



The Thermometer Times

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

VOL. 17 NO. 12

Out of darkness . . .

December, 2005

Dates to Remember

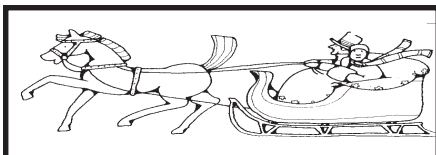
CARE & SHARE GROUPS

Clients and their guests are invited to come and participate. Professional care providers are always welcome.

Riverside County Mental Health Administration Building
(see page 11 for address)

**Every Saturday,
10 am–12 noon, Dec. 3,
10, 17, 24 & 31.**

*Don't miss our Christmas Dinner
Sunday, December 25, at Jo Ann's.
See page 7 for details.*



Meetings start promptly at 10 am. Do yourself a good turn: Be on time to visit with friends before the meeting starts. If you come late, please enter quietly. Announcements will be made at the close of the 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



Winter blues? YOU'RE NOT IMAGINING THEM

Do you dread the winter? I know I do! I live in Portland, Oregon, where it can be dark and dreary all day long during winter. For a long time, people were considered a bit wacky if they insisted that the weather affected their moods. Then Norman Rosenthal, MD, in his 1993 book *Winter Blues* (revised and updated in 1998), explained the connection between depression and the darker days of winter. Following the publication of *Winter Blues*, the symptoms of Seasonal Affective Disorder (SAD) were taken more seriously. Today, approved treatments for SAD (medication, therapy, and light) are often warranted, although SAD is generally a time-limited condition.

Answer the following questions to see if you have the symptoms Dr. Rosenthal ascribes to SAD.

Do you—

- Have less energy than usual?
- Feel less productive or creative?
- Need more sleep?
- Feel down or depressed?
- Have less control over your appetite?

Many people with bipolar disorder feel this way no matter what the weather is like and for most of us, the above symptoms are definitely worse during the darker winter months. The difference, however, between people with bipolar disorder and those with a formal diagnosis of SAD, is that our symptoms don't simply go away when it gets lighter outside—they just change.

According to John Preston, MD, coauthor of *Loving Someone with*

Continued on page 3 (Winter Blues)

a note from the Editor

This month our "Monthly Featured Member" is Dawn Patterson, who is our DBSA Board Treasurer and volunteer. She has an interesting background. You can get to know her better by reading her article on page 5.

Thank you for your responses to this column and your submission of articles and poetry.

We invite you to continue to submit similar material for review and possible publication in the newsletter. These kinds of articles allow us to get to know one another in greater depth and to learn of the many talents, interests and assets of our members.

We again want to solicit articles and poetry from you, for publication in *The Thermometer Times*.

Articles, poetry and/or drawings can be on anything pertaining to:

- *Uplifting affirmations or positive experiences you have to share regarding overcoming.
- * Depression and/or Bipolar Disorder: what it is to live/cope with it; how you learned of it, what helps, what doesn't, etc..
- * Any other mental health issue or problem that you are passionate about.
- *Tell us about yourself and how you spend your time and what's important to you.
- *A report on a mental health event you attended or a mental health book you have read.

Drawings should be black and white, line or half-tone.

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

It may also be mailed to:

JoAnn Martin
16280 Whispering Spur
Riverside, CA 92504

E-mail it to: JoAnnMartin1@aol.com

FAX to: 909/780-5758 (if you have a problem with that FAX call JoAnn at 909/841-4774 and she will turn on another FAX machine.)

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

Get your creative juices flowing and share your knowledge and experience with your DBSA friends through *The Thermometer Times*.

Thank you.

Lynne Stewart, Senior Editor

Conduct is more convincing than language.

John Woolman(1720-1772)
Clergyman and Abolitionist

The Thermometer Times
16280 Whispering Spur
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**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.

