

# The Bipolar Express

Topo Foundation for EDUCATION

www.TF4E.org

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## WELCOME

The Topo Foundation for EDUCATION (TF4E) is the initiative of a group of friends that share Enrique (Topo) Rodriguez's commitment towards Mental Health Education for the community. Our "message of hope" is about empowerment, inclusiveness and responsibility, because mental health is everybody's business!

## ABOUT TF4E

Our aim is to engage the community at large by approaching already existing organisations and institutions. When we speak to students, we would encourage their teachers and parents to attend the talks too. By doing so, we promote social responsibility and inclusiveness because mental health is everybody's business. Thus, we include the whole community into Mental Health.

## VISION

To promote education, awareness, prevention and destigmatisation of mental illness.

## MISSION

To take a community based approach towards mental health education, through programs which engage our key stakeholders and partners including: high schools, sporting clubs, local communities, workplaces, healthcare professionals and governments.

## OBJECTIVES

- To promote tolerance and a better understanding of mental health issues, thus reducing the stigma.
- To promote the early diagnosis of mental illness.
- To promote our "message of hope" primarily in NSW, albeit responding to wherever we are requested or invited.
- To deliver mental health education through a team of trained and experienced "Consumer Advocates".
- To reduce the incidence of mental illness and suicide in our community.



Interplaza Hotel, Cordoba presentation  
(500+ people in attendance)

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## TF4E IN SOUTH AMERICA – by TOPO

### The ISBD's 4<sup>TH</sup> Biennial Conference Sao Paulo, Brazil, 17-21 March 2010

I was privileged to have been invited by the International Society for Bipolar Disorders to participate and to deliver a presentation on their ADVOCACY GROUPS segment on Friday 19<sup>th</sup> March at the Grand Hyatt Sao Paulo Hotel. Some 900 delegates from the four corners of the world were present; it was a lively and colourful learning experience and a very beneficial networking experience for me.

### Advocacy Groups - Mental Health Management Plans

My presentation in English was centred on Mental Health Management, “A 360° x 365 Days Approach” through Wellbeing Plans prepared and implemented by consumers (service user/patient). Beginning from the premise that there is no definite cure for the illness, the next best thing is management or control of the condition and/or symptoms (more information on Wellbeing Plans below).

**Argentina – March 2010** The Argentine Association for Affective Disorders (ASATHU), the Neurosciences Institute - Favaloro University (NIFU) and the TF4E organised two Conferences in Cordoba and Buenos Aires with the theme being: “Affective Disorders – Building a New Alliance Between Patients & Professionals” delivered in Spanish (so had to brush up the lingo pretty quickly).

**Cordoba on 26/3/2010** at the Interplaza Hotel, Dr. Gerardo Garcia Bonetto (Psychiatrist, President, ASATHU) opened this Conference providing a 30 minute introduction into Affective Disorders (Bipolar and Depressive Disorders) as well as an explanation of the importance of a “combined approach” from “both sides of the counter”. This notion of TEAMWORK is being not only discussed but also implemented whenever possible as the most effective in order to promote treatment



*Topo Rodriguez and Gerardo Garcia Bonetto  
(Q & A Cordoba)*



*Regente Palace Hotel, Buenos Aires presentation  
(350+ people in attendance)*

and medication adherence. Afterwards, I provided a sixty minute presentation on Wellbeing Strategies, above explained. And on the responsibility and active role CONSUMERS must play in this mental health recovery game. The audience was absolutely overwhelming and receptive, 500+ people were sitting, standing and even seated on the floor, surpassing even the most optimistic expectations. This Public Forum concluded with sixty minutes of Q and A, with a certainly committed and very happy audience. The final applause was deafening! A marvellous experience for me in my home town with quite a few friends providing support!

**Buenos Aires 30/03/2010** the event was at the Regente Palace Hotel in the CBD. Similar format was applied. The first thirty minute segment comprised of an introduction into Affective Disorders by the local Psychiatrist from Favaloro University and ASATHU. Dr. Sergio Strejilevich, made remarks on how Bipolar Disorders manifests and where they fit within the wide mental illness spectrum, followed by my presentation on Mental Health Management and Wellbeing. We completed the event with the last sixty minutes of Q and A. We had around 400 people in attendance and the session lasted 2.5 hours. The crowd wasn't as big as Cordoba but just as enthusiastic and keen to learn the new concepts and general information imparted.

