

# The Thermometer Times

Published by The Manic Depressive and Depressive Association of Riverside, California

VOL. 10 NO. 8

Out of darkness . . .

AUGUST 2000

## Dates to Remember

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### RAP GROUPS

Saturdays, August 12, 19 and 26,  
10 am – 12 noon  
Riverside County Mental Health  
Administration Building  
(see page 9 for address)

### EDUCATIONAL MEETING

Saturday, August 12,  
10 am – 12 noon  
Riverside County Mental Health  
Administration Building  
Guest Speaker:  
Leann Heilman  
Assertiveness  
Questions Welcome



IT IS ESSENTIAL  
TO BE ON TIME  
in consideration

for others in the group. In fact,  
please come early to socialize,  
sign in, or help set up the room.

### Directions to

#### Jo Ann Martin's Home

Exit 91 Frwy at Van Buren. Go  
south 4.2 miles on Van Buren to  
Whispering Spur. Turn left.



2nd  
driveway  
on right

16280 Whispering Spur,  
Riverside, CA 909/780-3366

## A World Apart

BY DR. KAY REDFIELD JAMISON

NEWSWEB: SPECIAL ISSUE  
SPRING/SUMMER 1999

I WAS A SENIOR IN HIGH SCHOOL WHEN I FIRST BECAME ILL WITH A SEVERE FORM OF MANIC-DEPRESSION, A GENETIC ILLNESS CHARACTERIZED BY TEMPESTUOUS MOOD SWINGS AND CYCLING BETWEEN VOLATILE ECSTASIES AND SUICIDAL DEPRESSIONS. I WENT ON TO STUDY THE ILLNESS I HAD TWENTY YEARS LATER, IMAGINED NAMELY—BECAUSE I HAD BEEN A PATIENT, CLINIC DIRECTOR AND PROFESSOR IN A PSYCHIATRY DEPARTMENT—THAT I HAD HEARD MOST OF THE JOES ABOUT MENTAL ILLNESS. I THOUGHT I UNDERSTOOD THE PAIN AND THE KINDS OF DISCRIMINATION THAT THOSE WITH MENTAL ILLNESSES EXPERIENCE. THEN IN 1996 I WENT PUBLIC ABOUT MY ILLNESS IN AN ARTICLE IN THE WASHINGTON POST AND I WROTE A BOOK ABOUT IT THAT GOT A LOT OF ATTENTION IN THE MEDIA. I QUICKLY FOUND OUT HOW LITTLE I KNEW ABOUT WHAT OTHER PEOPLE REALLY THINK.

MANY OF MY COLLEAGUES WERE STUNNED, THINKING THAT A FELLOW ACADEMIC COULD SEEM NORMAL AND YET HAVE BEEN SO DEEPLY DISTURBED. THEY HAD BEEN UNAWARE OF MY PSYCHOTIC MANIAS AND SUICIDAL DEPRESSIONS, AND IT SEEMED TO STIR UP DISCOMFORT THAT MADNESS COULD BE SO CLOSE AT HAND. FOR THAT REASON, HOWEVER, IT ALSO STIRRED UP—IN A GOOD WAY, I HOPE—MANY PRIVATE AND PUBLIC DISCUSSIONS ABOUT RECOGNIZING AND TREATING IMPAIRED DOCTORS AND OTHER PROFESSIONALS.

MY COLLEAGUES WITH A FEW DISTURBING EXCEPTIONS, WERE REMARKABLY KIND AND OPEN HEARTED IN WHAT THEY SAID AND DID AND MOST OF THEM STRONGLY BACKED MY DECISION TO BE PUBLIC ABOUT MY ILLNESS. THE CHAIRMAN OF MY DEPARTMENT AT JOHN HOPKINS WAS CONSISTENT IN HIS VIEW THAT MY ILLNESS WAS A MEDICAL ONE AND SHOULD BE TREATED AS SUCH. HE, AS MY CHAIRMAN AT UCLA HAD DONE BEFORE HIM, ENCOURAGED ME TO LEARN, WRITE AND TEACH FROM MY EXPERIENCE. BEING PUBLIC ABOUT MY MANIC-DEPRESSION WAS SEEN BY BOTH OF THEM AS AN EXTENSION OF MY TEACHING.

BUT TALKING OPENLY ABOUT MY ILLNESS BROUGHT OUT A DARKER SIDE OF HUMAN NATURE AS WELL. I RECEIVED SCORES OF LETTERS FROM THOSE WHOSE HATRED OF THE MENTALLY ILL WAS ALMOST UNIMAGINABLY VIOLENT. MANY OTHERS MADE IT PALPABLY CLEAR THEY THOUGHT THE MENTALLY ILL, OR AT LEAST THOSE WITH MANIC-DEPRESSION, OUGHT NOT TO BE ALLOWED TO HAVE CHILDREN, TEACH OR SEE PATIENTS. OTHERS THOUGHT MY PSYCHOSIS WAS PRECISELY WHAT I DESERVED BECAUSE, BY DEFINITION, I WAS NOT A "DEVOUT ENOUGH CHRISTIAN." SOME TOLD ME THEY WERE PRAYING FOR ME.

WHAT HAUNTED ME THE MOST, HOWEVER, WAS THE HUNDREDS OF LETTERS AND TELEPHONE CALLS FROM PEOPLE WHO FELT THEY COULD NEVER BE HONEST ABOUT THEIR MENTAL ILLNESS BECAUSE IF THEY DID THEY WOULD LOSE THEIR JOBS, FRIENDS OR HEALTH INSURANCE. NUMEROUS YOUNG DOCTORS AND GRADUATE STUDENTS WROTE ME ABOUT

continued on page 2 (A World Apart)

**A World Apart (CONTINUED FROM PAGE 1)**

THEIR OWN EXPERIENCES WITH DEPRESSION OR MANIC DEPRESSION AND THE LACK OF SUPPORT THEY HAD RECEIVED FROM THEIR PROFESSORS OR MENTORS. THEY WROTE OVER AND OVER AGAIN THAT IT WAS HARD TO BE HONEST ABOUT MENTAL ILLNESS WHEN THEIR HOSPITAL PRIVILEGES, MEDICAL LICENSES OR ACADEMIC DEGREES WERE AT STAKE. SECRETARIES AND TECHNICIANS, BUSINESSMEN AND LAWYERS, PILOTS AND TEACHERS, POLITICIANS AND ENGINEERS, ALL SAID THE SAME THING: THE PAIN OF THE ILLNESS WAS TERRIBLE, BUT THEIR OWN FEARS AND THE REACTIONS OF OTHERS MADE IT WORSE.

