

World Medicine: Taking Acupuncture to Palestine

Abstract

World Medicine is a non-religious and non-political charitable organisation which provides complementary and alternative healthcare to people who are suffering the effects of trauma, disaster and poverty. Since May 2008, World Medicine has organised four trips to Palestine. The first three were to Nablus and then in October 2009, a group of eight acupuncturists and physical therapists went to Gaza. This article is composed of personal reflections from some of these practitioners as well as from a doctor in Gaza. The initial purpose of the trips - as well as to provide acupuncture and bodywork for Palestinians - was to assess the appropriateness of such forms of therapy for a populace suffering from a wide range of acute and chronic physical and psycho-social problems, many of which are stress induced. The response has been so positive that World Medicine now hopes to set up a more permanent base in Palestine.

By:

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Gaza

Kate Thick

Organising the trip to Gaza proved to be far more complicated than to the West Bank. But what a remarkable two weeks it proved to be. We had a fantastic group and the whole trip felt blessed. Most striking, besides the people we met and the clinical work, was that we actually got into Gaza. For this we have to thank Sandra Milkovic of UNOPS who met us at the border and somehow got us through.

At the time of our visit it had been nine months since Israel's assault on Gaza but the economic and military siege was clearly ongoing. This is a conflict seemingly beyond the reach of regional or international peace efforts. Gaza is spiritually and politically distant from the West Bank; a further fracturing of a society causing an additional layer of trauma.

A Gaza community mental health programme survey this year found that about 75 per cent of children over six were suffering from symptoms of post-traumatic stress disorder following the war in January 2009¹. Girls are becoming more anxious and depressed whereas boys are more hyperactive. Gaza is geographically small but very heavily populated. Overcrowding and poverty are leading to a mental siege too, resulting in a heightening of anxiety, aggression, depression and family tension.

Gaza's population lives on less than a dollar a day. They are increasingly aid-dependent and three-quarters of Gazans rely on food handouts. Save the Children reports seeing newborn babies suffering from malnutrition and anaemia². There is insufficient clean water and electricity, and no means to rebuild homes, schools and hospitals. Water pollution is

causing skin diseases and bacterial infections in children. Educational standards - something the Palestinians have always prized - are falling.

The Union of Health Care Committees (UHCC) staff could not have been more gracious and welcoming. They provided everything we needed and took care of us magnificently. There was sufficient space for the practitioners to treat in pairs or individually, as well as for a couch and screen in most of the rooms. However, the demand for treatment was so great that two additional rooms were converted for clinic use.

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Besides the clinical provision, Dr Raed and Ibrahim Sourani had arranged our accommodation and transportation. Every morning we would be collected from our apartments (a building for 'internationals') near the beach and taken to the clinic. The atmosphere of the clinic was wonderful. But it was sobering to walk past the bombed mobile clinics on our way to the main building.

We had planned to spend nine days in clinic but the UHCC could not announce our presence until we actually arrived so a day was lost at the beginning and a half day at the end, given our unplanned early departure. Nevertheless, in 7.5 clinic days we gave approximately 1,700 treatments. There were several patients we saw up to four of five times. One day was particularly heartbreaking. A near riot broke out as hundreds had been waiting since dawn, but we just could not see everyone.



Figure 1:
Gisela Norman
teaching
auricular
acupuncture
to Dr. Raed
Sabbah

We attempted to fill in a record sheet for each patient, which the clinic kept at reception. The plan was to bring them back with us for statistical analysis, but we left in a great hurry - the Israelis were closing the crossing so we had to leave a day early with only an hour's notice.

The translators worked very hard over the two weeks in circumstances that were quite new to them and a wonderful team spirit developed. They helped with the patient sheets (name, age and major symptoms) and we tried to write treatment details on all of them or make notes of any changes/improvements as far as was possible. We can only hope to retrieve the sheets at a later date. The importance of collecting data cannot be overemphasised and we hope that researchers can join our team when we return to Gaza in March 2010.

The volume of patients meant there was no way we could see everyone individually so we treated in groups (of men and women separately) seated in a circle. Some of the practitioners used basic protocols that were amended according to the presenting symptoms. There was much discussion as to the adequacy of this approach to treatment so it is a great shame that the record sheets are as yet unavailable.

