

FROM: THE FACULTY LOUNGE

LAW PROFESSORS, LAW STUDENTS AND DEPRESSION . . .

A STORY OF COMING OUT

Brian S. Clarke[†]

PART 1

Back in January, CNN ran a piece¹ entitled “Why Are Lawyers Killing Themselves.” In general, the piece focused on a spate of lawyer suicides in Kentucky and other states over the last several years. Most of the suicides (15 since 2010) in Kentucky were seemingly successful lawyers. One was a relatively young (37) and popular adjunct professor at NKU’s Chase College of Law.

Outside of Kentucky, another prominent lawyer suicide was Mark Levy, the chair of Kilpatrick Stockton’s Supreme Court and Appellate Litigation Practice in D.C. Mr. Levy was a top Supreme Court advocate, having argued 16 times before the Court and, in January 2009, won a 9-0 victory for DuPont in an important ERISA case (Kennedy v. Plan Administrator,² 555 U.S. 285 (2009)). However, in April 2009, as the economy tanked, Kilpatrick Stockton informed Mr. Levy that his services were no longer needed. So, Mr.

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¹ www.cnn.com/2014/01/19/us/lawyer-suicides/.

² www.law.cornell.edu/supct/html/07-636.ZS.html.

Levy came to work on April 30, 2009, sat down at his desk, activated the “out of office” auto-reply feature on his email account and shot himself in the head. Chillingly, the “out of office” message Mr. Levy activated that morning was as follows: “*As of April 30, 2009, I can no longer be reached. If your message relates to a firm matter, please contact my secretary. If it concerns a personal matter, please contact my wife.*” (See Richard B. Schmitt, “A Death in the Office,” ABA Journal, Nov. 2009, at 30-31³).

Here in North Carolina, one of the founders of King & Spalding’s Charlotte office, who was profoundly successful; a prominent litigator in McGuireWood’s Raleigh, N.C. office; and numerous quietly successful small town lawyers have committed suicide in recent years.

The common thread running through most of these suicides? Clinical Depression (a/k/a “major depressive disorder”).

According to the American Psychiatric Association and numerous other sources, depression is the most likely trigger for suicide. Lawyers, as a group, are 3.6 times more likely to suffer from depression than the average person. Of 104 occupations, lawyers were the most likely to suffer depression. (Both of these statistics are from a Johns Hopkins University study to which I cannot find a link).

Further, according to a two-year study completed in 1997, suicide accounted for 10.8% of all deaths among lawyers in the United States and Canada and was the *third leading cause of death*. Of more importance was the suicide rate among lawyers, which was 69.3 suicide deaths per 100,000 individuals, as compared to 10 to 14 suicide deaths per 100,000 individuals in the general population. In short, the rate of death by suicide for lawyers was nearly *six times* the suicide rate in the general population.

A quality of life survey by the North Carolina Bar Association in the early 1990s, revealed that almost 26% of respondents exhibited symptoms of clinical depression, and almost 12% said they contemplated suicide at least once a month. Studies in other states have found similar results. In recent years, several states have been averaging one lawyer suicide a month.

³ www.abajournal.com/magazine/article/a_death_in_the_office/.

What is worse is the state of our students. According to a study by Prof. Andy Benjamin⁴ (U. Wash.), by the spring of their 1L year, 32% of law students are clinically depressed, despite being no more depressed than the general public (about 8%) when they entered law school. By graduation, this number had risen to 40%. While this percentage dropped to 17% two years after graduation, the rate of depression was still double that of the general public. (See <http://www.lawyerswithdepression.com/law-school-depression/>).

These statistics, which likely have not improved in recent years, are terrifying.

In the months since CNN ran its story, I have (unsuccessfully) tried to shake the feeling that we (as lawyers, law professors and the mentors of a generation of law students) missed out on a valuable opportunity to more fully address an issue that is critical to the legal profession. So, when the opportunity to post here came along, I decided to revisit this issue and to do so in a personal way.

