The Louisiana Lawyers Assistance Program, Inc. (LAP) has come a long way from its roots 30 years ago when a small group of Louisiana State Bar Association (LSBA) members first formed the LSBA Impaired Professional Committee to reach out to fellow attorneys suffering from alcoholism. Those initial efforts culminated in LAP’s non-profit incorporation in February 1992.

Today, LAP has developed into a professionally staffed, full-service corporation that offers comprehensive, life-saving clinical and mental health monitoring services to Louisiana’s legal profession.

Over the past two years, LAP has expanded its professional staff and services to meet the challenges of serving a population of more than 22,000 LSBA members and their families, as well as law students. LAP now has four full-time employees including an executive director, a clinical director, a clinical case manager and an administrative assistant.

Practicing law is not getting easier and mental health issues are on the rise in the profession. Problem drinking rates are estimated to be between 18 percent and 25 percent depending on years of practice. Lawyers also rank number one in depression when compared to other professions.
With alcoholism and depression rates soaring, attendant suicides are on the rise, too. Louisiana is not immune and, in recent years, our legal profession has suffered several suicides each year. This disturbing trend is occurring nationwide.

In January 2014, CNN published an article headlined “Why Are Lawyers Killing Themselves?” The article said that “prominent lawyers keep turning up dead. They came one a month in Oklahoma around 2004. South Carolina lost six lawyers within 18 months before July 2008. Kentucky has seen 15 known lawyer suicides since 2010.”

Against this backdrop, it is of primary importance to truly comprehend that no one is immune to developing mental health issues. Moreover, underlying mental health issues often cause or contribute to behavior that harms the public and damages the profession’s reputation. It is conservatively estimated by the Office of Disciplinary Counsel that at least 50 percent of disciplinary complaints are rooted in substance abuse or other mental health concerns.

LAP’s challenge is to promote early intervention and facilitate confidential help to impaired lawyers and judges before mental health issues ripen into disciplinary issues. This is not an easy task. Most of us are not good at asking for help. For one thing, there is the myth that it makes a person appear weak. In fact, however, asking for help empowers people because it allows them to face chronic problems head on instead of being stuck in a quagmire of secret misery.

More Than Ever, Lawyers and Judges Reach for LAP’s Confidential Help

Pursuant to La. R.S. 37:221 and Supreme Court Rule XIX(16)(j), any information received by LAP and the LSBA’s Committee on Alcohol and Drug Abuse is strictly confidential. LAP is making headway in assisting greater numbers of people who seek help early on before discipline is involved. LAP strives to produce and provide high-quality educational tools to reduce stigmas and increase the profession’s utilization of LAP’s free and confidential help.

In 2013, LAP fielded approximately 1,750 incoming telephone calls, processed 16,933 incoming emails and handled all correspondence received daily via regular mail. Telephone calls and emails to LAP are received from several sources, but mainly:

- People seeking confidential help for themselves, family members or peers;
- Bar applicants referred by the Louisiana Supreme Court’s Committee on Bar Admissions (COBA);
- Lawyers referred for evaluation by the Office of Disciplinary Counsel (ODC);
- Mental health professionals evaluating, assessing or treating people referred by LAP;
- Lawyers, conditionally admitted lawyers and bar applicants formally monitored by LAP;
- Drug screening program doctors, managers and specimen collection centers;
- Inquiries by COBA and ODC regarding the status of referrals to LAP; and
- Formal inquiries regarding individuals’ LAP monitoring compliance.

Total referral sources of new matters at LAP in 2013 were:

- Judiciary: 2 percent;
- Law firms: 5 percent;
- Family members: 11 percent;
- ODC referrals: 12 percent;
- Self-help: 30 percent; and
- Bar admissions: 40 percent.

LAP continues to achieve new levels of success and has in the past year assisted a greater ratio of impaired lawyers and judges in complete confidence than ever before. By so doing, the entire profession and the public all benefit.

Remember: In all instances without exception, only the person who contacts LAP can waive confidentiality.

LAP’s Wellness Group Initiative

LAP continues to focus great effort on raising awareness about the epidemic of depression in the legal profession and developing LAP-facilitated tools and solutions that will aid in the profession’s fight against mental illness and depression.

Free LAP Wellness Groups are now available in Shreveport, Baton Rouge and New Orleans. These professionally moderated groups are absolutely confidential and participation does not create any medical records. All stigmas and barriers to entry have been removed: there is no obligation incurred by participants other than the simple promise of adhering to strict confidentiality and group decorum. Participants do not even have to give their name.

It has long been established that participation in a quality support group can significantly increase a person’s chances of long-term recovery in most cases. Group participation renders a demonstrable increase in coping skills that develop more quickly in a group setting.