DISCRIMINATION EXISTS. IT IS LESS RAMPANT THAN IT WAS IN THE PAST—THANKS TO BETTER MEDIA COVERAGE ABOUT THE BIOLOGICAL BASIS FOR SEVERE PSYCHIATRIC ILLNESSES AND THE AVAILABILITY OF HIGHLY EFFECTIVE TREATMENTS. BUT DISCRIMINATION STILL EXISTS IN PUBLIC ATTITUDES, PRIVATE RETALIATION, LIMITED OPPORTUNITIES AND A LACK OF FAIR ACCESS TO HEALTH CARE. DISCRIMINATION AGAINST THE MENTALLY ILL IS AN OBSTACLE THAT IS INCONSISTENT WITH A CIVILIZED SOCIETY.

MENTAL ILLNESSES ARE NOT ONLY STIGMATIZED; THEY ARE ALSO VERY COMMON. NEARLY ONE WOMAN IN FIVE, FOR INSTANCE, WILL EXPERIENCE CLINICAL DEPRESSION DURING HER LIFETIME, AND AT LEAST ONE IN FOUR WILL SUFFER FROM MANIC DEPRESSION. THESE ILLNESSES ARE DEVASTATING; THEY CAN ALSO BE FATAL. SUICIDE IS A MAJOR PUBLIC HEALTH PROBLEM, NOT ONLY IN THIS COUNTRY, WHERE IT KILLS MORE THAN 30,000 PEOPLE EVERY YEAR, BUT EVERYWHERE. SUICIDE IS, IN FACT, THE SECOND MAJOR CAUSE OF DEATH WORLDWIDE IN WOMEN BETWEEN THE AGES OF 15 AND 44. ALMOST ALL OF THESE SUICIDES ARE CONNECTED TO MENTAL ILLNESS, AND MOST MENTAL ILLNESSES ARE TREATABLE. YET SUICIDE CONTINUES TO CLAIM LIVES. WE IN THE UNITED STATES ARE FORTUNATE THAT THE SURGEON GENERAL, DR. DAVID SUTCHER, HAS MADE SUICIDE PREVENTION ONE OF HIS FOREMOST PUBLIC HEALTH PRIORITIES. TO THE EXTENT THAT THE COUNTRY LISTENS AND RESPONDS TO HIS LEADERSHIP, ALL OF US WILL BENEFIT GREATLY.

WHAT WE AS WOMEN DO NOT KNOW ABOUT DISEASES OF THE BRAIN WILL HARM MORE EVEN THAN WE NEED TO LEARN THE SIGNS AND SYMPTOMS OF THE MAJOR MENTAL ILLNESSES AGGRESSIVELY SEEK GOOD CARE AND EXPECT THAT OUR DOCTORS WILL BE IN-

*CONTINUED ON PAGE 8 (A World Apart)*

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**NOTE: THE VINCENT VANGOSH QUOTE AND LIFESTORY ARE FROM BITS AND PIECES, VOL. 8, NO. 48.**

**You can call us at  
(909) 780-3366**

Since we have no full-time staff, leave a message and one of our volunteers will call you back. Due to budget constraints, we are unable to return long distance calls unless you give us permission to call you collect.

**The Thermometer Times**

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Please feel free to reprint any of our articles. However, please acknowledge our publication, date, and author or source. It will please the authors and recognize their efforts.

You may now contact us via e-mail at:  
**MDDARIV@AOL.COM**

Due to a serious illness in Jo Ann Martin's family, the 10th Annual CDMDA Conference planned for October 27 & 28, 2000, in San Francisco, has been cancelled.

**See you in at our next conference in Visalia in 2001!**

**Thank you for renewing your memberships and newsletter subscriptions.**

If you find errors on your mailing label, including the renewal date, please contact us at: 909/780-3366

# WINNING HEARTS AND MINDS

MCMAN'S DEPRESSION AND BIPOLAR WEEKLY  
JUNE 21, 2000 VOL. 2 NO. 22

LAST WEEK, THERE WAS TALK ON BOTH DEMOCRATIC AND REPUBLICAN POLITICAL FRONTS OF A MODIFIED FORM OF PRESCRIPTION DRUG COVERAGE FOR ALL, WITH THE US FEDERAL GOVERNMENT COASTING THE HELIXY ROLE AS AN INSURER OF LAST RESORT. BUT DON'T HOLD YOUR BREATH WINNING, WHEN SOMEONE EVENTUALLY TELLS THESE PEOPLE HOW MUCH OUR MEDICATIONS ACTUALLY COSTS, MORE THAN AN OIL LAWMAKER IS BOUND TO EXPERIENCE A SUD- DEN CHANGE OF HEART.

DID SOMEONE SAY HEART? CONSIDER: ABOUT ONE IN FIVE PEOPLE HAVE AN EPISODE OF MAJOR DEPRESSION IN THEIR LIFETIMES. THAT NUMBER CLIMBS TO ONE IN TWO AMONGST PEOPLE WITH HEART DISEASE. ONE POINT FIVE TO THREE PERCENT OF THE POPULATION IS DEPRESSED AT ANY GIVEN TIME WITH HEART PATIENTS, SIX PERCENT.

