro's can also have their place. Like the nurses these days they all got their own bodies, but they fall under the Veterinary Council.

¶60:

¶61: Q4.2 In your option what legal body should animal chiropractic register with?

¶62:

¶63: The Veterinary Council, yes.

¶64:

¶65: Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? and Why?

¶66:

¶67: So somebody must, otherwise the veterinary Council I'll say must appoint an Institution that is accredited to do the job properly, and then they can go from there and register, or I do not know if the Universities will allow it, because there is only one faculty in South Africa so that is a bit of a problem.

¶68:

¶69: Maybe two different kind of areas can be created where vets and chiro's can almost amalgamate into a whole separate body and that they can govern the courses from there?

¶70:

¶71: Yes, which concerns to say, then it must be under one body. All the para-veterinary services at this stage all fall under the same legislation, animal health. Yes, to administrate it I do not know how (smile). It is going to be a difficult process to get it under one roof.

¶72:

¶73: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶74:

¶75: Maybe they must come to the veterinary congresses and come deliver some papers and show what they can do, but they must just show that they can do the job.

¶76:

¶77: Q4.5 Where do see the profession of animal chiropractic in the South Africa in the next ten years?

¶78:

¶79: I think it all depends on the chiropractors of what they will do in those next ten years, but they should advertise themselves and equip themselves with the right knowledge and expertise. Then I would think it will be accepted. It will take time. It is not a thing that will just happen, but there is a place for it.

¶80:

¶81: **Q5.1 Are there any other questions that you would like to ask me from a veterinarian's perspective?**

¶82:

¶83: At the end of the day it is going to be that most of the chiropractors are trained on humans, not to say that it is so different, but I think that there is a difference. So if they can get their courses right in the veterinary field, then I think they will make progress with the whole thing.

¶84:

¶85: **Ok, so you think it should almost start right down to basics. Basic anatomy, basic physiology?**

¶86:

¶87: Yes, just a good basis. From there on, I think they can get better.

¶88:

¶89: **Thank you.**

¶1: Chiropractic Master's Research Project Questions

¶2: **"An exploration of the current status quo of animal chiropractic in South Africa"**

¶3: Interview with V3

¶4:

¶5: **Q1.1 Preliminary questions regarding animal chiropractic in South Africa. How would you describe your knowledge of animal chiropractic?**

¶6:

¶7: Limited. I have a basic understanding of what chiropractors do and I have worked with some chiropractors on animals, but my experience is not wide and my understanding of the science behind it is not big.

¶8:

¶9: **Q1.2 What exposure, if any, have you had in terms of animal chiropractic?**

¶10:

¶11: I have worked with one student in particular who was doing her thesis on the manipulation of dogs specific for hip dysplasia. So, I worked very closely with her and she manipulated about 50 dogs.

¶12:

¶13: **Q1.3 Would you have your animal treated by an animal chiropractor? Why?**

¶14:

¶15: I would not rule it out. I would definitely think about it, especially where conventional veterinary treatment does not appear to be successful. Like chronic back pains, chronic lameness, neck pain, especially if you are not going to go do surgery, or invasive techniques, yes definitely it is worth a try yes.

¶16:

¶17: **Q2.1 Questions regarding to the role and scope of animal chiropractic practice in the South African veterinary health care setting. In your opinion, how would you define the role of animal chiropractic in South Africa?**

¶18:

¶19: At this stage, it is small and in its infancy primarily because there are not many qualified vets who have gone on to study animal chiropractic. I think once more vets qualify as veterinary trained chiropractors it will take off a lot more. Essentially because vets have the knowledge of the animal diseases, there is quite a few human trained chiropractors treating horses, dogs and cats with some success, but unfortunately they don't have the necessary training of the animal diseases to be that effective.

¶20:

¶21: **Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals?**

¶22:

¶23: Yes, but not in South Africa unfortunately as the courses are overseas, Germany, UK, Australia and the USA as far as I know. As far as I am aware, those are standard courses that have been laid down with objectives that need to be learned and requirements fulfilled and once they do that, they pass some sort of exam and they can register with the veterinary chiropractic organization worldwide.

¶24:

¶25: **Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?**

¶26:

¶27: I think the gold standard would be vets doing it, but human chiropractors that want to branch into veterinary treatment of animals at least need to do that veterinary course. The ones that are working on animals with no veterinary training, if they are not working in close connection with a vet are actually breaking the law, because only those registered with the Veterinary Council are allowed to diagnose and treat animals.

¶28:

¶29: **Q2.4 What conditions do you think are treated by animal chiropractors?**

¶30:

¶31: Mostly orthopaedic musculoskeletal is my understanding, although I am sure that there is a lot of other areas for it to be applied, but horses with lameness and sore backs, sore necks, dogs. It is mostly dogs and horses, with dogs, orthopaedic problems, hip dysplasia, elbow problems, neck problems, muscle spasm it is usually the same things.

¶32:

¶33: **Q2.5 What conditions do you feel are not in the scope of animal chiropractors? Please explain.**

¶34:

¶35: Everything else (laugh). No, I mean that is just too broad, it could be any animal disease, there are so many diseases and the vet needs to see the animal and make the call, can this be treated by chiropractic. You know we can have some disasters, I have had some disasters. I had a dog that had a disease called *granulomatous meningoencephalitis* which is inflammation of the spinal meninges and so the owner took her to a human trained chiropractor for manipulation, which really was not indicated and actually made it worse.

¶36:

¶37: The diagnosis needs to be made if possible and then the chiropractor can treat. We have had dogs that you know apparently have had back pain and have been treated by the chiropractor but actually they can't get on it because they had a blocked bladder or something. So, it is very dangerous for human trained chiropractors to start treating veterinary patients without at least doing a veterinary course.

¶38:

¶39: **Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?**

¶40:

¶41: Yes, reasonably good. The whole veterinary Act that summarizes is the veterinary and para-veterinary Act of 1982 says very clearly that anyone who wishes to diagnose, treat or prevent the disease of an animal, must be registered to the South African Veterinary Council. If they go ahead and do that without being registered they are liable to prosecution. The loophole around that if they are not registered and at this stage human trained chiropractors cannot register with the Veterinary Council, the only way they can really legally treat animals in South Africa, is on recommendation or referral from a vet in the area. They are not allowed to take a call from the public and go and treat that patient without that patient had been seen by a vet and at least a diagnosis or a provisional diagnosis have been made.

¶42:

¶43: Q3.1 Questions regarding inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration, so in other words, inter-referral relations between veterinarians and animal chiropractors in South Africa?

¶44:

¶45: Yes, the collaboration is not very good. There are human trained chiropractors that are treating horses and dogs without leasing at all with a vet. We have been talking to the Head of the Department of the Chiropractic school in Durban, we have made them aware of that problem and since then they have send out and circulated it to all their members and it is improving, communication is improving, dialogue is better, certainly with the newer chiropractors. With the older ones or more senior ones, I don't think they are necessarily going to change in a way.

¶46:

¶47: Q3.2 According to current legislation like we have mentioned, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶48:

¶49: Absolutely and very necessary for the factors that I have mentioned in that misdiagnosis can be lethal.

¶50:

¶51: Q3.3 In your opinion, what are the barriers affecting interprofessional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶52:

¶53: I think the barriers are probably on both sides. On the veterinary side there is in the more senior colleagues doubt and scepticisms about chiropractic and that it actually has a place at all and I think that really just stems from ignorance of what it is all about. There will be some veterinary colleagues that will be very negative about chiropractic and will not refer their patients for chiropractic. Then the younger graduates who are more open minded will very much be open to that. So there is a problem on the veterinary side and there is also a problem on the human trained chiropractors who either through arrogance or ignorance are just not willing to communicate with the vets.

¶54:

¶55: As far as veterinary side goes, the vets will be most open to veterinary colleagues talking about chiropractic relations. There will be some negativity of a human trained chiropractor coming to tell the veterinarian what is good for their patients (smile). So the best for education on the veterinarian side to open their mind to this field, would be veterinarians trained in veterinary chiropractic and come and give talks on that at University level definitely and then at post grad level on a continuing education basis. So,

to broaden the mind of the vet, the vet must do it, ideally. He or she will be the most excepted by the veterinary fraternity as the most credible person to listen to.

