

How chiropractic recognition was accomplished within the Australian Higher Education System – The magnificent contribution by Dr. James Barry Ritchie

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How chiropractic recognition was accomplished within the Australian Higher Education System – The magnificent contribution by Dr. James Barry Ritchie.

This paper tells the good news and success story of the first chiropractic course in the world to achieve both full government funding and government accreditation. It also tells the story of Dr. James Barry Ritchie, former Principal of Preston Institute of Technology, who explicates the context in which Chiropractic was allowed to flourish in the interest of serving patients, mainly in Australia.

The pathos of this story is the disadvantage that resulted for many patients (whose suffering could be alleviated by chiropractic doctors) as a result of the misconceived actions of political medicine based on misinformation, lies, and malevolence that deter some patients from seeking chiropractic care.

There is extensive evidence that political medicine (or the political arm of conservative medicine) has had major difficulty to adapt to approaches to medicine other than their own, even in the light of major advances by rational, integrative medicine, the practitioners of which have been ostracised and treated very badly.

In the same manner, chiropractic doctors are in some instances still treated very badly by political medicine even though they make major contributions to caring for patients who require help that is not and cannot be provided by conventional medicine.

There is a long history of attempts to eliminate chiropractic in North America, which resulted in litigation that cost the American Medical Association very dearly – a fact seemingly ignored by political medicine in Australia who continued to take actions that confuse patients and deter people who can and need to benefit from chiropractic care, from seeking such assistance.

When chiropractic education in Australia moved into the government-accredited and government-funded higher education system at Preston Institute of Technology - thanks to the valiant efforts and very hard work of Dr James Barry Ritchie - we thought that a new era of chiropractic acceptance had dawned and that it was overdue and in the interest of chiropractic patients who are cared for each day. Only a few decades on, the attacks on chiropractic and complementary medicine by political medicine in Australia has escalated to become a major nuisance that is not in patients' interest. It had already surfaced at a low level through attacks on the author soon after his arrival in Australia in 1975. It has now reached a level characterised by attacks on several major universities who offer courses in complementary medicine, particularly chiropractic.

Whilst the notion of Integrative Medicine is sound, very much in the patient's interest, recommended by the New Zealand Royal Commission on Chiropractic and involves the provision of high quality care based on the experience and wisdom of both the rational medical practitioner and the chiropractic doctor, it is also being attacked by political medicine.

Professor Kerryn Phelps, past-president of the Australian Medical Association stated in ***The Australian, October 15, 2012*** that, in fact, there is "Evidence Aplenty for Complementary Medicines". She says:

*"I thought we had managed to get past those old turf wars - the "us v them" battles of the conservative medical old guard against the new wave of consumer interest in natural therapies, or their more contemporary combination as "integrative medicine". I thought we had reached a stage where we doctors could confidently refer patients for Medicare supported acupuncture or chiropractic treatment, or at the very least respect your preferences for blending treatments you had tried and found helpful. That was until the emergence of a group calling themselves "Friends of Science in Medicine". A lofty title, which sounds benign. Friendly even. Unfortunately, their motives were anything but friendly. Their agenda was a declaration of war. **They wanted to remove all complementary medicine courses from universities, including chiropractic, osteopathy, naturopathy, herbal medicine and traditional Chinese medicine.**"*

In response to an attack on the author and chiropractic within weeks of his arrival in Australia, Dr RR Andrew (October 28, 1977) Emeritus Professor of Medicine and former Dean of the Faculty of Medicine at Monash University, writing in the Age Newspaper, stated that "*Chiropractic Needs Government Support*":

"SIR, — Your article ("The Age", 19/10 on the Case for Chiro-practice (reasonably including quite a lot of the case against) could perhaps attract a commentary by one Involved. (I am not chairman of the Preston Institute Course Advisory Committee as stated but a member). I believe the AMA has shown good sense and objectivity in appointing two of its members — an anatomist and a radiologist — to this committee.

Some 10 years ago I was a member of an AMA sub-committee which inquired into the need for, and desirability of, registration of chiropractors. We reported that they should not be registered, and I still believe that at that time the recommendation was correct.