We saw a lot of injuries from the war, musculoskeletal problems and headaches (many from traumatic incidents or general stress), sinusitis and rhinitis, and a surprisingly high percentage of patients with obesity and diabetes. The nature of the diet - with lots of oil, bread and sweet foods - as well as their constrained lifestyles (there are almost no exercise facilities) are the two major causes. We saw several children with severe problems from birth; in fact the number of children with congenital problems has increased dramatically since the war. The psychological and emotional problems were often less evident unless

you were able to hear their life stories. The resilience of the Palestinians is extraordinary but without doubt the stress they endure plays a huge part in the diseases from which they suffer.

Gisela Norman provided training in auricular acupuncture to the UHCC doctors, primarily for helping them cope with the mental and emotional complaints associated with post traumatic shock. They swiftly mastered the aims, safety standards, needling considerations and procedures. They practised on one another and ear magnets were left in some of the points over a few days. The feedback was excellent. The following day in clinic a couple of the doctors told Gisela that they felt very good and relaxed and had rarely slept so well. We hope to continue with this training in subsequent trips.

Kath Henderson

This was my first venture doing this type of work and I have to admit I was quite anxious, particularly as I did not know any of the team. I have to say that it proved to be the greatest experience of my life. The group bonded very quickly and felt like a new family.

This was the first time I had treated more than one patient at any one time, and it became clear by the end of the first day that I would have to change my usual treatment strategy if I was to manage such a large number of patients. It seemed sensible to devise some simple treatment protocols that could be adapted to the signs and symptoms presented by each patient. I was amazed at the positive feedback from what were very simple treatments using common points including Sanyinjiao SP-6, Zusanli ST-36, Yanglingquan GB-34, Hegu L.I.-4, Quchi L.I.-11, Shenmen HE-7, Taichong LIV-3 plus Hegu L.I.-4 and local and ashi points for musculoskeletal problems. I learnt that often it is the simple treatments that give the best results.

I found that the majority of patients (I saw only women) suffered from painful conditions relating to musculoskeletal problems. They rarely came in with just one problem, but with multiple complaints. It was usual to treat both knees, one or both shoulders and the neck region. Pain was frequently reported in the upper arm and chronic back pain was common. Most of the middle aged and older women had weight issues that must have contributed to their conditions.

Comparing the outward appearance of the sexes, I felt that the women appeared to be faring less well than the men. In particular the young women with children frequently had an unhealthy grey skin tone, appeared physically exhausted and their eyes had dark circles below them and were often devoid of emotion. Most of the patients I saw required treatment



Figure 2:
Treating
Palestinian
children –
despite limited
space!

on an emotional level and appeared to be suffering from a degree of shock.

I was amazed to learn that patients were waiting at the clinic from 4am for treatment; it was therefore not surprising that there were problems with crowd control.

The people of Gaza were amazingly welcoming and it occurred to me that the less people have the more they want to give. The Israelis were also very helpful to us, informing us of their need to close Erez crossing the day before we were due to leave. This meant we sadly had to leave a day early, but without their co-operation we would have missed our flight home. If any practitioner is thinking about volunteering to go to Gaza I would say ‘just do it.’ It will be the most challenging, emotional and rewarding experience.

Louisa Proctor

I don't think anything quite prepared me for my experience in Gaza. I did have a preconceived idea that it would be a tough two weeks, but despite the obvious dangers involved I always felt I was going to be fine. And I was. In fact, there were times that were positively joyful and life-affirming. Clinic was hard work. We managed to treat hundreds of patients but the sheer numbers could be overwhelming. However, I like to think I was present for each and every one of the patients. I was surprised how much I learned from the trip. I feel I have emerged a stronger person, less likely to sweat the small stuff. I didn't come back feeling traumatised, I came back with a renewed interest in acupuncture, especially micro-system acupuncture. I feel it is useful in treating large numbers of people quickly. I felt privileged to have shared this extraordinary experience with like-minded people in my group.