I will admit to being a bit nervous about even raising this topic. (Given the nature of many anonymous internet commenters, I think most people would be hesitant to bare even a minute portion of their souls online and attempt to engage with a very serious subject, only to be subject to snarky or mean-spirited attacks.) Plus, mental illness and suicide are not comfortable subjects for most people. There remains a very real stigma attached to mental illness. Many people believe that suffering from clinical depression, anxiety disorder, bipolar disorder, or a host of other mental illnesses is a character flaw or a weakness. Having one of these diseases has been seen as something of which the sufferer should be ashamed. This attitude has been in place for too long for people to easily change their perceptions and opinions.

However, as lawyers and law professors, we must do more. It is clear that our students need us to do more. When you are depressed, you feel so terribly alone. You feel different. You feel ashamed. You feel weak. You feel like you will never feel better and that you can never be the person you want to be.

⁴ www.law.fsu.edu/academic_programs/humanizing_lawschool/images/benjamin.pdf.

If 40% of our students feel this way, we must do more. They look up to us. They see us as role models and mentors. They see us as strong and successful and confident. They need to see that suffering from depression or anxiety or bipolar disorder will not curse them for all time and destroy their lives. These are treatable diseases, not character flaws. They need us to be brave and be honest.

A few law professors have publically “come out” (so to speak) about their struggles with mental illnesses: Prof. Elyn Saks at Southern Cal⁵ (schizophrenia, via *The Center Cannot Hold: My Journey Through Madness*⁶ (2007)); Prof. Lisa McElroy at Drexel⁷ (anxiety disorder, via an article on Slate⁸); and Prof. James Jones at Louisville⁹ (bipolar disorder, via an article in Journal of Legal Ed.¹⁰). They were all tenured when they did so.

And then there is me: an untenured, assistant professor with five kids, who left a generally successful practice career to teach at Charlotte School of Law. So, anonymous internet commentators be damned . . .

My name is Brian Clarke. I am a father, a husband, a lawyer and a law professor. And I suffer from major depressive disorder and generalized anxiety disorder.

So there you have it. While I have been “out” at Charlotte Law and have spoken publicly about my disease, this is the most wide-open forum in which I have come out.

In my next post, I will share my story (a piece of public soul baring that you should not miss!). In the third (and mercifully final) post in this little serial adventure, I will discuss the role my struggles with depression and anxiety have played (and continue to play) in the classroom.

[FYI, as this is a serious topic, I will moderate any comments to this post and delete anything I deem inappropriate or off topic.]

⁵ lawweb.usc.edu/contact/contactInfo.cfm?detailID=300.

⁶ www.amazon.com/The-Center-Cannot-Hold-Journey/dp/1401309445.

⁷ drexel.edu/law/faculty/fulltime_fac/lisa%20mcelroy/.

⁸ www.slate.com/articles/health_and_science/medical_examiner/2013/07/living_with_anxiety_and_panic_attacks_academia_needs_to_accommodate_mental.html.

⁹ www.law.louisville.edu/faculty/james_jones.

¹⁰ papers.ssrn.com/sol3/papers.cfm?abstract_id=1087129.

PART 2

In Part I of this little series,¹¹ I laid out some of the statistics regarding the scope of the problem of depression and anxiety among lawyers and law students. Before I tell my story, I want to spend a little time talking about why these diseases are so prevalent among lawyers.

One of the more eloquent “whys” for the high incidence of depression among lawyers was contained in an opinion piece by Patrick Krill¹² (a lawyer, clinician and board-certified counselor) that accompanied the CNN article on lawyer suicides. As Patrick put it, “lawyers are both the guardians of your most precious liberties and the butts of your harshest jokes[; i]nhabiting the unique role of both hero and villain in our cultural imagination” Patrick explained that the high incidence of depression (and substance abuse, which is another huge problem) was due to a number of factors but that “the rampant, multidimensional stress of the profession is certainly a factor.” Further, “there are also some personality traits common among lawyers – self-reliance, ambition, perfectionism and competitiveness – that aren’t always consistent with healthy coping skills and the type of emotional elasticity necessary to endure the unrelenting pressures and unexpected disappointments that a career in the law can bring.”

