



# The Thermometer Times

Published by The Depression and Bipolar Support Alliance of Riverside, California

VOL. 24 NO. 3 Out of darkness . . . March 2011

## Dates to Remember

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### CARE & SHARE GROUPS

Clients, guests and professionals are invited to come and participate. Riverside County Mental Health Administration Building (see page 9 for address & map)

**Saturday 10:00 am - 12 noon**

**March 5, 12, 19 & 26**

Meetings start promptly at 10 am. Do yourself a good turn: Be on time...visit with friends before the meeting.

If you come late, please enter quietly.

Web Site for DBSA, Riverside:  
<http://DBSAtoday.com>

E-mail for DBSA, Riverside:  
[DBSAtoday@yahoo.com](mailto:DBSAtoday@yahoo.com)

E-mail for DBSA, California:  
[DBSAtoday@yahoo.com](mailto:DBSAtoday@yahoo.com)  
Please include your phone #

#### 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 the right

16280 Whispering Spur  
Riverside, CA 92504  
951 / 780-3366

## Knowing is Half the Battle



Research gave me hope and a reason to believe I could get better.

During my high school years, I dreaded essay assignments in English class. Although I enjoyed researching topics and gathering information, I loathed having to actually write the essays. I remember thinking that I would never need any of this in “real life”—yet my research skills ultimately saved me from depression’s baleful paralysis.

My troubles started shortly after I launched into that “real life.” I quickly found a job in corporate sales, but I was under a lot of pressure to meet sales targets. I met my quota, but the cost was my mental, emotional and physical health.

My trademark upbeat attitude dissipated into a bleak worldview. I was constantly irritated, and the smallest annoyance—even my alarm buzzer—could set my day spiraling into a bad mood. I was mad at myself, mad at the world, and I didn’t know why.

My anger had an evil twin: lethargy. Without motivation or energy, I stopped exercising and eating properly—which didn’t help the stomach problems I developed.

Within a few months, I went from “never being home” to “never leaving home.” I avoided phone calls, even from loving family members and my two best friends. I holed up in my basement bedroom, stewing in guilt, regret and resentment. I remember thinking, “Why me? I was always so happy—how could this happen?”

I finally confided in my family physician, who prescribed an antidepressant. Yet I still craved answers, information that could shape my recovery.

That’s when I brushed off my research skills. Research gave me hope and a reason to believe I could get better. If only I could understand what was going on, I thought, that would be a start. “Knowing is half the battle,” as I’d often heard from my childhood cartoon hero, G.I. Joe.

I investigated the symptoms and causes of depression, available treatment options and coping strategies. I also sought out information on finding my purpose and living with passion as an antidote to the depression’s soul-crushing barrenness.

Through my reading, I realized that I was not alone. I took comfort from the fact that there were others with similar experiences, people with problems far worse than mine. If they could transcend their challenges, then, in theory at least, so

Continued on page 2 (Knowing)

## A Note From the Editor

As always I invite you to submit your stories, poetry and/or drawings for review and possible publication in the newsletter. Your articles allow us to get to know you in greater depth and to learn of your accomplishments and your many talents, interests and assets. They also contribute to our readers' well being and recovery.

Your work may be submitted to Jo Ann, Leroy or Lynne at DBSA Riverside meetings.

It may be mailed to: The Thermometer Times  
% Jo Ann Martin  
16280 Whispering Spur  
Riverside, CA 92504

E-mail it to: joannmartin1@aol.com

FAX to: 951/780-5758

I look forward to your contribution. Share your wisdom and experience with your DBSA friends through *The Thermometer Times*.

Thank you.

Lynne Stewart, Sr. Ed.

Materials submitted may or may not be published, at the discretion of the editors, and may be edited.

### **KNOWING**(Cont'd from page 1)

could I. That thought gave me hope and inspired me to push on.

As part of my information gathering, I kept a journal to jot down quotes and phrases that resonated with me. I made it a point to refer to this collection of inspiring information whenever I felt negative or down.

For example, I imagined friends and family would look down on me for having depression until I found Eleanor Roosevelt's quote, "No one can make you feel inferior without your consent." I reasoned that no one could look down on me if I always looked up to myself. It was then that I decided to become my own best friend.

