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Depression and Bipolar Support Alliance

2005 Annual Report

How We Met Our Mission in 2005

Improving recognition, early detection and diagnosis of mood disorders as treatable medical illnesses

Depression and bipolar disorder are real illnesses. They are not the fault of the person who has them, or that person's family. Although more people know the definitions of depression and bipolar in 2005, there is still a need for information about finding treatment that works, communicating needs to health care providers, overcoming stigma and using recovery-based ideas in day-to-day life.

- Over 1.5 billion media impressions (nearly double the number in 2004) carrying the message that mood disorders are genuine and treatable were created in 2005.
- DBSA conducted an online anxiety survey which revealed that 96% of people with mood disorders also have anxiety symptoms. With the information from the survey and other resources, DBSA created a new anxiety web section with information on the relationship between anxiety and mood disorders, a self-screener and help for living with anxiety.
- The Sleepless in America campaign that was launched in 2004 continued to expand in 2005. DBSA distributed more than 30,000 "Getting Better Sleep" brochures through SleeplessInAmerica.org, along with other sleep tools like eye masks and "Do not Disturb" door-hangers in English and Spanish. DBSA ended the year with two Sleep Education pilot programs, one in English and one in Spanish, at a university and a community center.
- DBSA began selling merchandise featuring DBSA's logo and slogan along with selected artwork to raise funds and reduce stigma. Our blue and yellow mood awareness wristbands imprinted with "HOPE HELP SUPPORT" and "DBSAAlliance.org" were the most popular item.
- DBSA conducted a survey of parents whose children have depression or bipolar disorder to determine the main obstacles parents face in making the system work for their kids.

Helping people successfully manage their illnesses

At DBSA, we know that the best treatment plans are patient-centered and recovery-focused and we worked to empower patients and families to ask for quality care and achieve recovery through positive actions.

- DBSAAlliance.org provided a variety of online wellness-management and communication tools. DBSA conducted online "Ask the Doctors" chats on topics including vagus nerve stimulation and transcranial magnetic stimulation, two emerging non-medication treatments. DBSA's online chats and forums were available 24 hours a day so that people were always able to reach out for help.
- DBSA and two SAB members were reviewers for Wiley publishing's Bipolar Disorder for Dummies, published in September 2005.
- The "Road to Recovery" Annual Conferences and Ceremonies of Hope in Illinois, New Jersey and Texas provided important information about taking an active role in your treatment, helping family members and overcoming stigma. They also served as a way to network with other consumers and families.
- DBSA began Peer Specialist training and certification in May with the Veterans Administration in Texas. Subsequent Peer Specialist training was held in Florida and Illinois in June and July, respectively. Nearly one hundred new Peer Specialists were certified in 2005.
- DBSA offered specialized online training for chapter leaders to increase their support group management skills. Chapters were also invited to participate in a Case Studies Competition, in which they shared their thoughts on how to address the real challenges that can arise during support groups.
- New brochures and tools included: "Food and Mood," "Kindness as a Way to Wellness," "What Helps and What Hurts," "Saying No to Negative Thinking," "Myths and Facts about Depression and Bipolar Disorder," "Getting Better Sleep," "Como Dormir Mejor," "Informacion General Sobre la Depresion y el Trastorno Bipolar," "Working Toward Wellness" and "Family and Friends' Guide to Recovery from Depression and Bipolar Disorder."

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2005 Year in Review

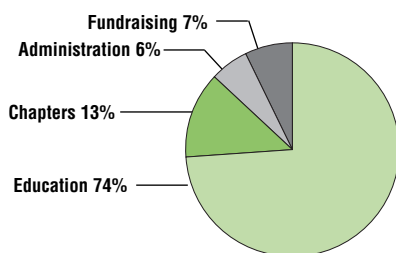
DBSA is proud to report that in 2005, 87 cents of every dollar donated was spent on programs and services and only 13 cents of every dollar was spent on fundraising and administration. This was a slight improvement over 2004.

As in 2004, DBSA ended 2005 with a surplus. This ensures that DBSA will be able to devote even more resources to helping our constituents while we remain prepared for any changes our economy may bring.

