

GUIDEPOINTS:

News from NADA

January 2012

2012 CONFERENCE ISSUE

23RD ANNUAL CONFERENCE of the NATIONAL ACUPUNCTURE DETOXIFICATION ASSOCIATION
at YALE UNIVERSITY in NEW HAVEN, CT: JUNE 14-16, 2012

EAR ACUPUNCTURE: A TOOL FOR RECOVERY

by Lucile Bruce

This story was originally printed in the November issue of Center Focus, the newsletter of the Connecticut Mental Health Center (CMHC). CMHC is a cooperative endeavor of the Connecticut Department of Mental Health and Addiction Services and the Yale University School of Medicine, Department of Psychiatry. A link to this article is also available on the conference page of the NADA website, acudetox.com. Lucile Bruce is the communications specialist for CMHC and can be contacted at: lucile.bruce@yale.edu.

"It's the best relaxation, anti-anxiety drug I've ever had," says Hank. "It's better than a Valium or Lorazepam or anything from the past."

In fact, it's not a drug at all.

Hank (not his real name) is talking about ear ("auricular") acupuncture, a cornerstone of recovery for clients at the Substance Abuse Treatment Unit (SATU).

SATU, Connecticut Mental Health Center's premier clinic for individuals with substance abuse disorders, offers a simple five-point ear acupuncture protocol to all of its clients. Some, like Hank, have been receiving the treatment for years.

"This is a calling for me," says Katurah Bryant, RN, LMFT, Associate Director of SATU and the founder and supervisor of the clinic's acupuncture program. "It's not a cure for addiction, but it is one tool in the tool belt for recovery that we're trying to get clients to establish for themselves."

One of the oldest healing arts in the world, acupuncture has been practiced in Asia for thousands of years.

Scientists don't fully understand why or how it works. At SATU, says Bryant, "We don't dwell on the 'whys.' We just know that clients seem to benefit from the intervention. It gives them some relief from symptoms of their addiction."

For more information about acupuncture, visit the National Center for Complementary and Alternative Medicine.



NADA treasurer Katurah Bryant

Acupuncture at SATU

SATU offers three regularly scheduled, one-hour acupuncture sessions each week. In addition, clinicians honor clients' special requests for acupuncture. All SATU clinicians and senior staff are certified to provide acupuncture.

At SATU, where the goal is for all clients to be "drug
SATU continues on p. 2

*SEE PAGES 6 +7 for more info about the
conference in New Haven, CT*

The NADA office moved. As of January, 2012, please direct all correspondence including letters to the editor to: NADA, P. O. Box 1066, Laramie, WY 82073. Mail sent to the old Missouri address will be forwarded.

Phone: (888) 765-6232 **Email:** nadaoffice@acudetox.com
Fax: (573) 777-9956 **Website:** acudetox.com

SATU continued from p. 1

free," maintenance drugs as a treatment intervention are not available. Clinicians work with clients to develop individualized recovery treatment plans. Acupuncture, Bryant explains, is an adjunct to treatment and never a stand-alone.

"It's very relaxing," says another SATU client. "It's a good excuse to sit for an hour and not think about anything."

At some point in their daily lives, clients will experience the "stimulus" that might lead them to reach for a drug. "Acupuncture seems to widen their response time," Bryant observes, "allowing them to think first and realize they don't have to react to the stimulus. Instead they can use positive coping skills acquired in treatment."

Bringing Ear Acupuncture to Connecticut

In 1991, Bryant was trained in the auricular acupuncture protocol at the Lincoln Recovery Center in New York City. Dr. Michael O. Smith developed the protocol there in 1970 and used it to treat people with addictions. He has since worked tirelessly to train new providers and promote the efficacy of ear acupuncture around the world.

After her training, Bryant was one of a small team of clinicians who worked with the State of Connecticut to establish the Acupuncture Detox Specialist Law. This law allows people who are not nurses or physicians to become certified in auricular acupuncture for the treatment of addictions. The Connecticut law follows National Acupuncture Detoxification Association (NADA) protocol.