¶56:

¶57: From the human side, education is it vital so that there is no more ignorance about if you treat an animal without being registered to the Veterinary Council you are breaking the law. Every chiropractic student needs to know that before they qualify and needs to approach the vets and there are going to be some vets that are going to be so happy and well received and most of the others are going to be pretty negative and that unfortunately is the nature of the job. If the human chiropractor goes overseas and studies his veterinary chiropractic course, we then will lobby with Veterinary Council and we have already that they will accept that qualification. Once they register with the Veterinary Council, then they don't have to work as closely with the vets as they do now.

¶58:

¶59: Q3.4 In your option, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶60:

¶61: Veterinarians trained in the field, or chiropractors who have done the accredited course.

¶62: Q4.1+4.2 Questions regarding developmental issues. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own?

¶63:

¶64: Whichever way they do it, they are going to have to be registered with Veterinary Council, either as vets or as chiropractors. So you have vets, you have veterinary nurses and animal health technicians, so they are separate entities all registered with the South African Veterinary Council. The main body that regulates anything to do with animals, treatment, prophylaxis, prevention, diagnostics therapy that is the regulatory body. So, they can form a Veterinary Chiropractic Association every single member is still going to have to be registered with the Veterinary Council, it can never be auto regulated.

¶65:

¶66: Do you feel that that an association should be separate from veterinary, so should it be a separate entity in a sense that vets should meet chiropractors halfway?

¶67:

¶68: I don't think so, I think the primary interest here is the animal and let's not lose focus on that. What best serves the animal? The person that has trained veterinarily in specifically treating the animal is the best person to treat an animal.

¶69:

¶70: Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa and why?

¶71:

¶72: The only people responsible there will have to come from Vet Council and they would have to approach the overseas course regulatory bodies and find out what the exams are and what the requirements are.

¶73:

¶74: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶75:

¶76: Ok that kind of brushes up on what you have mentioned.

¶77:

¶78: **Q4.5 Where do see the profession in South Africa in the next ten years and why?**

¶79:

¶80: I think it is going to boom, grow, continue growing, branching out to new fields. Vets are branching into more narrower fields, developing expertise in more narrower fields. Definitely more chiropractors coming on board, veterinary and maybe human trained that have done a veterinary course, no doubt about it.

¶81:

¶82: **Q5.1 In conclusion, is there anything you would like to add, or anything that you would like to ask me that you feel is important to consider regarding animal chiropractic?**

¶83:

¶84: No, I don't think so.

¶85:

¶86: Thank you

¶1: Chiropractic Master's Research Project Questions

¶2: **"An exploration of the current status quo of animal chiropractic in South Africa"**

¶3: Interview with O1

¶4:

¶5: **Q1.1 Preliminary questions regarding animal chiropractic's status in South Africa. How would you describe your knowledge of animal chiropractic?**

¶6:

¶7: It is not very vast, but I do know it works and animal chiropractic would be the same concept as it would be in humans. Adjustments of the skeletal system but on animals (smile).

¶8:

¶9: **Q1.2 What exposure, if any, have you had in terms of animal chiropractic?**

¶10:

¶11: I have actually had a lot of exposure, mainly with horses and a little bit with dogs. I am a horse owner. I also run a livery yard, so I am around these people and their horses all the time. Dr. Stark and Dr. Gilcrest have treated my horses.

¶12:

¶13: **So, have you seen good results, promising results with the treatment?**

¶14:

¶15: Fantastic results.

¶16:

¶17: **Q1.3 Would you have your animal treated by an animal chiropractic and why?**

¶18:

¶19: Yes, definitely, because I know with horses we put them through a lot of unnatural kind of gates and behaviours and postures and also because most of our horses are off the race track and they are made to run in one direction the whole time, so majority of them goes out on the same side most of the time. Also, a lot of people, myself included, even if we do not have a problem at the time, we do have six month's maintenance with the chiropractor.

¶20:

¶21: As well with dogs, Dr. Gilcrest does dogs, big dogs as well and those are mainly for the showing dogs. I don't know why, maybe they also go around the same circle in the same direction.

¶22:

¶23: **Q2.1 Next questions, these are pertaining the role and scope of animal chiropractic in the South African. So in your opinion, how would you define the role of animal chiropractic in South Africa? So, do you think there is a role for it in the country?**

¶24:

¶25: Absolutely. I could relate it mostly to horses, because that is where I have had the most experience with animal chiropractors and it definitely increases their performance. The role, yes, there is definitely a role for it in South Africa.

¶26:

¶27: **So pertaining to more your neuro-musculoskeletal conditions?**

¶28:

¶29: Yes, pretty much, because I would not know about any other kind of treatment within South Africa.

¶30:

¶31: **Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals?**

¶32:

¶33: I do know that you can't be trained in South Africa, you have to go abroad. I know that a chiropractor did it in New Zealand, I think it is a very quick course, it is not very popular. There is also one in Germany that another chiropractor did. I know that one is very good. There is also another chiropractor that went to Germany and did it and he is also very good.

¶34:

¶35: **So would you recommend that they should get an education?**

¶36:

¶37: Yes, absolutely an education is important.

¶38:

¶39: **Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?**

¶40:

¶41: No, I think there should be veterinary training when it comes to anything with animals. You can't just be human trained chiropractor and go and treat animals. The physiology and anatomy is very similar, but there are certain things you need to understand. That goes for any profession regarding to animals as well.

¶42:

¶43: **Q2.4 What conditions do you think are treated by animal chiropractors?**

¶44:

¶45: Mainly musculoskeletal conditions.

¶46:

¶47: **Q2.5 What conditions do you feel are not in the scope of an animal chiropractor and please explain?**

¶48:

¶49: Anything that falls outside that scope is purely veterinary, because I am ignorant in South Africa. I am sure there is something abroad, but not in this country.

¶50:

¶51: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶52:

¶53: I know the veterinary board had a big hoo-ha about homeopaths and chiropractors and I think you have to be trained under some kind of veterinary thing before doing animal chiropractic. That is what I have heard so far.

¶54:

¶55: Q3.1 Questions regarding inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration, so in other words the inter-referral between veterinarians and animal chiropractors in South Africa? Please elaborate.

¶56:

¶57: I do know that they work with vets. There is one in particular that does not work with vets and he costs an absolute fortune, but there is quite a bit of collaboration between vets and chiropractors, definitely.

¶58:

¶59: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶60:

¶61: I absolutely agree, because what if it is not in their scope and they treat it anyway and you are paying R400 a consult for 15 minutes and your horse does not get better. What about that?

¶62:

¶63: All right. So, on the other side of the coin, say for instance you as a horse owner, know that the animal is experiencing the same symptoms as it has before, would you then go through the same route, would you go through the veterinarian again to get to the chiropractor, or would you directly contact the chiropractor?

¶64:

¶65: It is hard to say, because my veterinary chiropractor is a vet. So, she would be the one that would say: "this is what you need".

¶66:

¶67: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? and how do you feel those obstacles can be overcome?

¶68:

¶69: I think the only inter-professional barriers would be animal chiropractors who do not have any veterinary experience. I do know that vets get pretty peeved-off with them. I do not know if it has anything to do with steeling business or what not, but I do know that if an animal chiropractor contacts the vet and they discuss the case together, then that is fine, then the vets are happy with that. If it is just an independent chiropractor that goes around and hammers the horse around and the horse does not really get better, the vets get a bit offended by that. I think there should be more communication and there should maybe be a standard between animal chiropractors who are trained veterinarily. They should have some kind of a standard or law where you have to be referred through or work together.

¶70:

¶71: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶72:

¶73: Veterinarians who have the qualification of an animal chiropractor. You can't really split that, because if it was a plain old vet, I would not let them touch my horse or my animal's spine or whatever. I have personally had experience with animal chiropractors

who have done the course and I mean, they are not bad, but veterinarians who have done the course are better.

¶74:

¶75: **Q4.1 Next is developmental issue. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? So, do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.**

¶76:

¶77: It should be under veterinary legislation, so that there would be a standard between animal chiropractors and vets. So that they can communicate a lot better. It should definitely fall under veterinary legislation.

¶78:

¶79: **Q4.2 Ok, in your opinion what legal body should animal chiropractic register with? Please explain your answer.**

¶80:

¶81: Yes a veterinary sub group probably, but it should definitely go under something veterinary.

¶82:

¶83: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa?**

¶84:

¶85: Veterinary, because it is there scope, it is animals.

¶86:

¶87: **Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?**

¶88:

¶89: Yes, absolutely, presentations, workshops, relationships with vets, yes.

¶90:

¶91: **Do you think it is better for a veterinary chiropractor, so a person that has a veterinary qualification as well as an animal chiropractic qualification to take this forward, or do you feel it is better if a person that has an animal chiropractic degree takes this forward, pertaining to the question, so further steps.**

¶92:

¶93: Yes, I think it should be a veterinary with an animal chiropractic qualification.