Both events were fantastically well supported by GSK (Glaxo Smith Kline) and E.N. Patagonia who provided the Events Management and logistics expertise. I'd also like to extend a huge thank-you to everybody involved in any capacity with it such as: Sergio Strejilevich, Gerardo Garcia Bonetto, Mario Volponi, Maria Laura Lopez, Eduardo Naparstek, Yesica Scali, Josefina Edelstein, Jaime Mosquera, Marcos Crapa, Marcelo Garbini, Marcelo Cetckovic and Gustavo Vazquez.

For media coverage and photos go to:  
[www.tf4e.org/spanish.htm](http://www.tf4e.org/spanish.htm)

## RECOMMENDATIONS for the preparation of a sound and effective personal Wellbeing Plan

“RELATIVE NORMALITY or EUTHYMIA” can be achieved with a dedicated watchful eye from the consumer (captain of the recovery team) to start with and everyone else involved in the recovery paradigm to follow. In some of the cases by activating these “Wellbeing Plans” life improves dramatically so much, that many consumers experience a “new meaningful life” never had before.

Proactive strategies and personal choices will slowly but surely lead us into the path towards HARMONY, PEACE, TRANQUILITY and RESTFULNESS. Hopefully as a consequence of this process/journey we will self-generate the much needed self-esteem and resilience needed to encounter our own challenges through this voyage towards a “healthy lifestyle.” Peace and happiness for mind, body and soul.

The above reference to self-generation is a very vital point because we must become responsible for all our actions, albeit we must never hesitate to rally support for our cause and work on the WE/TEAMWORK concept. Inter-disciplinary strategies are well known in psychiatry but often the power search creates confusion and mismanagement within the team.

The first natural Captain of the RECOVERY TEAM must be the consumer himself/herself. If the person is unwell or unable to assume this role, either a family member or an apt friend are the best choices. May I draw the attention here that sometimes the family is the original source of trauma. Equally a soft-loving-friend (or partner) may not be the best choice to call the shots when a firm direction may be needed. So we need to watch and attack areas such as:

1. **Ingestion/Taste:** Food, drinks, snacks, alcohol, liquids, vitamins, supplements, sugar
2. **Drugs:** Prescribed and/or recreational, tobacco or any kind of smoking substance
3. **Senses Stimulation:** Visual/Audio: TV, radio, reading, sports events, theatre, concerts, additional noises: internal and external, loud conversations, verbal aggression, neighbouring disputes or noises
4. **Smell:** Aromatherapy, cooking, drugs, tobacco
5. **Tactile:** Affection, companionship, friendships (pets)
6. **Brain & Mind Stimulation:** Lighting, surroundings, TV quality or quantity



*Topo Rodriguez and Sergio Strejilevich  
(Q & A Buenos Aires)*

7. **Reading:** Instructive, Diversion, Reflective

8. **Body-Mind-Soul:** Meditation, mindfulness exercises, yoga, fitness and stretching

9. **Recovery and Recuperation:** sleeping & resting (both just as vital)

10. **CBT + MBCT – Cognitive Behavioural Therapy + Mindfulness Based Cognitive Therapy:** Self-esteem promotion and generation will lead into improved resilience. TIPS: By addressing the following areas: (a) Taking responsibility for our own actions; (b) Language selection (swearing, profanities, expressing true feelings); (c) Planning/ New Horizons (short, mid and long term goals); (d) Gratitude, Appreciation, Love, Respect, Acceptance, Recognition, Motivation, Incentives Encouragement, Trust, Communication, Distractions, Recreations (by ourselves and with others too); (e) Selection of venues (pubs, clubs, hotels, homes)

11. **Professionals and or Consultants (we should consider) enlisting as part of our health management team:** Fitness Trainer – Yoga Instructor – Dietician – GP – Psychologist – Psychiatrist – MH Nurse – Occupational Therapist – Financial Planner (New Horizons) – Teacher – Lawyer – Accountant - Family member – Counsellor – Priest – Advisor – Life Coach

12. **Mental Attitude/Toughness:** (a) Rebound-ability; (b) Resilience; (c) Persistence

13. **Resting and Sleeping time management:** Well advanced in my adult life (around my 50's) I discovered how important and complementary REST & SLEEP are in the regeneration and recovery of our brain and body. In fact one of the first symptoms of a mentally ill person is the reduced need for sleeping time and over-activity kicks in as a consequence of it.