"The NADA 5-point protocol supports continued engagement in treatment," says Bryant. "Ultimately, that's the most important thing."

The Treatment

It takes only a minute or two to insert the paper-thin needles into each ear. At SATU, clients then sit silently for thirty minutes or more in the soft, black chairs with matching footstools in the acupuncture room. The lights are dim. Most clients close their eyes; some fall into a meditative state that Bryant calls "needle sleep."

The five points are: (1) The **Autonomic Point** which calms the nervous system and helps with overall relaxation; (2) the **Shen Men** or "spirit gate," which reduces anxiety and nervousness; (3) the **Kidney Point**, for calming fears and healing internal organs; (4) the **Liver Point** for detoxification, blood purification, and to quell aggression; and (5) the **Lung Point**, which promotes aeration and helps clients let go of grief.

Guidepoints News from NADA

Clients are invited to have all five points or choose the ones they want that day. Pregnant clients receive only two points, the Shen Men and Lung.

This August, after water damage from Hurricane Irene temporarily relocated SATU to the main building of the Connecticut Mental

Health Center, Bryant and her fellow clinicians set up shop on the Center's second floor. Along with SATU clients, thirteen CMHC staff members



Michael J. Sernyak, MD, Director of CMHC received auricular acupuncture that day. Michael J. Sernyak, MD, the Center's CEO, participated for the first time. "I had this wonderful, contemplative time," he said afterward. "It was really unusual."

Clinicians, says Bryant, experience stress too; it's important that they develop ways to manage their stress. Acupuncture can help. The treatment is available to all CMHC staff members during any of SATU's regularly scheduled clinics.

SATU also welcomes CMHC clients with mental illness to the acupuncture clinic. "We just need to talk to the clinician to make sure they are psychiatrically stable and have no medical contraindications," Bryant explains. People with pacemakers cannot receive acupuncture; special considerations are given to those with certain medical conditions such as hemophilia and diabetes.

Training New Providers

In July 2009, for the first time, voluntary acupuncture training was offered to incoming addictions fellows and psychology interns from Yale University School of Medicine. Bryant led the training along with John Antonucci, MD of the Newington, Connecticut VA Medical Center. Every fellow in the addictions program participated.

Ismene Petrakis, MD, Chief of Psychiatry at the VA Connecticut Healthcare System, directs the world-renowned Yale Department of Psychiatry training program in addictions. She says medical students and practitioners have become increasingly interested in learning about alternative treatments and how they can be incorporated into medical practice.

According to Petrakis, research has shown that

acupuncture is effective for addiction treatment. "The best evidence is when used as an adjunctive treatment for opioid detoxification," she explains. "I have encouraged the fellows and junior faculty to review the literature and decide for themselves how likely it is to be an effective treatment."

For Bryan Shelby, MD, the answer is very likely. Before becoming an addictions fellow, he had his own experience with acupuncture: after two treatments for carpal tunnel syndrome, his symptoms "pretty much went away." He completed an acupuncture program at Harvard Medical School and later trained with Katurah Bryant. As a fellow at the VA hospital, Shelby offered ear acupuncture to patients in the buprenorphine clinic. Buprenorphine (suboxone) is a maintenance drug for people recovering from opiate addictions. Acupuncture is used to help these patients reduce stress and anxiety.

"The vast majority of patients find it very relaxing," says Shelby. "It's impressive."

For Katurah Bryant, it's gratifying to train new providers every year. In addition to the Yale fellows, she has taught acupuncture to clinicians at New Haven's Cornell Scott-Hill Health Center and other places. But her greatest joy comes from helping patients.

"It's all about their recovery," she says, "and empowering them to make positive choices for their lives."

Katurah Bryant is co-chair for the 23d NADA Annual Conference, being held at Yale University in New Haven, CT. More info about the conference on pgs 6 and 7.