Patrick’s discussion of this issue really stuck a cord with me. Practicing law is hard. The law part is not that hard (that was the fun part for me), but the business side of law is a bear. Finding clients, billing time, and collecting money, are just a few aspects of the business of law of which I was not a big fan. Keeping tasks and deadlines in dozens (or hundreds) of cases straight and getting everything done well and on time is a constant challenge. The fear of letting one of those balls drop can be terrifying, especially for the type A perfectionist who is always terrified of making a mistake or doing a less than perfect job. Forget work-life balance. Forget vacations. Every day out of the office is another day you are behind.

¹¹ www.thefacultylounge.org/2014/03/law-professors-law-students-and-depression-a-story-of-coming-out-part-1.html.

¹² www.cnn.com/2014/01/20/opinion/krill-lawyers-suicide/.

Plus, as a lawyer (and especially as a litigator), no matter how good a job you do, sometimes you lose. That inevitable loss is made worse by the emotion that the lawyer often takes on from his or her client. Almost no client is excited to call her lawyer. Clients only call, of course, when they have problems. Those problems can range from the mild (for example, a traffic ticket) to the profound (like a capital murder charge). But whatever the problem, the client is counting on the lawyer to fix it. Every lawyer I know takes that expectation and responsibility very seriously. As much as you try not to get emotionally invested in your client's case or problem, you often do. When that happens, losing hurts. Letting your client down hurts. This pain leads to reliving the case and thinking about all of the things you could have done better. This then leads to increased vigilance in the next case. While this is not necessarily a bad thing, for some lawyers this leads to a constant fear of making mistakes, then a constant spike of stress hormones that, eventually, wear the lawyer down. The impact of this constant bombardment of stress hormones can be to trigger a change in brain chemistry that, over time, leads to major depression.

Depression is a subtle and insidious disease. By the time you are sick enough to recognize that you have a problem, your ability to engage in accurate self-evaluation is significantly impaired. It is a strange thing to know, deep down, that something is wrong with you but to not be able to recognize the massive changes in yourself. Helping yourself at that point is often impossible. Unfortunately, those suffering from depression become expert actors who are extremely adept at hiding their problems and building a façade of normalcy. Eventually, it takes all of your energy to maintain this façade. The façade becomes the only thing there is.

Depression is not a character flaw. It is not a weakness. It is not a moral failing. You cannot "just get over it." No amount of willpower, determination or intestinal fortitude will cure it. Depression is a disease caused (in very basic and general terms) by an imbalance and/or insufficiency of two neurotransmitters in the brain: serotonin and norepinephrine. In this way, it is biologically similar to diabetes, which is caused by the insufficiency of insulin in the body. As a dis-

ease, depression can be treated – and treated very effectively. But it takes time and it takes help – personal help and professional help.

And now we get to the personal part. Don't say I didn't warn you.

Though I likely had been depressed for a long while, I was diagnosed with severe clinical depression in late 2005. As another lawyer who helped me put it, suffering from depression is like being in the bottom of a dark hole with – as you perceive it from the bottom – no way out. The joy is sucked from everything. Quite often, you just want to end the suffering – not so much your own, but the perceived suffering of those around you. You have frequent thoughts that everyone would be better off if you were not around anymore, because, being in such misery yourself, you clearly bring only misery to those around you. When you are in the hole, suicide seems like the kindest thing you can do for your family and friends, as ending your life would end their pain and misery.

While I do not remember all of the details of my descent into the hole, it was certainly rooted in trying to do it all – perfectly. After my second child was born, I was trying to be all things to all people at all times. Superstar lawyer. Superstar citizen. Superstar husband. Superstar father. Of course, this was impossible. The feeling that began to dominate my life was *guilt*. A constant, crushing guilt. Guilt that I was not in the office enough because I was spending too much time with my family. Guilt that I was letting my family down because I was spending too much time at work. Guilt that I was letting my bosses down because I was not being the perfect lawyer to which they had become accustomed. Guilt. Guilt. Guilt. The deeper I sunk into the hole, the more energy I put into maintaining my façade of super-ness and the less energy was left for either my family or my clients. And the guiltier I felt. It was a brutal downward spiral. Eventually, it took every ounce of energy I had to maintain the façade and go through the motions of the day. The façade was all there was. Suicide seemed rational.

