



LAWYERS CONCERNED FOR LAWYERS

Confidential Support for Legal Professionals

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

National Task Force on Lawyer Well-Being, August 2017. Adopted, ABA House of Delegates, February 2018.

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

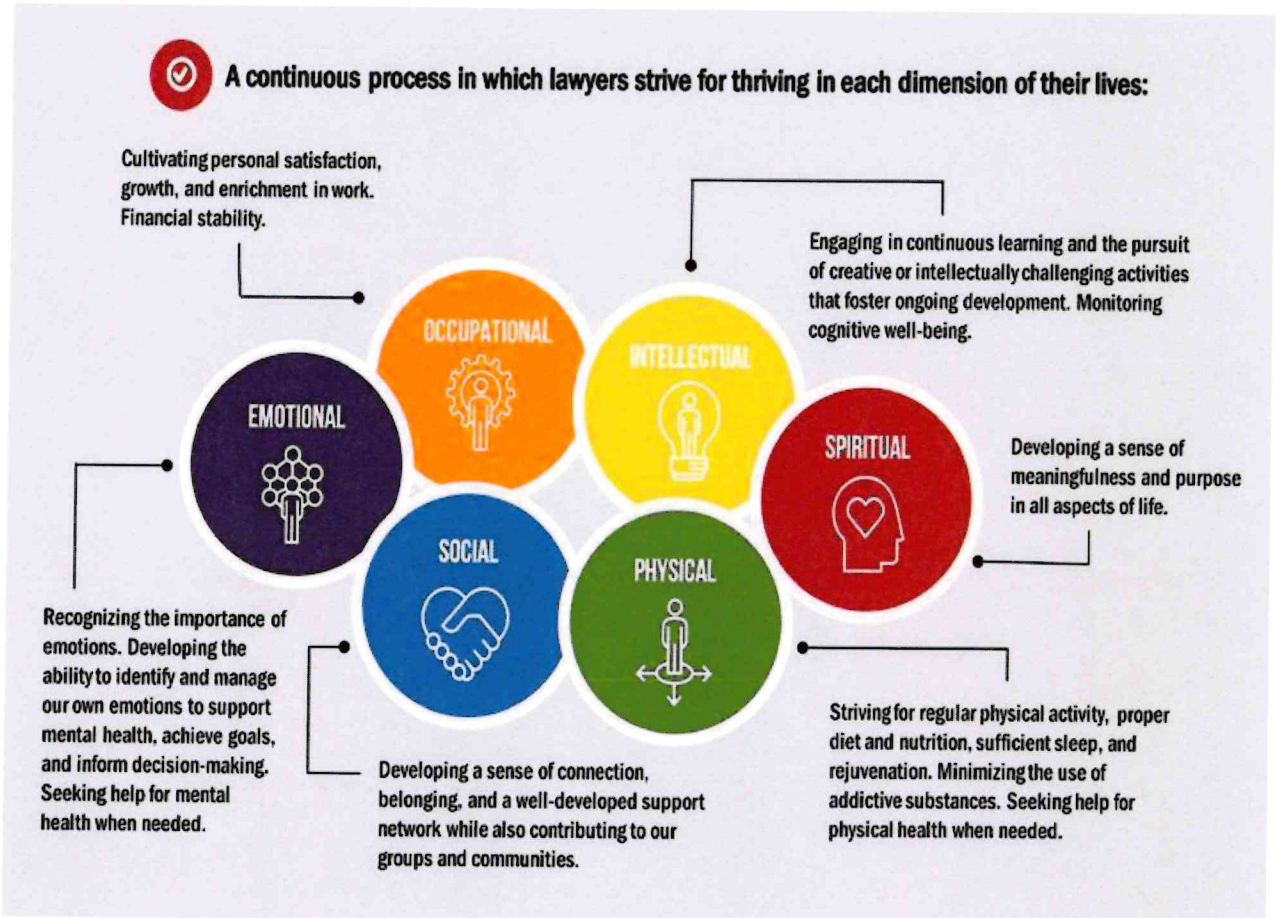
The Path to Lawyer Well-Being: Practical Recommendations for Positive Change:
<http://ambar.org/lawyerwellbeingreport>

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

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

Minnesota Supreme Court Well-Being site: <http://www.mncourts.gov/lawyer-well-being.aspx>

WHAT IS “WELL-BEING”?





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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.





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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 to know 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 wishing 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 mnlcl.org, call 651-646-5590, or email help@mnlcl.org.

¹ Patrick R. Krill, Ryan Johnson & Linda Albert, *The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys*, 10 JOURNAL OF ADDICTION MEDICINE 46–52, 46-52 (2016). See the March 2016 issue of *Bench and Bar* for a more thorough report on the study.