Riverside Suicide Crisis Help Line

Call (909) 686-HELP [686-4357] if you need to talk to someone. It is available 24 hours - 7 days a week.

National Suicide Prevention Hotline

Call 1-800-273-TALK (8255) if you need to talk to someone in any of 109 crisis centers in 42 states. The National Suicide Prevention Lifeline has just been launched by SAMHSA (Substance Abuse and Mental Health Services Administration) as part of the National Suicide Prevention Initiative (NSPI). In addition, a new Web-site has been established at

www.suicidepreventionlifeline.org

Dial 211 for phone numbers for resources.

Winter Blues *(Continued from page 1)*

Bipolar Disorder, and a psychopharmacology expert in the treatment of bipolar disorder, “Decreased bright light exposure can trigger brain changes. For people suffering with bipolar disorder, this can occur certainly in winter months, but also if they work at night (as does 20 percent of the U.S. work force), or if they live in cities with significant cloud cover or air pollution. Decreased bright light exposure may ignite a depressive episode”.

“Sometimes when spring comes, depressive symptoms begin to subside, or manias can result,” Dr. Preston continues. “However, for many individuals with bipolar disorder the decreased light initiated the depression, but the episode may certainly continue for many months beyond winter.”

So what causes SAD symptoms? As Dr. Preston explained in my last column (“Watching Out for Summer Mania,” *bp Magazine*, Summer 2005), the amount of bright light entering the eye plays a role in regulating mood and can cause mania. So it makes sense that less sunlight entering the eye may increase depression symptoms. Thus, it is important to keep sunlight steady year round. But how is this possible when it may be really dark in the winter where you live, and quite sunny in the summer? The good news is that it is possible to decrease SAD symptoms. It just takes having a plan before the days get really dark.

ARE LIGHT BOXES A SOLUTION

Most people know that light boxes can be an effective treatment for SAD. The problem is that people with bipolar disorder have to be very careful with bright light therapy, especially if they have rapid cycling, or have a tendency toward mania. (Light therapy has not been extensively studied for bipolar disorder, although it has been well-studied for SAD itself.) Sometimes I think anything would be better than SAD symptoms. On the other hand, rapid cycling is no fun. So it’s really not worth making yourself manic in order to feel better.

DIET AND EXERCISE MAKE A DIFFERENCE

Another solution is to watch your diet carefully and make sure you get exercise in the morning when the light is better. It is tempting to use junk food and caffeine to get out of the afternoon slump. And it makes sense that you have no desire to exercise when there is no sun. But as I have learned over the years of living with bipolar disorder, I never want to do anything when I’m depressed. Yet I’ve taught myself to go ahead and do it anyway.

Here is how I try to eat during the darker months despite a constant craving for coffee, chocolate chip cookies, and cola: eat a protein-rich breakfast. This can include a protein smoothie with one scrambled egg on the side, or a salad with chicken, eggs, walnuts, and apples. Try not to eat all carbs in the morning. Take a multivitamin that is rich in B vitamins. Have a snack ready to eat as soon as you feel your energy decrease. This usually happens around 10:30 or 11:00 a.m., which is when the typical coffee and donut break occurs. Don’t give in! Instead, be ready with an apple, or celery with peanut butter or

some nuts. You can even eat a cold sweet potato. Then have a good protein lunch—chicken salad or tuna with greens and something fun to eat, as long as it’s not too carb-heavy.

Because afternoon is usually the toughest time for experiencing SAD symptoms, you must choose your snack carefully. Opt for tuna salad, a hard-boiled egg, or a natural (not too much sugar) protein bar. Save your major carbs for dinner. This is a typical blood sugar stabilizing diet. While it’s not nearly as tasty as a candy bar or a donut, you will be amazed how it helps your mood, and your weight, if that’s an issue.

