

The Current Rates of Substance Use, Depression and Anxiety within the Legal Profession: Utilization of Services and Current Barriers to Seeking Help



IT TAKES A VILLAGE

ABA, HAZELDEN BETTY FORD COLLABORATIVE STUDY

Thank you to the ABA, Hazelden Betty Ford Foundation, all bar associations, regulators, committee members, CoLAP staffers and each and every contributor for bringing this project to fruition.



History and background of the project: Co-facilitators

Linda Albert, LCSW, CSAC, CoLAP Commissioner, Wisconsin Lawyers Assistance Program Manager

Patrick R. Krill, J.D. L.L.M., Director, Hazelden Betty Ford Foundation, Legal Professionals Program

- ▶ 2013: Hazelden Betty Ford Foundation approaches the ABA to discuss potential for an innovative collaboration; both organizations recognize the critical need for reliable behavioral health data in the profession.
- ▶ 2014: ABA/HBFF collaboration officially begins; project team is formed, study is designed and administered. Data collection begins.
- ▶ 2015: Data collection concludes, data analysis commences, manuscript reporting key results is prepared and submitted for peer review at a scientific journal.

Benefits of forming a collaboration between the ABA CoLAP and Hazelden Betty Ford Foundation

- ▶ Both the Hazelden Betty Ford Foundation and the American Bar Association Commission on Lawyer's Assistance Programs play an important role in addressing the chemical dependency and mental health needs of the legal profession, and are situated as national thought leaders and resources in that regard.
- ▶ Through the pooling of complementary talents, resources and relationships, the project enjoyed greater success.
- ▶ Stakeholder collaboration is key to tackling the significant behavioral health challenges of the profession. Hopefully this model will inspire additional and significant partnerships within the profession in order to affect much needed change.

Historical efforts to understand the impact of behavioral health problems on the legal community

- ▶ Previous data was both limited and outdated.
- ▶ Attempts to address attorney addiction, depression and impairment were greatly handicapped by lack of current, reliable and persuasive data
- ▶ Frustrations of working with old data in a field resistant to change
- ▶ Rate of "problem drinking" among attorneys estimated to be 18% in 1990 study.
 - This study was based on data from roughly 1200 attorneys in 1 state (WA)
- ▶ Same study found approximately 19% of Washington lawyers experienced statistically significant elevated levels of depression.
- ▶ Limited studies have also demonstrated a strong link between substance abuse and malpractice/discipline. (60% of malpractice claims and disciplinary cases involved substance abuse; 85% of trust fund violations)

Importance of new data

Data will help initiate, inform and guide important decision-making and policy development in the following key areas:

- ▶ Resource allocation for Lawyer Assistance Programs
- ▶ Bar examination and admission requirements
- ▶ Law school curriculum requirements;
- ▶ Continuing legal education requirements
- ▶ Discipline guidelines and regulatory association procedures
- ▶ Malpractice reduction strategies
- ▶ Monitoring
- ▶ Referral to treatment
- ▶ Delivery of treatment services
- ▶ Public awareness and stigma reduction
- ▶ Cultivating increased career satisfaction and longevity

THE PUBLICATION

- ▶ The Prevalence Of Substance use and Other mental Health Concerns Among American Attorneys
- ▶ Authors: Krill, Patrick, Johnson, Ryan, Albert, Linda
- ▶ Journal of Addiction Medicine: January/February issue, 2016



ABA, Hazelden Betty Ford Study-2015

- ▶ 12,825 licensed employed attorneys & judges
- ▶ Males 53.4%
- ▶ Females 46.5%
- ▶ Transgender .1%
- ▶ Diversity of race
 - ▶ Asian 1.2%
 - ▶ Black/African American 2.5%
 - ▶ Caucasian/White 90.9%
 - ▶ Latino/Hispanic 2.6%
 - ▶ Native American .3%
 - ▶ Other .7%
 - ▶ Missing .5%

