Rocky Mountain NADA will wait until 2012 by Sara Bursac

Following a dynamic 2011 legislative season, with Rocky Mountain acupuncturists working to rise above turf battling, and military veterans asking their legislators for increased access to NADA therapies, partisan posturing in the Colorado legislature stopped a pro-NADA bill and will force advocates to build a broader coalition of support.

In the third and final reading on the floor of the Colorado House of Representatives, every Republican voted against HB1119, which died in March. This unique type of NADA policy would have put NADA into the scope of practice of a number of mental health professionals including counselors, psychiatric technicians and social workers.

Psychiatrist Libby Stuyt, director at the Colorado state mental hospital, garnered support from a spectrum of stakeholders, including the Acupuncture Association of Colorado (AAC) and their lobbyist who came to the table ready to work with NADA advocates while still lobbying their own insurance parity bill. In spite of an uproar from members of the Colorado acupuncture community, the legislative chair for the AAC, Linda Gibbons, argued that the NADA law would have helped “build some bridges between the western medical community and the licensed acupuncture profession in Colorado.”

Our front page story in the March 2011 issue of Guidepoints introduced readers to HB1119. At the time of printing, the bill was waiting to go the House for a third and final reading, before heading to the Senate for final approval. According to Stuyt, also a NADA Board

Acupuncture and the NADA treatment protocol have been part of the drug court program of the 3rd District Court in Salt Lake County since 1997. As there is no Acu Detox Specialist law in Utah, this is the only currently operating NADA program in the state. Salt Lake County includes greater Salt Lake City and its surrounding municipalities, the area with the state’s greatest population density. The drug court operates under the direction of Salt Lake County Criminal Justice Services (CJS), an umbrella organization created in 2000 to consolidate and coordinate the administrative functions of pre-trial services, probation services, two mental health courts, three misdemeanor and three felony drug courts for Utah’s 3rd District.

The five pm acupuncture session at the CJS Client Services Center in Salt Lake City isn’t a complicated affair. The lobby is busy at the end of the day, and as a result, the atmosphere is anything but tranquil as clients and staff members move between classrooms, make phone calls, talk with instructors and meet their rides home.

Just a few feet away is Room 8, a large multipurpose classroom that hosts all kinds of gatherings in any given week, 

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from employment seminars to 12 Step meetings to cognitive restructuring and relapse prevention classes. Tonight, clients sign in and line up for acupuncture treatment while chairs are moved and supplies are laid out. A few new clients wander in looking lost, and true to the cooperative spirit of the program, the veteran group participants quickly get them oriented.

One by one, group members get their ear needles. Brent Ottley, the CJS acupuncture specialist, makes a second round, adding additional needles or beads for people who've requested help with specific issues. In addition to the perpetual detox trifecta: withdrawal symptoms, cravings, and drug dreams, anxiety is a common complaint, as are back pain, insomnia and headaches.

For the remainder of the two-hour session, Ottley's time is distributed between placing or removing ear needles and beads and doing additional acupuncture to assist with the many health issues drug court clients face during their recovery process.

Clients entering drug court arrive deeply impacted by the trauma of arrest, incarceration and the resulting disruption of families, jobs and health. Their presence in the program means they've been sanctioned by the court and have committed themselves to the strict discipline and hard work necessary to attain sobriety and stability.

Within this environment, acupuncture offers clients a space which, in the words of Dr. Michael Smith, “it is possible to provide kind soothing attention without the risk of enabling the addictive process” (Acupuncture for Treatment of Cocaine Addiction, Smith, J&M Reports 2001).

Ottley says of his work with drug court clients, “It’s pretty simple really. Acupuncture helps clients feel better, often dramatically so, and clients who feel better are much more likely to fully participate in the drug court program and complete their return to balanced, healthy lives.”

The drug court program is an outpatient treatment program, offered in lieu of incarceration to drug offenders deemed by the court as able to benefit from a rigorous and highly supervised regimen. Once accepted into the program, clients participate in a detailed assessment process, individual and group therapy, 12 Step or Rational Recovery meetings, cognitive restructuring and relapse prevention classes, frequent but random drug testing, and acupuncture 3 times per week. The average length of stay in the program is 18 months and as of the end of December, 2010, the program supervised 565 active felony drug court clients.

Clients are required to complete 10 needle treatments in the early stage of the program, after which their participation in acupuncture is optional. Many clients choose to continue beyond the required treatments and maintain their visits throughout their tenure in the program. A unique part of CJS services is that the acupuncture program is available to graduates; many former clients continue to receive treatments even years after completion.

