

psychiatry

human rights

alternatives

true
**success
stories!!**

DENDRON

issue #9

October 1988 (late)

one dollar



unity

Dendron has tried to cover a spectrum of often clashing viewpoints.

But it's time to spotlight one action by Joe Rogers, current president of a national psychiatric consumers group. *Dendron* has obtained a copy of a September 16th letter from Joe to federal advocacy agencies.

Incredibly, his letter openly attempts to divide the national movement for human rights in psychiatry. Joe calls upon these federal agencies to actually boycott a national human rights organization for being "radical"! While his tactic will probably not work, it provides solid evidence that something is very wrong.

Sadly, Joe's letter is more about stopping activism than about stopping atrocities. The response must be unity.

Our Editorial starts on page 6. →



But what are the alternatives?

When traditional psychiatry is criticized, that is the inevitable question. Of course, the very first alternative can be found in the oath all doctors take: "To do no harm." But then what?

In this issue, readers take up their pencils, pens, typewriters & computers to explore creative options that have worked for them.

You are invited to join in the conversation...

by Barbara Peller; Deerfield, Illinois:

I hope this is just one of many responses to your request for our stories of our paths to wellness.

Somewhere along the line between receiving my first psychiatric label in 1974 — and there have been about five or six labels — somewhere amidst five hospitalizations ranging from one year to one month, the ECT [electro-convulsive "therapy"], the meds, the forced treatments, the docs and other professionals from Freudians to the human potential movement & beyond, I sensed that my emotional turmoil, my confusion, my non-drug-induced altered states could be experienced with fear & dread, or I could greet my feelings, my thoughts & my sensations with a sense of acceptance & openness.

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DENDRON

The goal of *Dendron* is to provide an independent service to the many individuals & groups concerned about human rights in — and alternatives to — the current psychiatric system.

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CHRP

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Editor's note:

You know, by the time the average American reaches voting age, they've seen tens of thousands of television commercials. This stupendous effort at mind manipulation gathers its harvest during the election.

The basic unit in a democracy should really be like a mutual support group — a small number of people, using direct communication between equals, to reach a decision.

Yet Americans seldom experience such freedom & democracy. Doctors, adults, teachers, bosses, police, generals, religious leaders, media stars and others (usually rich white males) tell them what to do. Jury duty & old-fashioned New England town meetings are about the only time Americans sit down & make a decision together. Amazing!

So in a huge, semi-democratic society, George Bush's "sound bites" feed the media. He wraps himself in the flag, asks why Dukakis is afraid of the pledge of allegiance, labels Dukakis a "liberal" & a "card-carrying member of the ACLU."

Actually, with all the ecological destruction, national debt, military spending, covert action & neglect of the needy under this administration, the ruling elite act more as traitors than patriots.

Will the tide turn back? You bet it will. You and I and active people in other movements are in a tidal zone between ocean and shore. It's up to all of us to clearly, rapidly & non-violently confront the problems and come up with solutions.

In this issue, we look both at conflicts in social change, and at positive alternatives to psychiatry.

Remember, in the U.S. and especially globally we far outnumber the ruling elite. A minority of Americans vote for the U.S. President, who is actually elected by the Electoral College. And globally, the U.S. is just 5% of the population. So, unite!

networking:

"Next month will be ten years since my first hospitalization."

Erik Jonas; Spokane, Washington:

I have learned about *Dendron* Monthly with great enthusiasm. I was hospitalized for four weeks in September of 1978 and was diagnosed a "manic depressive" and given Hal-dol, Cogentin and Lithium. This was an absolutely terrifying experience - I was so manic, so sick. In May of 1979, I stopped taking Lithium and increased my use of marijuana and in January of 1981 I was hospitalized again for seven weeks with a similar medication regime.

Since then I have traveled the length of the country, met my wife of four years, failed in some jobs and succeeded in those in health care. I have been a nurse aide, a mental health counselor in a state psychiatric hospital and now I am becoming, aided with 2 years of sobriety, a chemical dependency counselor.

Some of the things I have done for myself over the years that have helped my overall well being are: confronted my parents regarding our sick family system (mental illness is a family disease according to R. D. Laing), realizing the necessity to be responsible for myself, realizing my chemical dependency and working the twelve steps of AA, and learning about the macrobiotic diet which restores balance and unblocks energy to anyone suffering from a degenerative disease (including cancer, heart disease, mental illness, etc.).