Professional Characteristics

	<i>n</i>	(%)
Total Sample:	12,825	(100)
Years in Field:		
0-10 years:	4,455	(34.8)
11-20 years:	2,905	(22.7)
21-30 years:	2,623	(20.5)
31-40 years:	2,204	(17.2)
41 or more years:	607	(4.7)
Work Environment:		
Private firm:	5,226	(40.9)
Sole practitioner, private practice:	2,678	(21.0)
In-house: government, public, or non-profit:	2,500	(19.6)
In-house: corporation or for-profit institution:	937	(7.3)
Judicial chambers:	750	(7.3)
Other law practice setting:	289	(2.3)
College or law school:	191	(1.5)
Other setting (not law practice):	144	(1.1)
Bar Administration or LAP:	55	(0.4)

Professional Characteristics (cont.)

	<i>n</i>	(%)
Firm Position:		
Clerk or Paralegal:	128	(2.5)
Junior associate:	1,063	(20.5)
Senior associate:	1,052	(20.3)
Junior partner:	608	(11.7)
Managing partner:	738	(14.2)
Senior partner:	1,294	(25.0)
Hours per Week:		
Under 10 hours:	238	(1.9)
11 – 20:	401	(3.2)
21 – 30:	595	(4.7)
31 – 40:	2,946	(23.2)
41 – 50:	5,624	(44.2)
51 – 60:	2,310	(18.2)
61 – 70:	474	(3.7)
71 or more:	136	(1.1)
Any Litigation:		
Yes:	9,611	(75.0)
No:	3,197	(25.0)

SUBSTANCE USE FINDINGS

Survey Instruments

- ▶ AUDIT 10-Alcohol Use Identification Test
 - ▶ Developed by World Health Organization
 - ▶ Widespread use by health workers and alcohol researchers
 - ▶ Screens for hazardous, harmful and possible alcohol dependence

Alcohol Use- AUDIT 10

- ▶ 20.6 % scored at a level consistent with problematic drinking-Using Audit 10 = problem behaviors and levels of use
 - ▶ Problematic drinking = hazardous drinking and possible dependence
 - ▶ More males (25.1%) than females (15.5%) among lawyers
- ▶ Using the Audit 3 = levels of use
 - ▶ Physicians 15% problematic drinking
 - ▶ Lawyers 36.4%
 - ▶ More females than males among lawyers
- ▶ Position in the field
 - ▶ Higher scores for those working in private firms or
 - ▶ Bar Associations

Summary Statistics for Alcohol Use Disorders Identification Test (AUDIT)

		AUDIT Statistics			Problematic Percentage*	P Value**
		n	M	SD		
Total Sample:		11,278	5.18	4.53	20.6%	
Gender:	Male:	6,012	5.75	4.88	25.1%	<.001
	Female:	5,217	4.52	4.00	15.5%	
Age Category:	30 or younger:	1,393	6.43	4.56	31.9%	<.001
	31-40:	2,877	5.84	4.86	25.1%	
	41-50:	2,345	4.99	4.65	19.1%	
	51-60:	2,548	4.63	4.38	16.2%	
	61-70:	1,753	4.33	3.80	14.4%	
	71 or older:	297	4.22	3.28	12.1%	
Years in Field:	0-10 years:	3,995	6.08	4.78	28.1%	<.001
	11-20 years:	2,523	5.02	4.66	19.2%	
	21-30 years:	2,272	4.65	4.43	15.6%	
	31-40 years:	1,938	4.39	3.87	15.0%	
	41 or more years:	524	4.18	3.29	13.2%	

Summary Statistics for Alcohol Use Disorders Identification Test (AUDIT) (cont.)

