

30 Countries with Full Chiropractic Regulation: Covering 100 jurisdictions

African Region
Botswana
Namibia
South Africa
Zimbabwe
Asian Region
Hong Kong – SAR China
Malaysia
Philippines
Thailand
Eastern Mediterranean Region
Cyprus
Israel
Qatar
United Arab Emirates
European Region
Denmark
Finland
Iceland
Liechtenstein
Malta
Norway
Portugal
Sweden
Switzerland
United Kingdom ¹
Latin American Region
Costa Rica
North American Region
Canada ²
Puerto Rico
United States ³
US Virgin Islands
Pacific Region
Australia ⁴
Guam
New Zealand

¹ United Kingdom's General Chiropractic Council handles the regulatory responsibilities for four countries: England, Scotland, Wales and Northern Ireland.

² Canada includes 11 regulatory authorities: ten provinces and one territory (Yukon).

³ United States includes 50 states plus the District of Columbia. Three of the five US territories have regulatory agencies: Guam, Puerto Rico, and US Virgin Islands – these are listed individually in this table.

⁴ Australia's central regulator, the Chiropractic Board of Australia, handles most of the regulatory responsibilities for its six federated states and two territories: New South Wales, Queensland, South Australia, Tasmania, Victoria, and Western Australia, plus the Australian Capital Territory and the Northern Territories.

NOTE: The ICRS uses the WFC designations for regions. Nations not listed herein may have adopted legislation recognizing the practice of chiropractic, but may not yet have a complete regulatory process in place.

For information about how to begin the process of applying for chiropractic licensure or registration in countries around the world, please visit:

<https://www.chiroregulation.org/links.html>





Annual Report

Published 2026



From the Chair



Wayne R Minter

Regulation continues to play a pivotal role in ensuring high-quality health care and safeguarding public safety. I have seen chiropractors at their best and at their worst: the vast majority can be proud of the health services they provide, while a small minority behave in an unacceptable manner — and it is this reality that remains a primary reason for the existence of health regulators.

On a more positive note, I am ever grateful to the many dedicated people in regulation, accreditation, education, and assessment who devote their time and ideas, without limit, for the betterment of society. The International Chiropractic Regulatory Society (ICRS) has a vital role in supporting, and in some cases leading, initiatives to expand chiropractic regulation worldwide. One of the ICRS's most important and ongoing projects is developing useful reference tools for existing and future chiropractic regulators. Currently, only 25 countries have full regulation — the authority to grant, modify, and revoke the privilege to practise. There is both work and opportunity ahead.

It is a bittersweet moment for me to offer my final Chair's report. Alongside my duties as Chair of the Chiropractic Board of Australia, it has been my honour to serve on the ICRS Board since 2017, and as your Chair since 2020. Many matters continue to be of relevance to chiropractic regulators, including the review of Codes of Conduct, recency of practice, and continuing professional development standards.

The development of appropriate strategies to help countries without regulatory boards pursue an effective regulatory model also remains a key focus for the ICRS. I extend my sincere best wishes to all those contributing to the future of the ICRS, and to chiropractic regulators worldwide.

Wayne R. Minter

A Few Thoughts from the Exec

Our 2025 Forum in Copenhagen brought together key leaders from around the world. Experienced regulators, accreditors, and educators welcomed nations in the early stages of securing legislation in their countries. Our gratitude goes out to the WFC who facilitated our opportunity to meet.

We are reminded once again that each of us has something to teach as well as much to learn.



Donna M Cohen

The Copenhagen agenda focused on the following topics:

- **Public Information on the Website**
- **High Profile Media Events**
- **Cyber Security**
- **Mobility and Temporary Practice**
- **Assessing Applicant Credentials**
 - New Education Programs**
 - The Role of Accreditation**
 - Application Processes**
 - Specialties and Certifications**

We appreciate the ongoing support of our members, many of whom shared generously their expertise as both presenters and attendees.

Regulation is not immune to the pressures of governments that want more for less. More data, transparency, accountability, mobility for workers. But of course they say that only the “good ones” should join the ranks of professionals.

How do we accomplish this with fewer resources and more demands on our already fragmented time?

The answer lies in continual pursuit of excellence, of best practices in chiropractic regulation, and in collaboration with the many fine organizations that are our partners. We stretch toward a goal we will never meet. Perfection is not possible but adaptive excellence can be achieved.

We start with honest appraisals of our processes, and engage in an unrelenting search fueled by curiosity and reassured by the companionship of others in our circle. We talk, we listen, we try hard things. We fail, we learn. And we do this together, because the work of regulation is too hard to accomplish alone.

ICRS is committed to walking that narrow line between encouraging uniformity and respecting cultural differences. In the end, everyone, including the fish, want the freedom to go where they can thrive.