Also, group participation is particularly advantageous in depression cases because depression is a disease rooted in isolation. Group participation can be instrumental in helping the depressed individual break through that isolation, begin to share experiences and learn from other’s experiences, and become valuable participants in a fellowship that generates hope and trust.

Now, through LAP, members of the profession can obtain free clinical support in a matter of days and not have to wait weeks or months for an appointment.

LAP’s Suicide Prevention Initiative

As to suicide prevention, all employees at LAP are certified “suicide prevention gatekeepers” via training through the QPR Institute, an educational organization dedicated to preventing suicide.

The QPR program has developed a plan of action to save lives. Just like CPR (cardiopulmonary resuscitation) is an acronym for emergency actions that may save a heart attack victim, “QPR” is an acronym for “Question, Persuade and Refer,” a series of immediate action steps that may prevent a suicide.

LAP’s Clinical Director Leah Rosa, MHS, NCC, LPC, is certified to train and certify others in QPR. Louisiana’s legal professionals are encouraged to contact LAP and participate in QPR training. Becoming QPR-certified gatekeepers will increase the fabric of suicide prevention support within the professional ranks.

Alcoholism and Addiction Challenges

LAP’s heightened focus on fighting depression and preventing suicides should not be misconstrued as an indication that alcoholism and addiction issues have become
A Brief History of LAP, Inc.

By J.E. (Buddy) Stockwell III

In 1985, a small group of Louisiana State Bar Association (LSBA) members formed the Impaired Professional Committee. That committee eventually became the LSBA’s Committee on Alcohol and Drug Abuse (CADA), created by then-LSBA President Eldon E. Fallon. The committee’s mission was to provide assistance to Bar members who have become impaired by alcohol and drug abuse.

In 1986, the Louisiana Supreme Court, upon the recommendation of the LSBA’s House of Delegates, amended Article XV, Section 13, of the LSBA’s Articles of Incorporation to recognize the Committee on Alcohol and Drug Abuse and mandate confidentiality among its members and agents while assisting impaired Bar members.

Beginning in 1988, the Louisiana Supreme Court acknowledged that alcoholism is a treatable disease. In Louisiana State Bar Ass’n v. Longenecker, 538 So.2d 156 (La. 1989), the court stated:

This consideration (alcoholism and subsequent rehabilitation) is particularly appropriate as a factor in mitigation when the attorney has subsequently undertaken to rehabilitate himself and has been continually successful in recovering from the disease of alcoholism, especially if the clients did not sustain substantial harm.

The very next year, the Louisiana Supreme Court revisited the issue of alcoholism in Louisiana State Bar Ass’n v. Arthur F. Dumaine, 550 So.2d 1197 (La. 1989):

...the primary issues we must consider are whether the attorney’s lapses stemmed mainly from chemical dependency rather than lack of moral fitness and whether his recovery has progressed to the extent that he may be permitted to practice without undue risk of harm to his clients, the legal profession or the Courts.

With commitment, support and encouragement from the Louisiana Bar Foundation (IOLTA Program), the Louisiana Supreme Court and the LSBA as a whole, in February 1992, the Lawyers Assistance Program, Inc. (LAP) was formed as a 501(c)(3) non-profit corporation to operate under the auspices of the LSBA, with the LSBA president annually appointing the members of the Committee on Alcohol and Drug Abuse and the LSBA’s Articles of Incorporation to recognize the Committee’s mission was to provide assistance to Bar members who have become impaired by alcohol and drug abuse.

The latest and most alarming development in recent years is the astounding increase in addiction to opioid prescription pain medications. Opioids are a synthetic form of opiates (heroin) and include hydrocodone, oxycodone and other drugs in the opioid prescription pain medication family.

According to the Centers for Disease Control and Prevention (CDC) in its online publication, “Policy Impact: Prescription Painkiller Overdoses” (July 22, 2013), drug overdose death rates in the United States have more than tripled since 1990. Nearly three out of four prescription drug overdoses are caused by prescription painkillers. The unprecedented rise in prescription medication overdose deaths in the United States parallels a 300 percent increase since 1999 in the sale of prescription opioid painkillers. In 2008, prescription pain medication caused more overdose deaths than cocaine and heroin combined.

Predictably, LAP is seeing more prescription pain medication addiction cases. LAP continues to interact with leading experts and facilities in the industry that specialize in treating impaired professionals both to address the addiction and to provide alternative pain management techniques that do not involve mood-altering addictive substances that impair executive function.

LAP Facilitated Interventions

All imaginable permutations and combinations of concerned individuals and entities in the legal profession call upon LAP for support, beginning with intervention help. Law firms, family members, peers, judges, clients and people simply concerned about the well-being of a lawyer or judge call LAP for professional advice on how to reach someone in trouble.

LAP’s executive director and clinical director are certified interventionists through the Love First certification course sponsored by the Betty Ford Center. LAP also facilitates referrals to independent intervention service providers that meet LAP’s professional standards.

