Celebrating 25 conferences!

A note from the editor

We sincerely hope you consider joining us at this year’s conference in Nashville, TN. The NADA family has been getting together every year for the past 25 years, sharing information about what we know is such a simple, yet effective tool for many diverse populations and situations. Our collective voice gets stronger after a gathering like the annual conference, and hopefully this voice will ignite our dedication to leave an indelible mark as a NADA practitioner and supporter in our communities.

Conference topics include a spotlight on Neonatal Abstinence Syndrome and how beads and seeds can be used to reduce an infant’s withdrawal symptoms. NADA will reflect on the opiate epidemic in New York City 25+ years ago, and the present-day face of opiate addiction, both in Tennessee and beyond.

We also hope to see some excellent new short films submitted through our 2nd annual video contest. Images are worth a thousand words – consider making a film about how you use the NADA protocol (see p. 8 for details.) The winning film will be posted on our website’s home page, and showcased at the conference.

With any landmark event, an opportunity is born to take stock of where we are, and to consider our next steps – with intention and hope. We will create opportunities throughout the conference for you to share your vision for NADA in the coming 5, 10, 50 years. Let’s think big – our communities are counting on us.

See you in Nashville!

Spirits of NADA: Community Building in the Philippines after Typhoon Yolanda

In the Nov/Dec issue of Guidepoints, we wrote about the work of NADA Philippines ADSes who provided ear acupuncture to communities devastated by Typhoon Yolanda. Below is a letter from Janet Paredes (in photo above), leader of NADA Philippines, updating Guidepoints readers about their most recent efforts.

Dear Friends,

I have no exact words to express our stay on the island of Leyte. It has been a very depressing yet fulfilling, warm and loving experience – being with my country people who have been victims of Typhoon Yolanda. We came across mass graves and dead bodies in body bags that have not yet been buried. Each day more dead bodies were found. You could not help but be swarmed by flies and mosquitoes. There was no safe drinking water.

I led a team of six ADSes, a committed, loving and

PHILIPPINES continues on p. 4
At the end of November, Guidepoints editor Sara Bursac spoke with Tamara Oyola-Santiago and Rachel Knopf, two of the four co-authors of a report published in the Journal of American College Health’s October 2013 issue (vol. 61, no.7), titled Provision of Auricular Acupuncture and Acupressure in a University Setting. All four authors are staff with Student Health Services at the New School in New York, NY.

Sara: How did the idea for treatments get started?

Tamara: The forces of the universe conspired for both of us [referring to co-author Rachel Knopf] to come to the New School at the same time. We started in December of ’09. And we both came from community-based organizations up in the Bronx. As health educators and as people with a Masters in Public Health, that tells you what was feeding us in terms of working with low-income communities, communities of color. I came to the New School after working in addictions programs, in the field of HIV prevention. When I started in New York City in the field of harm reduction, one of the first things that I saw was NADA being applied for folks as a way to manage their use, as well as enhance their well being. At the New School I found a very supportive community of colleagues in the health and wellness field. But no auricular acupuncture. And I found kindred spirits in the co-authors, in Rachel and Tracy [Robin] and in Kristin [Harvey].

Sara: All four of you are ADSes?

Rachel: Three of us got trained together [at Lincoln Recovery Center in the Bronx, NADA’s first and longest-standing training site], and Kristin Harvey is a medical doctor who has her acupuncture training.

Tamara: In order to practice as ADSes, we needed someone on staff who could supervise us, so it worked out really well because there was already someone on board who could do that.

Rachel: We are offering it under the context of stress management and general support of student wellness, and, at the same time, we are very aware that many of our students use substances. We conduct every two years a national college health assessment through the American College Health Association. And we see a large percentage of our students who use substances, alcohol, cigarettes and other drugs. Some of them use casually and recreationally. And some of them use a lot more regularly, to the point that we know that within the population we’re serving, we do have people who are dealing with dependency. For some of them it’s a concern, for some it’s causing side effects that they want to address. And this is one option for them.

Sara: In the provision of the treatments, is there a system for referral if someone self-identifies as needing more support beyond receiving the treatments?

Rachel: The treatment is given at our student health center. Our student health center consists of medical offices, counseling offices, our public health branch, which we call Wellness and Health Promotion, and our student health insurance. So there is a lot of information that they encounter just by coming there. They have counseling available to them, and we often get to know our regular students so that we have dialogue with them and can make individual referrals.

Tamara: We definitely work in tandem with the medical team and the counseling team. It’s a very holistic multi-dimensional approach where we may see students, and they may ask us after the treatment, I’m really struggling with smoking tobacco and quitting, and managing that use. Ok, let’s go make an appointment with medical. It’s an immediate referral system.