NADA MEMBER WINS RESEARCH COMPETITION

by Amber Berg

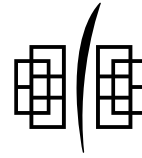


Amber Berg

As a student at the American College of Acupuncture and Oriental Medicine, I participated in a research competition opportunity held at the Whole Medicine Conference in Baltimore, Maryland in May 2011. My research group submitted an evaluation of a 2003 study titled "Analgesic Effect of Auricular Acupuncture for Cancer Pain: A Randomized, Blinded, Controlled Trial", conducted by David Alimi

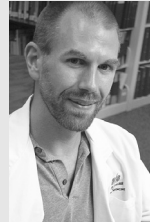
et. al. and published in the Journal of Clinical Oncology. Our evaluation of this study won the competition.

Auricular acupuncture is an effective, noninvasive, low
RESEARCH COMPETITION continues on p. 10
Guidepoints News from NADA



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SPiRiT OF NADa: HUNGARIAN GOVERNMENT WILL CONTINUE TO SUPPORT NADA-TRAINED SPECIALISTS

In September 2011 European NADA practitioners and leaders converged in Dublin, Ireland for the bi-annual NADA Euro conference. During the presentation from NADA Hungary given by medical doctor, Ajándok Eőry, attendees learned that non-medical specialists were at risk of losing their ability to practice the NADA protocol in Hungary due to a new law that was to be introduced in the Hungarian government.

Upon the suggestion of retired judge and former board member Sheila Murphy, NADA delegates from 11 countries: Denmark, Finland, France, Germany, Hungary, Ireland, Norway, Sweden, Switzerland, United Kingdom and United States, drafted and signed an open letter to the Hungarian government urging officials to continue to allow non-medical NADA specialists to practice this safe, effective and low-cost treatment.

The international NADA representatives recognized Hungary "for being the first European nation to implement acudetox, the practice of ear acupuncture for drug and alcohol dependence." This historical legacy lent even greater weight to the advocacy effort.

Immediately upon returning to Hungary, Eőry published the letter in Uzleti Sajtoszolgálat, a leading Hungarian online news source. You can view the letter on this site by going to the October 1 blog posting on NADA's website, www.acudetox.com.

In November the NADA office heard the first news from Eőry: "As a reaction for our open letter sent by the Hungarian Ambassador of Dublin directly to our health secretary of state, I received a message from him: 'Be optimistic, the regulation will not be changed in the near future. I am ready to meet you.'"

After his meeting with the Hungarian Minister of Health in early December, Eőry writes: "I am over the meeting. He was very helpful, he read the copy of our open letter from my hand. He promised that there will not be any new regulation in the future concerning acudetox. I think this is a great success.

Open letter to the Hungarian Government from international representatives of the National Acupuncture Detoxification Association International (NADA), gathered for a convention on September 23 and 24, 2011 in Dublin, Ireland.



The undersigned represent NADA organizations in: Denmark, Finland, France, Germany, Hungary, Ireland, Norway, Sweden, Switzerland, United Kingdom, and the United States.


As NADA international representatives, we commend Hungary for being the first European nation to implement acudetox, the practice of ear acupuncture for drug and alcohol treatment. NADA Hungary started in 1986 in Budapest where the Euro NADA office was located and hundreds of trainees came from every part of the nation to attend training. Acudetox has been regulated by law since 1997, allowing NADA trained non-medical specialists to provide this safe and effective treatment.

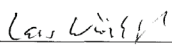
Over the 25 years that this treatment has been in practice worldwide, it has demonstrated tremendous success and effectiveness with a large variety of populations and conditions, particularly with mental health and substance abuse issues. In Hungary this treatment greatly enhances public safety, and promotes peace and well being for individuals, families, and communities. In particular this has been one of the most effective ways of reaching the homeless population and the poor who, even with a free social welfare system, still fall through the cracks.