Some books which helped me that are readily available in most public libraries — if they don't have the book, ask them to order it for you: for nutritional knowledge - Michio Kushi, *Cancer and Heart Disease*, Japan Publications, Tokyo,

Subscriptions: Very low income \$5 for six months/\$10 for one year. Regular rate: \$20. For organizations with paid employees: \$40. Make check to CHRP:

CHRP, P.O. BOX 11284, EUGENE, OR 97440

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"My contribution at recycling trash is my middle finger, defiantly raised against the psychiatric treatment system..."

Patrick J. Irick; Madison, Wisconsin:

I must ask the question: What, exactly, is "psychiatric rehabilitation?" Furthermore, is it worth the expense? In these times of dwindling resources & increased need, there's got to be a more effective way of delivering services to people who are diagnosed with mental disabilities than putting them into a programmed environment to teach them how to handle their new-found existence.

In the current system, people receiving services are much like children enrolled each year into public education, sitting in neat little rows (almost always alphabetically arranged), from which they are expected to focus all of their attention on the person at the front of the room.

This person, The Teacher, is supposed to be respected, because he or she knows much more than the children do. It is the children's job to learn from The Teacher. Through the course of the school year, The Teacher is expected to impart a set amount of intelligence into the students and grade them according to how much they have absorbed through a set routine of memorization & recitation.

Here in the trenches of the ex-patient movement, we the students know much more than the teacher, yet we're expected to pay them our full attention and respect them for their expertise, which they learned through an educational system we all know is so much crap.

But our attention wanders. Why are we here, watching this video tape or listening to this expert speaker when what we'll return to is our shared apartment and our programmed viewing of the television, eating that new box of Cheese & Macaroni we bought yesterday, maybe cutting up a hot dog and some

onions to add to it. What variety!

The experts tell us what our problems are (or perhaps they are really invested in hearing from us what we believe our problems to be, and we can participate fully to the greatest extent of our disability), while we sit and wonder why the government, which is supposed to equitably distribute the resources of this great country to those who are in the most need, can't cancel that extra bomber and apply the millions it costs to the people.

And the question of national security looms in my head. This isn't my government anymore. It's not one of the people, not by the people, and certainly not for the people. It's one of the media, by the politicians, and for their own profit. I should shrug my shoulders and accept this fallacy, then continue living out my private life as if it really matters to anyone but me.

But I can't — this is insanity, and it should be put to a stop. Who will help? All of us, you say? What shall we do? Where shall we start?

We will start in the neighborhood in which we live. Forget that I've been hospitalized and diagnosed as being prone to mood swings of ecstatic mania followed by the bottomless pit of depression. I'll mix a can of corn into my dinner, remove the label with a sharp knife (is this the knife I might one day use on myself?) and open up the bottom of the can, folding it into the metal cylinder and flattening it beneath my foot. I'll put it into the little box under the sink with all the rest of the flattened cans and junk metal; when the box is full, I'll transfer its contents into the larger box sitting in the bag next to the black trash bag housing the plastic milk cartons and coffee can covers.

It's not much, I know, but combined with the efforts of the rest of the neighborhood, I might have a



part in reducing the need for additional landfill sites in the future of this city.

My little contribution doesn't address the issue of the for-profit psychiatric hospitals moving into the area to bleed the insurance from people who are fortunate enough to be covered by it, afterwards discharging them back into the community where they might wander aimlessly until connecting up with the public mental health system and getting their case managed by a paid professional who doesn't really care who they are or what they might have as goals for the future.

My contribution at recycling trash is my middle finger, defiantly raised against the psychiatric treatment system, insignificant to them but ultimately beneficial to my own mental health. I'm ahead of my time — we all are.

And for us, the best we can do for ourselves is know that the waiting is the hardest part. Like Sam says in that song he no longer plays (he makes "a joyful noise unto the Lord" now), we're just patients of patience. I guess it's just self help after all.

**Patrick J. Irick
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Madison, WI 53711**

[A poem by Patrick can be found on the back page of this issue.]