I feel for those stuck with shift work because it is very difficult to establish some regularity of patterns (ref. circadian rhythms) that our body and mind would understand and abide by. Therefore, if you happen to be one of those lucky ones that has a “normal” working day, may be starting around say 6AM and finishing around 6 PM, (by the way this is a flexible target/aim). I recommend to people/students that the moment we finish our day's work (if possible at all) we must enter into a mental pattern of “relaxation and recovery” getting our minds into preparing ourselves for the following day. This means REVING DOWN and not UP. When we get home we should prepare our “own personal sanctuary” of harmony and mindfulness with simple things like controlling lights, candles, bath, music, (no TV), food, literature, company, etc.

I understand that not everybody would be able to put into practice this strategy everyday but we should try it first as a treat to ourselves, our minds, our bodies and our souls, twice or trice weekly. And then as a regular well earned treatment and train people around us to respect and even participate in this wonderful ritual.

In fact SLEEPING and FITNESS are the two natural most important and inexpensive ingredients for sound mental health. Costs us nothing, in moderation has no side-effects and we are the first ones to experience the benefits. Even if in doubt about our diagnosis or state of mind, sleeping and fitness can be prescribed to “EUTHYMIC” people and to relatively normal healthy people.

### Website:

For a while now we have been thinking about setting up a "Spanish Page" in our website to cater for the Spanish speaking people in Australia, New Zealand and Europe. Furthermore, due to the interest generated by the South American trip, we decided it was the time to implement it. Great interest exists around "useful mental health information and tips" on managing Bipolar Disorders. Thus in entering the website you will see the two options: English or Spanish.

### Sutherland Bipolar Support Group:

We have conducted a Volunteer Recruitment drive at the University of Wollongong in March 2010 in order to secure potential Co-coordinators and Participants for this group. A great interest was demonstrated by a group of Psychology students. Therefore, we incorporated 7 young students to assist us in general running and coordination of activities.

### V-TEAM

Our Volunteers' Team met in mid-March to discuss future activities and possible fundraising events. We have encouraged our participants to enter radio competitions such as 2UE's that provide funds for charities like ours. We are also encouraging our people to contact their local schools and offer our Mental Health Education services as well as Senior Citizens Groups and others. Next meeting will be on Thursday May 13<sup>th</sup>, 6.00 PM.

### VOLUNTEERING:

Do you have an interest or a passion in volunteering? You may join the V-TEAM by sending your details and a brief explanation (100 words) with why you would like to get involved. We will then contact you to arrange a meeting and start from there.

### SAATCHI & SAATCHI and SBS FOUNDATION:

It is with great pleasure that we advise you, the SBS Foundation has selected TF4E amongst 20 charities and community organisations to be recipients of their 2010 Community Services Announcements (CSA's) program. This means we have been offered a "promotional package" of air-time services with SBS (channel, radio, website and all related media outlets) free of charge. Furthermore, since November 2009 TF4E has been working with advertising agency Saatchi & Saatchi with the objectives of: a) Fine-tuning TF4E Services; and b) Improving our presence in the NSW charity market. As a consequence we have extended our initial discussions to also cover our new needs for content development and the advertising materials for the SBS CSA's campaign. Saatchi & Saatchi has kindly agreed to donate their creative services and expertise (pro-bono) in order to translate TF4E's ideas into effective promotional opportunities and actions. A number of options are being considered as we speak. As "The Bipolar Express" comes up roughly on a "quarterly" basis, it may be a while before you receive additional news on our projects. However, we will endeavour to post some news on developments in our website in the "LATEST NEWS" section.

On behalf of our Board we'd like to send a big thank you to SAATCHI & SAATCHI as well as the SBS Foundation, for helping us to continue moving forward with their invaluable advertising and marketing expertise.

### STRAIGHT FROM THE HORSE'S MOUTH

#### Learning to be positive through Post Natal Depression

By Nicci Heath

I'm thinking about how I can describe to you what it feels like when I'm suffering from depression. How can one think that words could compete on the same level as the pain experienced with depression? The periods I have spent with depression deserves its place of being remembered and respected because I don't wish to go there.