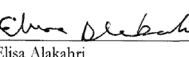
There is legislation which will be introduced in the Hungarian Government with the intention to disable the training and practice of non-medical NADA specialists. This will have significant adverse effects on public safety. The economic consequence of this action will result in the loss of approximately 700 jobs.

Furthermore, the discontinuation of this regulation for non-medical NADA specialists will cause closure of programs, and therefore many clients will suffer from lack of very affordable or even free treatment that had heretofore been available.

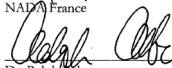
We, the representatives of international NADA organizations resolve that since Hungarian people of the European community stand for human rights of individuals to receive drug and alcohol treatment and mental health, acudetox legislation should be continued for the welfare and safety of the nation of Hungary as it has been in practice for the past 14 years.

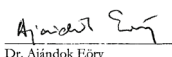

NADA Founding Chairperson
Dr. Michael O. Smith

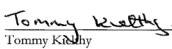

Lars Wiinblad
NADA Denmark



Elisa Alakahri
NADA Finland

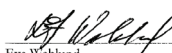

Dr. Vincent Bourseul
NADA France


Dr. Ralph Raben
NADA Germany

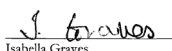

Dr. Ajándok Eőry
NADA Hungary


Tommy Kirby
NADA Ireland


Rita Nilsen
NADA Norway


Eva Wahlund
NADA Sweden


Eleanore Hickey
NADA Switzerland


Isabella Graves
NADA United Kingdom


Dr. Ken Carter
NADA United States

By the way, he asked about smoking. I confirmed that acudetox has a strong anti-smoking effect. He asked me for help in the new anti-smoking campaign in Hungary. I promised to participate actively showing NADA ear treatments with some patients who experienced its usefulness in this aspect.

The duration of our discussion lasted only about 10 minutes, but was very friendly. I tried to give some ideas to incorporate acudetox into the hospitals in ambulatory form covered by national health insurance. We shall see..."

Comments on the outcome of this advocacy effort

From Tommy Kielthy, NADA Ireland :

I'm delighted that the combined efforts of those who use and recommend the NADA protocol can have an influence within Government departments.

We in Ireland are in pretty much the same situation. We're surrounded by the intransigence of bureaucrats of the Health Services, who either don't understand or are unwilling to test their understanding of complementary therapies. However, if we continue in our combined efforts, I believe our dedication will eventually show how serious and effective we can become in treating and complimenting the therapies that already exist. I imagine the best way forward is to keep pressuring those in authority to witness the effectiveness and benefits of this simple and inexpensive therapy.

In that regard it is important that lines of communication be opened and maintained within each country's Health Departments. tommyk@nadaeireann.com

From Sheila Murphy, NADA U.S.:

This was a restorative justice effort. We considered that

5

public safety of the whole is at risk, and that was very moving. bon.smurphy@gmail.com

From Ralph Raben, NADA Germany:

We received bad news from the Doctors' Chamber of Hamburg (Hamburg is one of 16 states in Germany). Up until 2011 they decided liberal: the responsible doctor does not have to be at the location where ear acupuncture treatments are happening nor does the doctor need to have seen the client before. That has now been changed to personal and direct responsibility. Even though this is only in Hamburg, the decision could give a sign to Doctors' Chambers in other states to do the same. We will now try a dialogue about this nonsense.

The NADA statement from Dublin and the reaction from the Hungarian government, or from any other country, could help us. Please help us. Send us any documentation you have about this issue. ralphraben@web.de

From Emmanuelle Mouy, NADA France:

We're happy to see that all together, we can have a big impact. In France, NADA acupuncture for non-medical professionals is not allowed and has never been allowed. So we can only train doctors and nurses in order to stay within the law. nadafrance@ymail.com



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NADA Protocol: Pioneers and Visionaries of Integrative Medicine