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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.



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Suicide Prevention: Every Lawyer's Opportunity

By Joan Bibelhausen, Executive Director, Lawyers Concerned for Lawyers

Lawyer suicide is in the news. One heartfelt story, *Big Law Killed my Husband*, was written by Joanna Litt (also an attorney) the widow of LA attorney Gabriel MacConaill who died by suicide. Not long ago, the New York Times published *A Suicide Therapist's Secret Past*. In it, Stacey Freedenthal, a therapist focusing on suicide prevention, described her own attempt many years earlier. Even though well known in the field of suicide prevention, stigma had kept her from revealing this part of her history. These stories so clearly illustrated the stigma in our profession that can keep us from reaching out in our most desperate hours.

Not only are lawyers at risk, but our clients are as well. Clients in many areas of law are facing crises, loss and other circumstances that can lead to a sense of desperation or hopelessness. This is amplified by the pandemic, trauma due to racism and other factors, and economic challenges. 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.

For lawyers, we all know this is a stressful profession. 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, and we have a higher rate of suicide and suicidal ideation. You may have heard LCL talk about this in CLEs for years. All of us we need to keep talking.

The chronic stress we experience may trigger depression or other illnesses, and may lead to a sense of helplessness, increasing anxiety, and the inability to complete even mundane tasks. We are paid to solve the problems of others and feel we should be able to solve our own problems ourselves. We may feel shame because lawyers are not supposed to feel helpless. That helplessness can become hopelessness and the risk for suicide grows 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. He may give away prized possessions, quickly wrap up files, or put his affairs in order. She may make a plan and acquire the means to carry it out, and that plan may simply be enough alcohol to be deadly. People who talk about their suicide, can die by suicide. We all need to talk about it.

Our profession is addressing these concerns through initiatives such as "The Path to Lawyer Well-Being: Practical Recommendations for Positive Change." This 2017 report demands that we begin a dialogue about suicide prevention. Lawyer Assistance Programs have worked to increase awareness for decades and are grateful to have additional allies in this critical effort. The Report's Call to Action recommends events to raise awareness, sharing stories of those affected by suicide, providing education about signs and suicidal thinking, learning signs of distress, and making resources available. These are all good things that can make a difference.

The signs are not always verbal. Some warning signs of suicide include:

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

Lawyers sometimes think we need to be perfect, or we are a failure. Any possible failure becomes an opportunity for intense self-scrutiny and every move we make can become defined by winning or losing. A compromise or settlement may be seen as a failure because we did not get everything we asked for when we reached for the sky. In the case of Mr. MacConaill, his widow wrote "[S]imply put, he would rather die than live with the consequences of people thinking he was a failure." It does not have to be that way, but colleagues must be observant and meaningfully give encouragement and permission for self-care.

What can you do? Learn more about it. Read Atlanta lawyer Lynn Garson's excellent article, [Everything I Know About Suicide](#). Watch the powerful Texas Lawyer Assistance Program video, [Just Ask: How We Must Stop Minding Our Own Business in the Legal World](#) and access other resources on the LCL website. [Suicide prevention classes and resources](#) are available through the National Alliance on Mental Illness (NAMI).

What can you do? Have the courage to ask and to act and be sure you have the time to listen if you personally choose to reach out. If you observe these disturbing behaviors, ask directly, but ask in a way that is true to you. "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 he says "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 he is paralyzed may not be able to affirmatively ask for help but may be able to answer a direct question honestly. LCL can guide you.

What happens next? The next step is to listen, just listen. Do so calmly because this is not your situation or your crisis or your thing to fix. Give your full attention and be prepared for the time it takes to learn why the pain is so great that dying by suicide seems to be a reasonable option. 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. Text or call 988, call 1-800-SUICIDE or 1-800-273-TALK – all are national suicide prevention hotlines. Counselors are also available 24/7 through LCL at 651-646-5590 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 and provide tools to develop resilience in the future. Medications are often appropriate, especially in the early stages. It is hard for a lawyer to admit he is struggling financially, but many are and LCL can provide connections to resources to support the cost of ongoing treatment. Personal support and acceptance are critical. We need to know we are not alone.

If these words generate thoughts of someone you are 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.

Lawyers Concerned for Lawyers provides free and confidential peer and professional support to lawyers, judges, law students, legal organization staff members, and their immediate family members on any issue that causes stress or distress. Through LCL, up to four free counseling sessions are available statewide. Services are free, confidential, and available 24 hours a day. You can help us reduce the stigma. To learn more, to get involved, or to request LCL's Suicide Prevention CLE program, go to www.mnlcl.org, call 651-646-5590, or email (replied to during business hours) help@mnlcl.org.