National Acupuncture Detoxification Association  
PO Box 1655  
Columbia, MO 65205-1655

Guidepoints

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Missouri Welcomes NADA with Open Arms
by Sara Barra, LCSW

NADA relocated its administrative office to Columbia, MO in January 2010 and this move has helped revitalize the practice of acu detox which has been dormant in this ADS-friendly state for five years. In 2005, due to funding cuts, the Kansas City Center for Behavioral Medicine which serves severe mentally ill and dually diagnosed clients, was the last known program to provide acu detox services in Missouri.

With the office now in Columbia, and the annual conference planned for Kansas City in May, the goal is to educate and outreach to as many local mental health professionals as possible who are eligible to become trained as Acu Detox Specialists under the exemption in the Acupuncture Statutes initially passed in 1998.

The current NADA office location is ideal for this type of outreach. Columbia is a college town, home of the University of Missouri (Mizzou), close to Jefferson City, the state capital, and within two hours driving distance from both Kansas City and St. Louis. It has a diverse and progressive network of social services that include residential and outpatient addictions services, emergency and transitional housing for children, youth, and young adults, a mental health court, homeless shelter, and a Veterans Administration hospital, to name a few.

When the office first opened, NADA was warmly welcomed by the Missouri Acupuncture Association with an article in their member newsletter. They have also recently published another article introducing our annual conference. Their support is instrumental as the law requires ADSes be supervised by licensed acupuncturists.

In January the office manager started providing weekly treatments at Sol House, a local transitional living program for homeless young adults, and is now also giving weekly treatments at the Salvation Army Harbor House. After 4 treatments, one Harbor House client reported feeling “more calm, less alcohol cravings, and it makes me feel

Missouri continues on p. 10

The Legacy of St. Vincent’s Hospital for Trauma Recovery
by Siobhan Joan Dolan, RN and Shelly Menolascino, MD, AcT

St. Vincent’s Hospital in New York’s Greenwich Village closed its doors on April 30th, 2010, after struggling to stay afloat in the face of staggering debt. Many hospital workers took to the streets in protest, recalling teamwork, enduring friendships and the bonds developed between the workers and the people in the community.

For more than 160 years the hospital was a cornerstone of lower Manhattan life serving the health needs of the lower west side community, where one quarter of the city’s population resides. Having worked in the hospital’s outpatient behavioral health department for many years, we can both attest to the outpatient level of care for people with mental health challenges. Particularly, we reflect with deep satisfaction on the implementation of the NADA protocol at St. Vincent’s Hospital.

Acu detox began in our outpatient addiction program in February 2001, growing to include the mentally ill chemically addicted clients in the continuing day treatment program. Jonathan Thaket, licensed acupuncturist and a long time NADA trainer, supervised the acu detox services for many years.

St. Vincent’s is known for its incredible response to the victims of the World Trade Center tragedy of 2001. Our

Missouri continues on p. 10

The New Face of www.acudetox.com
from the NADA Office

At the beginning of October NADA released a brand new redesigned and revamped website to the world. The new site has expanded information on trainings and membership, an interactive blog, a picture and brief bio of each board member, a new NADA international section, and you can now change your contact information (so that you don’t miss Guidepoints when you move!), when you log in as a member.

Under development are two advocacy sections: one for the public and one for members. These will provide

Website continues on p. 5

Barriers to Military Veterans Receiving NADA Treatments
by Jennifer Nery, LAc and Emma Lee, LAc

The following article is a summary of a pilot feasibility study conducted through the Oregon College of Oriental Medicine (OCOM) Research Department, led by Dr. Richard Hammerschlag, Emeritus Dean of Research and senior editor of the Journal of Alternative and Complementary Medicine.

Since 2006, momentum has grown in the organization Acupuncturists Without Borders (AWB) to provide accessible and affordable acupuncture for recently returning military veterans with myriad physical, emotional and psychic wounds. Primarily based on the NADA protocol, AWB has encouraged the opening of several clinics nationwide stands at 27.

Originally opened to serve returning vets, widespread anecdotal evidence showed that these clinics had

Veterans continues on p. 3

National Acupuncture Detoxification Association
7 Best Practices for Veterans Acu Care
Established by the Oregon College of Oriental Medicine Research Team (see article on p. 1)

Mateo Bernal LAc, Alicia Danciu LAc, Miranda Friar LAc, Emily Head LAc, Emma Lee LAc, Jennifer Nery LAc, Andreas Sodaro LAc, Kristin Swann LAc, Corinne Wolcott LAc, & Richard Hammerschlag PhD

1. Network with established veterans’ services and institutions. Veterans are generally proud of their past military service and feel a kinship with one another. They share an understanding and a trust within their group that they don’t share with the general public. In setting up a clinic for veterans, it is both respectful and pragmatic to work within established veteran community hubs. Several veterans suggested that the ideal clinic would be located within an existing institution that veterans already know and trust, like the Veteran’s Administration, Veterans of Foreign Wars, or community centers that serve veterans.

