



Chiropractical Episode 12

Guests: Dr. Micheala Edwards, Sheena Mahan

Chick Herbert: Hey everyone. This is Chick Herbert. Welcome to Chiropractical. We're really excited that you are joining us on today's episode, where we talk about diversity, equity and inclusion, a really important subject to Melissa and I, but in the bigger picture, an important subject for our country and for the chiropractic profession

Melissa Knutson: Hi, this is Melissa Knutson. It's estimated that less than 1% of licensed chiropractors are black, yet the black population of the United States is over 13%. This results in a significant deficit of practitioners to serve that demographic. And the same is true for other reported races. On today's episode, we're going to talk about why that gap matters and what you can do as a chiropractor to help close the gap.

Chick Herbert: We're so excited to welcome our special guests today. Dr. Micheala Edwards hails from Kansas City, not far from us. She attended the University of Kansas on a track scholarship where I'm convinced she beat the pants off my Iowa State Cyclones. She went on to earn her doctorate degree in chiropractic from Logan University.

Melissa Knutson: Dr. Edwards is the current president of the American Black Chiropractic Association. It's in this role that I was able to meet Dr. Edwards for the first time. A few months ago, Dr. Edwards and other members of the ABCA board came to the NCMIC office. We got to talk about all things ABCA, the future of the organization and how NCMIC can support their initiatives. There was a ton of excitement and passion in that room. We're excited to have Dr. Edwards with us today. Welcome, doctor.

Dr. Micheala Edwards: Thank you so much. I am excited to be here with you guys, and we had such a great time in Iowa with you. Thank you for hosting my team and I there for a powwow of sorts and it was that - it was a great powwow, so I feel most welcome.

Melissa Knutson: It was amazing. I'm going to start us off with a pretty loaded questions. This can be a heavy question, but diversity and inclusion. What does it mean to you?

Dr. Micheala Edwards: When we break down those words, they pretty much are straightforward. When you talk about a diverse population, you talk about a population that has some people that are separated by certain aspects or attributes. And so in order to consider yourself or your entity organization, school business, or whatever you would like to apply this concept to, if you want to call them diverse, then you must include every representation of every difference within that group. That's the diversity piece.

Inclusion means everybody gets a choice to be included. Everybody gets to have their day, have their voice heard. Inclusivity within diversity literally provides something that is more



well-rounded and much more powerful because the reach of the external part of that entity has grown exponentially.

When you don't have a diverse and inclusive population, your power is small. It's only responsible for what it can represent. So when we talk about being diverse and inclusive, we talk about growing the power and the energy of something so that it reaches further and more people.

Melissa Knutson: When you think about growing that power of the chiropractic profession talking about why does diversity matter in chiropractic?

Dr. Micheala Edwards: We don't have a lot of diversity within the profession so our reach is minute. We are not reaching near the population that we can because our power, our energy is not being coupled and put out there properly.

Of course it's so important to increase those numbers of diverse chiropractors and students in the profession. Because with that, they literally will turn around and spread the power back into the communities that were underserved, or just had not been exposed to chiropractic to begin with.

It's very important for the profession to move - meaning change - so that we can grow this power. It is like the tumbleweeds: you put your power out there, which is the wind. The wind blows up, kicks up, some dust grabs a hold us and things. And it just keeps tumbling and growing, but it has to find its same type of energy and power. Before you know it, you have this humongous tumbleweed that then just goes somewhere and when it reaches the right power that potentially can cause a change in the atmosphere, things just explode. And now you see everybody is oh, y'all are over there? What's y'all doing, let me go over here. An adjustment - what's that? And then people just begin to get excited about health and wellness along another pathway of energy. It's very important for the profession so make this change or shift into growth that we are going to be thrown into in a minute.

Chick Herbert: Dr. Edwards, does it start with exposure to young people or young adults and adults to the profession as patients and understanding. I know you grew up in Kansas City - when did you first become aware of chiropractic?

