Help Me, I’m Depressed

A look at the definition of depression and resistance to treatment among lawyers and judges

By Richard J. Kay and Nathan M. Comerford

When I first came to my job in the Lawyers and Judges Assistance Program (LJAP) back in 1998, we were just beginning to address issues outside of substance use. The first “outside” issue we focused on was depression among members of the legal community, including law students. Given the time and performance demands along with the rules, norms, and expectations inherent in the legal culture (e.g., competition or need to “win,” emotional honesty or vulnerability viewed as a weakness, view of self as problem solver rather than recipient of help), it is not surprising that legal professionals are more susceptible to depression than the general population. Nor is it surprising that global and personal economic stress, coupled with feelings of loss associated with watching colleagues struggle and sometimes falter, exacerbates the generalized anxiety that can affect overworked legal professionals.

The LJAP continues to offer guidance and support for individuals who come to our program with signs and symptoms of depression. To this end, LJAP and the Standing Committee on Lawyers and Judges Assistance (LJAC) are currently working with the SBM Information Technology team to develop an online peer-facilitated “chat room” to assist individuals with stress management and problem solving in the hope of thwarting the sense of isolation that often precedes depression. It is our desire to design and implement this preventative and supportive networking community during the next fiscal year.

The implementation of this column is another effort to reach out to membership in both a preventative and corrective capacity by offering education and information that supports attorney wellness. This month, I am delighted to offer a timely and informative article co-authored by two members of our esteemed LJAP preferred treatment provider list. I have had the pleasure of getting to know Nathan Comerford and Richard Kay over the past few years, and am consistently impressed with their clinical acuity and sensitivity to the subtleties and nuances relative to the treatment and support of legal professionals. Though they are opposites in terms of physical stature (think Arnold Schwarzenegger and Danny Di Vito in Twins), they are similar in their good humor, dedication to the work that they do, and personal commitment to excellence. Please read on!

“Help Me, I’m Depressed” by Richard J. Kay and Nathan M. Comerford

Depression affects millions of Americans annually and can be debilitating if not properly treated. As you will see from the statistics presented below, the pervasiveness of depression among the U.S. population is significant. The resurgence of economic stress coupled with the unforeseen vicissitudes of the future has caused a recent proliferation in the number of people dealing with depression. Lawyers and judges are not sheltered from these current trends and in some ways are more susceptible to depression. In fact, several recent Michigan newspaper articles have reported on the increasing unemployment rates and economic stresses, specifically for lawyers. The added financial pressures, in tandem with the already overwhelming list of responsibilities that lawyers and judges have on their plates, can increase the chances of depression.

This article will synopsize the definition of depression to convey a sense of what it looks like in general and what it might look like for lawyers and judges. It will also explore why people with depression do not seek treatment or why they wait until the level of severity becomes so intense that it becomes much more difficult to treat.

Depression Statistics

- 14.8 million (6.7 percent) of adult Americans are affected by major depressive disorder in a given year.¹
- “Women experience depression at twice the rate of men.”²
- Depression is the cause of more than two-thirds of the 30,000 suicides reported every year in the U.S.³
- “Despite its high treatment success rate, nearly two out of three people suffering with depression do not actively seek nor receive proper treatment.”⁴

Those experiencing depression may believe that they deserve to be miserable and that they are undeserving of a happy and fulfilling life.
What is Clinical Depression?

Clinical depression—also known as major depression, major depressive disorder, and unipolar depression—is classified as a mood disorder by the DSM-IV-TR (a clinical reference manual for mental disorders). An abbreviated definition of a major depressive episode from the DSM-IV-TR indicates that at least five of the symptoms from the list below must have been met for at least a two-week period, and one of the symptoms must have been either depressed mood or loss of interest in pleasure. The parenthetical references highlight what these symptoms might look like for lawyers or judges.

- Depressed mood most of the time.
- Loss of interest in pleasure. (Lawyers may lose interest in making the effort needed to market their practice.)
- Significant weight loss or weight gain.
- Significant increase or decrease in sleep.
- Psychomotor agitation or retardation. (For example, an attorney unable to sit still during an individual meeting with a client, or a judge unable to express normal facial expressions and gesticulations during a court proceeding.)
- Fatigue. (Judges or lawyers lacking the motivation to get out of bed to deal with a normal work day.)
- Feelings of worthlessness or excessive guilt. (Attempts to subdue these feelings often take the form of excessive drinking, drug use, or other types of addictions, especially in attorneys.)
- Diminished ability to think or concentrate. (Judges and lawyers alike may notice difficulty in their ability to concentrate on their current cases, clients, or research.)
- Recurrent thoughts of death or suicide.

The symptoms above must cause significant impairment in social, occupational, or other important areas of functioning. The presence of two or more major depressive episodes would constitute long-term depression (also classified as major depressive disorder, recurrent). It is also worth mentioning that the list above is only typical symptomatology of depression and not necessarily the cause(s) of depression.

What is the Difference Between Clinical Depression and Situational Depression?

Situational depression is more commonly known as sadness related to an unfortunate event or situation that may occur in everyday life. Situational depression is normally short term or temporary and has minimal interference with one’s normal life and daily functioning. However, situational depression can lead to a more severe case of clinical depression if it is not treated or dealt with in a healthy and timely manner.

