

GUIDEPOINTS:

News from NADA

September 2013

SPECIAL COMMEMORATIVE ISSUE

Nancy Smalls

Honoring 40 Years of Service at Lincoln Recovery Center



LEGACY by Sharon Wint

The legacy of a woman is ...
All who come into her presence are blessed.
The legacy of a woman is ...
She loves from Deep *Deep* within.
The legacy of a woman is ...
To keep her children safe.
The legacy of a woman is ...
To educate as our ancestors did.
The legacy of a woman is ...
She is strong yet she is silent.
The legacy of a woman is ...
She is not ruled by fear.
You are a legacy ...
God bless our legacy.

Written in honor of Nancy Smalls of Lincoln Recovery Center.

Nancy Smalls at her retirement party.

Photo courtesy of Troy Griffith

Nancy Smalls, founder of the award-winning Maternal Substance Abuse Services (MSAS) Program, retired in June of this year after 40 years of service at Lincoln Recovery Center in the Bronx, New York. She is a licensed practical nurse, a NADA trainer, and she served on the NADA board from 2003 to 2011.

“Retired” is not exactly the word most of us will use when we think of Nancy. She is leaving one job and will now follow close on the heels of NADA founder Mike Smith, her friend and mentor for over 40 years. There are already plans afoot for international programs based on

Nancy’s MSAS program. As Nancy has told us: Her bags are already packed.

Her retirement was celebrated this August on her birthday, at which time the poem, Legacy (printed above), was read by Nancy’s colleague, friend, and addictions counselor, Sharon Wint. We will also reprint some of the sentiments expressed at the celebration by members of both the U.S. and international NADA communities who came to know Nancy well over the years when they visited Lincoln to learn about the NADA protocol.

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In addition to these words of praise and celebration for her life's work, we will also print the essay, *Raising Healthy Babies for the '90s*, written by Nancy Smalls and NADA founder, Michael Smith. In it they describe the nuts and



Michael Smith and Nancy Smalls in the lobby of Lincoln Recovery Center, 2011

bolts of how MSAS started and operated.

After 24 years of continuous service, the program ended in 2011 when, Nancy said, the new hospital management “considered children a liability” and wouldn’t allow mothers seeking treatment to bring their children to the program. Nancy explains: “You can’t have women in treatment without their kids, so the referrals have stopped, and there aren’t too many programs that take women and children.”

In the almost quarter of a century that MSAS was active, it was specifically recognized for its success in treating pregnant and parenting women. In 1991 it received an award from the American Hospital Association, and it was cited in the 1998 edition of the Encyclopaedia Britannica’s Medical and Health Annual, under the Substance Abuse section. The page in the Britannica (353) features a woman receiving acupuncture, wearing a t-shirt that says: Lincoln Medical Center - The Best Kept Secret in the City.

But there was no secret in the profound impact of the MSAS program on its participants. Carlos Alvarez, the now retired NADA trainer from Lincoln Recovery Center, told Guidepoints that in 1999 Nancy brought some of her program participants to the NADA conference in Sarasota, Florida. “They were amazing,” he said. “They all got standing ovations.”

In the 1995 book, *Fighting Drug Abuse with Acupuncture*, author Ellinor Mitchell devotes an entire chapter to the MSAS program. She helps concretize the impact: “Maternal Substance Abuse Services and the prenatal clinic see over 120 clients a day, about half of Lincoln’s total census.

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... By actual count one parenting-skills class of fourteen adults touched the lives of seventy-five children” (p. 150).

As described in the January 1994 publication by the National Public Health and Hospital Institute titled *Vulnerable Women and Visionary Programs*, the impact of MSAS was significant because, “all pregnant women seeking acupuncture treatment at Lincoln Clinic are approached about the services of MSAS” (p. 222).

The MSAS program was immortalized on film on quite a few occasions. The NADA office is fortunate to have two recordings - one is from a New York TV news report (1990). The second film (1992), shows the original MSAS program and two others which replicated its model, one in Minnesota and the other in California. These films are now part of a compilation titled *NADA Rising* and available from the NADA office.



Following are sentiments shared in honoring Nancy’s contribution to Lincoln Recovery Center, ear acupuncture, and, above all, Mothers and Children.

Janet Paredes - NADA Philippines:

A Poem for Nancy Smalls

I met her in 2004
From Denver Colorado to New York City
My first time in NYC, an overwhelming experience!