Work Environment:	Private firm:	4,712	5.57	4.59	23.4%	<.001
	Sole practitioner, private practice:	2,262	4.94	4.72	19.0%	
	In-house: government, public, or non-profit:	2,198	4.94	4.45	19.2%	
	In-house: corporation or for-profit institution:	828	4.91	4.15	17.8%	
	Judicial chambers:	653	4.46	3.83	16.1%	
	College or law school:	163	4.90	4.66	17.2%	
Firm Position:	Bar Administration or LAP:	50	5.32	4.62	24.0%	<.001
	Clerk or paralegal:	115	5.05	4.13	16.5%	
	Junior associate:	964	6.42	4.57	31.1%	
	Senior associate:	938	5.89	5.05	26.1%	
	Junior partner:	552	5.76	4.85	23.6%	
	Managing partner:	671	5.22	4.53	21.0%	
	Senior partner:	1,159	4.99	4.26	18.5%	

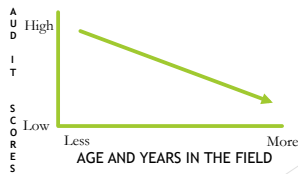
* The AUDIT cutoff for hazardous, harmful, or potential alcohol dependence was set at a score of 8
 **Comparisons were analyzed using Mann-Whitney U tests and Kruskal-Wallis tests

Self Reporting-Concerns

- ▶ 22.6% felt their use of alcohol or substances was a problem sometime during their lives
- ▶ 27.6% reported problematic use prior to law school
- ▶ 14.2% reported problematic use started during law school
- ▶ **47.7 % reported problematic use started within the first 15 years following law school**
- ▶ 14.5% reported problematic use started more than 15 years after law school.

Regression Analysis-predictive validity of age, position and years in the field

- ▶ Age 30 and under higher Audit and Audit C scores-more hazardous drinking
- ▶ Less years working in the field = higher Audit scores
- ▶ Working in a private firm or for a bar association yielded higher Audit scores

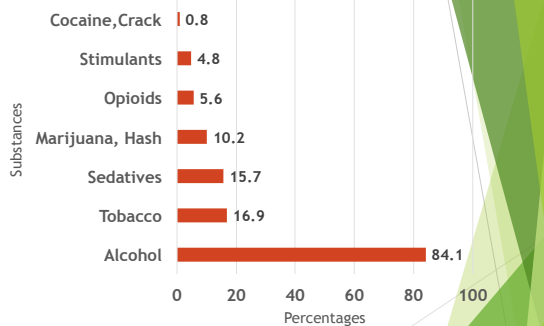


DRUG USE-DAST

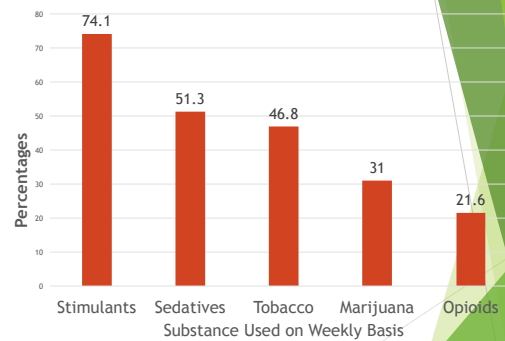
Smaller sample 26.7% completed the DAST n= 3419

