

GUIDEPOINTS

NADA Quarterly News
Spring 2020

Democracy

By Langston Hughes

Democracy will not come
Today, this year
Nor ever
Through compromise and fear.

I have as much right
As the other fellow has
To stand
On my two feet
And own the land.

I tire so of hearing people say,
Let things take their course.
Tomorrow is another day.
I do not need my freedom when I'm
dead.

I cannot live on tomorrow's bread.

Freedom
Is a strong seed
Planted
In a great need.

I live here, too.
I want freedom
Just as you.

Kindness

By Sheila Murphy



*"History says, Don't hope on this side of the grave.
But then, once in a lifetime, the longed-for tidal wave of
justice can rise up, and hope and history rhyme."*

-Seamus Heaney

We at NADA have a great privilege and a great example of what to do with the short time we have here on earth. We follow the path initiated by a great person – Dr. Michael Smith, M.D. His life and his example of using his gifts to help others is the path open to us.

He was not all work. He loved the water and would search and find springs all over the world. But he worked hard, too. In India he spent a lot of time helping many, including the police. He suggested that they have yoga in the morning before they went out, and acupuncture in the evening. This way they would be centered. What would our world be like here in North America if we visited the police, and they benefited from the NADA protocol?

Some never knew kindness growing up. It is never too late to learn kindness. We can all learn. A white Chicago police officer, on his death bed, said that the hate of African Americans was something that he wasted his life on – years in a 12-step program took the hate out of his brain. He did not have the courage to change for most of his life. **Continues on p. 3**

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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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Michael Smith with Sheila Murphy at the NADA conference in Nashville, Tennessee, 2014.

It is a great thing to have courage, during our lives. To talk to ourselves and know that we can help repair the world. It does take courage. So we need acupuncture in our ears so that we are settled. This helps remove all negatives. It is like an inner house cleaning.

Then we ask questions. There are many Unions for people who are not staying home doing Zoom at this time. These Unions represent the caretakers. They carry the mail. They clean the toilets. They work in nursing homes, and prisons. They are the janitors in the buildings.

Who cares for our caretakers? Who is there when the dawn comes while they clean the emergency room? We can be there. We follow the path that Dr. Michael showed us. Most of us do not have a medical degree. He did. He was giving acupuncture instead of narcotics to impoverished black people who suffered from addiction to drugs and alcohol. The medical society attempted to have his license taken away. That is what he faced. We face nothing like that. If we offer beads and/or acupuncture and we are turned away, we do not suffer. We are responsible for the effort, not the outcome.

If we concentrate on kindness and service to others, we will stop being cross with others. By skipping down Dr. Michael's path, we will find that service to others somehow changes us. This summer and beyond, let us find springs of courage on life's path. These will help our body. Kindness to others and service grows our spirit.

I wish each of you light and love, Sheila ♡

Commemorating Tyrone Chatman

We share with the NADA community the sad news that Michigan trainer, Tyrone Chatman, passed away in February 2020. Tyrone became a trainer in the 1990s in Detroit, and brought NADA services to the [Michigan Veterans Foundation](#), of which he was the CEO. MVF provides transitional housing and is a resource center for homeless veterans.

Detroit-based author and reporter Mitch Albom remembered Tyrone Chatman as “the Michigan soldier who tended to soldiers.” In a March 1 [Detroit Free Press article](#), Albom described Tyrone as having “boundless enthusiasm for so much of life, but especially for those to whom others paid little attention – the poor, the homeless, the hungry, the underserved. And so, after years as a soldier in Vietnam, he came home to Detroit and devoted himself to taking care of them.



Tyrone Chatman at the NADA regional meeting Lansing, Michigan April 2018

“ You know what they call that? Service.”

NADA board elections

Learn about your new board members

Ken Carter – President

Ken Carter is the lead psychiatrist at the primary care/mental health integrative health program at the Veterans Administration Hospital in Bay Times, Florida. In addition to consulting and supervising with regard to medication management, his team also provides non-pharmaceutical intervention, including Cognitive Behavioral Therapy and a variety of mindfulness-based therapies. He works closely with the VA's Whole Health Program that provides integrated complementary and alternative treatment approaches.