But times and that profession have changed. Our report then in essence stated that, given proper standards of entry and evaluation, an appropriate and demanding curriculum within a tertiary educational institution, the chiropractor

should be registered by a State registration body similar to the Medical Board of Victoria. The proposals of the PIT — a three year basic biological and psychosocial sciences, two years in clinical training — fulfil also these prerequisites. There are strong reasons for the course to be centred on Preston as recommended by the objective and authoritative Webb report tabled in Federal Parliament April 1977 which you quote. One can only earnestly hope that the Victorian Institute of Colleges agree to accreditation of PIT (or the course).

I have just returned from a conference in Queensland of the Australian Chiropractors' Association. Professor Webb, Vice-Chancellor of Macquarie University was present and clearly was in favor, as his report states, of registration. A distinguished Australian orthopaedic surgeon took an influential part in the discussions as did an American, Dr Scott Haldeman invited to speak particularly on education and research. He is probably unique – a Doctor of Chiropractic, a Doctor of Philosophy (physiology) and a Doctor of Medicine. Many of us, “the outsiders”, while having considerable doubts about the validity of the orthodox chiropractic view of causation, have no doubts of the considerable benefits chiropractors confer in many difficult clinical situations — about one and a quarter million chiropractic attendances a year (Webb report). [This was in 1977]

What is required now is recognition, registration and a well- based course with considerable emphasis on research to try and find out the way it works and how it works. To suggest that the empirical basis, even unproven hypotheses, are reasons for denying recognition is equivalent to not registering psychiatrists whose beliefs change not infrequently. Is it to be Freud or Jung or Adler or Laing who holds the key to their understanding? There still is remarkable diversity of thinking in the whole medical profession, just as great as between chiropractors themselves or between chiropractors and orthodox medicine, but they are all registered and may be deregistered by the Medical Board.

*Since I graduated in medicine over 40 years ago, I have seen medical household gods broken one by one. Painfully and gradually truth is emerging from research always based on the rejection of dogma and enjoined with scientific humility. I believe chiropractic has now reached the stage of having proved its worth and established its early maturity. The next step requires Government support, academic encouragement, and dialogue with medicine and other health professions.
R R ANDREW (Malvern).”*

Practitioners of political medicine say that there is *no evidence for the effectiveness of chiropractic care*, or worse, that as a consequence of so-called *lack of evidence* it must

be quackery. These assertions are based on the lack of Randomised Controlled Trials (RCT's) for certain chiropractic procedures. This is a situation of the pot calling the kettle black since there is similar lack of evidence for some 50% or more of conventional medical practice by its own admission, in prestigious medical journals.

The *lack of evidence* does not mean that RCT's have been done and had negative outcomes. It means that the RCT's have not been done, mainly due to disproportionate funding for chiropractic and CAM (Complementary and Alternative Medicine) research. Lewith (2007) writes that CAM has been very much the poor relation of research in the context of the EU, UK and US environments. The same applies in Australia.

The current UK CAM research budget is 0.005 of medical research spending (Lewith 2007). When placed against the context of CAM use in the UK (15% per annum and 50% lifetime use), this is hardly an adequate distribution of research funding as far as the population's use of CAM is concerned. While the total expenditure in the US is substantially larger, it is still miniscule in proportion to CAM use. Consequently, there is very limited research evidence within the whole field.

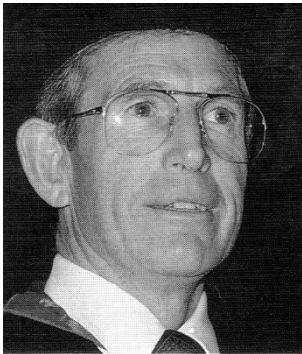
Absence of evidence does not mean absence of clinical effect. Oxman (1994), one of the fathers of EBM, makes it very clear that the absence of evidence of effectiveness should not be interpreted as being synonymous with absence of clinical effect. A pervasive problem in CAM is the inappropriate interpretation of limited and inadequate data, an approach which substantially misrepresents the underlying principles of rigorous EBM.

Carleton (2000) quotes Clearihan (Australian Family Physician 2000) who argues that the dividing line between 'orthodox' medicine as 'scientific' and 'unorthodox' medicine as, by definition 'unscientific' is not plausible. She points to examples of common practices in orthodox medicine that are not supported by scientific evidence.