MORE POSITIVE STEPS TO TAKE

Diet is just the first step to combating SAD symptoms, however. It’s also important to know what you say, think, and do when your mood begins to darken. In this way, you can treat the depression before it becomes really serious. You will need to create a list of the things you might typically say or feel when it gets darker outdoors, including such expressions as “I can’t live through another winter like this,” “I have to get out of this city,” or “Where is the junk food?”

For myself, the hours between 3:00 and 7:00 p.m. are really tough when it comes to these low feelings. This means I need to do something concrete and positive during these times to counteract the SAD symptoms. Here are some suggestions:

- ~ Take a walk in the morning when it’s brighter outside. Get someone to go with you.
- ~ Don’t take a coffee or sugar break when you feel down. Instead, break for a walk and eat an apple.
- ~ Eat really spicy, low-carb foods for lunch. Doing so will increase endorphins.
- ~ Take a fun class, or meet friends during your tough hours.
- ~ Go to a bright gym after work. If you don’t work outside the home, make sure to stay busy throughout the day.
- ~ Think of what you love to do, then do just that to counteract SAD symptoms. This can be singing, meeting a friend at a cheerful cafe, or going to a light-hearted movie. Create a bright living space and work space with full spectrum lights, bright colors, and plants.
- ~ Teach your family and friends exactly what to do when you “go down.”
- ~ Talk with your employer about SAD. Request an office with a window, if feasible.

Put all of these ideas on an index card and carry it with you. Put it on the wall above your desk or on your refrigerator. Read it every morning. Don’t assume you have it memorized. Depression has a way of making you forget what works and what doesn’t. I assure you the index card method is a solution that will work.

If you feel you are too depressed for the suggested solutions above, try to do just one. I know I’ve been too depressed to get out of bed. At the same time, I’ve also learned that simply getting out of bed is a solution. You can then decide what to do next. You do have the power to get better.

Continued on page 4 (Winter Blues)

SAD symptoms are real and need to be taken seriously. If SAD symptoms are not addressed, the depression can become much worse and you may have to go to the hospital. Anytime suicide is a risk, action needs to be taken by yourself, your friends and family, and especially, your health-care professionals.

Don't wait until your SAD symptoms get worse. Take care of them before it gets really dark and dreary.

Julie A Fast, along with John Preston, MD, is coauthor of the best-selling book *Loving Someone with Bipolar Disorder: Understanding and Helping Your Partner*. Visit Web site at: www.bipolarhappens.com



Source: *bp MAGAZINE*
Fall 2005

Blood test for bipolar?

An article in the Spring 2005 issue of *bp magazine* reports that a Canadian Company says it has developed the technology that uses unique blood-based molecular signatures to identify bipolar disorder and schizophrenia.

The technology, known as Sentinel Principle developed by ChondorGene, is claimed to have a better than 95 percent accuracy rate. Additional studies are on-going; however, if this proves to be reliable, it could provide an early diagnosis for diseases that can otherwise take months, if not years, to determine. And, of course, an earlier diagnosis would point to more appropriate treatment options sooner.

Patient input boosts treatment success

Researchers in the October issue of *Annals of Behavioral Medicine* report something that should surprise no one. Allowing patients to select their own treatment, either drug therapy, psychotherapy or a combination of both, may improve outcomes.

Some 335 adult patients with clinical depression were part of a nine month study.

Although depression symptoms improved for patients in both groups, those who received the preferred treatment experienced more rapid improvement than those who received a therapy that did not match their preference.

Source: *ADAMhs ADVANTAGE*
An affiliate of the DBSA
November/December 2005

Daily Routine Helps Bipolar Disorder

By Jenifer C. Yates

Associated Press, September 6, 2005

Patients suffering from bipolar disorder who underwent therapy to help them maintain a regular daily routine and cope with stress were able to avoid relapses over a two-year period, a study found.

The study, published in September's *Archives of General Psychiatry*, examined a therapy developed by researchers at the University of Pittsburgh School of Medicine.