A woman of courage and pride
She made things work and happen
Lincoln was her niche

Make way for Nancy
She is now 75!
She led a full and meaningful life

Happy Birthday Nancy!
Your valuable contribution to society
Is Beyond Measure.

Make Way for Nancy
She is 75
And She Is Great!

Rachel Peckham - NADA UK

Commenting on the invite to the retirement/birthday party: “I can imagine any party that Nancy has anything to do with will involve a lot of fun and laughter. Please wish her a very happy birthday from me and tell her she’s an inspiration.”

Nic Constable - NADA UK

“You should look back on your work at Lincoln Recovery with great pride because you have made a real positive difference in so many peoples’ lives. When you talk, people listen, because what you say has meaning. It’s a real shame that the present management team at Lincoln is not as wise as you are.”

Ralph Raben - NADA Germany

Ralph verbally shared his sentiments with Jo Ann Lenney:

Ralph Raben, even though an ob/gyn and acupuncturist, realized he still had a lot to learn when he came to Nancy's maternal clinic, the first of its kind nationally and internationally. Ralph spent weeks in Nancy's area before he even went upstairs to meet with Dr. Smith – and he kept coming back down to Nancy. He said that he judged Lincoln, not by the medical or acupuncture work necessarily, but that he judged Lincoln by Nancy's maternal unit. Helping pregnant women and new mothers who are involved with drugs was a challenge he understood. The support and retention of Nancy's patients made the difference to him. At that time, Ralph was not yet the leader of NADA Germany – Nancy and her team led the way for him – as they did for so many others.

Ruth Ackerman - former NADA U.S. president and founder of Project Recovery

“I hear via the grapevine that your retirement is upon us all. I look back fondly to meeting you for the first time at Lincoln where you took me with gentle care and showed me that fabulous maternal program you had. Of course we modeled our program at Project Recovery on your work. Your energy, enthusiasm, and great leadership shows vividly in that video as it has shown for all of us all these years.

“Thanks for all the laughs and joyous companionship at the various NADA conferences over the years. My great friend, congratulations on your retirement and may you

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have much joy as you find your way through your future leisure time.”

Retired Judge Sheila Murphy - former NADA U.S. board member

“You are part of the reason that Lincoln Recovery and the NADA protocol are now legend. May your sense of humor and your love of humanity continue forever.”

Rita Nilsen - NADA Norway

“You should know that I really wish I could attend the occasion to celebrate you. I feel very privileged and honored to have been following in your shadow since 2005. It has been great to hear how you have met women and men who suffer because of substance abuse and poverty. You have shown them respect in an amazing way by talking to them on an equal basis, and you have helped them to become independent. There has been no patronizing pat on the cheek, but a friendly nudge in the back so that the needy could start on their own road to a new life.

“As a former drug addict, and now a colleague, I know that there are many who will miss you. It's probably someone who breathes a sigh of relief that you should leave the doors to Lincoln for the last time, but those are not us, Nancy. All of us are those who have needed your edifying care or who have needed a colleague who would give generously of her knowledge so that we could be better sponsors for those who have problems.

“In my head, you are a person that I never thought could age nor could go into retirement. And so it will be for me. I'll meet you around the world as I have done in recent years. So how your closest colleagues or family members see you is one thing - in my mind you will be Nancy as I know Nancy.”

Lars and Mette Wiinblad - NADA Denmark

“Visiting Lincoln Recovery Center years ago was an unforgettable experience that made an indelible mark on us. It took us some time to point out exactly what made this experience so strong. Part of it was of course the NADA protocol and the results we have seen in Denmark, too. But it was only part of the picture. What really matters is the context and how the protocol is brought to

SMALLS continues on p.4

SMALLS continued from p.3

life. So for us the most impressive thing we experienced at Lincoln was the teamwork, the total program, the spirit and the unique blend of people that made the difference. Everybody shared their knowledge as if it was the first time although this has been done countless times before.

Nancy, you were a key person to make this program solid for so many years. You had an enormous impact on the spirit and atmosphere. Your power and energy, knowledge and understanding, your big heart for especially the women, your sense of humor and your clear cut, no nonsense way of communicating with the clients and staff, that people could relate to. Without it Lincoln would not have been the same. Thank you so much, Nancy, and congratulations.

Tommy Kielthy - NADA Eireann

"Tell Nancy she has a smile that would charm the socks off a legless man - and a laugh that would make him wear shoes :-)"

And he added, *May the road rise to meet you, may the wind be always at your back, and may you be in heaven ten minutes before the devil knows you're dead.*

Nancy I... *a poem by Anonymous*

Watching you effortlessly command, take charge,

I see you sitting a seat of Regency.

