SEE PAGES 6 AND 7 FOR INFORMATION ABOUT THE 22ND ANNUAL CONFERENCE IN KANSAS CITY, MISSOURI

Gaza Residents Empowered to Treat Trauma by Greg Schnabel

The NADA Gaza Strip project was designed to help civilian residents cope psychologically with the traumas of war and everyday life. For this project, teams of local health care professionals are trained in the NADA protocol for a period of 2 weeks. After receiving training, members of these teams provide ongoing care within their communities. This model empowers members of a community to help themselves and their neighbours and provides continuity of care in a region that is often difficult or impossible for international medical aid to access.

The Gaza Strip is one of the most densely populated areas on the planet. An estimated 1.5 million people currently live within a narrow strip of land approximately 25 miles long and 5 miles wide. Gaza’s residents have been subjected to repeated wars, blockades, seizures of land, home demolitions, and shortages of food, medicine and basic supplies. Movement of people or goods in or out is highly

Gaza continues on p. 4

Beyond Lincoln, Making NADA Training Barrier Free

As news circulates of the closing of Lincoln Recovery Center’s NADA training program in the Bronx, NY, the question emerges: how can we construct affordable training centers that competently empower all communities of recovery to access our care? In the US we may acquire wisdom from NADA’s impressive growth internationally. Minimal regulations enable a flexible training and clinical environment so that international trainers can innovate new methods and respond more easily to specific patient, community and political realities.

One such example is featured in the December 2010 issue of the German Journal of Acupuncture and Related Techniques. The article, written by Academic Dean of the Traditional Chinese Medical College of Hawaii Megan Yarberry, describes how 2 NADA trainers (herself and Beth Cole) empowered 21 qualified non-licensed/non-officially-degreed Kenyan refugee health workers with the capacity to deliver 18,000 three point NADA treatments over 6 months. In less than three years, an estimated 50,000 treatments have been provided by this cohort of NADA refugee workers. Several key components contributed to the sustainability of the project.

One key component was the trainee selection. Megan writes that the original idea was to train volunteers from outside agencies like the Red Cross. However, they learned that the refugee population would soon be uprooted and relocated. They realized that if they trained outside volunteers, then “the refugees for whom the treatments were intended would have no access to them.” Who received the treatments would be determined by who was trained. So they shifted their approach. Instead, Megan

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News from NADA

January 2011

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National Acupuncture Detoxification Association
Thought about getting more involved with NADA? Interested in learning how other NADA members are changing the world one ear at a time?

**NADA NEEDS A MEMBERSHIP LIAISON IN 2011**

This is a volunteer position. The membership liaison will assist the NADA office in surveying both new members and old, and identify those who are interested in renewing their membership. In this process you will get to know some of the most interesting, dedicated, and intelligent people who have been inspired to service with acu detox. The NADA office will provide initial training and ongoing support to help make the experience successful and fulfilling.

**Deadline to submit a statement of interest is March 1, 2011**

**REQUIREMENTS**
- Current NADA Membership
- Minimum 6-month commitment

**TO APPLY FOR THIS VOLUNTEER POSITION**
Submit a statement of interest via email that includes the following information:

- Name / Best way and times to be contacted / Current employment (if applicable) / Experience providing acu detox treatments / Interest in serving as a membership liaison / 2 References

After submitting your statement of interest, the NADA office will contact you by phone to further discuss the possibility of serving the organization in this vital role.

**CONTACT:**
Email: nadaoffice@acudetox.com
Phone: (888) 765-6232

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**POLL: SOUTH CAROLINA ACUPUNCTURISTS ARE PRO-NADA by Ryan Bemis**

This is a follow up story to the recent series on how an acupuncture law stopped NADA workers from being able to operate in South Carolina. Please refer to March, May and July issues of Guidepoints for the first three installments of “Light and Dark in the Deep South.”

