

Lawyers Helping Lawyers

Providing Over 20 Years of Assistance to Virginia's Legal Professional's & Their Families

APRIL 2009 Newsletter

TIMELY TOPICS

The Depression Demon

The depression demon attacks lawyers with particular vengeance, and denial and secrecy have long been the response. The recent loss to suicide of prominent lawyers from across the country, and the near loss of others, has inspired the courageous to speak out, a first step toward turning the professional spotlight on a condition that is rampant, but also treatable.

Evidence of the problem is long-standing. A landmark 1991 study by Johns Hopkins University ranked lawyers first, among 105 professions surveyed, in the rate of clinical depression. A 1992 OSHA report found that male lawyers in the US are two times more likely to commit suicide than men in the general population. Lawrence Krieger, a clinical professor at Florida State University College of law, who focuses on work-life issues for lawyers, has research showing that practicing lawyers exhibit clinical anxiety, hostility and depression at rates ranging from 8 to 15 times that in the general population. Research in North Carolina indicates that 11% of lawyers in that state think of taking their own life at least once a month.



After the suicide of several prominent Texas lawyers, including Kenneth Malcolm "Mack" Kidd, a justice on the 3rd Court of Appeals in Austin, and Hermes Villarreal, a lawyer who had a loving marriage, three happy children, a successful personal-injury practice and was chairman of a community mental health facility, Texas State Bar Association president Martha Dickie commissioned a task force and video on depression last year as part of her focus on lawyer mental health issues. Over 1500 videos have been distributed. "Lawyers and suicide—it's rampant," says Dickie. "I am absolutely convinced that this video is saving lives."

Daniel Lukasik, managing partner of a Buffalo, New York personal injury firm, became a courageous advocate of treating depression in lawyers after his therapist told him that one-quarter of his clients were, like Lukasik, lawyers suffering from the illness, yet there were no peer support groups.

On a mission, Lukasik helped create the Committee to Assist Lawyers with Depression for his county bar association, which was recognized with a Certificate of Merit during the New York State Bar association annual meeting this year. He also created the web site www.lawyerswithdepression.com to offer lawyers information on the disorder. Further, he organized in Buffalo this year what may be the first national seminar on attorney depression.

The problem of depression is starting to be addressed at the law school level. This year the 51,500-member American Bar Association Law Student Division launched a mental health initiative to help law students battling depression and anxiety. A mental health on-line toolkit is being offered to student bar organizations and law schools around the country.

Complicating all these efforts to assist lawyers is the individual's fear of being stigmatized should their condition be known. This year the ABA adopted a model rule that would grant conditional admission to practice law to applicants who have substance abuse or mental health conditions, for which in many jurisdictions applicants are deemed unfit to practice law. Applicants must demonstrate recent rehabilitation or successful treatment.

These and other initiatives to recognize and provide assistance for depression seem to be starting to have an effect. Patricia Spataro, director of the New York State Bar's Lawyers Assistance Program says that now 30-40% of their calls are related to depression, compared to almost zero only a few years ago. The New York City Bar's Lawyer Assistance Program reports similar increases. "When I started with this program nine years ago, I actually had a lawyer with depression tell me that he wished he was an alcoholic because it would have been easier to deal with," said Ms. Travis, director of that program.

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Why does such a debilitating illness strike the legal community so fiercely? Pessimism is an attitude that has been demonstrated to be highly correlated with success in the practice of law, but it is also a trait that is strongly associated with depression, particularly when coupled with ambitious, high-achieving, perfectionist, type-A personalities who put tremendous pressure on themselves.

The key is making sure lawyers know that there is assistance available that can make life and work more rewarding.

Reprinted with permission by Ronda Muir, the author. Ronda Muir, Esq., a Senior Consultant with Robin Rolfe Resources, Inc., draws from law, behavioral science and conflict resolution to offer business-savvy, psychologically sophisticated solutions to the organizational and personal dynamics issues that are unique to law firms and law departments. Contact her at RMuir@RobinRolfeResources.com or through her blog, www.LawPeopleBlog.com.