How can you be a best friend to someone you don't know? That's easy: You can't. The next phase of my research was studying myself and the best ways to support my mental health. I learned to make smarter choices about managing my sleep, my diet, my exposure to sunlight and stressful information in the media, even my work.

Through my journey, I realized that information opens the door to new possibilities, to changing behavior, to hope—and the burden is on me to discover what options are out there and which work best for me.

With all the books on depression and mental health being published these days, and all the sites and blogs mushrooming on the Web, information has never been so accessible. That's one more reason for me to feel hopeful—not only for myself, but also for others walking the same path I am.

*Russ Small is a life coach and speaker in Calgary, Alberta, Canada.*

*Source: esperanza  
Winter 2011.*

## ***The Thermometer Times*** ***16280 Whispering Spur*** ***Riverside, CA 92504*** ***(951) 780-3366***

**Publisher & Editor in Chief**  
**Jo Ann Martin**

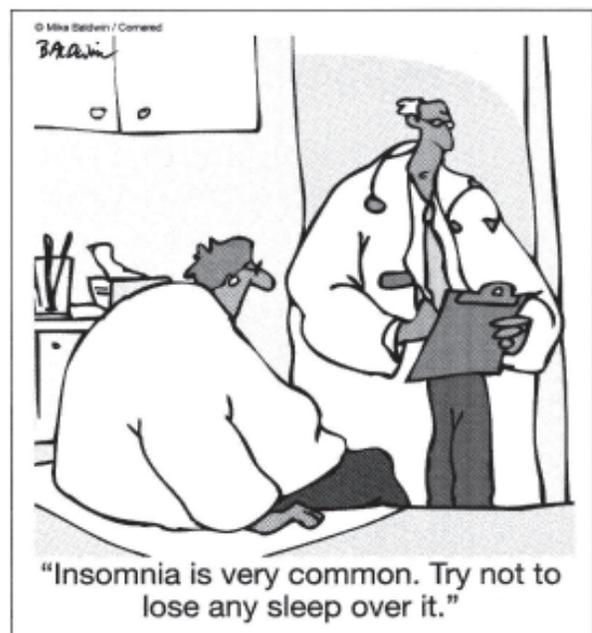
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# Feelings of Loneliness Tied to Perception

While it may seem logical that social interaction and improved social skills would be an effective intervention for loneliness, a new study recently completed at the University of Chicago suggests something quite different.

Funded by the National Institute on Aging and the John D. Templeton Foundation, the study aimed to find the best method for reducing the negative effects of loneliness. Results suggest that the best methods for combating loneliness are those that change a person's perceptions and incorrect assumptions about themselves and the people around them.

"People are becoming more isolated, and this health problem is likely to grow," said John Cacioppo, Ph.D., Professor of Psychology at the University of Chicago. "If we know that loneliness is involved in health problems, the next question is what we can do to mitigate it."

Other research completed at the university in recent years suggests that loneliness impacts health measures by negatively impacting blood pressure, sleep, the risk for dementia and more serious health issues such as heart disease.

A sweeping analysis of past studies on loneliness was performed by researchers going back to research that tested interventions from 1970 to 1999. Ultimately, the methods for intervention were narrowed to four categories that included improving social skills, increasing social support, creating opportunities for social interaction, and addressing social cognition.

Comparisons were made of studies that offered an intensive study design of random, controlled trials, revealing that studies with "maladaptive social cognition" produced strong, positive results.

Social cognition strategies revolve around a person's

perceptions of self, pointing to treatment modalities like cognitive behavioral therapy as an effective model. These types of interventions increase a patient's ability to break unhealthy thought patterns, ultimately helping those suffering from loneliness to approach social situations with a more positive attitude.

Cognitive behavioral therapy is a widely-used and accepted technique for treating other common mental health disorders such as depression and eating disorders.

"We're getting a better understanding of loneliness, that it's more of a cognitive issue and is subject to change," said Christopher Masi, MD, Assistant Professor of Medicine at the University of Chicago Medical Center and lead author of the study.

Other findings from the analysis debunked the previous belief that group formats were better than individual sessions for treating loneliness in patients. The overall analysis of studies over time revealed that there is no clear advantage for using group interventions.