There were danger signs, of course, but neither I nor anyone around me recognized them for what they were. I burst into tears during a meeting with my bosses. I started taking the long way to

work in the morning and home in the evenings – often taking an hour or more to make the 5 mile trip. Eventually – after months of this – my wife asked me what was wrong and I responded, “I just don’t know if I can do this anymore.” She asked what “this” was. I said, “you know . . . life.” And started bawling. The façade crumbled and I was utterly adrift. [I don’t actually remember this conversation with my wife, but she does.]

After getting over the initial shock of my emotional collapse, my wife forced me to go to the doctor and get help. She took the initiative to find a doctor, make me an appointment and take me (which is good, because I was utterly incapable of doing any of those things). She called my firm and told them I needed FMLA leave. One of my colleagues put me in touch with the N.C. State Bar’s Lawyer Assistance Program, as well as with Louis Allen (the Federal Public Defender for the M.D.N.C.) who had suffered from severe depression and recovered. With Louis’s help, treatment from my doctor and the support and love of my family, I got better and better. I started taking medication and clawed my way to the top of the hole. But, for more than a year, I was sort of clinging to the edge of the hole about to plummet back down. So, I changed doctors and medications and did a lot of talk therapy. Eventually, more than 18 months later, I was finally back to some semblance of my “old self.” I was happy again (mostly). I was a good father again (mostly). I was a good husband again (mostly). I enjoyed being a lawyer again (mostly). I enjoyed life again.

There have been a couple of relapses, where the hole tried to reclaim me. However, I never fell all the way back down. I will happily take medication for the rest of my life. And I will regularly see a therapist for the rest of my life. I will be forever vigilant regarding my mental state. Small prices to pay.

Had I not gotten help, I would not be writing this post because I would likely not be alive today. No amount of will power or determination could have helped me climb out of that hole. Only by treating my disease with medication and therapy was I able to recover, control my illness and get my life back.

Now, I don’t write any of this to solicit sympathy or pity. I am

doing fine. I have five wonderful (if occasionally maddening) children and an amazing wife. I have a job that I love and am truly good at. I have the job that I was put on this earth to perform, which makes me incredibly lucky. I have wonderful students who will be outstanding lawyers. I have no complaints.

I write this because I know that when you are depressed you feel incredibly, profoundly alone. You feel that you are the only person on earth who has felt the way you do. You feel like no one out there in the world understands what you are dealing with. You feel like you will never feel “normal” again.

But you are **not** alone. You are not the only person to feel this way. There are lots of people who understand. I understand. I have been there. I got better. So can you.

So, please, if you are suffering from depression or anxiety (or both) get help. Tell your spouse. Tell your partner. Tell a colleague. **Ask for help.** Asking for help does not make you weak. It takes profound strength to ask for help. You can get better. You can get your life back.

Trust me when I say that life is so much better once you get out of – and away from – that dark hole. It is well worth the effort.

[While I’d hoped that I did not need this disclaimer regarding comments, apparently I do: *As this is a serious topic, I will moderate any comments to this post and delete anything I deem inappropriate or off topic.*]

PART 3

At long last, we have arrived at the third and final post of my “Coming Out Trilogy.”

As promised, I want to focus this post on the role my struggles with depression and anxiety have played and continue to play in my interactions with my students, both in and out of the classroom.

My **prior**¹³ **posts**¹⁴ have covered the bleak statistics regarding depression and suicide rates among lawyers (nearly four times more

¹³ www.thefacultylounge.org/2014/03/law-professors-law-students-and-depression-a-story-of-coming-out-part-1.html.