It's a very negative thought all piled into my brain, all playing at the same time, these perceived thoughts I believe are true – "I am hated, I am ugly, I am hopeless because . . . I have no value I . . ." I gather all the proofs of these negative "I am" and "therefore's," I feel so very lonely.

I have thoughts of not wanting to be here anymore. And oh God, the tears, the endless amount of tears and the physical and emotional drain, the tiredness from thinking too much, the consumed time spent laying limp and numb on my bed and absolutely turned off from life going on around me.

I am suffocated by my emotions and I have no control.

It's a terrible existence for me in this state. It takes everything to get out of bed and pretend to be "normal" as I go to pick up the kids or do what I have to do before it gets worse and I have to get my husband home from work to do what I can no longer do. When that happens I need immediate care.

Dark, gloomy, in a hole so deep I can't climb out of, the weight of heavy blankets being thrown over you. I see everything through rose coloured glasses. When someone says anything to me I hunt for negative meanings about me, I over-react, everyone is out to get me. If sleep finds its way, I am free of the mental anguish and struggle but my dreams are heavy. I don't give myself any chance of ever getting out of this, I feel I have no one to help me - not even those closest to me. It's debilitating.

The last time I experienced a depressive episode was four and a half years ago. I have learnt how to take control of my depression. I now have a quality of life I never knew could exist, it feels like a miracle. I am happy and so glad that I can embrace those dark thoughts and shelter them with proof of my worthy existence now.

My journey to recovery and management has been very hard. It is not a cure, this does not have a bullet proof vest either but this is my road travelled so far. It is about the decisions and lifestyle changes I have made that have led me here.

Realising I had a problem that wouldn't get better, was very confronting. I had just moved interstate and given birth to my first child. I had no family, no friends, I couldn't stop crying and I couldn't get out of bed.

I remember bringing home a booklet from the hospital about Post Natal Depression (PND), I rang the number and it was recommended I come into the post natal hospital. I remember taking myself away from my family to be hospitalised.

What a start, my poor husband had his career on the line and here he was helpless. I knew that my thoughts were not normal and I knew I had to do this to get better for myself and my family but I didn't have the know-how.

You can't be diagnosed with PND forever, so as my children grew I would relapse only with a different name to it - Depression and Anxiety. I had medication which kept my thoughts on an even keel and it did make a difference but it didn't stop my behavioural patterns which would result in further relapses. I stumbled onto a great doctor, I trusted him and when he suggested undertaking a Cognitive Behavioural Therapy course, I went. What an awakening. I learnt about dysfunctional thoughts and how to replace them with positive thoughts.

I also learnt how to stop my thoughts from digressing and how to recognise the signs before a fall. And here's the big one: How to prevent a fall before it's too late. I learnt to not be so hard on myself. The hardest part was learning how to reprogram my core beliefs and insert correct and rational ones.

Outside in society however, I hid my mental illness. I was very afraid of people knowing - very few people knew this secret. It was very painful when I discovered that my depression had become exposed amongst my husband's peers and wives. For a long time I believed I was the blame for his demise. It was a relief to have a social drink or two or three along with a cigarette. I enjoyed the feeling of freedom I believed they gave me. I didn't get out of bed until mid morning, I suffered the downers after the uppers - this was not every weekend but it impacted on my mental wellbeing.

Why did I need a drink and a cigarette to feel good about myself? This was my big quandary. My doctor encouraged me to attend a course on drinking behaviours and



*Nicci Heath*

addictions. This was very confronting. All my reasons for wanting to drink were not the right reasons to drink. Those two crutches in my life, the one blessed thing I had at the end of a hard day, my social crutches, my belief that being out with friends meant drinking and smoking - was now going to be given up. It was the hardest thing I have ever done. With the help of my doctor I did just that and . . . I traded it in and took up cycling. I made a date with myself to be up early to ride, which meant early nights - I didn't want to let myself down. But wow what a ride!

