

GUIDEPOINTS:

News from NADA

January/February 2015

Article in Nursing Journal Gives Boost to NADA Advocacy Efforts

by Sara Bursac

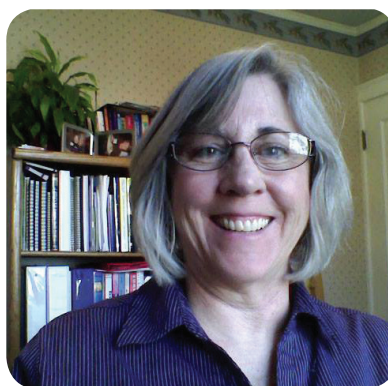
NADA Protocol: Integrative Acupuncture in Addiction, co-authored by former NADA president, Ken Carter, and NADA trainer, Michelle Olshan-Perlmutter, was published in the October/December 2014 issue of the Journal of Addictions Nursing (JAN). Carrying with it two continuing education credits, the journal has incentivized its nursing audience to read this article and learn how “NADA acupuncture is recognized as a universally useful intervention in the treatment of addictions specifically and in behavioral health more generally.”

Carter says, “Inspiration for the current article came from the Journal itself – Michelle and I were invited to write that piece.” JAN approached him to contribute to their special issue on complementary and alternative medicine, because they had seen the September 2011 article in the Journal of Medical Acupuncture, *NADA Acupuncture Prospective Trial in Patients with Substance Use Disorders and Seven Common Health Symptoms*.

In the JAN article, Carter and Olshan-Perlmutter start with a succinct history of the development of NADA acupuncture, which includes a description of what has come to be known as the Lincoln Model of training. The model is based on the seminal experience of practicing and teaching the NADA protocol in the late 1970s and early 1980s at Lincoln in the South Bronx. The authors highlight that “the NADA protocol was originally provided by anyone trained as an ADS [Acu Detox Specialist] regardless of professional status.” The training developed “outside the traditional network of acupuncture colleges and universities.”

JOURNAL continues on p. 2

New Membership Coordinator in the NADA Office!



Michaella Kaszuba

NADA is very happy to announce that Michaella Kaszuba has come back to our office as the new membership coordinator. She first served as the interim office manager in the spring of 2013, covering for Sara Bursac during her maternity leave and successfully managing all aspects of the NADA office.

Michaella embodies the essence of a life-long learner and teacher. She started in the healing arts with a Bachelor of Science in Nursing. As a nurse, she worked at a wellness center, in labor and delivery at a hospital, and in a doctor's office. Twelve years later, she became a certified massage therapist and shortly after that began to teach massage therapy, anatomy and physiology, and polarity therapy – first in Colorado and later in New Mexico.

Recently she earned a Master of Science in Family and Consumer Science from the University of Wyoming, bringing her quilting and sewing skills to such a level of artistry that she has been repeatedly asked to teach sewing and fabric courses at the university.

Add to the mix Michaella's experience working for a bank as both a benefits administrator and compliance auditor, and you have a membership coordinator who can gracefully move from dealing with routine detail-oriented

COORDINATOR continues on p. 10

JOURNAL continued from p. 1

A similar idea is voiced in the 2011 Medical Acupuncture article noted above: “NADA acupuncture is not dependent on Traditional Chinese Medicine theory but, rather, can be used in the acute and chronic phases of medical and psychiatric disease, across a broad spectrum of symptoms and conditions; this kind of acupuncture can also be used before and after a diagnosis has been made.”

A review of research studies in the JAN article demonstrates the hallmarks of the treatment: NADA acupuncture is best applied as an adjunct to other interventions rather than as a stand-alone treatment, and it is cost-saving to integrate the NADA protocol into a comprehensive treatment strategy. Olshan-Perlmutter notes that as “funds keep getting cut, we should be looking at ways to benefit people in a cost-effective way.”

“We have found that the main obstacle involved in providing NADA treatments is legislation in terms of who is allowed to provide these services,” says Olshan-Perlmutter. This is echoed in the article’s summary, where the authors state that “many state laws unreasonably restrict practice and supervision of the NADA protocol to physicians and to full-body acupuncturists. This precludes many addiction programs from being able to use the NADA protocol for the overwhelming number of patients who would benefit.” They close with a call for a revision of state laws that would empower nurses to provide and supervise the NADA protocol in a variety of different program and agency settings.