¶94:

¶95: **Q4.5 Where do see the profession in South Africa in the next ten years' time and why?**

¶96:

¶97: Oh, it will be huge, because first of all people love to spend money on their animals. Anything that make your animal perform better or feel better and chiropractic, I think, is not fully understood by the public just yet, especially with regard to small animals. I know with equine it has been around for quite a bit. It is not just veterinary and that is it, your animal responds to a reason because they can't talk, you need to figure out what it is and I think chiropractic should be on top of the list, I really do, because most of the time your animal could be in pain and obviously its natural defence mechanism is to hide it. So, personally I would always think if my animal has change being a horse or a small animal, it would be one of the first things I would do, is get a chiropractor in.

¶98:

¶99: Q5.1 In conclusion, is there anything you would like to add, or that I have not asked you and that you feel is important to consider?

¶100:

¶101: No, not really, but I do think that there should be some kind of standard between vets and chiro's.

¶102:

¶103: Thank you

¶1: Chiropractic Master's Research Project Questions

¶2: "An exploration of the current status quo of animal chiropractic in South Africa"

¶3: Interview with O2

¶5: Q1.1 Preliminary questions. How would you describe your knowledge of animal chiropractic?

¶6:

¶7: My knowledge? Well, I know that Dr. Palmer is an animal chiropractor. I know that he studied to work on horses and dogs and different animals. Yes, other than that, it was a fairly new thing to me when he introduced it to me.

¶8:

¶9: Q1.2 What exposure, if any, have you had in terms of animal chiropractic?

¶10:

¶11: Yes, just speaking to Dr. Palmer about the horses that he works on and then he has done work on my dog. He probably saw my dog at least 10 times.

¶12:

¶13: Do you think the treatment was effective?

¶14:

¶15: Definitely. Definite improvement and also the ting that Dr. Palmer suggested to do to help, the home treatment that I could do myself.

¶16:

¶17: Q1.3 Would you have your animal treated by an animal chiropractor, and why?

¶18:

¶19: Yes, because I saw a definite improvement and I would definitely do it again and suggest and recommend it again.

¶20:

¶21: Q2.1 The next questions relating to the role and scope of animal chiropractic practice in the South African, in the veterinary health care setting. So in your opinion, how would you define the role of animal chiropractic in South Africa?

¶22:

¶23: Necessary. Yes, definitely a need for it, without a doubt.

¶24:

¶25: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals? Please justify your answer?

¶26:

¶27: I don't really know, but I recall Dr. Palmer mentioned an extra course he had to do to work on animals, but other than that, just what he told me about it.

¶28:

¶29: Ok, so you did not really care about the degree or anything, because you knew Dr. Palmer.

¶30:

¶31: How it worked out is he had told me that he had worked on animals and then my dog was injured and I phoned him up and he said I should bring him straight away and he save my dogs life. He was completely disabled. He couldn't move his back legs, couldn't move his tail, he couldn't move his toes, he was completely disabled and the vet said that you can operate which is about 10 grand, or put him down. The same day Dr. Palmer said: "Let's give him a chance, let's treat him and see what happens".

¶32:

¶33: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals? Please justify your answer?

¶34:

¶35: Well, from my opinion, from what I have seen, yes, and I have only had the experience that I have had.

¶36:

¶37: Q2.4 What conditions do you think are treated by animal chiropractors?

¶38:

¶39: Well, I suppose it is like humans. I mean anything that you have treated or anything that is related to muscles or to the bones it is the same thing. The things that humans can get treated for, I am sure the animals can too.

¶40:

¶41: Q2.5 What conditions do you feel are not in the scope of an animal chiropractor? Please explain.

¶42:

¶43: I don't know. I would think it is more, just muscle really.

¶44:

¶45: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶46:

¶47: I don't have any knowledge of it.

¶48:

¶49: Q3.1 Questions relating to the Inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration in other words inter-referral between veterinarians and animal chiropractors in South Africa? And please explain.

¶50:

¶51: Well my take on it was the vet did not suggest it, it would have been nice if he had maybe said that there is this option and maybe you want to go that route. His route was operate or put down. After that, I did see another vet, she was all for it and she was interested and she wanted to take down the details of the animal chiropractor. So, it all depends. I suppose the vets that are a little bit more into alternative medicines would be more interested, but some vets are probably not aware of it.

¶52:

¶53: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, what are your views on this?

¶54:

¶55: I did not know that. I feel that it should be up to the animal owner, not up to legislation. In my opinion, if I wanted to go take my dog to a chiropractor, I do not see why I need to get a referral from somebody. Yes, I do not think that it is necessary.

¶56:

¶57: Let's take for instance your dog and the procedure he went through. You said the veterinarian only had a couple of options for him and it did not include the treatment of animal chiropractic. So that also points to the sense that it is quite necessary.

¶58:

¶59: It would have been nice if the vet had recommended an animal chiropractor. I have another friend who just had the same issue with her dog and recently I saw her at the vet. So she was telling me what was wrong with her dog and I suggested going to see a chiropractor and the vets did not recommend it to her either. It was not recommended. So, I think maybe they need to be more aware of that the people are doing it.

¶60:

¶61: Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa? How do you feel those obstacles can be overcome?

¶62:

¶63: Maybe the vets should become more aware that there is an alternative to operations and to natural healing, because the vet really gave my dog no chance, no chance, and when I took him back in again, he was not that interested really. He was whatever-kind of thing.

¶64:

¶65: Q3.4 In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?

¶66:

¶67: Well the animal chiropractors have studied to work in the field and the vets have also studied to work in their field and maybe if somebody would want to work as a chiropractor on animals they would have to study again.

¶68:

¶69: Q4.1 Ok, developmental issues. What is your opinion of animal chiropractic seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should be on its own? Please justify your answer.

¶70:

¶71: I don't know. It could be beneficial to be with the vets, with the legislation and it might mean that if it is part of their legislation it will reach a bigger purpose, but if it is just their own legislation, it might be harder for the vets to then accept it, but if it is part of their legislation, then they will just have to accept it. I don't see why legislation cannot come of both, because if you are working on animals or you are a vet, it should be same.

¶72:

¶73: Q4.2 In your option what legal body should animal chiropractic register with? Please explain your answer.

¶74:

¶75: I would think that there should be one that combines.

¶76:

¶77: So almost something that is not apart from veterinary and chiro, but something that is integrated and maybe people from both chiropractic and veterinary profession has input.

¶78:

¶79: Yes, definitely, it will make more sense, because there would be too many departments in the end I would think, too much confusion.

¶80:

¶81: Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal chiropractors in South Africa? Why?

¶82:

¶83: Is there no training for animal chiropractors in the country? I did not know that. I don't know, I suppose I don't see why the education institutes can't add it as a course, like where you are studying. I think the chiropractic, in my opinion it is not so much studying about the animals as it is studying about the structure, the bone structures of the animals. That is what I would say.

¶84:

¶85: Something similar to what we have mentioned about the legislation, or do you think that it should be separate completely, so animal chiropractic will then have both veterinary and chiropractic, so they would amalgamate and put together a course.

¶86:

¶87: Yes, ok. You would think that they should be able to do both you know, I would think so. How in depth are the courses? If you have already study to be a chiropractor, how in depth is the next course to become an animal chiropractor? I don't know, how long do they take?

¶88:

¶89: Well overseas you have to study or there are courses for 220 hours. Basically, you would like to see it from both perspectives or combined?

¶90:

¶91: Yes.

¶92:

¶93: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶94:

¶95: Yes, I mean maybe it should be introduced to the vets when they are studying? You know, even if they don't study to be chiropractors, but maybe they should recommend that as an alternate source, that is what I would say, maybe on their education level try and incorporate both.

¶96:

¶97: What do you think of media or exposure presentation wise to make it clear to them? Currently in South Africa there is only one animal chiropractor that also has a veterinary degree. So in a sense that person might be a person that can explain to the veterinary community.

¶98:

¶99: Yes, I suppose if more of the vets were to become animal chiropractors, yes. Can a vet go overseas and study to become an animal chiropractor in the same sense? He can go do a 220 hour course even they have not learned how to manipulate?

¶100:

¶101: Yes, they can.

¶102:

¶103: Is it? Which I think that is strange. You guys when you study, your profession is your profession and their profession is their profession and I think the two are quite different, in my opinion.

¶104:

¶105: But in the same breath you also have to learn about the animal.