"Who me ? !"

Yes Nancy I...I see you as my Queen.

Your program's surprising, wowing creativity. Your program's always

'getting' us, 'getting' me.

Women/children/men, reading us to the bone.

Giving all of us a knowing home, Nancy I...

"What?! Is that you talking to me?!"

Yes. Nancy I...only you can be MY Queen.

Contenders come and contenders go:

Misplaced competition, small minds, ego.

(Wo)man up, step up, or shrink/slink away.

Step off, hide, or choose to stay.

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Projection, misperception, and preconception

of "This is what a Queen is supposed to be",
all get the royal "Excuse you me !".

All get the gaze that cuts through the haze obscuring:

Simple, desireless, selfless dedication

A Healer among healers for an embattled nation

My 'Flo Nightingale' in the midst of this struggle

for the spirits and the minds of (wo)men.

So, speaking for us all who have stumbled or fallen, I...

"Wait a minute! You're back with that?!"

Yes, Nancy I...I ever and always will see you as my Queen.

Taking hold of any audience, or a client at your desk,

Taking all comers-- the best and the rest,

I often wonder if you can see yourself.

Correct and direct, tender and strong, straight to the heart,

Piercing the core (and likely as not, we'll be back for more)

I just want you to know I...

"Are you serious?! Again?"

Yes, Nancy I...I just want you to know you're the only

Queen for me.

Before regulators, perpetrators, various laws and rules,

Before studies, commissions, tight budgets, exclusive

schools,

Before the Hot-boys, D-boys (legal and not)

Before the naysayers, haters, and jealous whatnots,

You shine as a light-on-a-hill. I...

"Okay. Soooo?"

Nancy I...I only ever will see you as my Queen.

So. I aspire to your state of refined tranquility:

so Real, so True, so Effortlessly

dropping what's really real.

Telling it like it is, as it's supposed to be

without sugar, or whines, or false humility

with the Greatness and Grace only my Queen can be.

I...

"Get it out! What are you saying?!"

Nancy I...I love you, you're the only Queen for me.



Raising Healthy Babies for the '90s

by Michael O. Smith and Nancy Smalls

The following is an essay on the Lincoln Recovery Center's Maternal Substance Abuse Services

In October of 1986, it was increasingly evident to us that we were seeing entirely too many women in our program for drug abuse -- "crack" being the drug of choice. Most of the women who started with crack had no other addiction other than smoking cigarettes. Crack is a very habit-forming, and the women could become addicted within a week. We needed a drug-free treatment protocol, and acupuncture was the answer as it reduces the craving, taking away the want to get high, and it reduces the fears and hostilities that usually disturb the drug treatment setting. Hence the Maternal Substance Abuse Services of Lincoln Recovery Center was born.

In 1987, we put together a women's contingent to relate exclusively to women's issues, and developed a 6-week program which had to be convenient and attractive with "workable" being the key word. Six weeks out of the client's life is very manageable, especially if she can see im-

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mediate results. We have a 10-day mandatory detox period with no unrealistic excuses accepted for not being here. She must have documentation for any court appointments, and she is required to call in if unable to attend.

Our clients use acupuncture as the drug-free treatment modality, leave daily urines and have crisis counseling. In-depth counseling during the first 10 days is not advisable, so we afford the client this time to get acclimated to the clinic, the general surroundings, and to feel comfortable receiving acupuncture treatments.

At the end of 10 days, it is the client's responsibility to connect with the counselor for a urine readout. We do not chase clients for treatment or urines. Many support systems have a way of making these women act like children. We want them to grow up and be responsible for their lives, especially since they have children of their own to raise. Results of the urine profile determine the next phase of treatment. If all urine results are negative, the client will take treatment two times a week. If some are positive, the counselor sets up a schedule. If all urine results are positive, the client begins treatment again. The client is required to take acupuncture and leave urines at every visit. Crisis counseling is given.

HEALTHY BABIES continues on p. 6



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We have no designated catchment area. We take walk-in clients and do treatment on demand. Even though we do give intake appointments, the client is encouraged to take acupuncture and leave urines every day until the intake is completed. An orientation class is given daily at 8:30 a.m. and, if the client misses it, they must come again the following day.