ACCORDING TO A MONTREAL HEART INSTITUTION STUDY INVOLVING 222 SUBJECTS, DEPRESSED PATIENTS WITH HEART ATTACKS ARE FOUR TIMES MORE LIKELY TO DIE WITHIN SIX MONTHS AS THEIR NON-DEPRESSED COUNTERPARTS. A WASHINGTON UNIVERSITY STUDY FOUND THAT DEPRESSED PEOPLE WITH NEWLY DIAGNOSED HEART DISEASE WERE TWICE AS LIKELY TO HAVE A HEART ATTACK OR REQUIRE BYPASS SURGERY. A RECENT JOHN HOPKINS STUDY INVOLVING 1,431 PEOPLE HAS FOUND THAT THOSE WHO ARE DEPRESSED ARE FOUR TIMES MORE LIKELY TO HAVE A HEART ATTACK WITHIN FOURTEEN YEARS.

IN FACT, DEPRESSION TURNS OUT TO BE A RELIABLE INDICATOR OF RISK, EQUAL TO PREVIOUS HEART ATTACK AND HIGH CHOLESTEROL, AND GREATER THAN HIGH BLOOD SUGAR IN THOSE WHO HAVE DIABETES.

AH, DIABETES. AKA SER PERMANENTE STUDY FOUND THAT THOSE WITH DIABETES WERE MORE LIKELY TO HAVE BEEN TREATED FOR DEPRESSION WITHIN SIX MONTHS BEFORE THEIR DIABETES DIAGNOSIS. ABOUT 81 PERCENT OF DIABETICS ALSO REPORTED

A HIGHER RATE OF EARLIER DEPRESSIVE EPISODES.

MEANWHILE, A WASHINGTON UNIVERSITY STUDY HAS FOUND THAT PROZAC REDUCES DEPRESSION AND IMPROVES BLOOD SUGAR LEVELS IN PEOPLE WITH DIABETES. FIBRINOLYISHTUBES OF TREATMENT.

ACCORDING TO PATRICK LUSTMAN, WHO AUTHORED THE STUDY, DEPRESSION OFTEN GOES UNDIAGNOSED IN DIABETICS, WHO ARE AT TWICE THE RISK AS THE GENERAL POPULATION.

HEART PATIENTS SHOULD BE SOLICIT. A MERCK MEDICAL COLLEGE STUDY FOUND THAT ALMOST NONE OF THE HEART PATIENTS THEY INVESTIGATED WERE ACCURATELY DIAGNOSED OR TREATED WITH AN ANTI-DEPRESSANT. COVERAGE AT MONTH PERIOD. WE CAN PRETTY WELL GUESS WHAT HAPPENED TO THOSE PEOPLE-- ANGIOPLASTIES, BYPASS SURGERIES, PACEMAKER IMPLANTS, AND ON AND ON. DIABETES PATIENTS, IN THE MEANTIME, WOULD BE PERHAPS THE ROUND CHAMBER OF HORRORS.

KEEP IN MIND THAT WE ARE THE AT-RISK POPULATION HERE.

NOW, ASSUME A MERCENARY MINDSET AND SPECULATE HOW MANY HEART AND DIABETES CASES COULD HAVE BEEN NIPPED IN THE BUD, AND THEN TAKE A WILD GUESS AT HOW MANY TENS OF BILLIONS OF DOLLARS WERE WASTING EACH YEAR ON INVASIVE PROCEDURES. IRONICALLY, WE HAVE LITTLE LEFT OVER TO TREAT DEPRESSION, MENTAL ILLNESS, AS WE ALL KNOW, WERE SO FAR IN THE SHORT STRAW.

WHICH BRINGS US BACK TO OUR LAWMAKERS AND THEIR SCROOGE LIKE INSTINCTS. AT LEAST WHEN IT COMES TO THE LIKES OF YOU AND ME. AN ARGUMENT BASED ON COMPASSION AND FAIR PLAY IS HARDLY ABOUT TO UNTHAW THE ICE IN THEIR HEARTS. ENOUGH OF THEM, HOWEVER, MIGHT BE PERSUADED BY THE IDEA THAT EVERY DIME SPENT TO FIGHT DEPRESSION IS TEN DOLLARS OR MORE SAVED FIGHTING HEART DISEASE AND DIABETES.

BUT SOMEONE HAS TO BRING IT INTO THEIR COLLECTIVE HEADS FIRST.

FOR AN ARTICLE ON THE LINKS BETWEEN DEPRESSION AND HEART DISEASE, PLEASE CHECK OUT MY CURRENT SUMMER 101.COM ARTICLE AT: [WWW.SUMMER101.COM/ARTICLE/CAM/309/41789](http://WWW.SUMMER101.COM/ARTICLE/CAM/309/41789)

WWW.SUMMER101.COM/ARTICLE/CAM/309/41789

## BOSTON UNIVERSITY STUDY SHOWS SERIOUS MENTAL ILLNESS NOT CAREER LIMITING

BOSTON UNIVERSITY NEWS, OCT. 23, 1999  
APPEARED IN THE INNOVATIVE, JAN-MAR 2000

CONTRARY TO POPULAR BELIEF, SERIOUS MENTAL ILLNESS IS NOT NECESSARILY A CAREER LIMITING DISORDER. A STUDY OF 900 PROFESSIONALS AND MANAGERS, ALL OF WHOM HAVE, OR HAVE HAD, A SERIOUS MENTAL ILLNESS SHOWS THAT 75 PERCENT WERE ABLE TO ACHIEVE FULL-TIME EMPLOYMENT IN OCCUPATIONS THAT RANGED FROM SEMI-PROFESSIONALS (NURSES, CASE MANAGERS, AND ADMINISTRATORS) TO EXECUTIVES AND FULL-PROFESSIONALS, SUCH AS LAWYERS, PROFESSORS, AND CEOs.