LAP has the professional tools to reach out in the most effective way to someone in trouble. Well-intended “kitchen table” attempts by family or peers to reach out to an alcoholic or addict often fail and can even cause the person to withdraw further. LAP encourages family and peers to reach out to LAP for professional advice on interventions. It does not cost a penny to confidentially access LAP’s professional intervention advice and expertise.

LAP’s Monitoring Services in Cases Referred by Other Entities

In cases where an impaired person has run afoul of the disciplinary system for impairment-related conduct, or is a bar applicant with substance abuse or mental health fitness-to-practice issues, or when impairment concerns have arisen among law partners due to the person’s behavior, it often becomes advantageous for that person to qualify for and participate in LAP monitoring.

A successful LAP monitoring record objectively establishes that the person is stable in long-term recovery, has turned a previously impaired and unmanageable life into one of competency, dependability and responsibility, and that his/her uninterrupted success in recovery has been verified. LAP monitoring is a reliable methodology by which those who were previously impaired by chemical dependency or mental illness can demonstrate their recovery to COBA,
the ODC, their employer and, ultimately, the public.

Many monitoring cases come to LAP as a result of a direct referral by the COBA, the ODC or managing partners in a law firm because a question has arisen about a person’s mental health and fitness to practice law.

In these formal monitoring cases, confidentiality has been voluntarily waived by the participant so that LAP can report compliance (or non-compliance) to the entity that referred the person. In these cases, it is important to recognize that LAP’s role as a monitor is that of an objective reporter and LAP is not an advocate for the person being monitored. The person being monitored by LAP is solely responsible for his/her own record of compliance, be it a success or a failure.

Other monitoring cases come to LAP when the individual is not referred by any entity but wants to be accountable under LAP monitoring so as to support healthy recovery compliance and develop habits that will increase the odds of successful long-term recovery. Also, there may be the possibility that the “wreckage of the past” caused by the person’s substance use-related behavior may generate future disciplinary inquiries, and successful LAP compliance can be of utility in the fullness of time if disciplinary trouble ever does surface.

LAP’s standards for approved evaluations, assessments, treatment and subsequent recovery monitoring are based upon industry standards established by lawyers’ assistance programs and other professionals’ programs, including the Physicians’ Health Programs (PHP), the Nurses Regulatory Programs (NRP) and the Human Intervention Monitoring System (HIMS) for airline pilots. All these programs facilitate appropriate treatment and recovery monitoring for licensed professionals who hold the public’s trust.3

LAP Speaking Engagements, CLEs and Publications

Quite often, a person confidentially reaching out to LAP has decided to do so after hearing a live presentation by LAP. Sometimes the call does not come immediately. The person may wait months, or even years, to call, but many times the conversation begins with, “I heard a LAP presentation and I think I might need some assistance from LAP.”

By conducting 40 to 50 presentations each year, LAP personally reaches out to lawyers and judges and some of them reach back for help. Whether through CLE courses, local bar association functions, Inns of Court meetings, law student orientations, law school professionalism classes or the LSBA’s Ethics School, LAP makes an all-out effort to reach out in person to the profession.

Also each year, LAP endeavors to choose a timely topic or theme. LAP presentations in 2014 focused on compassion fatigue as a centerpiece topic because that syndrome affects such a wide range of people practicing law. Many have reached out and received LAP-facilitated help to address this syndrome.

LAP publishes an article in every issue of the Louisiana Bar Journal, focusing on LAP’s services and mental health trends. The mission is to provide information while also attenuating stigmas surrounding alcoholism, addiction and depression in order to encourage members of the legal profession to reach out early to LAP for confidential help. The Journal also publishes staff-created advertisements for LAP to raise awareness about mental health and LAP’s confidential services.

The LSBA coordinates the annual Bar Admissions Education Initiative in all Louisiana law schools. LAP representatives participate on the panel to inform law students about challenges in the legal profession.
particularly with emphasis on maintaining long-term mental health under the pressures of practicing law. This outstanding LSBA program was recognized with the 2009 ABA Standing Committee on Professionalism’s E. Smythe Gambrell Professionalism Award. LAP is honored to be part of the LSBA’s ongoing efforts to help law students prepare for the challenges of being admitted to the bar and successfully practicing thereafter.

The LAP’s website, currently linked through the LSBA’s website, www.lsba.org/LAP/, continues to be a valuable source of information for lawyers and judges seeking help. LAP is currently constructing a new website with an eye toward keeping pace with new technology and increasing the capability to quickly incorporate updates and new information about addiction, depression, mental illness and treatment for conditions that impair lawyers and judges. Also, confidential tools and resources for LAP monitoring participants will be added to LAP’s online services.

LAP: It’s for Judges, Too!