“When we are obsessed with the larger view and see only the forests, help us to know that, somehow, we must not neglect the trees, for our daily path is by the trees, and the shrubs and what some call the grass-roots.” From a prayer read before the South Carolina Senate Wednesday, June 2, 2004, the day before the Herekersman anti-NADA law (H 3891) was ratified.

After a five year pause for NADA clinics in South Carolina, Charleston acupuncturist Chad Houfek wants to get Acu Detox Specialists (ADSes) needling again. Last year, Chad opened the first community acupuncture clinic in the state. This type of clinic is based on a small business model designed to provide affordable sliding scale full body acupuncture in a group setting. Now he wants to open up this space for ADSes, and he’s willing to offer direct supervision at no extra charge. Under the current law, direct on-site supervision by a licensed acupuncturist is required of all ADSes (See Guidepoints March, May and July 2010).

Chad says he has no problem with non-acupuncturist ADSes performing the NADA protocol without the direct on site presence of a licensed acupuncturist. And, among the acupuncture profession’s grassroots, he is not alone as a NADA supporter. A survey of half of South Carolina’s acupuncturists may show why historically, and to this date, acupuncture leaders call for an end to turf battles. Polling found that more than twice as many acupuncturists approve of ADSes needling solo than those who disapprove. With 50% of acupuncturists responding, 64% answered yes and 31% answered no to the question: “If acupuncturists could not work in (addictions/prisons/psychiatric) settings, should NADA-trained health workers be permitted to perform the five point ear protocol?”

Meanwhile, expectations from the South Carolina Acupuncture Board about what practitioners must do in order to perform the NADA protocol continue to be revealed. In the course of the survey collection, one licensed acupuncturist mentioned that a South Carolina Acupuncture Board member forbade her to perform the five point protocol unless she was licensed as an ADS. This was not the first confusing report received about the board. According to psychologist and NADA
worker Bill Wells, the board had asked him to take a full body acupuncture clean needle course prior to licensure (See Guidepoints, March 2010). Because the required content for a full body acupuncture clean needle course is not within the scope of practice for ADSes, the NADA office has not been able to recommend ADSes apply for licensure.

Just recently in September 2010, social worker Christine Bergaust reported that her NADA clean needle training was accepted by the board as appropriate clean needle training; she received her ADS license in the mail in November 2010. In issuing this license, the South Carolina Acupuncture Board joins medical authorities in 20 other states and several countries around the world who accept NADA clean needle training as appropriate for safe and effective ADS practice.

One primary obstacle now remains to NADA progress in the state: direct supervision. The board has insisted that South Carolina ADSes must have an acupuncturist present with them when they needle the ear. Because licensed acupuncturists almost exclusively work in private practice, the only feasible clinical setting for ADSes in South Carolina is within the clinic of a licensed acupuncturist for no other illness other than chemical dependency. Such an arrangement will all but guarantee that ADSes can only operate in private practice settings, likely using acu detox as a standalone therapy for addictions, and potentially putting ADSes in direct competition with licensed acupuncturists.

(Editorial note: Acu detox is only recommended as an adjunct addictions treatment within a comprehensive program. Refer to Margolin, A. et al., 2002, the 1997 National Institutes of Health Consensus Statement and the NADA training manual for background information).

Christine affirms she will require all of her clients receiving acu detox to be engaged with other recovery services outside of her NADA clinic. In the future she hopes to make acu detox accessible to veterans returning from Afghanistan and Iraq. In order to restore NADA’s role among communities of recovery in South Carolina, a new law must be passed. State Senator Robert Hayes has expressed interest in passing such a law to remove direct supervision requirements in 2011.

For more information on how to assist NADA advocacy efforts in South Carolina contact Bill Wells at shooterdoc@gmail.com.
controlled by a blockade on its borders. The Gaza war in January 2009 killed between 1,100 and 1,400 people, destroyed 15 hospitals, thousands of homes and left approximately 50,000 people homeless.

A pre-war 2008 study of adult residents from Gaza revealed that 66% suffered from post-traumatic stress disorder as defined by the criteria of the DSM-IV. The list of trauma inducing stressors on the civilian population of Gaza is extensive while at the same time there is a shortage of traditional psychological support services. There is a great need within this environment for the implementation of the NADA protocol and its simple approach to trauma and stress relief.