¶106:

¶107: Yes no sure, so it is the same, but less so, because once you guys have studied to be chiropractors, you already have...

¶108:

¶109: **Mastered the art of manipulation?**

¶110:

¶111: Exactly and then you just have to do a course on animals, but these guys have also studied a course for 6 or 7 years to be vets, but they have not learned the art of manipulation, so I would say the other way in my opinion.

¶112:

¶113: **Q4.5 Where do see the profession in South Africa in the next ten years' time? Why?**

¶114:

¶115: Well you would expect it to grow, because people are into alternative medicine and different things. I think more people are seeing chiropractors and there is no reason why they can just take their dogs to the chiropractor. I would say in my view chiropractors are getting more popular, so then with animals it should do also you know.

¶116:

¶117: **Q5.1 Just in conclusion, is there anything else that you would like to add regarding animal chiropractic in your opinion or anything that I have not asked you?**

¶118:

¶119: I think we have covered that.

¶120:

¶121: **Thank you**

¶1: Chiropractic Master's Research Project Questions

¶2: **"An exploration of the current status quo of animal chiropractic in South Africa"**

¶3: **Interview with O3**

¶4:

¶5: **Q1.1 Preliminary questions. How would you describe your knowledge of animal chiropractic?**

¶6:

¶7: Guarded. I think I've seen worked with one decent animal chiropractor, Dr. Riedel and I think a lot of it is to rig a horse around with so much deep tissue there and muscle, I think a lot of it is not as successful as with humans.

¶8:

¶9: **Q1.2 What exposure have you had in terms of animal chiropractic?**

¶10:

¶11: I use it in my yard, I do have somebody using it in my yard, I have had people before that claimed to do it, so I do carry on using them, but I think the mere fact that an animal chiropractor has been working here for possibly over two years now, says that I do believe what they are doing, but if I do get a horse that I don't see an improvement on, I would stop it and I will alternate between the chiropractor and the physiotherapist on each horse.

¶12:

¶13: **Q1.3 Would have your animal treated by an animal chiropractic?**

¶14:

¶15: Yes. Animals, being horses.

¶16:

¶17: Q2.1 Questions regarding the role and scope of animal chiropractic in the South African. In your opinion, how would you define the role of animal chiropractic in South Africa?

¶18:

¶19: There is a place for it, but like so many things with animals being medicines or new super-healing properties, the person who is selling it who believes that if you take the powder and drop it in your car, you get a new coat of paint. I don't always see the results like that. It is difficult to assess how successful it is, because it is not a human that can talk back to you and tell you I feel better, or I feel sore or I am stiff but after the second day I felt better you know. So, to assess the work going on I have to basically climb on that horse myself the next day or two days later and feel if he had improved from three days prior. A lot of it I can't see with my eyes. Some of it you can see by the horse's behaviour, in that he is a happier horse, or he is worse off, or he is scared, so you can assess it there. I just have a difficulty in assessing how we are going to put a horse's back into place. I have seen it work, but I can't say that it works all the time. I am not convinced that it works all the time.

¶20:

¶21: Q2.2 Can you comment on the training of animal chiropractors in the assessment of animals?

¶22:

¶23: I have never seen them train, but what I would like to see is that people who actually ride. I am talking now about the horses. Perhaps you are not going to go ride a dog and that, but with people who actually ride, they should have some riding ability training, because working on different diagonals, trotting on different diagonals, horses that are stiff to strike off canter on their rear-four or all-four if a person hasn't driven it is difficult to assess. So, a rider and the chiropractor can know exactly what each other are talking about.

¶24:

¶25: Q2.3 Do you think that animal chiropractors are experienced enough regarding the treatment of animals from what you have seen? Please explain?

¶26:

¶27: I think everybody is different. People with less experience are going to be less experienced. People with more experience, more so. There are people with more experience that can be working for a lot of years, but not enough experience. I don't know where to draw the line with a man that comes along with a mallet and tries to put something into place. Is he a chiropractor, or is he? Another thing is the acupuncture and they manipulate the horse and pull his tail this way and that way and then put needles in him, is he considered as a chiropractor? Where, do you draw the line? A physiotherapist I could tell you where they start and where they stop, chiropractors I don't know where they all connected. One person's chiropractic work includes needles one includes burning incense before they start. Sort of like Reiki and I don't say they don't work and they work through meridians and that.

¶28:

¶29: The mind is very strong in what you believe in. What you believe in, will work for you. If you don't believe in it, if you don't believe in treatment, then the treatment is not going to work for you. I am not talking about a sickness. You can't be hypnotized if you don't believe in it. I don't think so, but I don't know. That's me, that is my make-up of it.

¶30:

¶31: Q2.4 What conditions do you think are treated by animal chiropractors?

¶32:

¶33: In our industry most of our problems stem from the back, in Cape Town. We work in deeper tracks, which I don't think is ideal for horses, but they do very well in the rest of the country when they compete against Johannesburg and Durban horses and they do well when they go overseas. So, it might be that each area has its own drawbacks. Now their areas, you have hard tracks and they get more chipping of joints and knees and that type of thing, but with us chiropractic works mostly on the back, from withers all the way through, pecs maybe or gluteus or something you know. You get a lot more sacroiliac problems, you get hips dropping, marginally muscle wastage and that type of thing. I don't think chiropractors are going to sort all of that out and that is why I alternate between, for horses that have chronic problems that are just ongoing, I alternate between the chiropractor and a physiotherapist.

¶34:

¶35: It also is expensive you know. You can't treat a horse, when you are talking about a horse's bill being five-thousand rand a month or if you include even six-thousand or seven-thousand, or whatever. If you are going to add on another two-thousand rand worth of work each month to treat that horse, it is just not viable you know. It might very well work, but you can't do it ongoing. You have got to justify those costs. Same as for the new powder for ulcers or this thing and that thing at the end of the day you have got to justify the costs and add in extra vitamins and minerals. You have got to draw the line wherever. So, I don't think we can use them to the same degree as I have gone to hospital and I had physiotherapy done on me every day or chiropractic work done on me every day.

¶36:

¶37: Q2.6 What is your knowledge of the legislation regarding animal chiropractic in South Africa?

¶38:

¶39: No, nothing.

¶40:

¶41: Q3.1 The following questions are regarding the Inter-professional relationships between animal chiropractors and veterinarians. Can you comment on the current collaboration in other words inter-referral between veterinarians and animal chiropractors?

¶42:

¶43: I think a lot of work done by vets previously is now being done by para-veterinary organizations. Like horse dentistry to a large extent, physiotherapy, chiropractic work and I think if those people are so-called professionals in their specific field, if they have had the right training and I think the vets although they would have the same knowledge and possibly more knowledge, I think they should make space for people like that, because a vet doesn't always have time to stand on top of a horse and do what he has to. So I think there is a place and certainly in my yard they work hand in hand.

¶44:

¶45: Q3.2 According to current legislation, chiropractors are only allowed to work in South Africa under veterinarian referral, ok, what are your views on this?

¶46:

¶47: I don't agree with that. I think that as a horseman and having worked with horses all my life, I should by now know if a horse is sore somewhere and where I am going to try and find that sore. I might not be able to diagnose it legally as a vet can, but I can say that my horse is sore and then he will know that my horse is sore there. I am not going to be right every time, but neither is the vet going to be right every time? If I want to have a chiropractor to do some work on a horse for me, I think it should be my prerogative.

¶48:

¶49: **Q3.3 In your opinion, what are the barriers affecting inter-professional relations between animal chiropractors and veterinarians in South Africa?**

¶50:

¶51: I think the vets that I work with are pretty open-minded to working with other groups of professionals. Yes, so basically if I put them into a situation together, I would say to the physiotherapist to look for some hot spots on the quarters and then get the vet to inject them. Well, visa versa, then the vet might say I think you are right, the horse has got a sore back, let's say get the physiotherapist to get some hot spots and that. So it is a trans-referral and a lot of the lameness issues might stem from the lower limb and be transferred lameness to the quarters and muscular groups subsequently. So, I think they have to work together.

¶52:

¶53: **Q3.4 Ok. In your opinion, who should perform animal chiropractic, veterinarians or animal chiropractors?**

¶54:

¶55: I think both. If the vet feels that that is his field and that is what he wants to specialize in, or he take a specific interest in that, then why not? By the same token, if a person has studied enough for chiropractic and shows results, why shouldn't they be treating horses?

