



RECOGNIZING, UNDERSTANDING & REFERRING A COLLEAGUE IN NEED

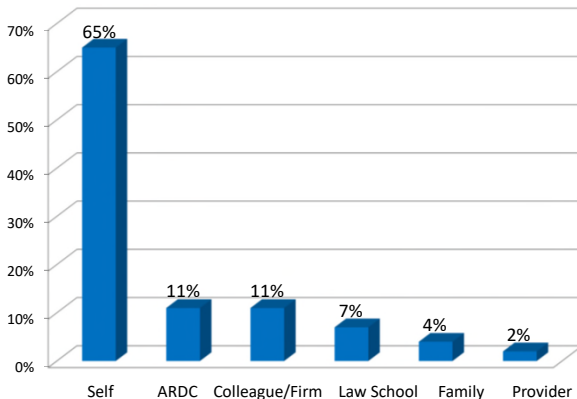
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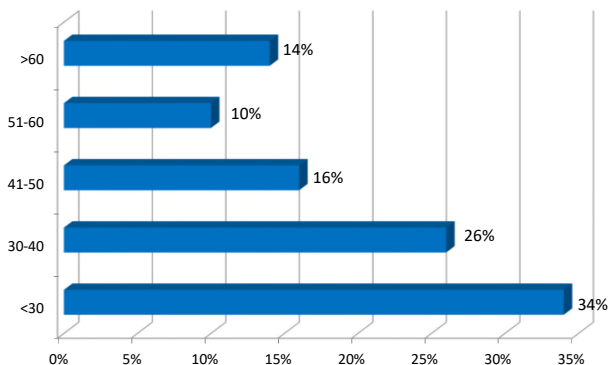
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How Clients Got to LAP FY 2019



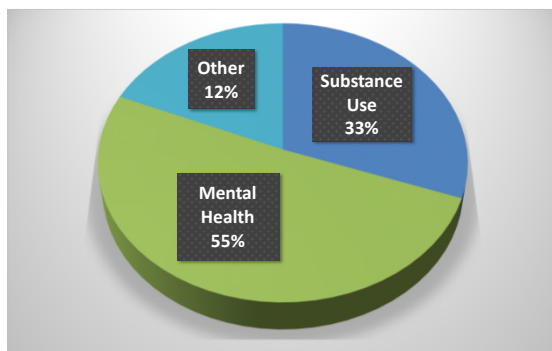
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Age Range of LAP Clients 2019



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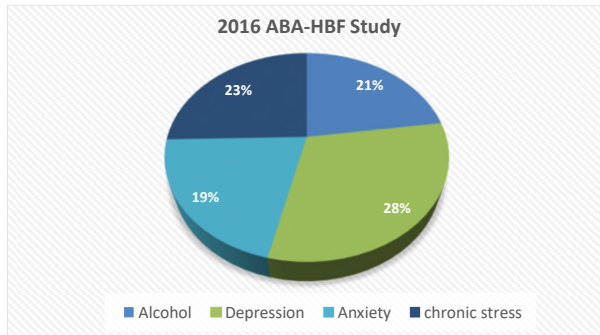
2019: Primary Problems Identified



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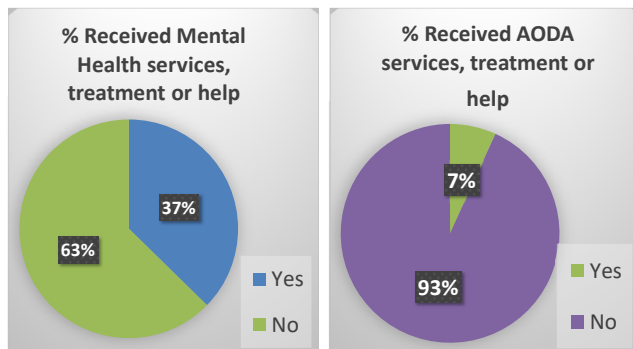
2016 National Study of 12,825 Licensed Employed Lawyers