2. Educate yourself about the military structure and culture. It was emphasized to us that there are important facts about military culture that anyone working with veterans would be expected to know: facts about military training, types of military service, the process of discharge, etc., as well as generational differences that exist within the veteran community. Younger veterans, for instance, may not be comfortable going to a clinic primarily attended by Vietnam veterans, as they feel that the culture of the military is very different today from what it was in the 1960’s and 1970’s. Knowing these facts will help meet the needs of various veteran clients, and will also help to establish a sense of trust with them. Trust was the top issue emphasized by our practitioners in interviews and by veterans in informal conversations.

3. Educate veterans: give talks and demonstration treatments to veterans and providers who already work with them. One of the major stumbling blocks to veterans seeking acupuncture treatment, as we found through our questionnaires, is lack of knowledge about acupuncture. On an anecdotal note, the veterans we spoke to about the study and acupuncture treatment were generally very enthusiastic to learn about it. As with much of the general population, lack of familiarity keeps veterans out of our clinics. Educating them—and those whom they already trust—about the potential of acupuncture to treat veteran-specific concerns (PTSD, pain, stress, and sleep problems), a method which may be more appealing to them than talk therapy and pharmaceuticals, will likely go a long way toward filling veterans’ clinics.

4. Keep the same day, time, location, and volunteers for at least one year, preferably weekday mornings. Be patient. Most of the clinics are filled primarily by word-of-mouth from vet to vet, and this usually takes several months to a year to develop. Many practitioners reported that they hold veterans clinics in the evenings as an additional clinic, on top of their “money-making” hours. Consider holding your veterans’ clinic in the morning, when more veterans are interested in coming, and moving your more lucrative clinic hours to later in the day.

5. Stick to the NADA five point protocol, group, and free or low-cost treatments with little paperwork. The practitioners felt the NADA style groups were effective, low-stress for both the practitioner and the patient, and enabled the greatest number veterans to be served.

6. Consider training Acupuncture Detox Specialists (ADSes) from within your veteran-patient cohort. You may be able to become an ADS trainer through NADA. In many states, non-acupuncturists can be trained in the five point protocol through a NADA training course with a NADA Registered Trainer. Why not consider training some of your enthusiastic veteran patients to treat their fellow veterans? This will address the trust issues that veterans tend to feel with non-military practitioners. This will also offer veterans the opportunity to help themselves and one another, an opportunity for agency and restoration of pride that many veterans feel they have lost.

7. Seek out funding. None of the practitioners we spoke with sought funding from institutions like government agencies or existing community or veterans’ services. Most practitioners are taking a financial loss or at best breaking even in treating veterans. Consider seeking funding from outside sources so that your veterans’ clinic need not be a drain on your finances, time, or emotional resources.
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 1655, Columbia, MO 65205-1655. Phone: (888) 765-NADA Email: NADAOFFICE@acupuncture.com. President: Ken Carter, Editor: Sara Bursac, Guest Editor: Marcia Saltzer, Staff Writer: Ryan Berns, ISSN-1070-8200.

Our results will lay a foundation for future research and further investigation. The 7 recommendations of ‘best practices’ for starting a veterans’ clinic are drawn from the gestalt of our experience with the project’s questionnaire and in person conversations with veterans, practitioner interviews, background readings, and research team discussions.

The complete study has been submitted to NADA as a prospective NADA literature bookstores item. Please contact the NADA office (NADA-office@acupuncture.com) for more information.

NADA’s Mission

VETERANS continued from p.1

Chen TM, A Tradition of Soup: Flavors from China’s Pearl River traditions in particular. It is a necessity for all acupuncture practitioners who use herbal and nutritional elements in their clinical work with patients and should be on the shelf of the library of every Oriental Medicine college. As a gift to any adventurous foodies on your list, this is the right choice.

CHEN continued from p. 9

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For further information about NADA in Alaska, contact Carolyn Pek at carepeck@yahoo.com.

Addiction happens to people at all levels.

CHIEF EXECUTIVE OUTREACH

At times of crisis, leaders want to speak with the person at the top. Our CEO Outreach Program invites you to call our Chief Medical Officers, Dr. Anthony Debeiky on his cell phone.

Save a life today.

Call me on my personal cell phone - 810-877-0911. Anthony Debeiky, MD, FACS Chief Medical Officer - Brighton Hospital

MISSOURI continued from p. 12

One of their counselors has received several treatments and is eager to get trained and make the . In October NADA attended as an exhibitor at both the fall conference of the Missouri Addictions Counselors Association (MACA) and the annual Missouri Mental Health Counselors Association (MMHCA) conference. A total of 21 counselors and addiction professionals received a treatment, and many more learned about the benefits of acupuncture for the first time. A day after her treatment, one MMHCA attendee wrote, “I felt wonderful following the treatment and my sense of well-being is still good today! I’m hoping to take the training in May.”

All Missouri health professionals and acupuncturists get 20% off the conference registration! See you in KC!

