

OSTEOPATHY UNDIVIDED

ACCEPTING DIVERSITY WITHIN THE OSTEOPATHIC PROFESSION

By Steve Paulus, DO, MS

The expression of diversity as a philosophy of social inclusiveness can extend beyond the currently popular national political and societal discussions. We can apply the same principles of social diversity to the Osteopathic profession, or to any organization, to appraise professional inclusiveness within a group. Inside the United States, discussions of social diversity automatically open our awareness to greater cultural inclusion, enfranchisement, and empowerment for people of color, for people with religious beliefs that fall outside of the expressed majority, for individuals outside the ethnic majority that holds power, for women, for those with socioeconomic differences, and for gays and lesbians. Encased within professional Osteopathic organizations there may be closed minded, parochial individuals or subgroups that dominate through a vocal minority disrupting open communication hence creating a context of divisiveness that parallels the prejudice and bigotry seen in the greater culture. If we look upon every organization as having the qualities of a living organism, then any attempt to separate not only limits the creative expression of holism but also causes intraprofessional disease and weakens the effectiveness of the group.

As an Osteopath, who “specializes” in Osteopathic Manipulative Medicine, I have had far more personal experiences of professional bigotry applied to me by other DOs than by individuals outside of the Osteopathic profession. When I was an Osteopathic medical student in the early 1980s, those who practiced or were interested in Osteopathic Manipulative Treatment (OMT), were made fun of and belittled by the more allopathically oriented students and faculty. As interns, we were forbidden to utilize OMT in my teaching hospital, which was an Osteopathic institution. Later, as I began to associate with “like minded” individuals who also primarily practiced office based OMT, we would joke and ridicule the majority allopathically oriented DOs as being “wanna-be” MD’s and squandering the legacy of Osteopathy. Sadly, the contemptuous and often patronizing joking did not end. Like a string of inappropriate ethnic jokes, I found that the OMT “experts” often participated in denigrating each other—each making fun of a differing school of Osteopathic style or technique.

A. T. Still once said to Arthur Hildreth, DO, “You need not fear our enemies who have contested every advancement we have undertaken. They cannot harm us, their kicks are only a blessing in disguise. Our great danger, in fact the only danger that could threaten the future of Osteopathy, are the mistakes of those who profess to be our friends.”¹ Dr. Still was telling us that the attacks of those outside the Osteopathic profession only make us stronger and more resolute. However, the greatest threat to Osteopathic growth is the opposition and divisiveness among us as DOs. As the cartoonist Walt Kelly’s Pogo said, “We have met the enemy and he is us.” The comments made by Still to Hildreth were offered around 1900, when Osteopathy was a relatively homogeneous American profession. Today Osteopathy is an international profession and the progressive heterogeneity of the group creates opportunity for greater prejudice.

History has shown that conflict and opposition were present at the birth of Osteopathy. What about today in the adolescent phase of our development? One hundred years ago we had a profession on the brink of change, filled with controversy and a polarity of opinions as to the direction Osteopathy must take. Hasn't Osteopathy always been upon the edge of change, which is really the cutting edge of growth? As a profession we are still engaged in divided encounters filled with conflict and discordant communication. Too often the opposing positions of Osteopathic colleagues can create a civil war mentality. Or if we use a medical metaphor, our infighting creates an autoimmune process. Self is attempting to destroy self and we do not have the ability to experience the body of the profession as a whole.

Just as we all know that respecting social diversity is a vital requirement for the creative growth of any culture; honoring Osteopathic diversity is an essential prerequisite for the further development of the international Osteopathic profession. The fundamental causes of prejudice and bigotry, whether they be racism or intraprofessional discrimination, are the same.

The culture of division, or dualism, is the largely unconscious tendency to separate reality into either/or categories. Within a dualistic form of consciousness, distinctions tend toward a divisive perspective so that we see this or that, but not both. We see good or bad behavior, right or wrong answers, objective or subjective issues, and in Osteopathy the polarity of zealously believing that one perspective or style of practice is the right and only way. One's worldview becomes objectified, codified, and simplified while diminishing the subjective experience and knowledge of others.

Within the Osteopathic profession, one common form of dualism is expressed in the battle between subjectivism and objectivism. Subjectivism is the polar opposite of objectivism and is difficult, in our culture, to reconcile with reason. However, subjectivism is the orientation of most of our everyday activities: i.e., the reliance upon our senses, perceptions, intuition, and integrative faculties as a guide for behavior and action. Our day-to-day heart felt experiences are based upon feelings, spiritual awareness, and the appreciation of beauty. Our life is dominated by relationships with other human beings in ways that can never be measured or calculated. The language of creativity and imagination is based upon subjectivism. The implication, in our objectively oriented medical society, is that a subjectively based form of Osteopathic Manipulation is wrong, unproven, and is therefore contemptible.