The following is a statement that Ken Carter shared with the NADA office team as we meditated on the term “professional” and how it relates to our approach and practices in NADA:

“One of the very special things about the original Lincoln Model is the foundation in the voices of the weakest and least of us on the political/economic spectrum. These voices and their activism effectively challenged professionally driven political/economic forces that remain so strong, often so hard, and often so disgracefully oblivious to the needs of the weakest and least of us. Professional political/economic forces are a central factor in why Lincoln Recovery Center ultimately closed after 40 years of unimpeachable impact on the local community, our country, and our world-at-large—the same professional political/economic forces continue to demonstrate a dearth of interest and support in empowering of us to make the model of what Lincoln accomplished more widely known and accessible to the weakest and the least of us.”

To contact: kocarter4@gmail.com



Ken Carter, 2014 NADA Conference
Nashville, Tennessee

Marquitta Duvernay – Treasurer

My experience in the field of substance use and mental health has lent itself to my interest in participating on the NADA board as a collaborator, and in the role of Treasurer. The most poignant experience stems from being a Public Health Advisor with SAMHSA, and the many visits made to rural and Native American communities.

Oftentimes, services provided in the communities were supported by what the treatment field has called “non-traditional” forms of treatment, which for the communities were identified as “traditional.” Treatments supported by the community lacked the need for medication and relied on traditional or natural treatment models such as acupuncture. Hence, my appreciation for the use of naturalistic approaches to managing and treating illnesses.

Currently, as a counselor and leader in the behavioral health field, my passion lies with identifying and/or advocating for the use of non-narcotic and traditional treatments, such as acudetox, that not only address the outward manifestations of illness, but, most importantly, the internal. Having the opportunity to parlay my passion as a NADA board member will further permit me to not only share but to also gain knowledge that will support others on a national and world platform.

Marquitta L. DuVernay has more than 30 years of experience in behavioral health management, training, consultation and service delivery on a federal and state level. She hopes to see the NADA membership expand over the next few years, while helping to advance the NADA protocol within the fields of drug treatment, mental health and trauma.

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Marquitta Duvernay

Warren Leggett, Jr. – Secretary

Warren Leggett, Jr. has been elected as secretary to the NADA board. He is currently a faculty member at Bowie State University, the oldest historically black college and university in Maryland. He studied to be an acudetox specialist with Dr. Smith and Ken Carter in 1998, and is currently training to be a NADA trainer under Carter's mentorship.



Warren Leggett, Jr.

At that time, he was working in chemical dependency at the probation and parole resource center at the D.C. Superior Court. He was also a board member for the D.C. Board of Professional Alcohol and Drug Counselors.

Leggett retired from the above position in 2002 when he returned to school to get his Ph.D. in psychology. He is part of the department of counseling at Bowie State and working to have the NADA protocol become part of their standardized curriculum.

The acudetox law in Maryland is inclusive around the use of the NADA protocol in substance use treatment programs – but not so in neighboring D.C. However the D.C. government does grant reciprocity to graduates of Bowie State's Peer Recovery Support Counseling and Peer Recovery Support Specialist training program. Leggett's strategy is to train all the students from D.C. and let them go back and advocate.

According to Jack Monell, Associate Professor and Program Coordinator of Justice Studies at Winston-Salem State University, Warren Leggett's "dedication in federal law enforcement extends almost 20 years of service. A clinician as well, he is able to address the clinical needs exhibited by the federal offenders his team supervises. As an administrator, clinician, and academician, Leggett's wealth of knowledge has made him an expert in the area of community corrections, particularly probation and parole and addiction services."

To contact: legg1@yahoo.com

Julie-Anne – Canadian RT Rep.

Julie-Anne Nayler is a registered psychotherapist, NADA trainer, certified personal trainer and owner of a company called Her Inner Heart. She has worked in the field of mental health and addictions for over 12 years, as well as in shelters, schools and the hospital. For most of that time she has been a senior addictions counselor working for Lakeridge Health hospital. As part of her role, she has developed a partnership working with the Toronto Police Academy, court officers and security companies – training their staff on addictions and mental health in order to reduce stigma and grow competency.



Julie-Anne Nayler

Becoming an ADS and registered trainer complements the work she does with her clients. Joining the NADA board as the Canadian registered trainer representative comes with enthusiasm to bring insight, energy and mindfulness to NADA practice in Canada.