Dr. Micheala Edwards: I became aware of chiropractic really late in life. I was an athlete in the eighties and nineties and back then, you barely had an athletic trainer if that was the case. I competed with ailments. I had flat feet. I had low back pain and I was a hurdler. So of course, all of that was probably a natural pain just because of the sport that I was doing. I didn't learn of chiropractic until I literally was a graduate from undergrad and was hanging out with a girlfriend of mine and her husband, who at the time was a student at Parker. He was like a tri nine or 10 at Parker. I had allergies really bad. And he saw that I was having an



issue and he offered to adjust me. I had no clue what the chiropractic adjustment was nor had I ever really - I had heard of chiropractic, but I had never really explored what that meant. I was probably 23 at the time. So as a 23 year old newly undergrad graduate I think that's sad that I had never really known what chiropractic was.

When we bring it back and we talk about the topic of reach within those underserved communities, I think we can start a number of places. I have been speaking at different events for the last maybe seven or eight months and I have always talked about the vicious cycle. There's a cycle where you have certain aspects that all play a major role in the growth of the profession, where diversity and inclusion is concerned.

There's a number of ways that you can tackle this thing. You ask, do we go in the community? Do we pull the children and try and teach them at an early age? Well do we go to the colleges and try and win some new chiropractic students there, or do we literally just create some marketing tools to actually put into the communities on a national scale so that everybody can at least learn about what chiropractic is.

We want to have our teachers and our speakers and our administrators and our boards of directors at our schools and at our associations, and at our companies you guys, we want to make sure that everybody is inclusive and displays a diverse board or leadership group for that entity so that again, everyone's reach can grow.

I say we just pick one of the points on that vicious cycle and start wherever it is. It may be that we need to increase or improve our marketing of the profession. Make sure that diverse groups of speakers are in front of crowds of public citizens so they get to hear and see people that look like them talk about matters that they deal with every day. Then we need to make sure that once we get the diverse group of students in the seat at our schools, the schools have to do their part to retain them and to retain minority students.

I think it's most important that they see someone that looks like them standing in front of them in the classroom or at the administrator's office or in the Regents office of their school. Everyone would like to see themselves at some point so that they can have an idea or a vision of someone, or something to model after.

We need to improve those numbers as well. We're not seeing a lot of black and brown teachers in our schools. We're not seeing a lot of black and brown administrators in our schools, but what is improving over the last eight to 12 months has been the number of black and brown members of boards, of directors across the board, within our colleges.

That's a great thing, but of course the ABCA has been hard at work plugging away at those items in that vicious cycle, which is why now we're able to see the effect of the cause that we took advantage of early on last year, so that we could actually see this change now. Any



place on the cycle, you can pick the school piece, you can pick the community piece, you can pick the leadership piece where you talk about speakers and who was hired at our schools and at our companies that deal with the profession. Wherever you pick it will constantly cause and effect the next thing in the cycle. It will clean up the cycle and the cycle will be a well-run and oiled machine, and everybody is represented and chiropractic has grown to what I say should be our goal and that's to be the gold standard of health and wellness care in America, and then across the world.

Chick Herbert: I'm a white chiropractor in Kansas City, Missouri, and I have my own small practice, and maybe I have a few staff. What can I do?

Dr. Micheala Edwards: What you can do is most definitely open your clinic to providing a service for the community that you sit in. Now, if you're in Kansas City, I'm going to say where's this clinic? That tells a lot about who you can treat, because I will tell you the urban core of most cities and I speak for my city, now, the urban core of most cities, the people in the urban core are not traveling out to the suburbs to go and get an adjustment.

They want to be able to see whatever it is that they need work right in the community that they are in. If your goal is to have your reach be made to the urban core or to some of these other communities that are underserved, then number one, you're either going to have to come out of your clinic and get into the community or you will literally have to link up with some entity in that community to pull the community to you. That's the first thing.

So you got to have some connections, which means you've got to open your mouth, which means you got to network and meet some people, which means you've got to learn how to talk the tic so that everyone is comfortable and that piece just happens naturally.

And then you can just throw in an, "Oh, by the way, my clinic is over here. If you want me to come in to one of your practices I can come to the community and volunteer about an hour of time at your sports clinic, I want to talk to the parents of the kids that's on that track team or on that basketball team."

And then talk about bringing them into my clinic and "We can work on how we can improve your little league team that plays on Saturday, where little Timmy is always trying to break some records and we're trying to figure out what's his next step. Is he going to be a college athlete or is he going to just fizzle out?" These are the conversations that chiropractors, no matter who you are, white, black, whatever, when you get into the communities, I can tell you now the urban core, my people, we are athletes.