¹⁴ www.thefacultylounge.org/2014/04/in-part-i-of-this-little-series-i-laid-out-some-of-the-statistics-regarding-the-scope-of-the-problem-of-depression-and-anxie.html.

likely to be depressed and six times more likely to commit suicide than the general public). Further, I also mentioned that many of our students are suffering from depression (32% by second semester first year and 40% by graduation). Although I have not found any specific data to support it, my guess is that an equal or (more likely) higher percentage of our students are also suffering from significant levels of anxiety.

In short, a third or more of our students are struggling with mental illnesses that are exacerbated (or triggered or caused or whatever word you most prefer) by the significant stresses of law school (and the various issues surrounding it, including – to be frank – the cost, debt loads, and job prospects).* According to the research,¹⁵ if a person suffers a single incident of clinical depression, he has a 50% chance of experiencing another even if he takes anti-depressant medication. After 3 incidents, there is a 90% chance of recurrence.** [I, for example, had my first (undiagnosed) bout of clinical depression in college and my first bout of anxiety (diagnosed) my first year of law school.] So, there is a very good chance that the depressed law students of today will be the depressed lawyers of tomorrow.

Our students need help to better understand the challenges of the profession they are entering: the potential for dissatisfaction, disillusionment, mental illness (including depression, anxiety and substance abuse), burnout, and more. When I left practice and started teaching, I promised myself that I would be open and honest with my students about my struggles and about the realities of law practice.

Now, don't get me wrong. I love the Law and there were many, many aspects of practicing law that I loved (and at which I excelled). There were also aspects that I did not love (and tried my best to tolerate, sometimes less than successfully). I know, without reservation or qualification, that being a lawyer can be a highly rewarding career: emotionally, intellectually, and financially. If I was not honest with my students about the challenges of being a lawyer, however, I would be doing them a disservice.

¹⁵ www.psychologytoday.com/blog/evil-deeds/200809/is-depression-disease.

Further, in my view, knowledge is power. With knowledge of the challenges and some of their causes, I figure my students will be better equipped to meet and overcome them.

In raising these issues with my students my basic goals are as follows: (1) to help destroy – via openness, honesty, and shamelessness – the very real stigma associated with mental illness in general and depression and anxiety in particular; (2) to make sure my students know that if they are struggling with depression or anxiety, they are not alone (even if they feel that way) and that there is no reason in the world for these illnesses to hold them back in any way; (3) to offer myself as a resource for any among them that are struggling; (4) to educate them about the challenges of practicing law; (5) to get them thinking about why they are in law school and what they want their lives in the law to be like (or if they even want a life in the law); and (6) to get them thinking, critically and proactively, about the different career paths, options, settings, locales and such available to those with law degrees, all of which can have a significant impact on their personal well-being.

So, what do I do? I talk openly and honestly about my struggles and experiences and I do so *in class* (in first year Civil Procedure). (Thanks to this series of posts, I now know I am not the only law professor in America who does this. Nancy Rapoport¹⁶ at UNLV does the same in her Contracts classes and there are, hopefully, others out there that do something similar.)

Of course, I do not do this on the first day of class. I am not *that* crazy.

On the first day of Civil Procedure, I spend about 20 minutes talking about the depth of my litigation experience, the fact that I have litigated or used in practice virtually every rule and theory we will study, the places I practiced and some of the companies I represented. In short, I establish my credibility. During the semester, I build my credibility with my students by being a highly competent and effective teacher with a deep knowledge of the subject matter and a willingness to do whatever I can to help them learn the mate-

¹⁶ www.law.unlv.edu/faculty/nancy-rapoport.html.

rial. By the time we are two-thirds of the way through the semester, my students (generally speaking) respect me and, from what I understand, are a bit intimidated by me (which is at least partly due to the fact that I somewhat physically imposing at 6'1" and 250+ pounds).

Usually about two weeks before the end of the semester – when I see the strain of writing papers and the approach of final exams beginning to take a toll – I will put the civil procedure issue of the day on hold and tell my story. I don't prepare them for this in any way, I just start class by saying, "There is something that I need to talk to y'all about today." (Although if they start googling me after this I guess that cat will be out of the bag).

