

GUIDEPOINTS

NADA Quarterly News
Winter 2021/22

South Bronx Unite and Lincoln Recovery Center

by Jo Ann Lenney



Members of South Bronx Unite (SBU) gathered again on December 4, 2021 to request input from the community regarding their vision for the Lincoln Recovery building. Through these meetings over the last few years, SBU developed a plan for a center focused on health, education and the arts: [HEArts Community Center](#). Earlier this year, as a result of SBU's campaign, New York City recognized the importance of using Lincoln Recovery as the community center, and the City Council included initial funding for its renovation in its 2022 budget.

Arif Ullah, executive director of SBU, thanked us for participating in the event saying, "It was very important to have you there and to have acupuncture represented as part of what we hope to offer at HEArts, honoring the Lincoln Recovery Center's legacy." For now, Lincoln remains a symbol of both past and present activism in the community.

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NADA acupuncture is a foundation. A foundation is the basic part of having something done successfully – you can build many different types of houses on it. Michael O. Smith

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Mission

The National Acupuncture Detoxification Association trains people in the NADA protocol, an ear acupressure and acupuncture intervention for trauma; substance misuse, abuse, dependence; and related behavioral and mental health conditions. Together we promote and advocate for access to holistic health as a right of all communities.

Vision

We envision a world where healthcare is people-centered, holistic, and accessible to the most vulnerable and underserved in our communities.

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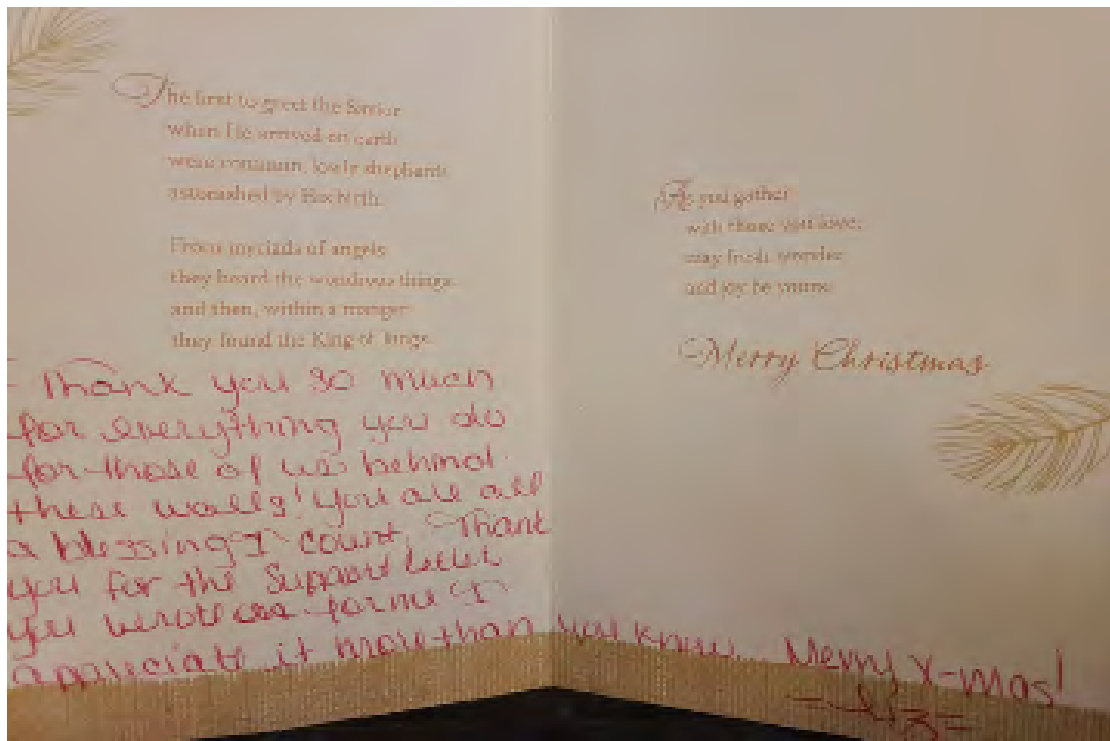
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[Lizbeth T.](#), featured in NADA Webinar: Healing and Recovery in the Carceral State, writes: “Thank you so much for everything you do for those of us behind these walls! You are all a blessing I count...Thank you for the support letter you wrote for me. I appreciate it more than you know. Merry X-mas! Liz