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One Click. brightonhospital.org
One Text. "BEST" to 910-11

Oregon College of Oriental Medicine has more than 27 years of experience teaching, researching and guiding health and wellness. Visit our Portland, Oregon campus today.
NADA and Alaska both make a deep impression: NADA for the connection it establishes with our own inner powers of well being, Alaska for its stunningly beautiful terrain and extreme conditions that challenge every sensibility. I lived in Alaska for 30 years, working two years in Anchorage as a social security disability attorney. The focus on proving disabilities was so problematic that I quit, vowing to find a solution.

I found a better way after I received an acupuncture treatment at the Working Class Acupuncture (WCA) Clinic in Portland, Oregon after a yoga related injury. Before the treatment, I couldn't ride my bike or drive the car; afterwards my hand and wrist were fully functional. In appreciation of acupuncture's benefits I began working as a receptionist at WCA. Last fall I met Dr. Michael Smith, co-founder of NADA, at a Community Acupuncture Network workshop. Following his encouragement, I attended the most recent NADA conference in New Orleans and in May I was trained as an acu detox specialist by British Columbia trainer, F. Willo Walker.

I returned to Alaska this past August hoping to spread the gift and potential of NADA, as well as learn about existing NADA work. My friends provided support and networking that helped me meet a number of local practitioners that incorporate the NADA protocol in their work.

Among them I met licensed acupuncturist Trish Cushman who works at the Alaska Native Hospital in Anchorage and applies acu detox in a group setting for Post Traumatic Stress Disorder at the nearby Veteran's Administration hospital. Stephanie Maggard, an acupuncturist and NADA member, uses the five point protocol within the context of her community acupuncture clinic in Fairbanks. She is currently collaborating with a grant writer at the University of Alaska at Fairbanks for a project to deliver acupuncture to targeted rural villages on a regular basis.

To help describe what it means to provide health care to targeted rural villages on a regular basis.

ST. VINCENT’S continued from p. 1

In the current economy, health care is more important than ever. What is it like to provide this service? NADA and the Integrative Stress Management (ISM) Program, which is part of the community, have worked together to create a protocol that is effective in treating PTSD.

The ISM Program was founded by Dr. Michael Smith, co-founder of NADA, at a Community Acupuncture Network workshop. Following his encouragement, I attended the most recent NADA conference in New Orleans and in May I was trained as an acu detox specialist by British Columbia trainer, F. Willo Walker.

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To help describe what it means to provide health care to targeted rural villages on a regular basis.
Perhaps every cookbook serves up some side portion of ethnographic lore along with its main culinary course, but Teresa Chen has featured both equally in her elaborately illustrated new volume on Cantonese soup traditions. She covers both nutritional and medicinal preparations, and how these have adapted among Americans of Chinese origin.

NADA members know Teresa best in her role as a longtime registered trainer and former NADA board member. Residents in her home region of San Joaquin County, California and the City of Stockton know her as an activist and civic leader responsible for improving addictions and mental health treatment and a variety of other human services. She and her physician husband Yi-po Anthony Wu run a health treatment and a variety of other human services.

One social need attracting Teresa’s attention over the years has been a group of elderly women immigrants from China. These women, while still living in China, had been married young to much older men who lived and worked in the U.S. Due to constraints of U.S. immigration policy and economics, husbands could not bring their wives here from China until quite late in both their lives. Even after arriving here, many of these women soon found themselves to be widowed, and were poorly prepared to face tasks not only in the kitchen and the markets but also in teaching herself photographic skills from scratch. She found she had to handle the camera herself to adequately portray not only the finished dishes but also many of the raw ingredients. Her visual success declares itself throughout the 377-page paperbound volume, multi- feasts for the foodie eye!

Because everyone now living probably has some body burden from toxins in our surroundings, Teresa’s recipe for “Seaweeds, Rehmannia and Pork Sparerib Soup” seemed like a good one to try out for ourselves. She recommends the recipe for “people exposed to X-rays or radiotherapy” and “our polluted environment”. While the book includes recipes for soups that are specifically therapeutic in nature, aimed at particular TCM diagnoses, other dishes such as this one have more familiar culinary/ nutritional characteristics as well as health-restoring and health-supporting qualities.

According to Teresa, Traditional Chinese Medicine describes rehmannia as both sweet and bitter in taste and cold in temperature. It has the property of clearing heat and nourishing yin deficiency. (Rehmannia bears a common designation of “Chinese foxglove” but it is apparently not related to the digitalis plant familiar to Westerners.) Seaweeds, she writes, “are known for their medicinal properties and are useful in recuperating heat and nourishing yin deficiency. (Rehmannia bears a common designation of “Chinese foxglove” but it is apparently not related to the digitalis plant familiar to Westerners.) Seaweeds, she writes, “are known for their medicinal properties and are useful in recuperating heat and nourishing yin deficiency.

