



Newsletter of the

Depression and Bipolar Support Alliance

INSIDE

4

**Ethics, Wellness:
CE Course for Peer
Specialists**

5

**Announcing the
Chapter Service
Awards**

6

**DBSA 2008
National
Conference:
The Power of Peers**

7

**Help Others
Find their
"Inner Light" Again**

MISSION

The mission of the
Depression and Bipolar
Support Alliance (DBSA)
is to improve the
lives of people living with
mood disorders.

Support Wherever You Are!

DBSA's online support groups (OSGs) follow the same peer-led format as in-person groups. For nearly 900 registered users, OSGs are real-time, safe and anonymous ways to find support. Learn more at www.DBSAAlliance.org/Anywhere.

Supporting Our Veterans

This Memorial Day, Americans honored those who have died in military service. We must also honor the 120,000 new American veterans who have returned from their service in Iraq and Afghanistan but now struggle to survive mentally and emotionally. The Department of Veterans Affairs (VA) states that almost half our combat veterans return with post-traumatic stress disorder (PTSD) and that depression and other mental disorders run a close second. But most tragic is what CBS News reported, and the VA confirmed, this May: every day in our country, an average of 18 veterans commit suicide. "It's quite possible [that] suicides ... could trump the combat deaths," said NIMH Director Thomas Insel, MD, at the American Psychiatric Association (APA)'s 2008 Annual Meeting.

Unfortunately, veterans in need of mental health services face unique obstacles, as DBSA Peer Services Director Lisa Goodale points out. Entitled to VA health benefits, they must apply during a specified timeframe; some miss out on access to services that they discover, too late, they need. Others simply don't want treatment through the VA; 75 percent, says the NIMH, don't use VA health services. Reasons for this vary. For some, it can be a painful, unwanted reminder of war's trauma. Others live far from VA facilities and services. Still other veterans don't want "mental illness" on their official record, a response to a still-strong stigma within the military culture.

In an effort to help veterans address the overwhelming need, the VA has made a number of changes. It has extended combat veterans' eligibility for health benefits; created a suicide prevention program; and hired more mental health workers, making it the nation's largest mental health provider. Its new Peer Support Technician positions (the VA's term for peer specialists) and peer-run support groups are especially positive steps—efforts that DBSA wholeheartedly supports.

Since 2005, DBSA has been proud to collaborate with various VA facilities nationwide on peer specialist

training and technical assistance, helping to authentically incorporate peer support into VA services. Both the U.S. Substance Abuse and Mental Health

Services Administration (SAMHSA) and the VA regard peer support as a "best practice" in mental health care. And DBSA's peer training helps the VA fulfill an important initiative from its strategic mental health plan: to "promote paid peer-led services ... as an adjunct to traditional mental health services."

Peer support is well received among veterans,

says Goodale. As she notes, soldiers are trained to be part of a tight-knit unit, and as veterans, "they 'get' the concept of peer support very quickly." Because they are peers on several levels—they share a common military culture and common mental health challenges—they have an instant bond and trust. Veteran peers often open the door for others to help them realize they're not alone in their agonizing war against mental illness. They help veterans become true partners with the many dedicated VA clinicians who want to see them reclaim full lives.

To further support our veterans, DBSA regularly provides leadership at VA peer support conferences and also serves on the federal Consumer Council to the Committee on Care of Severely Chronically Mentally Ill Veterans. Along with representatives from organizations like the American Legion, Disabled American Veterans, Mental Health America and the U.S. Center for Mental Health Services (CMHS), DBSA advises this committee and offers its unique consumer perspective.

DBSA stands ready to help more veterans transform their war-torn lives. DBSA-trained peer specialist and veteran Adrienne Fitts puts it this way: "I can give you pictures of me before [my training] and me now, and there's a big difference....It's like being reborn." Her message—and DBSA's—is that **this transformation can happen for you, too**. Recovery is possible, especially with the help of peers.



