The Path to Lawyer Well-Being: Practical Strategies for Positive Change


General Recommendations:

- Acknowledge the Problems and Take Responsibility.
- Use This Report as a Launch Pad for a Profession-Wide Action Plan.
- Leaders Should Demonstrate a Personal Commitment to Well-Being.
- Facilitate, Destigmatize, and Encourage Help-Seeking Behaviors.
- Build Relationships with Lawyer Well-Being Experts, including Lawyer Assistance Programs.
- Foster Collegiality and Respectful Engagement throughout the Profession.
  - Promote Diversity & Inclusion.
  - Create Meaningful Mentoring and Sponsorship Programs.
- Enhance Lawyers' Sense of Control.
- Provide High-Quality Educational Programs and Materials About Lawyer Well-Being.
- Guide and Support the Transition of Older Lawyers.
- De-emphasize Alcohol at Social Events.
- Support Recovery from Mental Health and Substance Use Disorders.
- Begin a Dialogue About Suicide Prevention.

Resources

Lawyers Concerned for Lawyers offers CLE and other educational programs, coaching, consulting, and direct assistance regarding any issue that causes stress or distress: www.mnlcl.org

The Path to Lawyer Well-Being: Practical Recommendations for Positive Change: http://ambar.org/lawyerwellbeingreport

Well-Being Toolkit: http://ambar.org/wellbeingtoolkit

ABA Presidential Well-Being Working Group including the Well-Being Employer Pledge: https://ambar.org/lawyerwellbeing


Lawyers Concerned for Lawyers • 651-646-5590 • 866-525-6466 • help@mnlcl.org • www.mnlcl.org
Landmark study in the Journal of Addiction Medicine, February 2016

"The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys."

A joint project of the ABA Commission on Lawyer Assistance Programs and the Hazelden Betty Ford Foundation, this is the first time that a study of this type has been conducted on a national basis. While the substance use numbers are just slightly higher than those reported in previous localized studies, the mental health statistics are considerably greater.

Among the findings:

- 20.6% of respondents met criteria for alcohol use disorder.
- Men reported higher rates of depression and women reported higher rates of anxiety and stress.
- Overall, the rate of depression was 28% and anxiety was 19%.
- 11.5% reported suicidal thoughts at some time during their careers.
- The rates of mental health and substance issues were significantly higher in respondents 30 years old and younger or who had worked in the profession for 10 or fewer years. This is contrary to earlier studies where the levels increased with longevity in the profession and age.
- Distress occurs in every type of job. Newer attorneys in law firms reported the highest overall rate.
- Barriers to seeking for help included “not wanting others to find out they needed help” and “concerns regarding privacy or confidentiality”.

LCL services are absolutely confidential. Contact LCL for more information on the study, for a presentation at your organization or for any other assistance.
LCL and Legal Employers:
How Can LCL Help?

- LCL provides free peer and professional support to lawyers, judges, law students, their organizations, and family members throughout Minnesota. This includes up to 4 counseling sessions and a 24/7 phone line. Though some firms have an Employee Assistance Program, lawyers may be more likely to contact LCL.

- LCL offers CLE and other programming on well-being, impairment, stress management and other issues. LCL programs meet the criteria for diversity and inclusion programming often required by clients.

- LCL provides guidance on dealing with a potentially impaired lawyer
  - General concerns
  - Supervisory referrals
  - Interventions
  - Identification of appropriate treatment
  - Managing return to work issues

- LCL has worked with firms and organizations to assist non-attorney staff. This includes discussion and coaching on individual situations, identification of resources, and other services on a case by case basis.

- LCL can provide critical incident response if a tragedy or crisis impacts the firm or organization.

- LCL is absolutely confidential. We can discuss a situation without knowing the identity of the lawyer or your organization.

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Are We Walking Past Colleagues Who Are in Trouble?

By Joan Bibelhausen

I arrived at the airport early, found an empty gate, and settled in on a chair facing the concourse—a quiet place to reply to some emails. I noticed a seemingly abandoned small, soft, briefcase-type bag across the aisle. I became curious about the luggage. I watched passengers, airline staff, and airport workers stroll and scurry past the bag without giving it any notice. A gate agent walked past the bag and up to the desk. After a few minutes, I approached the agent and pointed out the bag. Very shortly after, she picked up the phone, and I got to watch what happened next. It was surreptitious, swift, and serious. I thought about the poor person who probably forgot their bag. They would likely have some difficulty recovering its contents.

There is a comparison with the legal profession. How often do we walk past a troubled colleague until we have to notice? Even then, we may leave them alone and hope things change. The suffering lawyer we left alone until someone had to do something may face major career and life consequences. Can we act sooner so the consequences might be less severe?

We know we have issues. According to a 2016 study, 20.6 percent of attorneys use alcohol in unhealthy ways, 28 percent have experienced depression, 23 percent report overwhelming stress, and 18 percent diagnosable anxiety during our careers. Over 10 percent of us have thought about suicide! This same study showed that stigma keeps lawyers from asking for help. We don’t want others and we fear that our concerns, once expressed, will not be kept confidential. These same factors prevent us from offering help. We often don’t know what to say and believe it’s none of our business.

It is our business. What do you look for? First, take note of any changes in behaviors. This can take many forms and may not seem like much from day to day or week to week. However, if you think about a colleague who has changed, think back further. How different are they compared to six months ago, or a year ago? Are they drinking more? Are they angrier, withdrawing, or avoiding? Are support staff acting differently or complaining? Are deadlines just barely being met? Do support staff appear frustrated or are they actively expressing concerns? If they have concerns, would they feel safe telling someone? Are excuses being made for lateness, absences or behavior? None of these incidents presents a diagnosis—and that’s not our job—but they are all red flags.