Many things taught as 'standard practice' for generations in medical education have only been loosely based on evidence. Medical practice is often, but far from always, formulated on the best available evidence at the time. It would seem, however, that orthodox medicine is often a little too ready to find new ways of intervening without questioning itself with the same rigour and outcome data that it expects from unorthodox medicine (Australian Family Physician 2000 p. 1)

As pointed out by Smith et al (2013) in the following citation, the reservations surrounding aspects of medical care tends to be suppressed by trying to shift the focus onto chiropractors. FOSIM (Friends of Science in Medicine) questions the efficacy of chiropractic care, but the medical record should be noted and certainly not envied by chiropractors. 50% of medical treatments are of unknown effectiveness (Austin Frakt. January 16, 2013 at 12:20 pm) <http://theincidentaleconomist.com/wordpress/half-of-medical-treatments-of-unknown-effectiveness/>

A Tribute to Dr James Barry Ritchie



Carroll (1995) states that: *Dr James Barry Ritchie, former Principal at Preston Institute of Technology, had worked closely with his staff to push the Institute's public image in very positive terms.*

It has been the great privilege of the author of this paper to have worked closely with Dr Ritchie from late 1975 until Dr. Ritchie left Preston Institute of Technology. His major achievements include, *inter alia*, the establishment of the first chiropractic course in the world within a government-funded and government-accredited higher education system; and the establishment of the first nurse education program within a higher education institution in Australia.

As a man of great vision and insight and a ceaseless worker, with persistence, he guided these major developments through government instrumentalities, meeting with Ministers, members of Commissions, medical bodies, a major hospital, etc. to ensure that decision-makers were fully informed on issues of great importance. He took personal interest in the professional politics and key persons responsible for decisions that paved the way for professional advancement of chiropractic and nursing - the impact of which will continue to benefit patients and the healthcare community for a very long time.

The work by Dr Ritchie in Australia at Preston Institute of Technology (PIT) has had significant international impact and became a model that influenced chiropractic registration in the Netherlands and South Africa, and chiropractic education in South Africa, Japan and South Korea.

In Australia, Dr Ritchie overcame resistance to the integration of chiropractic education in the funded public University system – a situation which still plagues programs in Canada and the USA.

* Carroll B, 1995: *A decade of achievement. Phillip Institute of Technology* RMIT Press, Collingwood, Victoria, Australia. p. 7

1. Remarks by Dr J B Ritchie as Principal of PIT

Author: Dr James Barry Ritchie– 20 April 2020

Barry Ritchie was born in Melbourne in 1933, as Australia was recovering from the Great Depression. Before they married, his parents were boarders both from regional Victorian families; father was an employee baker whose family had a General Store and coach line but could no longer survive on the gold fields of the Buckland Valley; mother was the daughter of an upcoming Policeman who spent time managing a number of regional police stations until becoming a Superintendent of Police.

The Ritchie family struggled financially. Father worked a night shift at the local Bakery six nights a week; he also worked casually on Melbourne horse racing tracks on Saturdays and mid-week. In the sixties and seventies many strikes by the bakers' union put him out of work; he then loaded and unloaded rail wagons with bags of wheat, etc. at the North Melbourne rail yards as a casual. I learnt much about union behaviour and its effect on family survival. Mother looked after the three boys. During the second world war the ARP (Air Raid Precautions) organised local Sunday morning practice, which brought the community together. The local ARP Social group ran monthly dances and community activities for decades after the war. The boys attended secondary school at "Caulfield Tech." Barry achieved a Diploma of Mechanical Engineering which allowed him to complete a Bachelor Degree in the same discipline at the University of Melbourne.

Around 1943 the Education Department was desperate to educate technical college teachers with Bachelor degrees and industry experience to upgrade Diploma teacher standards. The two elder boys, Ronald and Barry gained Technical Teacher Training Scholarships to complete their Bachelor degrees as "block exemption" students at the University of Melbourne. The scholarship required two years of engineering experience to be undertaken. This turned out to be the best possible experience for me; I gained a Project Engineer's position at Carlton and United Breweries Ltd. I learnt much about getting on with tradesmen during 24 hr work repairing break downs due to dirty coal from rationed coal pits. I worked engine room shifts when the Brewery was on strike, normally just before Christmas.