For our recipe test, obtaining the two types of seaweed (one fresh and one dried) and the dried root took just a couple of phone calls and stops at Asian markets (since our metropolitan area has a significant Chinese cultural presence).

As to special techniques needed for these traditional Pearl River Delta soups, Teresa emphasizes that the practice of feisui must be used to prepare poultry or other meats.

Nowadays, they find companionship and appreciation of their traditional skills at Stockton’s Jane Wain senior citizens center. Here, as in many semi-isolated ethnic minorities, treasures of knowledge of potential value to the wider community can be found by those, such as Teresa and her colleagues, who seek them.

Teresa set herself the task of documenting and testing recipes and methods from this trove of lore. Despite the help of a team of interviewers who helped to glean information from the soup contributors and to test recipes, the overall job cost Teresa years of effort. She faced tasks not only in the kitchen and the markets but also in teaching herself photographic skills from scratch. She found she had to handle the camera herself to adequately portray not only the finished dishes but also many of the raw ingredients. Her visual success declares itself throughout the 377-page paperbound volume, multi-feasts for the foodie eye!

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The National Acupuncture Detoxification Association is pleased to announce its 22nd annual Acu Detox Specialist training May 15-May 21 (includes 2-day conference).

Join us as we continue to expand the service and mission of NADA.

### Conference Week Schedule

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<tr>
<th>Date</th>
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<tr>
<td>5/15-21</td>
<td>Acu Detox Specialist training at a local agency</td>
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<td>Th 5/19</td>
<td>Directors and Administrators Workshop with Dr. Michael Smith</td>
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<td>Registered</td>
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<td>Th 5/19</td>
<td>Trainer’s Day</td>
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<td>Th 5/19</td>
<td>Welcome Reception &amp; Registration</td>
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<tr>
<td>5/20-21</td>
<td>Annual Conference</td>
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<tr>
<td>7am-8am</td>
<td>Qi Gong and/or Yoga Registration</td>
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<tr>
<td>8am-6pm</td>
<td>Opening Plenary and Breakout Sessions</td>
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<tr>
<td>8-9pm</td>
<td>All Member Meeting with the NADA Board</td>
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<tr>
<td>Sat</td>
<td>7am-8am Qi Gong and/or Yoga Registration</td>
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<td>8:30am - 12:30pm Breakout Sessions</td>
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<td>12:30-2pm Networking Luncheon</td>
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<td>2-6pm Closing Plenary and Conferring of Training Certificates</td>
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<td>Sun 5/22</td>
<td>NADA Board Meeting</td>
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<td>8am-12pm</td>
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### Conference Travel and Accommodations

**Hotel:** Kansas City Marriott Country Club Plaza, 4445 Main St, Kansas City

**Room Discount:** $115/night (up to 4 people). Self-parking and room internet complimentary. Please indicate on your registration form if you would like to share a room.

**Call to make a reservation:** (816) 531-3000

**Cut-off date for room discount:** Sunday, 4/24/2011

**Closest Airport:** Kansas City International Airport (MCI)

We will organize group shuttle rides to and from the airport. Please indicate on your registration form if you would like to participate in a shuttle service.

### Presenting at the Conference

At this conference we invite you to consider sharing your work with the NADA community as it relates to the practice, implementation, research and outcomes of acu detox. Submit an abstract through our website and you may be selected to participate on a panel or show your work in a poster presentation (www.acudetox.com/nada-protocol/nada-conferences).

### Conference Topics

This year our planned panel presentations clearly demonstrate the ever-expanding applicability and versatility of the NADA ear acupuncture protocol. We are proud to announce several invited presenters: investigative journalist Robert Whitaker – author of Mad in America: A Higher Learning; Health and Wellness on College Campuses, 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, Idaho, Illinois, Indiana, Louisiana, Maryland, Michigan, Missouri, Pennsylvania, 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.

### Pre-conference Training

**Recognized Acupuncturists:** Join in the exciting integration of Chinese medicine within a traditional Western addiction and behavioral health setting. Become an advocate for the 5-point NADA protocol in addiction treatment as well as dual diagnosis and mental illness, and disaster response including PTSD. Enjoy the rich experience of client- and other providers for ear acupuncture to learn how others may not otherwise seek out such a simple yet powerful healing treatment.

### Training Schedule

Trainees participate in a 5-day intensive training that begins on Sunday 5/15 and ends on Thursday 5/19, followed by the 2-day conference. The training interweaves the theory and application of acu detox along with a clinical practical at one or more Kansas City-based treatment centers. Trainees gain hands-on experience by providing acu detox treatments to each other as well as clients served by local programs. There may be some assigned reading to complete PRIOR to the training. If so, you will be provided the material one month in advance of the training. Trainees receive a training certificate of completion at the end of the 2nd day of the conference, and you are required to participate in both days of the conference to earn the training certificate.