ADDICTION AND RECOVERY

Managing Stress in Early Recovery

There is a clear relationship between stress and substance abuse. Prolonged stress is one of many risk factors associated with addiction. For those in recovery from addictive disease, issues such as divorce or conflicts at home or work are often associated with increased stress and relapse. It is important to be aware of your overall stress level, but also to become aware of those stressors that are unique to you. If you need help coping with stress or substance abuse recovery, speak with a mental health professional.

Stress symptoms:

Thoughts: self-criticism, difficulty concentrating or making decisions, forgetfulness, preoccupation with the future, repetitive thoughts, fear of failure.

Feelings: anxiety, irritability, fear, moodiness, anger.

Behaviors: increased or decreased appetite, "snapping" at friends, acting impulsively, persistent smoking, teeth grinding or jaw clenching, being more accident-prone, withdrawal from others.

Physical symptoms: sleep disturbances, tight muscles, headaches, fatigue, cold or sweaty hands, back or neck problems, stomach distress, more colds and infections, rapid breathing, pounding heart, trembling, dry mouth.

Suggestions for coping with stress:

Manage your time. One of the greatest sources of stress is over-commitment or poor time management. Develop healthy routines. Make a reasonable schedule for yourself and include time for 12-step meetings and other activities related to your recovery. Add some margin for days when everything goes awry.

Connect with the right people. Being by yourself is OK for short periods of time but early recovery requires that you attain a 12-step sponsor and meet regularly with people who care about you and support your recovery. Likewise, you will need to create some distance between yourself and those who do not fully support your recovery. Some of these people may be friends or co-workers who care about you, but don't understand your addiction or why you must make some drastic changes in your life.

Talk it out. Bottled-up emotions increase frustration and stress. Share your feelings with your sponsor, pastor, rabbi, supportive friends and family members. If necessary, seek professional help.

Get physical. Physical activity can relieve tension, relax you and energize you. Find something you enjoy and make regular time for it. Running, walking, weight lifting, swimming, playing tennis and playing golf are all good options if you are fit enough for exercise. Talk with your doctor about any health concerns you have before starting an exercise program.

Eat well; sleep well. Well-rested and well-nourished bodies are better prepared to cope with stress. Like a car running low on gas, if you are running on fumes from lack of sleep or are not eating right, you will be less able to go the distance when dealing with stressful situations.

Get some gratitude. Early recovery is wrought with challenges and frustrations so it is easy to get negative. Commit to actively acknowledging the positive things in your life. People who purposefully embrace gratitude have less stress and depression than those who do not. Gratitude can raise your spirits and help you begin to see your life and recovery in a new, more balanced way.

Article by Drew Edwards, EdD, MS. Copyrighted 2008 by Achieve Solutions, a ValueOptions website.

To submit news and announcements, please email Emily at ERadford@valhl.org by May 18th in order for your submission to appear in the next issue.

COLAP CONTRIBUTIONS

TLAP Pays Tribute to Janice Holder, Founder and New Chief Justice

In 1986, a well-known Memphis attorney died of suicide. At his wake some of his friends were lamenting the fact that no one was aware that he was so deeply depressed that he would contemplate such a desperate act.

One of those friends was attorney Janice Holder. She decided (as is her custom) to take action rather than simply talk about it. She went to work and convinced several lawyers and judges to form the Lawyers Helping Lawyers Committee of the Memphis Bar Association. She continued to be an active leader and participant with the committee after she became a Circuit Court Judge in 1990.

When Chief Justice Holder was appointed to the Tennessee Supreme Court in 1996, she saw an opportunity to establish a meaningful state-wide program to assist lawyers, judges and law students with substance abuse, mental health and other issues. She asked a Texas lawyer, Michael Crowley, a former Chair of the ABA Commission on Lawyers Assistance Programs to come to Tennessee to talk to the Supreme Court about a court rule creating the Tennessee Lawyers Assistance Program. As a result, the Court enacted Supreme Court Rule 33 creating TLAP in 1999.



Chief Justice Janice M.
Holder
Tennessee Supreme Court

Justice Holder has been the Supreme Court liaison to TLAP from its inception until she was recently selected by her colleagues to serve as Chief Justice. She has been a steady, guiding force for TLAP through the Commission's formative years. Chief Justice Holder was the driving force behind TLAP's creation.