That's probably the easiest way to get into a community of color is to utilize sports and athletics. Because that's the language we speak. And if you can get the parents, guess what: you got a whole household.



Melissa Knutson: You said a couple of things that really stuck out to me. Representation matters. People want to see people like them in position, so they know when they believe it's possible. And I think that's a huge, huge thing. Tell me more about your efforts right now to help create more representation of minority people in positions of leadership in the colleges? Owning a practice, working in a practice. Tell me more.

Dr. Micheala Edwards: We hit the ground running in July of 2020. We made so many changes to try to create a network that was easily accessible. This means we must put forward a group of dynamic speakers, writers, presenters, teachers, motivators and chiropractors like adjusters. Tangible. We put together a group of those types of people and we created our speakers portfolio where you can go to our website at ABCAchiro.com and you can click on a face and read the CV or the resume. Read about our expertise and where we are subject matter experts in it may be sports. It may be pediatrics. They may be geriatrics, et cetera, et cetera. And then you have another one click to actually contact us.

What we were seeing is that a lot of people would answer the question that we asked of why are not any people of color on your marquees for your events? The answer we would get is we didn't know that they were any available. You give me a problem. I'm going to find a solution. Now you can just click on our website. You don't even have to wait for an email from me or from a representative of the ABCA. I click on the website, you can find them a speaker, right? That's one piece.

The other side to that is when you talk about jobs, a lot of times chiropractic jobs are not posted anywhere. You can't really find a chiropractic job on Monster.com or Career Builder, or one of those other search engines. I'm sure people may have open positions or anything on their website for their specific companies, but I don't believe that anyone in the profession truly has a chiropractic job board. So the ABCA has created one. It's open and we've not gotten a lot of momentum on it. But we've created a space for external and internal associations, organizations, educational schools and such entities to actually post their job availabilities to reach our group of chiropractors in our network that has our website at their fingertips. Now our contact list is over 2000 people strong. When we send out links to our job board, everybody gets that link. You don't have to be an actual member. These are the things that we've done to try and make sure that our outward facing is most accessible.

As far as the internal piece, we have created and shifted our membership categories to include more mentoring of our young doctors, the ones that have graduated and are between the first and fifth year post-grad. We find that in that sweet spot, we have a lot of doctors who are still trying to pass boards. They're trying to figure out, Do I associate, or do I build, or do I teach, or what is it that I need to do?



We've created a lot of external trainings where we have linked up with some of our member doctors that are owners of companies in the profession that are specifically geared toward coaching, cultivating and training new doctors, hands on. We have some other coachings that literally help you to build the foundation of your practice. A lot of students have been in the tunnel vision of school score finals boards. Now it's real life. And it's hard for a lot of people to go from one to the other. So we have linked up with evoke, with Kairos training, cultural training, and then we have a couple of integrity docs that have dedicated their gifts to give to our membership, to provide a lot of talks, a lot of training courses and a lot of exposure to some of these things that these new grads normally wouldn't have.

The final piece, we created a committee led by Dr. Lindsay Banks that is tackling the issue of our board exams where we are hopeful that we can improve our board scores so that our doctors can get up and running and practice within one year of graduation. That's the goal of that committee. We've rolled in all of these new perks as member benefits under our new member category. We're thinking that a lot of our young doctors will have something to latch onto and learn from them so that they can better prepare themselves for leadership and for those roles, to step into those roles.

Melissa Knutson: I want to take it back to the patient side. If you think about the history of the medical profession, it is rife with injustice against people of color. How does that history impact trust and the care or the willingness of people of color to seek out medical care and specifically care from a chiropractor?

Dr. Micheala Edwards: The medical piece of yesteryear, there was a lot of testing or experimentation going on. And even still today, there's still experimentation going on, but that's a story for another, that's a podcast for another year.

But there was a lot of experience experiments going on. And so it has cultivated an attitude of distrust from the community to the medical system, if you will. So white coats are triggering for a lot of people of color in certain communities because of the histories that are there right within the medical experimentation that has happened on people of color across the world.

