

Acupuncture in the Public Health Setting

By Kristen E. Porter, MAc, LAc and Beth Sommers, MPH, LAc Acupuncture in the Global Village: The Guatemala Acupuncture and Medical Aid Project



This column periodically interviews acupuncturists who are involved in communities throughout the world to learn more about their work. This month, we are highlighting the work of the Guatemala Acupuncture and Medical Aid Project (GUAMAP). Based in Tucson, Arizona, GUAMAP is a 501(C)3 not-for-profit agency that formed in 1994 to train health workers in Guatemala.

GUAMAP's mission statement describes their purpose: "To empower rural community health workers in Guatemala to apply and teach the science of acupuncture in their communities." The organization's goal is to provide remote settlements in northern Guatemala with access to a form of sustainable, low-cost, low-technology, effective health care through the use of acupuncture.

GUAMAP's partner is the Asociacion de Servicios Comunitarios de Salud (Association of Community Health Services - ASECSA), a nongovernmental, nonprofit organization that is the leading provider of rural health care training throughout Guatemala. ASECSA has more than 25 years of experience in addressing the public health needs of rural Guatemalans. Their training for "health promoters" (community members who function as the "barefoot doctors" of Guatemala) included a course on acupressure, even before the formal working relationship between the organizations was initiated. "This alliance has been crucial in securing trust and ensuring that our organization is functioning in accordance with local people's wishes, without imposing itself on the Guatemalans," states Blake Gentry, MPPM, who co-founded GUAMAP with Laurie Melrood, MLSW, and Ron "Doc" Rosen, Dipl. Ac., CH, OMD.

With only nine doctors for every 10,000 people, health care services are only available to the 60 percent of the population that live in or near a city. Diseases associated with poverty are the leading causes of death - pneumonia, gastrointestinal infections, perinatal conditions that claim the life of the mother, and malnutrition. Most rural residents live in small communities of 500 or fewer, and must walk for hours to reach a medical clinic. Medical needs of people in the rural areas are largely covered by nursing aides, rural health technicians, midwives, and unsalaried community health promoters.

Community-Based Health Model

ASECSA is based in the Peten region of Guatemala, a semi-tropical and savannah-laden area that comprises a third of Guatemala's land base. Because most communities are situated more than four hours by bus from any town, settlements rely on community health promoters for almost all of their health care needs. Medicines are costly and often purchased on a day-by-day basis; the basic needs of food, shelter, and other necessities often force individuals to choose how to allot their meager funds.

Training for health promoters is mainly provided through ASECSA, which has 71 health programs throughout the country. Community health promoters are selected through their local areas to provide health care in local clinics.

GUAMAP's Health Training Program

At the request of one of the local communities, GUAMAP formed to train health promoters in basic acupuncture techniques to address common acute and chronic disease conditions such as diarrhea, digestive ailments, arthritis, headaches, malaria, and gynecological conditions. To date, 125 health promoters have been trained in acupuncture; these individuals are members of eight different communities in the Peten area.

GUAMAP recruits experienced and accredited Spanish-speaking acupuncturists in the U.S. and other countries to teach acupuncture in various communities throughout the Peten region. Acupuncturists who are interested in learning more about volunteering can check the group's Web site, listed below, for details.

The curriculum consists of the following levels: introductory concepts, primary level, secondary level, diagnostics courses with emphasis on the *zang* and *fu* organs, and training new trainers. Health promoters who become trainers go through a series of clinically based experiences as well. All levels of training are designed and certified by GUAMAP acupuncturists in accordance with a TCM-based curriculum and standards established by GUAMAP.

One promoter has advanced through the process, and now provides the introductory training course in acupuncture and monitors other trainees' progress, as well as distributing supplies. He reports to both GUAMAP and ASECSA. Patient records are routinely reviewed by GUAMAP to determine changes in prevalence of illnesses and specific characteristics of the community residents who use acupuncture. Information is also used to develop the training curricula.

Challenges and Next Steps

After GUAMAP's successful first decade, organizers have elaborated planning to continue and expand their work. Developing a sustainable method of needle supply distribution is a key element. A commitment from colleagues in the U.S. to support

these efforts is essential to ensuring a continuing supply of equipment. "Although U.S. suppliers such as Helio and OMS have been generous with GUAMAP, the need for a viable low-cost supply of needles is the largest barrier to ongoing expansion", Gentry reported. Securing financial sponsors for support of international health training and research is also an important objective. Sponsorships for translating educational materials into the native language of Maya Keqchi (imagine seeing sections of *The Yellow Emperor's Classic of Internal Medicine* in Keqchi!) are one type of support needed.

Although the Guatemalan Ministry of Health installed a progressive alternative medicine policy, it does not yet cover acupuncture. "Lack of formalized regulation is a detriment to effectively expanding and building capacity," Jorge Ibarra, MD, a member of GUAMAP's board of directors, told us. Assisting health promoters to establish a more formal network that specifically includes acupuncture practice is a key element of nourishing the continued vitality of the project.

After celebrating more than a decade of service, GUAMAP looks forward to continuing to meet the needs of Guatemala's rural poor through training health promoters. As more supporters of acupuncture in the U.S., such as schools, local and national associations, and providers ourselves recognize the role of acupuncture in global health, the frontiers of our practice can expand and truly transcend borders.

Late-Breaking News

Dr. Carolina Salazar, Director of the Peten office of ASECSA, has begun a dialogue with GUAMAP about the process of working with the Guatemala Ministry of Health to formally recognize acupuncture practice in their country.

To contact GUAMAP, visit www.guamap.org or send an email to guamap@theriver.org. Colleagues from GUAMAP may be contacted electronically (e-mail: guamap@theriver.com) or via their Web site, as well as by phone (520-623-6620) or fax (520-624-0736).

Kristen E. Porter, MAc, LAc, and Beth Sommers, MPH, LAc
Boston, Massachusetts bsommers@pathwaysboston.org kporter@pathwaysboston.org
www.pathwaysboston.org

Editor's note: If you would like to comment on Ms. Sommers' and Ms. Porter's article, please contact *Acupuncture Today* by fax (714-899-4273) or e-mail (editorial@acupuncturetoday.com). You are also encouraged to discuss this article on their "Talk Back" forum at www.AcupunctureToday.com/columnists/portersommers.