President's Outlook



Sue Bergeson

Future of Health Care

This spring, I participated in a project on the future of health care for a professional association I belong to, the American Society of Association Executives. So often, especially when it concerns mental health, we hear frustrating and discouraging news about health care, insurance and treatment. But in the spirit of sharing some uplifting information, I wanted to paraphrase the following trends from this project that we could see as "good news:"

More customization: With the cost of delivering services through the Internet decreasing to almost zero, we might see a rise in a highly-personalized delivery of educational materials, treatment plans, tools and other goods and services.

Cell phones instead of laptops: Cell phones are the most widespread form of personal technology; they even outstrip the credit card! Many of our peers who can't afford Internet service and/or a laptop might soon have the same access to information and services in a form of technology they can afford—their phone.

Social networks and innovation: With so many people engaged in social networks online and in their local communities, we might be able to harness that energy and massive "brain trust" to find—and refine—products, technologies and services that make the world better for those of us living with mental illnesses.

Happiness as an industry: Health care "forecasters" predict a marked rise in self-help and coaching services to improve people's sense of well-being.

Personalized medicine: Revolutionary gene-based products and services appear to be the next wave in technology. We might see the creation of medicine that's unique to our particular genetic "formula," which would put an end to the endless attempts to find the right combination of medications. (Dr. Greg Simon talks more about this on page 4.)

Increasing prevalence of the "freemium" business model: An increasing number of online businesses are offering their products free of charge, while earning their income from advertising sponsorship and other services. For example, the medical website *www.Sermo.com* provides free registration for 50,000 physicians to share their expertise and opinions with each other anonymously. The hope is to achieve better outcomes more quickly for their patients, instead of waiting on research and studies to be published. The site operates on the "freemium" business model—it's funded by organizations and commercial partners who pay to read what doctors are saying about illnesses, treatment, etc.

You see, there is some good news out there about health care. Feel better? If not, wait a few years and you can get a new wellness coach ... maybe even a peer wellness coach!

DBSA AND ME

As a teenager, I was diagnosed with "manic depression" in 1963. I remember little of that time but was fortunate to have a loving, supportive family ... and a school principal who went out of the way to help me. Little could be done back then, but I saw a psychiatrist three times a week, was hospitalized when I needed it and, somehow, survived.



Neal Nored

But I went untreated the next 30+ years. My worst symptoms had more or less moderated. Hypomanic most of the time, I had little need of sleep, endless energy and could focus like a rifle when necessary. Almost ideal—except for failed marriages, bankruptcy and debilitating crashes. I'm sure others had hunches about my mental health, but I was totally unaware.

In my early 50s, shortly after my father died, I was deeply depressed and "remembered" I had a mental illness. My regular doctor prescribed an antidepressant and I took off like a heat-seeking missile. I had full-blown manic episodes, anxiety attacks and, at times, auditory and visual delusions—nothing like my adolescent symptoms. Then, the mixed episodes began—for me, the worst and most dangerous kind. My wife and daughter (also living with bipolar disorder) convinced me to check into the hospital and see a psychiatrist. I was diagnosed with bipolar I and began very high levels of medication. But I only got worse—mentally and physically. The high doses were literally killing me: I was hospitalized three times (for side effects) and also developed permanent nerve damage. I had no idea what to do ... where to go.

Unstable, scared and sick, in 2002, I found the DBSA Forum and began talking online with others who shared my diagnosis, fears and symptoms. I wanted to learn as much as possible about my illness. Though I had a psychiatrist and a therapist, I found, at that point, that peers were even more important resources. I needed information from people who understood exactly what I was going through. DBSA has made a profound difference in my life—it gave me that important information and a way to connect with others like me.

These days, I'm facilitating a new DBSA online support group (OSG). OSGs add real-time, stimulating peer support to DBSA's web services. Nothing replaces real-life relationships, but the dynamics of Forums and OSGs truly come close. If you can't access in-person support groups, they're ideal. Safe and anonymous, OSGs let you share with others who can relate. As for me, sharing with others online through DBSA, I've made close friends who are a large part of my life.