Rachel: What we really like about that, which was really modeled for us nicely at Lincoln, is how low-threshold this is. This is a treatment that doesn’t require making an appointment. It’s drop-in. They can come, they can decide...
not to come. It’s a non-verbal treatment. They can sit there and really just be at their own comfort level. And then at a point when they are comfortable and able to ask for other help, then we’re able to get them into our other services that will support them more.

Sara: How do people learn about the treatments? How is it advertised? And how often do they happen?

Rachel: We have the auricular acupuncture once a week for an hour and a half. And we advertise in as many creative ways as we can throughout the university. So that includes social media, and our website, and announcements on the online platform that students log into regularly. It includes flyers. It includes sharing it with all of our health services staff through a weekly wellness calendar. We send those out to academic advisers and other people throughout the university and student support. And then ultimately, with our regulars, we get new people through word of mouth.

Sara: You now have been in operation for almost two years. Have you seen a change in the number of people accessing the service?

Tamara: It’s pretty stable. We haven’t seen a spike. Part of it is that it’s a rotating door. Students come and go depending on the cohort. We may have a steady clientele, and then they graduate. The challenge of a university setting is that you have to have continuous promotion of the services and programs in order to get a steady base of people coming in.

Rachel: And what was actually surprising to me is that we get a lot more regular people, and I would even say potentially more people, in the summer months, when classes are not in session. And they tell us it’s because then they actually have the time to come.

Tamara: The other thing that I’ll add which is really important is that in addition to the auricular acupuncture, we provide acupressure off-site in two of the different university buildings. And those have been very successful as well. We hope to follow-up with articles describing our acupressure services. Those are really popular. In a non-clinical setting, we go to where the students are, and the numbers are much higher. When we’re able to make it ambulatory, when we go to them, numbers go up tremendously.

Sara: There is an increase of interest in the organization to provide more information about the use of beads. There are a lot of anecdotal reports, mostly when they are used...
compassionate team. I salute this team as they perfectly know how to be with the people suffering from the effects of Yolanda.

We arrived on January 9 and went straight to one of the worst hit areas. We treated 65 people in Tanauan -- no electricity, we used our flashlights.

From January 10 to 12: Morning and afternoon treatments with children and families in barangay Magay at the parish of Our Lady of the Assumption (note: barangay means village or barrio).

January 13 and 15: We left that area and concentrated on the Tacloban City evacuation center and the Divine Word Hospital. Here we gave treatments to the nuns, staff, doctors, canteen workers, packers of relief goods and first responders.

Everyone had their first-time ear acupuncture. They all expressed gratitude for sleeping well afterward, feeling good, calm, relaxed, and most of all very thankful for seeing us who came with concern and compassion, all the way from Manila. We gave more than 800 treatments.

NADA Philippines is planning to adopt barangay Magay as it is starting from scratch, Ground Zero. When you enter the barangay, it breaks my heart to see it every time we pass, no houses, all GONE! They live in tents, and how long can these tents last? I fear for the health of the people, especially the children -- lots and lots of children. Trisha Sanijon had a NADA nursery for four days treating children lined up and sitting on fallen logs!!!

This is a good place to start to build a community-based NADA acudetox program. I can fly to Tacloban and supervise. I know more volunteers will come with me. And as soon we can, we will go to other barangays. We start with Magay first.

We left Leyte with a full and joyful heart -- and a willingness to return to do training. We will be back -- soon.

Love, Janet

We will be back to train the hospital staff, midwives, doctors and nurses of the Divine Word Hospital.

We will be back to train the parishioners of Tanauan.

We will be back to train the mothers, fishermen and health workers at Barangay Magay in Tanauan.

Janet explains these photos, focusing on Boknoy, the boy figured on the left of the trio:

“He caught my attention because before ear acupuncture, he was quiet, reserved and was not speaking much. We gave treatment four times to all the barangay people in this area. A very noticeable reaction, transformation, of Boknoy. He became friendly, articulate, and started running and playing under the rain after he was needled. Really amusing and surprising effect of ear acupuncture, not only with Boknoy, but with the rest of the children.”
NEW SCHOOL continued from p. 3

with children. Anything that you can come up with in terms of best practices, how you are teaching people, would be really valuable to share.

Is there a need to train other staff in the protocol?

Tamara: We really miss Lincoln and the fact that we can't refer people there anymore [NADA training at Lincoln ended in December of 2010]. We have had many, many colleagues in the university who want to get trained. When we talk to health educators at other institutions, they ask, where did you get trained? At Lincoln. Oh, can we go there, and also implement this program? No, they don’t train anymore. That is a loss that we are really feeling in terms of the ongoing capacity building at the university and in New York City schools.

Rachel: The other thing that was great about Lincoln was that it was free.