Clinical depression is characterized by overwhelming feelings of loss, hopelessness, helplessness, and despair that last two weeks or more and interfere with one’s normal life and everyday functioning. Psychological treatment, such as counseling or psychotherapy, is strongly recommended for both clinical depression and situational depression. Psychiatric treatment in the form of psychotropic drugs may be needed in some cases. Psychotherapy, appropriate psychiatric medications, or a combination of both may help lawyers and judges to function properly in their jobs while dealing with depression.

Financial Strain

As previously mentioned, economic strain is taking its toll on lawyers and judges. Depression can become evident when those experiencing financial strain find they are spreading themselves too thin. For example, a private practicing attorney may be forced to take up an additional line of work because of a lack of clientele. Trying to market a practice in a faltering economy while supporting individual needs, and possibly the needs of a family, can cause attorneys to take on more responsibility than they can handle. This can then become a breeding ground for depression. One of the major causes of depression originates from the view that the gap is too great between where individuals are in life and where they think they should be.

Judges and Lawyers Hold Themselves to a Higher Standard

Similar to health care professionals, many judges and lawyers go into their respective fields in an attempt to help others and to make a difference in society. The term “counselor” is often given to lawyers and judges to describe part of their responsibility to counsel those who may need wisdom and guidance on how to proceed with important aspects of their lives. The responsibility of being a counselor to the public can feel overwhelming and sometimes hypocritical when one’s own life is in disrepair. Sometimes, the pressure to provide the right answers or to be the pinnacle of morality can cause emotional strife. This may turn into depression for lawyers and judges, specifically when the advice they are dispensing is too far in opposition to what they actually believe or what they are acting out in their own lives.
Strategy and Rationalism Take Precedence Over Emotional Acumen

“Problem solver” is a term that can readily be used to describe lawyers and judges. They tend to look at their clients through the eyes of a strategist, an analyst, or a rationalist. For the most part, judges and lawyers are taught to keep their emotions in check when dealing with the legal system, as emotions can discolor their perception of the person or the situation. Emotional difficulties can be exacerbated when the same analytical skills for solving problems in the legal system are used to solve personal or relational problems. In other words, most of the time, emotional problems cannot be solved by taking an analytical approach. Feelings of powerlessness or frustration can become evident when a judge or a lawyer who is accustomed to operating in the intellectual realm tries to operate in the emotional realm. A buildup of emotional or relational problems can be precipitating factors for depression if not dealt with properly.

If Depression Has a High Treatment Success Rate, Then Why Do Those Suffering Through It Forego Treatment?

When People are Depressed, the Motivation to Seek Help Can Evaporate

The paradoxical nature of depression is perhaps one of its most debilitating characteristics. A person who is truly depressed can experience an almost complete reversal in behavior and personality traits. When depression hits, instincts for self-preservation disappear, the panacea of sleep diminishes, and biological drives such as sex and hunger become irrelevant. Any enjoyment in life is replaced with the drive to intensify emotional pain and suffering. For example, the depressed lawyer or judge will intentionally avoid engaging in behaviors or activities that will improve his or her situation. Exercising, eating healthy, and seeking out counseling or psychotherapy are just a few things that will be avoided even though they are known to be helpful.

Express, avoidance, and withdrawal consume the depressed person.

The motivation to seek help is absent because those experiencing depression become enrapured by pessimism and negative thought patterns. This, in turn, engenders beliefs that they deserve to be miserable and that they are undeserving of a happy and fulfilling life. That is, they do not seek help because they do not believe they are worthy of being helped.

Stigma in Seeking Help is Still Present

Even though counseling and psychotherapy have become much more accepted and mainstream since their inception, the stigma associated with seeking mental health services still persists. Most people do not have a problem seeking medical services when they are physically ill. The same cannot be said for people experiencing mental illness or emotional crises. Perhaps it is because people see that medical problems are outside their locus of control whereas emotional problems are not. When it comes to emotional difficulties, many people feel they should be able to handle them on their own without outside assistance. On a similar note, some may even feel they have somehow failed in their personal lives if they have to ask for emotional assistance. Few people feel guilty or ashamed to ask for help when they are afflicted with medical conditions like diabetes or cancer.

Judges and lawyers have the additional stigma of working with other professionals in the field, which can create a fear of being exposed. Exposure to other lawyers, judges, clients, or colleagues may prevent them from seeking help. It is imperative to mention at this juncture that one of the reasons counseling and psychotherapy work so well is because of the high emphasis on client confidentiality which makes the risk of being exposed extremely low. The fact remains that those who can humble themselves to seek help for their emotional and psychological problems are more likely to make improvements in their lives.

Those who may be afflicted with depression can take comfort in the fact that it is highly treatable in many cases and there are many experienced and qualified counselors, psychotherapists, and psychiatrists who can provide answers and treatment. Those unsure if they are depressed could benefit from talking to a mental health professional before things deteriorate further. Preventative measures can be taken to thwart depression before it becomes unmanageable—which is perhaps the most preferred method of treatment.

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FOOTNOTES

2. Id
3. Id
4. Id