To contact: janayler@lh.ca

Listing of NADA's current board of directors, in alphabetical order:

1. Bryant, Katurah - training co-chair
2. Carter, Ken - president
3. Duvernay, Marquitta - treasurer
4. Eisen, David - training co-chair (re-elected)
5. Harvey, Teal - member at large
6. Hurse, Nate - vice president (re-elected)
7. Leggett, Jr., Warren - secretary
8. Miller, Yvette - member at large (re-elected)
9. Nayler, Julie-Anne - Canadian RT representative
10. Obiora Dibia, Yao - member at large (formerly Rommell Washington)
11. Storrer, Bob - U.S. RT representative (re-elected)
12. Stuyt, Libby - immediate past president (on board in non-voting capacity for one more year)

Decarcerate Our Prisons With Support From the Spirit of NADA

By Chuck Pyle

These are troubling and scary times as we face an international pandemic and persistent national protests against the fatal consequences of the racial injustice of law enforcement in the United States. It is an even scarier time if you are incarcerated or have loved ones who are.

Following numerous outbreaks of the coronavirus at federal prisons and immigration detention facilities, the Judiciary Committee of the U.S. Senate held a hearing on June 2, 2020, On Examining Best Practices for Incarceration and Detention During COVID-19. During the hearing, Sen. Kamala Harris stated, “When we are having this discussion, this is not only about the failure to protect detained people from coronavirus and in that way a humanitarian issue, it is also a racial justice issue, and we have to acknowledge it as such.”

The American Civil Liberties Union and the Prison Policy Initiative recently did a survey to determine how states have responded to COVID-19 in its jails and prisons and found that nine states were given a grade of D-, with 41 states receiving a failing grade. Clearly, we are failing to meet both the humanitarian and racial justice issues presented by COVID-19 in our prisons where, as of June 22, 2020, at least 570 incarcerated people and 50 correctional staff have died of COVID-19-related causes.

A logical and widely recommended strategy to reduce the spread of infection in jails and prisons is to decarcerate – to substantially reduce the size of our jail and prison populations. This would remove people from these crowded and unsanitary spaces and leave more room and flexibility for those left to live and work there. Jails have seen significant reductions in populations because, in consideration of social distancing, law enforcement is making far fewer arrests. However, most states have resisted releasing people from prison in response to the epidemic.

In early April, the Oregon Department of Corrections identified 2,836 inmates as having met the criteria for possible early release, but Oregon prosecutors opposed “the mass release of prisoners because it was

“Oppressors do not get to be oppressors in a single sweep. They manage it because little by little, we make them that. We overlook too much in the beginning and wonder why we lost control in the end.”

-Joan Chittister

potentially damaging to crime victims.” It is doubtful that any significant percentage of the 2,836 prisoners had convictions with identifiable victims, but this ill-reasoned pressure from prosecutors led Gov. Kate Brown on April 14, 2020 to decide not to release any prisoners. Subsequently, Oregon’s maximum security prison became the site of that state’s largest outbreak of COVID-19.

Between February and June 2020, Arizona’s prison population of about 41,000 was reduced by less than 200 as Gov. Doug Ducey refused to release prisoners early in response to the COVID-19 crisis. By July, Arizona had one of the highest COVID-19 infection rates in the country, and 12 state prisoners had died of COVID-19-related causes.

This reluctance to release prisoners in response to a crisis is particularly troubling when the need to reverse the harms of mass incarceration has been widely recognized in recent years. Additionally, there has been a national problem of prisons being unable to fill correction officer positions. A December 1, 2019 National Institute of Justice report indicated some states reporting 50 percent correctional officer vacancy rates and officer turnover rates as high as 55 percent.

While lack of progress at reversing mass incarceration has been disappointing, failing to decarcerate is unacceptable. There are severe and dangerous staffing shortages, a highly contagious and potentially fatal virus pandemic, and persistent, widespread protests against the racial injustice of our system to enforce our criminal

aws, disproportionately imprisoning people of color.

NADA has always appreciated and responded to the interconnection between health and social justice, going back to the early days of Lincoln Detox. These troubled times desperately call for that understanding. The NADA community needs to advocate widely and forcefully that considerations of humanity and racial justice must finally overcome fear so that significant numbers of people can be removed from prison and returned safely to community.