Barbara Peller — continued from page 1

My peers (my fellow inmates), were my greatest teachers — maybe our vulnerability opens our hearts to compassion and a certain deep bonding. My first effort at self-help, not knowing what that was, was sharing the techniques I had developed for greeting my voices and visions — welcoming them, in calm openness, observing the colors, the faces, the expressions, listening, just hearing. We found this approach was also helpful to those who had a sense of leaving their bodies. (Please see addendum for a more detailed focus on this approach.)

It's not easy to put a journey of many years in a page or two. There were times when keeping a journal helped, joining poetry workshops, yoga classes, massage, women's groups, assertiveness training, cross-country skiing, gardening, volunteer work, and most often sharing life in the company of friends.

Seven years ago I found a self-help group that I gather is rather unpopular in the movement -- it's called Recovery Inc. But I found the recovery methods only reinforced the approach I had intuited years before.

My Recovery friends and acquaintances continue to be an essential support network in my life, and I have had only mild problems and no more episodes, cycles, or hospitalizations in the past seven years. But, whatever self-help group you choose, it seems a key to the development of the sense of personal empowerment that leads to wellness. About a year ago I began to feel it was time to shift my focus from warding off illness, to exploring wellness.

At the 'Alternatives '88' conference held this past August in Salt Lake City, a friend, Pat Irick, was scheduled to present two workshops at the same time. One was titled Developing Your Personal Empowerment, and Pat asked if I would do it for him. He had been planning to share his work on positive mental at-

titudes, but said it was okay for me to go with what I knew. I turned to my friend, Darlene Colson, asked if she would like to help & she agreed.

The next day it was wonderful to see the workshop fill with people, most of whom got a chance to express what they hoped to get out of a workshop on developing personal empowerment.

What I shared was a group meditation; the group then shared their experiences with it, and questions and comments.

We worked with affirmations next, and shared our experiences and feelings about their uses. Finally, Darlene lead us in a guided visualization, and again people shared their experiences, and were encouraged to ask questions and offer comments & suggestions about their own journeys to personal empowerment.

The feeling in that room & my own inner sense at the close of the workshop was that we have incredible opportunities ahead of us for sharing paths of healing and wellness & empowerment. There are books that need to be written by us.

Thanks go to *Dendron* for giving us the impetus to do the kind of sharing that will help build this essential network. I'm open to networking. My daily practice includes meditations, affirmations, visualizations, lessons from "A Course in Miracles," & service to fellow mental health system survivors.

Please see the following addendum for more detailed focus on opening to altered states. →

Addendum

A More Detailed Focus on Opening to Altered States

Over the years I have continued to explore my intuitive sense of greeting voices, vision, etc., with a sense of openness and acceptance. At first, I just started working with the

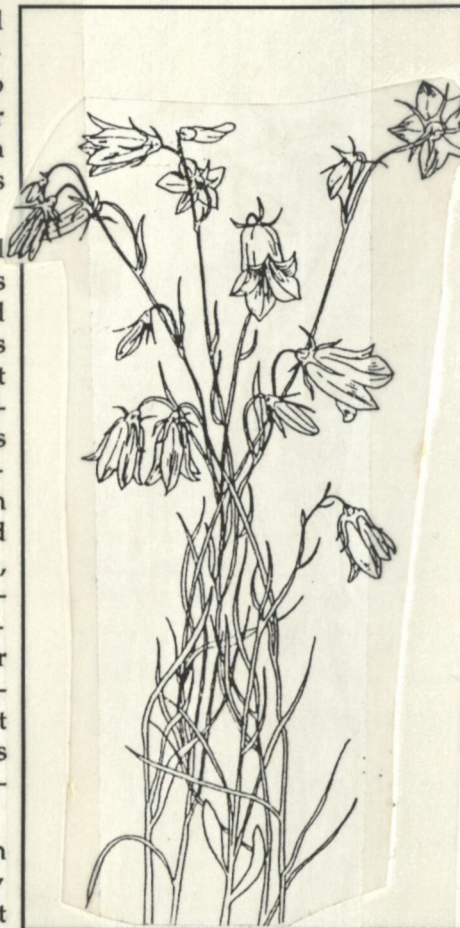
idea of greeting the individuals or groups of people who appeared to me, unbidden, friends. Instead of fear and resistance, I developed an attitude of welcome, as for old friends, or someone who is simply delivering a message I need to hear and acknowledge, but not necessarily understand, accept or act on.