Tamara: Yeah, completely. In terms of expanding this service to other universities, what has been key at the New School for its success is that we’ve had the support from everyone within Student Health Services. There is a lot of in-kind provision of hours allowing that this is carved into your regular work schedule. That the medical services’ director allowed somebody in her staff to become a supervisor of this new program. That our boss got trained with us! There was buy-in, not just in terms of, yes, go do it, but, yes, let’s go do it together! It sends a message that this is integral to what we do for students.

Rachel: I just want to say that Tamara and I are happy to field questions from other people who are looking to implement a program like this at their university. I love this. I love doing this. I love that I get to come in and work with students in this non-verbal, healing way. And I love the way that our conference room is transformed when we provide this service. Everyone notices that. It feels like such a win-win thing that we all do.

Editorial note: At the end of the interview we had a discussion about how their colleagues can access NADA training through Michael Smith, the now retired medical director of Lincoln Recovery Center. They have since been in contact with him and plan to meet when he returns from India and the Philippines.

For more information:
Tamara Oyola-Santiago: oyolat@newschool.edu

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Stanley Reiser
25th Annual Conference
May 29-31

Pre-conference
Acu Detox Specialist
Training  May 25-31

2014 Conference Schedule

Sun-Sat  5/25-31
Acu Detox Specialist training (includes 2-day conference)
30 CEUs

Th  5/29
9am-3pm Directors and Administrators Workshop with Michael Smith
5 CEUs

Th  5/29
9am-5pm Registered Trainer’s Day
5 CEUs

Th  5/29
6-8pm Opening Reception: Songwriters in the Round

Fri  5/30
8:30am Registration
9am-6pm Plenary and breakout sessions
12:30-2pm Conference Luncheon
Video Contest Screening

Sat  5/31
8-8:30am All Member Meeting
Continental Breakfast Provided
8:30am Breakout Sessions
12:30-2pm Lunch on your own or with the NADA book club
2-4pm Closing Plenary and Confering of ADS Certificates of Training Completion
15 CEUs for the conference

Special Opening Reception on Thursday 5/29
We will enjoy some of Nashville’s best singer songwriters play “in the round.” This performance style was made famous at the legendary Bluebird Café, now part of the Nashville Songwriters Association International. The evening’s performers will share their stories of recovery and play their original music.

2nd Annual Video Contest
On Friday we will have the honor of watching short films submitted for the video contest, ending with the finalist. See ad on p. 8 for more information about how to enter your film in the contest and receive a free conference registration, $300 toward your travel expenses, and two free nights at the Scarritt Bennett Center.

NADA: A Simple Tool to Aid in the Opiate Epidemic
a 25-year retrospective
The 25th conference offers a unique opportunity to look at NADA’s beginnings in the mid 1980s with the opiate epidemic in New York City, and the current widespread misuse of opiate pain medication, in Tennessee and nationwide.

Other conference highlights:
Neonatal Abstinence Syndrome
NADA as a tool for the treatment of chronic pain
Drug courts using NADA & their effect on treatment and recovery in Tennessee
The Tennessee Story: from an Acu Detox Specialist law 15 years ago to today

Conference Accommodations

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Parking: complimentary (based on availability).
Pre-conference Training
30 CEUs

Earn an ADS Certificate of Training
Attend this pre-conference session as well as the 2-day conference (you must attend both to complete the training) and earn an Acupuncture Detoxification Specialist certificate of completion in 7 days*. 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 local programs. 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 acudetox 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 Canadian provinces as allowing some type of ADS practice: Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, 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 as each state and province is different.

Licensed Acupuncturists: Join in the exciting integration of Chinese medicine within a traditional Western addiction and behavioral health setting. Become an advocate for the NADA protocol in the treatment of addiction, mental health, and trauma. 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.

*Note: You will receive a certificate of completion after the training but you do not need to submit continuing education credits to maintain your status as an Acu Detox Specialist because this is not a certification.

Training Schedule
Trainees participate in a 5-day intensive training that begins on Sunday 5/25 and ends on Thursday 5/29, followed by the 2-day conference. The training interweaves the theory and application of acudetox along with a clinical practicum. Hands-on experience is available by providing acudetox treatments to each other as well as clients served by local programs. Trainees are required to participate in both days of the conference to earn a certificate of completion at the end of the 2nd day of the conference.

Travel and Accommodations
Accommodations will be available at the Scarritt Bennett Center (dorm style) for $60.13/night, or at a hotel of your own choosing. Trainees are responsible for transportation, lodging and food throughout the training period, although there may be organized carpooling to and from the training site each day.
Disaster struck southern Alberta, Canada, on June 20, 2013. What came to be known as the June Floods – described as the costliest natural disaster in Canadian history – left over 100,000 people displaced and disoriented. A group of Calgary NADA members created the volunteer-based YYC Acupuncture Relief Project (YARP – YYC is the airport code for Calgary).