23rd annual conference: **June 14 - 16, 2012**

Pre-conference Acu Detox Specialist training: **June 10-16, 2012**

at Yale University

Conference Schedule

6/10-16 Acu Detox Specialist
Sun-Sat training

Th 6/14 Directors and
9am-3pm Administrators
Workshop

Th 6/14 Registered
9am-5pm Trainer's Day

Th 6/14 Opening Reception:
6-8pm *Featuring Local Artisans
and Entertainment*

6/15 Fri
8-8:30am All Member Meeting
Continental Breakfast
8:30am Registration
9am-6pm Plenary and breakout
sessions
12:30-2pm Conference Luncheon

6/16 Sat
8:30am Breakout Sessions
12:30-2pm Lunch on your own
2-4pm Closing Plenary
*Conferring of Training
Certificates*



Conference Accommodations:

Courtyard by Marriott at Yale

\$119/night+tax. Rate available for up to 4 people per room.

Cut-off date for room discount: 5/14/2012.

Call to make a reservation: (203) 777-6221.

Parking: \$15/night.

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\$70/night for a single room OR \$40/night for a bed in a double (2 single beds).

Rooms come with a blanket, pillow and bedding (sheets, pillow case & towel).

All rooms are grouped in suites. 2-4 rooms with common area per suite. Shared bathroom and showers. – *yes, folks, you're staying in a dorm!*

Contact the NADA office by 5/14/2012 to reserve a room: (888) 765-6232.

\$50 fee to make adjustments to the reservation (adding or removing room nights).

Parking for all registrants is available on the Yale campus: \$8/day or \$28/week
- online registration required.

Conference Highlights:

Innovative NADA Training for the Department of Psychiatry at the Yale School of Medicine: A Collaboration with the West Haven VA Medical Center

Lessons learned from self-sustaining ADS clinics in Maryland, Pennsylvania, Virginia, and Arizona

Beyond the Lincoln Recovery Center: Possibilities for new ADS training programs in New York State

Popular and creative uses of sleepmix tea in a variety of clinical settings

International focus: Trainings in Juarez, Mexico

*Earn 15 CEUs for the 2-day
conference, 5 for the Directors
and Administrators Workshop
and 30 for the Acu Detox
Specialist Training!*

NADA Protocol: Pioneers and Visionaries of Integrative Medicine

Pre-conference Training

Directors and Administrators Workshop

*Facilitated by
Michael Smith*

*founding Chairperson of NADA
and retired medical director of
Lincoln Recovery Center*

*Thursday 6/14/2012
9am-3pm*

Workshop Purpose: to learn how to integrate acu detox into an addictions or behavioral health treatment program and maximize its benefits with a variety of client populations.

Workshop discussion will focus on issues brought forth by group participants. Frequently asked questions include:

- How does acu detox help clients better engage and participate in treatment?
- What are the costs to running an acu detox program? Can it save our program money?
- How can supervision help the program and the clients?

Earn an ADS Certificate of Training (45 CE credits)

Attend this pre-conference session as well as the 2-day conference (you must attend both to complete the training) and earn an Acupuncture Detoxification Specialist certificate of completion in 7 days. This cost effective and time efficient ADS training and conference combination comes only once a year. From NADA's top trainers, learn the simple ear needling technique and how to integrate it into addiction, behavioral health, and disaster response treatment settings. You will gain practical clinical experience at one or more New Haven-based programs. **Register early – this event always sells out.**

Who can be trained?

Addiction and Behavioral Health Professionals: If you work in the addiction treatment, behavioral health, or disaster response fields as a counselor, social worker, nurse, corrections officer, psychologist, medical doctor, case manager, mentor, etc. you may be able to add acu detox to your skill base. Many states have specialized exemptions that allow non-acupuncture professionals to learn and utilize the ear acupuncture protocol. NADA has documented the following states and provinces as allowing some type of ADS practice: Arizona, Arkansas, Connecticut, Delaware, Georgia, Indiana, Louisiana, Maryland, Michigan, Missouri, New Mexico, New York, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington, Native American reservations, Nova Scotia, Ontario, and Prince Edward Island. Check your state laws and regulations for more specific information.