Our Members

REGULATORY MEMBERS

Chiropractic Board of Australia
Federation of Canadian Chiropractic
General Chiropractic Council (UK)
New Zealand Chiropractic Board

PARTNER MEMBERS

Association of Chiropractic, Malaysia
Chiropractic Association of South Africa
Canadian Chiropractic Examining Board
European Chiropractors Union
International Board of Chiropractic Examiners
Japan Chiropractic Register
World Federation of Chiropractic

ASSOCIATE MEMBERS

McTimoney College of Chiropractic



Milestones

2009

First meeting of those interested in international chiropractic regulation took place in Canada

2017

ICRS formally incorporated in Canada as a nonprofit, international organization

2020

The COVID-19 virus resulted in a “virtual” year, including the Annual General Meeting

2021–22

Zoom, the website, and newsletters provided the best platforms to share information, including Forums

2023–24

Patient rights & responsibilities, temporary practice, effective applications, legal status of chiropractic by country

2025–26

Essential elements of an application or initial or renewal registration, cyber security, labor mobility, specialties and certifications, temporary practice, accreditation

Key Focus

Have our laws and regulations kept pace with the changing needs of the public?



Finances

INCOME - Dues		
	2025 Actual	2026 Budget
TOTAL	\$7,750	\$8,000
EXPENSES		
Meeting expenses		
Registration Fee – host organization	850	800
Host hotel fee for Executive Director	1,400	1,500
Executive Director Travel	1,338	2,000
ICRS Forum Costs	5,068	2,500
TOTAL	\$8,656	\$6,800
General expenses		
Financial transaction fees	403	800
Subscription software	104	1,500
Canadian Government Fees	9	2,000
Office supplies	0	2,500
TOTAL	\$490	\$6,800
Contingency	0	\$370
TOTAL	\$9,172	\$8,000
Excess <Loss> Revenue over Expenses	<\$1,422>	0

Assets

1 January 2025		31 December 2025	
19,135.61	PayPal	25,983.05	PayPal
14,807.83	Keybank	7,270.18	Keybank
(4,350.00)	Pending reimb	(5081.49)	Pending reimb
\$29,593.44	Total	\$28,171.74	Total

2025-26 Leadership

Chair



Dr Wayne Minter

Chiropractic Board of Australia

Vice Chair



Dr Lisa Richard

Federation of Canadian Chiropractic

Secretary-Treasurer



Mrs Penny Bance

General Chiropractic Council
United Kingdom

Executive Director



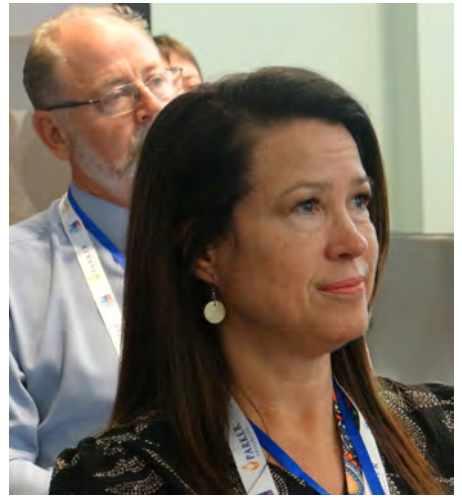
Ms Donna M Cohen

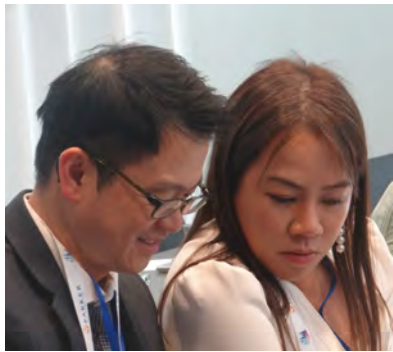
The Executive Director is a part-time,
volunteer position

The officers are elected by the Regulatory Members of the ICRS. As volunteers, they are not reimbursed for expenses. The officers serve two-year terms and may be elected for a total of up to two terms.