Teaching was challenging in Education Department Technical Colleges with shortages of qualified teaching staff. I taught two or three different Diploma subjects simultaneously with lecture notes prepared one-week ahead and also designed and taught night classes two nights a week.

After meeting my scholarship requirements, without any regrets for the experience, I decided that my future required a doctorate which meant joining the staff of the University of Melbourne. Accepting the risk of limited term contracts and significant loss of pay with a young family, I became a full time member of staff, the PhD was completed, one of the first in Engineering at the University I believe, and a prize for the best paper published outside the UK in the prestigious Institution of Mechanical Engineers Journal, and a year

of study leave at the University of Manchester Institute of Science and Technology. I was ready to leave the University.

I was appointed Principal of the Preston Institute of Technology, a VIC (Victoria Institute of Colleges) affiliated College servicing the Northern suburbs of Melbourne. A site for a new campus at Bundoora had been chosen. Commercial research for companies in the region while at the University had led to meeting local influential company executives giving me a great network for support.

Student experience at “Caulfield Tech.” gave me an appreciation of the value of Post-Secondary Education meeting the needs of the applied professions in the fields of engineering and science. Even after my full-time retirement I consulted for the private higher education university sector in Australia. My fundamental position has always been that the community has a responsibility to provide quality education for professions supplying services within it.

2. Higher Education in Australia Post the Second World War

Author: Dr James Barry Ritchie– 20 April 2020

The development of Preston Institute of Technology (PIT) as a tertiary education institution needs to be understood in the context of the development of tertiary education in Australia post the second world war in 1945.

In the thirty years 1960 – 1990 following the second world war, the Federal Government had to face the task of reshaping and modernising almost all aspects of government, community, and social services. In higher education it had to contend with inadequate universities teaching many out-of-date traditional courses, build a binary system by upgrading applied professional post-secondary colleges to equivalent university standard, and approve new courses and related curriculum to meet emerging applied community needs. Chiropractic was one of these courses accredited in the 1970s.

Australia emerged from the second world war still as a colony of Great Britain bound by British dictates and interests. It had a prime role and captive market in providing agricultural products for consumption by the population of Great Britain. Its allegiance to British structures and practices was strong. Its tertiary education system and its hospital and medical system copied these government-funded systems.

Formation of the EU customs union in 1968, which freed trade between EU member countries, had a dramatic and damaging effect on Australia’s economy removing the protection Australia had through its colonial trade ties with the UK. Protection of agricultural exports was removed, and Australia had to develop new export markets.

The uncertainties of climate in an agricultural-based economy, and the revolution in mechanisation due to the second world war, led to the government recognising the need

to expand the Australian economy by building a technology product-based economy in addition to its agricultural-based economy.

The second world war decimated the population of experienced potential decision-makers who would normally have provided senior management and leadership in a growing society. The Martin Committee into the Future of Tertiary Education in Australia¹, which reported in 1964, showed that in 1946, two-thirds of the 25,600 university students in Australia were returning defence force personnel, who aspired to senior professional positions. Younger less-experienced Australians and migrants without Australian experience, had to provide economic and social leadership to manage the growth of the economy in all its facets.

In 1945 the Commonwealth Government agreed to increase the population by 2 percent per year to bolster its population. During the next seven years approximately 170,000 migrants arrived, predominantly from Europe. For example, between 1949 and 1974 Australia's largest construction project, the Snowy Mountains Scheme initiated by the Commonwealth and State governments, employed many migrants from Europe².

These factors, and returning service personnel, led to a 'baby boomer' population-explosion group, which was entering tertiary education by the mid Sixties. The Martin Committee was formed to advise the Federal Government on how to manage this growth through the decade to 1975.

The Martin Committee reported that there would be an increase of 44% in the tertiary education age group by 1975. In addition, greater demand for further education would lead to an overall estimate of 110% in enrolment demand. It believed that the university sphere could meet the demand for its component of higher education with an additional university developed in each State.

The Martin Committee found that a focus of education and training on the sciences and technologies had developed in Australia by the 1960s. This had led to improvement of quality and interest in the technologically based college of advanced sphere. It concluded that the rate of growth necessary in this sphere should be greater than in any other sphere of tertiary education. It should provide an equal but different sphere of tertiary education to the universities.