Being out of my comfort zone made everyday life more manageable. Riding up mountains presented more mental pain than physical pain - I found myself challenging my belief in myself. The evidence of having conquered and ridden up a mountain was very powerful. From riding I set goals for myself, I had never set goals before. Weekly, daily, monthly, I was achieving my goals and/or setting new benchmarks. I found confidence in myself and I had found my playground. People called me mad because I was enjoying the challenges. When I climbed mountains I often said to my coach "Is that the best you've got?" I felt alive. Riding made me be "in the present." There are no yesterday or tomorrow thoughts, just here right now. What a big weight off my shoulders.

Making the decision to change was not easy but the "doing" was harder. To make this work, I invested in my mental health and my physical health - I had a team of people helping me along the way. I met wonderful people, and the friends I thought I would lose due to no more nights out were not as significant as I thought, some were lost and others deepened. I have absolutely no intention to want to go back to those old habits. The proof itself is in how I feel daily and consistently. I love being a mother to my two beautiful children. I enjoy being a part of their lives. And my marriage to my husband never ceases to amaze me. I wouldn't like to paint what the picture would look like if I hadn't made these changes.

I am not cured however, I have strategies and a support network. I have days when I feel emotionally sensitive. When they happen, I have procedures in place - in case they become heightened on a scale of acceptable to fragile. I allow myself to let go of guilt. I ring my doctor and we monitor my condition.

I am not afraid of what I have, nor am I afraid of people knowing but I am wary of peoples' naiveties and labelling and uneducated opinions. I also have the sense to know that there are more pleasures in life than worrying about them.

Here are my top 10 tips that are crucial to my mental wellbeing:

- 1 Finding the right doctor
- 2 Cognitive Behavioural Therapy (CBT)
- 3 On-going medication
- 4 No alcohol consumption
- 5 Fitness
- 6 Eating well
- 7 Goal setting
- 8 Continued supervision by the doctor
- 9 Motivation and courage
- 10 Recreation and rest

## What's the matter with you (when you look the way you do)?

By David Laanemaa

Firstly I need to start at the present.

Over the past 15 months I have taken hold of my life which prior to that was spiralling out of control. Approximately 12 months ago I was diagnosed with acute anxiety and depression. I don't know that my diagnosis has extended to being Bipolar, however experiences I have had over the last 20 years give me a fair idea of the life led by those suffering that condition.

Reaching the diagnosis was a "watershed moment" for me. From there I wanted to not only understand the diagnosis but also resolved to deal with it to improve my quality of life. Thankfully I was somehow able to seize the opportunity to make those decisions – something I had been unable to do and had struggled with for almost 20 years.

Taking charge has not been easy. Having others recognise your issues and condition, and then commit to supporting you, is critical in being able to move forward.

In my mind it is no coincidence that three of the Objectives of the Topo Foundation are:

- to promote tolerance and understanding of mental health issues, thus reducing the stigma
- to promote the early diagnosis of mental illness
- to reduce the incidence of mental illness and suicide in our community.

It is often said that acknowledging that there is a problem is often the hard part of dealing with, and ultimately solving, the problem. My experience has been that those who have been closest to me, with a couple of exceptions, have not understood the nature of mental illness, nor how to cope with it. Or the willingness to concede then, or even now, that there is a problem. Alternatively, understanding and support has come from unexpected quarters.

Out of sight, out of mind. We are accustomed to dealing with identifiable physical illnesses, however mental illness is something else. It has often been said to me that if the same person had cancer and a mental illness, and went to hospital, the cancer would be dealt with immediately.

Support and understanding is critical, but not in the form of having it as your saviour. There is work to do on your part, but you can't do it all by yourself. Organisations such as Topo's are invaluable, but at the end of the day should really only supplement the understanding and support of family and friends. (Out of interest I first met Topo at his UNSW seminar in November 2009, although I had long admired his rugby skills).

I doubt whether many of my battles over the past 20 years would have taken place had I have known how to ask for help/support, and had there not been such a stigma associated with seeking help. Listening and trying to help without judgement are invaluable and rare qualities.



David Laanemaa

It is surprising how many business associates I have come across recently who, after learning of my experiences, have opened up about their own experiences of anxiety and depression. It is similarly frustrating that there are others who despite what you might say, choose to ignore your obvious condition, even when they have been in your company during one of your episodes. Hence the title to this piece – "What's the matter with you (when you look the way you do)?"