Using what researchers dubbed interpersonal and social rhythm therapy, patients were taught how to keep to normal sleeping, eating, and other daily routines. They also were shown how to anticipate and cope with stress just as a diabetic who would be taught, for example, how to cook and eat differently.

"This is really a disorder characterized by massive disturbances in the body's clock and all the things the body's clock controls," said Dr Ellen Frank, lead author of the study. "Their clocks need to be very carefully protected and we need to do everything we can to shore up and protect that fragile clock."

Frank, a professor of psychiatry and psychology at the University of Pittsburgh School of Medicine and Western Psychiatric Institute and Clinic, said doctors for years have counseled bipolar sufferers about managing their lives but no one had ever systematically put that information together. She said social rhythm

therapy does that, and also teaches patients to identify the triggers in their relationships with other people that can cause relapses.

In the study, 175 patients suffering from the most severe form of bipolar disorder were divided into several groups. All the patients were given medication for the disorder, but only some received interpersonal and social rhythm therapy.

The researchers found those who received the therapy were more likely to not have relapses of their illness during a two-year maintenance phase.

Dr. Gail Edelsohn, an associate professor of psychiatry at Thomas Jefferson University Hospital in Philadelphia, said sleep, especially, has a huge effect on those with mood disorders.

"This is a very important study because what's happened is that since we have a variety of medications which are extremely useful, I think the psychosocial interventions were prematurely cast aside," Edelsohn said.

Dr. Suzanne Vogel-Scibilia, president of the National Alliance on Mental Illness, said it's most important that bipolar sufferers have access to care, something that doesn't always happen because of the high costs of health care.

On the Net: <http://www.upmc.edu>

Source: *The Initiative, Newsletter of DBSA*
Colorado Springs, CO
Fall 2005

Featured Monthly Member

The Path Less Traveled

by Dawn Patterson

Dawn was born in Lynwood, California in 1972. When she was ten, her doctor said she had ADHD. Now her doctor says it was really bipolar disorder. Her dad worked for a bank and her mom worked for a computer company. She has a sister five years younger.

She remembers being lonely as a child and very hyperactive. Dawn had trouble with authority in grade school and was given Ritalin, which didn't help. High school was a little better. She made a few friends and had a boyfriend. She graduated high school and went on to college and took administrative assisting with a background in accounting. After College, Dawn had multiple jobs in many fields and had a hard time keeping a job for very long due to her illness, which was still incorrectly diagnosed.

Subsequent to two very important deaths and some other traumas Dawn was hospitalized. During this episode she was diagnosed with bipolar disorder at age 28. Her parents placed her in a group home after discharge from the hospital. She was educated on bipolar disorder and independent living. Eventually, she got an apartment of her own, but continued to get support from partial hospitalization, and friends and family.

This partial hospitalization program was a big turning point in Dawn's life. She was able to make better choices in her life, including, no longer needing a payee for her finances, and having healthier relationships by improving her ability to express herself to her family and friends. She said, "It all changed. Before, nothing went right. After... everything fell into place... The cognitive therapy that they taught me played a big part in my recovery."

Four years ago, through a mutual friend, Dawn met the



Dawn aglow in her bridal array.

man whom she would later marry. Since she was actively in treatment when she met Brian, she was reluctant to pursue their relationship for a couple of years. They became friends, later dated and fell in love. They were married April 30, 2005.

Dawn has been coming to DBSA meetings since 2001 and has been volunteering since 2002. She is Treasurer on the DBSA Board and does administrative duties for the organization as needed. Along with her family, DBSA has been her "rock". The group is whom she can "go to for comfort because we share so much in common."

When the winter semester starts at Riverside Community College, Dawn will be taking a course in sign language, with which she hopes to contribute further to DBSA.

Learn to know what to desire, as well as why

BOOK: Happy people have learned to want what they already have, an author says.

BY MEREDITH MOSS
COX NEWS SERVICE

Desire, says William Irvine, is a mixed blessing.

