



# The Thermometer Times

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

VOL. 26 NO. 8 Out of Darkness . . . August 2013

## Dates to Remember

\*\*\*\*\*  
Weekly Support Group Meetings  
No Cost

**Saturday 10:00 am - 12 noon**  
**August 3, 10, 17, 24 & 31**

Bring someone and come early for a snack. Bring a notepad and an attitude for pro-wellness, supportiveness, and open to shared ideas for coping.

See Page 9 for location & map

### Come Join Your Friends



At Jo Ann Martin's  
**Franklin Park**

**Labor Day**



**Monday, September 2**  
**Picnic at 12:00 Noon**

(See Page 7 for more information)



**August 31st**

**Deanne Edwards MFT**

*Topic*

**“Techniques to Grounding  
Trauma & Anxiety”**

At our DBSA support meeting

### *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

## What Is Nostalgia Good For?

### Quite a Bit, Research Shows



By JOHN TIERNEY  
SOUTHAMPTON,

England — Not long after moving to the University of Southampton, Constantine Sedikides had lunch with a

colleague in the psychology department and described some unusual symptoms he'd been feeling. A few times a week, he was suddenly hit with nostalgia for his previous home at the University of North Carolina: memories of old friends, Tar Heel basketball games, fried okra, the sweet smells of autumn in Chapel Hill.

His colleague, a clinical psychologist, made an immediate diagnosis. He must be depressed. Why else live in the past? Nostalgia had been considered a disorder ever since the term was coined by a 17th-century Swiss physician who attributed soldiers' mental and physical maladies to their longing to return home — nostos in Greek, and the accompanying pain, algos.

But Dr. Sedikides didn't want to return to any home — not to Chapel Hill, not to his native Greece — and he insisted to his lunch companion that he wasn't in pain.

“I told him I did live my life forward, but sometimes I couldn't help thinking about the past, and it was rewarding,” he says. “Nostalgia made me feel that my life had roots and continuity. It made me feel good about myself and my relationships. It provided a texture to my life and gave me strength to move forward.”

The colleague remained skeptical, but ultimately Dr. Sedikides prevailed. That lunch in 1999 inspired him to pioneer a field that today includes dozens of researchers around the world using tools developed at his social-psychology laboratory, including a questionnaire called the Southampton Nostalgia Scale. After a decade of study, nostalgia isn't what it used to be — it's looking a lot better.

Nostalgia has been shown to counteract loneliness, boredom and anxiety. It makes people more generous to strangers and more tolerant of outsiders. Couples feel closer and look happier when they're sharing nostalgic memories. On cold days, or in cold rooms, people use nostalgia to literally feel warmer.

Nostalgia does have its painful side — it's a bittersweet emotion — but the net effect is to make life seem more meaningful and death less frightening. When people speak wistfully of the past, they typically become more optimistic and inspired

*Continued on page 3 (Nostalgia)*

## 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.

## *The Thermometer Times* 16280 Whispering Spur Riverside, CA 92504

**(951) 780-3366**

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

Senior Editor  
**Lynne Stewart**

Proof Reading  
**Leroy Merrill**

**Kathi Stringer - Jo Ann's Assistant**

Associate Editors  
**Nelma Fennimore  
Karen Cameron**

Medical Advisor

**Andrew J. Rooks, M.D.**

**Child, Adolescent & Adult Psychiatry  
American Board of Psychiatry  
and Neurology**

**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.**

## Depression: A Full-Body Experience

When I'm depressed, my mind is the last to go. I feel it first in my body, in skin and bone and senses. Once depression seeps beneath my skin, I need to begin the process of scrubbing it out.

Instead of letting depression spread through me, I reach for the resources I've gathered like an arsenal against this most fundamental assault.

The easiest way, I find, to distinguish a depressive episode from a purely physical illness is whether it responds to traditional remedies. Caffeine doesn't touch the exhaustion of depression so much as it sets a series of trip lines across my skin. I find myself getting jittery and irritable instead of refreshed. Aspirin just increases the bubble-wrapped sensation. When pain doesn't abate with painkillers, but lies in wait beneath the surface of myself, I know that something larger than a bug or a virus is on its way.

Depressive episodes that come on in a series of steps, like mine do, offer a similar series of chances to stop them before they progress too far. I can check in with my therapist or get medication adjusted as soon as I realize my body isn't right, before waiting for my mind to follow.