We also need to coordinate with service providers, nonprofits, churches, and families of incarcerated people to show political decision-makers that we are prepared to support those who are released in that difficult transition. In Arizona, I am advocating that 10 percent of the state prison population (approximately 4,000 prisoners) be released within 90 days and 20 percent of the prison population be released within one year. My main goal is to get the prison population below 30,000 within two years.

NADA is an important part of the behavioral health response to the trauma of pervasive racial injustice, the COVID-19 pandemic, and the failing and unresponsive

corrections system. For now, we may need to rely more on beads and seeds than needles, but we must stay involved. In this time of the collision and interplay of multiple crises, all of us need a zone of peace, and our communities need everyone finding their own inner strengths to contribute to our quest for healing, recovery and justice. Let us find our voice, empty our prisons and comfort our communities with beads, seeds and compassion. ☯

To contact: pyle.charles@gmail.com



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Membership Café

With Nancy Smalls and Ralph Raben



Ralph Raben and Nancy Smalls got together this past May at the Membership Café to talk about the NADA protocol and its use with mothers and children. Nancy founded the award-winning Maternal Substance Abuse Services Program in 1987. In 1995, Ralph, an ob/gyn and acupuncturist in Hamburg, Germany, came to Lincoln Recovery Center at the behest of two of his clients in Hamburg to learn more about the program.

Before the café, Ralph wrote to us saying that he visited Lincoln because he was curious as a doctor and as an acupuncturist. He wanted to learn how to treat drug-dependent pregnant women sensibly and effectively with ear acupuncture, and not just with methadone. He learned from Michael Smith, Carlos Alvarez, and especially from Nancy Smalls, who had helped in the process of developing the NADA protocol. He could see that Nancy coped well with stressed pregnant women. Her program used ear acupuncture in this special NADA style, and with care and advice also for expectant fathers. He added, “Nancy had a lot of professionalism, temperament, a warm heart and a cool mind.”

Ralph said that he saw NADA was safe and effective. And that “pregnant women liked this simple treatment and would like to come back week after week. The women learned to cope better with stress through the NADA protocol, were better able

to sleep and to reduce or omit their substance consumption. Or no more smoking cigarettes. And the children were in a better condition after birth. I learned from Nancy and later from Jo Ann Lenney that even stressed newborns and stressed children can be treated safely and easily with acupressure pearls.”

He said that back then, he was curious, saw everything with his own eyes, and was convinced. And, since then, “We have treated thousands of people in our clinic in Hamburg for 25 years. I learned that first from Nancy Smalls and the Lincoln team. We both never noticed any negative effects of NADA on pregnancy.”

During the café, we asked Nancy and Ralph about the effect of the acupuncture on their clients. Nancy told us that it was a simple, daily, well-accepted treatment, and it enabled the clients to listen more – and to have a better understanding and acceptance of “corrective criticism.”

She also told us about a family court judge who came to the program and noted that the clients who took acupuncture had a better countenance – and they appeared to be more calm and more friendly.

Ralph added that the women in the acupuncture program were more concentrated, more alive, more “equilibrated.” He said that they were more alert and aware of their babies, adding that that resulted in better

effects on the babies – and on their families who were also able to get the treatment.

Both Nancy and Ralph said that neither of them had ever seen any adverse effects on the women or babies from the acupuncture, and they both emphasized the NEVER. It is a short, simple and effective treatment – nice and friendly. Ralph noted that the clients thanked them for the treatment and often brought them flowers.

They added that the NADA protocol could be used at any time in the pregnancy. Ralph said to start when the pregnant woman shows up. The woman usually gets an ultra-sound, and when she sees that the baby has a heartbeat, she is more willing to do whatever it is to make things better for that baby.

Ralph talked about the newborns who were withdrawing from methadone. Using seeds with these babies enabled the medication dosage to be lowered and at times to be discontinued altogether. They then started using the magnetic beads on older children to great effect. The children thought of the beads “as a gift” and not as a treatment. Nancy told the story of “Danny,” the 6-year-old son of one of her clients. The boy created havoc at Lincoln, pulling fire alarms

so many times that the fire department threatened not to come out anymore, flooding the building by stopping up the sink in the men's room, and causing chaos by pushing all the buttons in the elevator – all eliciting cries of: “Ms. Smalls, he's loose again.”