"That's not that surprising, because bringing a bunch of lonely people together is not expected to work if you understand the root causes of loneliness," Masi said. "Several studies have shown that lonely people have incorrect assumptions about themselves and about how other people perceive them. If you bring them all together, it's like bringing people with abnormal perceptions together and they're not necessarily going to click."

The authors hope that the findings may help physicians and psychologists develop better treatments for loneliness. They further suggested that therapeutic interventions could be designed appropriate to the severity of the effects of loneliness by using social cognition tools.

The study, "A Meta-Analysis of Interventions to Reduce Loneliness," is published online by *Personality and Social Psychology Review*.

Source: University of Chicago Medical Center  
As Seen In: *Life in Balance*  
February/March 2011



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*However learned or eloquent, man (or woman)  
knows nothing truly that (s)he has not  
learned from experience.*

Christopher Martin Wieland



**Noble deeds and hot baths are the  
best cures for depression.**

Dodie Smith  
*I Capture the Castle*

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# Personal Journeys and Quests

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## After All These Years

BY JO ANN MARTIN

March 3, 2011

I moved back from my cabin, which is on our two and one-half acre property, in the beginning of December. I had been living there with my cat and parrot for about 2 months. On the 13th of December, I was afraid to go back to the cabin, but had to do a few things before Jennifer, a fabulous bass player and friend of mine, was coming to visit .

I went in tears to ask my husband, Saul to go with me. Kathi showed up and went with me. When we got there Pedro and Clarita were eating lunch so I wouldn't have been alone anyway. Yet, I wouldn't have wanted to cry in front of them.

I had this cold feeling about the cabin. It had been a place for me to rest and relax and get away from a lot of things for a while, but the memory of how sick KoKo, my cat, had been when she stayed there and remembering all of the corn my bird, Rockie, kept throwing down on the floor made me uneasy about going back there.

I don't know why I felt so empty.... but I believe that was the point when my depression was becoming unbearable. I had been tired and exhausted for some time.. the live DVD taping on the lawn with Jennifer's Trio, which I loved doing, the conference, Halloween, the wedding right after, and Saul's operation with me running back and forth to the hospital and staying there overnight, then Thanksgiving and Christmas. I have always opened our home for those in the group and other friends on holidays so no one has to stay home by themselves. I love doing this and had plenty of help. I was glad I didn't have to do much as my energy level was pretty low.

I kept saying I was just tired, but I think the depression was already setting in. I truly believe that the old Trazadone pills I found while clearing out the cabin and used for maybe a week or more started the whole thing. Dr. Harris said that Lithium remains pretty much the same even if it is old, but Trazadone loses its effectiveness with age. It was stupid thing to do. I got a new order, but took the old pills thinking I would not waste them.

I remember when I lived in Atlanta, my agent sent me to Syracuse to play for two weeks at the Holiday Inn and, Nathalie, my daughter and her father lived there. I wanted to spend some time with them. My Dr., (Dr. Wyatt) prescribed Lithium alone for me. I called my doctor after a few days, telling him that my depression had worsened and he told me to stop taking it. Later, when Lithium was given to me, it was with an antidepressant and finally the combination of lithium and desyrel kept me stable for almost 30 years. When I took the old trazadone, I was literally taking only Lithium, and as before, on came the depression.

I began seeing Dr. De Silva more often about the middle of January. I was still complaining of being so tired all the time. On February 11th, he prescribed something to hopefully help me get up and be able to function and not be so tired.

After a week of taking it, I noticed my Tardive Dyskensia was becoming impossible and with me all the time. My whole face hurt from the constant uncontrollable mouth movements. I stopped taking it on Wednesday and by Sunday the affliction returned to its former state (only after chewing food).

At this point I felt unsafe driving, so my husband drove me to my next appointment with Dr. De Silva. I feel extremely fortunate to be seeing such a fine doctor. I really believe he is one of the best in his field and his concern for his patients goes way beyond the prescription pad.

By my appointment time on February 23rd, the doctor could clearly see that I was in a depression. Abilify and Cymbalta were added. March 2nd, I felt more energy and like the cloud was beginning to lift. I am by no means manic and am carefully watching my sleep and actions.

It hasn't been easy to get sleep because I've had endless early appointments for an epidural steroid injection in my back, a mammogram and ultrasound appointments. But last night I slept seven and one-half hours straight, then went into the end bedroom which is darker, and slept another 2 hours. I am still pretty weak. One of the people who works for us and myself took a long walk yesterday and that felt good. It will take some time to get back in shape.