Objectivity can be inhumane and yet subjectivity can be non-productive, self-indulgent, and may take a personal point of view. To worship either pole of extreme is imbalanced. Our real, and most complete functioning as Osteopaths, is based upon the union of both objectivity (thinking and reason) and subjectivity (feelings and imagination). To deny subjectivity makes us "only human." To refuse objectivity we are "only beings" without form or direction. Objectivity and subjectivity need each other for both to exist. They are like light, at once functioning as a wave and a particle. However, if we look directly at one, we are unable to experience the other.

As Osteopaths we are blessed with having the ability, as William Sutherland, D.O. once said, to use “thinking, feeling, seeing, [and] knowing fingers”² allowing us to experience the inseparable beauty and mechanical function of the human body. Objectivity and subjectivity coexist and are reciprocally interdependent. The core principles of Osteopathy include the indivisible relationship between reason and imagination, and between mechanics and Nature.

Dualism tends to be a defensive reaction to living in a world of rapid and continuous change. Though, as Osteopaths, we agree that change and professional growth are a requirement, it becomes disconcerting to a Western trained physician to not know something for sure. This “not knowing” becomes uncomfortable and can even be threatening. We then build barriers, intensifying our sense of difference between ourselves and whoever the other may be (e.g., a colleague who practices differently than ourselves). Once we amplify the differences, at the expense of agreement, we have become separatist or even fundamentalist in our position.

When polarity has occurred then fear materializes in and out of our consciousness. When we have become separate, and must defend a fixed position, our fear of potentially being wrong or of being exposed as a fraud emerges. Usually this brand of fear causes us to fortify our defenses and at the same time bring out offensive weapons. Inciting competition is a sinister form of attack whose ultimate goal is to create a winner and loser. Blame is another form of conflict intended to renounce personal responsibility and weaken another individual—while artificially elevating the attacker’s status. Once blame becomes our vehicle for interaction it is then difficult to see or feel agreement.

By working to enhance the acceptance of diversity, we will find ourselves face-to-face with our fear of conflict in the presence of differing viewpoints. When differing truths meet, discord can be and often is, the result. Through experimentations with diversity we find ourselves confronting attachments to personal experiences of truth. As we learn to defend a singular aspect of truth we then identify with our set position. Once diversity is addressed we must work with our ego-based sense of self or “who we think we are.” In conflict, our “psychic immune system” is engaged and the struggle between self and non-self ensues. This internal battle can often deliver internal injuries and damage the expression of the good.

The ultimate goal in Osteopathic professional non-dualism is to first engage the Health (or qualities of agreement), not the disease (or the toxicity of prejudice based upon differences). We all know the first principle of Osteopathy, as defined by A. T. Still is, “. . . to find health . . . Anyone can find disease.”³ By always keeping one aspect of our senses and attention on agreement/Health we can minimize or eliminate the loss of “necessary parts” of ourselves. If we stop focusing on each other’s differences and remember that we are Osteopaths dedicated to assisting people who are asking for our help. We can have differences and disagreements without patronizing or insulting another colleague. We are made strong by that which makes us healthy, we are unique because of what makes us different, and we grow by our ability to reflect and make necessary changes.

Osteopathy has always been greater than the collection of parts (or individuals) who call themselves DOs. Perhaps one of our problems has been the reliance upon fostering individual rights to the exclusion of respecting something greater. In the United States, our own Declaration of Independence is both a blessing and a curse. Independence taken to the extreme creates islands of separate, isolated, self-sufficient people and groups. Vaclav Havel, the playwright, essayist, and former Czech Republic president received the Philadelphia Liberty Medal in 1994, and in his speech, offered an alternative perspective, he functionally delivered a Declaration of Interdependence. He asked for a postmodern global revolution of human consciousness based upon cooperation, spiritual transcendence, and interdependence.⁴ Why not apply his vision of holism and inclusion to the international Osteopathic community?

Accepting diversity and inclusiveness, means opening not only our minds but also our hearts. Vaclav Havel says that "...the salvation of this human world lies nowhere else than in the human heart, in the human power to reflect, in human humbleness, and in human responsibility."⁵ We each find an experience of truth that fits. Other people's experiences, that don't fit, are split from our consciousness and categorized as separate. By engaging a process of interdependence and interrelationship we recognize another person's knowledge and understanding as valid and acceptable. Diversity means, by definition, that we honor differences rather than oppose them.