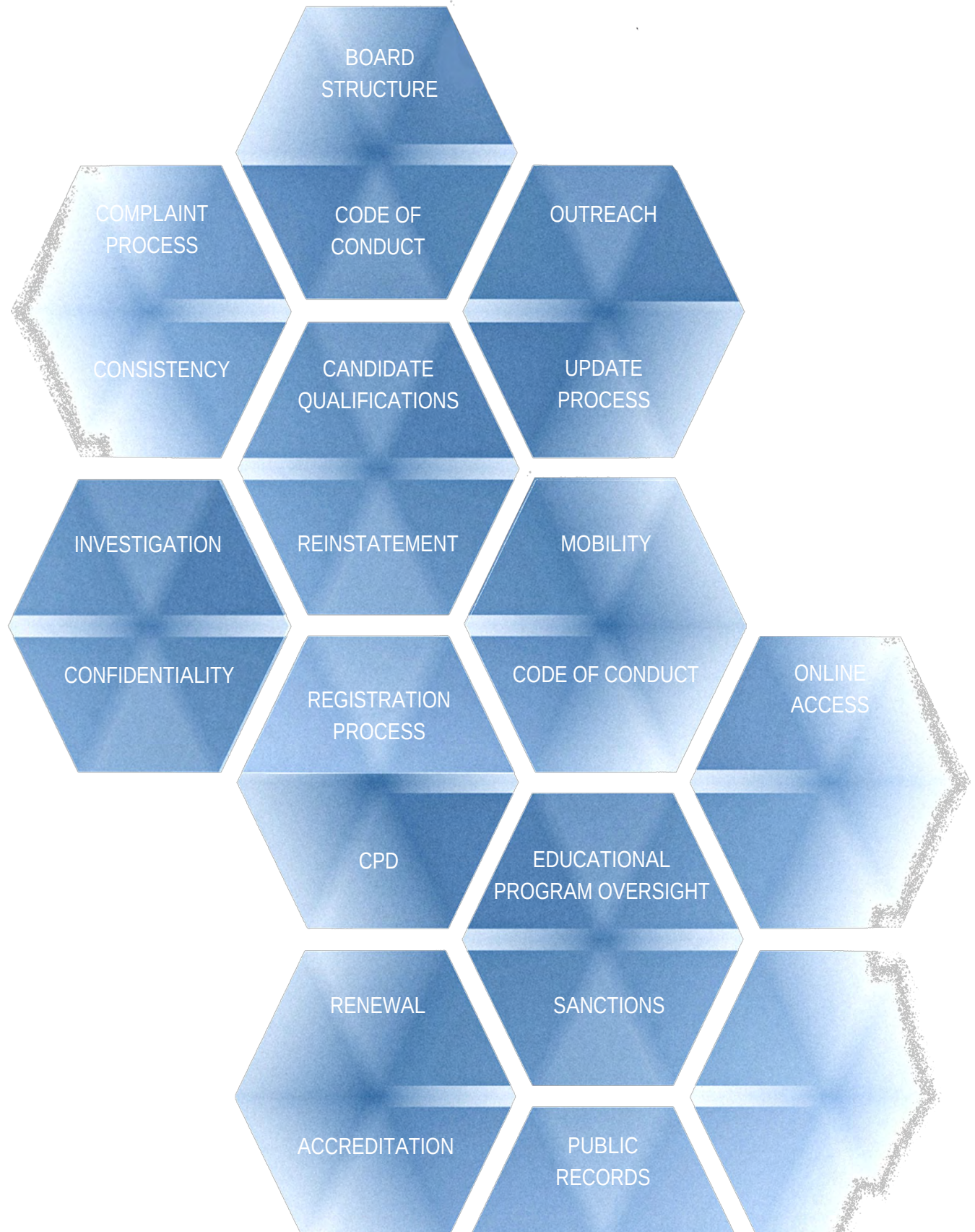
The ICRS registered office is in Nova Scotia. The administrative office is in Albany, New York.







Major Components of Professional Regulation



What is Full Regulation?

This is when a government agency has the authority to establish admission and practice standards for chiropractors as well as enforcement mechanisms to redirect or remove the practice privilege under due process.

29 countries covering 126 jurisdictions have full chiropractic regulation.

African Region
Botswana
Namibia
South Africa
Zimbabwe

Asian Region
Hong Kong – SAR China
Malaysia
Philippines
Thailand

Eastern Mediterranean Region
Cyprus
Israel
Qatar
United Arab Emirates

European Region
Denmark
Finland
Liechtenstein
Malta
Norway
Portugal
Sweden
Switzerland
United Kingdom ¹

Latin American Region
Costa Rica

North American Region
Canada ²
Puerto Rico
United States ³
US Virgin Islands

Pacific Region
Australia ⁴
Guam
New Zealand

¹ United Kingdom's General Chiropractic Council handles the regulatory responsibilities for four countries: England, Scotland, Wales and Northern Ireland.

² Canada includes 11 regulatory authorities: ten provinces and one territory (Yukon).

³ United States includes 50 states plus the District of Columbia. Three of the five US territories have regulatory agencies: Guam, Puerto Rico, and US Virgin Islands. These are listed individually in this table.

⁴ Australia's central regulator, the Chiropractic Board of Australia, handles most of the regulatory responsibilities for its six federated states and two territories: New South Wales, Queensland, South Australia, Tasmania, Victoria, and Western Australia, plus the Australian Capital Territory and the Northern Territories.

About Us

Chiropractic regulation

exists in many countries
to protect the public.

- Incorporated in Canada as an international, nonprofit organization
- Established to support those jurisdictions that have legislative authority to regulate chiropractors, and
- To assist those who wish to work toward adding the appropriate regulatory structure to protect the public.

Anyone interested in the goals
of the ICRS
is welcome to attend
the Forums.