Ottley shares about the history of the acupuncture program: “This program was designed by my late friend and mentor Gary Grubb, L.Ac. I subbed for him and learned from him for a number of years before he retired in 2007. When I took over, I got the privilege of stepping into a system that was functioning smoothly and successfully.

Gary’s approach was about simplicity and attention to fundamentals, and I share that philosophy. The NADA protocol is the heart of every treatment I do. The majority of clients are working people, many of whom don’t have health insurance and have limited access to medical care. While this is certainly not a full-featured acupuncture clinic, it’s surprising how much can be done with extremely simple treatment approaches.”

The political environment in Utah is among the most conservative in the nation, and as such, it may be surprising to some that acupuncture has been a long term component of the program at CJS. Its continued presence at drug court is largely due to the extraordinary degree of ongoing support from the departmental administration, top leadership on down to the counselors, case managers and probation officers, many of whom also regularly receive treat-
ment side by side with clients at the acupuncture sessions. “The leadership here has backed me all the way, no matter what. It’s a great privilege to do the NADA work in a setting that’s so committed to acupuncture as a core component of the program,” says Ottley of his experience at CJS.

One of those supporters is Patty Fox, Director of Probation at CJS. “There are so many barriers to substance abuse recovery: physical and psychological withdrawal, intense cravings, sleep disturbances, severe anxiety, physical pain. Acupuncture is a simple and effective way to help with those symptoms when our clients are the most vulnerable to lapse and relapse. It helps them stay focused on their treatment and recovery.”

A recent graduate of the program describes his experience this way. “It curbed my cravings almost from day one and took away the anxiety that I felt during the toughest times. And it helped with the depression and the ups and downs I went through during my whole time in the program. I’m out now, and I’m clean and sober, but I’ve kept coming for treatments, because they help me stay where I need to be.”

Acupuncture and NADA at CJS are well-established, and program funding is secure through April of 2012. Due to the uncertainty of the current economic and political climate, it’s hard to predict what the future holds. But for the time being, the Salt Lake County’s acupuncture program at CJS is holding steady, and doing its best to keep the spirit of NADA alive in Utah.

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**NEWS BRIEF: NM ACUPUNCTURE BOARD SETS PRECEDENT FOR SERVING BROADER POPULATION**

Psychotherapist Dana Moore became the first non-addictions private pay provider in the State of New Mexico to integrate acu detox into his practice, as approved by the NM acupuncture board. Moore opened his practice in January 2011 to serve adult clients with long-term trauma histories using innovative treatment approaches, including trauma informed mindfulness exercises, poetry and acu detox. To date, NM has only approved federally-funded addictions treatment programs. “They wanted to see an outline of my treatment program and how the auricular acupuncture fits into that.” Fortunately, Moore had a ready program structure to give them, one he spent months developing. Alix Bjorklund, a member of the acupuncture board, shared that “the board agreed that access to many different types of clientele is a good step forward.”

Take a look at Moore’s curriculum at: www.journeywell.org
The need for recruiting new NADA advocates has never been more forthcoming than now. Lincoln Recovery Center’s NADA training program in the Bronx is no longer available for recovery workers who want to learn the five point protocol. Restrictive laws stand in the way of constructing barrier free training centers, and permitting NADA trainees to aid their communities.

Meanwhile, our grassroots are springing up. Over the past year, membership growth rates have doubled. Within this same time, emerging advocates in over a dozen countries and US states have asked NADA “how to” pass a new NADA law, or amend an existing Acu Detox Specialist (ADS) policy. Each of them seeks to expand access to care for communities who are excluded through existing regulations. It is their spirit for barrier free recovery that obliges NADA to respond.

While historically, support for advocates had been provided by a few NADA leaders, today we must transfer our collective wisdom to our grassroots. Empowering them to be a resource to each other will build capacity within NADA both to protect existing ADS laws, and create new reform efforts.

NADA’s role is to facilitate this collaboration and foster our identity distinguished from the acupuncture profession. Our task is not to professionalize ADS, but to open up NADA training and practice for all socioeconomic classes, diverse cultures, ages and education levels with the fewest bureaucratic and licensing barriers, and not just for treatment of addiction.

It yet remains to be seen how progressive movements currently brewing within the acupuncture profession will temper and substantiate the influence of licensed acupuncturists, and forge an ally for NADA activists. We applaud those who call for an end to turf wars, and who stand behind the role of the ADS.