A peculiar development has happened. I swear I read that one of the new medications could cause Tardive Dyskensia, but instead it has taken the whole thing away!



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# Depression and Social Security Disability Benefits - Proving Disability

About 19 million Americans live with major Depression. Major depression can be debilitating and require medication, therapy, and treatment. For many, depression affects the ability to function and prevents people from holding a steady job. When filing for Disability benefits for Major Depression, you must understand what information the Social Security Administration considers. ( For more detailed information visit: [www.ssa.gov](http://www.ssa.gov))

## What Social Security is looking for?

### Depression Must be Severe:

Unlike physical impairments that can be proven with blood tests and x-rays, mental impairments are largely based on patient's complaints to mental health doctors. To prove depression, one should:

- Visit a mental health professional regularly
- Obtain and keep records of office visits
- Don't miss appointments or leave gaps in medical records
- Comply with treatment!

Lack of treatment suggests that the person is able to manage the depression and that it is not severe. Do not contribute to impairment by avoiding care.

### Records Must Show Symptoms:

Records must be consistent and show that 4 of the following symptoms have continued to exist despite treatment:

- Anhedonia or pervasive loss of interest in almost all activities;
- Appetite disturbance with change in weight;
- Sleep disturbance;
- Psychomotor agitation or retardation
- Decreased energy, feelings of guilt or worthlessness;
- Difficulty concentrating or thinking
- Thoughts of suicide, or hallucinations
- Delusions or paranoid thinking

### Symptoms Must Persist At Least 12 Months:

Valid claims for depression must show symptoms have lasted or will last at least 12 months

### Impact:

The effect that depression has on a person's ability to function is crucial! Applicants must show that the depression is affecting daily function and that they are not contributing to the disability.

- Sustain sobriety from drugs and alcohol at least 6 months prior to applying for disability
- Visit doctor regularly and obtain a supportive statement
- Take proscribed medication and comply with treatment

Proving disability with mental impairments is often more difficult than physical disabilities. Consult an attorney for more information.

About Disability Group, Inc: Disability Group, Incorporated is a national law firm representing disabled clients in obtaining benefits under U.S. Social Security Laws. Disability Group, Inc. is currently the largest Social Security Disability Law Firm in the U.S., handling cases nationwide. The mission of Disability Group Inc., is to secure benefits for disabled Americans in an environment of dignity and respect. In 2009, the firm was nominated on the prestigious Inc

500 list as one of the fastest growing privately owned companies in America.

For the original version on PRWeb visit: [www.prweb.com/releases/prweb2011/2/prweb8137775.htm](http://www.prweb.com/releases/prweb2011/2/prweb8137775.htm)

Source: <http://sfgate.com/cgi-bin/article.cgi?f=/g/a/2011/02/18/prweb8137775.DTL>

February 18, 2011



**If we look at the path, we do not see the sky. We are Earth people on a spiritual journey to the stars. Our quest, our Earth walk, is to look within, to know who we are, to see that we are connected to all things, that there is no separation, only in the mind.**

NATIVE AMERICAN SAYING

# Peer Support Beats Usual Care for Depression, Analysis Finds

But it may not be helpful for people with severe depression, one expert suggests

FRIDAY, Feb. 18 (Health Day News) — A new analysis of existing research finds that peer support may do a better job of treating depression than standard care.

Depression is difficult to treat even with the help of psychotherapy and antidepressant drugs. According to the analysis, one-third of depressed patients have significant symptoms even after being treated with four different medications. In addition, among depressed people who recover while taking antidepressant drugs, more than half relapse within a year.

The researchers looked at 14 studies involving depression and peer support in their meta-analysis, which is a method that pools the results of different studies examining a common problem so they can be analyzed statistically. All of the studies had randomly assigned depressed people to receive peer support with at least one other person, or one of three other types of treatment including standard care, cognitive behavioral therapy, or both. The studies examined the experiences of 869 participants in total.