Narcotics Anonymous (NA) meetings are held daily and the Women's NA meeting is mandatory at our facility and attendance is taken. Six sessions must be attended in order to complete. There is also a mandatory Women's Rap Group held once a week at which a wide range of women's issues is discussed – safe sex, AIDS, etc. – that lets the client know that she is not alone in this situation. Six sessions are also needed to complete this phase of treatment.

In addressing the time factor, we all know that women raising children and managing a household cannot stay anywhere all day. An acupuncture treatment is 45 minutes long. Factoring in wait time and some time to interact with the counselor, you are not in the building any longer than three hours daily unless something special is going on. We allow women to bring their children so there is no excuse for not taking treatment. In doing so, we have started our own hands-on parenting skills program. Using our own patients' children may help dispel the "crack-damaged baby" label -- as a program seeing 4,000 since January 1987, we have not seen the "crack-damaged baby" syndrome in the numbers some would want you to believe.

In recognizing the client's potential for being a victim, we are a non-judgmental agency dispensing treatment with a lot of TLC, concern and some tough love. Women have to have something that makes them strong and independent. Nancy never tells the women what to do; she gives them a style of how to do it. When the client realizes we are sincere in this effort, she is more apt to do well in treatment. We fully realize it is not easy to stop doing drugs. If one does not become drug-free the first time, it can always be done again. Recidivism is not as high as it could be and definitely not as low as it should be.

Since there was virtually no other program taking pregnant substance abusers, we were the very first drug treatment program to start our own pre-natal clinic, having a midwife on board one full day a week. We provide pre-natal education and referrals when necessary. We also show daily educational videos from 9 to 12 noon concerning safe sex, pregnancy, AIDS, etc.

We use acupuncture as the treatment modality and after seeing 350 pregnant clients, we are glad to say that nearly all mothers and babies are doing well. Depending on

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when the client gets to us in treatment reflects the outcome of the baby's toxicology status. The pre-natal clients are required to attend the clinic two times a week until they deliver. At least we can try to reduce the high risk factor of these women. Our success rate is 65 to 75 percent clean urines after three months of treatment.

In pioneering this type of program, it was our realization that women are a very real part of the drug world and, in order to treat them effectively, you must address the issues they present. Given easy access to treatment, most are only too willing to comply.

A note about the Women's Rap Group:

The rap group was the idea of one of the clients, and Nancy said, "Okay, let's try it." The women started to realize that everyone had similar problems at one time or another. So you get five or six opinions about what to do – from your peers and not your counselors. This made it easier for a woman to come to a conclusion by herself. And it taught her to think for herself. It was a learning experience every day. And they were also taking acupuncture which helps people listen – and listening is learning -- and so it helps group participation. Because it worked so well, Nancy made it mandatory. But even before she did that, there were 40 or 50 people attending. Facilitators were there also, but it was pretty much the clients' show.

However, when the staff at Lincoln Recovery had to move to another site, the NADA Spirit was not able to move with them. First off, the new administrator told the women that they couldn't bring their children to the program. Then she changed the time of the rap group to 2 in the afternoon which further decreased the number of women attending. Then writing notes became mandatory, and the women stopped speaking as freely. Last count there were about 2 or 3 women attending the group.

The only positive thing here is that the new administrator gave us a very clean picture of what works and what doesn't work – though at a very high price for our women clients.

Editorial note:

Nancy wanted us to add that two years after the beginning of the Maternal Substance Abuse Services started, the program had to evolve as it grew. The biggest change was in the length of treatment from 6 weeks to 6 months. The primary reason was that referring agencies wanted their clients to stay in the program longer.

NADA in Iran: An Introduction

by Dr. Mohammad Movahedi

The following is a first report of NADA activity in Iran that Guidepoints compiled based on correspondence between the author and the NADA office that began in July of this year. In the November issue, we will print more.

After much investigation, my wife, Dr. Maryam Kyisati, and I decided to use the NADA Protocol in our centers. We graduated in 1994 in medicine and after three years were drawn to work in the field of addiction treatment. For nearly two years we have used the NADA Protocol as an adjunctive therapy to help our patients increase tolerance in their physical and psychological problems.

Unfortunately NADA training is not near and our information was obtained through educational and research papers by professors such as Dr. Smith and others on the internet, videos of workshops in Asia and Africa, instruction methods of NADA needling through YouTube, and communication with people who have experienced the NADA Protocol treatment.