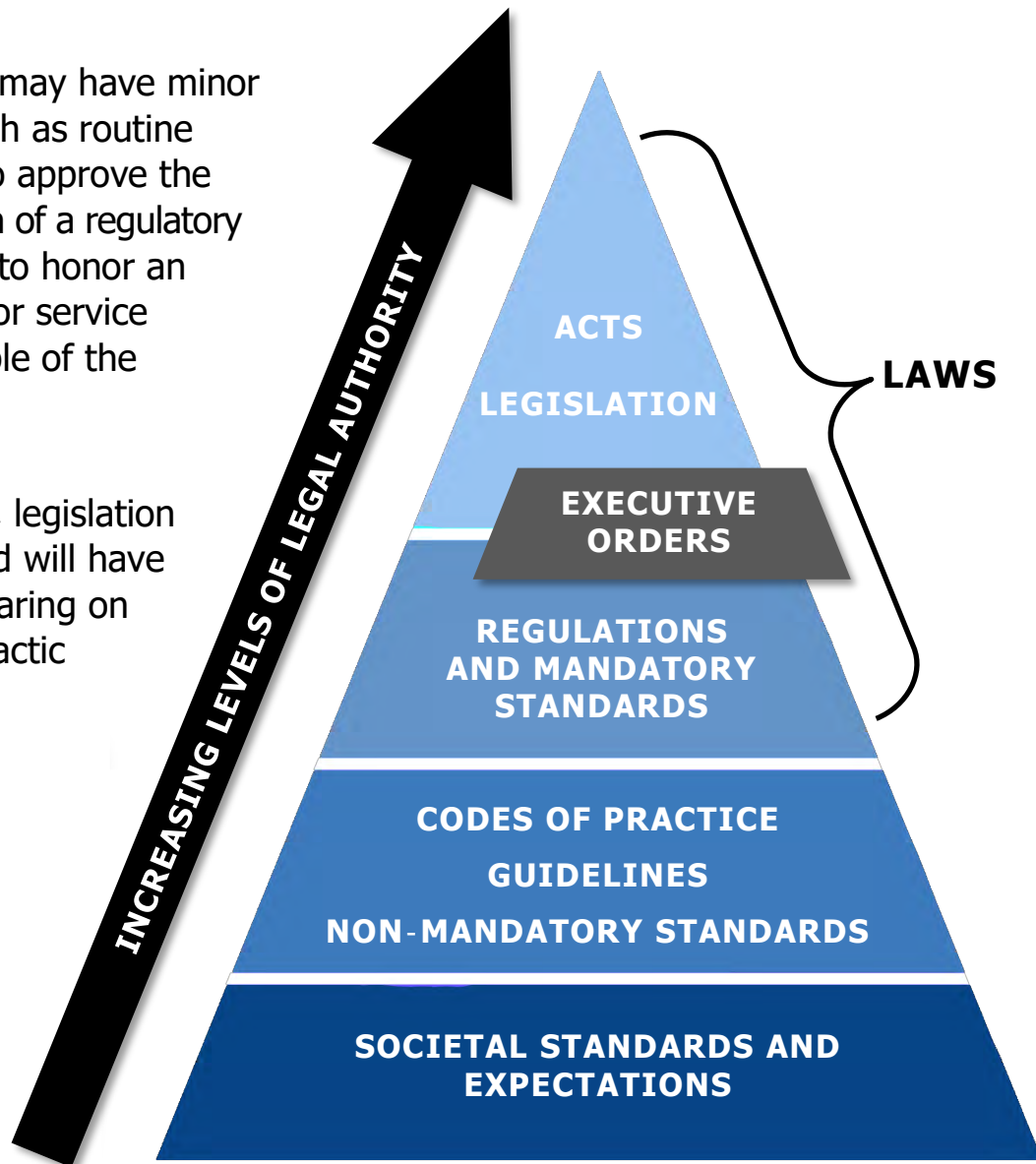


***Best practices in international
chiropractic regulation to protect the public interest***

Regulatory Authorities

Legislation may have minor impact, such as routine decisions to approve the continuation of a regulatory agency, or to honor an individual for service to the people of the jurisdiction.

More often, legislation as proposed will have genuine bearing on the chiropractic profession.



This is why it is important to understand how ideas become laws, and how laws are translated into regulations.

Issues

CORE ISSUES

Securing legislation (title protection, regulatory authority) in unregulated or underregulated jurisdictions

Practitioner mobility

Preparing for growth: new educational programs around the world

Who oversees the regulator?

Telehealth / practice without physical presence

Continual evaluation and modernization of practice requirements: laws, regs, guidelines

Is there a role for "good moral character?"

How to define discipline that is in the public interest

Identifying & engaging stakeholders / perception of the board

Transparency

Data collection, maintenance, storage, public records, security, privacy, analytics

Developing, assessing, maintaining, and demonstrating board effectiveness

Proactive actions by boards to reduce violations

Overlapping scopes of practice

Diagnostic imaging

Dealing with the media

Expedited registration/licensure

Multidisciplinary practices, corporate ownership

ASSESSMENTS

Pre and post licensure/registration

Exams for discipline

Jurisprudence

Specialty training

CONTINUING PROFESSIONAL DEVELOPMENT

Auditing for compliance

Should CE/CPD instructors earn relicensure credit for teaching their courses?

Formats: online, self-study, peer review, study groups, literature review, research, other?

Concurrent CPD courses

Program approval / standards

Issues

CHIROPRACTIC CONDUCT, PERFORMANCE, AND ETHICS

Anonymous complaints

Summary or immediate suspensions

Investigator training

Range of violations

Dealing with previous violations

Types of sanctions or other interventions

Is revocation actually permanent?