Licensed Acupuncturists: Join in the exciting integration of Chinese medicine within a traditional Western addiction and behavioral health setting. Become an advocate for the NADA protocol in addiction treatment as well as dual diagnosis and mental illness, and disaster response including PTSD. Enjoy the rich experience of opening doors for acupuncture to benefit those who may not otherwise seek out such a simple yet powerful healing treatment.

Note: *You will receive a certificate of completion after the training but you do not need to submit continuing education credits to maintain status as an Acu Detox Specialist because this is not a certification.*

Training Schedule

Trainees participate in a 5-day intensive training that begins on Sunday 6/10 and ends on Thursday 6/14, followed by the 2-day conference. The training interweaves the theory and application of acu detox along with a clinical practicum. Hands-on experience is available by providing acu detox treatments to each other as well as clients served by local programs. Trainees are required to participate in both days of the conference to earn a certificate of completion at the end of the 2nd day of the conference.

Travel and Accommodations

Accommodations will be available at two locations: Courtyard by Marriott at Yale at \$119/night (up to 4 people per room) and Yale University dorms at \$70/\$40 night (see p. 6 for more detailed information). Trainees are responsible for transportation, lodging and food throughout the training period, although there may be organized carpooling to and from the training site each day.

WEST COAST NADA REPORT: WHERE ACUPUNCTURISTS ARE MANY, SERVICES FOR ADDICTS SUFFER *by Ryan Bemis*

Paid acupuncture positions in NADA programs on the west coast have sharply declined in recent years largely due to budget issues, and as a result dozens of NADA-based services have ended, according to an informal Guidepoints survey. Meanwhile NADA advocates and acupuncturists who have lost their jobs continue to work for NADA policy reform in the face of opposition.

Aren't there enough licensed acupuncturists in the US to provide NADA ear acupuncture services within addictions and mental health programs? This is a common, and fair, question posed by acupuncturists.

To answer this question, Guidepoints zeroed in on 2 states that are home to some of the largest populations of acupuncturists: California and Oregon. We interviewed both addictions providers who have laid off acupuncturists, and acupuncturists who lost their jobs in treatment programs. According to their reports, very few acupuncture-based addictions programs currently operate in these two ADS restrictive states.

The report contrasts with numbers of NADA programs in states that permit allied health workers to perform the NADA protocol, such as Maryland and New Mexico. The survey supports a hypothesis that it is not sustainable for addictions and mental health programs to exclusively depend on hiring an outside contracted acupuncturist at \$30-\$70/hour to perform the NADA protocol.

Oregon: NADA giants cut in half

In Portland, Oregon, which at one time was home to more NADA programs than anywhere in the world, jobs for acupuncturists within addictions programs have almost disappeared. Due to severe budget cuts, the high salary of an acupuncturist (which can range from \$30-\$70/hour), is often the first item to be cut.

In 2004, 20-25 acupuncturists were employed within the network of NADA programs. Today, there are less than half as many employment opportunities: only 11 mostly part time jobs for acupuncturists. In a state like Oregon, if a program can't pay a licensed acupuncturist or find a willing volunteer acupuncturist, the program can no longer offer NADA services to their clients.

"Lack of ADS is the killer," remarks Guidepoints founding editor Jay Renaud about the massive program closures. Renaud worked for years as an addictions program administrator in the Portland area.

ADS refers to an Acu Detox Specialist, an individual who has received the full 70 hour NADA USA training. ADS denotes a health worker qualified to provide ear acupuncture services for broadspectrum behavioral health conditions. Integral to a cost effective NADA model, ADSes are not licensed as acupuncturists, but are rather counselors, nurses, social workers, psychologists or other community health workers. According to one comparative study, NADA services provided by licensed acupuncturists was 16 times more expensive for a treatment program than utilizing existing treatment staff trained as ADSes (Mercier, 1993).