In April of 2010 a group of 13 local health care professionals were trained in the NADA protocol. The group included: 3 nurses, 4 pharmacists, 2 physiotherapists, 2 nursing students, 1 English student and 1 medical doctor. The training was structured as a teaching clinic, so that even during the training, many people were helped.

The 3-point version of NADA (Shen Men, Sympathetic and Lung) was taught to all the students initially because it is simpler to implement, conserves needles and is possibly just as effective for trauma treatment. The application of magnetic ear beads was taught especially for the large number of children being brought to the clinic with symptoms of PTSD.

This group of local health professionals has been working independently and voluntarily since April 2010, giving NADA treatments to civilian men, women and children who suffer from PTSD and other stress related illnesses at a variety of clinical locations in the Gaza Strip. This project is ongoing and in the future more groups will be trained to provide relief to even more people in the region. Below is a selection of first-hand reports shared by two members of the NADA Gaza Strip group.

**Observations from Mahmoud Shamali, Pharmacist**

“We began our first step in a small clinic, 1 day per week, after we first learned how to do NADA in April. The number of patients was too low at first and we began to be disappointed, but day after day the number of patients increased. It went from 5 clients in the 1st clinic to 30 clients in the 12th clinic. Most of the cases we have been treating in the clinic suffer from post-traumatic stress symptoms (PTSD) because of the last war in Gaza. People come to our clinic with symptoms such as nocturnal enuresis, awakening in the middle of night and screaming suddenly, poor appetite, anxiety, insomnia, headache, Tramadol addiction as a way to escape temporarily from Gaza atmosphere, poor sleep habits and they are generally susceptible to stress due to the bad situations and troubles they face in the war.

We have been treating both genders and all the ages from 3 years old up to 80 years old. The results were unpredictable. They fall in love with NADA because they feel the benefit of this powerful treatment. Session after session they bring their relatives and friends to try it. So, the number of clients has increased gradually.

There are many cases we treated that I would like to speak about. Here is one successful case:

A man, 33 years old, suffers from pain in his shoulders. Easily susceptible to stress especially in front of people when all eyes are on him. He becomes very stressed to the point that his neck begins to shake suddenly without control.

In the first session I treated him using 3 points (Shen Men, Lung, Sympathetic). He felt light headedness, sleepiness and calmness. When he returned for a 2nd session he told me that throughout that day after the 1st session he became very calm and his abnormal movement in his neck decreased clearly. In the second session I treated him using 3 points with beads. He felt calmness and sleepiness without headache. After 2 days he returned.

Having missed one day without treatment he said: “after the first session the abnormal shaking decreased, and after the second session it disappeared completely, but the day I missed the needles shaking returned. So I treated him using 5 points with beads. He became very sleepy and the occipital pain he felt disappeared rapidly. In his 4th session he asked me to treat him with 5 points and to renew the
pellets because his abnormal shaking in his neck had disappeared completely. He had given a presentation to a large number of people without shaking his neck. And he is going to continue the treatment in NADA Gaza clinic.”

Observations from Amal Hamad, Pharmacist

“I couldn’t imagine from the first moment I learned NADA that it has such a variety of effects on people since it involves simply the application of 3-5 points in each ear. It has an excellent and variant effect and in many cases clients have felt quiet, sleepy or increased concentration capabilities while others have felt decreased appetite for eating, drinking, smoking, etc.

The following are some case-studies:

A 46-year old woman who is a housewife and grandmother and suffered from insomnia received NADA sessions from me for 4 days. After the first day she could sleep a bit better. Every day she felt better and better. The fourth day she told me that she slept soundly and was quiet.

Another case is a man who suffered from great pain in the neck and back. He had undergone many operations but it was all in vain. He used to travel for surgeries and he suffered from weariness and couldn’t sleep for one week. Sometimes he could sleep for one or two hours in a week only. When I treated him with only one NADA session of 5 points in each ear, he told me that he had slept for three continuous days and felt quiet.