Maintaining consistency in sanctions while allowing for individual circumstances (aggravating and mitigating factors)

Monitoring / rehabilitation / assessments / examinations

Cost recovery

How much is public?

This is a snapshot of some of the pressing issues being dealt with by chiropractic regulators.

It is by no means a complete listing of the many topics that compete for the attention of regulators.

OTHER

Pediatric care

Should facilities be registered with the board?

Sale of gift certificates by chiropractors

Sale of products / CBD

Dry needling vs acupuncture

Advertising specialty training

Preceptorships: qualifications, applications

Providing services in mobile vehicles

Chiropractic Assistants

Adequate and effective board staffing

Cultural sensitivities, inclusion

CHIROPRACTIC AND ANIMALS

Multiple species

Educational and certification programs

Role of the veterinarian

Research

Key Information Platforms

Robust, informative website



Newsletters and Bulletins



USEFUL CONCEPTS IN CHIROPRACTIC REGULATION

2026 Chiropractic Programs Worldwide

PROGRAM		DEGREE	ACCREDITATION
AUSTRALIA – programs also approved by Chiropractic Board of Australia to practice in Australia			
	Australian Chiropractic College (Adelaide)	Bachelor of Chiropractic	CCEA with conditions
	Australian Chiropractic College (Melbourne starting 2025)	Diploma of Health Science (2025) Bachelor of Chiropractic (2026)	
	Central Queensland University	Bachelor of Science (Chiropractic) Master of Clinical Chiropractic	CCEA
	Macquarie University	Bachelor of Chiropractic Science Master of Chiropractic	CCEA
	Murdoch University	Bachelor of Science/Bachelor of Clinical Chiropractic Bachelor of Health Science (Chiropractic)/ Master of Clinical Chiropractic	CCEA
	RMIT University – teach out through 2030	Bachelor of Health Science/ Bachelor of Applied Science (Chiropractic)	CCEA
	Victoria University, Melbourne	Bachelor of Chiropractic Science Master of Chiropractic Practice	CCEA with conditions
BRAZIL			
	Centro Universitário Fametro (Unifametro)	Bachelor of Chiropractic	Not currently accredited (CCE-LA or other). Ministry of Education visit pending
	Centro Universitário Gama e Souza UNIGAMA	Bachelor of Chiropractic	Program launched in 2022. Ministry of education visit pending
	Centro Universitario UCEFF	Bachelor of Chiropractic	Program launched in 2021. Ministry of education visit pending
	Universidade Anhembi Morumbi	Bachelor of Chiropractic	Accredited. Ministry of Education, Brazil
	Universidade Feevale	Bachelor of Chiropractic	Accredited. Ministry of Education, Brazil
CANADA			
	Canadian Memorial Chiropractic College	Doctor of Chiropractic	FCC, CCE-USA
	Université du Québec à Trois-Rivières	Doctor of Chiropractic	FCC
CHILE			
	Universidad Central de Chile	Bachelor of Chiropractic	Accredited. Ministry of Education, Chile
DENMARK			
	Syddansk Universitet Odense (University of Southern Denmark)	MSc Chiropractic	ECCE
FRANCE			
	Institut Franco-Européen de Chiropratique - Campus de Paris	Diplôme de Chiropracteur	ECCE
	Institut Franco-Européen de Chiropratique - Campus de Toulouse	Diplôme de Chiropracteur	ECCE
GERMANY			
	Hochschule Fresenius	BSc Grundlagen der Chiropraktik MSc Chiropraktik (in development)	pending possible ECCE accreditation 2028
HONG KONG			
	McTimoney College of Chiropractic (Hong Kong)		
MALAYSIA			
	International Medical University	Bachelor of Science (Hons) Chiropractic	CCEA
MEXICO			
	Universidad Estatal del Valle de Ecatepec	Licenciatura en Quiropráctica	Accredited. Ministry of Education, Mexico
	Universidad Estatal del Valle de Toluca	Licenciatura en Quiropráctica	Accredited. Ministry of Education, Mexico
	Universidad Veracruzana	Licenciatura en Quiropráctica	Accredited. Ministry of Education, Mexico
NEW ZEALAND			
	New Zealand College of Chiropractic	Bachelor of Chiropractic (B-Chiro)	CCEA
PHILIPPINES			
	Camara Institute for Chiropractic Sciences	CSP - Chiropractic Specialization Program for Medical Doctors, Nurses and Physical Therapists	Accredited by Department of Health - PITAHC
PUERTO RICO (US Territory, Self-Governing Commonwealth)			
	Universidad Central del Caribe	Doctor of Chiropractic	CCE-USA