Early intervention is one of my strongest footholds to keep from slipping into the chasm of a deep depression. Recognizing the physicality of this illness gives me enough fore-warning to pull myself back to solid ground before my toes even reach the edge.

*Source: bp magazine, Spring 2013*



---

## NOSTALGIA (continued from page 1)

about the future.

“Nostalgia makes us a bit more human,” Dr. Sedikides says. He considers the first great nostalgist to be Odysseus, an itinerant who used memories of his family and home to get through hard times, but Dr. Sedikides emphasizes that nostalgia is not the same as homesickness. It’s not just for those away from home, and it’s not a sickness, despite its historical reputation.

Nostalgia was originally described as a “neurological disease of essentially demonic cause” by Johannes Hoffer, the Swiss doctor who coined the term in 1688. Military physicians speculated that its prevalence among Swiss mercenaries abroad was due to earlier damage to the soldiers’ ear drums and brain cells by the unremitting clanging of cowbells in the Alps.

### A Universal Feeling

In the 19th and 20th centuries nostalgia was variously classified as an “immigrant psychosis,” a form of “melancholia” and a “mentally repressive compulsive disorder” among other pathologies. But when Dr. Sedikides, Tim Wildschut and other psychologists at Southampton began studying nostalgia, they found it to be common around the world, including in children as young as 7 (who look back fondly on birthdays and vacations).

“The defining features of nostalgia in England are also the defining features in Africa and South America,” Dr. Wildschut says. The topics are universal — reminiscences about friends and family members, holidays, weddings, songs, sunsets, lakes. The stories tend to feature the self as the protagonist surrounded by close friends.

Most people report experiencing nostalgia at least once a week, and nearly half experience it three or four times a week. These reported bouts are often touched off by negative events and feelings of loneliness, but people say the “nostalgizing” — researchers distinguish it from reminiscing — helps them feel better.

To test these effects in the laboratory, researchers at Southampton induced negative moods by having people read about a deadly disaster and take a personality test that supposedly revealed them to be exceptionally lonely. Sure enough, the people depressed about the disaster victims or worried about being lonely became more likely to wax nostalgic. And the strategy worked: They subsequently felt less depressed and less lonely.

Nostalgic stories aren’t simple exercises in cheeriness, though. The memories aren’t all happy, and even the joys are mixed with a wistful sense of loss. But on the whole, the positive elements greatly outnumber the negative elements, as the Southampton researchers found by methodically analyzing stories collected in the laboratory as well as in a magazine named *Nostalgia*.

“Nostalgic stories often start badly, with some kind of problem, but then they tend to end well, thanks to help from someone close to you,” Dr. Sedikides says. “So you end up

with a stronger feeling of belonging and affiliation, and you become more generous toward others.”

A quick way to induce nostalgia is through music, which has become a favorite tool of researchers. In an experiment in the Netherlands, Ad J. J. M. Vingerhoets of Tilburg University and colleagues found that listening to songs made people feel not only nostalgic but also warmer physically.

That warm glow was investigated in southern China by Xinyue Zhou of Sun Yat-Sen University. By tracking students over the course of a month, she and colleagues found that feelings of nostalgia were more common on cold days. The researchers also found that people in a cool room (68 degrees Fahrenheit) were more likely to nostalgize than people in warmer rooms.

Not everyone in the cool room turned nostalgic during the experiment, but the ones who did reported feeling warmer. That mind-body link, Dr. Wildschut says, means that nostalgia might have had evolutionary value to our ancestors long before Odysseus.

“If you can recruit a memory to maintain physiological comfort, at least subjectively, that could be an amazing and complex adaptation,” he says. “It could contribute to survival by making you look for food and shelter that much longer.”

### Finding a Sweet Spot

Of course, memories can also be depressing. Some researchers in the 1970s and 80s suggested that nostalgia could worsen a problem that psychologists call self-discontinuity, which is nicely defined in “Suite: Judy Blue Eyes,” by Stephen Stills: “Don’t let the past remind us of what we are not now.” This sense of loss and dislocation has repeatedly been linked to both physical and mental ills.