Mercier, D.G. (1993) The Kent-Sussex Program: A Case for Acupuncture Specialists. NADA Literature Item # 1028. Laramie, Wyoming: National Acupuncture Detoxification Association.

The total cuts in the past 8 years are estimated to be 55%-59% (calculated by estimating the number of 3-4 hour shifts of NADA groups and acupuncture sessions accessible to Oregonians within psychiatric and addictions programs).

The rollback began in 2004 at Central City Concern (CCC), a comprehensive recovery and housing program located in the heart of Portland. Eight psychiatric and addictions acupuncture based programs staffed by CCC acupuncturists lost funding. Acupuncture services at CCC's detox and outpatient program were also scaled back, alongside two inpatient programs through Ecumenical Ministries of Oregon and Volunteers of America.

In 2007, the NADA based drug court program in Multnomah County lost funding; acupuncture is no longer a service for their clients. The NADA protocol was an integral component of their comprehensive drug court services since inception in 1991, and independent evaluators estimated that the program reduced crime and saved taxpayers \$79 million in "avoided costs" over a 10 year period.

Most recently in June 2011 the 18-year old NADA style program at the Washington County Community Corrections Center, where licensed acupuncturists served 100-150 clients weekly, free for the public, lost funding for salaried acupuncturists.

With credit to David Eisen, NADA co-founder and executive director of the Portland-based integrative

health center Project Quest, funding for remaining NADA services has been stabilized through Medicaid and Access to Recovery third party reimbursement. In addition, Eisen is exploring multi-year grant funding to renew the Washington County program.

California acupuncturists just say no to NADA reform

In California, the picture is not better. Between 1998 and 2003, eight NADA programs closed due to funding problems, which together had offered acupuncture within mental health and addictions programs for an estimated 30+ clinic sessions a week. Since then, NADA programs within a homeless shelter in Santa Maria and another inpatient program called Cottage Care lost funding. Just since the budget crisis of 2008, at least 10 NADA programs have been cut, according to reports from acupuncturists who worked in these programs.

The California Acupuncture Board was approached by state legislative assembly workers in May 2010 presenting the possibility of a NADA policy that would permit existing treatment staff, with ADS training, to perform NADA services. This effort was backed by the California Association of Alcohol and Drug Program Executives (CAADPE), a policy advocacy and workforce development organization representing addictions and mental health

providers across the state.

In addition, acupuncturists who lost their jobs as NADA providers came out in support of the NADA policy. They envisioned creating new opportunities for acupuncturists to work as trainers, similar to states like New York, Texas, and Virginia. However, the Acupuncture Board unanimously voted against NADA reformers, stating in their minutes that they would “not support the practice of acupuncture outside of licensed acupuncturists.”

And with that statement, the crisis has continued to worsen. More jobs for acupuncturists have since been cut, which has led to fewer NADA services accessible to suffering addicts.

“It is so painful to be looking at this sad reality,” laments Project Recovery director, Ruth Ackerman, who witnessed in spring of 2011 the slashing of NADA services in their outpatient program as well as a homeless shelter in Santa Barbara, California. “The



Ruth Ackerman

WEST COAST continues on p. 10



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programs all loved the acupuncture treatment, they have just been cut to the bone.”

Last summer, a 19-year old government run hospital NADA detox program operated by Gregory Ross ran out of funds for his salary. For years Ross wrote about his clinical experience as a NADA acupuncturist in Oakland. His column, *Not the Emperor's Acupuncturist*, which was written to describe the personal and professional experience of an employed acupuncturist in a public health setting, was dropped by *Acupuncture Today* editorial staff. In his farewell column, “Saying Goodbye to Healing”, he wrote, “I am far from alone in this experience in the acupuncture detox field. Over the last 10 years or so, I have known at least eight acupuncturists that have left the detox field due to the bad economy.”

NADA advocates refuse to give up



Carolyn Reuben

The news is not new to most. Acupuncturists are out of work. Wait lists remain long for addicts seeking recovery, relapsing and returning to the streets. And while

some see the current economic downturn as the beginning of the end of acupuncture based healing for addictions, Carolyn Reuben, a licensed acupuncturist who lost several paid NADA gigs amidst the 2008 California budget crisis, continues to advocate for reform.