The story I tell is generally that which appears in [Part 2](#)¹⁷ of this "Coming Out Trilogy," although it is often a bit more haphazard as it is still much easier to write about this subject than talk about it. I often get choked up at least once, usually when talking about suicide (though I have managed to avoid this once or twice). I have even cried in telling my story. There are usually at least a few people with freely flowing tears by the end and many stunned looks. [*Writing this, I realize that, to some degree, I set my students up and then, intentionally, shatter their perceptions of me. While I did not set out to do this and think that establishing my bona fides at the outset of the course is pedagogically important, I do believe that it makes the discussion of my mental illness and the challenges of practicing law more impactful in an "if that can happen to Prof. Clarke, it can happen to me" sort of way.*]

I then segue into some of the statistics cited in [Part 1](#)¹⁸ of this series and talk about the scope of the problem with depression and anxiety in the legal profession. I explain that I know many of them are having a hard time handling the stress of law school given the workload, the competitiveness, their "Type A" personalities and perfectionist tendencies, and the like. I bluntly tell them that if they think being a 1L is hard, they ain't seen nothing yet.

¹⁷ www.thefacultylounge.org/2014/04/in-part-i-of-this-little-series-i-laid-out-some-of-the-statistics-regarding-the-scope-of-the-problem-of-depression-and-anxie.html.

¹⁸ www.thefacultylounge.org/2014/03/law-professors-law-students-and-depression-a-story-of-coming-out-part-1.html.

I tell them about the challenges of practicing law including, among other things, taking on the emotional baggage of clients' problems; the inherent competitiveness of the adversarial system; the joys of dealing with unreasonable and unprofessional opposing counsel; the fact that someone must lose in litigation; the impact losing may have on a client's life; the nature of the billable hour; the difficulty of billing 1,900+ hours a year; the unrealistic expectations many of them may have about being lawyers; the common narrative that "success" as a lawyer is dependent on having a "Big Law" job and making partner/member/shareholder and the profound unlikelihood of these happening; the lack of boundaries and the need to be "on the job" 24/7/365 (especially in a big firm); and so on.

I discuss a truth I have known for many years (and for which I now have empirical¹⁹ support²⁰), namely that making a lot of money is ultimately not the thing that, for most people or most lawyers, makes them happy in life or satisfied professionally. I caution them about the materialism that is common among lawyers and the dangers of measuring happiness by the make of your car or the size of your house (a point illustrated in an ABA Journal Online article²¹ on April 5, 2014, wherein a young lawyer bemoans the fact that he drives a Chevrolet instead of a Mercedes or Audi and that he cannot buy a bigger house). I challenge them to think about why they came to law school and to identify what it is about the law that really turns them on (professionally). I encourage them to find a way to follow that passion, because they will be better lawyers and more satisfied, professionally and personally, if they do so. [See K. Sheldon & L. Krieger, *Service Job Lawyers Are Happier Than Money Job Lawyers, Despite Their Lower Income*, *Journal of Positive Psychology*, vol. 9, pp. 219-226²² (2014).] I tell them that, for many lawyers (includ-

¹⁹ www.tandfonline.com/doi/abs/10.1080/17439760.2014.888583?journalCode=rpos20#.U97n-lZhpz0.

²⁰ www.businessinsider.com/higher-pay-doesnt-make-lawyers-happy-2014-4.

²¹ www.abajournal.com/news/article/us_has_1_trillion_in_student_debt_indebted_lawyer_has_chevy_lifestyle/?utm_source=maestro&utm_medium=email&utm_campaign=weekly_email.

²² www.tandfonline.com/doi/abs/10.1080/17439760.2014.888583?journalCode=rpos20#.U9ZhYVZhpz0.

ing me), finding a balance between work and life is difficult thanks to, among other things, technology and that they must be cognizant of the dangers of always being plugged in. I talk to them about the importance of boundaries (a concept with which I still struggle).