Lawyers, judges and law students across the state owe Chief Justice Holder a debt of gratitude for her vision, hard work and dedication for creating a system that not only helps those who are affected by these issues, but that also helps to protect the public by providing education, early intervention and treatment, to reduce the incidence of malpractice and ethical violations that might otherwise occur.

Honorable Robert L. Childers, 30th Judicial District, ABA Commission on Lawyer Assistance Programs Chair, TLAP Commissioner

RECOVERY TESTIMONIALS

The following personal story of a North Carolina lawyer is presented anonymously in the spirit of AA. If you wish to communicate with the author, you may do so by contacting NCLAP Director, Don Carroll.

Johnny Carson was once asked why he quit drinking and his response was, "I don't drink well." This definition certainly fits me, although for many years I was able to drink quite well and alcohol was my solution not my problem. In my late years of drinking, I managed to brighten up the whole room every time I walked out.

I was one of those folks who no matter where I was, I wanted to be somewhere else; no matter what I was doing, I wanted to be doing something else; and whomever I was with, I wanted to be with someone else. I was a malcontent always seeking more. I didn't think I was tall enough, big enough, athletic enough or mature-looking enough. I just didn't fit. To quote Epicurus, "Nothing is enough for the man for whom enough is too little." But when I drank, I was more than enough; I was Master of the Universe.

At first, I had an unusual interest in alcohol. I did my fair share of drinking and partying while at Chapel Hill during my undergraduate years and although I cut back to some extent in law school, I continued to drink. It progressed to a preoccupation with drinking and then to a dependence (couldn't have any real pleasure without alcohol), and I finally entered the early stages of addiction. In my early drinking, I would plan to get pleasantly intoxicated. Years later, I would intend to have only a few drinks on the way home from work, and would end up dead drunk, not getting home until late at night or early in the morning. Initially, I was proud of how much I could drink, but toward the end, I was often sneaking drinks.

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Alcoholism tends to impact three areas of the alcoholic's life. At home, I was an absentee husband and father; and when home, was either drinking or asleep. My wife was baffled at how I would get so loaded after just a few drinks, but what she didn't realize was that I'd already been drinking for hours. Normal people typically engage in healthy recreational outlets but my main outlet was drinking. I was either working or drinking, yet I did manage to jog every day.

My social life consisted of hanging out in the bars with people who drank the way I did. My friends were my drinking buddies although a couple of close friends expressed concern about my drinking. As the disease progressed, I could not always control how much I was going to drink or my subsequent behavior. I had crossed the line to addiction with no chance of return to normal or social drinking.

In my profession, drinking was having an impact as well. I would never set an appointment after 4 p.m. because it would interfere with the cocktail hour. On too many occasions, I went to work extremely hung over although I never drank while working. Paradoxically, we lawyers are experts in solving the problems of our clients; yet have great difficulty dealing with our own problems. I thought I could and should control my drinking.

So here I was a successful attorney, Martindale a.v. rating, married with two children, owned a home in a fashionable area, never had a DWI, never lost a job and hadn't lost my family. How the hell could I be an alcoholic? I now understand that denial is a hallmark of alcoholism, and that alcoholism is quite the cunning disease.

At the age of 40, I read a newspaper article about the late Wilbur Mills, who was a recovering alcoholic. Despite my massive ego and staunch denial of any problem, I figured that if Mills, Chairman of the House Ways & Means Committee at the time, had gone to treatment; possibly, I would look into this and attend an AA meeting. I didn't realize it at the time but I had made a major life decision - I attended an AA meeting and the miracle began. Today, I am active in AA and the PALS program.

The challenge in early sobriety was the euphoric recall of my earlier drinking days. I tended to remember the good times and forget the bad. It was important for me to attend AA meetings to become comfortable with sobriety. Today, I go to meetings because I want to go. Today, life is rich without drinking, and I'm comfortable with who I am.