### Travel and Accommodations

Accommodations will be available at the Kansas City Marriott Country Club Plaza for the discounted rate of $115/night (up to 4 people per room). This includes complimentary internet and parking. Trainees are responsible for covering the cost of transportation, lodging and food throughout the training period, although there may be organized carpooling to and from the training site each day. After you register, the NADA training team will contact you to provide more detailed information about the daily schedule and transportation.

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Guides on News from NADA - November 2010

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Directors and Administrators Workshop with Dr. Michael Smith

5/19
Registered
9am-5pm
Trainee’s Day

5/19
Welcome Reception & Registration
6-8pm

5/20-21
Annual Conference
7-8am
Qi Gong and/or Yoga Registration
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Conference Topics

This year’s planned panel presentations clearly demonstrate the ever-expanding applicability and versatility of the NADA ear acupuncture protocol. We are proud to present cutting-edge research from Health and Wellness on College Campuses NADA International: Pioneers on the International Frontier NADA Best Practices: Military Veterans Lead the Way The Evolution of Group Acupuncture

Conference Travel and Accommodations

Kansas City is “one of Midwest’s best kept secrets” - Country Living

Kansas City has made mental health services a priority. The Jackson County Mental Health Fund, a city-wide tax levy, disbursed $11.4M to 52 agencies and programs in 2009.

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Panel topics include:


Discussion will focus on your unique questions and be tailored for your needs. Questions include:

- How does acu detox help clients better engage and participate in treatment activities?
- How often should our program provide treatments?
- What are the costs of running an acu detox program? Can it save us money?
- How has acu detox been integrated in prisons and other criminal justice settings like drug courts? What are the outcomes?

Earn 15 CEUs for the 2-day conference, 5 for the Directors and Administrators Workshop, and 30 for the Acu Detox Specialist training.

NADA Communities of Recovery and Psychological First Aid

Directors and Administrators Workshop

5 CE credits
Facilitated by Dr. Michael Smith - co-founder of NADA and director of the Lincoln Recovery Center

Thursday 5/19/2011
9am-3pm

Workshop Purpose: to give administrators practical information on how to integrate acu detox into an addiction or behavioral health treatment program and maximize its benefits with a variety of client populations.

Pre-conference Training

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 qualify) and earn an Acupuncture Detoxification Specialist certificate of completion in a 7-day period. 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 Kansas City-based treatment centers. 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, correction 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, Idaho, Illinois, Indiana, Louisiana, Maryland, Michigan, Missouri, 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 5-point NADA protocol in addiction treatment as well as dual diagnosis and mental illness, and disaster response including PTSD. Enjoy the rich experience of integrating ear acupuncture to benefit those who may not otherwise seek out such a simple yet powerful healing treatment.

Training Schedule

Trainees participate in a 5-day intensive training that begins on Sunday 5/15 and ends on Thursday 5/19, followed by the 2-day conference. The training interweaves the theory and application of acu detox along with a clinical practicum at one or more Kansas City-based treatment centers. Trainees gain hands-on experience by providing acu detox treatments to each other as well as clients served by local programs. There may be some assigned reading to complete PRIOR to the training. If so, you will be provided the material one month in advance of the training. Trainees receive a training certificate of completion at the end of the 2nd day of the conference, and you are required to participate in both days of the conference to earn the training certificate.

Travel and Accommodations

Accommodations will be available at the Kansas City Marriott Country Club Plaza for the discounted rate of $105/night (up to 4 people per room). This includes complimentary internet and parking. Trainees are responsible for covering the cost of transportation, lodging and food throughout the training period, although there may be organized carpools to and from the training site each day. After you register, the NADA training team will contact you to provide more detailed information about the daily schedule and transportation.

Earn 15 CEUs for the 2-day conference, 5 for the Directors and Administrators Workshop, and 30 for the Acu Detox Specialist training.

Guideposts News from NADA

November 2010

Guideposts News from NADA

November 2010
Teresa Chen

Nowadays, they find companionship and appreciation of their traditional skills at Stockton’s Jene Wah senior citizens center. Here, as in many semi-isolated ethnic minorities, treasures of knowledge of potential value to the wider community can be found by those, such as Teresa and her colleagues, who seek them. One result is this attractive and practical cookbook which has salvaged much from a tradition that might otherwise have stayed hidden.

Teresa set herself the task of documenting and testing recipes and methods from this trove of lore. Despite the help of a team of interviewers who helped to glean information from the soup contributors and to test recipes, the overall job cost Teresa years of effort. She faced tasks not only in the kitchen and the markets but also in teaching herself photographic skills from scratch. She found she had to handle the camera herself to adequately portray not only the finished dishes but also many of the raw ingredients. Her visual success declares itself throughout the 377-page paperback volume, multiple feats for the foodie eye!

Because everyone now living probably has some body burden from toxins in our surroundings, Teresa’s recipe for “Seaweeds, Rehmannia and Pork Sparerib Soup” seemed like a good one to try out for ourselves. She recommends the recipe for “people exposed to X-rays or radiotherapy” and “our polluted environment”. While the book includes recipes for soups that are specifically therapeutic in nature, aimed at particular TCM diagnoses, other dishes such as this one have more familiar culinary/ nutritional characteristics as well as health-restoring and health-supporting qualities.