I just cultivated a sense of choice over my reaction/response to the perception or sensation. Intuitively, I developed a sense of purpose for myself in all this, a role, the observer: just watching, asking simple questions to focus, what color is her hair,

what is she wearing, and thinking, with an inner smile of recognition, "Oh, here we go again."

Later, I started practicing yoga; again, I sensed the fear & resistance to the letting go in the relaxation exercise and other yoga exercises. I realized that this relaxation state brought me to a place similar to my altered states.

My fear was an old and familiar one, that I wouldn't come back from that place. I used the same approach and attitude of openness and innocent curiosity. In time the relaxation and breathing exercises became tools for learning control of tension, anxiety



and so forth that I could take with me everywhere.

It was the 70's; I was living in the Berkshires of Massachusetts, and soon found myself tasting of the "spiritual smorgasbord" that flourished there. I sampled offerings from chanting, guided imagery, group hypnosis, and animal spirit guides to out of body workshops. My now somewhat-cultivated inner shift to openness and innocent experiencing opened doors to growth and exploration for the most part, but occasionally there were set-backs.

Sometimes the experience was "paranoia."

I was fortunate to be with a therapist at the time who was caring enough to explore my experience with love and courage. He only asked that we could call a doctor for meds if we agreed it was necessary. He cancelled everything for a night and a day. We started with hugging, holding and tears, and journeyed through just allowing the process to happen; just giving it space, a sense of safety and privacy; together we could simply accept and absorb whatever energy needed to be expressed or felt.

He was a mirror of openness and trusting acceptance in which I was able to find my own balance and wholeness in less than 24 hours.

Another time, a friend called a therapist we both saw to ask for her help. This therapist responded in a similar manner; she cancelled her

day's appointments, and offered hypnosis as a safe private space for the paranoia to be. Again, she served as a calm and accepting mirror, and in about eight hours I found my sense of wholeness & balance.

Their attitudes of acceptance and love; letting the "paranoia" float in a safe private space; seeing it as just another part of me, my being, my path; their acceptance paralleled my early intuitive sense.

When I found the Recovery method, it mirrored what I had been exploring, but in a more formalized and disciplined way. For instance there were many practices for creating a sense of your own relaxation through means such as motionless sitting; and there was the basic idea of not seeing our feelings, thoughts, sensations, etc. as dangerous.

My original intuitive sense was affirmed by a room full of people who were demonstrating that by letting go of fear and resistance their emotional distress (in whatever form) would, over time occur less frequently, and when it occurred, it would be experienced as less and less intense, and would last for shorter and shorter periods of time. Recovery was also suggesting that we are empowered to change/control our be-

liefs, attitudes, thoughts and impulses. This was clearly a teaching I could use and was open to.

Now my personal work with med-

itation and so forth has again reaffirmed the intuitive path that began so many years ago. Recently my work with Attitudinal Healing lead me to some work by Stephen Levine. Stephen is

a gentle and gifted teacher of meditation and has worked for many years with death and dying.

He and his wife Ondrea have developed some incredibly beautiful and useful meditations around opening to the physical and mental pain around death and dying. I find in these meditations a reflection of the rudimentary truths my intuition was telling me; however, their work is wonderfully advanced and skillful.

I have incorporated some of Stephen and Ontrea's meditations in my daily practice, and have begun sharing them with friends in the movement, so that we might explore the possibilities for their application as further alternative techniques for our unfolding journeys into healing and wellness.

Barbara Peller
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Deerfield, Illinois 60015

"Their attitudes [were] of acceptance and love; letting the 'paranoia' float in a safe private space..."

Erik Jonas — continued from page 1

1982; for dealing with parents - Howard Halpern, *Cutting Loose*, Simon and Schuster, 1976; for coping with stress - David Augsburg, *Caring Enough to Confront*, Regal Books, Ventura, CA 93006, 1981 and Robert Alberti, *Your Perfect Right*, Impact Publishers P.O. Box 1094 San Luis Obispo, CA 93406; for job skills - Richard Pilder, *How to find Your Lifes' Work*, Prentice Hall, 1981 and Tom Jackson, *The Perfect Resume*, Anchor Press, 1981; on wellness - Donald Ardell, *High Level Wellness*, Bantam Books, 1979; for a new approach and possible cure — George Vithoulkas, *The Science of Homeopathy*, Grove Press, 1980 Homeopathy is a form of medicine which is clearly non-toxic that treats mental disorders more ap-

propriately than conventional medicine; to nurture oneself - Gerald Jampowsky, *Love Is Letting Go of Fear*, Celestial Arts, Berkely, CA 1979 and Harold Bloomfield, *Inner Joy*, Wyden Books, 1980; and for inspiration - Janet and Paul Gotin, *Too Much Anger, Too Many Tears*, NY Times Book Co. 1975.