Although the audience for this journal is nurses, the article can be applied as an advocacy tool for many other health professionals as eligible providers of the treatment. In Michigan, the authors point out, NADA-trained individuals are under the auspices of the Department of Consumer and Industry Services which allows ADSes of varying backgrounds to practice without difficulty or restraint, “including counselors, outreach workers, nurses, nurses’ aides, social workers, psychologists, physicians and correctional officers.”

Carter and Olshan-Perlmutter have many irons in the fire when it comes to current and future research plans. They are now in the process of analyzing data from a prospective study approved by the Institutional Review Board (IRB) on using auricular magnetic beads with children with aggressive behavior and co-occurring DSM-IV diagnoses. The children who participated in this study were in a partial hospitalization program at Carolinas Medical Center, in Charlotte, North Carolina. It is too early to report on results, but it is noteworthy that this is

2

the first IRB-approved study with children using magnetic beads.

Both authors encourage continued research and advocacy for the NADA protocol so that it gains greater visibility, ultimately benefiting a large number of clients while saving programs money. They recommend that NADA members should actively present at conferences, seek out opportunities for legislative advocacy, and engage in research.



Ken Carter and Michelle Olshan-Perlmutter

To contact:

Ken Carter: kocarter4@gmail.com

Michelle Olshan-Perlmutter: moperlmutter@gmail.com



Lakeridge Health Is Back in the News!

Story reprinted courtesy of Lakeridge Health. According to their website, [Lakeridge Health](#) is one of Ontario's largest community hospitals serving people across Durham Region and beyond.

In December 2014, Accreditation Canada awarded the Lakeridge Health program in Ontario their coveted Leading Practice designation. A Leading Practice is something that is particularly innovative and effective in improving quality of patient care.

“I can’t believe how far this program has come and how much it’s been recognized and supported,” says Cindy Brown Primeau, who is clinical coordinator of [Withdrawal Management and Walk-in Support for Pinewood’s Centre Street](#) location. Brown Primeau was the driving force behind bringing auricular acupuncture to Pinewood Centre.

“We started offering treatments in withdrawal management with myself and one other acu detox specialist (ADS), Carole Toupin,” says Brown Primeau. “At first, we had four to five people signing up for each session. Then the numbers started climbing. When we reached 30 in a session, I knew we needed to expand!”

Today, 27 staff members are trained as ADSes, and Brown Primeau is a NADA Registered Trainer. Auricular acupuncture is offered at all six of Pinewood Centre’s locations in Durham Region, at Lakeridge Health’s Oshawa site, and at Community Withdrawal Management Services in Scarborough. Last year, about 4,500 treatments were delivered.

Auricular acupuncture complements Pinewood Centre’s clinical treatments, explains Cindy, because when people feel better they’re more inclined to participate in treatment and to make healthy choices.

Brown Primeau faced some skepticism and barriers but was ultimately successful in bringing auricular acupuncture to Lakeridge Health. Along the way, she learned valuable tips that could help other Lakeridge Health staff members bring their own ideas to life.

Cindy’s Tips – Make Your Mark!

- **Share your idea with others:** “The one thing I found really helpful was to just tell people about your idea every chance you get. You never know who will help you along your journey. I had great support from Lakeridge Health’s leadership.”
- **Demonstrate that your idea is effective:** “I did a program evaluation because it wasn’t enough that I thought auricular acupuncture was a good idea. There had to be evidence.”
- **Find opportunities to demonstrate your idea:** “Knowing that acupuncture is unfamiliar to many people, I offered free demonstrations to Lakeridge Health staff members on several occasions including during mental health awareness week and staff meetings.”
- **Accreditation is a great time to highlight your achievements:** “When an Accreditation Canada surveyor asked to receive an acupuncture treatment during survey week in 2012, I was more than happy to oblige. According to sources, the surveyor later raved about the experience.”