According to Teresa, Traditional Chinese Medicine describes rehmannia as both sweet and bitter in taste and cold in temperature. It has the property of clearing heat and nourishing yin deficiency. (Rehmannia bears a common designation of “Chinese foxglove” but it is apparently not related to the digitalis plant familiar to Westerners.) Seaweeds, she writes, “are known for their therapeutic in nature, aimed at particular TCM diagnoses, other dishes such as this one have more familiar culinary/ nutritional characteristics as well as health-restoring and health-supporting qualities.

The unique feature of ear acupuncture as a post disaster tool at St. Vincent’s was its integration in a hospital based trauma treatment program. Considered a cornerstone treatment in a trauma recovery model with easy access to counseling, the NADA protocol had an extraordinary six year run after 9/11.

Now the hospital has shut down due to bankruptcy as well as to world health politics. Many of the reasons for the hospital’s closing are complex and unclear. Tragically, there is no emergency room to respond to the lower west side community’s critical needs. A coalition of activists has formed to demand answers about the closing process. The first rally of 100 Days Without A Hospital took place on October 17th at the hospital’s site with hundreds of impassioned neighbors speaking truth to power in solidarity. In supporting the coalition, we look forward to continued closure issues being addressed, including the demand for restoring hospital emergency room services.

Despite the turmoil of this segment of “our” hospital’s history, we have welcomed the invitation to reflect on St. Vincent’s history and the NADA protocol’s tremendous contribution to NYC in her time of need.

Guidepoints News from NADA
November 2010

Herbal Sleepmix Detox Tea

Prepared in collaboration with Michael O. Smith, MD, DAC and manufactured in strict accord with his formulas

We produce teabags in small quantities to assure freshness

Pre-PACKAGED
five teabags per polybag with label $15.00 per case of 200 packages

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Guidepoints News from NADA
November 2010

Book Review: NADA TRAINER and ACTIVIST PRESERVES TRADITIONAL CHINESE SOUP LORE
by Jay and Mary Renauld

Perhaps every cookbook serves up some side portion of ethnographic lore along with its main culinary course, but Teresa Chen has featured both equally in her elaborately illustrated new volume on Cantonese soup traditions. She covers both nutritional and medicinal preparations, and how these have adapted among Americans of Chinese origin.

NADA members know Teresa best in her role as a longtime registered trainer and former NADA board member. Residents in her home region of San Joaquin County, California and the City of Stockton know her as an activist and civic leader responsible for improving addictions and mental health treatment and a variety of other human services. She and her physician husband Yi-po Anthony Wu run a well known acupuncture center. Here, as in many semi-isolated ethnic minorities, treasures of knowledge of potential value to the wider community can be found by those, such as Teresa and her colleagues, who seek them. One result is this attractive and practical cookbook which has salvaged much from a tradition that might otherwise have stayed hidden.

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St. Vincent’s continued from p. 1
Pilot Program - Ear Acupuncture Stress Reduction Clinic
- began on September 12th to provide stress relief for anyone in NYC. Within 3 weeks, over 1,300 ear acupuncture treatments were given.

Often the treatment helped people express their feelings and prepare them for counseling that was available in the adjoining gym. For many others, ear acupuncture’s effect was complete in and of itself. Rescue and recovery workers, survivors, family members, and residents of the lower Manhattan community shared that the acupuncture felt safe and helpful. For many it was their first exposure to acupuncture. Individuals described the effect of the 5 needles as calming, providing a sense of great relief of sadness and fear, and clearly helping to restore sleep. Perhaps our favorite quote is: “it felt as if someone hit the reset buttons”. This speaks to the capacity to enhance resilience.

Meeting the ongoing demand for the NADA treatment post 9/11 would have been impossible without the support of the Lincoln Recovery Center cadre – Dr. Michael Smith, Carlos Alvarez, Jo Ann Lenney, the late Jesse Morgan, Priscilla Santiago, and many others, including volunteers completing their NADA training. Other experienced practitioners generously offered energy work, massage and other holistic modalities.

Due to the extraordinary number of visits, our pilot ear acupuncture clinic was seen as one of the largest outreach programs during the first few months after 9/11 (the acute trauma period). It was a proud moment for us when the American Red Cross added ear acupuncture to their list of 9/11 Mental Health and Substance Abuse Program reimbursable services based on the success at St. Vincent’s. We see that as providing a model for future disaster response teams.

The hospital kept the services going for more than 6 years, though funding remained tied to trauma recovery funds. When the World Trade Center Healing Services (WTCHS) Program was established in 2002 for ongoing counseling, the acupuncture clinic, renamed the Integrative Stress Management (ISM) Program, transferred in as an additional and vital component. More ear acupuncture clinics were pressed into service, starting with weekly clinics for staff at the 4 high schools that bordered Ground Zero. As the ear acupuncture program evolved, the help of NADA practitioners, particularly Wendy Henry and Jo Ann Lenney, helped to sustain this growth.