PROGRAM		DEGREE	ACCREDITATION
SOUTH AFRICA			
	Durban University of Technology	MTech Chiropractic	ECCE
	University of Johannesburg	Bachelor of Health Sciences in Chiropractic Master of Health Sciences Chiropractic	ECCE
SPAIN			
	Barcelona College of Chiropractic	Titulo Superior en Quiropràctica Màster Propio en Quiropràctica	ECCE
	McTimoney College of Chiropractic (Madrid)	Master of Chiropractic	ECCE, GCC
	RCU Escorial Maria-Cristina (Madrid College of Chiropractic)	Titulo Superior en Quiropràctica, Màster Propio en Quiropràctica	ECCE— closed 2025
SWEDEN			
	Skandinaviska Kiropraktorhögskolan (Scandinavian College of Chiropractic) merged its chiropractic education program with NIMM (Nordiska Institutionen för Manuell Medicin) as of the fall term of 2026	Kiopraktorexamen (Chiropractic Degree / Professional Vocational Qualification)	NIMM is under state supervision by the Swedish University of Applied Sciences (UKÄ). NIMM intends to apply for ECCE accreditation for the chiropractic program in the future
SWITZERLAND			
	University of Zurich	Master of Chiropractic Medicine	ECCE
TURKEY			
	Bahçeşehir Üniversity - Chiropractic Program	Masters in Chiropractic Science	Accredited by the Turkish National Higher Education Council
UNITED KINGDOM - Programs also approved by General Chiropractic Council to be on the GCC Register			
	Coventry University Midlands, Coventry UK—opens September 2026	Master of Chiropractic (MChiro)	GCC
	Health Sciences University (formerly AECC University College)	Master of Chiropractic - MChiro (Hons) Master of Chiropractic - (MChiro) with Foundation Year Msc Chiropractic	ECCE, GCC
	London South Bank University	Integrated Masters in Chiropractic	ECCE, GCC
	McTimoney College of Chiropractic Abingdon, Manchester, Madrid, Hong Kong , Northern Ireland	Masters in Chiropractic (MChiro) MSc Chiropractic (Paediatrics)+ MSc Animal Manipulation (Chiropractic) Master of Veterinary Chiropractic (MVetChiro)	ECCE, GCC
	Teesside University (Commencing teachout Sept 2026)	MSci (Hons) Chiropractic	GCC
	University of South Wales - Welsh Institute	Master of Chiropractic	ECCE, GCC
UNITED STATES OF AMERICA			
	Campbellsville University	Doctor of Chiropractic	CCE-USA
	Cleveland University-Kansas City	Doctor of Chiropractic	CCE-USA
	D'Youville College	Doctor of Chiropractic	CCE-USA
	Keiser University	Doctor of Chiropractic	CCE-USA With conditions
	Life Chiropractic College West Relocating to California State University, East Bay campus (CSUEB) - mid 2027	Doctor of Chiropractic	CCE-USA
	Life Chiropractic College West—Bellevue Omaha	Doctor of Chiropractic	CCE-USA
	Life University	Doctor of Chiropractic	CCE-USA
	Logan University	Doctor of Chiropractic	CCE-USA
	National University of Health Sciences (Illinois, Florida)	Doctor of Chiropractic	CCE-USA
	Northeast College of Health Sciences (Seneca Falls, Long Island)	Doctor of Chiropractic	CCE-USA
	Northwestern Health Sciences University	Doctor of Chiropractic	CCE-USA
	Palmer College of Chiropractic (Davenport Campus)	Doctor of Chiropractic	CCE-USA
	Palmer College of Chiropractic (Florida Campus)	Doctor of Chiropractic	CCE-USA
	Parker University	Doctor of Chiropractic	CCE-USA
	Sherman College of Chiropractic	Doctor of Chiropractic	CCE-USA
	Southern California University of Health Sciences	Doctor of Chiropractic	CCE-USA
	Southern California University of Health Sciences Phoenix	Doctor of Chiropractic Approved by AZ Bd of Chiropractic Examiners.	Arizona State Board for Private Postsecondary Education
	Texas Chiropractic College	Doctor of Chiropractic	CCE-USA
	University of Bridgeport	Doctor of Chiropractic	CCE-USA
	University of Pittsburgh	Doctor of Chiropractic	Seeking CCE Accreditation
	University of Western States	Doctor of Chiropractic	CCE-USA

Illustrative examples of chiropractic entry-to-practice qualifications

The examples below are listed in alphabetical order. They do not represent all chiropractic degrees and do not imply that the qualifications are equivalent, interchangeable, or sufficient for registration or licensure in every jurisdiction. For example, Spain, Mexico, Brazil, and Chile do not use a universal abbreviation system. These examples do not list professional titles or designations arising solely from registration, licensure, or association membership. Program titles, accreditation, and award abbreviations may change.

Graduates should only use designations that they have earned. The graduate should verify the exact wording and abbreviation on their award and with the awarding institution and relevant regulator. It would be inaccurate to convert another unless that specific degree was conferred.