One day, Frank Lucky, a lab technician at Lincoln, came into Nancy's office dragging Danny along with him, asking “Whose kid is this?” Apparently Danny went into to Frank's office and told him, “I'm going to f__k you up.” This caused them to bring in “the bead lady” to administer some magnetic beads.

His mother told Nancy that Danny was asleep before they were half way home, and he came in to Lincoln the next day a new kid. Whenever the beads came off, Danny would come and ask to have them replaced. As with a lot of her clients, Nancy has stayed in touch with Danny's mother – she learned that he has held onto to his new “approach to life.”

Most stories are not as interesting as this one, particularly if they're not being told by Nancy Smalls, but there are numerous stories of lives being changed by the NADA protocol – with needles and beads. As Ralph said, “Acupuncture makes the body stronger so it can do what it has to do.” 🐉



Ralph on the
May Membership Café

June 2020 Membership Café

“It's Legacy Time” With Ken Carter



Ken on the
June Membership Café

Ken Carter was the guest of our June Membership Café after just being voted on as president of the NADA board, a position he previously held from 2006-11. At the café he told us about his first introduction to Lincoln when he had decided to take a year off from his medical studies to travel around the States looking for medicine that had its roots in Black and Brown medicine. His mentor directed him to Lincoln saying it had a “multi-cultural approach.” At the time, Ken didn't want to go, but he now says that being at Lincoln was one of the most transformative experiences of his life. He went on to study psychiatry, public health and acupuncture, and still believes that, for most things, NADA is just as good as pharmaceuticals – and with no side effects. He emphasized that in almost 50 years of use, there has not been one adverse effect from the NADA protocol.

He refers to that time in 1982 as the Golden Age of Lincoln. There was no separation between the local people, people who traveled to get there because of their physical pain, and people with substance use problems. It was here that he met Dr. Michael Smith who Ken called a

“phenomenal guy, one who gave from his heart – and from his pocketbook” to help anyone who needed the help.

Ken started his training at Lincoln expecting to be given medical studies to go over. But instead, the first thing that happened was he was given a NADA treatment.

He sat there for about an hour, and woke up feeling as though he had spent the day at the beach – the beach being one of his favorite places. Mike then asked him to give a treatment to a client who was suffering from paranoid schizophrenia and who was having active auditory hallucinations telling him to commit suicide. With a bit of trepidation, Ken gave the man a treatment and when he woke up a half hour later, he was a different person. The voices were still there but had lessened and were no longer telling him to kill himself. And he kept coming back for treatment – without anti-psychotics. Ken tells us that that man was an oracle for where Ken's career was headed.

He added that since then NADA has moved more into the mainstream – and when you move into the mainstream you gain some things but lose others. We should still be very comfortable with NADA being used as a folk medicine during disasters – it is a rock solid method which can be used by nurses and doctors but also by every community worker out there.

Ken emphasized that the legacy from the past should be carried forward. The answers are already there. We are about caring for the community,

returning to values of broad benefit across the whole continuum of healthcare – helping staff as well as patients.

We inherited this tool to help most people, most of the time. We should determine the strategy of achieving this goal – and then do it.

When it comes to the idea of the Spirit of NADA, Ken echoed Mike Smith – “The Spirit of NADA is service. People grow and we grow through the people we serve.”

Words From the Founder

You can only teach if you are “registered,” but we know that there many dimensions of skill and access to the learning process. We obsess over membership in the “teacher caste,” much like the British colonials in the past. Diversity can sink into a system of rigid separation as it leads toward social death. Or it can rise toward tolerance and multi-potential learning that is part of real growth.

Michael Smith

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Remembering Ellinor Mitchell



Ellinor Mitchell (left) with Jeannette Robinson, Nancy Smalls and Carlos Alvarez.
Photo courtesy of Carlos Alvarez.

Ellinor Mitchell is a familiar name in the NADA community – she is the author of *Fighting Drug Abuse With Acupuncture* (1995), which chronicles the beginnings of Lincoln Recovery Center in the Bronx and the development of what came to be known as the NADA protocol. Ellinor Mitchell died November 1, 2019 in York, Maine, at the age of 89.

In an Amazon.com review, acudetox specialist William Conner describes the book as a “a must for acudetox students and practitioners. The history and background of acupuncture as a treatment for substance abuse is given in detail. How acudetox came into being and the National Acupuncture Detoxification Association. As a certified acudetox specialist, I found this book to be informative and useful and have let patients read from it as they are detoxifying.”