Ten Question Self-Assessment Quiz

1. Are your associates, clients, secretary or family alleging that your drinking or drug use is interfering with your work or home life?
2. Have you failed to show up or shown up late to the office or court because of a hangover or have you shown up under the influence of alcohol or drugs?
3. Are you drinking or using drugs during the workday?
4. Have you commingled, borrowed or otherwise misused client's trust or escrow funds?
5. Are you missing deadlines, neglecting to process mail or failing to keep appointments or answer phone calls?
6. Do you ever really crave a drink or a drug to steady your nerves?
7. Have you lied to cover up your drinking or drug use?
8. Have you consumed alcohol or used drugs before a meeting or court appearance to calm your nerves, gain courage or improve performance?
9. Have you experienced loss of memory (blackout) after drinking or using drugs?
10. Have you ever had another attorney cover for you because of alcohol, drugs or a hangover?

If you answered yes to two or more questions, then you owe it to yourself, your family, your clients and your profession to call seek help.

Sharing Your Experience, Strength and Hope

In our newly-featured section, “Testimonials,” we will be celebrating the recovery stories of legal professionals in the Virginia community. If you would like to submit your personal story for publication, please email a draft of it to Emily Radford at ERadford@valhl.org no later than May 18.

Special Thanks to Our Contributors

LHL would like to express its appreciation to Susan Grover and John Molumphy for standardizing our CLE presentation to insure that a uniform message of purpose is conveyed by volunteers and board members to the legal community.

We are also grateful to the law firm of MercerTrigiani for generously donating advertising space in Lawyers’ Weekly and allowing their marketing person to collaborate in creating a more effective marketing campaign.

Please look for our new ad in the upcoming June issues of this magazine.

Building a Library of Hope

LHL is seeking to develop a library of recovery materials relating to addictions (both substance and process) and mental health issues. We are hoping that individuals will donate books, pamphlets, brochures, and especially CDs of attorney recovery stories. As soon as we receive these gifts, they will be made available for borrowing through our office.



Be sure to check out our new and improved website in early June!



April 2009 Services Report

16 Face to Face Meeting with Clients by LHL staff

1 Meetings of Mental Wellness support group in Richmond

4 Meeting of SA support group in Richmond

2 Meeting of Mental Wellness Support Group Roanoke

2 Meeting of SA support group Roanoke

4 Meetings of SA support group in Northern VA

1 Meeting of Mental Wellness Support Group in Virginia Beach

(Virginia Beach and Northern Virginia Mental Wellness groups started in July 08)

3 Clinicals Performed (1 referral from attorney, 1 from VSB-not discipline, 1 from therapist)

144 Services related phone calls received/made during business hours:

83 Current/Past Clients

28 Volunteers/monitors

14 State Discipline/Board of Bar Examiners

7 New Attorneys/Law Students

16 Treatment Providers

7 Services related after hours calls to the toll free number:

2 current clients/volunteers

4 inquiries about services

1 calls from other LAPS

127 Emails were received regarding services we are providing in Virginia and 84 were received from LAPS around the country discussing various topics

5 Referrals made to Treatment Providers

21 Current Contracts (approximately 237 volunteer hours and 51 professional staff hours utilized providing help for these contracts) and 2 new Contracts Pending

2 Local Committee meetings held: Northern VA (4-9); Richmond (4-21)

Presentations: Jim Leffler went to Appalachian Law School (3-31) and Liberty University (4-20); Susan Grover and Jim Leffler provided a CLE presentation at the Bar Leadership Conference entitled *Substance Abuse and Mental Health Issues in Virginia Attorneys* (4-26)

Schedule of Events for May

- 6, 13, 20 and 27 – Substance Support Group in LHL Richmond Office from 6:00-7:00 p.m.
- 5 and 19 – Mental Wellness Group in LHL Richmond Office from 6:00-7:00 p.m.
- 6, 13, 20 and 27 – Northern Virginia Substance Support Group from 5:30-6:30 p.m.
- 4 and 18 – Roanoke Substance Abuse Support from 6:00-7:00 p.m.
- 11 and 25 – Roanoke Mental Wellness Group from 6:00-7:00 p.m.
- 26 – VA Beach Mental Wellness Group from 4:30-5:30 p.m.

NOVA Group Meeting Address:

12 South Alfred Street
Alexandria, Virginia

Roanoke Group Meeting Address:

308 Second Street, SW
Roanoke, Virginia

Va Beach Group Meeting Address:

629 Wesley Drive
VA Beach, VA

If you have any question please feel free to call our office at (804) 644-3212.