NADA WEBINAR: HEALING AND RECOVERY IN THE CARCERAL STATE

by Chuck Pyle

On October 14, 2021, NADA presented a 6-hour on-line webinar entitled, “NADA: Healing and Recovery in the Carceral State.” This was an uplifting and inspiring event. Albino Garcia, Director of the La Plazita Institute in Albuquerque, gave the opening blessing, noting that “culture heals – transcending all traumas, including historical trauma.” Albino also noted that “lived experience is a great credential” – an important thing for all of us to remember as we work with people in a carceral setting.

About 10 members of the Maine Inside Out Theatre Group read poetry that they had written focusing on their experiences while being incarcerated in juvenile corrections in Maine. The poetry was powerful, emotional and beautiful.

It appeared to me that this group poetry writing and reciting experience was quite healing – I observed this very diverse group of people, who might not be expected to get along, be quite genuinely supportive and caring with each other.

Picking up on the theme of being active, creative and supportive, Vanessa Mayesky presented artwork and information about the Prison Creative Arts Project (PCAP) at the University of Michigan. For two weeks each Spring in Ann Arbor, PCAP has an art exhibition with over 600 entries from incarcerated artists. One artist, Gabe, noted that when PCAP members visit the prison, whether they know it or not, they are “mending hearts.” The PCAP vision is “theatre, visual art and creative writing as tools for healing, collaboration and personal growth.”

Jesse Jannetta from the Urban Institute spoke about criminal justice reform. Jannetta noted that nationally, criminal justice reform rarely focuses on prison conditions, and that too much “idle time” is a major problem for incarcerated people. Jannetta indicated that the Urban Institute now has a participatory research emphasis, meaning when designing programs or studies, it is vital to include representatives of the population to be studied in the planning from the beginning. As we design NADA programs to serve any population, particularly a stigmatized population, it important for us to insist on obtaining legitimate input from the people we intend to serve.

Participants in the webinar were very fortunate to hear from David Rothenberg, one of the designated “observers” during the Attica prison uprising. He is the founder of the Fortune Society, one of premier re-entry non-profits in the United States. In talking about what prison environments should be like, Rothenberg contrasted the “brutalization” he observed at Attica with the “normalization” that is necessary to prepare incarcerated people for a successful return to community. A clip from Mr. Rothenberg’s play, *The Castle*, was shown, and a link to the play was provided to the webinar participants.



Olinger Merko, *The Young Old Men at KCF*. Courtesy of Prison Creative Arts Project

Next, retired trial judge and very active law professor, Sheila Murphy, talked about Restorative Justice and how the NADA holistic and humanistic philosophy fits well with RJ goals and methods. The NADA protocol can benefit not only defendants and incarcerated people, but also corrections officers, victims and family members of all of the above. Trauma and stress can spread, but acudetox can reach all impacted by the event in a simple, safe and effective way.

The webinar closed with presentations about the NADA protocol being used in jails and prisons around the United States and the world. Rita Nilson, who established acudetox programs in prisons in Norway, had the best quotes. Rita, who has been in recovery for over 20 years, said, “I am addicted to NADA – to nothing.” In terms of the ease and flexibility of administering acudetox, Rita said, “If you have something to sit on, you have a program.” All of the programs were inspiring. Jack Cavanaugh, then Su-

perintendent of the Howard County, Maryland jail, established the first jail-based acudetox program a couple of decades ago, and it continues today. One of the Howard County Jail acudetox program participants said, “Being in the acupuncture room is like being outside the prison.”