As ever, approaching the 2000 member mark as we celebrate our 26th year, NADA will look to its allies in recovery for leadership. Member expertise in legislative lobbying, public relations, community organizing, polling, filmmaking, journalism and policy research are needed as we move forward.

Email advocacyfornada@gmail.com if you would like to help our grassroots legislative advocacy efforts.

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Member from Pueblo, HB1119 passed its first House reading by a 9-4 vote, after Health and Environment Committee Members heard testimonies from acu detox clients, including Adam Sutton, an Iraqi war veteran. He described how helpful the treatment had been for his PTSD, because it helped him relax and sleep better.

Stuyt followed with a presentation of research on the NADA protocol that included a landmark study published in The Lancet which found that acupuncture is an effective treatment for severe recidivist alcoholics and a study published in the American Journal on Addictions that found ear acupuncture to be significantly more successful than medications and placebo in helping cocaine-dependent methadone-maintained patients attain abstinence.

When it came time to tally the votes, Stuyt recalls one Republican committee member conclude “because Dr. Stuyt can’t prove that this works, I’m going to have to vote no.” According to Stuyt, the next committee member echoed this sentiment, adding, “although I really support our troops and want to do everything I can for these people, because Stuyt can’t prove this works, I’m going to have to vote no.”

Puzzled by these responses Stuyt looked for guidance from Rep. Claire Levy, the Democrat who sponsored the bill. According to Stuyt, Levy told her, “they weren’t voting against you, they were voting against me.”

Then, after barely passing the Appropriations Committee, HB 1119 suffered its next partisan tit for tat in the House’s second reading. A standing vote was taken—a type of vote primarily based on party affiliation. No Republican voted for it but Levy was able to revive the bill for one last chance.

How did she do this? Levy told Guidepoints that she got some Republicans on board by proposing an amendment prior to the third and final reading. “Unfortunately, people changed their minds between that vote and the third reading.” No Republican voted for it, and the bill died.

Frustrated by learning that she would not be able to practice the NADA protocol, Paula King, a psychologist from Grand Junction, contacted the Chair of the Health and Environment Committee for the House, Rep. Ken Summers. King said Summers could not explain why the
vote was split in that manner. In fact, according to King, “Summers was not convinced that his “no” vote prohibited non-acupuncturists from performing the NADA protocol.”

Stuyt also took the proactive step of contacting Summers and was able to gain his audience for a 90-minute meeting where she learned that Republicans perceived HB1119 as only benefiting her, the only NADA trainer in Colorado.

Stuyt is in fact mentoring an acupuncturist to be the second trainer in the state, and during the hearings for HB1119 two acupuncturists contacted the NADA office requesting applications to become trainers. The failed bill would have also created new opportunities for Colorado acupuncturists to operate as supervisors within mainstream addictions and psychiatric programs.

Psychiatric nurses will continue to perform the NADA protocol, as their nursing regulations allow them to as long as they have proper training and supervision. In 2012, Stuyt and Levy say they will be sure to have these treatment providers testify.

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Rep Summers: ken.summers.house@state.co.us

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acu detox in Hong Kong. Under the Chinese Medicine Ordinance of 1999, issued by the Chinese Medicine Council of Hong Kong, ADSes cannot practice without a license. And licenses are strictly limited to acupuncturists or Western trained medical professionals with acupuncture degrees.

Clinical social worker and NADA member Malabika Das hopes to change this. “I feel a responsibility to conduct outreach and raise awareness about the efficacy of acu detox. I hope that NADA will eventually have a presence in Hong Kong, through community and academic based trainings as well as new and rigorous research.”

Das helped organize a NADA pilot project at 3 Nepali prisons in 2009 and has since moved to Hong Kong to pursue doctoral studies at Hong Kong University’s Centre for Behavioral Health. To learn more, email Das at siddhashanti@gmail.com.

To download presentations from the 2011 Hong Kong International Acupuncture Conference, including Michael Smith’s powerpoint, go to: www.hkamonline.hk/conf/index.php/hkia/hkia11
Spirit of NADA: 16 Years Later, a Revival in Missouri

“I’m excited about reviving acupuncture in Kansas City. I know the conference will be a big success.” --Carolyn Rowe, Project Director of START Research and Treatment

This photo, taken in 1994, shows the first and only group of Acu Detox Specialists trained in Missouri. NADA co-founder Michael Smith sits in the middle, Carolyn Rowe to the right and Greg Boyle to the left. Those are some of the only people that can be identified from this photo.