What can you do? You can ask, “Are you ok?” (See makeitok.org for a Minnesota campaign to reduce the stigma of mental illness.) Our tendency is to reassure someone expressing concern so if that happens, ask again with an example of why you are concerned. If they are forthcoming, the next step is to listen, just listen. Do so calmly. Give your full attention and be prepared for the time it takes to learn more. Be ready to suggest Lawyers Concerned for Lawyers or another resource. Pick up the phone yourself.

You can call LCL and we will guide you through how to approach your colleague. If appropriate, we’ll help you make a plan ranging from suggested non-judgmental language to assisting with an intervention. If this is a colleague outside your firm or organization, we can help them, too. If you’re reading this and wondering someone would reach out to you, that’s what this article is about. Call LCL. We will help you. There is someone to talk to 24 hours a day and counseling is offered throughout Minnesota. You can help us reduce the stigma. To learn more or get involved, go to mncl.org, call 651-646-5590, or email help@mncl.org.


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Joan Bibelhausen is executive director of Lawyers Concerned for Lawyers (LCL). LCL provides free and confidential peer and professional support to lawyers, judges, law students, and their immediate family members on any issue that causes stress or distress.
Suicide Prevention: Every Lawyer’s Opportunity

By Joan Bibelhausen

Recently, the New York Times published the article A Suicide Therapist’s Secret Past. In it, Dr. Stacey Freedenthal, a therapist focusing on suicide prevention, described her own suicide attempt many years earlier. Even though she is well known in the field of suicide prevention, the stigma associated with this act kept Freedenthal from making it public. As I read her story, I thought about our profession and the stigma that can keep us from reaching out in our most desperate hours. If this was so hard for her, no wonder it is so difficult for us.

Not only are lawyers at risk, but our clients are as well. Clients in many areas of law are dealing with crises, loss, and other circumstances that can lead to a sense of desperation and hopelessness. Very similar cases may involve clients who respond to their situations very differently. If a client gives cues that they may be suicidal, attorneys have the opportunity to act.

We all know that working in the law is stressful. Press coverage of lawyer suicides has magnified the potential impact of that stress. As a profession, we experience depression and alcohol use problems at a significantly higher rate than the general population. We also experience greater rates of anxiety, chronic stress, and divorce, as well as a higher rate of suicide and suicidal ideation. If you have attended any CLE programs sponsored by Lawyers Concerned for Lawyers (LCL) in the past several years, you have heard us talk about this, but all of us need to keep talking.

The chronic stress we experience may trigger depression or other illnesses, and it may lead to a sense of helplessness, increasing anxiety, and the inability to complete even mundane tasks. We’re paid to solve the problems of others, so, naturally, we feel we should be able to solve our own problems. We may feel shame because lawyers aren’t supposed to feel helpless. That helplessness can become hopelessness, which increases the risk for suicide exponentially.

What are the signs? Symptoms of depression include:

- loss of interest in normally pleasurable activities
- difficulty concentrating, remembering or deciding
- changes in sleep, appetite, and weight
- fatigue
- having thoughts of suicide

At the same time, there may be a rising sense of anxiety, as if every unfinished project is a ticking time bomb. Suicide enters one’s thoughts as a reasonable solution to a seemingly insurmountable problem. The suicidal person may express a wish to die or make statements that appear to be saying goodbye. They may give away prized possessions, quickly wrap up files, or suddenly put their affairs in order. They may make a plan and acquire the means to carry it out. This could be something as simple as overdosing on alcohol. People who talk about their suicide, can die by suicide. We all need to talk about it.

Warning signs of suicide include:

- hopelessness
- withdrawal
- desperation
- increased use of alcohol and other controlled substances
- impulsiveness or high risk behavior
- deterioration in functioning

What can you do? Have the courage to ask and to act. Be sure you have the time to listen if you choose to reach out. If you observe these disturbing behaviors in someone you know, be direct and sincere when questioning them. “Have you thought of harming yourself? Are you in a lot of pain? Do you feel unsafe? Are you thinking of suicide?” Never ask in a way that suggests you need a “no” answer, such as “You’re not thinking about suicide, are you?”

Asking directly allows the person to speak freely. If they say no and you are still concerned, rephrase it and ask again. Give a reason why you asked—the person who said no may be ready to change her answer if you ask again and show you care. The person who is so depressed that they are paralyzed and may not be able to affirmatively ask for help, but they may be able to answer a direct question honestly.

What happens next? Just listen. Give your full attention. Remember that this is not your crisis. If you believe suicide may be imminent, get them to professional help and be supportive as they get there. If they have a therapist, call that number. If not, consider taking them to an emergency room. Call 1-800-SUICIDE or 1-800-273-TALK – both are national suicide prevention hotlines. Counselors are also available 24/7 through LCL at 612-646-5590 or 1-866-525-6466.

Once the immediate crisis is past, support is critical to ongoing recovery. Therapy can help someone through the immediate mental illness-induced crisis, and it can provide tools to develop resiliencies in the future. Medications are often appropriate, especially in the early stages. If the lawyer is struggling financially, LCL can provide connections to resources to support the costs of ongoing treatment—all confidentially. Personal support and acceptance is critical to preventing suicide. If you’re feeling suicidal, know that you are not alone.

If these words remind you of someone you’re concerned about, or if you recognize some of these symptoms in yourself, please act. Dr. Freedenthal reported that as she began to feel the effects of her suicide attempt, her brain and body fought back and she lived. Knowing that one can come out on the other side of debilitating pain can provide incredible hope. Call for coaching if you need help on how to reach out to someone. Call for yourself if you find yourself realizing “I’ve thought about suicide.” Hundreds of your Minnesota colleagues called for help last year on many different issues that cause stress or distress in their lives. You’re not alone, and LCL is here to help.

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