"If you don't have any desires, you're depressed, but you can also have desires that will turn your life upside down," he says.

And he should know.

The Wright State University (Ohio) philosophy professor has been studying the topic for years and has written a book, "On Desire: Why We Want What We Want" (Oxford University Press, \$24).

"I've long had an interest in the whole issue of trying to

have a happy and meaningful life," says Irvine, who has investigated what scientists have to say about desire.

It turns out that while scientists have been interested in the topic for the past 30 years or so, philosophers and religious thinkers have been reflecting on the subject for thousands of years.

"They've given us a lot of interesting advice that reaffirms what the scientists are doing," Irvine says.

The bottom line, according to Irvine, is that most of us will have to make a choice between worldly success and personal satisfaction.

"Most times it is either/or," he adds. "If you're a very satisfied person, you're probably not going to be able to do things that would gain worldly success. And if you're driven,

Continued on Page 6 (Desire)

Ask the Doctor



Question. How can I convince or help someone I care about to get treatment for what might be a mood disorder?

Answer by Richard J. Davidson, Ph.D.:

If I believed someone I cared about was suffering from a mood disorder, I would emphasize the following four points in helping that person to get treatment:

Mood disorders are real and serious diseases and it is not your fault if you suffer from one. Modern research teaches us that mood disorders are real diseases just like heart disease or diabetes. They affect millions of Americans, can happen at any point in a person's life, and are responsible for enormous suffering. Individuals who suffer from depression or bipolar disorder have not brought it on themselves. People have genetic and environmental risk factors for these diseases, over which they have little or no control.

Mood disorders are disruptions of circuits in the brain that generate and regulate emotion. Recent studies show that when a person has depression or bipolar disorder, the brain chemistry that controls emotion is not working as it should. Because of this, individuals with mood disorders, compared to healthy individuals, experience certain moods more intensely, for longer periods of time, and in a greater number of situations.

Good treatments are available. There are psychological and medical treatments for the mind and body that have been clinically tested and have produced real improvement in mood disorders for the majority of people. Untreated mood disorders can have negative effects on your long-term mental and physical health. Recent research indicates that untreated mood disorders can increase the risk for suicide, as well as a variety of physical disorders, since disturbances of the emotional circuits in the brain can also disturb other systems in the body.

I would support the person in getting treatment, possibly accompany the person to his or her first doctor's appointment, and help the person to become educated about mood disorders, learn all the available options, and find the best treatment possible.

Richard J. Davidson, Ph.D. is the William James and Vilas Research Professor of Psychology and Psychiatry at the University of Wisconsin-Madison and a member of DBSA's Scientific Advisory Board. Source: DBSA, Chicago, IL.

*Source: THE ROLLERCOASTER TIMES
Quarterly Newsletter of the DBSA Orange Co.
Fall 2005*



SANDRA E. WAPLES,

Age 58, passed away in Corona on November 19. Born in Omaha, Nebraska, Sandy was a 27 year resident of Riverside. She is survived by her mother, Marian Waples, of St Petersburg, FL., and her brother, Fred R. Waples, of Spokane, Wa.

Sandy was actively involved in mental health advocacy for nearly 20 years and assisted in comforting clients and family members in need. She sent get well cards to members of the DBSA of Riverside. Each envelope bore friendly stickers to make one feel special. She had a passion for travel and developed a large network of pen pals from around the world. She was an active member of Faith Community Church.

A memorial service was held December 3 at 2:00 pm at Faith Community Church, 4750 Challen Ave, Riverside.

ARLINGTON MORTUARY 1-800-ARLINGTON-24hrs
www.arlingtonmortuary.com



**The power that makes
grass grow, fruit ripen
and guides the bird in
flight is in us all.**

Anzia Yeziarska
(c. 1881-
1970)
Writer

Desire (Continued from Page 5)

you're never going to be satisfied. Look at Bill Gates.."