Within my field of study, some colleagues use acupuncture in their clinics but unfortunately often do not practice in accordance with the NADA Protocol. I should stress that more than 95 percent of physicians working in addiction treatment do not have information about the benefits of acupuncture, especially the NADA Protocol and its achievements. Therefore education and awareness about the benefits of acupuncture and the NADA Protocol is inevitable.

My wife and I have established two outpatient addiction treatment centers, a center for harm reduction and a non-governmental organization (NGO) for the prevention and fight against addictions called Behroozan NGO (<http://www.behroozan.ir/>).

One of our establishments, the Pasargadae Center, was founded in 2005. Services include: methadone maintenance treatment, detoxification treatment with Buprenorphine and Clonidine, group and individual counseling sessions, a matrix protocol specifically for methamphetamine addicts, and harm reduction efforts all while trying to build social support. Our centers are open every weekday, morning and evening.

The staff includes a psychiatrist, psychologist, nurse, social worker, receptionist and coordinator of self-help programs, along with me and my wife. To help our patients have a greater tolerance of their physical and

psychological problems, we use the NADA Protocol as an adjunctive therapy free of charge to (1) reduce symptoms and signs related to detoxification and methadone tapering, (2) reduce relapse in patients who have been through detoxification and (3) reduce the effects and complications of methadone.

We have taught the NADA Protocol to 15 members of our staff who work in the center, including doctors, nurses and a psychologist. The law states that nurses and psychologists must work under the supervision of a physician while needling. Patients are informed about our services via our website and also are referred by other NGOs, welfare organizations, municipalities and even by people who have previously used our services.

I should mention that we have a free helpline (The Circadian) to inform and assist the medical immediacy of addiction and give advice to addicts. In most cases, people who have been consulted choose to come to our center for continued treatment.

I actively do my own research work in the field of acupuncture with the help of colleagues. I believe there is a lot of potential in my country for the development and expansion of your treatment among addiction treatment centers and other organizations that help addicts. I hope to promote the NADA Protocol with proper instruction of your association.



Photo courtesy of Mohammad Movahedi

Dr. Movahedi (front row, third from left) with his staff at the Center Pasargadae.

New Training Co-Chairs Take the Lead

In the July issue of *Guidepoints* we reported that Susana Mendez, the NADA training chair since 2010, stepped down from her service on the board after three years as training chair, and, prior to that, two years as Registered Trainer representative.

Mendez fearlessly tackled tricky and challenging situations that periodically arise in the field of NADA training, offered bi-monthly trainings in Texas, and traveled to Argentina, Chile, France, Peru, Spain, Turkey and Mexico to train health professionals in the protocol. We thank you for your service and leadership, both nationally and internationally.

The board is happy to announce that the new training co-chairs are acupuncturist and social worker David Eisen and Claudia Voyles, also an acupuncturist.

David Eisen is a founding member of NADA, having served on the board as president and treasurer and currently as training co-chair. David is the Executive Director of Quest Center for Integrative Health (www.quest-center.org), a nonprofit community-based health center founded in 1989 and based in Portland, OR. He is also a clinical faculty member at the Oregon College of Oriental Medicine (ocom.edu - see ad on p. 10) where he teaches a course in Community Health and Chemical Dependency. This is directly linked with an internship where students apply the NADA protocol in a clinical setting, and, upon successful completion of the course and internship, are eligible to earn the Acu Detox Specialist certificate of training.

Claudia Voyles received her Master's degree in acupuncture training at OCOM in Portland, OR, but initially started her professional career at an adolescent residential psychiatric treatment facility in Texas and later worked as the Associate Director of a Connecticut addictions treatment program. In collaboration with former NADA president (and current OCOM academic dean) Carol Taub, Claudia helped prepare the first edition of the training manual in 1999 and then participated in a large-scale revision of the manual in 2008. She served on the NADA board from 1994 to 2010, and as training chair from 2001 to 2007. Claudia currently runs a private practice, Remedy Healing, in Austin, TX.

In the short time that David and Claudia have teamed up as training co-chairs, they have hit the ground running. Thank you for taking the lead!

Guidepoints News from NADA

Next NADA U.S. conference:

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Keep It Simple: The NADA Basics



AT THE
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SVEN continued from p. 12 (the back cover)

Sven was a great man with integrity. Apart from the 12-step program and NADA achievements, he also had great successes in other fields. He was a journalist and spoke 7 languages fluently. He did live radio interviews with the first Russian Nobel Prize winner in literature, Mikhail Sholokhov, and in 1961 he interviewed the first man in space, Yuri Gagarin. He leaves behind 2 sons and grandchildren. He also leaves behind the positive effects and happiness of his life-saving projects and the inspiration he was to acupuncture colleagues and others.