WHILE PAST STUDIES HAVE FOCUSED PRIMARILY ON DYSFUNCTION, THIS IS THE FIRST STUDY OF ITS KIND TO OPEN A WINDOW ON A PREVIOUSLY UNEXPLORED AREA: HOW PEOPLE, DESPITE A DISABLING MENTAL ILLNESS, HAVE FASHIONED AN ENDURING, WELL-PAYING AND MEANINGFUL PROFESSIONAL OR MANAGERIAL CAREER. THIS RESEARCH PROVIDES MORE HOPE FOR OTHERS WHO ARE COMBATING STEREOTYPES ABOUT THE IMPACT OF SERIOUS MENTAL ILLNESS ON CAREERS.

PARTICIPANTS REPORTED A RANGE OF ON-THE-JOB COPING MECHANISMS AND SUPPORTS TO DEAL WITH DAILY PRESSURES. 62 PERCENT TOOK BREAKS, FLEXIBILITY TO MODIFY DAILY ROUTINES WAS IMPORTANT TO 48 PERCENT, AND 35 PERCENT FASHIONED A FLEXIBLE SCHEDULE GETTING BACK TO WORK. PLAYED A KEY ROLE IN THE RECOVERY PROCESS FOR MANY RESPONDENTS.

THE STUDY PROVIDES DETAILED INFORMATION ON THE STRATEGIES USED BY PARTICIPANTS AND HOW THEY HANDLED DISCLOSURE OF THEIR ILLNESS ON THE JOB. MORE INFORMATION ON THE NATURE OF PARTICIPANTS' VOCATIONAL ACHIEVEMENTS, COPING MECHANISMS, AND

CONTINUED ON PAGE 4 (CAREER)

**“Career” (CONTINUED FROM PAGE 3)**

SUPPORT IS ALSO AVAILABLE TO RECEIVE MORE INFORMATION, CONTACT PROJECT DIRECTOR MARSHAL ANGER ELLISON, PH.D, OR ZLATKA RUSSINOVA, PH.D, PROJECT CO-DIRECTOR BOTH AT THE CENTER FOR PSYCHIATRIC REHABILITATION, 67/53379 OR VISIT WWW.UWUW.EDU/SAPSVCH/RESEARCH/53.HTML.

**-THE ROLLERCOASTER TIMES,  
SUMMER 2000**



**NATIONAL DMDA  
OUTREACH  
SUMMER 2000**

**QUESTION: OTHER THAN TAKING MY MEDICATION AS PRESCRIBED, WHAT CAN I DO TO DECREASE MY SYMPTOMS AND IMPROVE THE QUALITY OF MY LIFE?**

**DR. ROBERT N. GOLDEN:** THERE ARE SEVERAL WAYS IN WHICH PEOPLE WITH MOOD DISORDERS CAN IMPROVE THE QUALITY OF LIFE, IN ADDITION TO TAKING MEDICATION. FIRST, PSYCHOTHERAPY CAN PLAY AN IMPORTANT ROLE IN THIS REGARD. INDIVIDUAL PSYCHOTHERAPY, IN PARTICULAR COGNITIVE-BEHAVIORAL APPROACHES, IS HELPFUL BOTH IN MAINTAINING REMISSION OF SYMPTOMS AND IN GAINING A PERSPECTIVE ON THE STRESSES AND INTERPERSONAL TENSIONS WHICH MAY HAVE DEVELOPED AS A CONSEQUENCE OF A DEPRESSIVE OR MANIC EPISODE. MANY PATIENTS ALSO FIND THAT GROUP THERAPY ALLOWS THEM TO FEEL LESS ISOLATED AND LESS ALIENATED ABOUT THEIR ILLNESS AS THEY SHARE THEIR EXPERIENCES AND LEARN FROM OTHERS WHO HAVE SUFFERED AND RECOVERED FROM SIMILAR SYMPTOMS. SECOND, FOR PATIENTS WITH BIPOLAR DISORDER, IT IS IMPORTANT TO UNDERSTAND THE ROLE THAT SLEEP DEPRIVATION CAN PLAY IN PRECIPITATING HYPOMANIC OR MANIC EPISODES. MAINTAINING A REGULAR SLEEP/WAKE SCHEDULE IS QUITE IMPORTANT, FINALLY, AS WITH OTHER MEDICAL ILLNESSES, FOLLOWING HEALTHY PATTERNS FOR EXERCISE AND DIET IS IMPORTANT. THERE ARE REPORTS DESCRIBING THE POSITIVE IMPACT AEROBIC EXERCISE HAS ON MOOD. THERE IS A RELATIONSHIP BETWEEN DEPRESSION AND CARDIOVASCULAR DISEASE, SO ADHERENCE TO HEALTHY EXERCISE AND DIET PATTERNS MAY OFFER PROTECTION FROM THESE ASSOCIATED RISKS.

**ROBERT N. GOLDEN, MD, IS PROFESSOR AND CHAIR OF THE DEPARTMENT OF PSYCHIATRY AT THE UNIVERSITY OF NORTH CAROLINA SCHOOL OF MEDICINE IN CHAPEL HILL.**

**IF YOU HEAR A VOICE WITHIN YOU SAYING, "YOU ARE NOT A PAINTER," THEN BY ALL MEANS PAINT—AND THAT VOICE WILL BE SILENCED.  
-VINCENT VAN GOGH**

**What Do These Famous People  
Have In Common?**

Charlie Pride	Country Singer
Sergey Rachmaninoff	Composer
Bonnie Raitt	Singer
Lou Reed	Singer
Jeannie C. Riley	Singer
Rainer Maria Rilke	Poet
Joan Rivers	Comedian
Theodore Roethke	Poet
George Romney	Artist
Theodore Roosevelt	President
Axel Rose	Rock Star
Dante Rossetti	Poet/Painter

All of them are believed to have suffered from depressive disorders. Yet they are known not for their illnesses, but for their achievements!