My illness is still a huge challenge, but one I can live with, and I lead a pretty normal, stable life now. I'll never be who I was before and I am uncertain about the person I may become. But I am certain that DBSA will always be an integral part of my personal wellness plan.

A dedicated DBSA volunteer, Neal Nored resides near the Texas Hill Country's "gateway." He's also well-known for developing ways to offer online education/training classes, and his 40-year technical career includes strategic positions with IBM and Blackboard Inc.



Stephen Propst, MBA

Taking Charge of Your Recovery

If you, like me, live with a mood disorder, who's in charge of your recovery? Your doctor? Your therapist? A family member? (Does a family member act like he or she is in charge?)

The answer is you! No one's more qualified to champion your recovery than you are. That means becoming your own best advocate. Let me spell out the specifics for you using the letters in A-D-V-O-C-A-C-Y:

Attitude: A can-do attitude is essential to moving forward with recovery. How you see things matters.

Destination: What defines wellness for you? Having a home, a job and a relationship? You have to know your desired destination, and the people on your team (your doctor, therapist and family members) should support you in reaching it.

Vehicle: You must have a vehicle, a way, to get where you're going. A roadmap or plan of action to guide you along the path to wellness is fundamental.

Optimism: I define optimism as being realistically hopeful. That means facing reality today while hoping for a better tomorrow.

Control: Taking charge of your recovery is really about who is in control. Ultimately, you

should be. After all, you're the one person best equipped to take care of you!

Action: Thinking or theorizing is one thing, but taking action moves you forward. Visit a support group. Find a doctor to team up with. Read a book. Attend a conference.

Challenge: There might be times when you just don't think you can make it. (I know I've been there many times.) But keep the faith—challenge those challenges. There are always new ways to equip, empower and energize your recovery.

You: You hold the key to taking charge of your well-being and your life! Capitalize on your strengths, be mindful of your vulnerabilities and acknowledge your needs.

To take charge of my own recovery, I've found it helpful to:

- Live day by day. Take things one step at a time.
- Learn something new every day. Knowledge is empowering.
- Laugh several times a day. There's no better medicine.
- Lean on others if it's a tough day. None of us can go it alone.

It's amazing how peers can help one another take charge of recovery. This amazing concept is the focus of our upcoming conference, "The Power of Peers." I hope to see you there this September!

DBSA 2008 Board of Directors

EXECUTIVE COMMITTEE

Chair
Stephen Propst, MBA
Atlanta

Vice Chairman
Randy Revelle, JD
Seattle

Secretary
Renice Rodriguez
Rockford, Ill.

Treasurer
Danielle Byron
Oakbrook Terrace, Ill.

Chair, Scientific Advisory Board
Gregory Simon, MD, MPH
Seattle

Members-at-Large
Judith A. Cook, PhD
Chicago

Ronald Rossetti
Hampstead, N.H.

DIRECTORS

Christy B. Beckmann
St. Louis

Sheila Fine
Pittsburgh, Penn.

E. Thomas Gimbel
Chicago

Lori L. Hoadley
Rockford, Ill.

Kathryn D. Lynnes, JD
Hurley, N.M.

Marshall Thomas, MD
Denver

Alan Zais
Rockford, Ill.

PRESIDENT

Non-voting member
Sue Bergeson
Chicago



SAVE THE DATE

Annual Gala '08

A benefit to promote awareness and compassionate understanding of depression and bipolar disorder as real diseases

Saturday, November 8, 2008 • 7:00 PM
Chicago Cultural Center

Event Co-chairs:
Gail and Norm Cutler
Susan and Brett Cutler
Susan and Harlan Haimes

For more information:
800.826.3632
www.RebeccasDream.org



Scientific Advisory Board Update

The Promise of Personalized Treatment

Greg Simon, MD, MPH
SAB Chair



"Personalized medicine" is a new buzzword for the genetic age. It promises that we'll learn why and how people respond differently to different treatments. And, understanding this, we can choose—in advance—the right treatment or combination of treatments.