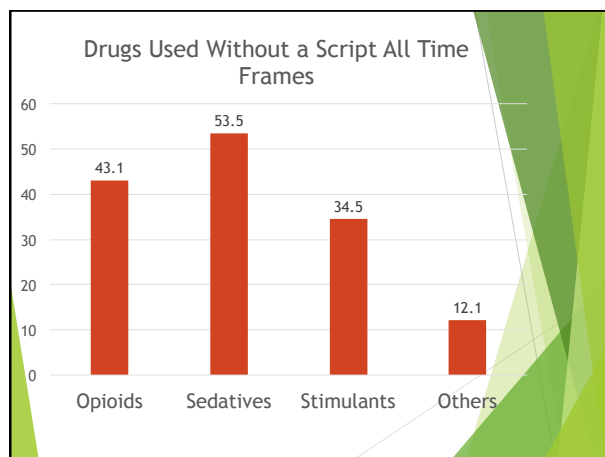
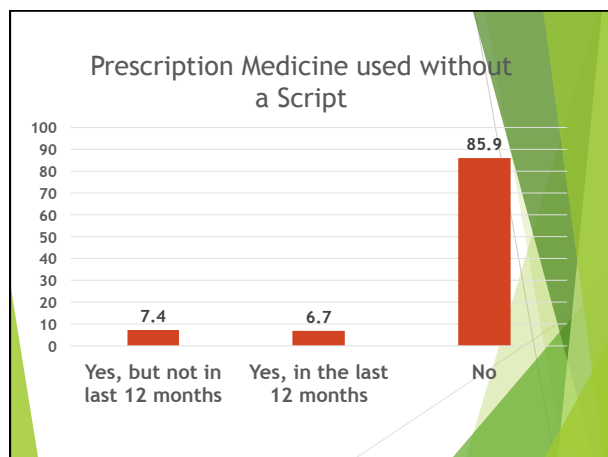
- ▶ Low rates of abuse = 76%
- ▶ Intermediate = 20.9%
- ▶ Substantial = 3.0%
- ▶ Severe = .01%

Substances Used Last 12 Months



Substances Endorsed as Used Weekly





MENTAL HEALTH FINDINGS

Depression, Anxiety and Stress Scale = DASS-21

- ▶ Depression 28%
- ▶ **Males higher levels of depression than females**
 - ▶ **Same inverse relationship**
 - ▶ Rates decreases as age increased
 - ▶ Junior positions = higher rates

ANXIETY/STRESS

- ▶ Anxiety 19%
 - ▶ *Females higher than males*
- ▶ Stress 23%
- ▶ Higher scores on Audit correlated with higher scores on the DASS
- ▶ DASS scores decreased as age and years in the field increased-similar to Audit

Self Reporting of Mental Health Concerns

- ▶ Anxiety 61%
- ▶ Depression 45.7%
- ▶ Social Anxiety 16.1%
- ▶ ADHD 16.1%
- ▶ Panic Disorder 8.0%
- ▶ Bipolar Disorder 2.4%

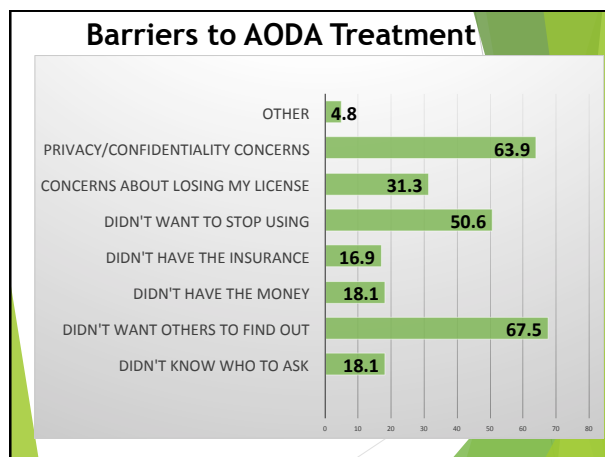
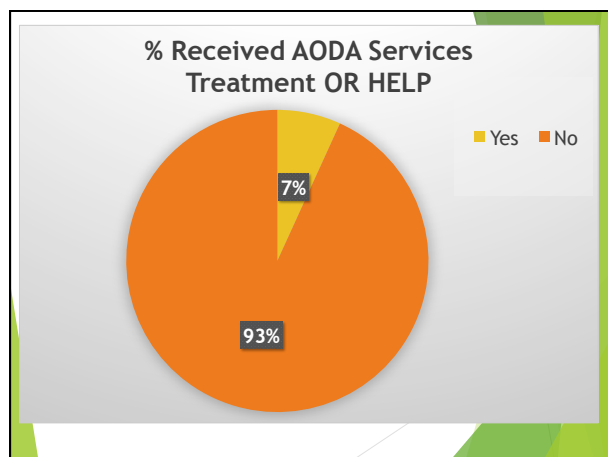
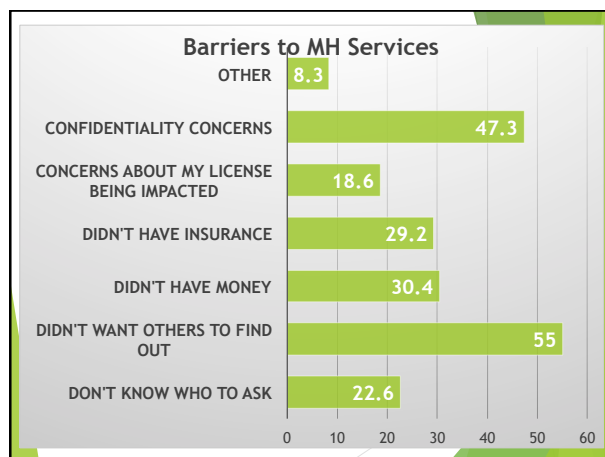
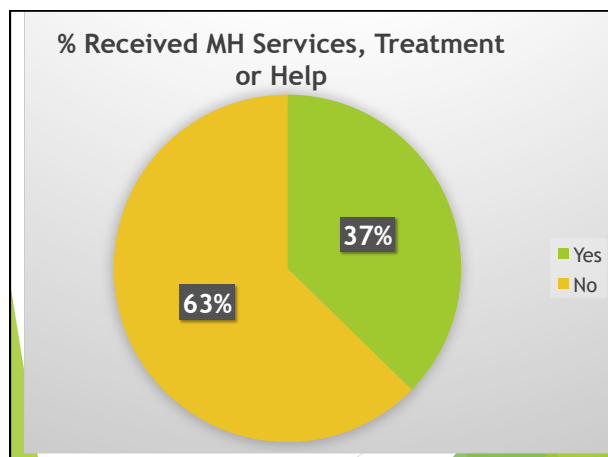
Suicidal Thoughts and Self Harm