Book Review: Social Work Education and Practice Engagement, edited by Sanjai Bhatt and Suresh Pathare

Social worker and Nada India Foundation (NIF) chairperson, Suneel Vatsyayan, is a contributing author to a new volume on social work in India which has just been published by Shipra Publications. Vatsyayan's chapter in this anthology considers the connection between social work and the NADA ear acupuncture treatment. Specifically, he describes how the NADA protocol is as an ideal social work intervention for drug and alcohol addiction.

Vatsyayan trained first at the Navjyoti Delhi Police Foundation Drug Treatment Centre in 2000 with NADA founder, Michael Smith, and social worker and past NADA president, Ruth Ackerman. He then continued his training at Lincoln Recovery Center in 2001. At the Navjyoti treatment center, he observed that the NADA protocol can help to build a healthy rapport and trust with clients.

Vatsyayan writes, "Utilizing theories of human behavior and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work. Acupuncture and all Qi-flow therapies 'help the body help itself.' And this is also the goal of social work."

In January 2015, Michael Smith spent a month and a half in India, visiting programs and training facilities coordinated by NIF. While there, he wrote the following review of the book:

As a young psychiatrist in training, I made my first contact with professional social workers. I had questions about many things, but the psychiatrists were focused on teaching me certain techniques and a limited method of inquiry, much as you would train secondary personnel. The message was to follow certain pathways and avoid other viewpoints. Only the social worker on the training team respected my questions – and answered them by providing information and extending my horizons.

In the new volume, *Social Work Education and Practice Engagement*, edited by Sanjai Bhatt and Suresh Pathare, this admirable trend is extended to India. In the opening chapter, Prof. Husain Siddiqui makes a comparison between social work and the traditional professions of law and medicine. Both restrict skills and applicability to certain intellectually defined situations. My mother is a law school teacher, so I was familiar with the technicalities of the law and its separation from social common sense problems.

I chose to enter medicine because I thought it didn't have those limitations. I subsequently learned that medicine, at least the allopathic high-budget variety, has crucial blind spots. These include a lack of appreciation of

richness of human life.

India is the oldest, most complex society in our world, so it is an excellent setting for the rich honest pursuit of social work. In contrast, it is a relatively risky setting for professions that systematically exclude awkward aspects of society. Social work needs to grow stronger in India to protect its diversity and allow its creative strength to develop.



Michael Smith (center left) and Suneel Vatsyayan (center right) at the Acupuncture Science Association's Conference

remedies not made by pharmaceutical processing, and any self healing and homeostatic remedial effect. Such balancing, corrective effects are labeled “spontaneous” – with the implication of random cosmic rays. Only technical medicine can be smart and have a “plan.”

As this book amply demonstrates, the profession of social work deeply values life and the variety of natural circumstances. It is inclusive. It does not derive power by excluding layers of living realities. It also includes a female component which values all circumstances that humans have given birth to, not just a few situations that certain men have chosen to pay attention to. Other professions often exclude vital aspects of life. Social work includes the

*While in India, Michael Smith and Suneel Vatsyayan attended the Acupuncture Science Association's conference. At this conference, Smith was awarded the **Dr. Basu Memorial Award** for his work promoting NADA ear acupuncture in India since 2000. According to the [Acupuncture Association of India's website](#), Dr. Bejoy Kumar Basu (1912-1986) was “a great humanist” who introduced and spread acupuncture therapy in India for large masses of common people. Like Smith, a highlight of Kumar's legacy is his effort to promote acupuncture in a non-commercial way.*



Spirit of NADA: Letters Instill Hope for an ADS Future in New Jersey

In January 2015, New Jersey NADA member, Christine Siegel, wrote two letters to the New Jersey State acupuncture board inquiring about the possibility of creating an exemption for non-acupuncture Acu Detox Specialists. Her first letter led the acupuncture board to put it on their next meeting's agenda as a discussion topic. We are reprinting both letters because eloquently make the case for non-acupuncturists to be considered eligible providers. Following the letters is a brief summary from NADA's secretary and U.S. trainers' representative, Rommell Washington, who attended the New Jersey acupuncture board meeting.