A lot of black and brown people have that inborn, just like we talk about the innate ability to heal itself as chiropractors, they have this inborn caution, right? that says, hold up, think again and question everything because that's what we've had to do in order to survive.

Here we are now today - chiropractic is really not medical. It is natural. But we are operating under the power of the medical paradigm, right? So we have to combat that issue in order to reach the people that are not coming to chiropractors because they don't understand, they see a white coat - are you a doctor? We have a lot of people that just don't trust. The way that we can, you know, pull and peel back layers of that distrust until we become



harmonious with one another and everybody understands right is to teach about chiropractic. And there's where that marketing piece that outward facing marketing piece comes into place.

We have to try and find a way that we can show people we are not the same and we have something different to offer. Once we do that, I think, I think that we will see the numbers of people who are exposed to chiropractic will better be represented by the number of people that actually are actively in the communities that see these trainings and understand you'll see people start to ask questions and questions are always good to see right now.

They're not asking questions because they're assuming that we are this, that, and the third. They've already placed us in the category. We have to do away with the bad marketing and replace it with something else. Once we find that piece, I think that we will tear down the walls of distrust between patients and chiropractors, but still and yet when that forward facing piece, the marketing piece, shows people of color doing this explanation, that's the sweet spot where people will perk up and be like, "Oh, really you're a chiropractor? Okay. How can I get down?" We have grown our database of patients and the number of doctors of chiropractic per capita improves.

Chick Herbert: As we wrap up and you think about the future, and I know you're part of the strategic planning process to define the future of chiropractic, what's a call to action for the general practitioner that is out in rural, urban communities around the country? How can they contribute? That's a big part of our listening audience.

Dr. Micheala Edwards: Whatever gift you have - doctor of chiropractic, student of chiropractic - whatever gift you have, we'll take it. I think the book says all you need is the energy the size of a mustard seed, which is belief. They say belief, the size of a mustard seed. That's all we need is a little bit, just come over and fill out the survey. The survey might take you 15, 20 minutes, but the survey asks you pertinent questions, doctor of chiropractic. What's your opinion? We want to know, because we don't want to just take what our collective of the little group of doctors and students that have put themselves in this project. We don't want to take just ours, but guess what we will, if that's all we have.

You must get involved. You must start to take ownership of your profession. Come and join this project. Let your voice be heard. We are at a crossroads; either chiropractic shows up and shows out or just fizzles out. And I believe that we have enough energy right now to show up and show out. Join us as we show up and show out.

I can't say it any better way, other than get involved. Don't sit back and be the one complaining. Tell us what you think so we can have an educated conversation and discussion and think tank on what we need to put in, take out to perfect it so that we could forward



face it to the community and grow this thing and become the gold standard of health and wellness in America.

I want to normalize that thought and I speak those words very intentionally so that everything that I wish for that goal to happen comes and finds itself. And then before you know it, that tumbleweed is on fire baby, and we grow.

Chick Herbert: It'd probably be more authentic if you actually had some energy. Maybe you could work on picking that up. Then I might buy in a little bit more. To make sure we tie it all into the diversity piece, what I took away from your earlier comments is if, again, back to I'm a white chiropractor in Kansas City, get out of my comfort zone, find ways to get integrated into, in this case, the black community, whether I'm taking my services out, I'm forming relationships with people that can help bring a different demographic of patients to me. Because if that doesn't happen, you won't get change.

Dr. Micheala Edwards: If that doesn't happen, nothing will change. And your power, your energy is smaller. It will not grow. So the goal is to grow everything, grow your practice, grow your reach, grow the community, grow the city, grow the state, grow the nation. Our battle is not adjusting patients. It's not reaching the black and brown community by adjusting black and brown people. It really is about the reach and what you can present and the words that you can use to actually adjust the mentality of a potential patient so that they know and understand that chiropractic is really what they need.

Yeah, you're absolutely right. You will need to increase your reach and increase your power. At first, you have to unearth the power within which is your power to actually make that reach. You changed some of the ways that talk to your patients or you present some toxic that you presented in some of the local schools, or club meetings and such are so many ways, but really, it starts with your words.