While many of these issues are old hat to us as professors and lawyers, they come as a revelation to many students. Many still come to law school simply because they did not know what to do with their B.A. in history and have never contemplated what about the law (if anything) really interests them. [I encourage these folks to seriously reconsider whether they should be in law school]. Many have never thought that there were career paths other than one in a big law firm and many are convinced (by their peers, by popular culture, by the internet) that success as a lawyer means being a rich partner in a big firm, and nothing else. Many are shocked that they have only somewhat worse odds of winning the lottery than making equity partner/member/shareholder in a big law firm.

I answer questions and let the conversation go where the students lead it for about an hour. Then we wipe our eyes, blow our noses and get back to civ pro.

I have done this little song-and-dance at least ten times now and every time I do it, it has a *significant* impact. I have had many students (looking sort of shell shocked) tell me that they had no idea that anyone else had felt or thought the things they had felt and thought, but which I articulated during class. I have had students come see me a semester later or even years later and tell me that by talking about my issues, it gave them the strength to get help for their own depression or anxiety issues. I have had several students seek me out in times of crisis and ask me for help, which I have willingly provided (via moral support and referrals to various professional mental health resources). Many students have sought me out to talk about career paths and even whether they should stay in law school. The bottom line, however, is that every single student I have ever talked to about these issues has appreciated – above all else – my openness and honesty, not only about my illness, but about the challenges of being a lawyer. And not a single one thought less of me or lost any respect for me as a result. On the contrary,

my openness and honesty increased their respect for me as a person and as a teacher.

Beyond this in-class discussion and the one-on-one discussions that flow from it, I also participate in a number of student events each year dealing with mental health, career paths, work-life balance and the like. I am active with the Lawyer Effectiveness and Quality of Life Committee of the N.C. Bar Association. And I have both planned and spoken at continuing legal education conferences about these issues.

Now, not all law professors are as messed up or as gluttons for punishment as I am. However, each of us – regardless of background – can start a dialogue with students, either in or out of class, about the importance of mental health, the dark side of being a lawyer, and the need for students to make conscious, intentional and meaningful choices regarding their futures. These discussions are critical to the long term well-being of our students. As I said in my opening post, our students need us to be brave and be honest.

Thanks for reading this series of posts. Based on the emails I have received and the comments that you have posted, at least one of my goals for this series as already been accomplished: to generate open and honest discussion of these issues. I hope these conversations will continue. If sharing these posts will help facilitate discussions with your students or colleagues or friends, please use them.

Now I will go back to contemplating factual causation standards, the impact of judicial nominations on the ideology of the federal Courts of Appeals, and the origin and troublesome role of the assumption of truth rule in modern civil procedure.

[And I have a long weekend ahead of me building a new mobile chicken coop and preparing for the arrival of about 20,000 honeybees (two hives worth) on April 10. And I have about eight soccer games to attend this weekend. Work-life balance of a sort. At last.]

NOTES:

* As fleshed out in the comments to Part 2 of this series, I do not contend that either depression or anxiety are *purely* biological as a general proposition (although there are no doubt some cases that

are). Generally, both have biological²³ and environmental²⁴ aspects. It is the interaction of the biological [genetic predisposition, brain chemistry, etc.] and the environmental [high stress environment, insufficient coping skills, perfectionism, etc.] that gives rise to the disease (and yes, I am sticking with that term – if it is good enough for the CDC, it is good enough for me). Plenty of diseases (or illnesses, whatever) – smoking induced lung cancer, type II diabetes, stroke, and coronary artery disease to name just a few – also have both biological and environmental aspects. And, of course, I am a lawyer not a doctor or neurologist or psychologist.

** Antidepressant medication is certainly not a panacea. Effective treatment is inherently multifaceted and may include medication, therapy, lifestyle changes, job changes, meditation exercise, and the like. However, antidepressant medication (as well as benzodiazepines for those with anxiety) is often critical to recovery.

[Once again, as this is a serious topic, I will moderate any comments to this post and delete anything I deem inappropriate or off topic.] //

²³ www.psychologytoday.com/blog/evil-deeds/200809/is-depression-disease.

²⁴ www.psychologytoday.com/blog/evil-deeds/200809/is-depression-disease-part-2-the-great-debate.