I used magnetic ear beads to treat many children in primary school who suffered from hyper activity, failure to concentrate in school or nocturnal enuresis. Those children told me that they could sleep soundly and had more concentration in study and many had improvements in their bed-wetting symptoms. They all shared this with their teacher in the class activities. They felt better, and they haven’t yet finished their treatment with NADA.”

The potential for the application of the NADA protocol within Gaza is vast. The NADA Gaza group hopes to collaborate with other clinics inside Gaza that offer more traditional psychological support services. If they succeed in doing so there will be a need for more trainings and more needles in clinics throughout Gaza.

In a country that has seen war and conflict for so many decades, the incidence of trauma can span generations. It is the sincere hope of all members of the NADA Gaza group that the relief NADA brings to individuals may have a ripple effect, helping to ease the burden of care placed upon families and society. We hope that by easing these burdens we contribute, in some small way, to peace.

Note: If anyone is interested in contributing to the NADA Gaza group through donations of needles or other materials please contact Greg Schnabel at neu resilience@gmx.com.
NADA Communities of Recovery and Psychological First Aid

The National Acupuncture Detoxification Association is pleased to announce its 22nd annual conference will be held May 20 - May 21, 2011 in Kansas City, Missouri, with a pre-conference 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

5/15-21 Acu Detox Specialist training at a local agency
Sun-Sat

Th 5/19 Directors and Administrators Workshop with Dr. Michael Smith
9am-3pm

Th 5/19 Registered Trainer’s Day
5/19 6-8pm Welcome Reception & Registration

5/20-21 Annual Conference Fri
8am-5pm Opening Plenary and Breakout Sessions

Sat
7am-8am Qi Gong and/or Yoga
8:30am- Registration

9am-6pm Qi Gong and/or Yoga
12:30-2pm Networking Luncheon
2-4pm Closing Plenary and Conferring of Training Certificates

Sun 5/22 NADA Board Meeting 8am-12pm

Conference Travel and Accommodations

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

Room Discount: $105/night (up to 4 people). Self-parking and room internet complimentary. 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.

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 feature award-winning investigative journalist Robert Whitaker – author of Mad in America and Anatomy of an Epidemic.

Panel topics include:

Health Crisis Prevention and Intervention: Crises Causing Symptoms and Symptoms Causing Crises

NADA’s Radical Center: from the Grassroots to Professionalism

Opening the ADS Door: Advocacy, Collaboration, and the Acupuncture Profession

A Higher Learning: Health and Wellness on College Campuses

NADA Pioneers: The International Frontier

NADA Best Practices: Military Veterans Lead the Way

Making Treatment Accessible and Affordable: Emerging Public Health and Small Business Models

Earn 15 CEUs for the 2-day conference, 5 for the Directors and Administrators Workshop, and 30 for the Acu Detox Specialist training!
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, 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, New Mexico, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington, Native American reservations, Nova Scotia, Ontario, and Prince Edward Island. Check your state laws and regulations for more specific information.

Licensed Acupuncturists: Join in the exciting integration of Chinese medicine within a traditional Western addiction and behavioral health setting. Become an advocate for the 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 opening doors for 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 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.
SHOW ME RESULTS continued from p. 12

And even though he is not technically part of the NADA office, Ryan Bemis’ contribution to our operation must be recognized here. Ryan is the Guidepoints staff writer and has most recently been supporting NADA’s legislative advocacy efforts. He is an acupuncture student at OCOM (see their ad on p. 2) and works as a certified alcohol and drug counselor at Hooper Detox in Portland, OR. He is currently collaborating with other NADA members in the creation of a NADA policy guidebook. Stay tuned!

Before we get into the nitty gritty numbers, it is important to remember that NADA’s sole source of financial support comes from its members (and some from Guidepoints and conference advertisers, although this comprises quite a small fraction of the whole budget). That means that the NADA office exists because there are members who support its purpose and function.