In the last five years, major health conditions like HIV, breast cancer and heart disease have seen more personalized treatment. Mood disorders, though, are still on the road to that promise. The best example of how far along that road we are is the NIMH-funded STAR*D study. It explored this question (probably familiar to many of you): "When the first antidepressant medication doesn't work, what should you try next?" STAR*D compared three options: (1) switching to a different antidepressant, (2) adding a second antidepressant or (3) adding psychotherapy.

To sum up what STAR*D found about these three options: "They're all good." With all three, 25 to 30 percent of people had very good results on the second treatment even after the first didn't help. There was no significant difference among the three options, as far as whether they would work. And there were no specific factors (age, gender, etc.) that predicted doing better on one treatment than another.

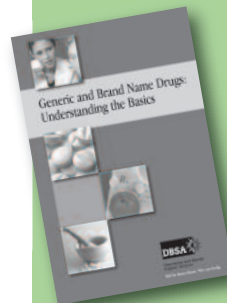
For those struggling to find an effective treatment, the STAR*D results carry a mixed message. The frustrating news: It's worth trying a second treatment, but we don't yet have good indicators of which second treatment to choose. On average, they're all good. But it's almost certain that there's one that will work best for you. And right now, we have to rely on trial and error (or slightly educated guesswork) to find the best one.

The good news: If the first treatment doesn't work, it's certainly worth trying a second one. And if that doesn't work, it's probably

worth trying a third. As my DBSA friends like to remind psychiatrists like me, it's not the person who "fails" the treatment but rather the treatment that fails the person. If one treatment fails you, it's definitely worth trying another. This is true of treatment for depression, as well as for certain aspects of bipolar disorder.

It's also very likely that we'll soon be able, somehow, to predict how people will respond to treatments (both medication and psychotherapy). But mood disorders are more complicated conditions than cancer or HIV. Whether treatments work depends on many more factors, and so it makes sense that personalized treatment will be slower to arrive. Still, it's likely that, in the next five to 10 years, there will be genetic or chemical tests to help us customize treatments for these illnesses. And in the meantime, we stay hopeful and keep trying.

A New DBSA Brochure



Hot off the press, **Generic and Brand Name Drugs: Understanding the Basics**, offers guidelines for consumers who want to make smart, informed decisions with their providers about medication.

This 12-page brochure also explores the similarities and differences between brand name and generic drugs. For a copy of this essential go-to guide, visit our online store at www.DBSAlliance.org/brochures or call (800) 826-3632.

Ethics & Boundaries, Wellness Strategies: Course for Peer Specialists at Conference

The Power of Peers

Peer Specialist CE Course*
Thursday, September 11
8:30 a.m.–4:45 p.m.

*6.0 CE units for individuals successfully completing entire course and submitting on-site course review/evaluation

At this year's National Conference, DBSA is proud to offer a special continuing education (CE) institute for peer specialists. The presenters are Brenda Bergeson, MD, DBSA Director of Scientific Affairs; Sue Bergeson, DBSA President; and Sharon Jenkins-Tucker, Executive Director, Georgia Mental Health Consumer Network.

This one-day event is divided into two topics:

Peer Specialist Ethics & Boundaries (Morning)

Participants will examine their roles as peer specialists and the centrality of their grounding in mutuality and common experience.

This course will cover the following topics:

- Interpreting your unique role and responsibilities to both clinicians and those you serve
- Successfully handling common pitfalls, such as being co-opted by traditional systems and providers and being marginalized by coworkers
- Boundary-setting for yourself as a peer specialist
- Effectively using your time
- Knowing when and how to say "no"
- Friendships, then and now
- Maintaining high standards of personal conduct

Peer-Led Wellness Strategies (Afternoon)

This course discusses the challenges to overall health, such as chronic stress and obesity, faced by people with mental illnesses. It also explores peer-led techniques to use in local communities to counteract these challenges. The course also covers tools such as the relaxation response, wellness support groups and other ways to monitor and maintain wellness.

Chapter Highlights

Chapter Service Awards

Each year, DBSA-affiliated chapters have the chance to participate in our Chapter Service Awards program. Even though the awards go to only a few chapters, we commend and congratulate all of our chapters

for their outstanding outreach and educational programs this past year.