Our organization takes the utmost care to use donations wisely and allocate as much as possible on programs and services offered at low or no cost to people who need them. DBSA's financial statements were audited and it was confirmed that DBSA continues to be in compliance with Generally Accepted Accounting Principles and the Sarbanes Oxley Act.

2005 Functional Expenses

How each dollar was spent



2005 Audited Financial Statements

Balance Sheet

	2005	2004
Assets		
Cash and cash equivalents	1,247,489	576,144
Investments	465,436	446,657
Accounts receivable	29,834	8,573
Contributions receivable	100,000	100,000
Other	26,544	22,329
Property and equipment	41,982	38,825
Total Assets	1,911,285	1,192,528
Liabilities and Net Assets		
Capital lease obligations	5,995	10,258
Accounts payable and accrued expenses	86,915	46,560
Accrued liabilities-payroll, rent	82,754	64,853
Total Liabilities	175,664	121,671
Net Assets		
Unrestricted	1,064,939	856,933
Temporarily restricted	670,682	213,924
Total Net Assets	1,735,621	1,070,857
Total Liabilities and Net Assets	1,911,285	1,192,528

Statement of Activities

Revenues, Gains and Other Support		
Contributions	3,365,227	2,852,868
Other	157,692	160,192
Total Income	3,522,919	3,013,060
Expenses		
Program services	2,480,623	2,430,875
Supporting services		
Management and general	170,354	258,786
Fundraising	207,178	190,632
Total Expenses	2,858,155	2,880,293
Change in net assets	664,764	132,767
Net Assets		
Beginning of the year	1,070,857	938,090
End of year	1,735,621	1,070,857

How We Reached Our Mission

continued from front page



Working with people with mood disorders, families and health care professionals to improve care

We know that good care is collaborative and we encouraged our constituents to form relationships with their health care providers in which communication and agreement played large roles. DBSA also continued to work in hospitals where many people are first diagnosed with depression or bipolar disorder.

- DBSA expanded the Hospitalization Awareness program with a new Wellness Kit including a workbook, family guide and crisis card. Twenty-five chapters received grants to help them connect with local hospitals and distribute Wellness Kits. DBSA's web section expanded to include a peer-to-peer treatment center referral section in the style of our successful peer-to-peer physician/therapist online referral.
- In November, DBSA published [The Physicians' Guide to Depression and Bipolar Disorders](#), edited by Scientific Advisory Board members Dwight Evans, M.D., and Dennis Charney, M.D., a book about mood disorders and other co-occurring illnesses. The book contained one chapter on "Empowering Patients and Families," and one on "Using Recovery Principles," written by DBSA senior staff. The book is being marketed to health care professionals, medical schools and online shoppers around the world.
- DBSA set up a Crisis Fund to collect special donations to help chapters respond quickly to disasters like the Gulf Coast hurricanes. The Crisis Fund will help educate chapters about assisting survivors of traumatic events. It will also provide chapters with additional resources to reach out to more people in need.
- DBSA met with the Veterans Administration (VA) Committee on Veterans with Serious Mental Illness and the subcommittee on Veteran-/Family-Centered Care to discuss how to integrate Certified Peer Specialists into the VA's treatment plan.
- Our organization also served on the Alternatives Conference 2005 committee, participated in the Center for Medicare & Medicaid Services Open Door Forum and attended the Governor's Task Force for Children's Mental Health meetings.



Expanding the ability of people to receive treatment

With the commencement in January of the 109th Congress, DBSA began contacting staff of mental health champions on Capitol Hill to urge the re-introduction of previously supported legislation, such as mental health parity. Unfortunately, this important legislation was not re-introduced, but DBSA served on a number of committees dedicated to improving mental health care and increasing its availability.

- DBSA joined the Mental Health Liaison Group opposing federal legislation that would exempt association health plans from state regulation. We also opposed a federal budget resolution that would dramatically reduce federal support for Medicaid-financed mental health service.
- DBSA was part of the Substance Abuse and Mental Health Services Administration Anti-Stigma Campaign Steering Committee.
- We brought DBSA's message to numerous professional and government organizations by presenting at the Centers for Medicare & Medicaid Services New Freedom Initiative conference; the VA Consumer-/Family-Centered Care subcommittee meetings; the ACMHA Summit (American College of Mental Health Administrators); and the National Association of State Mental Health Program Directors.
- DBSA supported important legislation that would protect families coping with mood disorders: the Family Opportunity Act of 2005, the Child Health Care Crisis Relief Act and the Keeping Families Together Act.
- Our online Legislative Action Center was improved with an advocacy guide which enabled site visitors to contact their Congressional Representatives about important bills and laws quickly and easily.