**HOW TO LOVE YOURSELF**

**AUTHOR UNKNOWN, SOURCE UNKNOWN  
SEEN IN FOX VALLEY DMDA NEWSLETTER  
JULY/AUGUST 2000**

**1. STOP ALL CRITICISM. CRITICISM NEVER CHANGES A THING. REFUSE TO CRITICIZE YOURSELF. ACCEPT YOURSELF AS FACT. AS YOU ARE. EVERYBODY CHANGES. WHEN YOU CRITICIZE YOURSELF, YOUR CHANGES ARE NEGATIVE. WHEN YOU APPROVE OF YOURSELF, YOUR CHANGES ARE POSITIVE.**

**2. DON'T SCARE YOURSELF. STOP TERRORIZING YOURSELF WITH YOUR THOUGHTS. DISORDERLY WAY TO LIVE. FIND A MENTAL IMAGE THAT GIVES YOU PLEASURE AND IMMEDIATELY SWITCH YOUR SCARY THOUGHT TO A PLEASURE THOUGHT.**

**3. BE GENTLE, KIND AND PATIENT. BE GENTLE WITH YOURSELF. BE KIND TO YOURSELF. BE PATIENT WITH YOURSELF. AS YOU LEARN THE WAYS OF THINKING TREAT YOURSELF AS YOU WOULD SOME ONE YOU REALLY LOVE.**

**4. BE KIND TO YOUR MIND. SELF-HATRED IS ONLY HATING YOUR OWN THOUGHTS. DON'T HATE YOURSELF FOR HAVING THE THOUGHTS. GENTLY CHANGE YOUR THOUGHTS.**

**5. PRAISE YOURSELF. FOR CRITICISM BREAKS DOWN THE INNER SPIRIT. PRAISE BUILDS IT UP. PRAISE YOURSELF AS MUCH AS YOU CAN. TELL YOURSELF HOW WELL YOU ARE DOING. COMPLAINING IS NEVER A LITTLE THING.**

# GOING FROM STILL LIFE TO REAL LIFE, PAINTING EASES TRANSITION

BY MARY MURPHY  
THE PRESS-TRIBUNE  
JUNE 21, 2000

THERE IS A PAINTING ON THE WALL OF THE ADMINISTRATION BUILDING AT PATTON STATE HOSPITAL, JUST DOWN THE MAIN HALL FROM THE RECEPTION DESK--A WHITE HERON AGAINST A BLACK BACKGROUND.

THE IMAGE IS STARK, SIMPLE, BOLD. THE ARTIST COULD HAVE BEEN ANYONE, BUT THIS PIECE, SIMPLY SIGNED GARTH, WAS PAINTED BY A PATIENT HERE. HIS MENTAL ILLNESS SHEEPSHIM FROM LIVING BEYOND THE FENCES TOPPED WITH BARBED WIRE.

ALONG THE HALLWAY THERE ARE OTHER PAINTINGS: ABSTRACT FIGURES SCUPIED FROM A WORK BY MATTHEW STILL LIFE; FRAMES THAT HOLD A COLLECTION OF SMALL PAINTINGS OF INDIVIDUAL FRUITS, ALL DONE BY PATIENTS AT THE HOSPITAL.

IT MAY SEEM A NATURAL THING TO DECORATE THE WALLS OF THE FACILITY WITH THE WORK OF THOSE WHO LIVE HERE, BUT THE DISPLAYS ARE ONLY A RECENT DEVELOPMENT, A RESULT OF THE ART CLASSES BEGUN HERE SEVEN YEARS AGO BY SOME INLAND AREA ARTISTS.

DANIELLE SEGURA AND KEN CARMICHAEL HAVE BEEN WITH THE ART PROGRAM SINCE ITS INCEPTION IN 1993. ABOUT 100 PATIENTS PARTICIPATE IN PAINTING, DRAWING AND CERAMICS CLASSES. BUT CARMICHAEL, WHO TEACHES CERAMICS, REMEMBERS AS A SLOW BEGINNING.

"WE MAY HAVE HAD 30 PEOPLE WHEN WE FIRST STARTED," CARMICHAEL SAYS.

THERE WAS NO PERMANENT SITE FOR ART CLASSES. HE AND SEGURA HAD TO CARRY THEIR MATERIALS WITH THEM TO VARIOUS ROOMS ON THE GROUNDS.

"IT TOOK TWO YEARS OF A LOT OF PR," CARMICHAEL SAYS, BEFORE THEY WERE GIVEN A CLASSROOM.

SEGURA REMEMBERS IT AS AN EDU-

CATION PROCESS. MANY HOSPITAL OFFICIALS WERE SKEPTICAL ABOUT THE BENEFITS OF AN ART PROGRAM AT THE FACILITY, SHE SAYS.

"I STILL ENCOUNTER THEM," SEGURA SAYS OF PEOPLE CRITICAL OF THE IDEA OF ART AS THERAPY. "BUT DEFINITELY THINK THAT'S CHANGING."

DR. FAYE OWEN, A PSYCHIATRIST AT PATTON SINCE 1993, HAS NO DOUBT ABOUT THE VALUE OF ART FOR HER PATIENTS.

"I THINK IT'S A TREMENDOUS BENEFIT," OWEN SAYS. "I HAVE TWO FEMALE PATIENTS THAT ARE IN A MARRIAGE REALLY FAIRLY YOUNG, BUT THE REALLY YOUNG, FULL ARTIST AND THE OLDER, REALLY YOUNG, GOING TO THE ART THERAPY. I THINK IT GIVES THEM A GOOD OUTLET. I THINK IT REALLY INCREASES THEIR SENSE OF SELF-ESTEEM." THE ART EVEN AFFECTS PATIENTS NOT IN THE PROGRAM, OWEN SAYS.

"WE HAVE MURALS ON TWO OF OUR UNITS," OWEN SAYS. "IT'S A REAL SOURCE OF PRIDE (FOR THE ARTISTS) AND IT BEAUTIFIES THE UNITS SO THAT THE OTHER PATIENTS APPRECIATE IT."

WHETHER STUDENTS GET TO PURSUE THEIR ARTISTIC DREAMS OUTSIDE OF THE HOSPITAL, SEGURA AND CARMICHAEL ARE MAKING SURE THE WORK GETS SEEN BEYOND THE CLASSROOM. BESIDES THE MURALS MENTIONED BY OWEN AND THE PAINTINGS IN THE ADMINISTRATION BUILDING, EVIDENCE OF STUDENT ART IS PROLIFERATING THROUGHOUT THE HOSPITAL GROUNDS.