Irvine defines worldly success as "fame and fortune" and says some of the happiest people he knows have not achieved that sort of success.

"The trick is to learn how to want what you already have," he insists." And to learn how to prevent and overcome unwanted desires."

Philosophers have suggested one way to do this: Think about what it would be like if you lost what you do have.

A religious option, says Irvine, is prayer. "You can say a prayer at the beginning of a meal, and think about how lucky you are to have this meal instead of taking it for granted."

*Source: Riverside Press Enterprise
November 3, 2005*

Christmas Dinner

at

JoAnn's



*You're Invited to
bring a side dish or dessert
if you would like,
but it's not necessary.*

**12:00 noon
Sunday, December 25, 2005
16280 Whispering Spur
Riverside**

(Directions on Page 1, bottom left corner)



What makes people happy



1. They live in the present. They really do strive to live each day as though it is their first--and last.
2. They are not willing to be victims and are able to move on if a relationship is hurtful or destructive.
3. They understand that they are the only ones in charge of their lives. God will guide, but will not overrule their choices.
4. They like themselves, or make changes so they can like themselves.
5. They have clear priorities and don't waste time second-guessing them--or themselves. They're in control of how they spend their time.
6. They are open to developing close relationships throughout their life, and are willing to put in the hard work it takes to maintain relationships built on trust, openness, and honesty.
7. They mostly like and are challenged by their work. They don't stay in unrewarding or demeaning work.
8. They enjoy activities that have nothing to do with their work and are not sedentary.
9. They savor the small pleasures of life--early morning sunlight, a shared moment with a friend, a child's smile, a flower, the sight of a loved one's face.
10. They have a strong faith in God.
11. Finally, happy people surround themselves with others who are also optimistic and positive.

Source: David Myers PhD, *Psychology Today*

I am what I am

I am not what I ought to be. I am not what I want to be.
I am not what I hope to be. But still, I am not what I used to be.
And by the grace of God, I am what I am.

--John Newton

The Second Ten Commandments

1. **Thou shall not worry, for worry is the most unproductive of all human activities.**
2. **Thou shall not be fearful, for most of the things we fear never come to pass.**
3. **Thou shall not cross bridges before you come to them, for no one yet has succeeded in accomplishing this.**
4. **Thou shall face each problem as it comes. You can only handle one at a time anyways.**
5. **Thou shall not take problems to bed with you, for they make very poor bedfellows.**
6. **Thou shall not borrow other people's problems. They can better care for them than you can.**
7. **Thou shall not try to relive yesterday for good or ill, it is forever gone. Concentrate on what is happening in your life and be happy NOW!**
8. **Thou shall be a good listener, for only when you listen do you hear ideas different from your own. It is hard to learn something new when you are talking, some people do know more than you do.**
9. **Thou shall not become "bogged down" by frustration, for 90% of it is rooted in self-pity and will only interfere with positive action.**
10. **Thou shall count thy blessings, never overlooking the small ones, for a lot of small blessings add up to a big one.**

--Anonymous

Be careful of your thoughts,
for your thoughts become your words.

Be careful of your words,
for your words become your actions.

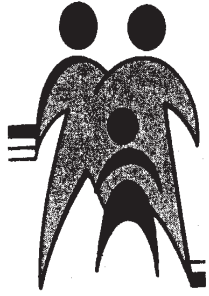
Be careful of your actions,
for your actions become you habits.

Be careful of your habits,
for your habits become your character.

Be careful of your character,
for you character becomes your destiny.



--Anonymous



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
(909) 358-4987/1-800-330-4522

**The Starting Point SUPPORT GROUP FOR
DEPRESSIVES AND BIPOLARS**
Mesa Clinic, 850 Foothill Blvd., Rialto
Mondays from 10:30 to 12:10
For more info: *82 (909) 864-4404

ORIGINAL MATERIAL WANTED

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

DBSA P.O. Box 51597 Riverside, CA 92517-2597
FAX 951/780-5758



Join us on Christmas Day December 25th

12:00 noon at Jo Ann's



Other holidays include: Memorial Day,
4th of July, Labor Day,
and Thanksgiving

See page 1, lower front column of this
newsletter for directions.