But the feeling of discontinuity doesn’t seem to be a typical result of nostalgia, according to recent studies. In fact, people tend to have a healthier sense of self-continuity if they nostalgize more frequently, as measured on the scale developed at Southampton. To understand why these memories seem reassuring, Clay Routledge of North Dakota State University and other psychologists conducted a series of experiments with English, Dutch and American adults.

First, the experimenters induced nostalgia by playing hit songs from the past for some people and letting them read lyrics to their favorite songs. Afterward, these people were more likely than a control group to say that they felt “loved” and that “life is worth living.”

Then the researchers tested the effect in the other direction by trying to induce existential angst. They subjected some people to an essay by a supposed Oxford philosopher who wrote that life is meaningless because any single person’s contribution to the world is “paltry, pathetic and pointless.” Readers of the essay became more likely to nostalgize, presumably to ward off Sartrean despair.

Moreover, when some people were induced to nostalgia before reading the bleak essay, they were less likely to be convinced by it. The brief stroll down memory lane apparently made life seem worthwhile, at least to the English students in

*Continued on page 4 (Nostalgia)*

**NOSTALGIA** (continued from page 3)

that experiment. (Whether it would work with gloomy French intellectuals remains to be determined.)

“Nostalgia serves a crucial existential function,” Dr. Routledge says. “It brings to mind cherished experiences that assure us we are valued people who have meaningful lives. Some of our research shows that people who regularly engage in nostalgia are better at coping with concerns about death.”

**Feeding the Memory Bank**

The usefulness of nostalgia seems to vary with age, according to Erica Hepper, a psychologist at the University of Surrey in England. She and her colleagues have found that nostalgia levels tend to be high among young adults, then dip in middle age and rise again during old age.

“Nostalgia helps us deal with transitions,” Dr. Hepper says. “The young adults are just moving away from home and/or starting their first jobs, so they fall back on memories of family Christmases, pets and friends in school.”

Dr. Sedikides, now 54, still enjoys nostalgizing about Chapel Hill, although his range has expanded greatly over the past decade. He says that the years of research have inspired strategies for increasing nostalgia in his own life. One is to create more moments that will be memorable.

“I don’t miss an opportunity to build nostalgic-to-be memories,” he says. “We call this anticipatory nostalgia and have even started a line of relevant research.”

Another strategy is to draw on his “nostalgic repository” when he needs a psychological lift or some extra motivation. At such moments, he tries to focus on the memories and savor them without comparing them with anything else.

“Many other people,” he explains, “have defined nostalgia as comparing the past with the present and saying, implicitly, that the past was better — ‘Those were the days.’ But that may not be the best way for most people to nostalgize. The comparison will not benefit, say, the elderly in a nursing home who don’t see their future as bright. But if they focus on the past in an existential way — ‘What has my life meant?’

— then they can potentially benefit.”

This comparison-free nostalgizing is being taught to first-year college students as part of a study testing its value for people in difficult situations. Other experiments are using the same technique in people in nursing homes, women recovering from cancer surgery, and prison inmates.

Is there anyone who shouldn’t be indulging in nostalgia? People who are leery of intimate relationships — “avoidant,” in psychological jargon — seem to reap relatively small benefits from nostalgia compared with people who crave closeness. And there are undoubtedly neurotics who overdo it. But for

most others, Dr. Sedikides recommends regular exercises.

“If you’re not neurotic or avoidant, I think you’ll benefit by nostalgizing two or maybe three times a week,” he says. “Experience it as a prized possession. When Humphrey Bogart says, ‘We’ll always have Paris,’ that’s nostalgia for you. We have it, and nobody can take it away from us. It’s our diamond.”

Source: *The New York Times* online  
July 6, 2013



*MEMORIES are like a garden. Regularly tend the pleasant blossoms, and remove the invasive weeds.*

LINDA FIFER RALPHS

~

*Tell me a fact and I'll learn. Tell me a truth, and I'll believe. Tell me a story, and it will live in my heart forever.*

NATIVE AMERICAN PROVERB

~

---

---

# Facts About Mental Illness and Violence

## **Fact 1: The vast majority of people with mental illness are not violent.**

Here is what researchers say about the link between mental illness and violence:

- "Although studies suggest a link between mental illnesses and violence, the contribution of people with mental illnesses to overall rates of violence is small, and further, the magnitude of the relationship is greatly exaggerated in the minds of the general population (Institute of Medicine, 2006)."