ON ONE WALL, A SERIES OF ILLUSTRATIONS ON CERAMIC TILE DEPICT EACH OF THE STAGES IN THE 12-STEP PROGRAM FOR ALCOHOLISM. A LOWER DECORATED TILE SLINE THE OUTSIDE WALLS ON TWO WINDOWS OF ONE UNIT. BENEATH THEM, THE HORTICULTURAL PROGRAM PLANTED A LOWER STOMACH.

IN ONE COURTYARD, THE CONCRETE PLANTERS AROUND THE SEPARATE MULBERRY TREES ARE BEING COVERED WITH A TILE MOSAIC. ON THE CORNERS OF THE PLANTERS ARE SINGLE LARGE TILES WITH PICTURES ON THEM. ONE PLANTER SIDE HAS A PICTURE OF A BUTTERFLY AT ONE END. AT THE OTHER IS A VOLCANO.

"THIS LAST YEAR, OUR WHOLE FOCUS HAS BEEN MORE PUBLIC ART," SAYS SEGURA. "WE'RE TRYING TO INTEGRATE AS OPPOSED TO JUST EDUCATE."

SOME OF THE ART IS EVEN GOING BEYOND THE WALLS.

SEGURA POINTS OUT A LARGE CANVAS HANGING AT THE END OF A HALLWAY. "THIS WAS DONE JUST RECENTLY FOR VETERANS DAY," SHE SAYS.

THE PAINTING IS DOMINATED BY THE THREE CHARACTERS FROM THE MOVIE "THREE KINGS," WHICH REVOLVES AROUND THE GULF WAR. IN THE BACKGROUND IS A MAP OF EUROPE AND THE MIDDLE EAST WITH HELICOPTERS AND AIRPLANES.

SINCE LAST NOVEMBER, WHEN IT WAS COMPLETED, THE PAINTING HAS BEEN DISPLAYED AT A NUMBER OF STATE FACILITIES, INCLUDING THE ATASCADERO STATE HOSPITAL.

JOSEPH LYNCH, 50, CREATED THE WORK. HE HAS BEEN IN THE ART CLASS FOR A YEAR AND A HALF. HE SAYS HE DID THE PAINTING AT THE REQUEST OF SOME PATIENTS WHO ARE VETERANS.

"THEY ASKED ME AND IT WAS A CHALLENGE," SAYS LYNCH, A NATIVE OF SCOTLAND. "PLUS I'M AN ENGINEER AND I'VE BEEN INVOLVED WITH THE MILITARY, THE ROYAL NAVY AND THE ROYAL AIR FORCE, BUT I'D NEVER DONE ANYTHING SO BIG."

LYNCH LOOKS AT MUCH OF HIS WORK AS A CHALLENGE.

"IT'S VERY HARD, VERY EXCITING, BECAUSE I ALWAYS WANT TO DO SOMETHING VERY EXACTING," HE SAYS. "I'M NEVER SATISFIED. I USUALLY CORRECTING THE PAINTING MORE TIMES THAN I'M INITIALLY PUTTING IT ON CANVAS."

DESPITE SUCH INTENSITY, LYNCH SAYS THE ART EXPERIENCE IS GOOD FOR HIM.

"IT GIVES ME A DIFFERENT OUTLET," HE SAYS. "I LIKE ANYTHING I HAVE NOT DONE BEFORE AND I DON'T MIND FAILING HERE. YOU HAVE TO LEARN THE LESSONS HERE."

LYNCH CAN IMAGINE ABOUT TO TRAVEL.

CONTINUED ON PAGE 6 (TRANSITION)

Riverside Suicide  
Crisis Help Line  
Call  
**(909) 686-HELP**  
**[686-4357]**

## **TRANSITION** CONTINUED FROM PAGE 5

AS ART, ALONG WITH OTHER WORK FROM THE ART PROGRAM, WILL BE SHIPPED TO SACRAMENTO, WHERE IT WILL BE SHOWN IN THE BATESON BUILDING, HEADQUARTERS FOR THE STATE DEPARTMENT OF MENTAL HEALTH FROM JULY TO SEPTEMBER.

SEGURA ALSO WOULD LIKE TO SEE SOME VENUES FOR THE STUDENTS' ART OPEN UP LOCALLY.

"I THINK I'LL PROBABLY START HAVING SOME COLLABORATIVE PROJECTS WITH THE COMMUNITY," SHE SAYS. "SEE THAT HAPPENING?"

CARMEAN IS EXPECTING IT, TOO.

"TO LIKE TO DO MORE PUBLIC ART," HE SAYS. "WE'D LIKE TO EVEN CONSIDER AN INSTALLATION IN SOMEWHERE WHERE SAN BERNARDINO WERE PUTTING FEELERS OUT AND LOOKING AHEAD TOWARDS THAT."

WHETHER OR NOT SUCH PROJECTS COME TO FRUITION, THE WORK BEING DONE BY SEGURA AND CARMEAN GETS BEYOND THE FENCES. WHETHER STUDENTS ARE RELEASED FROM THE HOSPITAL, HOW MUCH THE ART PROGRAM CONTRIBUTES TO THOSE RELEASES, CARMEAN CAN'T SAY. ALL HE SURE ABOUT, HE SAYS, IS THAT IT HELPS.

"I'VE SEEN A LOT OF PEOPLE RELEASED BACK INTO THE COMMUNITY SETTINGS," HE SAYS. "AND A LOT OF THOSE PEOPLE HAVE THANKED ME FOR HELPING."

"IF THEY CONTINUE THEIR ART WORK, THAT'S GREAT," HE SAYS. "BUT IT'S NOT THE FOCUS."

"THE ULTIMATE GOAL," HE SAYS, "IS FOR PEOPLE TO GET OUT OF HERE."