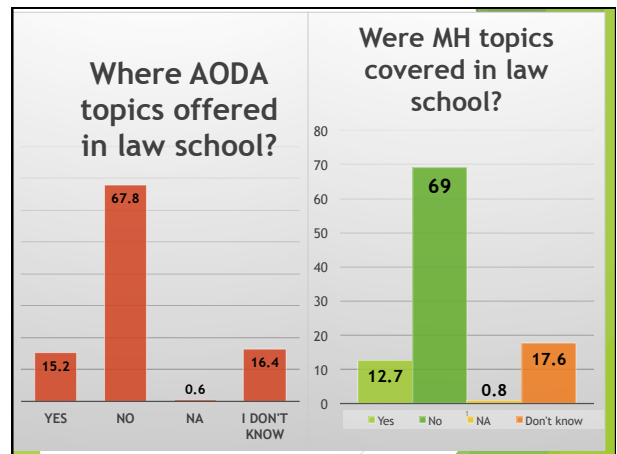
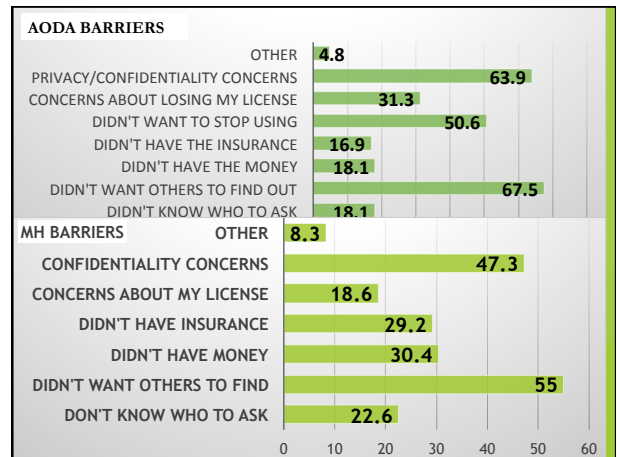
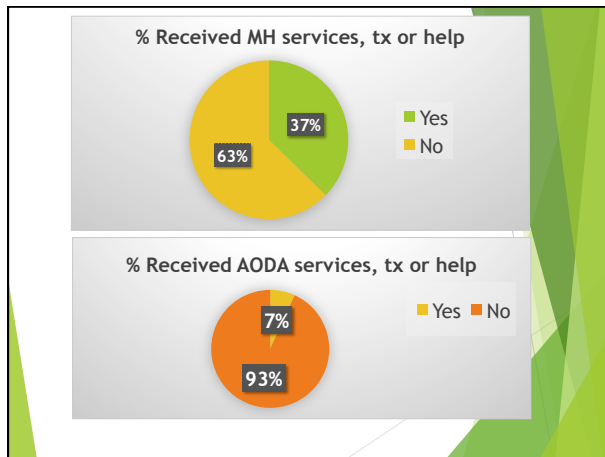
- ▶ 11.5% reported suicidal thoughts during their career
- ▶ 2.9% reported self injurious behaviors
- ▶ 0.7% reported at least one suicide attempt