- "the vast majority of people who are violent do not suffer from mental illnesses (American Psychiatric Association, 1994)."

- "The absolute risk of violence among the mentally ill as a group is very small. . . only a small proportion of the violence in our society can be attributed to persons who are mentally ill (Mulvey, 1994)."

- "People with psychiatric disabilities are far more likely to be victims than perpetrators of violent crime (Appleby, et al., 2001). People with severe mental illnesses, schizophrenia, bipolar disorder or psychosis, are 2 1/2 times more likely to be attacked, raped or mugged than the general population (Hiday, et al., 1999)."

## **Fact 2: The public is misinformed about the link between mental illness and violence.**

A longitudinal study of American's attitudes on mental health between 1950 and 1996 found, "the proportion of Americans who describe mental illness in terms consistent with violent or dangerous behavior nearly doubled." Also, the vast majority of Americans believe that persons with mental illnesses pose a threat for violence towards others and themselves (Pescosolido, et al., 1996, Pescosolido et al., 1999).

## **Fact 3: Inaccurate beliefs about mental illness and violence lead to widespread stigma and discrimination:**

The discrimination and stigma associated with mental illnesses stem in part, from the link between mental illness and violence in the minds of the general public (DHHS, 1999, Corrigan, et al., 2002).

The effects of stigma and discrimination are profound. The President's New Freedom Commission on Mental Health found that, "Stigma leads others to avoid living, socializing, or working with, renting to, or employing people with mental disorders - especially severe disorders, such as schizophrenia. It leads to low self-esteem, isolation, and hopelessness. It deters the public from seeking and wanting to pay for care. Responding to stigma, people with mental health problems internalize public attitudes and become so embarrassed or ashamed that they often conceal symptoms and fail to seek treatment (New Freedom Commission, 2003)."

## **Fact 4: The link between mental illness and violence is promoted by the entertainment and news media.**

"Characters in prime time television portrayed as having a mental illness are depicted as the most dangerous of all

demographic groups: 60 percent were shown to be involved in crime or violence" (Mental Health American, 1999).

"Most news accounts portray people with mental illness as dangerous" (WahI, 1995).

"The vast majority of news stories on mental illness either focus on other negative characteristics related to people with the disorder (e.g., unpredictability and unsociability) or on medical treatments. Notably absent are positive stories that highlight recovery of many persons with even the most serious of mental illnesses" (WahI, et al., 2002).

### Citations

American Psychiatric Association. (1994). *Fact Sheet: Violence and Mental Illness*. Washington, DC: American Psychiatric Association.

Appleby, L., Mortensen, P. B., Dunn, G., & Hiroeh, U. (2001). Death by homicide, suicide, and other unnatural causes in people with mental illness: a population-based study. *The Lancet*, 358, 2110-2112.

Corrigan, P.W., Rowan, D., Green, A., et al. (2002) Challenging two mental illness stigmas: Personal responsibility and dangerousness. *Schizophrenia Bulletin*, 28, 293-309.

DHHS. *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health

Services National Institutes of Health, National Institute of Mental Health, 1999. <http://www.surgeongeneral.gov/library/mentalhealth/toc.html>

•Hiday, V. A. (2006). Putting Community Risk in Perspective: a Look at Correlations, Causes and Controls. *International Journal of Law and Psychiatry*, 29, 316-331.

Institute of Medicine, *Improving the Quality of health Care for Mental and Substance-Use Conditions*. Washington, DC: Institute of Medicine, 2006.

Mental Health America. *American Opinions on Mental Health Issues*. Alexandria: NMHA, 1999.

Mulvey, E. P. (1994). Assessing the evidence of a link between mental illness and violence. *Hospital and Community Psychiatry*, 45, 663-668.

Pescosolido, BA., Martin, JK., Link, B.G., et al. *Americans' Views of Mental Health and Illness at Century's End: Continuity and Change*. *Public Report on the MacArthur Mental Health Module*, 1996 General Social Survey. Bloomington: Indiana Consortium for Mental Health Services Research and Joseph P. Mailman School of Public Health, Columbia University, 2000. Available: <http://www.Indiana.edu/~icmhsr/amerview1.pdf>

Pescosolido, BA., Monahan, J. Link, B.G. Stueve, A., & Kikuzawa, S. (1999). The public's view of the competence, dangerousness, and need for legal coercion of persons with mental health problems. *American Journal of Public Health*,

*Continued on page 6 (Facts)*

---

**FACTS** (continued from page 5)

89, 1339-1345.