Christine Siegel

First letter written January 13, 2015

Dear Sir/Madam:

My name is Christine Siegel. I am a life-long NJ State resident and currently a student of herbal medicine. My background includes alternative medicine and TCM. Additionally, I have a legal/law enforcement background.

I would like for the Board to advise me on where the State of NJ stands on the incorporation of the NADA protocol (see mission statement and FAQs below), as I would like to train under this multi-state organization. It appears that right now only MDs and Licensed Acupuncturists in NJ can train under NADA. This is weird because LAc's probably have already been made aware of these auricular points from their school training and besides, most folks go to an LAc for acupuncture, not an MD as these systems of medicine are inherently different.

There are so many people like me in the State of NJ that would love to be able to practice this well-proven method on our fellow NJ residents, including our Veterans. I have worked for the Prosecutor's office in Union County and have seen how the drug and mental health courts operate. Knowing that this simple, affordable, effective protocol may help individuals and families caught in the despair of addiction has prompted me to reach out

to the Board for guidance.

As you will find out when visiting the website, www.acudetox.com, the benefits don't stop at the addicted. I

think of all of the mental health issues that come from natural disasters like Hurricane Sandy, the after effects of horrible acts of violence in our schools and offices, to our social services that have the huge responsibility of making sure the thousands on government assistance get the help they need when it comes to mental health. What are their current options? Medication? We know how that works and the expense attached to it, not to mention the undesirable side effects. Plus, who is going to make sure the medication is administered?

Offering the NADA Protocol as an additional tool to these agencies and training people to administer said program may prove to be invaluable to the state.

What would it take to become a State that recognizes NADA and its protocol and allows training of non-MDs and LAc's? It's time to have another option for our NJ residents and we are looking to this Board to take swift action by allowing the laws to accommodate training and administration of this program in New Jersey to non-MDs and LAc's.

I thank you in advance for your cooperation and attention to this request.

Christine Siegel

Second letter written January 20, 2015

Dear NJ State Acupuncture Board Members:

My name is Christine Siegel and I am the author of the email that put AcuDetox on today's agenda. Unfortunately, I will be unable to attend the meeting. I am writing this follow up email to stress to the Board not to mistake my absence for disinterest or non-caring of the process. I feel quite the opposite. I am so excited that attention will be given to the topic of what it would take for the State of New Jersey to adopt the NADA protocol and allow training to non-LAc's and non-MDs so that we can allow our fellow residents access to this proven method.

As we all know from the benefits of acupuncture and perhaps herbal medicine and bodywork, the NADA protocol could prove to be vital to many of us. I envision this protocol to be widespread benefitting those with chemical dependencies, mental health issues, and disaster and emotional trauma.

As a Hurricane Sandy victim, with family and friends who lost their homes and such devastation that left many of us not even recognizing the area in which our homes once stood, many NJ residents wandered through the streets weeping from their losses. Many helped in ways that we could. Fundraising, helping neighbors to cope with loss helped us get through. But most found themselves just standing around trying to make sense of things. Some of us wanted to do more. I imagine what it would have been like to help as many as I could to get through the truly tough time, before rebuilding. What would that look like to you?

To me, it would look the same as it does in 20 other states in the U.S., many European countries and most provinces in Canada. In the Tri-state area, both NY and CT have adopted the NADA protocol. NADA members are based in all states of the U.S. and are ready to help at addiction treatment programs, mental health facilities, active-duty military and veterans, harm reduction outreach programs, homeless shelters, jails, prisons, and halfway houses. Worldwide there are more than 2,000 clinics and 25,000 NADA health workers that have completed the NADA training.

I am asking for my chance to help my fellow New Jersey residents. With your help I will get that chance. If given the opportunity to speak, Mr. Rommel Washington, a NADA spokesman, is scheduled to be present at today's meeting and will be available to answer questions and provide any information the Board may need to deliberate the importance of adopting the NADA protocol in New Jersey. If the rules allow, please let him be my (as a NADA member) voice and the voice of so many others.