Examples of entry-to-practice qualifications	Country or jurisdiction of chiropractic program	Abbreviation or Designation
Bacharel em Quiropraxia	Brazil	Bacharel em Quiropraxia *
Bachelor of Applied Science (Chiropractic)	Australia	BAppSc(Chiro) **
Bachelor of Chiropractic	Australia, New Zealand	BChiro **
Bachelor of Chiropractic Science	Australia	BChiroSc **
Bachelor of Health Science (Chiropractic)	South Africa	BHSc(Chiro)
Bachelor of Science (Chiro)	Australia	BSChiro **
Bachelor of Science (Hons) Chiropractic	Malaysia	BSc(Hons)Chiro
Diplôme de Chiroprateur	France	Diplôme de Chiroprateur ***
Doctor of Chiropractic	Canada (Ontario), United States, Puerto Rico	DC
Doctorat de premier cycle en chiropratique (Doctorat en chiropratique)	Canada (Québec)	DC
Licenciatura en Quiropráctica	Mexico	Licenciatura en Quiropráctica *
Licenciatura en Quiropraxia	Chile	Licenciatura en Quiropraxia ****
Master in Chiropractic Science	Türkiye	MSc(Chiro)
Master in Clinical Biomechanics	Denmark	MClBiomech (candidatus/candidata manu)
Master of Chiropractic	Australia, Hong Kong, United Kingdom	MChiro
Master of Chiropractic Medicine	Switzerland	MChiroMed
Master of Chiropractic Practice	Australia	MChiroprac **
Master of Clinical Chiropractic	Australia	MClinChiro **
Master of Health Science (Chiropractic)	South Africa	MHSc(Chiro)
Master of Technology in Chiropractic	South Africa	MTechChiro
Máster Propio en Quiropráctica Titulo Superior en Quiropráctica	Spain	Máster Propio en Quiropráctica Titulo Superior en Quiropráctica *

Examples as of October 2026

Courtesy of Brighthall and ECU

* There is no standardized degree abbreviation in this country/region.

** There is no single Australian abbreviation. Degree combinations may include BChiro, BChiroSc/MChiro, BSc(Chiro)/MClinChiro, and BHSc/BAppSc(Chiro).

*** Diplôme de chiropracteur (i.e., Diploma in Chiropractic); professional title chiropracteur. D.C. may be displayed in France to mean diplômé(e) en chiropraxie; it must not automatically be interpreted as the North American Doctor of Chiropractic degree. It is a 5-year full-time program, equivalent to a Master's-level professional qualification (RNCP Level 7) in Europe.

**** In Chile, the Licenciatura en Quiropraxia is a second, post-professional specialization degree rather than an undergraduate entry-level program. Applicants must already hold an undergraduate degree in a health science field (such as Kinesiology, Medicine, or Nursing) spanning at least 8 semesters before completing the chiropractic program.

Please help us **update** this information

Government agency GRANTS or REMOVES practice privilege
Legal pursuant to legislation to allow chiropractic practice
Legal pursuant to general law
Legal status unclear but de facto regulation
Legal status unclear and risk of prosecution

African Region					
Botswana					
Ethiopia			X		
Ghana			X		
Kenya			X		
Lesotho		X			
Mauritius			X		
Namibia					
Nigeria		X			
Rwanda					
South Africa					
Swaziland		X			
Uganda				X	
Zimbabwe					

Asian Region					
China				X	
Hong Kong – SAR China					
India				X	
Indonesia					X
Japan			X		
Malaysia		X			
Philippines					
Singapore			X		
South Korea					X
Sri Lanka			X		
Taiwan					X
Thailand		X			
Vietnam				X	

Eastern Mediterranean Region					
Afghanistan					
Bahrain		X			
Cyprus					
Egypt			X		
Iran		X			
Israel					
Jordan			X		
Lebanon			X		
Libya			X		
Morocco				X	
Qatar					
Saudi Arabia		X			
Syria				X	
United Arab Emirates					

Government agency GRANTS or REMOVES practice privilege
Legal pursuant to legislation to allow chiropractic practice
Legal pursuant to general law
Legal status unclear but de facto regulation
Legal status unclear and risk of prosecution

European Region					
Austria				X	
Belgium		X			
Croatia			X		
Denmark					
Estonia			X		
Finland					
France		X			
Germany			X		
Greece				X	
Hungary				X	
Iceland					
Ireland			X		
Italy		X			
Liechtenstein					
Luxembourg			X		
Malta					
Montenegro					X
Netherlands			X		
Norway					
Portugal					
Russian Federation			X		
Serbia		X			
Slovakia			X		
Spain					X
Sweden					
Switzerland		X			
United Kingdom		X			

Latin American Region					
Argentina			X		
Bolivia					
Brazil			X		
Chile			X		
Colombia			X		
Costa Rica					
Ecuador			X		
Guatemala					
Honduras			X		
Mexico		X			
Panama		X			
Peru			X		
Venezuela			X		

October 2026

Government agency GRANTS or REMOVES practice privilege
Legal pursuant to legislation to allow chiropractic practice
Legal pursuant to general law
Legal status unclear but de facto regulation
Legal status unclear and risk of prosecution

North American Region					
Bahamas		X			
Barbados		X			
Belize			X		
Bermuda			X		
British Virgin Islands			X		
Canada					
Cayman Islands		X			
Jamaica			X		
Leeward Islands		X			
Puerto Rico					
Trinidad & Tobago			X		
Turks & Caicos		X			
United States					
US Virgin Islands					

Pacific Region					
Australia					
Fiji			X		
Guam					
New Caledonia		X			
New Zealand					
Papua New Guinea			X		
Tahiti		X			

Legal Status of Chiropractic by Country

Note: Listed according to the 7 world regions adopted by the World Federation of Chiropractic.