New Freedom Commission on Mental Health, *Achieving the Promise: Transforming Mental Health Care in America. Final Report.* DHHS Pub. No. SMA-03-3832. Rockville, MD: 2003.

Wahl, O. (1995). *Media Madness: Public Images of Mental Illness.* New Brunswick, NJ: Rutgers University Press.

Wahl, OF., et al. (2002). Newspaper coverage of mental illness: is it changing? *Psychiatric Rehabilitation Skills*, 6, 9-31.

Source: *Mental Health Reporting - UW School of Sociology 2013*

---



... **..paws  
for  
reflection**

Borrow a dog for better health. Researchers at the University of Missouri's Research Center on Human-Animal Interaction have found that people who walked either "loaner" dogs or pets from

an animal shelter were more successful at weight loss, started walking more often overall, and were better about sticking with the walking program than those paired with a human partner. Plus, interaction with a pet has proven mental health benefits.

Source: *esperanza, Spring 2013*  
As Seen In: *The Rollercoaster Times Summer 2013*

*We seek the comfort of another. Someone to share the life we choose. Someone to help us through that never-ending attempt to understand ourselves, and, in the end, someone to comfort us along the way.*

MARLIN FINCH LUPUS

~

*Sometimes, just reminding yourself to open up to whatever form love takes will let you receive not just the affection that other's are offering you, but also the actual grace that comes with it--the beneficial energy that pours through the universe.*

SALLY KEMPTON

---

## SELF-HELP AGAINST HOPELESSNESS

**True hope is active, not passive.** says Anthony Scioli PhD, co-author of *The Power of Hope*. Don't wait for good things to magically happen, but work to empower yourself. He offers these approaches.

**Deal with distorted thinking.** Therapy sessions and self-help workbooks can help you monitor your mood and thoughts, examine whether your thinking is accurate, let go of self-blame, and learn strategies to reframe how you label things. Learn to see events in shades of gray rather than the black-and-white of perfect or terrible.

**Form healing relationships.** When you feel doomed, alienated or powerless, you need friends who can help. Put effort into building and sustaining connection.

**Follow a spiritual practice.** This could be praying, attending worship, singing or listening to hymns; walking in nature, or attending a spiritual-retreat. Look for readings that are empowering, reassuring, or address the type of hopelessness you feel.

Source: *bp magazine Spring 2013*  
As Seen In: *Rollercoaster Times Summer 2013*

## Online self-help appears to fill treatment gap

MELBOURNE, Australia—The internet appears to be a viable way to deliver help to people with bipolar disorder who might otherwise have limited access to treatment, Australian researchers said.

They analyzed an online intervention for bipolar known as Mood-Swings, which was adapted from a proven face-to-face, group-based psychological program. The website includes features such as a mood diary, medication monitor, psychoeducation modules, and a moderated discussion board.

The researchers found the program was well received by users and had "an acceptable retention rate," suggesting that the format may fill an unmet need for treatment because it has lower costs than traditional therapy and no geographical barriers.

The study, which appeared in the journal *Psychology Health and Medicine* online ahead of print, was entitled "Development of an online intervention for bipolar disorder: [www.moodswings.net.au](http://www.moodswings.net.au)."

Source: *bp Magazine, Spring 2013*

---

# L a b o r   D a y

**Come Join Your Friends**

At Jo Ann Martin's  
**Franklin Park**

Monday,

**September 2nd**

**Tour the grounds!**



**LABOR DAY**



**Fun!**

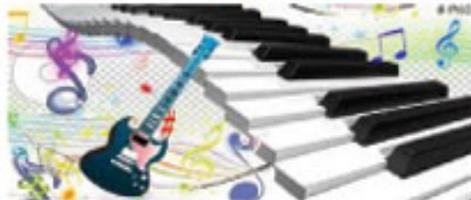
Swimming, badminton, spa, food and more...

**Picnic at 12:00 Noon**

Bring a salad, main dish or dessert, if you can't bring a dish, come anyway.

Meat & beverages will be furnished.