These are the 2007 winning chapters, with a few of their many achievements highlighted:

Large Chapter Service Award

DBSA Colorado Springs (Colo.) had a fruitful year: over 150 educational programs, "Teen Initiative" presentations to over 850 students and over 1,800 support group attendees. They offered a variety of "Pathways to Recovery" and "Living Successfully with a Mood Disorder" trainings, as well as community outreach activities such as "Faces of Recovery," where six consumers shared their stories with over 60 people.

Small Chapter Service Award

DBSA Succasunna (N.J.) was very active in several different arenas: fund-raising activities, grant writing, "Pathways" and "Living Successfully" trainings, community outreach, educational programs, a speaker series and an interactive event with *Electroboy* author Andy Behrman. They also launched their new website, www.DBASuccasunna.org.

Professional Advisor Service Award

Thomas Sheriff, PhD, has served DBSA Navarro County (Tex.) since the chapter started, more than three years ago. He is a strong advocate for the group and for peer support. Dr. Sheriff also leads a monthly study group, attracting new members to the group, and promotes prevention, wellness and recovery in all his work.

"Rookie" Chapter Service Award

DBSA Bennington Area (Vt.) inspired DBSA to create a new award to recognize the incredible efforts of newly-affiliated chapters. Just in their first six months, anywhere from 10–18 people attended support group meetings. They set aside the last 10 minutes of each meeting for participants to set goals to accomplish for the next time. On a national level, they participated in the "Depression Is Real" campaign, placing PSAs in five media outlets.

2008 Chapter Leadership Forum

New to CLF this year are a series of café-style sessions and workshops led by Jerry Teplitz, JD, PhD, a speaker for top Fortune 500 companies and Geran Capewell, world-renowned fundraising professional, on Sunday, September 14, following the DBSA National Conference.

To register, visit www.DBSAAlliance.org/CLF2008 or call (800) 826-3632. (Reminder: DBSA National Conference registration is separate from CLF registration and open to any number of chapter participants.)



Chapter Successes

DBSA Colorado Springs (Colo.) chapter founder Karen Fallahi received the Leadership Service Award at the 2008 Pikes Peak Regional Volunteer Day Awards Luncheon.

DBSA Generation Y (Ohio) chapter leader Jared Sherman was awarded an "mpower" youth award by Mental Health America for his mental health advocacy and "stigma-busting" efforts.

DBSA Falls Church (Va.) hosted a "Recovery and Wellness Weekend Retreat for Mental Health." The weekend featured a recovery-themed movie, support groups and classes on a variety of topics.

New Chapters

Chapters affiliating between February 2, 2008, and April 30, 2008

DBSA Cerritos (Calif.)

DBSA Fresno (Calif.)

DBSA High Desert/Morongo Basin (Calif.)

DBSA Huntington Beach Christian Community (Calif.)

DBSA Santa Cruz County Moms (Calif.)

DBSA West Pasco (Fla.)

DBSA Swainsboro (Ga.)

DBSA Westfield (Ind.)

DBSA Anne Arundel County (Md.)

DBSA Calvert County (Md.)

DBSA Lower Shore (Md.)

DBSA Metro Baltimore (Md.)

DBSA St. Louis North County (Mo.)

DBSA Ledgewood (N.J.)

DBSA Long Island (N.Y.)

DBSA Nassau County (N.Y.)

DBSA Clermont County (Ohio)

DBSA Knox County (Ohio)

DBSA Toledo Cancer Survivors (Ohio)

DBSA Toledo Grief Survivors (Ohio)

DBSA Ardmore (Okla.)

DBSA Guthrie (Okla.)

DBSA Ponca City (Okla.)

DBSA Oak Ridge (Tenn.)

DBSA Greater Beaumont Area (Tex.)

DBSA Salt Lake-Riverton (Utah)

DBSA Western Loudoun (Va.)