The researchers combined the results of the studies and reported their findings online in advance of publication in an upcoming print issue of the journal *General Hospital Psychiatry*

Dr. Paul Pfeiffer, an assistant professor of psychiatry at the University of Michigan Medical School in Ann Arbor, and colleagues found that support groups were “superior” to regular care but didn’t do significantly better or worse than cognitive behavioral therapy, which trains people to develop new patterns of thought and behavior.

Why might support groups be so helpful? Pfeiffer’s team suggested that it may have something to do with their ability to lessen isolation, provide a buffer against stressful events, help patients share health information and offer role models. Peer support programs may also empower patients to play a more active role in their own self-care,” they wrote.

“Given the high level of functional burden imposed by depression worldwide, peer support for depression should also be studied as a potentially low-cost intervention in primary care or other settings where more established but costly depression services are unavailable,” the authors concluded.

One expert who was not involved with the meta-analysis had some criticisms of the findings.

Dr. Bernard Carroll, scientific director at the Pacific Behavioral Research Foundation and past chairman of psychiatry at Duke University, said that several of the studies in the review were weak, and the stronger ones showed the

treatment approaches were just about equally effective. In addition, some of the studies focused on people with mild symptoms, he noted.

But peer support might still have its uses in depression treatment, he noted.

Overall, Carroll said, the review suggested that peer support “may be somewhat helpful” — with caveats — in certain people without severe symptoms of depression.

More information

For more about depression, visit the U.S. National Library of Medicine.

— Randy Dotinga

*SOURCES: Bernard Carroll, Ph.D., scientific director, Pacific Behavioral Research Foundation, Carrnel, Calif.; Nov. 13, 2010, General Hospital Psychiatry, online d,*



## DBSA-Riverside and friends

At Jo Ann Martin's\*

for the

## Holidays

Picnics or dinners

at noon (3 pm on Christmas)

Swimming, badminton, spa, food and more...  
during summer months.

Friendly sharing during the winter.

Bring a salad, main dish, or dessert.

If you can't bring a dish, come anyway.

Meat & beverage will be furnished.

Holidays include:

Memorial Day, 4th of July, Labor Day, Halloween,

Thanksgiving, & Christmas

\*Directions to Jo Ann Martin's home

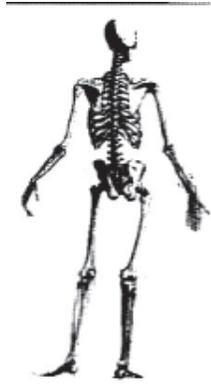
Exit 91 Frwy at Van Buren. Go south 4.2 miles on  
Van Buren to Whispering Spur. Turn left.

2nd driveway on the right

16280 Whispering Spur Riverside, CA

951 / 780-3366

# Depression May Lead to the Development of Osteoporosis in Women



Depression is not only a serious mood disorder, but it may also trigger the development of disease. Among the health complications that may result from poor mental health is osteoporosis. Previous research has shown that women who experience chronic stress and depression have a tendency to develop bone loss. Other studies, such as a recent paper published in the *American Journal of Kidney Diseases*, have linked depression to kidney disease, dementia and even some types of cancer.

“Treatment is really important and might affect [the patients’ health and] cognitive functioning down the road,” said Vonetta Dotson, a professor at the University of Florida. “I think that’s new information that not everyone is aware of.”

Researchers emphasize that taking care of both the mind and the body is key to a healthy life-style. According to the International Osteoporosis Foundation, osteoporosis affects an estimated 75 million people in the U.S., Europe and Japan.

The disease appears to be more common in women, with approximately one in three females over the age of 50 experiencing osteoporotic fractures.

*Source: Life in Balance  
February/March 2011*

# Cognitive Therapy Can Help Prevent Depression Relapse

December 7, 2010, TORONTO, Ontario— Mindfulness-based cognitive therapy, or MBCT, a method of group therapy incorporating meditation techniques, is as effective as traditional antidepressant medication in protecting against a relapse of depression, according to a new Canadian study.

The researchers studied people with remission of symptoms after treatment with an antidepressant. One group continued taking maintenance medication, a second stopped medication and started MBCT, and a third was switched from medication to placebo.

The study found that the groups receiving medication or MBCT had similar relapse rates of about 30 percent, compared to relapse rates of 70 percent for people who received placebo.

The researchers said the results show that MBCT could be valuable for people with depression who are unwilling or unable to tolerate maintenance antidepressant therapy.