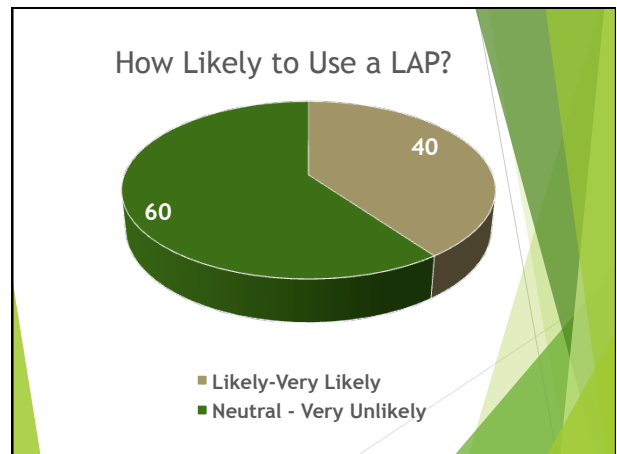
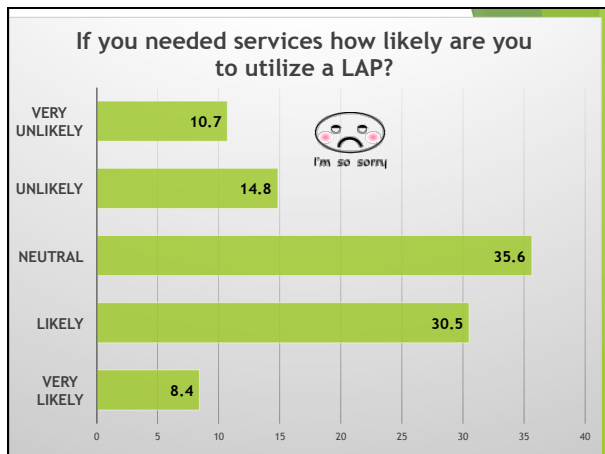
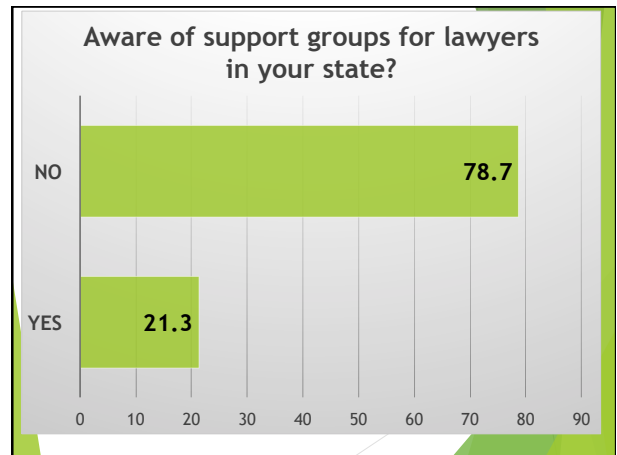
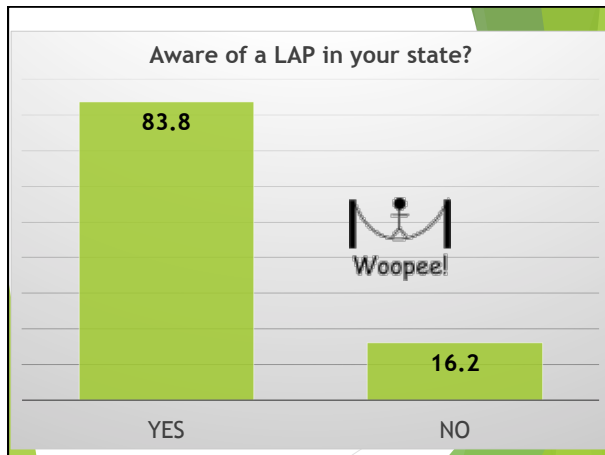
Help Seeking Behaviors- Two Common Barriers