## **NEW LAW MAKES WORKING EASIER**

**THE INITIATIVE, JULY-SEPT. 2000**

AT THE END OF LAST YEAR, PRESIDENT CLINTON SIGNED THE TCHETTO WORK AND WORKING INITIATIVE IMPROVEMENT ACT OF 2000. ALL THE NEW FEDERAL LEGISLATION WAS DESIGNATED TO MAKE IT EASIER FOR PERSONS RECEIVING SOCIAL SECURITY DISABILITY INSURANCE (SSDI) AND SUP-

PLEMENTAL SECURITY INCOME (SSI) TO WORK WITHOUT FEAR OF LOSING THEIR MEDICAL COVERAGE AND ACCESS TO CASH BENEFITS.

ALTHOUGH MANY PERSONS WITH BRAIN DISORDERS HAVE REACHED A POINT IN THEIR RECOVERY WHERE WORKING IS A Viable OPTION, THEY WERE DISCOURAGED FROM DOING SO FOR FEAR OF LOSING TOO MUCH MONEY AND LOSING THEIR ACCESS TO MEDICAL COVERAGE THROUGH MEDICARE OR MEDICAID. WITHOUT THAT COVERAGE, THEY WOULD NOT BE ABLE TO GET THE PSYCHIATRIC CARE OR MEDICATIONS THAT THEIR RECOVERY RELIES ON.

CONSEQUENTLY, THEY DIDN'T WORK. UNDER THE NEW LAW, SSDI RECIPIENTS ARE ENTITLED TO A TRIAL WORK PERIOD OF NINE MONTHS DURING WHICH CASH BENEFITS AND MEDICARE CONTINUE. IF THE TRIAL WORK PERIOD IS SUCCESSFUL, THEY REMAIN ELIGIBLE FOR MONTHLY BENEFIT STATEMENT OF THEIR CASH BENEFITS FOR 36 MONTHS (IF THE JOB DOESN'T CONTINUE TO WORK) AND CAN RECEIVE MEDICARE PREMIUMS FREE FOR 36 MONTHS.

STARTING OCTOBER OF THIS YEAR, THE NEW LAW PERMITS MEDICARE PART A (HOSPITALIZATION) COVERAGE TO CONTINUE PREMIUMS FREE FOR AN ADDITIONAL 36 MONTHS.

EFFECTIVE JANUARY 1, 2001, THE NEW LAW ALSO ALLOWS FOR RECIPIENTS TO SEEK AN EXPEDITED REINSTATEMENT OF BENEFITS DURING THE FIVE YEARS FOLLOWING THE EXPIRATION OF THE ELIGIBILITY PERIOD AND TO RECEIVE PROVISIONAL BENEFITS FOR 90 MONTHS WHILE THEIR REQUEST FOR REINSTATEMENT IS BEING PROCESSED.

IN SHORT, THE NEW LAW PROVIDES A CONTINUATION OF BENEFITS DURING THE INITIAL NINE MONTH TRIAL WORK PERIOD AND ALSO PROVIDES FREE MEDICAL BENEFITS FOR 3 YEARS AND FREE HOSPITALIZATION FOR A TOTAL OF 4 1/2 YEARS AFTER THE TRIAL WORK PERIOD.

IF THINGS SHOULD NOT WORK OUT AFTER NEARLY FIVE YEARS OF WORKING, THE NEW LAW PROVIDES FOR AN EASY WAY TO RE-APPLY FOR BENEFITS.

NOTE: AS OF MARCH 1, 2000, THE SOCIAL SECURITY ADMINISTRATION (SSA) LAUNCHED ITS NEW ELECTRONIC BULLET

CONTINUED ON PAGE 7 (WORKING)



## **Phone Phriends**

If you need someone to talk with, you may call one of the following members at the corresponding times.

**Leroy**

6 a.m. to 9 p.m.  
(909) 686-5047

**Sandy**

3 p.m. to 9 p.m.  
(909) 688-0368

**Josie**

10 a.m. to 9 p.m.  
(909) 822-1928

**Donna**

10 a.m. to 9 p.m.  
(909) 736-9665

**Georgia Ann**

6 a.m. to 9 p.m.  
(909) 352-1634

**Marlene and George**

Before 9:30 a.m.  
and from 8 p.m. to  
12 midnight  
(909) 685-6241

**MDDA of  
Riverside  
NEEDS  
YOU!**

We need responsible people to volunteer to organize and help with fundraising events such as craft or bake sales. You could fill a need and have a lot of fun helping MDDA! Please call (909) 780-3366



**Family/Friends  
Support Group**

Riverside Co. Dept of Mental Health  
**JOURNEY OF HOPE**  
Second Wednesday of  
Each Month  
2-4 p.m.

Hemet Mental Health Clinic  
1005 N. State Street, Hemet  
and

Third Wednesday of  
Each Month  
6:30-8:30 p.m.

Meadowview Clubhouse  
41050 Avenida Verde,  
Temecula

These support groups are for families and friends of people with severe and persistent mental illness. The County is also offering a 12-week series of educational meetings. There is **NO COST TO YOU.**

Please contact:  
Camille Dirienzo-Callahan  
(909) 791-3369 or  
Mekkia deSanchez  
(909) 600-5055



On the race track of life  
Grab your meds and run!

**WORKING** CONTINUED FROM PAGE 6

THE NEWSLETTER WILL CONTAIN UP-TO-DATE INFORMATION AND WILL BE SENT TO INDIVIDUALS AND ORGANIZATIONS ACROSS AMERICA AND THOSE WHO REQUEST IT.