A former NADA board member, Reuben has spent years building support for a NADA policy so that addictions programs can save money by training existing treatment staff in the NADA protocol. She expresses optimism about prospective support from California acupuncturists in the future. In late 2011, Reuben successfully renewed a contract with the Sacramento Drug Court for NADA services, after a 2-year funding hiatus.

For information on how to assist NADA advocacy in any state, or to receive assistance from NADA in policy reform efforts, email advocacyfornada@gmail.com. To contact Ryan Bemis: ryanbemis@gmail.com.

Data collected and compiled with assistance of acupuncturists and program directors who have worked in programs suffering cuts: David Eisen, Ruth Ackerman, Debra Mulrooney, Lisa Kiplinger, Carrie Klein, John Blank, Christine Knight, Carolyn Reuben, Cally Haber, Gregory Ross, Lianne Audette. Reflects data current as of September 2011.

NADA's Mission

“The National Acupuncture Detoxification Association (NADA), a not-for-profit training and advocacy organization, encourages community wellness through the use of a standardized auricular acupuncture protocol for behavioral health, including addictions, mental health, and disaster and emotional trauma. We work to improve access and effectiveness of care through promoting policies and practices which integrate NADA-style treatment with (other) Western behavioral health modalities.”

Guidepoints: News From NADA is published six times per year for members. Annual dues of \$65 (US funds) includes subscription and other benefits. Publication contents may be reproduced without permission (please give credit).

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cost method of care to provide for suffering patients and it has been found to be significantly effective in treating patients experiencing cancer pain.

In the original study, patients experienced 36% decrease in neuropathic pain, which generally is the most difficult type of pain to treat in cancer patients, despite stable analgesic treatment. With this research effort we hoped to bring acupuncture greater credibility in mainstream medicine.

Becoming a NADA member broadened my mind as to how effective auricular acupuncture alone can be. When something this effective, this affordable and this convenient is not utilized, everyone should question “why”. Acupuncture needs to be adopted in conjunction to mainstream care in every health-care setting in the United States. A heartfelt thank you to those dedicating their lives to spreading health education, the future looks bright!

Aloha,
Amber Berg, ADS, MAOM (candidate), PhD (candidate)
To contact: aberg@acaom.edu

You can read the research evaluation in the Fall issue of the *American Acupuncturist* (No. 57), a quarterly publication of the *American Association of Acupuncture and Oriental Medicine* (AAOM).

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MEL SCHULSTAD, ADDICTIONS FIELD PIONEER *by Jay Renaud*

All USA professional addictions counselors should note the passing of Mel Schulstad who died in Seattle January 6.



Mel Schulstad

Born in North Dakota in 1918, Mel was the principal founder in the 1970s of the first national professional organization for alcohol and drug counselors, which is currently known as NAADAC – The Association for Addictions Professionals. This is the group which began the process which established credentialing standards for counselors. Mel was the organization's first president and guiding light throughout the remainder of his life.

A regular feature of the annual meetings of NAADAC was the designation of a recipient of the "Mel Schulstad

Professional of the Year Award" granted to an individual for outstanding contributions to the field.

Members of NADA who are addictions counselors owe this organization and its founders the opportunity they had to earn certification or licensure under their local authorities. Mel and his colleagues in the early days of the field made it possible for addictions counselors to become a recognized class of health care providers in the USA. To view a video interview with Mel describing how that came about go to: http://washingtoncdhistory.org/flash_files_pages/melschulstad-naadac.html

Prior to his service in the addictions field, Mel was a United States Air Force officer who flew many missions as a B-17 pilot during World War II. He retired from the military with the rank of Colonel. Mel had 47 years of recovery from alcoholism and was doing active 12 Step work in Alcoholics Anonymous until the very last years of his life.