Advancing research to improve mood disorder treatment options

DBSA advocated not only for medical research funding, but also to enable more research on the power of peer support, a treatment method that is both cost-effective and beneficial to consumers.

- DBSA advocated on Capitol Hill for an increase of \$3.5 billion in discretionary funding for public health through the Function 550 budget allocation for Fiscal Year 2006. DBSA also supported full federal funding of research at the National Institutes of Health and the Substance Abuse and Mental Health Services Administration and met with senior staff at the National Institute of Mental Health (NIMH).
- DBSA was part of the NIMH Alliance for Research Progress. At the NIMH Outreach Partnership Annual Meeting, in Omaha, Nebraska, DBSA presented two workshops on "Consumers as Providers."
- The Gerald L. Klerman Awards were presented by DBSA to recognize two psychiatrists who have made outstanding contributions to understanding mood disorders and to draw attention to the importance of further research.
- We were proud to report on the preliminary findings concerning the effectiveness of Certified Peer Specialists in *Outreach*. Preliminary results of a multi-site study by the Center for Mental Health Services (CMHS) suggested that peer support improves individuals' well-being in many ways.
- DBSA was part of the CMHS New Freedom Initiative conference and took a substantial role in the Annapolis Coalition by planning, facilitating and writing patient-perspective materials to help develop guidelines for training professionals.



Increasing acceptance and understanding of mood disorders so that the rights of people with mood disorders are protected

DBSA helps consumers and families advocate for the recognition of depression and bipolar disorder as real, legitimate and treatable illnesses, as well for equal treatment by providers and payors of health services. In this time of increased attention to mental health reform, DBSA stays at the forefront of advocacy efforts.

- DBSA, as a member of the Campaign for Mental Health Reform, worked to compile a Roadmap for Federal Action on America's Mental Health Crisis, urging Congress to enact specific recommendations from the President's New Freedom Commission on Mental Health, including providing access to early intervention services and ending discrimination by public and private health insurance programs.
- Due to the efforts of DBSA as a partner in the Campaign for Mental Health Reform, the Keeping Families Together Act (H.R. 823 and S. 380) was reintroduced in February with the goal of improving access to state mental health and support services for families in danger of losing their children because they cannot afford mental health care.
- To enhance mood disorder understanding on local levels, DBSA presented at the U.S. Conference of Mayors Mental Health Task Force. DBSA urged the mayors to promote depression and bipolar disorder as their causes for 2005, as a way to help their constituents at work and in the justice system. To improve understanding at the state level, DBSA joined the Governor's Task Force on Children's Mental Health.
- DBSAAlliance.org began offering an "Advance Directives Online Guide" to help consumers ensure their choices are respected if they become ill.
- DBSA strongly opposed federal legislation exempting certain health plans from state regulation that could reverse some state parity laws currently in effect and also raised concerns about federal budget resolution that would dramatically reduce federal support for Medicaid-financed mental health services. DBSA also supported the Child Health Care Crisis Relief Act.
- DBSA participated in the Academic Consortium, a coalition of mental health organizations, at its annual meeting in Washington to urge Members of Congress to increase federal funding for the National Institutes of Health. We were also part of the SAMHSA New Anti Stigma Campaign Steering Committee meeting and the Guidelines for Adolescent Depression in Primary Care development meetings.

Without the steadfast enthusiasm of our chapters and support group participants, the generosity of our donors and the courage of every person who reaches out to DBSA for help, DBSA would not be the organization it is today. Our deepest gratitude goes out to each one of you.

DBSA's Mission:
**To improve the lives of people
 living with mood disorders**

Special Thanks to our Donors

In DBSA's Annual Report, we celebrate those individuals, organizations, foundations and corporations that demonstrated their commitment "to improve the lives of people living with mood disorders" by generously supporting our 2005 programs. These inspirational gifts were crucial to providing life-saving services to more than four million people. Thank you!

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