A licensed acupuncturist, Greg Boyle helped draft and introduce ADS legislation in Missouri, which passed in 1994. He worked with Carolyn Rowe, a nurse by training, who organized the first acu detox program in Kansas City in a large state-funded community mental health center.

For the past 10 years Rowe has supervised NIDA-funded medication research and is affiliated with the Kansas University Medical Center. NADA is honored to invite her as an opening speaker at the upcoming conference in Kansas City.

Below is an excerpt from a message she recently sent to the NADA office describing the history of her efforts in expanding the use of acu detox in Kansas City.

“I first met Mike (Michael Smith), and was trained as a Detox Specialist at Lincoln Hospital, in the late 80s. We initiated our first treatments within the confines of Central Kansas City Mental Health Services (CKCMHS) July 1991.

We were given a large, remodeled space and new furniture when the Superintendent of the facility personally experienced a positive effect from a “trial” acupuncture treatment. At the time, the state had much more funding, and the Director of the Division of Alcohol and Drug Abuse was a supporter of alternative treatments. January 1992 we provided a total of 4,307 treatments. The acupuncture clinic was one of the 5 programs comprising the Outpatient Drug Program at CKCMHS. October of 1993 we initiated treatments for the Jackson County Drug Court, the 12th Drug Court in the nation. Over time, the funding and politics for acupuncture for both the state and county slowly eroded. Drug Court treatments were discontinued June 1996. June 2001 the state stopped funding for acupuncture however the Superintendent retained my one acupuncturist to provide treatments to the inpatient psychiatric units on a limited basis. Those services were discontinued a number of years ago.

I’m excited about reviving acupuncture in Kansas City. I know the conference will be a big success.”
Outreach for the NADA conference has been ongoing. Approximately 50% of all registrants for the ADS pre-conference training are from Missouri and some have helped identify locations where trainees will give free treatments during their training week.

In early April, 2011, Michael Smith came to Missouri to continue the outreach started by the NADA office. One of his first trips was to St. Louis where he met with licensed acupuncturist Stephanie Lynn Mall. A recent graduate of the Oregon College of Oriental Medicine, Stephanie helped connect NADA with the Kansas City Free Health Clinic, now a conference training site. Below she shares with Guidepoints her reflections on the growth of NADA in Missouri.

**Open for Collaboration: Reflections from a Missouri Acupuncturist**
*by Stephanie Lynn Mall*

In 2009 I found a warm welcome as the first volunteer licensed acupuncturist at the Kansas City Free Health Clinic, an established multidisciplinary clinic whose mission is to provide quality services, at no charge, to people without access to basic care. I sought the opportunity to volunteer as a way to bridge my prior work experience in the social services along with my draw to the healing impact of acupuncture.

In the first couple of months I was going in for a four-hour shift every two weeks and then switched to a four-hour shift every week, because I was often booked up and felt it was necessary for some of those patients to receive weekly treatments. Over the next 13 months I completed more than two hundred volunteer hours. A large percentage of people that I treated in the general medicine clinic had physical health issues compounded by alcohol & drug dependence, emotional/behavioral health imbalances, hepatitis B/C, and HIV/AIDS.

In addition to using Traditional Chinese Medicine, I found the NADA protocol to be invaluable when working with these health issues; in addition to the health benefits, the simplicity of the approach is more advantageous in terms of accessibility and longevity in high-volume urban clinical settings, and it is cost-effective. With NADA trained Acupuncture Detoxification Specialists (ADSes), the benefits of acupuncture can be administered in a group setting on a frequent and consistent basis.

NADA has proven itself to be acupuncture’s biggest ally and ambassador in the realm of public health and in crossing the socio-economic barrier to access this effective medicine. Training ADSes is an efficient and lasting bridge to implement acupuncture services in clinical settings such as the KC Free Health Clinic.

At the upcoming NADA conference in Kansas City I will be training to become the second NADA trainer in Missouri. I see a lot of opportunity for the expansion of ADSes serve as a vital asset to the acupuncture community."

NADA in Missouri, as the Midwest in general is becoming very open to the idea of acupuncture. Major hospitals in the KCMO area are beginning to expand into integrative medicine programs with the inclusion of acupuncture in those clinics.

