

Lawyers Helping Lawyers

Chris McCoy

When to Take Action

Law students and practicing attorneys experience anxiety, depression and problems with alcohol and substance use disproportionately when compared to American society as a whole. Research¹ by Krill, Johnson and Albert published in the February 2016 issue of *The Journal of Addiction Medicine* indicated that 20.6% of all surveyed lawyers self-reported as engaging in problematic drinking. The study further showed that over the course of their legal career, anxiety (61.1%), depression (45.7%), social anxiety (16.1%), Attention Deficit Hyperactivity Disorder (12.5%) and panic disorder (8.0%) were among the most common mental health conditions reported.

The S.C. Supreme Court acknowledges the toll on legal professionals that substance abuse and mental health issues take. In fact, since 2011 the Court has required that all South Carolina attorneys with an active license participate in substance abuse or mental health-related Mandatory Continuing Legal Education in every licensure period. As high functioning professionals, it makes sense to invest in self-care; the return on investment can include lower levels of stress and greater overall satisfaction with life. Without self-care, that stress can manifest in a variety of maladaptive ways.

Identification

One challenge people face in personal matters is determining when a problem is “bad enough” to seek help. Without an objective viewpoint it can be difficult to decide when to take action and the issue is often easily dismissed. As the focus of this article narrows down from the legal profession as a cohort to you as an individual, having a primer on what to look for is key. By reading the following sections, you can gain perspective on when to be concerned and where to get help. The symptom descriptions noted below² are adapted from the *Diagnostic & Statistical Manual, 5th Edition*. Screening tools for depression, substance use disorders and anxiety can be found on the Substance Abuse & Mental Health Services Administration website³ at www.integration.samhsa.gov/clinical-practice/screening-tools.

Depression

There are several types of depression by severity, ranging from seasonal melancholy to entertaining thoughts of suicide. You may personally have lost interest in your hobbies, or are easily upset or irritated for no apparent reason. Maybe you’ve frequently overslept and can’t seem to regain your normal energy level. When a person feels several of the following symptoms (persistently feeling sad, empty, hopeless, worthless, helpless or guilty; no interest in pleasurable things; changes in appetite and sleep habits; difficulty concentrating; thoughts of death or suicide; and suicide attempts) for longer than two weeks, there is likely a major depressive disorder present.

Alcohol and other substance use disorders

For many, alcohol or other drug use may seem like the only pressure relief valve to all the stress. It can begin innocently enough as an occasional drink or two to unwind or celebrate, or a pill to help concentrate or relax that wasn't prescribed to you. In a nutshell, substance use qualifies as a problem when it continues despite the negative consequences that come from it. Two or more of the following criteria (consuming more than intended; failure to cut down or stop; large amount of time spent obtaining or using; use resulting in a failure to fulfill major role obligations at home, work or school; craving the substance; continuing use despite mental or physical problems being caused or worsened by use; continuing to use despite negative effects on relationships with others; repeated use in dangerous situations; giving up or reducing activities because of use; and tolerance and withdrawal) must be met within the last 12 months for a substance use disorder. The criteria are identical among all substances.

Anxiety

Anxiety can show up in several ways, not all of which have an emotional component. Overbooking yourself may have put your needs at the bottom of your priority list, leaving you to feel isolated and overwhelmed. You may experience palpitations during transitions from one event to the next. Some report cold hands, sweaty palms, always feeling rushed for time, full of dread or imagining devastating scenarios. When a person feels several of the following symptoms (restlessness, jitteriness, muscle tension, difficulty concentrating, irritability, easy to fatigue or sleep disturbance) more often than not for at least six months, there is likely an anxiety disorder present.

Getting into the solution

It is important that you take the initiative to contact a helping professional who is adept at working with mood disorders or substance use disorder if your screening scores indicate further attention is warranted. These are problems that don't typically go away by themselves or when ignored.

Help can be accessed in numerous ways:

- Talking with a helping professional can relieve pressure and stress, which in turn reduces symptoms of anxiety and depression. The first point of contact for practicing attorneys and law students alike is the SC Bar's confidential Lawyers Helping Lawyers program at (866) 545-9590 or at www.scbar.org/Bar-Members/Lawyers-Helping-Lawyers.
- Any South Carolina attorney with an active license can participate in up to five free counseling sessions through CorpCare, which can be reached at (855) 321-4384.
- Help for alcohol or other substance-related problems can be found at 12-Step meetings of Alcoholics Anonymous (www.area62.org) and Narcotics Anonymous (www.na.org/meetingsearch). For those needing alcohol or other drug treatment, contact the Lawyers Helping Lawyers program at (866) 545-9590.
- Law students in South Carolina can access help through their school, as well (see table above).

Chris McCoy, LISW-CP, CACII has worked as a Recovery Specialist with the South Carolina Recovering Professional Program since 2007.