The study, which appeared in the *Archives of General Psychiatry*, was entitled “Antidepressant monotherapy vs. sequential pharmacotherapy and mindfulness-based cognitive therapy, or placebo, for relapse prophylaxis in recurrent depression.”

*Source: esperanza  
Winter 2011*

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Everything that  
IS  
was once  
IMAGINED!

TED JOANS (1928-2003)  
Poet

---

The place to improve the world  
is first in one’s own heart and head  
and hands, and then work outward  
from there.



ROBERT PIRSIG  
Writer

---

*There comes a time in life  
when you walk away from all the  
drama and people who create it.  
You surround yourself with  
people who make you laugh,  
forget the bad, and focus on the  
good. So, love the people who  
treat you right. Pray for the ones  
who don’t. Life is too short to be  
anything but happy. Falling  
down is part of LIFE...getting  
back up is LIVING.*



From Tom Burden, Certified Peer Support Specialist  
(CPSS) — Author unknown

*Source: Life in Balance  
February/March 2011*



## Family/Friends Support Groups

Riverside County Dept. of Mental Health  
Offers Support groups for families and friends  
of people with severe  
and persistent mental illness.  
These Support Groups are offered  
throughout the County of Riverside.

### The County also offers the **NAMI Family-to-Family Education Program**

This program is a 12-week series of  
educational meetings for  
family members.

**There is NO COST TO YOU.**

For information on dates, times and location,  
Please contact:

Riverside Co. Dept. of Mental Health  
The Family Advocate Program  
**951 358-4987/1-800-330-4522**

## Phone Phriends

If you need someone to talk with:

**Leroy** 951 / 686-5047

**6 a.m. to 9 p.m.**

**Andie (Amanda)** 909 / 824 - 5385

**9:30 am to 7:30 p.m. (youth)**

**Yen Cress** 951 / 315 - 7315

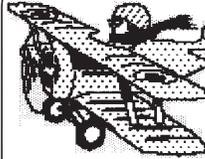
**9 pm - 6 a.m. & Weekends**

**Cathy Waechter** 951 / 529 - 8586

**5 pm to 9 pm**

**Susie Phillips** 951 / 637 - 1312

**3 pm to 8 pm Tues., - Thurs.,  
Sat. & Sun.**



## ANNOUNCEMENTS

### TEMECULA DMDA

Mark Monroe  
951 / 926 - 8393

### Rancho Cucamonga DMDA

Meets 1st and 3rd  
Wednesdays evenings  
Contact: David or  
Samantha Johns  
909 / 944 - 1964 OR  
e-mail: dmjbf@aol.com

### DBSA - Loma Linda

909 / 327 - 6178

### HEMET SUPPORT GROUP

Hemet Support group meets at  
Trinity Lutheran Church  
Mondays, 7 to 9 pm. Fridays,  
1:30 to 3:30 pm  
951 / 658 - 0181 (Lyla)

### THE UPLIFTERS

(Christian emphasis) meets at  
The Grove Community Church  
19900 Grove Community Drive  
(off Trautwein) Riv. 92508  
meets Mondays 7 pm  
Contact Ken Sharum  
951 / 368 - 7713

### DBSA (Christian Emphasis)

Lake Hills Christian Center  
12500 Indiana Ave  
Tuesdays 6:30 - 8:30 PM  
(951) 368-7713 (Ken)

### For Support People:

**NAMI** - Riverside Mental Health Administration Building  
4095 County Circle Dr. (off Hole Ave. near Magnolia)  
7:00 pm, 1st Monday each month 951 / 369 - 1913 - Rosanna

## Calling all interested consumers!

*NAMI—In Our Own Voice:*

We are looking for consumers who are interested in sharing their personal recovery stories. In Our Own Voice: Living With Mental Illness (IOOV) is a recovery-education program conducted by trained presenters for other consumers, family members, friends, and professional and lay audiences. Individuals need not be active in mental health advocacy at this time, but

- ▶ They have "been there."
- ▶ They are able to present professionally.
- ▶ They are in recovery.
- ▶ They have the time to be trained.
- ▶ They believe in treatment, with medication as a component for recovery.
- ▶ They periodically present at 1½-2 hour workshops, during working hrs.



Stipends will be paid for presentations.