I am hopeful that my fellow acupuncture colleagues share my views that ADSes serve as a vital asset to the acupuncture community. The use of ADSes allows greater accessibility to this medicine by a large population of individuals who can greatly benefit from these services. As more people find healing through acupuncture, there will be greater exposure, awareness, and interest in Chinese Medicine by the population as a whole.

Missouri law requires general supervision of ADSes by licensed acupuncturists (LAc); this is a great opportunity for LAcs to get involved in health settings that we may not otherwise access. There is much work and so much good we can all accomplish by working together.

**Unwavering Support from MACA**

Michael Smith and the NADA office attended the spring conference of the Missouri Addiction Counselors Association (MACA). In addition to a demonstration treatment during his presentation, Smith gave treatments to several conference participants during a break, while Sara Bursac, NADA office manager, gave a group treatment to 10 attendees. They appreciated it! We also donated an ADS training and conference registration to MACA’s raffle - Betty Slaughter of Kirksville, MO was the lucky winner. Congratulations, Betty!
NADA IS AN ALTERNATIVE TO PSYCH MEDS IN WESTERN MASS: WELCOME TO THE FREEDOM CENTER

by Will Hall and Lee Hurter

The Freedom Center (www.freedom-center.org), a peer-led organization in Northampton, Massachusetts, run by and for people labeled with severe ‘mental disorders’ and people who experience extreme states, has been providing NADA treatments through their free drop-in clinic since 2006. The center promotes compassion, human rights, self-determination, and holistic options and advocates for alternatives to the mental health system’s widespread abuse, fraudulent science and dangerous treatments. It is volunteer run and receives a small number of private donations, the occasional social justice foundation grant, and a HUD community development grant from the City of Northampton.

“Welcome to the Freedom Center’s free, anonymous, drop-in ear acupuncture clinic,” we say every Monday afternoon. Our free weekly clinic occurs in a chapel space that has been donated to us by the Quaker Friends in downtown Northampton.

The clinic was started with donated space, donated acupuncture services, and donated publicity time. Thanks to donations collected from participants at each session, there is currently no overhead. We estimate that similar clinics could be set up for less than $50/month if acupuncturists donate their time and passing the hat covers publicity and supplies cost. Acupuncturists are often keen to help a low-income community non-profit, as this gives them an opportunity to meet new private clients who are just being introduced to the benefits of acupuncture.

One acupuncturist operates the hour-long treatment at the clinic, although people are free to arrive and leave on their own schedules. Everyone is encouraged to stay for at least 20 minutes and welcome to stay for the whole hour. However, if someone is having a hard time or has limited time, they may come for even shorter periods.

In 2006, the Daily Hampshire Gazette ran a front page article in the Health section about 28-year-old Jenifer Andren, a Northampton woman who had extreme insomnia that had been greatly eased by the free ear acupuncture treatments she received at the Freedom Center.

“Andren hadn’t been able to sleep for longer than 45 minutes at a stretch in over two years...she’d tried everything: sleeping pills, psychotherapy, sleep clinics at Baystate Medical Center, holistic treatments...Andren says the night following her first [ear acupuncture] session she slept for three full hours without waking once. ‘It was unheard of,’ she says. She continued to go to the clinic regularly for three months, and then began adding a private weekly session with the acupuncturist Barbara Weinberg of Leverett. Now she says she is able to sleep for as many as seven hours at a time. ‘I don’t have to take naps anymore, I don’t have meltdowns, where I’m so tired I start crying. My overall health is so much better,’ says Andren.”

Several of us at the Freedom Center learned the NADA protocol at Lincoln Recovery Center in the South Bronx in 2005. After learning how effective this was for drug recovery, detoxification, relaxation, and trauma we thought a NADA clinic would be a useful and relevant service for the Freedom Center to offer.

Many people turn to Freedom Center’s NADA clinic because they are experiencing an extreme emotional state that often stems from trauma. This treatment is effective with trauma because it does not require people to reveal anything personal or painful to a stranger. While it may be important for people to talk through traumatic events, there is unique benefit to the inward, collective nonverbal experience that can be provided at a NADA clinic.

The other main reason for starting the clinic was to provide a resource for people trying to get off psychiatric drugs. There are few resources for people withdrawing from psychiatric drugs and the intensity of the withdrawal is rarely recognized by our culture. Most of the Freedom Center’s founders have gotten off psychiatric drugs and feel that doing so has been a critical component to their overall recovery and well-being. Their collective experience is the driving force behind offering a safe space to others who make this choice.