Calgary, a metropolis of over 1 million, was one of the hardest-hit areas. About 75,000 people were mandatorily evacuated from the city. High River, a small town with a population of 13,000, was left in ruins; the Siksika Nation evacuated approximately 1,000 people. The communities of Bragg Creek and Canmore were in a state of emergency, along with 9 other municipalities.

One of the largest natural disasters in Alberta’s history became one of the greatest showcases of compassion for one’s neighbor that this province has ever seen. A core team of nine NADA-trained professionals responded within a week of the flood’s beginning and, with some technical support from Acupuncturists Without Borders, founded YARP. Undeterred by the challenging work conditions, the group was onsite to help ease the emotional and physical suffering of our fellow community members.

The tools themselves were simple but effective: a box of acupuncture needles, 3 pop-up tents, cotton balls, alcohol swabs, and a few dozen folding lawn chairs. We traveled to throughout Alberta and worked at flood relief gatherings: in the National Disaster Relief Centre in High River, at the Bowness Community Centre in Calgary, Turner Valley and at the Siksika Nation’s annual Pow Wow. Our best healing (besides use of the NADA protocol) was to witness and be present to the experience of our neighbors.

Over the course of five months, we treated 1,300 people. Most of those who came to our tents or centers returned again and again. They said aches and pains subsided and they noticed a decrease in stress levels, along with improved sleep. When we could we gave communities a promise to stay with them for a year following the disaster.

Organizations such as Hull Services Saddlebrook and the Foothills Fetal Alcohol Society in High River saw the good work that YARP did over the summer and offered working space (safe from the prairie winter) for our services. We would like to keep YARP going for years to come. Our dream is to branch out to serve others in the community.

YARP continues on p. 10
We let the dogs out!

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YARP continued from p. 10
that could benefit from NADA’s deeply profound healing protocol.

For more information please check out YARP at yycacurelief.ca, or on Facebook at YYC Acupuncture Relief Project.

Comment from NADA trainer Carolyn Mandrusiak:
When a call came in from colleague and friend Heather Thompson asking for a NADA training course for YARP, it was an honor (and no brainer) to assist.

Within days the group had already started mobile clinics in specific areas of Calgary and High River - the hardest hit community. The NADA course was arranged shortly after the floods, and was so well attended that a second course was scheduled – and equally well attended!

The work and dedication of this group is still amazing today. The mobile clinics have continued to grow and are now reaching those struggling with the traumatic after effects the flooding has had on their community, family and friends, homes and jobs.

A disaster of this magnitude so close to home is shocking to us all. I am so grateful to NADA and to be able to continually see the wonders that can result from this simple yet so effective protocol.

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NADA’s Mission
“The National Acupuncture Detoxification Association (NADA), a not-for-profit training and advocacy organization, encourages community wellness through the use of a standardized auricular acupuncture protocol for behavioral health, including addictions, mental health, and disaster and emotional trauma. We work to improve access and effectiveness of care through promoting policies and practices which integrate NADA-style treatment with (other) Western behavioral health modalities.”

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Photos courtesy of YARP

Heather Thompson gives a NADA treatment to a Siksika Nation woman wearing traditional dress for a Pow Wow that was taking place.

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January 2014
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In the Public Eye: A Report from Debra J. Farrell
Michigan Trainers Bring Acudetox to Saginaw Valley State University

On December 5, 2013, Debra J. Farrell and Marilyn Miller, both NADA Registered Trainers, provided acudetox demonstrations on the campus of Saginaw Valley State University (SVSU). The demonstrations were a part of the Occupational Therapy Practice in Mental Health Fair and Exhibition.

Forty-five Master of Science in Occupational Therapy students displayed their work in various specialized areas of mental health, and they, along with university staff and community partners, received acudetox demo treatments.

Debra is a licensed clinical mental health counselor and licensed occupational therapist. As an Associate Professor in the Department of Occupational Therapy at SVSU, she organized and sponsored the fair with the goals of 1) raising awareness and support for individuals (and their families) with mental health, substance use, and co-occurring disorders, 2) clarifying the role of occupational therapists who work with this population and 3) introducing occupational therapy students and the university community to complementary approaches, such as acudetox.

Marilyn is retired from the State of Michigan Bureau for Substance Abuse and Addiction Services. She was instrumental in the introduction of state government-sponsored trainings for the use of acudetox within licensed addiction treatment programs throughout Michigan. Debra and Marilyn have worked together for more than 18 years providing statewide outreach and education about the benefits of acudetox.