It is important that these inspiring presentations lead to action. Here are a few recommendations. First, if your state needs a loosening of regulatory restrictions or prohibitions on acupuncture detoxification specialists (ADSes), I urge you to participate in the NADA Advocacy Group. The group meets by Zoom the second Monday of each month at 11:00 am MST. Advocates from around the country share their experiences and ideas for expanding access to ADSes. Second,

connect with the local prisoner re-entry community, which will include public defenders, government agencies, non-profits, faith-based groups and drug courts. Attending re-entry related seminars and events is a good way to make contacts. My last tip is to emphatically urge you to GET OUT THERE! Offer to do demonstrations of the NADA protocol for government agencies, non-profit governing

boards, jails, prisons and courts. Volunteer at agencies where there is a high incidence of people who have experienced trauma, such as homeless shelters, halfway houses, domestic violence shelters, refugee resettlement agencies, Veteran’s Stand Down events, and, of course, jails and prisons.

A great job by Sara Bursac and the NADA crew delivering this outstanding event. There are not many groups of people more underserved and stigmatized than the people held in our jails and prisons. The non-verbal healing power of NADA can provide this population some well-deserved and long overdue relief.

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“Recovery is social justice, a human right.” Michael O. Smith

"FLY HIGH, REST in PEACE, JOE"

Carlos Mojica, "Thank you, thank you, thank you for all your teaching."



Buddies: Joe and Carlos

Jose [Joe] Manuel Alvarez passed away recently after a long illness. Joe was well-loved and admired, particularly by his first cousin, NADA's own Carlos Alvarez. Carlos – and so many others – called Joe "one of the good guys." When he was growing up in the South Bronx, he had a tough life and he was a tough kid. Carlos said they were cousins – but mainly they were buddies. But Joe took a wrong turn on his path and was involved in a shoot-out where he was badly wounded. Everyone thought he was dead and that rumor lasted for many years.

One day, in the mid-'80s, when Carlos was working at Lincoln Recovery, he was told that Dr. Smith was interviewing a new counselor by the name of Joe Alvarez. Carlos said, "I used to know a guy by that name."

A few minutes later, Joe passed by his door – Carlos said, "I thought you were dead," and Joe said, "I thought you were dead." And the buddies were back.

Joe was hired at Lincoln Recovery where he worked as an

acudetox specialist and a certified addiction counselor, helping to set up the Narcotics Anonymous program. And he was instrumental in developing Lincoln's 12-step program. At the NADA conference in Las Vegas, he was asked to demonstrate his approach to this program.

When he moved back to Puerto Rico, he worked as a certified addiction counselor at the Americana Hospital. He was unable to practice the NADA protocol there because only MDs are allowed this privilege, so he co-trained with a Dr. Roebles and did the 12-step program.



12-step program explained by Joe at the Las Vegas Conference, 2002

Carlos arranged for Ken Carter to meet Joe in P.R. when Ken's family was interested in forming a presence there. Ken remarked how knowledgeable and understanding Joe was of the history of NADA on the island and the possibilities

for NADA to grow there. He also told us how beautiful and helpful Joe and his wife, Naraida, were in welcoming them and receiving them at their home.

Dr. Mike Smith also went to visit Joe several times in P.R., working with him to get the ADS laws changed there. That change hasn't happened yet, but now

there are even more people working

to get this to happen.

Joe is survived by his amazing wife, Naraida, his mother, Esmeralda, his children and grandchildren, and his many friends – and by his Buddy, Carlos.



Joe with the Lincoln Team at Las Vegas Conference, 2002

Trying to Be Trauma-Informed About Everything

by Lisa Rohleder

Since I re-read, in the [summer Guidepoints](#) issue, the letter I wrote about Mike Smith after his death in 2017, I've been reflecting on my memories of him, at the same time that I've been taking in the impact of the excellent NADA Full Circle history series.

According to Tyler Phan, the best metaphor for the medicine of acupuncture (as opposed to the profession of acupuncture in the United States) is the kids' toy [Slime](#). One of the most significant characteristics of acupuncture as a medicine is how it sticks to things and how things stick to it, how it adheres and is adhered to. Its nature is to be shapeless, sticky, malleable -- and fun to play with. Acupuncture, minus the influence of professionalization, is a blob.