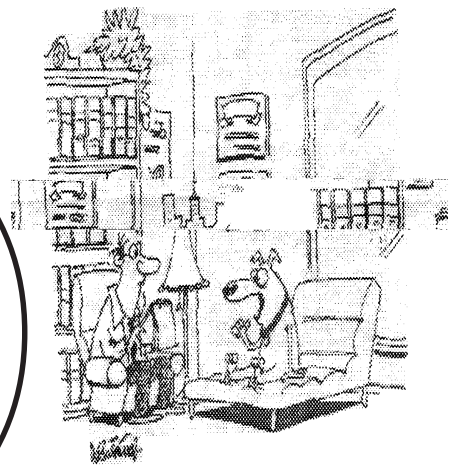
SUBSCRIBERS CAN NOW SIGN UP FOR SOCIAL SECURITY NEWS AT NO COST, BY PROVIDING THEIR MAIL ADDRESS. FOR MORE INFORMATION, VISIT THE SSA WEBSITE AT [HTTP://WWW.SSA.GOV/ENRIS](http://WWW.SSA.GOV/ENRIS)

-FROM ADAMHS ADVANTAGE  
JUNE/JULY 2000



**Who Are  
You?**

SEND A **LIFE** INTERVIEW MEMBERS FOR A BRIEF PERSONALITY PROFILE THAT WE CAN PUBLISH IN THE THERMOMETER TIMES. IF YOU WOULD BE INTERESTED IN THIS, PLEASE CALL HER AT 660-0666.



"Ohhh, sure, I cure their depression, but what about mine?!"

**AWORLDAPART  
(CONTINUED FROM PAGE 1)**

FORMED AND TAKE OUR CONDITIONS SERIOUSLY. THE BRAIN IS IMMENSELY COMPLICATED, AND WHEN IT GOES AWRY, THE SUFFERING CAN BE DEVASTATING. BUT MEDICAL RESEARCH HAS MOVING SWIFTLY AND ELEGANTLY IN RECENT YEARS, AND IT HAS BROUGHT WITH IT THE BELLETTSCIENCE, EFFECTIVE TREATMENT, AND HOPE.

JAMESON IS A PROFESSOR OF PSYCHIATRY AT THE JOHN SHOPHARD SCHOOL OF MEDICINE AND AUTHOR OF "AN UNQUIET MIND." HER NEXT BOOK, "NIGHT FALLS FAST: AN UNDERSTANDING OF SUICIDE," WILL BE PUBLISHED BY HJOP IN SEPTEMBER.

**AVOID THE SUN  
IF YOU TAKE THESE..**

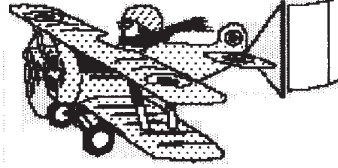
**LIFE IN BALANCE  
MDDA DETROIT, JULY 2000  
VOL. 17, NO. 7**

SEVERAL DRUGS CAN SENSITIZE THE SKIN TO THE ACTION OF ULTRAVIOLET LIGHT. EXPOSED ARE PRONE TO A BURN WITH A RASH OR A SERIOUS BURN. THE FOLLOWING PSYCHOTROPIC DRUGS MAY HAVE THIS EFFECT; CHECK WITH YOUR DOCTOR OR PHARMACIST FOR INFORMATION ABOUT OTHER PHOTOSENSITIZING DRUGS AND POSSIBLE INTERACTIONS.

BRAND NAME	GENERIC
ADAPIN	DOXEPIN
ANAFRANIL	CLOMIPRAMINE
ASENDIN	AMOXAPINE
AVENTYL	NORTRIPTYLINE
LUDIOMIL	MAPROTILINE
MODECATE	FLUPHENAZINE
NORPRAMINE	DESIPRAMINE
SERZONE	NEFAZODONE

**SEEN IN POLARIS EXPRESS, BOSTON,  
SUMMER 1999**

**WE ARE BORN TO SUCCEED, NOT TO FAIL.  
- HENRY DAVID THOREAU  
WORDS TO LIVE BY FAMILY ANSWER BOOK  
COMPILED BY ERIN RODRIGUEZ**



**ANNOUNCEMENTS**

**THE UPLIFTERS**  
(Christian emphasis) meets at  
Victoria Community Church  
Contact Arlie (909) 780-0379

**UPLAND DMDA  
FONTANA DMDA**  
Meet Thursday evenings  
Call David or Samantha Johns  
(909) 947-1307 OR  
e-Mail dmjbf@aol.com

**UPS & DOWNS - Riverside**  
Call Family Services at  
(909) 686-3706

**HEMET SUPPORT GROUP**  
"Foundations" meets every  
Monday and Tuesday 7-9 pm.  
Trinity Lutheran Church  
Please call (909) 929-1223

**TEMECULA DMDA**  
Meets every Tuesday 11 am-1 pm.  
41002 County Center Dr.  
Contact Mark at (909) 696-7496  
or (909) 507-1365

**UPS & DOWNS/DMDA - Highland**  
Meets Wednesdays 7-9 pm.  
St. Adelaide Church - Ministry Bldg.  
27457 E. Baseline (at Palm), Highland  
Call David Avila at (909) 862-1096

**For Support People: AMI - Riverside Mental Health Administration**  
Building, 4095 County Circle Dr. (off Hole Ave. near Magnolia) 7:30 pm,  
1st & 3rd Monday each month (909) 737-5747 (call FIRST)

**Life Story**

IT'S A RARE PERSON WHO DOESN'T GET DISCOURAGED, WHETHER IT HAPPENS TO US OR TO AN ASSOCIATE WE'RE TRYING TO CHEER UP. THE ANSWER COMES AROUND ONE WORD: PERSEVERANCE.

THE VALUE OF COURAGE, PERSISTENCE AND PERSEVERANCE HAS RARELY BEEN ILLUSTRATED MORE CONVINCINGLY THAN IN THE LIFE STORY OF THIS MAN (HIS AGE APPEARS IN THE COLUMN ON THE RIGHT).

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ELECTED PRESIDENT OF THE UNITED STATES	51

**THAT'S THE RECORD OF  
ABRAHAM LINCOLN.**

**ORIGINAL MATERIAL**



Do you have a story to tell, or a poem or art work? We welcome submissions to our newsletter.

If you have something you think we could use, please send it to:

EDITOR  
MDDA P.O. Box 51597  
Riverside, CA 92517-2597  
FAX 909/780-5758