That's why I say we talk about talking to tic. You got to know how to do it, but I think most chiropractors can figure that out. We are chiropractors. You have to find which way works for you. It's projected, it'll be 13 to 15% population of, black and brown people in the nation. Why not reach them and pick up that 13 to 15% to make yourself a lot more powerful?

Melissa Knutson: Spread your gifts and you can start small, going back to your reference of the tumbleweeds. Start with that small little piece of dust, and maybe that's your phone call out into the community or going to a community event. That's your small piece. It can be easily done and then build it over time to this huge tumbleweed that's just taken over the nation and this positive chiropractic energy as you refer to it.



Chick Herbert: Dr. Edwards, thank you for your time. Thank you for your passion. Thank you for the fun conversation. We really enjoyed it and look forward to seeing you in person sometime in 2021.

Dr. Micheala Edwards: Absolutely. Thank you so much for inviting me. This was a blast.

Chick Herbert: Up next, Mike Whitmer with our Ask NCMIC segment

Mike Whitmer: This is Mike Whitmer within CMIC each episode of Chiropractical we're taking your questions and having experts provide answers. We call the segment, Ask NCMIC.

If you have questions you would like us to address in an upcoming episode, please send them to askncmic@ncmic.com. Today's questions deal with employment issues to help us with these questions. I'm very happy to have with us Sheena Mahan. Sheena is vice president of human resources here at NCMIC. Sheena, welcome.

Sheena Mahan: Thank you. Glad to be here.

Mike Whitmer: Many chiropractors are running small businesses with limited staff. Staffing always presents the issues for any employer and small employers often don't have the resources to deal with the issues like many large employers do. What are some common pitfalls employers can run into with employment issues and how can they be avoided?

Sheena Mahan: Great question. Unfortunately employment issues are gonna happen. We can't always avoid them. I would love to say that we could, some examples of that is a person, an employee or an independent contractor there, some very specific language to categorize individuals into those buckets and just really overall employment issues.

Whether an employee's having attendance issues or there is some type of harassment in the workplace, documentation is going to be key when you are dealing with your employees, such as they do with their patients, we should be documenting for our employees as well what's happening. Overall really good communication with staff is going to be key to make sure that individuals are staying on top of what's happening in the office.

Mike Whitmer: So documentation as with malpractice, risk is really important with employment risk. Along those lines, employment laws apply to all employers regardless of size. Sometimes the compliance function can be overwhelming for smaller employers. What advice do you have for doctors running their practices to help them ensure compliance with employment regulations?

Sheena Mahan: The free option is going to be the U S department of labor website. They have all the different types of laws out there, but that can be time-consuming. It can be overwhelming as well. We use the resource of central Iowa SHERM (Society for Human



Resource Management). There is a nationwide SHERM. It was society for human resources. They have lots of great resources out there. They usually have different types of networking events, or just overall topics that they share. A local chapter is a cost of \$99. The national chapter is a little bit more expensive. But they have local chapters in each city and state. It is really great resource. If you do want to have a little bit more of that personal touch versus having to do your own research with the US Department of Labor, but there are options out there for individuals to be able to have resources that shouldn't break the bank.

Mike Whitmer: Sounds like SHERM is a good resource for networking to network with other people dealing with similar HR issues. Sheena. Thank you for taking time to talk with us. Very helpful information to help with these issues. If you have a question you would like us to address on Ask NCMIC please shoot us an email at askncmic@ncmic.com.

Chick Herbert: Thank you for joining us on an important episode to talk about a very important topic. The one thing about the chiropractic profession that I've learned over the years is how passionate everyone is about serving patients. And today's episode highlighted there is a big opportunity because there is a large underserved population out there and there's work to be done.

Melissa Knutson: Change doesn't happen just by listening to a podcast. Get out there, get your feet to the street and help us engage additional patients to the chiropractic profession and increase recruitment for minority chiropractors. If you want to learn more about this topic, check out our show notes, where you will find additional resources as well as the link to the survey. Dr. Edwards referenced.

Chick Herbert: Thank you for joining us on today's episode. Our mission with Chiropractical is to provide you with insights and practical information that you can apply to make your practice better. If we succeeded in achieving that mission, please subscribe and like the podcast and join us again next month.

Melissa Knutson: Take care and be well.