**For more information, or to be put on a waiting list, please call:**

**Angela Sandoval, IOOV Coordinator**  
**(951)686-5484, ext. 120**

A collaborative effort brought to you by:  
—The Riverside County Mental Health Department—  
— NAMI, Western Riverside County —  
—Jefferson Transitional Programs—

**DBSA- Riverside**

Map Legend

- ★ Meeting Location
- TTTT = Parking

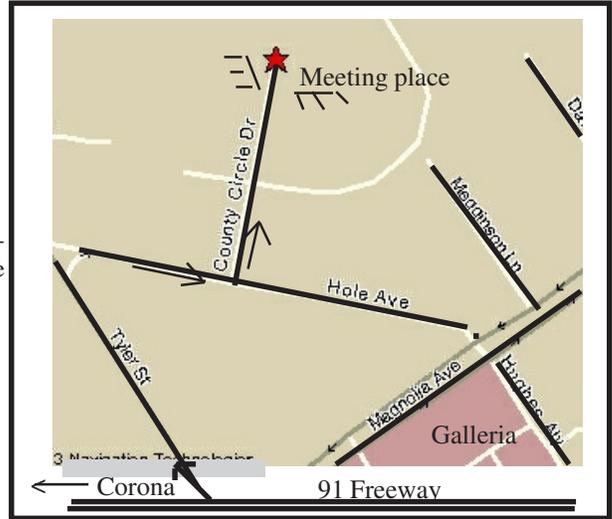
Due to route changes, no RTA regular bus crosses County Circle Drive anymore. However, several routes stop at the Galleria (Tyler Mall), which is only a three-block walk from where we meet. Those routes include Canyon Crest, Corona, Country Village, Hemet, La Sierra, Perris, Norco, and Sun City.\* For meeting-day

route times, please call RTA at 800/266-6883 toll free. If you qualify for Dial-a-Ride, a door-to-door service for the handicapped, info is available at the same phone number. \* as well as other parts of Riverside.

## About DBSA-Riverside

**DBSA of Riverside** is a support group for people who have depression or bipolar (manic-depressive) disorder and who have sought or are seeking treatment for their illness. DBSA is totally patient run, which means we need volunteers like you to help with mail-outs, telephoning and planning. A work time

is held at the home of JoAnn Martin on the Saturday afternoon following the last sharing meeting of each month to assemble the newsletter for mailing. Directions are printed on the lower left corner of the front page of this newsletter. You may reach JoAnn or Leroy at 951/ 780-3366. **Our sharing meetings are held every Saturday of each week from 10:00 a.m. to 12:00 noon at the Riverside Mental Health Administration Building, 4095 County Circle Drive (off Hole Avenue near Magnolia), Room A.** We welcome professional care providers and adult family members and friends. Please note our new area code - 951, effective on July 17, 2004.



✂

### MEMBERSHIP INFORMATION

Individual membership for the Depression and Bipolar Support Alliance of Riverside is \$20.00 per year. This helps defray the cost of the monthly newsletter and helps pay for the cost of our meetings. Subscription to the newsletter is \$10.00 per year. If you are unable to help financially, the newsletter may be sent upon request. Volunteers are always needed. If you would like to volunteer, please indicate below.

Mail to DBSA of Riverside, 16280 Whispering Spur, Riverside, CA 92504

DATE \_\_\_\_\_ **Please Print**       New     Renewal

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

Please check one of the following:

- I have:     Bipolar Disorder (Manic-Depression)     Depression  
 I am a     Family Member     Professional  
 None of the above

Birth Date (Optional) : Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Enclosed is my payment for DBSA Membership \_\_\_\_\_ \$20.00 (includes newsletter).

Enclosed is my donation of \$ \_\_\_\_\_ to help others receive the newsletter.

I would like a subscription to the newsletter only.      \$10.00 (12 issues per year).

I would like to volunteer my time and talent to help.

DBSA OF RIVERSIDE  
16280 Whispering Spur  
Riverside, CA 92504

HELP US KEEP COSTS DOWN

We're using a computer mailing list

Please help us keep costs down by

making sure your name and address  
are correct. If there is an error or if

you are receiving more than one  
newsletter, please let us know.

Print legibly so that mistakes can be  
avoided.

Your help and patience are greatly  
appreciated.