Check us out on the web!

Website for DBSA Riverside:

<http://www.geocities.com/mddariv>

E-mail addresses: DBSA, Riverside: dbsaofriv1@aol.com.

DBSA, California: dbsaofca1@aol.com.

Do you have a Medic Alert Bracelet?

Do you wear it? All the time?

In an emergency, would others know what
medication you are taking and why?

Always wear your
Medic Alert bracelet.
It could save your life.

If you don't have one,
ORDER ONE TODAY!

(Available through most pharmacies)





Phone Phriends

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

Leroy

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

Yen

951/315-7315

Kevin

Knenstiel@sbcglobal.net

**GAY, LESBIAN, BISEXUAL AND TRANSGENDERED
FRIENDS OF THE INLAND EMPIRE
Gay Depression Bipolar Support Alliance (GDBSA)**



Guys In Search of Hope

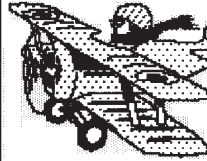
<http://www.geocities.com/mddariv/gayhope.html>
(use lowercase letters only in web address)

**THIS IS A GAY, LESBIAN, BISEXUAL
AND TRANSGENDERED SUPPORT GROUP.**
Parents, family and friends are welcome here and are encouraged to participate in the support group in a relaxed non-threatening atmosphere. Please join us!
No One Should Suffer in Silence!!!

Where: County of Riverside,
Mental Health Administration Building
4095 County Circle Drive, Room A
Riverside, CA

When: Saturdays from 1 pm to 2:30 pm
Call or email us for the current dates.
Starting Jan., 2006, 2nd and 4th Sat.'s

Kevin: 951/780-3366
E-Mail: gdbsa@aol.com



ANNOUNCEMENTS

TEMECULA DMDA

Mark Monroe
951/926-8393

UPLAND DMDA FONTANA DMDA

Meet Thursday evenings
Call David or Samantha Johns
909/947-1307 OR
e-Mail dmjbf@aol.com

HEMET SUPPORT GROUP

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

THE UPLIFTERS

(Christian emphasis) meets at
The Grove Community Church
Contact Sheri 951/784-7402
s1-matsumoto@sbcglobal.net

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
No meeting July or August

Calling all interested consumers!

NAMI-In Our Own Voice: Living With Mental

Illness

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 the cornerstone for recovery
- ▶ They periodically present at 1 1/2-2 hour workshops, during working hrs.



Stipends will be paid for presentations.



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

Allison Hoover, IOOV Coordinator
951/ 686-5484

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

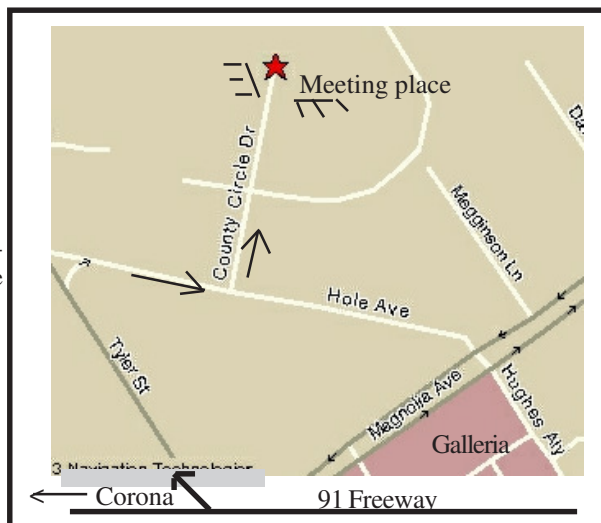
TTTT = Parking

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.