¶56:

¶57: **Q4.1 The next questions are regarding the developmental issues of animal chiropractic in South Africa. What is your opinion of animal chiropractors seeking their own governing legislation with regard to animal chiropractic in South Africa? Do you feel that this should fall under veterinary legislation or that it should it almost be incorporated on its own?**

¶58:

¶59: The animal act or the veterinary council, or whichever way you want to go back, those rules have been set in place many, many years ago. To be totally honest, they sometimes appear to protect the vet. They do protect all the animals and I do think that is what their aim was, is to protect the animals, but it also protects the vets. I am not saying that we should carry drugs around with us, no not at all. I am saying that if we supply the drug by the vet to give to an animal then so be it. I am not saying that we should carry sedation, or any other pain killers or anti inflammatories and that, but by the same token there are certain things that I think are a little bit out of the ark and we need to make our own decisions about things and as a group, present it to council and try and have it changed, but like any rule or any law in this country, it is going to take a long, long time to change. I think it occurs to slowly and not necessarily in the benefit of the animals.

¶60:

¶61: So, in your specific industry I am not sure where you would find problems like that, but I say, having done horse dentistry before, I know that we can't take out teeth and I can look at a certain tooth and know that in a couple of days time that tooth is going to lift and is going to start cutting the inside of the mouth. Now, I don't have a veterinary or if I had a forceps on me I could just pop it out and the horse would be more comfortable for it, but to stop everybody else just taking a pair of pliers and pulling out horse's teeth, they have to have legislation. If the chiropractors become a registered para-veterinary group and they have their guidelines and they have their code of conduct, then council should be more flexible with them, but by the same token they must fall under the council and if anybody steps out of the line, they should be penalized accordingly. Either under the animal cruelty act or SPCA or whatever, but they should and if it means that that person can't practice again for ever, or practice for two years or whatever, then so be it.

¶62:

¶63: If it is deem so, but at the end of the day I do think that the wheels turn a bit too slowly from that point of view and I certainly think that the vets have the utmost respect for their elders and for the people who taught them. So, when in it comes from way back then I think those guidelines could be a little bit more flexible and they should change with the times.

¶64:

¶65: **Q4.2 In your opinion what legal body should animal chiropractic register with?**

¶66:

¶67: I would think the Veterinary Council and because you would basically be doing an animal service, a healing service, you should fall under the vet, whatever council it is, being it the South African Veterinary Association or in the case of horses if you fall under the South African Equine Veterinary Association. Definitely, you have to fall under and work and be responsible for your actions. Whatever you are going to do, there is going to be consequences. So, if you have a transparent, strong group and you stick to the guidelines, you should be able to walk proud around one day and be recognized by the vets that you are not there as a threat.

¶68:

¶69: I think and people should be down for this that some vets consider para-veterinary groups as a threat to their business and it is so sometimes and may not necessarily be so. I think there are people who do good work and the vets who feels that, I don't know, he should open up his mind a little bit, but he might very well be right in saying that this man cannot do the job.

¶70:

¶71: **Unless he has had decent schooling for it?**

¶72:

¶73: Yes. But then, if you mess up a horse as a chiropractor, or a dog or any other animal. How do we know that you have messed it up? What do we do then once you have messed it up? What action do we take, because your intention is healing, but you might very well in that healing hurt a horse or aggravate the situation, or so called, diagnose it incorrectly. How to diagnose? I don't know, but you have to make some type of diagnosis. As a chiropractor even while you are working under diagnosis from the vet you are diagnosing something. So diagnosis is a grey area in my book. I can understand where they are coming from, but the word diagnosis, it is just too open. While you work, the vet says to you that this horse, or this dog needs its neck set and while you are working with that animal you find what is sore and what is not sore, you are diagnosing, so never mind that the diagnoses came from the vet, you are diagnosing and you might work on that dog's neck and find that it is also affecting his back as well, or went to his shoulders or something, so you are diagnosing, you can't help going about it. By doing the right thing you can cause an injury. You can tear a muscle or you can, whatever. You might be working on what the vet diagnosed, it might be correct, but in doing the treatment you might cause a problem somewhere else.

¶74:

¶75: **Q4.3 With no current training for this profession in the country who do you think should be responsible for the education of animal**

¶76:

¶77: In South Africa you are going to find vets that are chiropractic orientated or like to do the work. I presume that they have studied a bit further in depth to it. I think those people should be included in your group and between them and yourselves you should say what syllabus should be in and who should train and if there is enough people. There is no point in wanting to train people if there is no people who want to do it, or there is not enough people who care. Who do you find to mark your work? To say that this is right and this is

wrong, because if you go to America and you study under one group, it is different to what they believe in over here and vice versa and international too.

¶78:

¶79: I know that the other para-veterinary group say: "She is useless because she uses this machine and it can only do this" and this guys says: "you know he takes out teeth" and this and that, and that "he shouldn't be doing that". They are always knocking each other and the worst thing about it is that people in your own profession will knock each other. They will really believe that the other person can't do his job as good as them and they finish up giving their own profession a bad name. So who is going to train them, I don't know, but you should have a look to those vets there. Sit down and have a round table and decide the way forward, but with a good mixture of laymen, trained laymen, the works, yes.

¶80:

¶81: Q4.4 What further steps do feel is necessary in order for animal chiropractic to be better understood by veterinarians in South Africa?

¶82:

¶83: I want to if I call a vet in for a lameness and if he refers to a chiropractor or a physiotherapist, or a farrier to change whatever. You must remember that just the vet having a look at that horse is a cost and I am not saying we must get away with those costs and he did train for seven years or five years or whatever, it is still long, but by the same token, they have somehow married it in so that there is one cost, rather, I would like to see the chiropractor work for the vet as such, so on a pay by method, so that practice will earn from you, but you will be paid by the amount of work that you do. Then you are no threat to them, or you shouldn't be a threat to them, but then you are not going to get any referrals from other vets that are past that area, you are going to be restricted to their area and their vet. So, is there enough there to justify you being there?

¶84:

¶85: Earning the respect of the veterinarians?

¶86:

¶87: Of course you need to earn the respect of the veterinarians. I mean, how many people come into this game with a new machine or a new therapy. If we had to buy everything that came along. I went to that horse expo in Durban race course in November. If I walked around all those tables and stalls and believed everything, I am not saying that are not right or anything, but I mean I would not have enough time during the day to use all the machinery and do the rest of my work on one horse and that. So, I think what horse owners and horse trainers often do and forgive me if I am wrong, is that we do things that is going to make us sleep better. In other words, we are going to use whatever and see that this works on my horse and we start to believe in that and that we justify that we are sleeping better.

¶88:

¶89: Horse owners that have one horse as their child and it is often their child, so they like your face because you are the best chiropractor in town. If you have one horse that is fair enough, but when you have a lot of horses that is a different story.

¶90:

¶91: Q4.5 Where do see the profession in South Africa in the next ten years' time? Why?

¶92:

¶93: I think it is going to grow, but I would like to see it better regulated and I would like to see that there is a definite syllabus that is being followed and that you can see results, and people are not scared to say that I can't improve this horse and then you can refer it on to a physiotherapist or a better vet.

¶94:

¶95: Q5.1 In conclusion. Is there anything you would like to add?

¶96:

¶97: I think your biggest problem is going to be to get the Veterinary Council to be a little bit more flexible and to realize that you have got to get your group regulated. You have got to have a minimum code or standard of work. I would like to think that you must go work for a week every year with some other person and then somebody comes to you for a week and works with you so that you keep up with your trends, if you get paid or you don't get paid, whatever, so that your standards (emphasized) become a norm. So somebody from Pretoria comes and work with you in Cape Town and you go there. You have to attend any conferences to keep up, or one conference a year. You have to work for a week a year with a chiropractor until you are 5 years experienced and then after that it is optional. The thing is you have to set a standard and your training and somebody else's training could be completely different and you will always find the person giving a lecture and saying that: "in my opinion this is the way they do it, but in my opinion it is not necessary", or "I have never found this as being beneficial". So that is the person that has taught you. The next person, somewhere somebody has seen it in a lecture and believes in it.

¶98:

¶99: Thank you.