**DJ + Live Music**



**Enjoy a day on the lawn**

**Or take a swim in the pool!**

**LIVE MUSIC!**

**Performing Paul Sinclair Anderson**



**\* Directions**  
Jo Ann Martin's home

Exit 91 Freeway at Van Buren  
Go south 4.2 miles on Van Buren to Whispering Spur. Turn left  
2<sup>nd</sup> Driveway on the right

16280 Whispering Spur  
Riverside, CA 92504  
(951) 780-3366



**Have a hotdog or burger friends**

**LABOR DAY**



**Make it a family day!**

**See You There!**



## 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 Friends

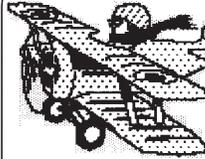
If you need someone to talk with:

### Leroy

951 / 686-5047  
6 a.m. to 9 p.m.

### Ms. Carly Jenkins

951 / 522 - 3500  
10 am to 8 pm



## ANNOUNCEMENTS

### **DBSA Temecula**

Mike Clark @ 951 / 551-1186

### **Rancho Cucamonga DBSA**

Meets Thursdays  
Contact: Gena Fulmer  
909 / 367 - 8944 OR  
e-mail: genafulmer@yahoo.com

### **DBSA Hemet**

Trinity Lutheran Church  
Mondays, 5 to 7 pm.  
Lyla @ 951 / 658 - 0181

### **NAMI Recovery Support Group**

(Various Mental Illnesses)  
951/361-2721

### **Rialto**

Keith Vaughn  
909 / 820-4944

### **Stigma Reduction and Suicide Prevention**

AdEase/Riv.Cou.Mental Health:  
Julia Sullivan 619 / 243 - 2290  
www.adeaseonline.com

### **DBSA Riverside (Uplifters)**

Grove Community Church  
Mon 7:00 pm. Room B8  
951/571-9090

### **For Family Support People: NAMI**

Riverside County Mental Health Administration Building  
4095 County Circle Dr. (off Hole Ave. near Magnolia)  
7:00 pm, 1st Monday each month  
800 / 330 - 4522 (se habla espanol)  
951/369-2721

## RECOVERY INNOVATIONS

Invites you to

# AFTER WORKS!

**AFTER WORKS** is a FREE art social event that takes place at Art Works Gallery on Fridays from 5-7 PM. The goal of the program is to bring local professionals, artists, peers and families together in a relaxing environment to create and to learn a new arts skill. Past programming included artist and exhibition receptions, poetry readings, as well as workshops such as mixed media collage, zine-making, and drumming. No experience required!

For more information, visit  
[www.jtpfriends.org](http://www.jtpfriends.org) or call Art  
Works at (951) 683-1279.  
Art Works Gallery  
3741 Sixth Street  
Riverside, CA 92501



## DBSA - Riverside

### Map Legend

- ★ Meeting Location
- TTTT = Parking

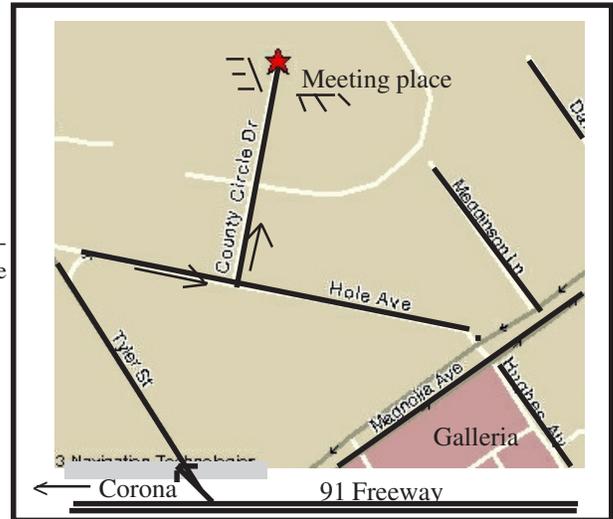
Due to route changes, no RTA regular bus crosses County Circle Drive anymore. However, several routes stop at the Galleria (Tyler Mall), which is only a three-block walk from where we meet. Those routes include Canyon Crest, Corona, Country Village, Hemet, La Sierra, Perris, Norco, and Sun City.\* For 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. Zip: 92503** We welcome professional care providers and adult family members and friends.



### 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.