DBSA New Directions Delaware

(Del.) held its annual "Drew Sopirak Memorial Program," featuring Lizzie Simon, acclaimed author of *Detour: My Bipolar Trip in 4D*. Over the years, the event has attracted thousands with speakers like Dr. Kay Redfield Jamison, Victoria Maxwell and many more. Learn more at www.newdirectionsdelaware.org/sopirak.html.

To learn more about DBSA successes and activities in your own community, contact your local chapter. Visit www.DBSAAlliance.org/FindSupport or call (800) 826-3632.



DBSA 2008 National Conference

DBSA invites you to experience **The Power of Peers** this September 10–14, at our National Conference in the charming waterfront city of Norfolk, Virginia. Join us for five days of peer-centered presentations and educational workshops led by world-renowned mental health experts and educators, best-selling authors and consumer advocates ... including an unprecedented lineup of internationally-known keynote speakers:

Conference at a Glance

THE POWER OF PEERS

September 10–14, 2008
 Sheraton Norfolk Waterside Hotel
 Norfolk, Virginia

CONFERENCE AGENDA

Wednesday, 9/10

"Fighting the Hidden Battle: Veterans & Others Living with PTSD" (pre-conference institute)

Thursday, 9/11

"Power of Peers: Peer Specialist Continuing Education (CE)" (pre-conference institute)

Friday, 9/12 (Morning)

"At Home with Wellness: Families & Recovery" (pre-conference institute)
 "Common Ground with Pat Deegan, PhD" (pre-conference institute)

Friday 9/12 (Noon)–Saturday 9/13

4 Powerful Keynote Speakers
 5 "Power of Peers" Roundtables
 14 Educational Breakout Sessions
 "Ask the Doctors" Session
 President's Lunch with Sue Bergeson
 Friends Reception Fundraiser
 DBSA Support Groups
 Stand-Up Comedy Night

Sunday, 9/14

Chapter Leadership Forum (CLF) (post-conference institute)

Monday, 9/15 to Friday, 9/19

DBSA Peer Specialist Training (post-conference institute)

Kay Redfield Jamison, PhD

(researcher, consumer, author)

- Professor of psychiatry at Johns Hopkins University School of Medicine and honorary professor of English at the University of St. Andrew's in Scotland
- Author of best sellers *An Unquiet Mind* and *Touched with Fire*, among others



Richard Cohen

(best-selling author)

- Three-time Emmy award-winning journalist
- Author of *Strong at the Broken Places* (featuring the personal story of Larry Fricks) and *The New York Times* best seller, *Blindsided*



Pat Deegan, PhD

(researcher, consumer, author)

- Cofounder of National Empowerment Center, Inc., and Boston University's Institute for the Study of Human Resilience
- Leader in the national consumer movement and in the effort to restore mental health hospital cemeteries

Larry Fricks

(advocate, consumer, educator)

- Former director of the state of Georgia's Office of Consumer Relations and Recovery
- Designer of certified peer specialist programs and a founder of the Georgia Mental Health Consumer Network, Inc., and of the Georgia Peer Support Institute

Sign Up and Save

Take advantage of different ways you can save on "The Power of Peers" conference registration!

Advance Registration—

You can save 20% if you sign up before August 4.

Special Discount Packages—

Do more ... but spend less! Instead of paying several times for several conference events, our four discount packages let you pay one, lower rate to attend a combination of events. Choose from packages that focus on consumers, families, peer specialists and veterans.

Choose from packages that focus on consumers, families, peer specialists and veterans.

Save Twice—If you sign up for a special discount package during our Advance Registration period, between now and August 4, you'll save even more—up to \$240!



To register or learn the latest conference news, visit www.DBSAAlliance.org/Conference2008 or call toll-free (800) 826-3632.



Learn stand-up comedy ... and make 'em laugh!

Comic, counselor and author **David Granirer** is offering a virtual summer course that culminates in attendees' stand-up comedy debut at the conference. David, whose *Cracking Up* documentary recently won a 2008 Voice Award, is the founder of Stand Up for Mental Health. This project teaches comedy to those with mental illness as a way to build confidence and fight public stigma. To learn about the program and how to apply, visit www.DBSAAlliance.org/Comedy2008 or call (800) 826-3632.