Dr. Raed Sabbah, MD, MPH, Head of Board, Union of Health Care Committees, Gaza

From our records, 945 patients visited the Gaza clinic whilst you were here and overall 1634 treatments were given. This number is a remarkable record compared to our day care services

in conventional medicine. The feedback from those patients who attended the acupuncture sessions is very positive and encourages us to work hard for your future visits to Gaza. I would appreciate your efforts to continue mobilising specialised teams of acupuncturists at the same level of experience that visited Gaza recently. I would also like to propose longer visits and especially long term visits by specialised acupuncturists in different areas including, but not limited to, paediatrics, orthopaedics and women's care. And I would like to affirm again that your training [NADA protocol] of 18 members of the medical and paramedical staff was of great value. It generated a lot of discussion on the importance of acupuncture as complementary medicine, and how it positively affected our patients with good progress to their health. From our side, we will maximise our efforts to facilitate your future visits to Gaza and you can utilise all our resources to make your visits successful.

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Nablus

Di Shimell

There have now been three trips to Nablus in the West Bank by acupuncturists as part of this establishing project. I have been on two of those trips, the first in January 2009 (during the Gaza war), and the second in June 2009.

On my first visit I had only been practising for six months and the first morning of treating was pretty terrifying, but I just had to get on with it when I was presented with a roomful of ten Palestinian women - many of them as nervous as I was. The experience of

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being in the West Bank at the point of the war on Gaza was one that greatly affected me, and will ensure that I will continue to return to provide what skills I have to offer. I saw strength and humility in the people that we worked with, although little optimism for the future.

The trips to Palestine have affected the way that I practise in the UK. The main difference was witnessing the benefits of treating in a group. Since my return I have - with a colleague - set up a multi-bed practice, the first in Sheffield. The second was the development of my interest in the treatment of children; we did what we could as a group for the children who came to the clinic - some with great success - but to go back with more knowledge and understanding of the treatment of children would benefit everyone.

Jess Buck

I have been fortunate enough to have participated on two trips to Nablus in the West Bank. I learnt a great deal from these visits and feel forever grateful for the experiences I had there. It was challenging on a number of levels, but intensely rewarding at the same time. Conditions were far from ideal, but we still managed to provide effective treatments. The whole experience illustrated the power of acupuncture as a medicine. We were only able to administer very simple treatments and had little time for each patient and limited communication because of language difficulties. I was forced to put aside my set and comfortable methods of treating and make do with what we had available. I was pleasantly surprised at the outcomes. A greater level of flexibility permeates my practice now, which is very refreshing. The second trip in June '09 really heightened my resolve to continue supporting this project. The fact that we were so warmly welcomed and encouraged to come back illustrated how worthwhile people found the treatments we were offering. Many of the same patients from the previous trip returned and it was lovely to see some familiar faces and hear how people had been since we last saw them. It was also fascinating for me to witness and carry out acupuncture in a group setting. Many of the patients knew each other and so the sessions often turned into a time to gossip, laugh and catch up. This was a far cry from the stillness and focused intention I had been taught and conditioned to practise with back home. Whilst at times this 'social gathering' atmosphere did get quite chaotic, there were moments of real stillness and a sense of collective, communal healing. Having visited

Nablus twice now, it feels all the more important to establish a sustainable, rolling project there. The need is great, the awareness of acupuncture heightened and the conditions favourable to this. It would be nice to teach the healthcare workers in Nablus the basics of auricular acupuncture in order to maintain some type of consistency for when we are not there. On our last trip people were constantly asking us when we would return and it would be a real shame not to find ourselves back there to carry on where we left off. ■

World Medicine intends to return to Gaza in March 2010 and to Nablus in late April 2010. If you are interested in volunteering, contact World Medicine at info@worldmedicine.org.uk or see www.worldmedicine.org.uk for more information. In order to continue to provide services in the Middle East and elsewhere in the world, World Medicine needs financial support; see our website for details of how to donate. World Medicine is organising a training day in 2010 for practitioners interested in this type of work - keep an eye on the events calendar at www.jcm.co.uk for details.

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References

- 1 *The Guardian*, G2, 17.12.09, page 8.
- 2 *The Guardian*, G2, 17.12.09, page 10.