Need for a balance between education in the science and technologies and in the social sciences was recognised by the Martin committee. More sophisticated management of the production and distribution of goods and services had led to the need for education in the consequent broader human issues, a function of the social sciences. They argued that knowledge of human relations, in the broadest sense in product manufacture, and in community and social relations, was fundamental to modern tertiary education. The Martin Committee³ stated that: "It is not intended to give the impression that the material benefits of education are to be derived solely through science or technology. The

evolution of the institutions through which society organises the production and disposal of its goods and services – the subject-matter of branches of the social sciences-contributes vitally to the efficiency of the economy.” They were silent on the need for education in the health sciences.

The Martin Committee concluded that the post-secondary education demand, historically met through the engineering and science sectors, required strengthening in the social sciences and humanities. A consequence of the report was the recommendation for an Institute of Advanced Education in each State to manage the future development of the technical-training sphere. The VIC was established in Victoria by the Victorian Government as a consequence.

Because of its engineering strength, the State of Victoria had a particularly strong tertiary level Engineering Diploma structure in Melbourne and in the regions. Regional examples included the Ballarat School of Mines and Engineering, developed to meet the need for skilled miners in the Central Victorian gold fields and now amalgamated into Latrobe University; the Gippsland Technical College, developed to meet the need for technical staff on the Gippsland brown coal fields and its accompanying electricity generation industry, now amalgamated with Monash University. In the 1970s all Institutes of Technology were affiliated with the VIC, which had responsibility for their course and curriculum development and standards.

In 1978, the Minister for Education, the Hon. John Dawkins^{4,5}, noted that the roles of the universities, institutes of technology (colleges of advanced education) and research through the CSIRO had become blurred. Institutes of technology had moved from their traditional role of undergraduate teaching and industry-consulting towards conducting pure and applied research. They had the power to award degrees through to Doctor of Philosophy level. He created the unified national system of universities amalgamating the existing institutions.

In the 1980s the Federal Government limited its course approval role to ensuring a common standard for prescribed awards. It established a triennial system of funding for the higher education institutions. It encouraged the States to amalgamate all higher education institutions into the universities. The binary system was transformed into a Federally funded unified system, with the States constitutionally responsible for its provision through the State legislated universities.

The City of Melbourne had four significant technical colleges providing engineering courses at Diploma level. They have been converted or amalgamated into universities, presently legislated as:

- The Royal Melbourne Institute of Technology University, previously the Royal Melbourne Technical College, centred in the City and now including the Preston and Phillip Institutes of Technology located in the Northern suburbs,

- Monash University, previously Caulfield Technical College, located in the South-Eastern suburbs,
- Victoria University, previously Footscray Technical College located in the Western Suburbs’
- Latrobe University, including Ballarat School of Mines and Industry.

As described above, each of these universities and colleges of advanced education has been through significant changes in accreditation, independence, and curriculum approval since the 1960s. Much of this change can be attributed to the following factors:

- Transfer of funding for higher education (universities and colleges of advanced education) from the States to the Federal Government.
- Federal and State Government concern to upgrade the College of Advanced Sector and rationalise and unify diploma and degree standards across the higher education sector. The Partridge Committee Report⁴ in 1978 stated that: “The statutory authorities have roles which go beyond that to be expected of co-ordinating and accrediting bodies in that they are required to stimulate the improvement of academic standards in affiliated colleges.”
- Rationalisation of the number of higher education institutions through amalgamation of the colleges of advanced education into universities (the Dawkin unified system of higher education).
- Increase in transferability of study between sectors and institutions. For example, exemptions to the first two years of four-year Engineering Degrees for those with completed Diplomas – known as “block-exemption” students. As the universities have developed, the need for control of standards and courses no longer required centralised State control, which has been delegated to the universities.

The following section will explore the process of approval of the Chiropractic Course in the 1970s, the period when the Chiropractic and related courses were being accredited at PIT through the VIC.

3. Victoria Institute of Colleges Support and Approval for a Chiropractic Course

Author: Dr James Barry Ritchie– 20 April 2020

Preston Technical College was affiliated with the VIC (Victoria Institute of Colleges) as a College of Advanced Education in 1968. The college contained separate Girls’ and Boys’ Technical Schools, Trade Schools (TAFE) in the traditional building trades, Diploma courses in Business and beginning Bachelor degree courses in Engineering, Science, Business and Art and Design. The VIC accredited degree courses plus TAFE separated as PIT in 1972, accredited courses and administration moved to the new campus at Bundoora between 1972 and 1975.