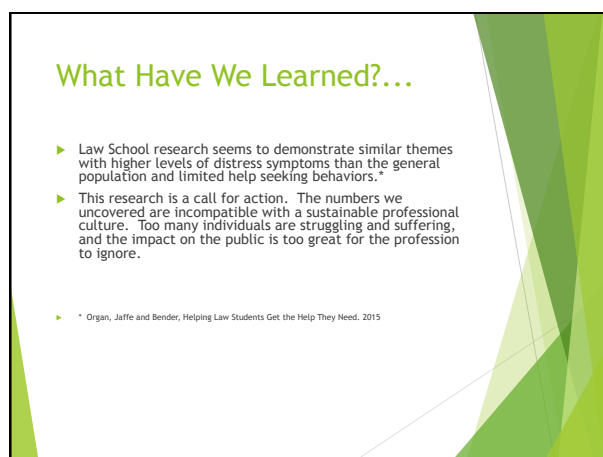
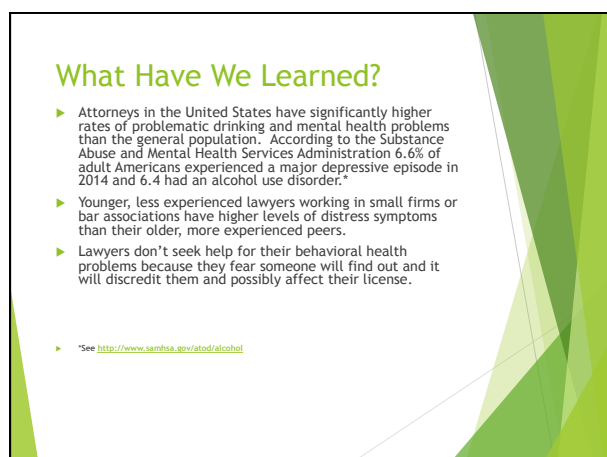
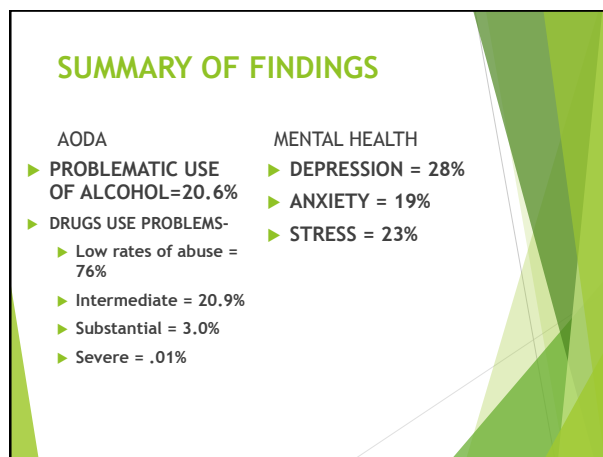
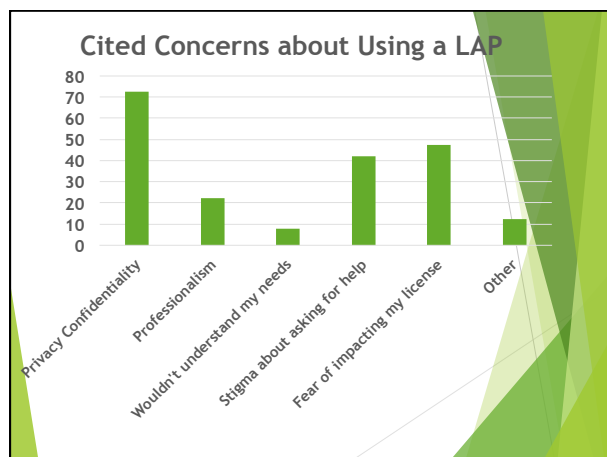
- ▶ Not wanting others to find out they needed help-Stigma
- ▶ Concerns regarding privacy or confidentiality