Funded by ABA, Hazelden Betty Ford Foundation

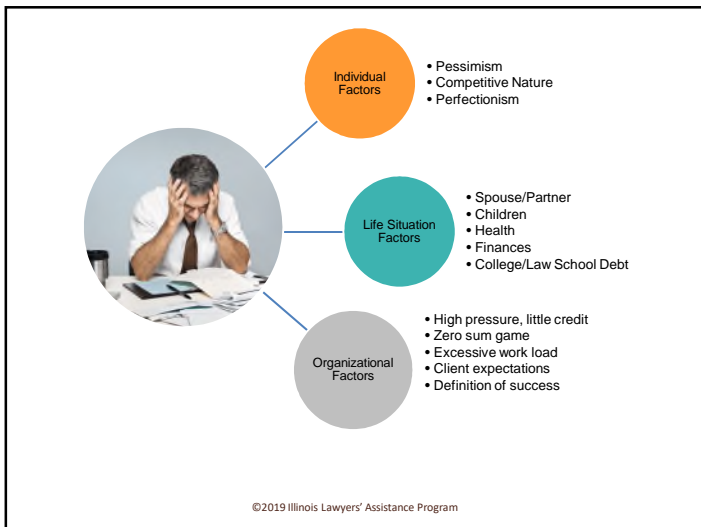


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Reported Treatment Rates from Study



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Follow the MAP



(Pacione et al, ABA Solo Practice Journal, May 2015)

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What To Look For

Follow the MAP

1. **M**ood or attitudinal disturbances
2. **A**pppearance or physical changes
3. **P**roductivity and quality of work

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Increased isolation

Impaired judgment

Cognitive Issues

Decreased ability to plan
ahead

Decrease in ability to
make and keep plans

Decreased ability to organize information/plan
ahead

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Look out for:



- "How do I do this again?"
- "Can you show me how to do this one more time?"
- "I'm not interested in doing that anymore."
- "Oops I am not sure how that happened."
- "I forgot to put that on my calendar."
- "I'm having a hard time understanding this right now."

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Anxiety

unexplained trembling
Increased worry
Irritability
Fatigue
headaches
digestive problems
Perfectionism
Decrease in productivity
Rumination
Unexplained pains

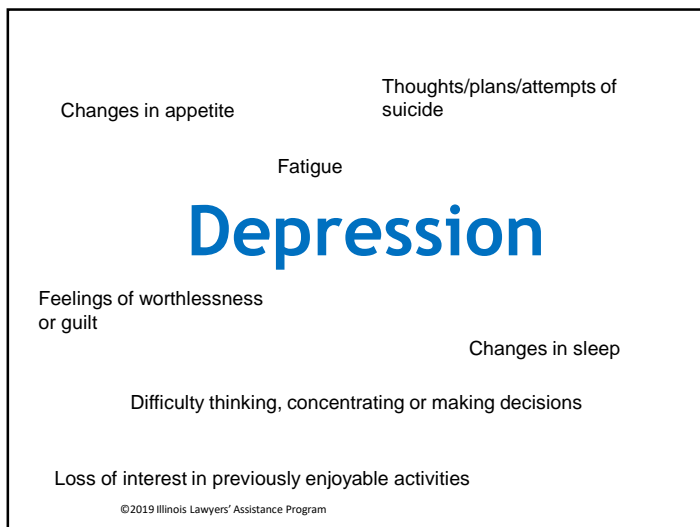
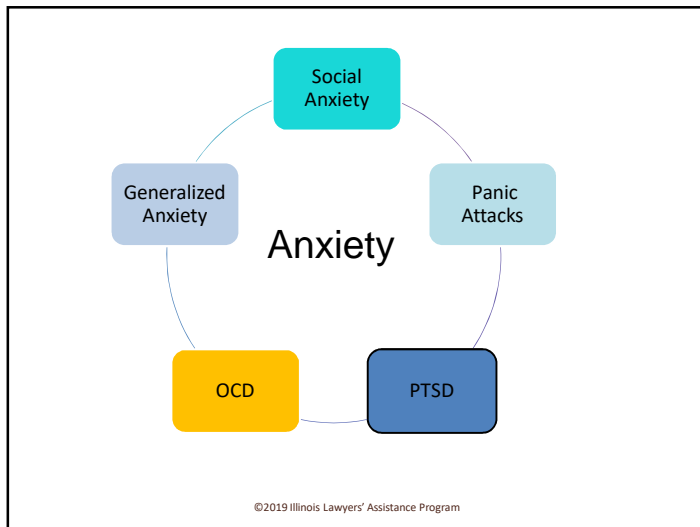
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Listen for:



- "I can't cope."
- "Get off my back."
- "I can't come in today."
- "I need more time to get this done."
- "I'm scared I will get fired."
- "I just couldn't get it done."