Below are several excerpts from the [Vineyard Gazette's obituary](#) of Ellinor Mitchell, published on June 3, 2020:

“An outspoken liberal, she immersed herself in the fractious 1960s, plunging into the chaos of the Vietnam antiwar movement. She devoured the New York Times war dispatches of Neil Sheehan and David Halberstam, furiously annotating their clips, which she then copied and mailed out to family members. Decades after the war was over, the wall of her study in New York still

bore faded clippings with Saigon datelines, Ellinor's notes filling the margins.

“In the early 1970s, Ellinor got involved with Ray Gordon's Cell Block Theatre, a program he designed to help ex-offenders through drama therapy. The theatre did workshops in prisons in New York, New Jersey and Connecticut.

“Ellinor thought of herself primarily as a writer and in 1987 she published her first book, *Plain Talk About Acupuncture*. She followed it in 1995 with *Fighting Drug Abuse with Acupuncture: The Treatment That Works*. Recently, a caregiver browsing the bookshelves in Laura Mitchell's house found a binder of poems Ellinor had written between 1950 and 1985. The poems, apparently unseen for decades, touched on the various subjects that interested her when she was young.”

Ellinor was very well-regarded and accepted by the staff at Lincoln – as is evident in the picture above. Nancy Smalls, founder of Lincoln's Maternal Abuse Substance Services program, said that Ellinor was a very caring, lovely and compassionate person. “She taped all her interviews at Lincoln because she wanted to get everything down right – without any of her own shavings in the mix.”



Ellinor Mitchell

Carlos Alvarez, NADA trainer at Lincoln of several decades, seconded that opinion about Ellinor saying she was “a sweet, gentle soul.” He added that “she really listened – and she heard what you said.”

NADA will organize a book club focused on the reading of Ellinor's book – look for an announcement in the early fall on [acudetox.com](#) and on our Instagram and Facebook pages. 🌸

You ask, we answer.

In this column, we provide responses to questions NADA receives from its members and the public.

Q Who can become a member of NADA? Is there an ear bead training available?

Answer: Anyone can join NADA. If they take the ADS training, they are eligible to be an acudetox specialist.

Regarding the beads, there are no limitations on who can use magnetic beads or seeds, as far as we know. The children at Lincoln used to ask to take them home to treat their family members and friends. People in prisons are being shown how to use them on their fellow prisoners. One of the many reasons Michael Smith liked the magnetic beads so much is that there are no restrictions on their use – and he was adamant that there should never be any.

We support people teaching people how to administer and self-administer a bead or seed on the shen men/reverse shen men zone on the ear, without creating new trainings and requirements. The Spirit of NADA is the spirit of service. [See our new ear acupressure visual teaching tool to share with others.](#)

Q Would you please provide me with the specific requirements that I need to complete my ADS training?

Answer: The NADA board has extended the period that trainees have to complete their clinical practicum from 12 to 24 months, as it is not feasible for most to provide treatments to clients or community members under the supervision of another acudetox specialist during and respect the need for physical distancing.

Once you can complete the clinical practicum, then submit your treatment log, and any other additional requirements from the training, back your trainer. If you cannot locate their contact information, feel free to reach out to NADA at membership@acudetox.com. We are here to help.

Q I would like to ask if anyone has started giving NADA trainings again?

Answer: A couple of months ago, the NADA board

approved for trainers to try out doing online NADA training. After consulting with an attorney, they decided that no teaching of needling would be allowed in the online training format. Right now this is being considered a pilot program and trainers can apply to lead online NADA training through the end of the year. Then the group will reconvene and discuss how those trainings went and whether we should continue to provide the classroom part of the training that way.

A big concern people have is how far apart will the classroom part be from the needling part, and how much information will need to be re-taught. There are many unknowns, so we are just taking it a step at a time at the moment, and then we'll do our best to learn from the experience.

Separate from doing NADA training we are very much encouraging in general the self-administration of beads & seeds on reverse shen men/shen men. We just put out some resources for that on our [Instagram](#) (@spiritofnada) and [Facebook](#) pages. Feel free to share. 🐾



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NADA Quarterly News
Spring 2020

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SOUTHWEST REGIONAL MEETING 2020

VIRTUAL

THURSDAY, OCTOBER 15, 1-4PM MST