Training was an essential aspect for strengthening the ISM work, massage and other holistic modalities.

Other important techniques explained include reconstitution of dried ingredients, which Teresa urges be accomplished by natural soaking and boiling rather than the more rapid chemical means (such as soaking in lye or potash) that are now often seen in Chinese culinary practice in both USA and Pearl River Delta.

Ingredients in hand, we found preparation of the soup in our Western-style kitchen to be straightforward, feiseui and all, according to Teresa’s clear directions. These yielded a dark, palatable broth with an interesting variety of textures and mild flavors.

Teresa emailed us that she shares a tenet held among her colleagues in the Chinese culinary field of “Let your food be your medicine, and your medicine, your food.” She explained that she has “gone that one extra step of promoting soup as the most effective way of administering food-medicine, making certain tonic nutrients more ‘bio-available’ through boiling and slow-cooking. I also try to go beyond traditional Chinese herb formulas and what is known as Food Therapy in TCM to make my food-medicine more delicious and more beautiful. I truly believe that good medicine does not have to taste bad, nor look gross.”

Besides 277 pages of recipes, Teresa devotes 50 pages to ingredients, including thumbnail descriptions of ingredients alongside more of her excellent photos. The pictures will be most helpful to neophyte soup makers searching the overstuffed shelves of typical Asian markets. She includes a description of the Chinese system of measuring quantities of herbs, a system not readily convertible to pounds and ounces without a table such as her book provides. A PhD linguist by academic training, she has also given space to an appendix giving pronunciation guides for Mandarin and Cantonese. Consulting Teresa’s book will yield new insights for NADA members who are interested in learning more.
VETERANS continued from p. 1 difficulties bringing in veterans for treatments. Reports indicated that these clinics have, with tenacity, been able to recruit the older generations of veterans, who present with chronic unresolved physical and emotional wounds. Many clinics, however, have found it nigh-on impossible to recruit patients from among recently-retumed military personnel.

During the 2008-2009 school year, a group of nine students at the Oregon College of Oriental Medicine (OCOM) explored the question: What was preventing US military veterans from accepting these acupuncturists’ offered help? Our small pilot study used both qualitative and quantitative techniques to discover how best to reach and treat veterans as a specific population with acupuncture. We gathered information and opinions from both the veteran community and from practitioners either involved in treating veterans in a group acupuncture setting, or those with experience using the NADA five-needle protocol to treat trauma, addiction, and stress.

We found that interest in acupuncture amongst the veteran population was indeed strong, but that more education about the benefits and potentials of acupuncture was needed. We confirmed that, in general, it is more difficult to reach recently-retumed veterans from Afghanistan and Iraq than veterans of the Vietnam Conflict or World War II.

In synthesizing the two parts of the project, we gathered pertinent information on the needs of the veteran population, and looked at how these needs match with what the acupuncture community can offer. We feel that our results will lay a foundation for future research and inspire further discussion of treatment options for this population in both the biomedical and alternative medical communities. We distilled our conclusions into seven ‘best practices for caring for veterans’, found on p. 2.

While our study was certainly too small to establish statistical trends, our conclusions warrant clinical trials and further investigation. The 7 recommendations of ‘best practices’ for starting a veterans’ clinic are drawn from the gestalt of our experience with the project: questionnaire and in-person conversations with veterans, practitioner interviews, background readings, and research team discussions.

The complete study has been submitted to NADA as a prospective NADA literature booklets issue. Please contact the NADA office (NADAoffice@acudetox.com) for more information.
7 Best Practices for Veterans Acu Care

Established by the Oregon College of Oriental Medicine Research Team (see article on p. 1)

Mateo Bernal LAc, Alicia Danciu LAc, Miranda Frant LAc, Emily Head LAc, Emma Lee LAc, Jennifer Nery LAc, Andusa Soder LAc, Kristin Swann LAc, Cottins Wolkov LAc, & Richard Hammerschlag PhD

1. Network with established veterans' services and institutions. Veterans are generally proud of their past military service and feel a kinship with one another. They share an understanding and a trust within their group that they don't share with the general public. In setting up a clinic for veterans, it is both respectful and pragmatic to work within established veteran community hubs. Several veterans suggested that the ideal clinic would be located within an existing institution that veterans already know and trust, like the Veteran's Administration, Veterans of Foreign Wars, or community centers that serve veterans.

2. Educate yourself about the military structure and culture. It was emphasized to us that there are important facts about military culture that anyone working with veterans would be expected to know: facts about military training, types of military service, the process of discharge, etc., as well as generational differences that exist within the veteran community. Younger veterans, for instance, may not be comfortable going to a clinic primarily attended by Vietnam veterans, as they feel that the culture of the military is very different today from what it was in the 1960's and 1970's. Knowing these facts will help meet the needs of various veteran clients, and will also help to establish a sense of trust with them. Trust was the top issue emphasized by our practitioners in interviews and by veterans in informal conversations.