Frequently I am asked to define Osteopathy and the work performed by DOs. In the past, I would include the obvious philosophic and structural differences between a DO and an MD, and between a DO and a Chiropractor. I was always describing myself utilizing a negative form of comparison, by emphasizing differences, a method which includes a basic level of insecurity. On the other hand, when comparison is used as a mechanism to discover similarities between two groups the relationship is based upon the philosophy of agreement. Too often when comparison is used to delineate dissimilarity, there is a covert expression of competition—with the goal being to outperform, dominate or establish superiority.

To align with the philosophy of professional inclusiveness and social diversity, when asked to define or describe our work, we can very simply communicate who we are and what we do. When asked to compare Osteopathy with MD's, Chiropractors, or other people within the helping professions I search for connections rather than disparity. This is a form of creative comparison that is based upon inner security rather than a lack of self-confidence.

Perhaps the greatest component of the philosophy of individualism is the ability to take responsibility and make inner changes that do not require the vote of a committee. True deliverance from the cycles of ignorance begins within the individual human being's power to reflect and make inspired changes. Before we, as an Osteopathic professional culture can emerge from the shadow of divisiveness, we must personally make the requisite changes within our inner selves.

DOs throughout the entire world each practice in a unique way. We utilize individual special gifts and blend that with the rich tradition of Osteopathic philosophy. Before the process of change can begin, we must become unsatisfied with detrimental ways of thinking and acting. Witnessing and participating in the conflict of differences is exhausting. I am tired of fighting, aren't you?

It is time for the allopathically oriented Osteopathic Physicians who don't utilize Osteopathic Manipulation to stop denigrating the American DOs who use OMT and integrate Osteopathic philosophy into their practices.

It is time for the DOs who use OMT on a regular basis to accept the value of those Osteopathic Physicians who practice exclusively allopathic medicine.

It is time for the Cranial Osteopaths to stop looking down upon the DOs who regularly use high velocity low amplitude methods or other more physical, direct action Osteopathic manipulative techniques.

It is time for the mechanically oriented DOs to stop ridiculing the Osteopaths who utilize a non-mechanical or a non-material Osteopathic approach.

It is time for those who want to call DOs Osteopathic Physicians to stop deriding the DOs who call themselves Osteopaths.

It is time for the American DOs to stop belittling the British DOs, the other European DOs, Australian DOs, New Zealand DOs, Canadian DOs, and all of the non-American DOs who carry the torch of Osteopathy with passion and courage.

It is time for the British DOs to stop mocking the Canadian DOs.

It is time for the various factions of European DOs to stop fighting and start uniting.

It is time for the Australian and British DOs to stop claiming that they practice in alignment with A. T. Still's true teachings and the Osteopathically oriented American DOs don't.

It is time for DOs to stop patronizing the MD or Dentist who has sincerely embarked upon the study of Osteopathy.

It is time to stop the international Osteopathic civil war and bring our energies together to do what we all do best—to care for people who need our help.

It is time for one group or one person to stop saying that they own the truth and that everyone else is wrong.

It is time . . .

There is room under the great tree of Osteopathy for all types of DOs. However, within the philosophy of diversity (social and professional) there is no space and no tolerance, for blame, attack, polarization, bigotry, or discrimination.

Let us welcome the new face of Osteopathy. No longer a purely American indigenous healing system but an international profession growing beyond the wildest imaginings of Andrew Taylor Still. I dream of DOs around the world with a shared vision of Osteopathy based upon the teachings of Dr. Still and including the growing, developing, interrelated form and function of the Osteopathic profession as experienced through the diverse peoples who call themselves DOs, Osteopaths, or Osteopathic Physicians.

To experience true change, or a new beginning, there must be death and subsequent resurrection. Death can be used as a metaphor for change. And the first requirement for renewal is to accept the death of this great profession.⁶ Over the last 100 years there have been many purported and impending deaths of American Osteopathy. Osteopathy, like the mythological Phoenix, continues to die in the great fire of transformation and is reborn as something new and greater. The essence of Osteopathy has not been extinguished. For over one hundred years the repeated deaths of Osteopathy has not left an empty skeleton but the ashes, the potential energy, the raw materials for the regeneration of something unique and exhilarating.

So let us acclaim the death and rebirth of Osteopathy—again . . . □

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¹ Hildreth, Arthur, *The Lengthening Shadow of A. T. Still*, 1938 Simpson Printing Company, p. 21

² Sutherland, W. G. *Contributions of Thought*, 1998, Rudra Press, p. 163

³ Still, A. T. *Philosophy of Osteopathy* 1977, AAO, p. 28

⁴ Havel, Vaclav, *The Need for Transcendence in the Post-Modern World*, A speech delivered at Independence Hall, Philadelphia, July 4, 1994

⁵ Havel, Vaclav, A speech delivered to a joint session of the US Congress on February 21, 1990

⁶ Jealous, James, *Accepting the Death of Osteopathy, A New Beginning*, AAO Journal, Winter 1999, pp. 19-22