Thank you. I am looking forward to the process.
Christine Siegel

On January 21, 2015, Washington attended the New Jersey acupuncture board meeting as a NADA representative. He handed out a packet of information about NADA to each member and was available for questions, although none were asked. The board stated that the issue of a NADA-based exemption was out of their jurisdiction, as only licensed acupuncturists can provide treatments in New Jersey. He said it was recommended to him to contact the state acupuncture association to try to effect a change in the law. In regard

to next steps, Washington said, "I really hope the letters Christine sent the board can help light the fire to further our work to bring about change."

These letters carry a responsibility to initiate a coalition of support among residents of New Jersey who are NADA members and interested in advocating for a change in the law to allow non-acupuncture health professionals to become eligible providers. Please contact the NADA office if you would like to voice your interest in this effort.

(888) 765-6232 or nadaoffice@acudetox.com.

NADA Philippines Becomes Accredited: Letter from Janet Paredes

Hello NADA Family,

I am very HAPPY to announce that on March 19, 2015, NADA Philippines' application to the Philippine Institute for Traditional and Alternative Health Care, Department of Health (PITAHC-DOH) to become an accredited Traditional and Alternative Health Care Organization has been approved. Drum rolls please!!!

This means that our acudetox specialists, especially those in the mountains and far-flung areas – our Sagada Mountain province midwives, our Cordillera ADSes and Mindanao ADSes, can have their identification cards signed by PITAHC-DOH Director General, Dr. Isidro Sia and by myself as head of NADA Philippines. This means that when military harassments occur in the field, the ADSes can now show their IDs!!!

I would also like to give a special acknowledgment to the NADA Board of Trustees and all the acudetox specialists in the Philippines, especially in the Luzon, Visayas and Mindanao regions.

Hep Hep Hurray!!!
Love to you all,
Janet



Janet Paredes

NADA in England: Children Learn Stillness

We first started to write this article to celebrate the more than decade-long NADA acupuncture program at the Starhurst school in Surrey, England. Starhurst is a secondary boarding school for boys with severe behavioral and emotional difficulties. Rachel Peckham (NADA UK) did the initial training at the school and stayed in touch with the workers there.

We have just heard from Peckham that, after more than 10 years, the program has been stopped due to financial setbacks. We decided that it was still important to run the story. It contains anecdotal evidence about the effectiveness of the NADA treatment for children. And when placed alongside stories from Janet Paredes (NADA Philippines) and others, it adds to our store of common wisdom.

In October 2003, a six-week pilot program using the NADA protocol was started at the Starhurst school. The pilot was a success and acupuncture was incorporated into the school's curriculum. A year later, it was written up in [TES Connect](#), a magazine for teachers.

According to the article, the program started with a group of six boys having treatment twice a week. Billy Moore, 16, said, "I felt more chilled – even my mum said I was – and I could concentrate in class." His friend Dave Harris, 15, agreed about the positive effects, adding, "I felt brilliant afterward, really relaxed. I slept better and stopped smoking so much."

Other pupils asked to be included, and even the teachers gave up a Friday afternoon to join in the acupuncture group. It had such an impact that the school officials decided to continue the program after the pilot was concluded.

Two NADA groups met each week where the boys had six treatments on a rotation basis to allow more of them to have the acupuncture. The ages ranged from 11 to 16 years. The boys put themselves forward for the acupuncture on recommendation from their peers. They say it is extremely beneficial in helping them to relax, improve concentration, and, in some cases, to reduce smoking.

The staff noticed changes in the students. They said that if there was an argument, it was always a pupil from the acupuncture group who intervened and helped sort things out. Celia Clack, one of the teachers who helped organize the study, said, "It was exciting ... these were

GUIDEQUOTE

"The Spirit of NADA is service. People grow, and we grow through the people we serve."

-- Michael Smith, NADA Founder

young people who couldn't talk things through, who'd fly off the handle,

and now they were being open with each other and expressing problems verbally

instead of fighting. Also, for them to sit

still for 45 minutes was amazing. They learned stillness."



Giving a NADA treatment to a student at Starhurst.
Photo courtesy of Neil Turner, ©TSL 2004.