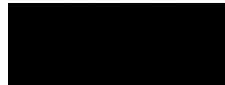
APPENDIX D: ETHICAL CLEARANCE CERTIFICATE

| | | | |
|-------------------------|--|----------------------|----------|
| Student Name | Pieter JaCobus Bosman | Student No | 20609169 |
| Ethics Reference Number | FHSC 005/11 | Date of FRC Approval | 4/3/2011 |
| Qualification | M. Tech: Chiropractic | | |
| Research Title: | An exploration of the current status quo of veterinary chiropractic in South Africa. | | |

In terms of the ethical considerations for the conduct of research in the Faculty of Health Sciences, Durban University of Technology, this proposal meets with institutional requirements and confirms the following ethical obligations:

1. The researcher has read and understood the research ethics policy and procedures as endorsed by the Durban University of Technology, has sufficiently answered all questions pertaining to ethics in the PGAA and agrees to comply with them.
2. The researcher will report any serious adverse events pertaining to the research to the Faculty of Health Sciences Research Ethics Committee.
3. The researcher will submit any major additions or changes to the research proposal after approval has been granted to the Faculty of Health Sciences Research Committee for consideration.
4. The researcher, with the supervisor and co-researchers will take full responsibility in ensuring that the protocol is adhered to.
5. The following section must be completed if the research involves human participants:

| | YES | NO | N/A |
|--|-----|----|-----|
| ◊ Provision has been made to obtain informed consent of the participants | X | | |
| ◊ Potential psychological and physical risks have been considered and minimised | X | | |
| ◊ Provision has been made to avoid undue intrusion with regard to participants and community | X | | |
| ◊ Rights of participants will be safe-guarded in relation to: | | | |
| - Measures for the protection of anonymity and the maintenance of Confidentiality | X | | |
| - Access to research information and findings. | X | | |
| - Termination of involvement without compromise | X | | |
| - Misleading promises regarding benefits of the research | X | | |



03/05/2011
DATE



3/05/2011
DATE

4/3/2011
DATE

4/3/2011

BIBLIOGRAPHY

Allan, G. (2003). A critique of using grounded theory as a research method. *Electronic Journal of Business Research Methods*, 2(1): pp 1-10.

Allied Health Professions Council of South Africa (AHPCSA) [online]. (2010). Available at: <http://www.ahpcs.co.za/> [Accessed 20 May 2011].

Allied Health Professions Council of South Africa (AHPCSA). (1982). Allied Health Professions Act 63 of 1982. Pretoria.

American Veterinary Medical Association (AVMA) [online]. (2011a). Model veterinary practice act. Available at: <http://www.avma.org/issues/policy/mvpa.asp> [Accessed 1 November 2011].

American Veterinary Medicine Association (AVMA) [online]. (2011b). Guidelines for CAVM. Available at: http://www.avma.org/issues/policy/comp_alt_medicine.asp [Accessed 11 February 2011].

American Veterinary Medical Association (AVMA) [online]. (2011c). Scope of practice: Complementary and alternative veterinary medicine and other practice act exemptions.

Available at: http://www.avma.org/advocacy/state/issues/sr_cavm_exemptions.asp [Accessed 11 February 2011].

American Veterinary Medical Association (AVMA) [online]. (2011c). Alternative and complementary therapies task force holds initial meeting. Available at: <http://www.avma.org/onlnews/javma/jan00/s011500h.asp> [Accessed 11 February 2011].

American Veterinary Chiropractic Association (AVCA) [online]. (2011). Available at: <http://www.avcadoctors.com/> [Accessed 10 January 2011].

Animal Physiotherapy Group South Africa (APGSA) [online]. (2011). Available at: <http://www.animalphysiogroup.co.za/> [Accessed: 18 January 2011].

Australian Veterinary Chiropractic Association (AuVCA) [online]. (2011). Available at: <http://www.avca.com.au/> [Accessed 11 February 2011].

Babbie, E. and Mouton, J. (2001). *The Practice of social research*. South African edition. Cape Town: Oxford University Press.

Bar-Gil, M.C. (2009). The perception of selected chiropractors, medical doctors, health maintenance organization representatives and chiropractic patients regarding the integration of the chiropractic profession in the Israeli health care system. Master's Degree in Technology, Durban University of Technology.

Barry, C. A. 2006. The role of evidence in alternative medicine: Contrasting biomedical and anthropological approaches. *Social Science and Medicine*, 62(2006): pp 2646–2657.

Bergman, G.J.D., Winters, J.C., Gronier, K.H., Pool, J.J.M., Meyboom-de Jong, B., Postema, K. and van der Heijden, G.J. (2004). Manipulative therapy in addition to usual medical care for patients with shoulder dysfunction and pain: A randomized controlled trial. *Annals of Internal Medicine*, 14(6), 432-439.

Boldt, E. 2002. Use of complementary veterinary medicine in the geriatric horse. *Veterinary Clinics of North America: Equine Practice*, 18(3): pp 631–636.

Boon, H. S., Verhoef, M.J., Vanderheyden, L.C. and Westlake, K.P. (2006). Complementary and alternative medicine: A rising healthcare issue [online]

Healthcare Policy, 1(3): pp 19-30. Available at: <http://www.longwoods.com/content/18120> [Accessed: 5 June 2011].

Borgatti, S. 2008. *Introduction to grounded theory*. [online]. Available at <http://www.analytictech.com/mb870/introtoGT.htm> [Accessed 17 August 2010].

Boudreau, L.A., Busse, J.W., and McBride, G. (2006). Chiropractic services in the Canadian armed forces: A pilot project. *Military Medicine*, 171(6): pp 572-576.

Brantingham, J.W., Globe, G., Pollard, H., Hicks, M., Korporeal, C., and Hoskins, W. (2009). Manipulative therapy for lower extremity conditions: Expansion of literature review. *Journal of Manipulative and Physiological Therapeutics*, 32(1): pp 53-71.

Brussee, W.J., Assendelft, W.J.J., and Breen, A.C. (2001). Communication between general practitioners and chiropractors. *Journal of Manipulative and Physiological Therapeutics*, 24(1): pp 12-16.

Caldis, K.S., McLeod, H.D. and Smith, P.R. (2001). The fall of the bamboo curtain: A review of complementary medicine in South Africa. *South African Actuarial Journal* [online], 1 (2001): pp 63-93. Available at: <http://www.actuarialsociety.org.za/Portals/1/Documents/670d0b83-8222-49c7-88b0-f649bcd704c8.pdf> [Accessed: 10 February 2011].

Castillo, J.J. (2009). Snowball Sampling. Experiment Resources [online]. Available at: <http://www.experiment-resources.com/snowball-sampling.html> [Accessed: 2 October 2011].

Chapman-Smith, D. (2007). The Chiropractic Report: Chiropractic on the move in 2007. 21(4): pp 1-8.

Cohen, D.J. and Crabtree, B.F. (2008). Evaluative criteria for qualitative research in health care: controversies and recommendations. *Annals of Family Medicine*, 6(2008): pp 331-339.

Complementary Veterinary Medicine Group (CVMG) [online]. (2010). Available at: <http://www.complementaryvetmedicine.co.za/> [Accessed 17 January 2011].

Cooper, S.R. and Pfefer, M.T. (2007). *Development of an on-site industrial chiropractic programme*. Abstract in proceedings of the WFC's 9th biennial congress, pp 202-204.

Coulter, I.D., Khorsan, R., Crawford, C. and Hsiao, A. (2010). Integrative health care under review: An emerging field. *Journal of Manipulative and Physiological Therapeutics*, 33(9): pp 690-710.

Creswell, J.W. (2007). *Qualitative inquiry and research design: Choosing among 5 traditions*. Thousand Oaks: Sage.

Cupchik, G. (2001). Constructivist realism: an ontology that encompasses positivist and constructivist approaches to the social sciences. Forum: *Qualitative Social Research On-line Journal*, 2(1). <http://www.qualitative-research.net/fqs-texte/1-01/1-01cupchik-e.htm> [Accessed: 17 March 2011].

Decrop, A. (1999). Triangulation in qualitative tourism research. *Tourism Management*, 20(1999): pp 157-161.

Denzin, N.K. (1978). *The research act: A theoretical introduction to sociological methods*. New York: McGraw-Hill.

Eisenberg, D. M., Davis, R. B., Ettner, S. L., Appel, S., Wilkey, S. and Rompay, M. (1998). Trends in alternative medicine use in the United States, 1990-1997: Results of a follow-up national survey. *Journal of the American Medical Association*

[online], 280(1998): pp 1569-1575. Available at: <http://jama.ama-assn.org/content/280/18/1569.full> [Accessed: 14 January 2011].

Fallon, M., Ryan, H., Ryan, A.B., Walsh, T. and Borys, L. (2006). "Post-positivist Approaches to Research". *Researching and writing your thesis: A guide for postgraduate students* [online]. Available at: <http://adulteducation.nuim.ie/documents/Thesis.pdf> [Accessed: 12 September 2011].