Your membership dollars at work

The following is a list of activities in which the NADA office participates that are directly made possible by your annual membership: (1) process all membership activity, (2) respond to telephone, email, and website queries that range in requests for information, support, and referrals including how to start a new acu detox program, most current research on the protocol, and local NADA-trained health professionals for either personal or family referrals, (3) provide a communication link for the NADA board to the members and public, (4) maintain the NADA website and membership database, (5) design and publish the bimonthly newsletter, Guidepoints (which has almost 9 pages of content every 2 months!), (6) outreach to the local community about the benefit of incorporating acu detox as an adjunct therapeutic clinical service, (7) manage the library of NADA-approved literature and DVDs for sale, (8) manage registrations for the annual conference, and (9) support the recent legislative advocacy efforts now being spearheaded by staff writer, Ryan Bemis. Phew!

Membership activity highlights

The organization is currently at 1,858 members, up 400 from last year. This is primarily due to increased training activity. 458 people became new acu detox specialists (ADSes) in 2010, compared to 240 ADSes were trained. Trainers are the brick and mortar of this organization and NADA currently has 115 trainers in the U.S., on Native American reservations, and in Canada.

20 people applied to become a trainer (compared to 6 in 2009), and we welcomed 12 new trainers. Others are still participating in their mentorship process, a required step in becoming a trainer (for more information on how to become a trainer, please visit the Training page on our website). NADA graduated 46 new ADSes at the recent annual conference, and this directly translated into more local programs providing ear acupuncture.

Other 2010 highlights

As many of you already know, 2010 was NADA’s 25th anniversary. The annual conference was held in New Orleans, LA and it was a celebratory event indeed. You can view videos of a number of conference panels on our website. Included is an unforgettable group song written and performed by the Board to the tune of Beatles’ Hey Jude, to honor the former office manager, Jay Renaud (Hey Jay…).

Speaking of the website, we are thankful to have access to many more management features on the redesigned website, and will be adding new material and resources on a regular basis. The blog page and the NADA Facebook page (which boasts 754 fans) are ones that get updated most regularly. Feel free to submit relevant content to nadaoffice@acudetox.com if you want it published on the blog. Of note is a new Advocacy section which will have both a public page and a member-only page and will be available in the coming months.

IMPRISONED ACU WORKERS RECEIVE AMNESTY ON INTERNATIONAL HUMAN RIGHTS DAY

Amnesty for 43 Filipino community health workers was announced on International Human Rights Day in December by the newly elected Philippines president Benigno Aquino III. Evidence of human rights abuses was cited as the reason for their release, the Associated Press reports.

Known as the Morong 43, the group, which included acupuncturists, doctors and nurses, had been incarcerated for nearly 10 months since their arrest at a first responder training in Morong, Philippines February 2010. Originally accused of being leftist rebels, president Aquino dropped charges because the arrest was conducted in an illegal manner. Community health workers and acupuncturists...
in the Philippines have been targets of violence and unlawful arrest since the 1970’s, explained Filipino doctor and acupuncturist Gene Alzona Nisperos in an interview with Guidepoints.

Since the arrest, international human rights leaders, including United Nations representatives and former US Attorney General Ramsay Clark, had united behind a “Free the Morong 43” movement. Amnesty International organized a letter campaign calling on health professionals to request the US and Philippine governments to restore human rights. Several US NADA leaders and board members issued a letter of support in April (See Guidepoints May 2010).

Two of the health workers had given birth while in prison. Just prior to their release, the group initiated a hunger strike.

Erratum: In the November 2010 story, The Legacy of St. Vincent’s for Trauma Recovery, we incorrectly printed that the Wounded Warrior Project was in Fort Bragg, California, instead of Fort Bragg, North Carolina. Our apologies for this error.
writes, trainees were selected “from among the refugees in order that treatments would continue to be available to the displaced community.”