Sven Wahlström, Sweden, March 2010

Michael Smith changed much of the work with dependency problems I had been involved in here in Sweden. When I had attended his demonstration of the NADA technique and heard him lecturing about it I asked where I could read about it in order to understand it better. He then said, "I have a better suggestion – spend two weeks of your time at my clinic in New York and I shall teach you how to use it." I followed his advice and had a fantastic experience at the Lincoln Clinic.

When I got back to Sweden I had to fight all the doctors and treatment specialists who put up a firm wall of resistance against the method – at that time very few non-

acupuncturists believed needles could do what ordinary methods of dependency treatment failed to achieve. I was at that time employed as a Director of Staff of Swedish Television, and in that capacity I was even threatened by the Swedish National Board of Health; they told me they would take legal action against me if I did not stop needling. I managed to avoid being prosecuted and continued informing about NADA and training doctors and other specialists in using the method. I had regular contacts with Mike Smith, and I encouraged people to go to his clinic and learn from him. He was the one who convinced me to arrange in Stockholm the first Euro-NADA conference.

He was instrumental in spreading the NADA protocol all over Europe – in Sweden alone, we have trained over 3,200 ADSes. I have had the pleasure of attending most of his lectures in many countries and establishing NADA contacts that have been very useful for me ever since.

Mike – with his experience, skill and enthusiasm has done fantastic work in making the NADA method known and accepted in most European countries. It is now used in almost all of the treatment facilities in our country. Even the National Board of Health here in Sweden has accepted it!

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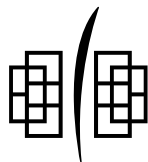
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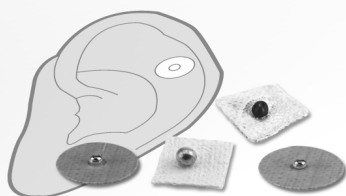
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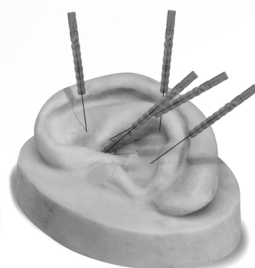


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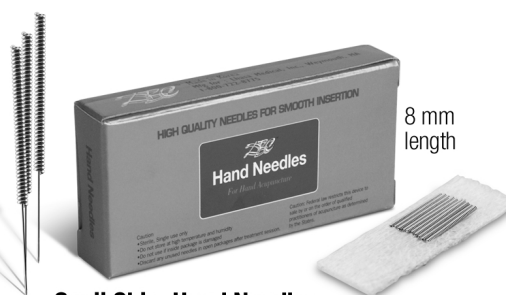
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News from the Globe: NADA Sweden Visionary **Sven Wahlström** Passes Away



NADA founder Michael Smith informed Guidepoints that Sven Wahlström passed away in late August. He wrote the following about his work. We will also print a reflection by the current NADA Sweden president, Elisabeth Sundqvist, and a short piece Wahlström himself wrote about his NADA work in Sweden.

Michael Smith on Sven Wahlström:

He was a teacher, counselor and director of Swedish television who met me in a small conference in Germany in 1986. He has been a true NADA success story. He came to Lincoln, coincidentally with John Tindall [of NADA UK]. Later we were invited to do several trainings at Minnesota model alcohol treatment programs. Sven was the director of the Swedish Minnesota Model

Association.

Gradually he recruited addiction staff, nurses, doctors, acupuncturists, and researchers plus a lot of support from Uppsala University and the world famous Karolinska Institute, whose staff votes on the medical Nobel Prizes. We presented to several large and full-day Karolinska conferences in the 90's. Sven hosted 2 Euro-NADA meetings and was always a part of leadership. He was a mature, always generous leader who kept a focus on treatment and self-help AA recovery. We will miss his leadership, talent, and friendship.

Elisabeth Sundqvist, NADA Sweden president

Sven Wahlström was my mentor and one of my biggest inspirations. Sven founded and initiated the twelve-step program, the Minnesota program, in Sweden and thereby changed and saved many lives.

He also founded NADA in Sweden, which is very close to my heart, our hearts. Sven asked Michael Smith if he could come to Sweden, after he got a contribution from the National Board of Health and Welfare - and NADA in Sweden started from that in 1984.

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