In most other countries there are no chiropractors in practice, and national health authorities have not considered recognition or lack of recognition.

With appreciation to WFC and ECU for help with this ever-evolving document

30 countries covering 100 jurisdictions

can grant the practice privilege
AND remove it via due process

An absolutely true

Fairy Tale

Donna M Cohen
ICRS Executive Director

The story took place in a merchant's shop, long ago.



Terrible sounds

came from the cellar.



The merchant's friends
went into the cellar
to check it out.

They didn't come back.



A poor young boy came into the shop.



“I can fix this,” he said.











What are our Dragons?

Professional misconduct

Unaccredited education

Inconsistent standards

Outdated or non-existent regulatory language



We hold the mirror.

Dragon Slayers

Visit our booth





Why and how do we regulate health care professionals?

Statutes (may also be termed legislation or laws) are adopted by the government in a jurisdiction. In the case of professional regulation, the laws define the legal scope of practice, board governance, and licensure / registration requirements. Sometimes the core laws apply to multiple health professions.

For chiropractic, the scope language usually explicitly defines chiropractic practice, exclusions, and authorized diagnostic privileges.

The law also creates a governing board, and authorizes it to propose and enforce more detailed regulations (rules) that guide the implementation of the statute. Boards are generally comprised of both non-paid professional and consumer members.

Their specific responsibilities:

- to investigate consumer complaints;
- to oversee the general application of health care laws;
- to help update and develop regulations which better define appropriate conduct by professionals and clarify what the consumer may expect;

- to continually review required credentials for chiropractors to practice safely, effectively, and ethically;
- to determine continuing educational requirements to ensure ongoing professional development;
- to set the requirements for license or registration renewal (most often annual or biennial);
- to apply appropriate disciplinary action or retraining to chiropractors who may have broken the public trust through violation of legal requirements;
- to determine penalties and fines for noncompliance with legal requirements;
- to function in the global regulatory community to assist other professions or jurisdictions affected by chiropractic.

Board members are usually vetted and appointed by a government authority. An appointee's term may last three to six years, with reappointment permitted for a prescribed period of time.

Where are chiropractors regulated?

Chiropractors are regulated in many countries throughout the world. At this time, **129 jurisdictions from 25 countries have full chiropractic regulation**. Full regulation means a government agency has the authority to establish admission and practice standards for chiropractors as well as enforcement mechanisms to redirect registrants or remove their practice privilege under due process.

When a license or registration is granted to a chiropractor, what does this mean to the public?

Through regulation, the board assures the public that the chiropractor has met certain credentialing criteria, and that he/she continues to abide by the laws and regulations of that jurisdiction. The requirements to enter authorized chiropractic practice are defined by laws and regulations designed to protect the public's health, safety and welfare.

What credentials are required?

In general, certain common criteria cross jurisdictional borders. These include:

- Pre-chiropractic education - Most candidates enrolling in chiropractic programs today have their undergraduate degrees, while some may achieve it through programs offered by or in conjunction with the chiropractic program (articulation agreements).
- Graduation from an accredited chiropractic program. There are at least **21 different names for the granted degree**.
- Rigorous examinations.
- Background investigation - Boards conduct a thorough investigation into the character and credentials history for each applicant for authorized practice.
- Understanding of legal requirements - This is often called the jurisprudence portion of the board's assessment of the candidate. This is important because there are some differences among jurisdictions in the type of care a chiropractor may legally provide.

What can the public expect from a chiropractor?

While the core concept of practice is based on healing without drugs or surgery, the specific scope may vary according to the laws of a specific jurisdiction. However, patients may commonly expect:

- A thorough physical examination to determine conditions which may be appropriate for chiropractic care;
- To be referred to another health care provider for conditions which are not appropriate for chiropractic care;
- To understand the type of care to be administered, and what results may be expected;
- Discussion with the chiropractor as the care continues, to evaluate both treatment effectiveness and projected duration;
- Clear understanding of financial arrangements;
- Appropriate, ethical care delivered safely, with respect for privacy and dignity.

What happens if a chiropractor violates these basic rights?

An essential part of the regulatory board's responsibility is to discipline and/or retrain the small fraction of registrants who step outside law and regulation. Complaints are investigated thoroughly. If the complaint cannot be resolved satisfactorily through informal processes, formal hearings may be conducted to determine facts, severity of offense and whether these sanctions are appropriate:

- Formal letter of reprimand
- Fine
- Probation
- Suspension
- Revocation
- Retraining / re-examination
- Practice monitoring
- Other appropriate sanctions

Who knows if the chiropractor has been disciplined?

Transparency is a primary focus of governments. To that end, the board's publicly available website usually features the list of all of their chiropractors who have ever been registered, including their disciplinary status and whether they are in active practice. The profession's legislation should explicitly state what may be publicly displayed.