Under the extraordinary leadership of Judge Benjamin Jones, with the 4th Judicial District Court in Monroe, much progress has been made to better promote LAP’s services to judges. Several judges have volunteered to help and have received intervention education through LAP.

LAP has always received calls from judges about impaired lawyers appearing before them. But now, judges also are beginning to reach out confidentially to LAP for advice, help and assistance regarding a fellow judge who may be exhibiting signs of impairment.

LAP’s services are very effective in providing help to members of the judiciary. The concept of “judges helping judges” through LAP is working. In 2015, look for new LAP products and promotions designed specifically to assist judges.

LAP and the SOLACE Program

Each year, LAP receives direct, confidential referrals from the SOLACE (Support of Lawyers/Legal Personnel — All Concern Encouraged) program, spearheaded by U.S. District Court Judge Jay C. Zainey, Eastern District of Louisiana. In the course of fielding requests for assistance, SOLACE occasionally receives a call involving a person in crisis with drugs, alcohol, depression or even suicidal ideations. SOLACE confidentially refers these cases to LAP. In some of these cases, SOLACE and LAP have literally saved lives by effectively reaching out to people who were seriously considering taking their own lives.

In the future, LAP hopes to produce updates for electronic distribution to SOLACE volunteers to help them spot signs of mental health distress and know when a referral to LAP may be in order.

Aging and Dementia in the Legal Profession: A Coming Tsunami

A new, major challenge on the horizon for Louisiana’s LAP (and all sister LAPs across the nation) will be addressing mental health issues emanating from aging and dementia in the legal profession. The “Baby Boomer” generation is now reaching retirement age and the issue of aging in the legal profession is coming our way in huge proportions.

Often referred to as the “Senior Tsunami,” an unprecedented number of lawyers and judges are at the threshold of retirement. Very difficult questions loom large. How will we determine when an aging member of our profession is no longer competent and poses a threat to the public and profession such that the lawyer should retire? How can we respectfully help the impaired lawyer let go and decide to retire in dignity before clients are harmed and the ODC is involved?

In April 2014, the National Organization of Bar Counsel (NOBC), the Association of Professional Responsibility Lawyers (APRL) and the ABA Commission on Lawyer Assistance Programs (ABACoLAP) published its Final Report on Aging Lawyers. The report indicates that the vast majority of jurisdictions will rely heavily on their state’s LAP to address age-related challenges.

Summary

Your Louisiana LAP is professionally staffed and offers comprehensive mental health and substance abuse assistance that spans the entire process — from intervention through assessment, treatment facilitation and professional recovery monitoring.

LAP remains dedicated to improving the percentage of cases where the person obtains confidential, effective LAP assistance before unethical conduct occurs and potentially harms the person, the profession and the public.

If you are in need of LAP’s help, or if you think a colleague is in need of LAP’s assistance, don’t wait! Make the decision to trust LAP and reach out immediately. No matter how isolated you feel or how reticent you are to share your situation, put those feelings aside and trust LAP. You do not even have to give your name. All you have to do is make the call to LAP at (866) 354-9334 or email LAP@louisianalap.com. For more information, go online to: www.lsb.org/LAP or www.louisianalap.com.

FOOTNOTES
1. Per Hazelden citing a 2012 Butler Center for Research report on a study published by the International Journal of Law and Psychiatry, it is estimated that during law school, problem drinking rates rise from 8 percent at admission to 24 percent as third-year law students. As lawyers, from two to 20 years, there is an 18 percent drinking problem rate that increases to 25 percent for attorneys who have practiced more than 20 years. This occurs in contrast to the general population suffering problem drinking at the much lower rate of 10 percent.
2. Per a Johns Hopkins study that compared 104 professions, lawyers suffer the highest rates of depression.
3. Article in British Medical Journal (BMJ), “Five-Year Outcomes in a Cohort Study of Physicians Treated for Substance Use Disorders in the United States,” available online at www.bmj.com/content/337/bmj.a2038, establishing the superior reliability and success rates for PHP-approved inpatient treatment followed by intensive outpatient treatment and a five-year recovery monitoring professionals’ program such as that offered by LAP.

J.E. (Buddy) Stockwell III is the executive director of Louisiana’s Lawyers Assistance Program, Inc. (LAP). He earned a BS degree in organizational management in 1989 from Louisiana State University and his JD degree in 1993 from LSU Paul M. Hebert Law Center. Prior to beginning his career at LAP, he was a solo practitioner in Baton Rouge, focusing primarily on domestic litigation. He is a long-standing member of the Louisiana State Bar Association’s Committee on Alcohol and Drug Abuse, has earned 121 hours in accredited substance abuse counseling education, is a Certified Suicide Prevention Gatekeeper and a “Love First” Certified Alcohol and Addiction Interventionist. (LAP@louisianalap.com; 1405 W. Causeway Approach, Mandeville, LA 70471)