One of the things that the medicine of acupuncture has stuck to, in a variety of ways, is the treatment of trauma. Research into [Adverse Childhood Experiences](#) (ACEs) shows that the more ACEs you have, the greater the risk for chronic disease, mental illness, violence and being a victim of violence. Research into substance abuse disorders shows links between drug and alcohol use with both Adverse Childhood Experiences and PTSD. The NADA Protocol addresses addictions, behavior health, disasters and emotional trauma.

I became an acupuncturist because of my own trauma history, basically. My need to address it and to make meaning out of it has kept me involved with acupuncture for my whole adult life. Receiving and practicing acupuncture did for me what it's done for many other survivors of trauma: it helped me cope, allowed me to move forward with my life, and over time, brought me genuine healing and integration.

My trauma history is inseparable from my family's trauma history and also inseparable from the wider trauma of being working-class/working-poor in this society. One of my uncles died in the military (Vietnam), one of my uncles shot himself, one of my cousins (the one closest to me in age) drank herself to death, a number of my relatives have been in jail (and more would've been if they'd gotten caught). There's too much neglect, sexual abuse, and mental

illness to even bother to make a list. Collectively, our ACE scores are high. Those of us who have decent lives, as adults, are lucky and we know it.

There are a lot of families like mine.

One thing I know about trauma is that recovering from it requires facing as much of the truth as you can. You might not be able to stand much truth at first and so you have to build up your tolerance over time. Facing the truth, like other forms of healing, is often a slow, incremental process. But I've learned that I can count on the truth to show up as a relief and also as a friend -- eventually.

I notice differences between me and people who haven't had to learn how to live with the truth that their families not only suffered bad things but did bad things -- a lot of bad things. I developed the community acupuncture model

because, for my own sanity, I needed to treat people like my family, people who are dealing with chronic diseases, mental illness, violence and being victims of violence, not to mention the ordinary stresses of surviving capitalism. I'm

The skill that's most important is your attitude, your sense of responsibility and your own concern for others.

Michael O. Smith

grateful that the blob-like medicine of acupuncture stuck to the needs of people like my family and gave me a way to be useful to my working-class community -- and also, a lot less dissociated than I used to be.

I wasn't all that surprised to learn that the acupuncture profession has a painful history (I'm hugely grateful for Tyler Phan's research for illuminating how we got where we are). And I'm not all that surprised that NADA is grappling with a painful history, as well. Given where I come from, how could I be surprised?

I'm thankful to the people who take risks to bring these histories to light. Acupuncture is a beautiful intervention, especially for marginalized people, and it's been taken away from them over and over and over, in all kinds of ways. We all have to figure out how to live with and integrate our collective painful history. (I don't recommend denial as a long-term strategy.)

Discovering the concept of [trauma informed care](#) gave me

a framework for how to live with my history -- and other people's. Trauma informed care is all about safety, so now I try to see everything through that lens: reflecting on the safety that people needed that they didn't get, the ways they try to regain a sense of safety (even and especially when it's counterproductive), and the ways we can all make more safety for each other. Humans learn how to create safety in part by making mistakes -- that's how we learn about everything. We have to recognize that 20/20 hindsight is a superpower not given to people in the moment that they are dealing with hard things and making choices which later turn out to be mistakes. We can still move forward with what we know now.

I owe the work of NADA, and Mike Smith's work, a great debt of gratitude. I wouldn't have my community acupuncture clinic, or our community acupuncture school, without them. I hold Mike's memory in love and appreciation. But I don't need him to be infallible, or a saint, or incapable of making wrong choices. I wonder, now, how much safety he experienced throughout his long career (I'd estimate, a lot less than he needed, and I'm not thinking only about the impact of Richard Taft's murder).

Trauma informed care is mostly about systems rather than individuals, which means it pertains to organizations. It's HARD to have an acupuncture organization in the US.