Fernández, W.D. (2004). The grounded theory method and case study data in information systems (IS) research: *Issues and design* [online]. Information systems foundations. Canberra: Australian National University, pp 43-59. Available at: http://epress.anu.edu.au/info_systems/part-ch05.pdf [Accessed: 20 September 2011].

Fisher, K. and Koren, A. (2007). Palm perspectives: The use of personal digital assistants in nursing clinical education. A qualitative study. *Online Journal of Nursing Informatics* [online], 11(2): Available at: http://ojni.org/11_2/fisher.htm [Accessed: 2 May 2011].

Foxa, P., Coughlana, B., Butlera, M. and Kelleherb, C. (2010). Complementary alternative medicine (CAM) use in Ireland: A secondary analysis of SLAN data. *Complementary Therapies in Medicine*, 18(2): pp 95-103.

Gaboury, I., Bujold, M., Boon, H. and Moher, D. (2009). Interprofessional collaboration within Canadian integrative healthcare clinics: Key components. *Social Science and Medicine*, 69(2009): pp 707-715.

Glaser, B.G. (1992). *Emergence vs. forcing basics of grounded theory analysis*. Mill Valley, California: Sociology Press.

Glaser, B.G. (1998). *Doing grounded theory: Issues and discussion*. Mill Valley, California: Sociology Press.

Glaser, B.G. (2001). *The grounded theory perspective: Conceptualization contrasted with description*. Mill Valley, California: Sociology Press.

Glaser, B.G. and Strauss, A.L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. New York: Aldine Publishing Company.

Gomez-Álvarez, C. B., Ami, J.J., Moffat, D., Back, W. and van Weeren, P.R. (2008). Effect of chiropractic manipulation on the kinematics of back and limbs in horses with clinically diagnosed back pain. *Equine Veterinary Journal*, 40(2): pp 153-159.

Gross, A., Miller, J., D'Sylva, J., Burnie, S.J., Goldsmith, C.H., Graham, N., Haines, T., Bronfort, G. and Hoving, J.L. (2010). Manipulation or mobilization for neck pain: A Cochrane review. *Manual Therapy*, 15(2010): pp 315-333.

Gqaleni, N., Moodley, I., Kruger, H., Ntuli, A. McLeod, H. (2007). *South African health review 2007: Traditional and complementary medicine*. Durban: Atlantic Philanthropies.

Hatch, J. A. (2002). Designing qualitative studies: Design elements. In Hatch, J. A. *Doing qualitative research in education settings*. Albany: State University of New York Press.

Hare, D. (1999). Complementary and alternative veterinary medicine. *Canadian Veterinary Journal* [online], 40(6): 376-377. Available at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1539722/> [Accessed: 23 March 2011].

Haussler, K.K., Bertram, J.E.A. and Gellman, K. (1999). In vivo segmental kinematics of the thoracolumbar spinal region in horses and effects of chiropractic manipulations. *American Association of Equine Practitioners Proceedings* [online], 45:(1999) pp 327-329. Available at: <http://www.ivis.org/proceedings/aaep/1999/327.pdf> [Accessed 22 June 2010].

Haussler, K.K. (2000). Equine chiropractic: General principles and clinical applications. *American Association of Equine Practitioners Proceedings*, 46(2000): pp 84-93.

Haussler, K.K., Hill, A.E., Puttlitz, C.M. and McIlwraith, C.W. (2007). Effects of vertebral mobilization and manipulation on kinematics of the thoracolumbar region. *American Journal of Veterinary Research*, 68(2007): pp 508-516.

Haussler, K.K. (2009a). Clinical techniques: Current status of integrative medicine techniques used in equine practice. *Journal of Equine Veterinary Science*, 29(8) pp. 640-641.

Haussler, K.K. (2009b). Review of manual therapy techniques in equine practice. *Journal of Equine Veterinary Science*, 29(12): pp 849-869.

Haussler, K.K., Martin, C.E. and Hill, A.E. (2010). Efficacy of spinal manipulation and mobilization on trunk flexibility and stiffness in horses: A randomized clinical trial. *Equine Veterinary Journal*, 42(38): pp 695-702.

Heath, H. and Cowley, S. (2004). Developing a grounded theory approach: A comparison of Glaser and Strauss. *International Journal of Nursing Studies*, 41(2004): pp 141-150.

Hellyer, P., Rodan, I., Brunt, J., Downing, R., Hagedorn, J.E. and Robertson, S.A. (2007). American Animal Hospital Association (AAHA) and American Association of Feline Practitioners (AAFP): 9(2007): pp 466-480.

Hillestad, S.G. and Berkovitz, E.N. (2004). *Health care market strategy: From planning to action*. 3rd Edition. Jones and Bartlett Publishers International.

Hoskins, W. and Pollard, H. and Bonello, R. (2007). *The effect of sports chiropractic on the prevention of athletic injuries in elite athletes: A randomized controlled trial*. Abstract in proceedings of the WFC's 9th biennial congress, pp 163-164.

Hurwitz, E.L., Carragee, E.J., van der Welde, G., Carroll, L.J., Nordin, M., Guzman, J., Peloso, P.M., Holm, L.W., Côté, P., Hogg-Johnson, S., Cassidy, J.D., Haldeman, S. (2010). Treatment of neck pain: Noninvasive interventions: Results of the bone and joint decade 2000-2010 task force on neck pain and its associated disorders. *Journal of Manipulative and Physiological Therapeutics*, 32(2): pp 141-175.

International Academy of Veterinary Chiropractic (IAVC) [online]. (2011) Available at: <http://www.i-a-v-c.com/en/index.htm> [Accessed 17 January 2011].

International Veterinary Chiropractic Association (IVCA) [online]. (2011). Available at: <http://www.ivca.de/> [Accessed 3 February 2011].

Jones, W.E. (2004). Changing times: Complementary veterinary medicine. *Journal of Equine Veterinary Science*, 24(4): pp 175.

Kelner, M., Wellman, B., Boon, H. and Welsh, S. (2004). The role of the state in the social inclusion of complementary and alternative medical occupations. *Complementary Therapies in Medicine*. 12(2004): pp 79-89.

Kienle, G. S., Albonico, H., Fischer, L., Frei-Erb, M., Hamre, H.J., Heusser, P., Matthiessen, P.F., Renfer, A., and Kiene, H. (2011). Explore: Complementary therapy systems and their integrative evaluation. *The Journal of Science and Healing*, 7(3): pp 175-187.

Korporaal, C.M. (2010). Personal communications with P.J. Bosman. 23 April 2010, 10:00.

Lin, J.H., Kaphle, K., Wu, L.S., Yang, N.Y.J., Lu, G., Yu, C., Yamada, H. and Rogers, P.A.M. (2003). Sustainable veterinary medicine for the new era. *Revue Scientifique et Technique de l'OIE*, 22(3): pp 949-964.

Linden, D. (2008). The effects of upper cervical spine manipulation on spot tenderness within the erector spinae muscles of show-jumping horses. Master's Degree in Technology, University of Johannesburg.

Loots, T. (2008). The effects of sacroiliac mobilization on spot tenderness within the erector spinae muscles of performance horses. Master's Degree in Technology, University of Johannesburg.

MacDonald, M.B., Bally, J.M., Ferguson, L.M., Lee Murray, B., Fowler-Kerry, S.E. and Anonson, J.M.S. (2009). Knowledge of the professional role of others: A key interprofessional competency. *Nurse Education in Practice*, 10 (2010): pp 238-242.

Makhubu, L. (2011). Development of an interpreting services model at the Durban University of Technology. Doctor's Degree in Technology: Language practice in the department of media, language and communication, Durban University of Technology.

McGowan, C., Stubbs, N., Hodges, P, Jeffcott, L. (2007). *Back pain in horses: Epaxial musculature*. Queensland. Union Offset.

McKelvey, B. (2002). Postmodernism vs. truth in management theory. Chapter in *Post: Modernism & Management: Pros, Cons, and Alternatives*. Ed Locke (Ed.). Amsterdam, pp 1-27.

McNamara, C. (1999) General guidelines for conducting interviews [online]. Available at: <http://www.mapnp.org/library/evaluatn/intrview.htm> [Accessed: 20 July 2011].

Meuwese, T.G. (2005). A pilot controlled trial to determine the effectiveness of instrument manipulation in the management of symptomatic canine hip dysplasia. Master's Degree in Technology, Durban University of Technology.