A number of early initiatives were undertaken to strengthen support for PIT in the community and to strengthen the recognition of the College of Advanced Education sector in post-secondary education:

As Principal, I was invited to join the Rotary Club of Preston, which contained many of the leaders of the region.

Membership of the Rotary Club led to Board membership of the Austin Hospital (a major teaching hospital for the University of Melbourne) and eventually to the development of Diploma level Nursing Courses for the hospital. The relationship with the University of Melbourne Medical School led to establishment of an Anatomy laboratory at Bundoora to support Chiropractic and Nursing. Networking led to acceptance by key members of the University medical schools to a School of Chiropractic being established at PIT.

Recognition of PIT within the College of Advanced Education sector was enhanced when I was elected as Chairman of the newly formed Association of Principals of Colleges of Advanced Education in Australia (APCAEA), the equivalent of the Australian Vice-Chancellor's Committee (AVCC) for universities. An example of networking between the sectors was a dinner hosted at the Institute for members of both associations to break down barriers and build awareness of the value of the binary system for undergraduate and postgraduate education in Australia. Award winning wines from the Riverina College of Advanced Education highlighted the difference in approach between the two sectors, "equal but different". A number of joint initiatives were agreed between the two higher education Associations including the long-running Higher Education Supplement in the Australian Newspaper.

The VIC had been a leader in achieving salaries and conditions in colleges of advanced education closer to that in universities. I agreed to serve as the Academic Salaries Tribunal representative for the Colleges of Advanced Education sector (APCAEA).

PIT, being the most recently accredited Institute, was always under threat of being closed because of the number of colleges of advanced education in Victoria. The northern suburbs of Melbourne had not been as well developed as the other suburbs although engineering service companies were strong (I served as a Board Member on the Siddons Industries Ltd Board, a significant tool and concrete fixing company). The suburbs also contained a large paper-manufacturing plant, a cylinder gas supply plant, and Kodak Ltd a photographic manufacturing company. They were representative of the regional support for maintenance and enlargement of the College as a tertiary-education facility. To highlight the risk of PIT's position in post-secondary education, the Partridge report⁶ on rationalisation of post-secondary education had recommended closure as late as 1978.

A policy of development of emerging courses in growing demand and linking the applied sciences and social science strengths of the Institute was adopted by Council; retention and growth of the Engineering School was unlikely to be successful because of the number of competing Schools in existence.

Change was a costly process. It led to Annual meetings with the VIC over budgetary deficits, exacerbated by lower per capita budget allowances. The annual budget was determined by the VIC. To succeed, PIT had to develop new courses in the Social Sciences, which were lower cost per head than the Applied Sciences and which accorded

with the Martin Inquiry recommendations. PIT had retained its Applied Science School which could provide the link with applied social science courses.

Internally, PIT had established the requirement for high quality community and professional proponents to support new courses. PIT also required submissions for any new course to be of the highest standard and approved by its Council for submission to the VIC. This was important to obtain VIC respect for its submissions and justify support for the significant number of these in relatively new discipline areas. The various committee and approval processes for Chiropractic are set out in detail in Chapter 8. PIT required that new courses were to lead to a demonstrated professional career. Course development had to be through members of the respective profession ensuring that accreditation by the VIC met its requirement to demonstrate the need for a course. The following courses were developed during the 1970s.

Social Work was registered as a profession in Australia in 1955. In 1974 the Australian Association of Social Workers required all new members to have a four-year undergraduate degree for entry. In Victoria the only degree was a Post-Graduate degree at the University of Melbourne. Recognising its responsibility to provide education to meet the needs of professions, PIT developed and had accredited a four-year undergraduate professional degree in Social Work in 1975.

PIT was one of two institutes selected by the Victorian Post-Secondary Education Commission (VPSEC) to offer degrees in Applied Science based on Physical Education. The course content was underlined by human physical development, human movement and sports development. Accredited courses commenced in 1974. The School was able to provide subjects such as Anatomy for other Schools.