Not only because of the ambient hostility and dysfunction of the acupuncture profession, but because of the squishy, indeterminate nature of the medicine itself. Where do you put the boundaries, when what's inspiring your organization is so blob-like? I think at best it's a matter of continual trial and error, and acupuncture organizations will always represent, to some degree, an artificial set of limits for the blob, which in turn will always be oozing out around the edges. Maybe, despite everyone's best efforts, after decades of organization-building it becomes apparent that some boundaries ended up in the wrong places, there were some bad judgement calls, and now reparations and repairs are needed.

When Mike came to present at my acupuncture school back in 1992, I remember being struck by his elliptical style of speaking. He talked about the quiet empty space that's the center of an acupuncture treatment and he ended his talk by quoting Ernest Hemingway "nada y pues nada y nada y pues nada", "nothing and then nothing and then nothing".

In hindsight, I think he was talking about the blob, how you can't really wrap your mind around acupuncture, and

how that's a good thing. You can't nail it down into a fixed, unchanging state, it's too open and too empty for that.

I like to think that Mike would have wanted NADA to be open, to allow ambiguity, and to let the truth be difficult when it's difficult. I like to think he would have encouraged us to learn how to live with uncertainty and also with a painful history, with all our mistakes (including his). Isn't that what the patients we serve are trying to do in their own lives, in their own healing processes?

Making meaning out of a painful past isn't a one-time event. I think you have to do it and then re-do it every day, because that's how you keep going. You keep going even when it feels like both the past and the future are ruins looming over you. What I've learned is that you can live a good life in the wreckage, you can do good work even in the shadow of huge damage, you can always keep trying to do useful things for people who are in pain.

(Note: I wrote this reflection at the invitation of Sara Bursac, as a result of conversations with her, Jo Ann Lenney, and Tyler Phan about the history of NADA.)

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Mette Miiinblad, NADA Denmark, writes: "Some years ago, I invited a friend, Jane Lyththans, to take the NADA training because she had a friend with very poor sleep. In gratitude, Jane made these tapestries for us because of her fascination by the five elements. I use them in my teaching."



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KEEPING WILLO WALKER'S LEGACY SACRED – BY KEEPING IT SIMPLE

by Charlotte Astier

Dear Willo,

I used to write to you once a year to give you an update about the NADA advances in Quebec. Last time, it was to tell you that I received my certificate as a NADA trainer, but it was already too late. You were gone.

Sara asked me if I would put down a few words about you in Guidepoints. So, this is an opportunity to write you one last letter and to share with the NADA community what a powerful healer and generous mentor you were.

When I met you, you were the acupuncturist of Denman Island, this land conquered by hippies, outsiders, artists and rebels. This land of freedom suited you well. You were practicing in a silver trailer surrounded by your luxuriant property. That's where I shadowed you for about a year, exchanging your teaching for herbal preparations work.

Before Denman, you used to have NADA clinics in Victoria for 20 years, paid only by the voluntary contributions of the people you treated. Some of your patients paid your treatments well, some paid less, and some paid none. You were giving acupuncture treatments, including the NADA protocol, to anyone who needed it and who would get involved in their healing process, regardless of the means they had.

I really wanted to thank you from deep in my heart, for what you taught me. Like for many others, you changed my life, giving it a new direction, with clearer awareness, more strength and serenity, and a deeper sense of self to better help others. What you brought to this world will last forever.



You now have your place in the pantheon of the most inspiring acupuncturists – which means to me those who are dedicated to the people and their communities.

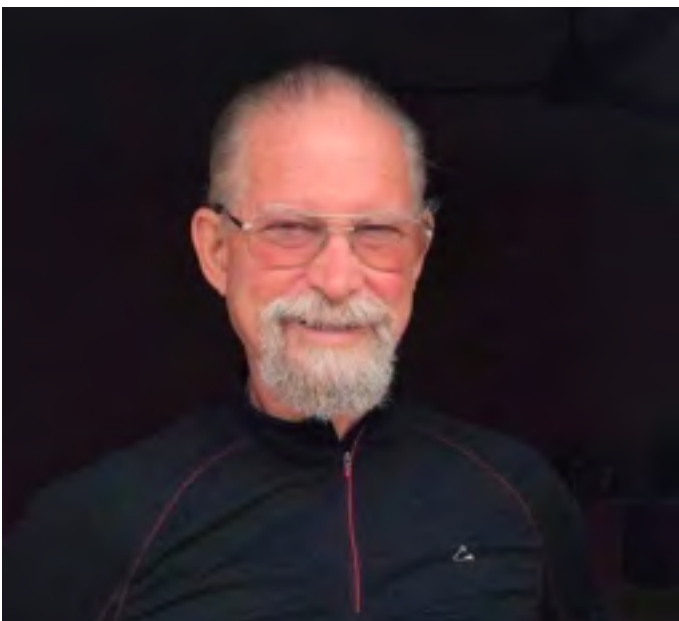
This is part of your legacy:

Be sincerely present in whatever you do;
Be authentically yourself in your life as in your clinic;
Keep on training every day but Keep It Simple;
And may your main motivation always be to relieve and empower people— and don't forget to enjoy, smile and laugh.

We'll keep this legacy sacred and will honor the true essence of acupuncture.

Beyond time, Charlotte

Contact: charlotte@astier.ac



“Acupuncture is a living thing. It moves lightly and quickly. It crosses lines of gender, race and culture. It connects to someone's inner spirit – and it's a tremendous privilege.” *Michael O. Smith*

A 20-YEAR JOURNEY KNOWING NADA

by Lisa McQuay

Let me introduce myself: my name is Lisa McQuay, and I was trained as an acudetox specialist (ADS) in 2001 after accepting a position in a Mental Illness/ Substance Abuse (MISA) program on the South Side of Chicago, Illinois. In 2006, Dr. Michael Smith, NADA's founder, came to visit the program, and, upon his departure, he suggested that I become a registered trainer. It was a privilege going to Lincoln Recovery Center to train and shadow Dr. Smith. He was such a kind, soft-spoken person who offered suggestions, knowledge and feedback.

There was never a dull moment working in the MISA department. It served individuals who presented with both mental illness and substance abuse problems, along with trauma, anxiety, paranoia, cravings, anger, and ineffective coping skills, to name a few. A typical shift consisted of making a large pot of Sleepmix tea every morning; providing the NADA protocol in individual and group settings; and training staff to become



ADSEs. The rules were no talking during the sessions and recipients had to stay for the entire 45-minute session. The treatment helped to reduce stress and anxiety, decrease anger, and calm fear, all of which provides a safe place for the patients, as well as for staff. Patients were so excited to attend the session that some would arrive 30 minutes to an hour early to claim a seat.

One of my most memorable experience was witnessing a patient having a severe panic attack. She was shaking and trembling uncontrollably; her eyes were closed; and she was hyperventilating. The norm for a situation of this sort was to call 911 for a transport to the hospital. However, I intervened – instructing the patient to breath slowly and asking her permission to administer an acudetox treatment. She agreed and the intervention was successful. After

the session, the patient was accompanied to the primary counselor's office for a follow-up. This patient went from frequent inpatient psychiatric hospitalizations to no admissions to the psychiatric unit.

The NADA protocol plays a major role in restoring hope, strength, sobriety and trust. Acudetox treatments allow MISA patients to be in a safe, calm environment away from the noise of everyday life. Some examples of the benefits of the protocol that I have witnessed are:

1. It's a nonverbal therapy.
2. Individuals have less psychiatric hospitalizations.
3. Heavy cigarette smokers report smoking cessation.
4. Persons with severe anxiety who were unable to sit in one place for 10 minutes gradually progress to having the ability to remain seated for an hour without difficulty.
5. Rapport and trust are formed without any words exchanged.

It was a humbling experience providing acudetox treatments in the MISA department from May 2001 to May 2006. After leaving the MISA program, avenues to spread the word about NADA opened up for me, and I was able to give college lectures relating to the protocol and the benefits of alternative medicine. A commitment to the substance use disorder field is a deep calling that includes sharing vital information about NADA and the hope of recovery. Spreading the word about the benefits of acudetox is an ongoing commitment. I have been associated with NADA for over 20 years and a registered trainer for 10 of those years. I have trained healthcare workers, clinicians, doctors, chiropractors, mental health workers, nurses and acupuncture students – some of those people have gone on to become registered trainers themselves. The NADA experience has been life changing and has enhanced the quality of many people's lives.