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Listen for:



- "I don't feel right"
- "I feel like I am on an emotional rollercoaster."
- "I just don't feel like doing anything. Nothing is fun anymore."
- "I just can't get things done on time anymore."
- "I have to constantly redo everything over again."
- "I can't get anywhere on time and I just want to be left alone."
- "I have a hard time feeling happy or interested in anything these days."

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Giving away possessions

Declining performance
and interest in work

Thoughts or feelings about suicide

Acquiring means to commit suicide
(buying a gun, stockpiling
prescriptions)

Dis-regulation of sleeping and eating
habits

Suicide

Feelings of worthlessness
or guilt

Making a plan
(where, when, how)

Loss of interest and participation
in social activities, hobbies,
relationships

Despondent mood or
alcohol or drug use

Isolation

Expressions of hopelessness, powerlessness,
worthlessness, shame, guilt, self-hatred,
inadequacy

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Listen for:



- "What's the point?"
- "I can't get out of bed anymore."
- "I don't see a future with me in it."
- "I hate being a burden."
- "My family would be better off without me."
- "I just want to be left alone."
- "I have nothing to live for or to be excited about."
- "I feel hopeless and worthless."

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What Not to Do

- Do not argue about the "right or wrong" of suicide
- Avoid platitudes like:
 - ☐ "You have so much to live for"
 - ☐ "It will be better tomorrow"
- Do not discount their problems
- Refuse to be sworn to secrecy

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What to Do:

(CSSRS: Columbia Suicide Severity Rating Scale)

- ACE Card questionnaire
 - ☐ Ask
 - ☐ Care
 - ☐ Escort
- Only 6 questions
- Designed for peers

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		In the Past Month	
		YES	NO
Answer Questions 1 and 2			
1) Have you wished you were dead or wished you could go to sleep and not wake up?			
2) Have you actually had any thoughts about killing yourself?			
If YES to 2, answer questions 3, 4, 5 and 6 If NO to 2, go directly to question 6			
3) Have you thought about how you might do this?			
4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?			
5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?			
Always Ask Question 6		In the Past 3 Months	
6) Have you done anything, started to do anything, or prepared to do anything to end your life?			
<small>Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, held a gun but changed your mind, cut yourself, tried to hang yourself, etc.</small>			

Any YES must be taken seriously. Seek help from friends, family, co-workers, and inform them as soon as possible. If the answer to 4, 5 or 6 is YES, immediately ESCORT the person to Emergency Personnel for care.

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What it feels like



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What to say



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Why LAP

- Free
- Confidential
- Familiar with legal environments
- Services tailored to judges, lawyers and law students (i.e. support groups)
- Peer Support
- Referrals for ARDC & Character and Fitness issues

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Talking to someone about LAP

- Call or email LAP. We will coach you on what to say to your colleague
- Show them the LAP website/social media
- Highlight LAP's guaranteed confidentiality
- Say:
 - ☐ "Calling LAP is easy, free and totally confidential. No one has to know."
 - ☐ "Let's call LAP together right now." (and dial the phone)
 - ☐ "Do you want me to call LAP for you?"

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What happens next

- If the person is willing to come in or be contacted an assessment will be done and a treatment/action plan created
- If the person is not willing, then LAP will:
 - Reach out to the person and invite them to come in.
 - Contact trained LAP Volunteers (bound by confidentiality) who may already have a relationship with the person to see if they can help connect the person with LAP.
 - Intervention

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ILLINOIS LAWYERS' ASSISTANCE PROGRAMS

Always Free + Confidential

WE CAN HELP WITH

Stress - Anxiety - Grief
Depression
Career Transitions
Addiction - Substance Use
& Much More

Services tailored to the legal profession:

- > Short-term counseling
- > Support Groups
- > Referrals
- > Interventions
- > Help with ARDC Concerns

CONTACT US//
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LAP is only able to serve those in need as a result of the efforts of our staff, and the financial contributions of those within our legal community.

All donations are tax deductible. All donations go towards helping Illinois attorneys' in need.

[Illinoislap.org/mental-health-donations](https://illinoislap.org/mental-health-donations)

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Treatment Assistance Program