Next month will be ten years since my first hospitalization. I am a much happier person now than ever before. I have worked very, very hard on my recovery and often it was painful and lonely. "He who is not busy being born is busy dying." (Dylan)

Love to all of you.

Erik Jonas
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Psychiatry, human rights & unity!

An editorial:



graphic by Indigenous Affairs Yearbook

Let's face it.

Over the past five years, infighting has thrown hurdles in front of the movement for human rights of people given psychiatric labels.

Often, we've been our own worst enemies. And that sure looks bad to the people we're trying to reach.

During the past year, things seemed better. For instance, warring national groups were finding ways to run along side each other. Unfortunately — according to a copy of a letter passed on to this publication — the president of a national psychiatric consumer group can be seen building a new barricade.

Let's turn up the lights to see what's happening here.

Who's involved?

◆ **Joseph A. Rogers** is the President of the National Mental Health Consumers' Association (NMHCA), based in Philadelphia.

Many enthusiastic, hard-working groups & individuals count on networking & assistance through NMHCA. Affiliated organizations include self-help meetings, state-wide &

local consumer networks, and clubs associated with community psychiatric programs.

◆ **The National Association for Rights Protection & Advocacy (NARPA)** is a federation of advocates, attorneys & psychiatric survivors who are holding one of their major activities — an annual conference — at the end of October 1988.

This NARPA meeting has a significant honor: It apparently is now the *only* national conference in the U.S. open to the general public that focuses on a wide variety of campaigns for human rights in the field of psychiatry. This year's topics include forcible electroshock, forcible psychiatric drugging, outpatient commitment, children's rights, restraint, and solitary confinement.

◆ **Protection & Advocacy** is the federal system established by Congress to provide legal assistance to people inside psychiatric institutions. Over the past two years P&A agencies have been placed in every state in the United States, plus its territories. The Oregon P&A is helping to sponsor this year's NARPA conference.

What happened?

Joe Rogers wrote a letter dated September 16, 1988 under the letterhead of the National Mental Health Consumers' Association. Addressed to "*Protection & Advocacy agencies and other interested parties,*" the two-page letter sharply denounces the National Association for Rights Protection & Advocacy, and especially the NARPA conference.

Joe even asks for a boycott: "We call on P&As around the country not to participate in the NARPA meeting, since the NARPA meeting is not representative of the supposed broad base that NARPA claims to represent."

Why, Joe?

Joe writes: "For the most part, NARPA has aligned itself with the most radical fringe elements of our movement, and the people with psychiatric histories who are involved in

continued on next page →

NARPA do not represent the great majority of consumers who want to work in constructive engagement with the mental health system."

Joe also states, "[T]here is only one speaker representing the moderate end, but a large number of speakers from the radical end. And not only is Dr. Szasz keynoting, but Dr. Peter Breggin, another anti-psychiatry psychiatrist, is also speaking." Dr. Thomas Szasz is a professor of psychiatry at the State University of New York at Syracuse, and the author of 19 books, many of them scathing indictments of the psychiatric profession. Dr. Peter Breggin is a psychiatrist, and author of books critical of electroshock and psychiatric drugs.

Joe calls NARPA "one sided," "slanted," "abolitionist," and "completely negativistic."

He also charges that NARPA is "anti-NMHCA," but cites no examples of this.

Joe links NARPA to the anti-psychiatry "Declaration of Principles" written by the defunct International Conference on Human Rights & Against Psychiatry, which met annually for 13 years throughout the U.S. and Canada. (Of special note: Their last meeting, held in 1985 in Burlington, Vermont, ended in division over the subject of building a national organization with a group in which Joe was a leader.) While several activists who attended those gatherings now network via the NARPA conferences, there is no official connection.

Of course, it's very likely card-carrying members of the American Civil Liberties Union have attended both meetings.

Joe's letter leaves something out. He does not explain the process NMHCA used to make such an important decision: Namely, writing an official letter to federal agencies calling for a boycott of another national group's event.