Ignite the Light

Strike Up Support for Those with Mood Disorders

Has your “inner fire” ever lost its glow? Think of the people who helped you rekindle that flame. For more than 21 million Americans who live with depression or bipolar disorder, finding that inner fire again can be a daily—sometimes hourly—battle. And recovery can be a dark, grim and lonely road to travel.

But there’s strength in numbers. Think of how much light we could shine on that dark road, if we each gave just a little. Even a small flicker of light—the help of just one person—can brighten someone’s way back to wellness. Will you be that one small flicker? Help us “Strike Up Support” and **Ignite the Light** on that journey.

DBSA has received a \$10,000 “matching

grant” from “The Curtis and Edith Munson Foundation” and Mr. Wolcott Henry, the foundation’s chair. The foundation will donate this very generous sum if we, with your help, can “match” the amount by the end of this year.

Instead of buying that cup of coffee on the way to work, put those few dollars toward our **Ignite the Light** campaign in honor of those who have helped you rediscover your inner

spirit. Kindness is contagious. It doesn’t take much for hope, help and support to spread like wildfire.



Ignite the Light funds will support DBSA services/resources such as

- advocacy efforts
- online support groups
- peer specialist/provider training
- National Conference scholarships
- continuing work with veterans



Light someone’s path and brighten your own. Visit www.DBSAAlliance.org/ignite.

Headline News

DBSA Honors Clinicians, Researchers with Klerman Awards
www.DBSAAlliance.org/Klerman

Hollywood: SAMHSA Voice Award Honors DBSA’s Larry Fricks
www.DBSAAlliance.org/Hollywood

DBSA’s Executive VP Testifies with USpra before Congress
www.DBSAAlliance.org/Congress

Workplace Stigma: DBSA Speaks to ABC News
www.DBSAAlliance.org/ABCNews



Speaking Out for New Moms

Six years ago, after giving birth to her first child, a successful 41-year-old sales manager plunged to her death from a Chicago hotel’s 12th floor as firefighters pleaded with her. Melanie Blocker-Stokes took her own life, despite medical help and the support of family and friends.

Melanie’s tragedy soon prompted legislation in both the U.S. House and Senate. If passed, the Melanie-Blocker Stokes Postpartum Depression and Research Act and the MOTHER’s Act will help the families and women afflicted by postpartum depression (PPD) through lifesaving educational programs and screening services.

In January, DBSA sent an Advocacy Alert asking you to write your legislators in support of these PPD bills. Thousands of you sent letters to Congress through our Legislative Action Center (LAC). As time

went on, instead of contacting individual legislators, you began to ask specific congressional committees (like the House Committee on Energy and Commerce), to support a vote rather than just a bill.

Unfortunately, rumors and lies began circulating on the Web, as outspoken opponents began asking people not to support these bills. While they called themselves “experts,” none of them had any expertise in mental health or any PPD-related field. They claimed the legislation was just a conspiracy by big pharmaceutical companies to push new moms to take unnecessary medication.

Tell that to the **more than 800,000 women** who will develop a diagnosable postpartum mood disorder

this year! To debunk these myths, on April 8, DBSA sent you another alert marked “Urgent.” Your response has been nothing less than amazing—unprecedented, Web experts tell us! Just nine hours after our alert, you’d sent 1,200 letters to legislators. In the next two days, you sent 6,300 more. After one month, you’d sent over 15,000 letters speaking out against the PPD rumors!

And, for the first time, other groups are proactively joining us. Organizations and blog sites like Postpartum Support International (PSI), Postpartum Progress, Moms Speak Up, Becoming Me, Beyond Blue and EmpowerHer are linking their readers to our LAC so that even more letters reach Congress.

Did you know that as few as **five letters** can make a difference in how your legislator votes? Even if you’ve already sent a letter supporting PPD legislation, please send another.



Help us reach the 20,000 mark for letters supporting PPD legislation! Write Congress today at www.DBSAAlliance.org/Advocacy.