NADA founder, Michael Smith, says that it is important to establish trust with children right away. At first they are nervous and worried, and do not have the time to see what we are able to do for them. When they walk in, they have symptoms – we give them the acupuncture and the symptoms get better. Children are growing and coping – they operate in the present and we have to go where they are. ♡

ACUGRAPH FOR SALE

"Practice Builder" Model~Almost New

Regular Price: \$2,339+ Case

Sell for \$1,500

Evan Shepherd Reiff, L.Ac

evan@healthforheroes.com

(415) 662-3162



Committee and Work Group Opportunities: NADA is looking for members interested in getting more involved in the organization as volunteers. The identified committees are: **Research, Legislation/Advocacy** and **Conference Outreach**. Please contact the NADA office if you are interested in joining one of these committees: nadaoffice@acudetox.com or (888) 765-NADA.

Annual Awards and Recognitions: At each annual conference we present awards to individuals and organizations who have made a significant contribution to the field of NADA acupuncture. Please contact the office if you would like to nominate someone for an award.

Conference registration: Registration forms for the 2015 Annual Conference in Cleveland will be available in the upcoming issue of *Guidepoints*. Online registration will become available as of April 15, 2015.

Image at top courtesy of MyPustak.com, a literacy organization in India.



TOOLS FOR HOPE

Welcome to NADA's international conference in Europe May 2015!

The Retretten foundation is proud to wish you all welcome to Oslo, Norway on May 29-31. 2015!

Reserve the dates now!

Stay informed on www.retretten.no/nada-2015 or send inquiries to kontor@retretten.no

COORDINATOR continued from p. 1

tasks to responding to inquiries from members and the public. All the while she maintains sensitivity to the variety of experiences our members bring as practitioners of the NADA protocol.

We would like give a big thank you to our previous membership coordinator, Shiloh Bayne, for her service to NADA, both as a membership coordinator and as an Acu Detox Specialist (ADS). Shiloh was trained as an ADS in Wyoming's first NADA training held in Laramie in April 2014. That experience deepened her commitment to



Shiloh Bayne

bringing healing and wellness to Laramie, particularly for people suffering with addiction. She has continued to be an active provider at the weekly stress relief clinics that started as a direct result of the Laramie training. Shiloh – thank you for your dedication and sincerity as NADA's membership coordinator for nearly two years. 🐾

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).

Contact:

NADA, PO Box 1066, Laramie, WY 82073.

Phone: (888) 765-NADA.

Office email: NADAOffice@acudetox.com.

Membership questions: membership@acudetox.com.

President: Elizabeth "Libby" Stuyt: libbystuyt@msn.com.

Editor: Sara Bursac, Contributing editor: Jo Ann Lenney.

ISSN-1070-8200.

Article submission schedule:

Dec 1 for January publication Feb 1 for March publication

Apr 1 for May publication Jun 1 for July publication

Aug 1 for Sept publication Oct 1 for Nov publication

Member advertising for all 6 issues (discounted rates):

Business card size: \$180

1/4 page: \$300

1/2 page (horizontal and vertical): \$750

Full page: \$1,350

We welcome letters to the editor in response to any story that we print. Please keep your response under 400 words and email it to nadaoffice@acudetox.com.



National Acupuncture Detoxification Association
PO Box 1066
Laramie, WY 82073



Non-Profit
U.S. Postage
PAID
Permit No. 1040
Leesburg, FL
34748

Return Service Requested

In This Jan/Feb '15 Issue:

Article in Nursing Journal Boost For Advocacy	1-2
New Membership Coordinator	1, 10
Lakeridge Health Back in the News	2-3
Book Review on Social Work Education	4-5
Letters Instill Hope for ADS Future in NJ	6-7
NADA Philippines Becomes Accredited	7
NADA in England: Children Learn Stillness	8
Get Involved: Volunteer in NADA	9

2015 NADA Annual Conference

Expanding Integrative Health -
Bringing the *Spirit of NADA* to Ohio

Cleveland, Ohio
October 1-3, 2015

InterContinental Hotel Cleveland :: 9801 Carnegie Avenue
Cleveland, OH

Single and Double Room Rates: \$139/night
Deadline for the discounted room rate: August 27, 2015
Call to make a reservation: (216) 707-4100