Currently, the clinic averages 10-20 people each week and has treated hundreds since 2006. Despite changing practitioners, monetary problems common to community-
based grassroots organizations, the free weekly NADA clinic has stayed a strong and consistent part of the Freedom Center.

Other NADA clinics connected to Recovery Learning Communities, a regional network of peer-run support groups, have since spawned in Western Massachusetts. If Massachusetts were to pass a law allowing non-acupuncturists to get NADA trained, there would be a great opportunity for spreading NADA in peer mental health settings.

Other weekly programs at Freedom Center include yoga classes, a peer-led support group, a writing group, a reading/discussion group, and an educational radio show. While the Freedom Center runs on a budget of $5,000 a year or less, we are committed to keeping our programs free so they can be available to everyone.

Film on NADA in Psych Treatment to Show in Kansas City

The makings of a new documentary on the use of NADA in psychiatric treatment in Europe will show at the 2011 NADA annual conference in Kansas City May 20-21. The film is produced and directed by award-winning filmmaker, Brian Lindstrom.

Lindstrom wrote about the making of this film in a recent guest column in the Oregonian, providing a glimpse of the theme. "In Copenhagen, I filmed Mette, a psychiatric nurse and acupuncturist, as she visited "social psychiatric" organizations -- neighborhood homes turned into drop-in centers -- using acupuncture to treat mental illness. The acupuncture, often done in small groups, and the homey atmosphere help create a sense of warmth and community. At one of the homes, a woman was in the kitchen making a cake to celebrate her first bridge crossing in four years -- an important victory over one of her phobias. Later, she shared the cake with another woman who, after giving birth to her third child, suffered such severe post-partum depression that she couldn’t adequately care for her newborn. Now, after the benefits of social psychiatry, she is able to mother her baby."

Lindstrom is no stranger to NADA or the field of behavioral health. A 2008 Guidepoints review of his film "Finding Normal" (2007) reads: "The sincerity of Lindstrom’s work lies in portraying how hard is the work of recovery, both for the addict and, perhaps even more..."
NADA's Mission

"The National Acupuncture Detoxification Association (NADA), a not-for-profit training and advocacy organization, encourages community wellness through the use of a standardized auricular acupuncture protocol for behavioral health, including addictions, mental health, and disaster & 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."

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so, for those in the healer role."

Both "Finding Normal" and the short film "Kicking" (2004) traced the struggle of addicts in recovery and the counselors who accompany their journey at Central City Concern, an acupuncture-based behavioral health, addictions and supportive housing system in Portland, Oregon. "Finding Normal" won awards at the Astoria International and Longbaugh Film Festivals. His short film, "Heart of Harlem" features a basketball league helping youth beat the streets.

He is currently working on several other documentaries in the same spirit, including two mental health and human rights films, "Alien Boy: The Death and Life of James Chasse" and a film about the Oregon State Mental Hospital.

Lindstrom's other new film-in-the-making features one of the fastest growing acupuncture organizations in the US, the Community Acupuncture Network (CAN), a group dedicated to promoting social change through affordable and accessible acupuncture treatments. It screened in Portland for the first time in April. According to Lindstrom, this film will also feature the current merging of CAN with a new multi-stakeholder cooperative, the People's Organization of Community Acupuncture (POCA). Both organizations were founded by NADA member Lisa Rohleder.

For more on Lindstrom's films visit his blog: http://brianlindstrom.wordpress.com/about
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Hong Kong Researchers Applaud NADA Clinical Methods

by Malabika Das

Hong Kong researchers applauded NADA clinical methods presented data on the use of acupuncture for a multitude of conditions including brain injury due to stroke, depression during pregnancy and the neurophysiology of acupuncture on autism.

NADA co-founder Michael O. Smith was invited to present about how NADA ear acupuncture meets global needs. Smith was introduced by Ji-Sheng Han, former Director of the Neuroscience Research Institute at Peking University. Smith said that Han acknowledged the high level of quality of NADA outcome data. “He was quite emphatic.”

Researcher and president of the Hong Kong Association for Integration of Chinese-Western Medicine, Vivian Wong invited Smith to present to this global audience. In 2009 Wong co-authored a meta analysis on the effectiveness and safety of acupuncture therapy in depressive disorders, published in 2009 in the Journal of Affective Disorders.

Ironically, even though the use of auricular therapy for detoxification was discovered in Hong Kong by Dr. Wen in the early 1970’s, there are no known programs using...