A second component was the abbreviated training format. The curriculum was adapted to train refugee workers in NADA as aid for psychological trauma. The didactic portion of the training compiled a situation-specific, 30 page handout, thoughtfully culled from our 200+ page NADA Training Resource Manual. Although all five points were taught in the didactic portion of the training, refugees learned to use three of the five NADA points in practice.

This training format, coined a “three needle strategy” by Megan, has been applied by NADA trainers in India, Ethiopia, Uganda, Haiti, and the Gaza Strip. December 2010 trainings in South Africa, Kenya and Guatemala also followed this strategy. It has been adopted within the United States as well.

NADA workers sometimes use a 3-needle strategy for clients who have needle sensitivity, immunodeficiencies, pregnancy or extreme fatigue. For example, NADA-trained acupuncturists in Portland use just three points for all first time clients within jail-based and harm reduction programs to screen for needle sensitive clients. In her article, Megan observed during the clinical portion of the training fewer adverse reactions in clients who received just three points.

The three needle strategy has been applied by NADA trainees in India, Ethiopia, Uganda, Haiti, and Palestine. December 2010 trainings in South Africa, Kenya and Guatemala also followed this strategy. It has been adopted within the United States as well.

“There is a clear advantage in using fewer needles.” In refugee camps, like many of our communities of recovery, needles are not cheap. Every needle counts. Megan points out that the three needle strategy treated 40% more patients than using all five needles. “But,” Megan asks, “is this method as efficacious for the patient?” Anecdotal reports on three-point treatments for refugees and armed soldiers alike included decreased stress, increased sense of well being, reduced alcohol use and violence. Impressed with the training outcomes, local Kenyan leaders are now looking at ways for the NADA protocol to become a revenue generating tool. As a result of the NADA training, the refugee community is not dependent on outsiders to do the work for them.

Flexible criteria for selecting trainees and focused training content both contribute to sustainability. Wherever NADA continues to grow, our methods must be adapted to the needs of the target population and the resources available within that community. A clear understanding of this will best guide the spirit NADA embodies and how NADA evolves.

**Five Elements of Success for NADA International Trainings**

by Megan Yarberry

1. Sponsorship by an international agency
2. Contacts among local service-providing organizations
3. Inclusion of community members in decision-making
4. Follow-up communication with all collaborators and participants
5. Complete flexibility around clearly defined goals

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Recently someone called the NADA office inquiring about the status of their membership, and then asked, what are the benefits of membership, anyway? After reviewing the tangible benefits: bimonthly newsletter, discount on conference registration and NADA-approved literature, it quickly became apparent that these did not hold much value to the caller. As we reflect on 2010 and what transpired in the first year of managing the NADA office in Missouri, we recognize that membership in this organization supports a far more complex set of benefits and services than the quick 3-bullet list shared with the caller. To answer that question more completely, we present to you the 2010 year-end NADA office report.

Exactly one year ago Jay and Mary Renaud of J&M Reports retired as NADA’s office managers of 10 years. The NADA office, then situated in Vancouver, Washington, closed up shop, and in quite a seamless transition (thanks to J&M’s thoughtful training and organization efforts), reopened in Columbia, Missouri under the new management of Seva Unlimited, LLC.

Seva in Sanskrit means selfless service. The purpose of the NADA office is to be of service to the NADA membership, the public, and the NADA Board, and we welcome suggestions to that end (see story in the November issue of Guidepoints that reviewed the NADA office’s outreach and education efforts in Missouri).

**Meet the NADA office**

**Office Manager:** Sara Bursac, LCSW
Sara was trained as an acu detox specialist by Claudia Voyles in Austin, TX in 2008 and provided treatments to street youth at a drop-in center. She has also just begun to teach Kundalini yoga here in Missouri.

**Membership Coordinator:** Carrie Hargrove
Carrie grew up in Columbia, MO and recently graduated from Columbia College. She splits her work time between the NADA office and a nonprofit she helped found, the Columbia Center for Urban Agriculture. She will be leaving her Membership Coordinator position this year.

**SHOW ME RESULTS** continues on p. 8