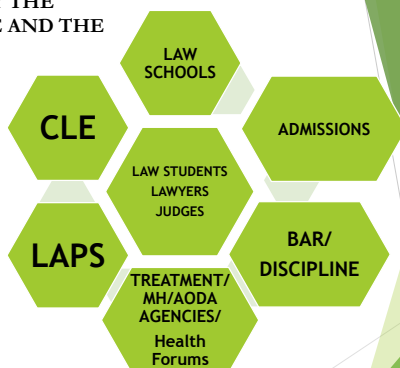
Specific Recommendations

- ▶ Mandatory law school classes on the importance of maintaining personal wellbeing, happiness and life satisfaction to insure fitness to practice, similar to other areas of professional responsibility.
- ▶ Comprehensive mentoring programs for new lawyers. It is imperative that these programs do not center on happy hours or other alcohol-related events to generate participation or facilitate networking
- ▶ Bar Examiners should make automatic referrals to local lawyer assistance programs when they receive at-risk applications or have concerns about an applicant.
- ▶ All states should have conditional admission which allows lawyers who are currently fit to practice (but otherwise have *conduct* in their past that might warrant denial) to be admitted and monitored by a lawyers assistance program.

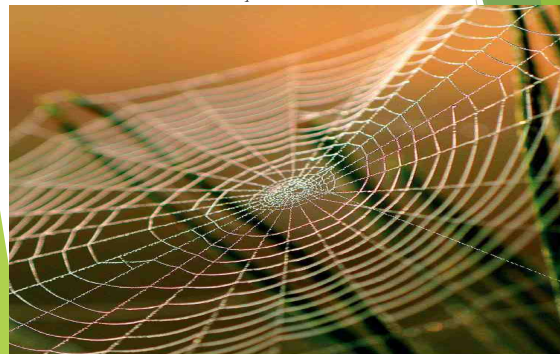
Recommendations continued..

- ▶ All regulatory agencies should evaluate the rules in their jurisdiction to ensure they have the means to refer to the lawyer assistance program when concerned about a lawyer prior to, during, or after discipline.
- ▶ The continuing legal education requirements of each jurisdiction should mandate a certain number of hours each reporting period on prevention of substance use and mental illness along with identification and referral information.
- ▶ State and local bar associations should form partnerships with local health organizations to learn about the best practices for increasing the health and wellbeing of their members.
- ▶ Lawyer assistance programs must be funded at a level that allows them to increase their services to provide more outreach, screenings, counseling, peer assistance, monitoring and preventive education.
- ▶ Profession-wide health and wellness summits should be organized to develop and implement comprehensive strategies and plans for improving the health and wellbeing of the legal profession. These summits should include key stakeholders from all sectors of the profession.

SOLIDIFY THE MESSAGE AND THE WORK



"When Spider Webs Unite they can Tie Up a Lion"...
Old Ethiopian Proverb



**TALENT, GREAT MINDS,
RESOURCES, HOPE,
RESILIENCE, MOTIVATION,
EXPERTISE...**

Thank You!