Morse, J.M. (2003). A review committee's guide for evaluating qualitative proposals. *Qualitative Health Research* [online], 13(6): pp 833-851. Available at: <http://www.sagepub.com/bjohnsonstudy/articles/Morse.pdf> [Accessed 4 June 2011].

Murray, R.C., Walters, J.M., Snart, H., Dyson S.J. and Parkin, T.D.H. (2009). Identification of risk factors for lameness in dressage horses, *The Veterinary Journal*. 184(1): pp 27-36.

Myburgh, C. and Mouton, J. (2007). Developmental issues in chiropractic: A South African practitioner and patient perspective. *Journal of Manipulative and Physiological Therapeutics*, 30(3): pp 206-214.

Myburgh, C., Hartvigsen, J. and Grunnet-Nilsson, N. (2008). Secondary legitimacy: A key mainstream health care inclusion strategy for the Danish chiropractic profession? *Journal of Manipulative and Physiological Therapeutics*, 31(5): pp 392-395.

National Board of Chiropractic Examiners (NBCE) [online]. 2010. Studies on chiropractic 2010: The growing prominence of chiropractic care. Available at: <http://hardwickchiropractic.com/wp-content/uploads/2011/04/nbce-brochure.pdf> [Accessed 2 May 2011].

Options for Animals (OFA) College of Animal Chiropractic [online]. (2011). Available at: <http://www.animalchiro.com/> [Accessed: 11 February 2011].

Palmer, B.J. (1944). It is as simple as that, Palmer College of Chiropractic.

Paulekas, R. and Haussler, K. K. (2009). Principles and practice of therapeutic exercise for horses. *Journal of Equine Veterinary Science*, 29(12): pp 870-893.

Redwood, D. (2009). The health reform movement: Peril and possibility in the Obama era. *Journal of Alternative and Complementary Research*, 15(2): pp 1-3.

Riggs, C.M. (2010). Clinical problems in dressage horses: Identifying the issues and comparing them with knowledge from racing. *The Veterinary Journal*. 184(1): pp 1-2.

QSR International [online]. (2011). NVivo 9. Doncaster, Australia. Available at: www.qsrinternational.com [Accessed: 11 January 2011].

Rahmat, S.M. (2000). Grounded theory methodology as the research strategy for a developing country. Forum: *Qualitative Social Research* [online], 1(19). Available at: <http://www.qualitative-research.net/index.php/fqs/article/view/1129/2511> [Accessed June 2011].

Santilli, V., Beghi, E., and Finucci, S. (2006). Chiropractic manipulation in the treatment of acute back pain and sciatica with disc protrusion: A randomized double-blind clinical trial of active and simulated spinal manipulations. *The Spine Journal*, 6(2): pp 131-137.

Sbaraini, A., Carter, S.M., Evans, R.W. and Blinkhorn, A. (2011). How to do a grounded theory study: a worked example of a study of dental practices. *Biomed Central Medical (BMC) Research Methodology*, 11(128): pp 1-10.

Schiff, M.R. (1970). Some theoretical aspects of attitudes and perceptions. University of Toronto, working paper number 15 [online], Available at: <http://www.colorado.edu/hazards/publications/wp/wp15.pdf> [Accessed: 4 April 2011].

Schoen, A.M. Wynn, S.G. (1998). *Complementary and Alternative Veterinary Medicine*. St. Louis: Mosby.

Schoen, A.M. (2000). Results of a survey on educational and research programmes in complementary and alternative veterinary medicine at veterinary medical schools in the United States. *Journal of American Veterinary Medical Association*, 216(4): 502-509.

Schreiber, R.S. and Stern, P.N. (2001). *Using grounded theory in nursing*. Broadway, New York: Springer Publishing Company Inc.

Seitzinger, A.H., Traub-Dargatz, J.L., Kane, A.J., Kopral, C.A., Morley, P.S., Garber, L.P., Losinger, W.C., and Hill, G.W. (2000). A comparison of the economic costs of equine lameness, colic, and equine protozoalmyeloencephalitis (epm). *Proceedings of the 9th International Symposium on Veterinary Epidemiology and Economics* [online]. Available at: <http://ddr.nal.usda.gov/bitstream/10113/45446/1/IND44444722.pdf> [Accessed March 2010].

Sullivan, K.A., Hill, A.E., and Haussler, K.K. (2008). The effects of chiropractic, massage and phenylbutazone on spinal mechanical nociceptive thresholds in horses without clinical signs. *Equine Veterinary Journal*, 40(1): pp 14-20.

South African Veterinary Council (SAVC). (1982). *Veterinary and para-veterinary act 19 of 1982 (Section 20-23)*. Pretoria.

South African Veterinary Council (SAVC). Veterinaryphysiotherapy. 30 July 1990, pp 18.

South African Veterinary Council (SAVC). Veterinaryphysiotherapy. 29 July 1991, pp18.

Strauss, A.L. and Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. London: Sage.

Taverner, C.B. (2011). The perception of veterinarians towards chiropractic and the chiropractic treatment of animals in South Africa. Master's Degree in Technology, Durban University of Technology.

Taylor, L.L. and Romano, L. (1999). Complementary and alternative medicine: Veterinary chiropractic. *The Canadian Veterinary Journal*, 40(10): pp 732–735.

Tiainen, T. (2006). Exploring forms of triangulation to facilitate collaborative research practice: Reflections from a multidisciplinary research group. *Journal of Research Practice* [online], 2(2): pp Available at: <http://jrp.icaap.org/index.php/jrp/article/view/29/61> [Accessed 4 June 2011].

Trochim, W.M.K. (2006). Web center for social research methods. Qualitative approaches [online]. Available at: <http://www.socialresearchmethods.net/kb/qualapp.php> [Accessed 2 August 2011].

Turner, J.A., Franklin, G., Fulton-Kehoe, D., Sheppard, L., Stover, B., Wu, R. (2008). ISSLS prize winner: Early predictors of work disability: A prospective, population-based study of workers with back injuries. *Spine* [online], 33(25): pp 2809-2818. Available at: http://www.whitfordchiropractic.com/files/chronic_work.pdf [Accessed 27 June 2011].

Urquhart, C. (2001). An encounter with grounded theory: tackling the practical and philosophical issues. In E. Trauth (Ed.) *Qualitative research in information systems: Issues and trends*. Harpenden: Idea Group, pp 104-140.

Veterinary Medicine Today (VMT). (2001). An insight into the AVMA Guidelines for Complementary and alternative veterinary medicine by the alternative and complementary therapies task force. *Journal of American Veterinary Medical Association*, 218(11): pp 1729-1731.

Vohra, S., Feldman, K., Johnston, B., Waters, K. and Boon, H. 2005. Integrating complementary and alternative medicine into academic medical centers: Experience and perceptions of nine leading centers in North America. *BioMed Central (BMC) Health Services Research*, 5(78): pp 1-7.

Willoughby S. (1998). Chiropractic care. In Schoen, A.M. and Wynn, S.G., *Complementary and alternative veterinary medicine: Principles and practice*. St. Louis: Mosby. pp 185-200.

Willoughby, S. (2002). *Veterinary chiropractic history* [online]. Available at: http://www.animalchiropractic.org/animal_chiropractic_history.htm [Accessed 22 February 2010].

Wimberley, S. 2009. *Alternative veterinary medicine*. *Pet's Health Magazine*, Spring 2010, pp 4.

Wise. R. I. (2010). The perceptions of selected stakeholders on the integration of chiropractic into the Kwazulu-Natal healthcare system. Master's Degree in Technology, Durban University of Technology.

World Health Organization (WHO) [online]. (2011). Available at: <http://www.who.int/medicines/areas/traditional/definitions/en/> [Accessed 31 October 2010].

World Health Organization (WHO) 2002. WHO Traditional medicine strategy 2002–2005 [online]. Available at: <http://apps.who.int/medicinedocs/en/d/Js2297e/11.html> [Accessed: 12 September 2010].

World Veterinary Year (WVY) [online] (2011). Vet 2011, why, with whom and how? Available at: http://www.vet2011.org/doc/en_Vet2011_info-oct11.pdf [Accessed 2 October 2011].

Wynn, S.G. and Wolpe, P.R. (2005). Commentary: The majority view of ethics and professionalism in alternative medicine. *Journal of American Veterinary Medical Association (JAVMA)*, 226(4): pp 516-520.

Xue, C.C. (2008). Traditional, complementary and alternative medicine: Policy and public health perspectives. *Bulletin of the World Health Organization* [online], 86(1): pp 77-78. Available at: <http://www.who.int/bulletin/volumes/86/1/07-046458.pdf> [Accessed 31 October 2011].