For myself, I am moving forward, and eager to begin providing services in my new home in the state of Arizona. How fortuitous that the new law just passed in Arizona just when I moved here. It's as exciting being affiliated with NADA today as it was 20 years ago. During this 20-year span, the world has changed, people have changed, and drugs of choice have changed – seasons change but the NADA protocol remains the same.

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AN ARMY ADSeR & RT TAKES US ON THEIR ACUDETTOX JOURNEY, “ONE POST AT A TIME”

by Anonymous

- 2002 Trained on Tohono O’odham reservation and loved acudetox from the start.
- 2002 Relocated to California where ADSeRs were not allowed to provide the treatment. My program provided something like it but not the NADA protocol. I took advantage of treatments whenever possible.
- 2004 Relocated to Fort Sill, Oklahoma, and began my career as a military civilian. I was actually laughed at by the officer in charge when I presented acudetox as an adjunct treatment modality.
- 2009 Relocated to Fort Hood, Texas. I was approached by a person who wanted to charge \$1,000 per provider to train them in auricular acupuncture – but not the NADA protocol. NOPE. In 2010, stood up an intensive outpatient clinic and had my team trained in acudetox. My trainer told me that I should become a trainer and I followed up on the suggestion. We had t-shirts made with the slogan “Acudetox, treatment outside the box.”
- One of my staff moved to Fort Sill and implemented acudetox there. New person in charge. Right person, right place, right time.
- Fort Hood continues to use acudetox in their Addiction Medicine Intensive Outpatient Program
- While working at Fort Hood, Fort Sill invited me to come and provide a training. A number of providers trained, and my former employee assisted in her first leg on the journey to becoming a trainer. A military psychiatrist trained at one of the Fort Sill groups. He took acudetox to Hawaii and used it there. Another military social worker went to Hawaii, and the last I heard he was working on launching acudetox at his clinic.
- The Fort Sill social worker who initially learned acudetox while at Fort Hood continued to use acudetox, and, by the time she retired in 2021, she had provided thousands of treatments to active duty soldiers. The brigade gave her a special award for her service to their soldiers when she left. What a gift to the Army. She frequently received flak for doing so much acudetox because she generated so many visits. Hmmm.
- 2012 Transferred to Fort Lewis, Washington, to an administrative position. The substance abuse program invited me to train their team in two groups. Multiple groups per week were launched in their clinic, and it was very well received (of course). The oversight of the substance abuse program changed to behavioral health and, unfortunately, the whole group of substance abuse providers were decertified for acudetox. This is where I developed my motto: “right person, right place, right time.” I finally got

someone to admit that they just didn’t want psychologists and social workers sticking needles in people’s ears. Hmm. While that person is no longer in charge, Fort Lewis continues to refuse acudetox. Over the years, my former trainees have tried to re-institute acudetox there with no luck.

- One of the military providers who trained at Fort Lewis substance abuse transferred to Fort Bragg where she deployed to an overseas area. She provided acudetox to soldiers who were regularly engaged in combat. WOW.
- When that provider returned, she provided acudetox to soldiers and commanders. What a gift to the Army! Her acudetox story continues.
- While at Fort Lewis, I was invited to return to Fort Sill to provide another training for the behavioral health department.
- 2016 Transferred to the Augusta, Georgia VA where I introduced acudetox to the Viet Nam and Gulf War vets who refused to talk about their experiences. The room overflowed twice a week. I also provided acudetox to the domiciliary program once a week. The psychiatrists who referred their patients for acudetox noted satisfaction with the veterans’ positive change in health status.
- While at the Augusta VA, I trained a new psychologist in acudetox just before I left. The VA would not credential her to use it, because my state also allowed an ADS “license” from the medical board and her state did not. Hmmm.
- 2018 I returned to Fort Sill where I added acudetox to their intensive outpatient program. I conducted two trainings while there. The social worker who trained for my program at Fort Hood assisted, and the active duty social worker from Fort Bragg flew in to assist. Both of these wonderful women are now trainers. The daughter of the civilian social worker became an ADS during that training period.
- One of our former trainees continues to run acudetox groups in the mental health clinic at Fort Sill. So it is still going strong.
- 2019 Transferred to Fort Wainwright in Alaska to stand up an intensive outpatient program. I initiated acudetox there and it became very popular.
- While in Alaska, I conducted two trainings. Three of the trainees were from the Air Force. We were never able to get them credentialed to use acudetox at their clinic. Within the Army, acudetox took off and groups were provided in two different clinics. One ADS transferred to Fort Polk, Louisiana, and is currently working on getting it up and running there. Another trainee transferred