PIT took its first steps in Nursing Education in 1975 with a Certificate Course in Occupational Health Nursing. A Diploma course in Applied Science (Nursing) was added in 1977 in conjunction with the Austin Hospital and a Bachelor of Nursing (Advanced Nursing) commenced in 1981.

By the end of 1979, PIT had transformed into an institution offering courses in the health professions supported by the applied sciences and related applied disciplines such as Business.

In 1975, the Ward Committee⁷ recommended that a degree course in Chiropractic be accredited by the Australian Council on Awards in Advanced Education on the recommendation of the VIC. The committee reported that they had met with the senior University Deans of medicine or their counterparts who had not raised any objections to the course⁵. The Webb Committee⁸ 1977 (Federal Parliament) recommended establishment of a registration body and a Tertiary Course in Victoria.

The addition of Chiropractic matched the policies and objectives of the PIT Council. Chiropractic was a newly emerging discipline, sought by the community in Australia as a professionally registered component of the Health Sector. The recommendations gave confidence that, provided its other requirements could be met, it could proceed with a proposal to the VIC. New course approval was the responsibility of the VIC at that time. The International College of Chiropractic had been established in 1974 and had prepared a detailed curriculum for a Chiropractic course. This allowed a high-quality College Course Advisory Committee to be established meeting one of the key requirements for PIT approval. To have Emeritus Professor R. R. Andrew, Dean of Medicine Monash University as a member of the College Course Advisory Committee in Chiropractic was extremely helpful.

The Australian Chiropractors' Association (ACA) established the International College of Chiropractic in Melbourne in 1974. They had organised with the Royal Melbourne Institute of Technology to teach some basic science courses through its commercial arm, Technisearch. In part due to changes in VIC requirements for affiliated Colleges, RMIT withdrew from the arrangements, which ceased at the end of 1975. If PIT intended to seek approval for the course, it was reasonable for it to undertake the relevant teaching with its Applied Science staff on a limited term basis.

The establishment of a Chiropractic course was contentious among some members of the community and of the Health profession. The PIT Council had to consider carefully whether the establishment of the course would undermine the College's credibility in the community, negatively affecting enrolment in its other courses and its reputation in the community. The Ward Committee recommendations, followed by the Australian Government Webb Report recommendations, and discussions with key members of the community and of the local hospitals, was vital to obtain their support, or at least their preparedness not to object.

Concern for the possibility of a negative image arising for PIT led me to undertake an extensive study tour of chiropractic in the US, Canada and the UK. Not only was the reputation of PIT/Chiropractic important but I quickly discovered that the different countries had quite different approaches to medical attitudes to patients and also to laboratory treatment of deceased persons in Anatomy laboratories. I needed to reconcile this with Australian practices and the use of overseas academics.

The Ward Committee had been very concerned about a negative UK medical attitude to change. Considering that Australia was strongly linked to the UK because of its colonial past, and that most development in Chiropractic had taken place in the US, these different backgrounds could give rise to difficulties when the relationship between chiropractic and osteopathy was of importance. The Ward report made it clear that at that time medicine in the UK did not concern itself with manipulative therapy. The report criticised the UK profession for its attitude saying that research in this area had been totally neglected. PIT

had to resolve this concern because the recommendation of the Ward Committee had been for a course in Manipulative Therapy including Chiropractic and Osteopathy. The Chiropractic profession in Australia did not support the Ward Committee recommendation and separate courses had been introduced by the Chiropractic School at RMIT University. The Chiropractic profession had developed strongly in the USA and had formed professional links with the ACA. Funding policies, and accreditation for professional courses in the USA, were quite different to those that applied in Australia. All formally accredited undergraduate degree courses have to be registered and are funded through the triennial funding mechanism. Hence, accreditation by an accreditation authority was a pre-condition in Australia for government funding.

As with the other professional courses, the PIT Council and the VIC at the time of accreditation required that the profession demonstrate its support for the curriculum and course structure. The VIC also had the course subject to scrutiny by a separate committee and a number of changes were required and approved by the VIC Course Advisory Committee. The Chiropractic course was approved by the VIC in 1975.

In the 1970s, PIT was an affiliated College of Advanced Education. In the early 1980s, following approval of the Chiropractic and related courses, they were transferred to the Royal Melbourne Institute of Technology University as part of the unified system of higher education.

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