

# Chiropractic school without a student clinic: Reflections from a student

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**Narrative:** Institutions offering a program of Chiropractic education are required to attain and hold programmatic accreditation by an agency approved for this purpose in the jurisdiction of the institution.

It is reasonable for the profession to expect that graduates have attained clinical capability with entry-level competency in the unique psychomotor skills of the discipline, namely spinal adjusting, as the highest order manipulative skill.

In this reflection I question from first-hand experience whether this expectation meets reality at the University of Southern Denmark.

**Indexing terms:** Chiropractic; World Congress of Chiropractic Students, WCCS; clinical training; professional identity; student perspective.

**Editor's note:** Our correspondent raises serious issues which the profession must promptly address in full.

## Introduction

As I near the end of my chiropractic studies at the University of Southern Denmark, I find myself reflecting on what it means to study at a school without a student clinic, and how its absence might be a deciding factor in shaping how we learn, what we learn, and how we feel about our future profession.

Our curriculum is shaped around making us strong in differential diagnosis. We spend countless hours on cases, red flags, and symptoms, and we are trained to know when to treat and when not to treat. This is fundamental to delivering safe chiropractic care, and I value it deeply.

But I find the scales are unbalanced. As graduation approaches, my greatest worry is not whether I can recognise a malignancy, but whether I can confidently deliver a Chiropractic adjustment. Without a student clinic, we lack the safety of repeated, supervised hands-on practice. Graduates from our programme are excellent at diagnostics and at applying evidence-based knowledge, but manually we are less prepared.

*... Grateful for the strength in diagnostics, but yearning for the guidance, the skills, and the identity that make us truly Chiropractors ...'*



At times, it feels as if we are trained to be 'knowledge workers' more than chiropractors with equal strength in heart, head, and hands.

At other schools, students spend hours each week in clubs and clinics practising adjustments. At SDU, we do not have clubs nor a clinic, and in official training we are not allowed to deliver actual adjustments, only 'mock impulses'. We receive very little supervised manual training across the programme, a total of 128 hours in five years to be exact, and when completed are told that the responsibility of keeping and perfecting those skills falls on us.

Although it's undoubtedly meant to be empowering, that responsibility more often than not feels overwhelming. This is because practising and critiquing each other without having mastered the skills ourselves often feels frustrating and like the blind leading the blind.

### **The lack of structured clinical training**

Many students actually end up finishing their degree without having performed adjustments for years. I believe there are multiple reasons for this. One being the aforementioned frustration when practising techniques, as it is often neither constructive nor productive. And secondly, and perhaps most importantly, the fire is missing.

This leaves me to wonder why this is, why has our ethos been lost? A factor could be that the expectations and the student experience do not fully align. Some enrol with the vision of becoming skilled manual practitioners but find that the structure makes this difficult. The result can be low morale, disappointment, and perhaps even the high drop-out rate our programme experiences.

Without structured clinical training, and in combination with the prism through which Chiropractic is seen here, it's hard not to wonder: what is Chiropractic, really? The focus is so strongly on diagnostics and referrals that the profession itself feels as if it is shifting. With our strong diagnostic foundation, maybe we are evolving into a new kind of health care professional, someone between a doctor and a nurse. Someone who can lighten the burden in the primary sector, a filter if you will, who is able to send patients in the right directions treatment-wise and time-wise, e.g. deciding who needs to be seen urgently by an oncologist, and who needs a fixated joint manipulated and rehabilitation with a physiotherapist.

Perhaps there is a need for a new kind of healthcare worker whose job this is. And perhaps it is the job of this new version of a Chiropractor. I do not know. But without open discussion and clear expectation-setting, I find it might be blindsiding students and leaving them with a professional identity question of: who am I becoming, and why?

We are experiencing an evolution of Chiropractic in real time, and I believe that the combination of zero reference to chiropractic philosophy, the why, and the absence of a student clinic is a factor in this professional identity crisis because it means we are low not only on practice, but also on something less tangible: mentorship, guidance, and the 'Chiropractic spirit'.

These elements create professional identity, and without them, it is easy to feel adrift and left with the questions of: 'who are we? why are we? and how do we?'

Our concern about lack of manual skills has been raised with the school, and the response is that our 'turnus year', the residency year, is the time to practise this and really become proficient adjusters. I understand this; however, for me it creates a real dilemma.

Evidence-based practice is our lighthouse here, the principle guiding us towards patient-centred care. It is grounded in the wish to give patients the very best treatment. And yet, I

struggle to feel as if I will really be able to do that when I lack confidence in core manual skills. And no, it's not just confidence that's lacking, it is actual skill.

We are told we become excellent, unparalleled in fact. And perhaps this is true. But it feels almost like educational gaslighting, because when it comes to adjusting, I feel as if I will be using patients as practice. Reconciling this contradiction, the desire to give my best and at the same time knowing that it's not good, is something I grapple with.

Told we are the best, yet feeling like the worst, is confusing and disheartening.

I recognise that this mismatch is because we have different viewpoints on what it means to be an excellent Chiropractor and therefore are not referencing the same aspect of skill. But I still find it difficult to navigate.

I *want* to be a Chiropractor, proud and secure in both knowledge and skill. I *want* to detect red flags, refer patients when needed, and provide the safest, most effective care possible. But I also want to be confident in delivering adjustments when they are indicated. I *want* to be able to '*find it, fix it, and leave it alone*'. For this, books and theory are not enough. We need practice, mentorship, and a sense of belonging to a profession.

Whether this direction for Chiropractic in this country is right or wrong, good or bad, is way bigger than me, and not the question I want to raise with this piece. My aim is simply to reflect on how it is experienced to be a student in what feels a little like no man's land. Grateful for the strength in diagnostics, but yearning for the guidance, the skills, and the identity that make us truly Chiropractors.

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[www.apcj.net/papers-issue-6-2/#SchoolWithoutClinic](http://www.apcj.net/papers-issue-6-2/#SchoolWithoutClinic)

### Editor's note

This article continues the regular publication of the point-of-view of students learning to become Chiropractors. For reasons that may be discussed at a future date, the author has been granted anonymity. The Editorial Board honours and respects the author's request.

We note the SDU program was last accredited in 2021 and a recommendation was to '*Formalise the relationship with the private clinics involved in the programme to provide equal and sufficient experience for students*', thus recognising a weakness in the area of clinical training. [Read the ECCE Report here](#). This weakness was duly noted at the previous accreditation assessment, in 2013. It seems little has changed.

We must appreciate that students are now informed and critical consumers of an expensive education product. Concerns about the discipline's politics were published in Issue 4.3, 2024. [You can read that report here](#)

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