According to an anonymous source, NMHCA state representatives were not informed about the letter. And even if they had been, a national NMHCA meeting in Utah did not have enough representatives for a quorum. This source also reports that some NMHCA Board members are outraged by Joe's letter because even *they* were never consulted!

Response? Unite!

But the biggest question for many people will be: Should scarce resources really be used to attack one of the few national human rights groups, despite major differences of opinion?

The majority of concerned people might have an answer, but they are not in any organization at all. One clue to the majority's opinion could be in this summer's huge Alternatives '88 conference (see *Dendron* #8).

According to reports from this peer-support gathering of nearly 1,000 people with psychiatric labels, the majority want to go beyond the infighting & power tripping displayed by some of their "leaders." Many people's central, passionate demand was in fact respectful harmony with each other.

Joe's letter flies in the face of such wishes. As the head of a national group, he should be held especially accountable. If Joe's letter does anything at all, irresponsible tactics such as his tend to discredit parts of the movement.

Rather than stopping anyone's activism, we should answer Joe's letter by re-doubling our efforts, with more clarity about all of our positions. Hopefully, Joe's position will soon evolve, but we need to respond *today*.

In addition, there are many effective, unifying, and experienced NMHCA members who would love to lead their organization in a more positive direction.

Given this recent action by Joe Rogers they should step forward now. But we wonder if they will be given a fair chance. Can they help NMHCA reach their four stated goals?

Those goals are supposed to be: "*Rights. Representation. Responsibility. Respect.*"

**Help break
the silence!**

Please copy, hand out & put up!

For more information, send a self-addressed stamped envelope to:

Dendron

P.O. Box 11284

Eugene, OR 97440

ELECTRO-SHOCKER!

As reported in the last issue of *Dendron*, Dr. L. B. Kalinowsky was about to attend a meeting of electroshock doctors in Philadelphia this October. (A demonstration was planned to protest this conference, and reports on this event will be published in the next issue.)

Dr. Kalinowsky has the distinct dishonor of being present during the first electroshock of the first human being, fifty years ago, in the middle of the fascist regime of Mussolini's Italy. Since that time Dr. Kalinowsky has been one of the foremost champions of electroshock, his career littered with the results of this brain-damaging technology.

For those who would like to investigate the undeniable proof of Dr. Kalinowsky's crimes against humanity, please obtain Leonard Roy Frank's book *The History of Shock Treatment*. [Write to Leonard Roy Frank; 2300 Webster Street; San Francisco, California 94115.]

The book has 26 references to this doctor. The most concrete indictment is that very first electroshock. Dr. Ugo Cerletti, the chief experimenter, left detailed notes. In Frank's book (p.10-11), Dr. Thomas Szasz dissects that "treatment," and shows seven documented human rights violations against this first subject.

update:

Michael C. Thielmann wrote a letter in *Dendron* #7. We received information he may be receiving psychiatric drugs against his will.

A reader received a letter from Michael last month. Michael is indeed institutionalized, and receiving psychiatric drugs. But, he seemed reassuring, and he did not say in the letter that the drugs were being forcibly administered. Still, it is not known for sure if any coercion is currently involved.

We'll keep you posted.

NEURAL PATHWAYS

Mapping neural pathways in the brain,
for no other reason but the desire to have many
mapped neural pathways in the brain.

I look for chances to use them —
In the feeling of the finding, I'm alone;
I want to share capacity with others. . .
So I tell them, and they hate me.
Then I show them. They hate me still.

At home, then, alone, I map more of my brain.
Within is the ability to learn from this pain
If only I live through it, feel it and know
That I will not always be alone. Where am I?
Thinking of the people who have the money. . .
Those who lure me to their lair to "share"
When all they want is to have a piece of me.

Somewhere there are those who go through this as I;
I'm not such a freak after all.
Others have such talents as I wished I possessed,
And there were times I envied them,
times I wanted to have like they did. . .
But I only wanted the good times.

Now I want none but those which I have,
Mapping neural pathways in the brain.

[by Patrick J. Irick]

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#5 — Controversies in the movement. Childrens liberation.

#4 — Inside a self-help group. Break the silence, by George Ebert. Psychiatry & war.

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#2 — Interview with R.D. Laing. Wilderness alternatives.

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#1 — Psychiatric drugs. Civil rights movement.

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