The catalyst to my personal implosion and being put in a position of needing to address my mental health issues came during 2008, following, with the benefit of hindsight, a series of questionable judgements for myself and my family. An accumulation of issues over an extended period of time led to a level of anxiety and depression which clouded my ability to make rational decisions. In turn that led to the breakdown of my marriage of 27 years, and the alienation of me by family and friends. Thankfully now I am in a new relationship which has given me the support and understanding I have needed to get to this point from those times.

What happened to me in 2008 was an accumulation of experiences since approximately 1990. In that time:

- I often self medicated with alcohol, which temporarily removed my depression and anxiety, but prolonged the hangover/"recovery" stage by accentuating the anxiety and depression I felt
- During the 1990's for a period of approx 5 years I was taking Xanax, sometimes 2-3 times a day, and sometimes to get over the effects of the self medication of alcohol
- I often became suddenly "ill" in public places
- I would often fear that something would happen to me. At times, important business meetings were cut short by panic attacks and feelings of illness and helplessness
- Driving was restricted by an inability to drive over bridges or through tunnels. Living in the eastern suburbs of Sydney, I felt restricted to that part of the city. Family outings where driving was involved were shared, depending where we were or where we had to go.
- Overseas travel was only undertaken after allowing for more than sufficient accompanying medication. In 2007, our trip to Europe was accompanied by an ample amount of Valium.

- Without the understanding or support, and driven by the desire to be free of taking any sort of medicine, I sought to wean myself off whatever medication I was taking at the time. I now know that was entirely the wrong thing to do.

My nadir came just over a year ago when alone in a hotel room in the CBD of Sydney. Overcome by anxiety and depression which had been driven by alcohol (though not excessive), and unable to be in contact with anyone, I fled the hotel. Later the next day I somehow resolved to address my mental health issues and since then have had the support, and understanding of medical professionals, clinical psychologists, medication, cognitive behavioural therapy, and the understanding and support of people who care about me. Giving up alcohol since that time has also helped immeasurably.

In doing so, I have learnt that it is important to understand the notion of relapse and be vigilant of your lifestyle and the people and circumstances around you. Mental health requires constant monitoring and recognition that everyday eventualities can impact different people different ways. Over the years I have had to deal with many different life events:

- violent death of brother-in-law-to-be
- impact of that death on immediate and related family

- personal family issues, including serious ill-health
- economic impacts on employment (late 1980's stock market crash and early 1990's recession)
- economic impacts of personal financial and investment decisions during the past 6 or 7 years
- self employment
- competitive social and business environment
- as the only child of immigrant parents alienated from them due to socio-economic and immediate family circumstances
- prolonged care and then death of parents
- death of close friends in unexpected circumstances.

Being lucky enough to be given the opportunity to seize control, I feel today like I haven't felt for many years. Business is beginning to flourish once again, so too my relationships. Daily routine is important, including medication, diet, exercise regime and social engagements. It is the understanding and the support of those around me that have allowed me to take control and deal with my condition, and be vigilant of what to do in the event of a relapse.

Finally the challenge is now for me to support others where I can, and to see if concessions can be achieved from those not previously wanting to or taking the time understand.

**Watch this space for coming news on the Bipolar Education Foundation**

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### PAYMENT OPTIONS & INSTRUCTIONS

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i) CHEQUES made to: Topo Foundation for EDUCATION (or simply: TF4E)

ii) DIRECT Internet Transfer = You may choose to make your contribution into:  
 Westpac Bank Acct No: 33 57 82 – BSB 032-007 Account Name: Topo Foundation for EDUCATION (or TF4E)

iii) DIRECT BANK DEPOSIT = You may choose to deposit your contribution over the counter at any Westpac Branch, please quote the above banking details.

iv) CASH = We will only accept cash when we are able to provide you with our Official Receipt on the spot.

a) I wish to become a Member of the FRIENDS of TF4E Group (FOT) (Tick your option): YES  NO   
 b) I wish to subscribe to "The Bipolar Express" YES  NO

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 For any further information please visit [www.TF4E.org](http://www.TF4E.org)**



We look forward to a mutually rewarding and continued association through Mental Health Education.  
*With our best compliments,  
 TF4E Board of Directors.*

**Topo Foundation for EDUCATION**  
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