



# NHLAP

## NEW HAMPSHIRE



## SEPTEMBER 2019

# Newsletter

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### *NH LCL Monthly Meeting*

Lawyers Concerned for Lawyers (LCL) is a monthly meeting on the **SECOND TUESDAY OF EACH MONTH** of NH lawyers, judges and law students who come together for free, confidential peer support for any issue that interferes with professional competence. Absolutely confidential.

September 10 at 6:00 p.m.

Airport Diner, 2280 Brown Ave, Manchester

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The NH Bar Association has made it possible for the bar-wide distribution of the monthly NHLAP Newsletter as of May, 2019. NHLAP is sincerely grateful for the leadership and assistance of NHBA in this endeavor.

# LOOKING AT DEPRESSION AND LAWYERS

There is a wealth of information about lawyers and depression. Here are just some of the headlines:

**John Hopkins University studied more than 100 occupations. Lawyers lead the nation with the highest rates of depression.** (Eaton, W.W. (1990), Occupations and the Prevalence of Major Depressive Disorder, *Journal of Occupational Medicine*, 32 (11), 1079-1087.)

**Lawyers have the highest suicide rate of any profession.** (Greiner, M. (Sept. 1996) What About Me? *Texas Bar Journal*.)

**46% of lawyers self-report an issue with depression over the course of their careers. 12% of lawyers self-report suicidal thoughts over the course of their careers.** (Krill, Johnson & Albert (2016) The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys, *Journal of Addiction Medicine*, Vol. 10 (1) Jan/Feb. 2016).

This research unequivocally finds that lawyers suffer from Major Depressive Disorder (MDD) at alarming rates. But what is it?

Major Depressive Disorder (previously known as Clinical Depression) is a serious medical condition that has a negative impact on daily functioning. Symptoms of MDD can vary from moderate to severe but almost always includes:

- Feeling sad or having a depressed mood
- Loss of interest or pleasure in activities
- Changes in appetite

80% of those  
treated for  
depression show an  
improvement in  
symptoms within 4-  
6 weeks of starting  
treatment.

- Feeling Worthless or Guilty
- Trouble Sleeping or Sleeping Too Much
- Loss of Energy and Increased Fatigue
- Difficulty Concentrating
- Difficulty Finding Motivation
- Thoughts of Death or Suicide

Symptoms lasting two weeks or more require help from a medical professional. Any thoughts of death or suicide, whether transient or concrete plans, need immediate help and should never be downplayed, excused or ignored. Studies show that 8 out of 10 people who commit suicide give some sign of their intentions.

Major Depressive Disorder affects 17.3 million adults in the U.S. or 7.1% of the population in those age 18 or older.

More than 11 million of people or 4.5% of the population had one major depressive episode with severe impairment.

Nearly 50% of all people with Major Depressive Disorder are also diagnosed with an Anxiety Disorder.

Suicide is the 10th leading cause of death in the U.S.

Suicide is the 2<sup>nd</sup> leading cause of death among Americans 10-34 years old.

Only 1 in 5 people with MDD receive treatment consistent with current best practice guidelines.

Depression is the leading cause of disability worldwide.



## THINGS NOT TO SAY TO A DEPRESSED PERSON

### “SNAP OUT OF IT!”

Contrary to popular belief, depression isn't just about feeling sorry for yourself. It is in fact, a clinical condition which causes a person to feel extremely low for extended periods of time—regardless of circumstances. When it comes to depression, there is no quick fix.

**Try Instead: How can I help you?**

### “YOU’VE GOT NOTHING TO BE DEPRESSED ABOUT.”

Clinical Depression doesn't pick and choose its victims according to what they have in their wallets or what their relationships are like. You could have the best life in the world and still suffer from depression.

**Try Instead: You are struggling, let me help.**

### “AREN’T YOU BEING A BIT DRAMATIC?”

There are psychological, physical and social symptoms of depression which permeate every aspect of a person's life from the minute they wake up to the minute they go to sleep. This isn't theatrics. This is life.

**Try Instead: I didn't realize. You can talk to me.**

### “MAN UP.” or “SUCK IT UP.”

With sky-high suicide rate, this is probably the most toxic thing you can say. Don't. Ever.

**Try Instead: You are strong enough to get through this.**

There are many contributors to Major Depressive Disorder.

**Biological** People with MDD have a chemical brain imbalance which effects multiple areas of the brain that regulate mood, sensitivity to pain, memory, nerve cell communication and sensory input.

New research has shed light on the complex nature of depression. Genes have been identified that make some individuals more vulnerable to low moods than others. Incomplete or faulty nerve cell connections in the brain in the areas of mood regulation have also been identified. The relative smaller size of the hippocampus is likely an indicator of depression. Low levels of serotonin, which regulates sleep, appetite, and mood, has been shown to be an indicator of suicide risk. Changes in the brain development from early trauma is also an indicator for risk of depression and suicide.