3. Educate veterans: give talks and demonstration treatments to veterans and providers who already work with them. One of the major stumbling blocks to veterans seeking acupuncture treatment, as we found through our questionnaires, is lack of knowledge about acupuncture. On an anecdotal note, the veterans we spoke to about the study and acupuncture treatment were generally very enthusiastic to learn about it. As with much of the general population, lack of familiarity keeps veterans out of our clinics. Educating them—and those whom they already trust—about the potential of acupuncture to treat veteran-specific concerns (PTSD, pain, stress, and sleep problems), a method which may be more appealing to them than talk therapy and pharmaceuticals, will likely go a long way toward filling veterans' clinics.

4. Keep the same day, time, location, and volunteers for at least one year, preferably weekday mornings. Be patient. Most of the clinics are filled primarily by word-of-mouth from vet to vet, and this usually takes several months to a year to develop. Many practitioners reported that they hold veterans clinics in the evenings as an additional clinic, on top of their “money-making” hours. Consider holding your veterans' clinic in the morning, when more veterans are interested in coming, and moving your more lucrative clinic hours to later in the day.

5. Stick to the NADA five point protocol, group, and free or low-cost treatments with little paperwork. The practitioners felt the NADA style groups were effective, low-stress for both the practitioner and the patient, and enabled the greatest number veterans to be served.

6. Consider training Acupuncture Detox Specialists (ADSes) from within your veteran-patient cohort. You may be able to become an ADS trainer through NADA. In many states, non-acupuncturists can be trained in the five point protocol through a NADA training course with a NADA Registered Trainer. Why not consider training some of your enthusiastic veteran patients to treat their fellow veterans? This will address the trust issues that veterans tend to feel with non-military practitioners. This will also offer veterans the opportunity to help themselves and one another, an opportunity for agency and restoration of pride that many veterans feel they have lost.

7. Seek out funding. None of the practitioners we spoke with sought funding from institutions like government agencies or existing community or veterans' services. Most practitioners are taking a financial loss or at best breaking even in treating veterans. Consider seeking funding from outside sources so that your veterans’ clinic need not be a drain on your finances, time, or emotional resources.
Missouri Welcomes NADA with Open Arms
by Sara Barac, LCSW

NADA relocated its administrative office to Columbia, MO in January 2010 and this move has helped revitalize the practice of acu detox which has been dormant in this ADS-friendly state for five years. In 2005, due to funding cuts, the Kansas City Center for Behavioral Medicine which serves severe mentally ill and dually diagnosed clients, was the last known program to provide acu detox services in Missouri.

With the office now in Columbia, and the annual conference planned for Kansas City in May, the goal is to educate and outreach to as many local mental health professionals as possible who are eligible to become certified NADA practitioners.

Missouri continues on p. 10

The Legacy of St. Vincent’s Hospital for Trauma Recovery
by Shubin Joan Dulan, RN and Shelly Menolascino, MD, AAcT

St. Vincent’s Hospital in New York’s Greenwich Village closed its doors on April 30th, 2010, after struggling to stay afloat in the face of staggering debt. Many hospital workers took to the streets in protest, recalling their bond to the hospital. Their support is instrumental as the law team reflects with deep satisfaction on the implementation of the NADA protocol at St. Vincent’s Hospital.

For more than 160 years the hospital was a cornerstone of lower Manhattan life serving the health needs of the lower west side community, where one quarter of the city’s population resides. Having worked in the hospital’s outpatient behavioral health department for many years, we can both attest to the outpatient level of care for people with mental health challenges. Particularly, we reflect with deep satisfaction on the implementation of the NADA protocol at St. Vincent’s Hospital.

The New Face of www.acudetox.com
from the NADA Office

At the beginning of October NADA released a brand new redesigned and revamped website to the world. The new site has expanded information on trainings and membership, an interactive blog, a picture and brief bio of each board member, a new NADA international section, and you can now change your contact information (so that you don’t miss Guidepoints when you move!), when you log in as a member.

Under development are two advocacy sections: one for the public and one for members. These will provide the public with access to the public and one for members. These will provide

Barriers to Military Veterans Receiving NADA Treatments
by Jennifer Nery, LAc and Emma Lee, LAc

The following article is a summary of a pilot feasibility study conducted through the Oregon College of Oriental Medicine (OCOM) Research Department, led by Dr. Richard Hammerschlag, Emeritus Dean of Research and senior editor of the Journal of Alternative and Complementary Medicine.

Since 2006, momentum has grown in the organization Acupuncturists Without Borders (AWB) to provide accessible and affordable acupuncture for recently returning military veterans with myriad physical, emotional and psychic wounds. Primarily based on the NADA protocol, AWB has encouraged the opening of several such clinics throughout the U.S. Currently, the number of these clinics nationwide stands at 27.

Originally opened to serve returning vets, widespread anecdotal evidence showed that these clinics had...