to Japan and plans to initiate groups there with the Air Force.

- The retired Fort Sill social worker is now in Kansas where she'll introduce acudetox to her community. She told me: "I'm hoping to attract some veterans." Her daughter is also in Kansas and plans to begin using acudetox again when she can.
- 2021 Back to the active duty social worker from Fort Sill I previously mentioned. I hired her to come and work in my clinic in Alaska. They love her!! She was so happy to be able to use acudetox again because her last post in New York would not allow it. In the meantime, she's providing oversight to the newly trained provider so they can complete their practicum and become fully credentialed.
- While preparing for the move back to Fort Lewis, I was asked to quickly train two supervisors and a military member. One supervisor is now in charge of my former program. The Alaska intensive outpatient program has two ADSes. Woo hoo!

"If I can't dance to it, I don't want to march to it." Emma Goldman



Artist, Isla, was bothered by both physical and emotional issues. She was offered the two magnetic beads – one on each shenmen ear point – and she said that they make her feel “kind of happy.” She learned how to use the beads and is now self-administering – and “feeling happy.” She added, “They [beads] are just like a calming reminder that things are okay.”

- 2021 Back to Fort Lewis where acudetox is still a “no-go.” I submitted it on my credentials request and was told to remove it as “we don’t do this here.” I’m not giving up yet and am waiting for “the right person, the right place and the right time.” My mantra: “Acudetox, one post at a time” continues.
- At 67, I think my travels from post to post are coming to an end. I intend to continue visualizing acudetox at Fort Lewis because I’m not retiring yet! I keep saying five more years. I used to imagine traveling around and conducting acudetox trainings at different posts. That idea has floated off into the sunset but, if called on, I will always serve.
- I have to say, that throughout my travels, acudetox has kept me from “losing it” more than once. The universe has assisted me while on my ride on the roller coaster of life. Whatever roller coaster you are on, Mike Dooley always says, “Thoughts become things, choose the good ones.”

“NADA Er Chokolade for Sjælen”



Mie Egholm Lyngbak, left, with Mette Wiinblad

Mette, NADA Denmark, wrote to us recently to share some “sweet” news about a NADA training that she is doing. One of her students, Mie Egholm Lyngbak, told her that she had been very ill because of stress, and when she received a NADA treatment, it was like “chocolate for my soul.” Now she is recovering, and she is taking the NADA training so she can help others in their recovery – maybe by introducing them to chocolate for their souls.

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There are times when verbal interaction is like trampling on the flowers.

Non-verbal treatment is important because no trust is needed at first. The patients don't trust themselves, why should they trust you.

Some of our clients know that the treatment is working and drop out because they don't want it to work. They are afraid of success – they are used to failing, so they fear they will fall even further down. They have a ton of guilt – with acupuncture, they learn that nature forgives them, their own body forgives them.

Acupuncture is a living thing. It is like a message or a lesson – once the body learns the lesson, you don't need the treatment. It is a whispered suggestion and whispered suggestions should not be regulated. When you do speak to a client, speak so that the person can take it in. Say similar things, not unique things. Don't tell people new ideas, make them safe and then let the ideas pop up. Make what's already there rich – help to value and honor it.

More later.

MIKE



Jeanette Robinson, the Sisters Program; Nancy Smalls, Maternal Substance Abuse Services; Jo Ann Lenney, the Bead Lady; and Sara Bursac, NADA Croatia