**Cognitive** Negative thinking patterns and low self-esteem can lead to the development of depression.

**Co-Occurrence** Depression is more likely to occur with substance misuse and addiction as well as with chronic illnesses such as cancer, Multiple Sclerosis, diabetes and others.

**Gender** More women experience depression than men. Hormonal changes with menstruation, pregnancy, childbirth and menopause are some likely reasons why.

**Medication** Side effects of certain medications such as steroids or those to regulate blood pressure can cause depression.

**Situational** Difficult life events such as divorce, death of a loved one and financial troubles can contribute to depression.

## “YOU DON’T LOOK SICK”

Depression is an invisible illness. You can’t always see it from the outside but that doesn’t mean that it is not there.

**Try Instead: Let’s get together when you are ready.**

## “MAYBE YOU JUST NEED TO MAKE SOME CHANGES.”

If only it was as easy as getting a new hairdo or redecorating or going on vacation or changing your job.

**Try Instead: You are not alone. I’m here for you.**

## “YOU’RE BEING A BIT SELFISH.”

Despite the severity of this disorder, too many people still don’t quite ‘get it’. Depression is not a choice. Depression is an illness. There is no on/off switch.

**Try Instead: I don’t like seeing you like this. I want to help.**

Depression doesn’t take your personal circumstances into account. It doesn’t care what car you drive, it doesn’t care about race or religion or where you were born. It doesn’t care about your upbringing or whether you are in a relationship. Depression indiscriminately picks people regardless of what they have or have not been through.

The World Health Organization estimates that over 350 million people worldwide suffer with Depression. That a whole lotta people being told to ‘cheer up.’

This section was reprinted from DITCH THE LABEL. YOUR WORLD. PREJUDICE FREE. (See: [us.ditchthelabel.org/what-not-say-depressed-person](http://us.ditchthelabel.org/what-not-say-depressed-person).)

## FREE ON-LINE PEER SUPPORT

### Depression and Bipolar Support Alliance

(DBSA), is a free, online support group providing people living with depression and bipolar disorder a place to share experiences, discuss coping skills and offer hope to one another. DBSA support groups are peer led, meaning they are facilitated by someone living with a mood disorder. Currently, there are groups for peers, young adults, and friends and family members. Info at [www.dbsalliance.org](http://www.dbsalliance.org) or 800-826-3632.



National Alliance on Mental Illness (NAMI) is a resource for information and finding an appropriate professional in your area. Go to [www.nami.org](http://www.nami.org) and click “Find Support” to find a mental health professional, to understand your benefits under your health insurance plan, understanding your diagnosis and, even how to talk about your issue with others. NAMI Helpline [info@nami.org](mailto:info@nami.org), 1-800-950-NAMI or TEXT “NAMI” to 741741

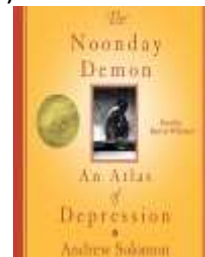
## MONTHLY RESOURCE



## SPOTLIGHT

### BOOK PICK:

**The Noonday Demon: An Atlas of Depression** by Andrew Solomon, Simon & Schuster (2001)



Finalist for the Pulitzer Prize in Literature. Winner of the National Book Award. “[T]he book for a generation, elegantly written, meticulously researched, empathetic, and enlightening.” (*Time*) The author suffers from depression and wrote this book to help others understand what it is truly like to suffer from it.

### PODCAST PICK:

**The Hilarious World of Depression** by American Public Media. A series of frank, moving, and yes, funny conversations with top comedians who have dealt with this disease. A chance to gain some insight, have a few laughs, and realize that people with depression are not alone and that together, we can all feel a bit better.



Available with subscription on iTunes, Stitcher, Android, TuneIn or Google Podcasts

## WHAT IS NHLAP?

We are a confidential, independent 501(c)(3) non-profit to assist NH lawyers, judges and law students with any issue that may impact or impair the ability to practice law. Many lawyers think we only help with substance misuse. Although that is a very important part of NHLAP, it is not the sole focus of our work. We help with anything that has become problematic. Some examples are depression, anxiety and other mental health issues; grief; cognitive limitations resulting from aging; eating disorders; professional dissatisfaction and burn-out; work-life imbalance and time management strategies.

We are here to help before consequences of these issues become problematic, public or both. We are not part of the NH court system nor the NH Bar. Because we are solely funded by a per attorney mandatory assessment, we are akin to an additional lawyer insurance policy- we can help individuals or legal employers understand the risks in ignoring these very real issues and point to concrete solutions.

We are your resource. We are here to help make your legal practice something you enjoy, not something you endure.

**1-877-224-6060**

Add NHLAP to your social media accounts to receive wellness updates and links to wellness articles as they relate to the law. We are on Facebook, LinkedIn, Twitter and Instagram. Just click on the links on the first page to see how we are harnessing the power of social media to keep you better informed.



## QUICK TIP

### WELLNESS QUICK TIP

Protect your emotional well-being with the Big Three:  
Quality Sleep,  
Lots of Water, and  
Slow, Deep-Breathing.

Small, simple, doable.

