"I wish I would have called you before...."

Depression and suicide:
Make sure you don't utter those words

By Don P. Jones
& Michael J. Crowley

Ray was a successful prosecutor in the district attorney's office in a large Texas city. He had done well in law school, was one of the star prosecutors in his office, had a family and, by all outward accounts, could look forward to a long and good life.

However, Ray's inward life told a different story. To Ray, no matter how well he performed, it never seemed to be good enough. All of his life he had wrestled with depression, and this problem had led to alcohol and prescription drug abuse. Although he hid it well, his family life was coming apart at the seams. But Ray was raised to believe that personal problems should stay personal. He didn't believe in talking about his problems. He felt he could handle them himself.

Regrettably, I never met Ray. I only learned of his struggles from a colleague and friend of his who called me the day after Ray had shot and killed himself. Ray had very briefly confided to his friend over drinks the week before that he was unhappy with his life. As he recalled the meeting, the colleague felt tremendous guilt and remorse for not having seen Ray's suicide coming.

Unfortunately, at the Texas Lawyers' Assistance Program we get about five or six of these dreaded calls each year—calls that always seem to begin with, "I wish I would have called you before...."

What do we know?

From reports of other Lawyers' Assistance Programs across the country, we have discovered that suicide among lawyers is all too common. Male lawyers in the United States are two times more likely to commit suicide than men in the general population, according to a 1992 study by the National Institute for Occupational Safety and
Health. While we are aware of no other studies about the incidence of suicide among lawyers, here’s what we do know:

- According to the National Institute for Mental Health (NIMH), suicide was the ninth leading cause of death in the United States in 1993 (at more than 30,000 suicides per year), falling behind HIV, but ahead of homicide.
- On the average day, 84 people commit suicide and another 1,900 people attempt it (NIMH).
- 15 percent of people with clinical depression commit suicide (NIMH).
- Research conducted at Campbell University in North Carolina indicated that 11 percent of the lawyers in that state thought of taking their own life at least once a month.²
- According to a 1991 Johns Hopkins University study of depression in 105 professions, lawyers ranked No. 1 in the incidence of depression.
- Women attempt suicide at least two times more than men, but men are “successful” four times more than women.
- Substance abusers are 10 times more likely to commit suicide than the general population.

Suicide among lawyers is not a topic most of us care to read or talk about. But we all know it should not be ignored.

**But I thought . . . .**

- Most of us have certain ideas about suicide and its victims. Some of these ideas are accurate, and some are not. The following are some of the more common misconceptions about suicide:
  - **False:** People who talk about suicide are just seeking attention and won’t really try to kill themselves.
  - **True:** Studies show that 75 percent of those who commit suicide talk about it or display other warning signs before attempting it.
  - **False:** Suicidal people are intent upon dying.
  - **True:** The majority of suicidal people are not intent upon dying. Often, they simply see no other viable option. The warning signs they give are desperate calls for help before they take this final option.
  - **False:** Talking about suicide and a person’s suicidal feelings will only encourage that person to commit suicide.
  - **True:** Talking about suicide may be the only thing that can save the person’s life. It can give them a sense of connection and hope. It shows the person that someone cares and finds them important enough to listen to and help.

**How can I tell if someone is suicidal?**

Obviously, any list of warning signs for any problem is probably going to be both incomplete and over inclusive. Someone might display none or very few of these signs and still be at risk for committing suicide. Someone else might exhibit warning signs that are not on this list. Still others might display some of these signs and have no suicidal intent whatsoever. Nevertheless, here is a list of risk factors and warning signs you should know about:

**High Risk Conditions**

- Recent loss (death of a friend or family member; divorce or separation from spouse; broken relationship; loss of job, retirement; loss of money, home, status, security; health problems).
- History of suicide in the family.
- Substance abuse.
- Depression, or bi-polar disorder, which is a form of depression that produces pronounced mood swings of varying durations that range from a high “manic” state to low a “depressive” state.
- Prior suicide attempt(s).

**Suicide Warning Signs**

- Expressions of hopelessness, powerlessness, worthlessness, shame, guilt, self-hatred, inadequacy.
- Declining performance and interest in work.
- Change in sleeping and eating habits (either direction).
- Loss of interest and participation in social activities, hobbies, relationships.
- Isolation.
- Explicit statements of thoughts or feelings about suicide.

- Self-destructive, reckless behavior (reckless driving, self-inflicted injuries).
- Inappropriately saying goodbyes (especially to people not seen in a while).
- Suddenly “putting all affairs in order” (making a will, giving away cherished possessions).
- Hints about suicide. (“You won’t have to worry about me anymore,” or “It just doesn’t seem worth it anymore.”)

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- Acquiring the means to commit suicide (buying a gun, stockpiling prescription drugs).
- Working out a plan (where, when, how).

**Why do lawyers have a higher incidence of suicide?**

Just like the questions about why lawyers have a higher incidence of depression and substance abuse than the general population, this question is not easy to answer. About the best we can do is speculate. Based on our experience in working with lawyers in trouble, here’s what we do know:

- One in four lawyers suffer from elevated feelings of psychological distress, including feelings of inadequacy, inferiority, anxiety, social alienation, isolation and depression.
- Out of 105 professions studied by Johns Hopkins University, lawyers top the list in the incidence of major depression, and depression is involved in more than half of all attempted suicides.
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What can I do to help someone who may be suicidal?

The first thing to realize is that every threat of suicide is a call for help. So, anytime anyone discloses suicidal ideations or feelings, take it seriously. It is much better to be somewhat embarrassed because you were wrong than to be remorseful that you failed to help. Once you’ve taken it seriously and extended your hand, here are some helpful suggestions:

- Listen, listen, listen. So often, suicidal people feel isolated, disconnected and unimportant. It is crucial to be as nonjudgmental and empathetic as you can.
- If you don’t already know, go ahead and ask them if they are feeling suicidal. Asking that question will not make it worse; it will give them permission to talk to you about it.
- If they are feeling suicidal, ask them if they have a plan. Find out if they have the means to attempt suicide and whether they have thought about when they will make the attempt.
- If they don’t have a plan, there may not be an immediate crisis, but the person nevertheless has a serious problem that requires professional assistance. Encourage them to seek professional help, and even offer to help them make that first call.
- If they do have a plan but are not threatening immediate action, get them to commit to you not to take any suicidal action until they see you again. Again, encourage them to seek professional help and even offer to help them make that first call.
- If they have a plan and are threatening immediate action, do not leave them alone. Take whatever action is necessary to get them into professional hands. If you have to, take them to the emergency room of the closest hospital.

If confronted with a suicidal person, do not do the following:
- Don’t argue with them about the “right or wrong” of suicide.
- Avoid platitudes like “you have so much to live for . . .” or “it will all be better in the morning . . .”
- Avoid discounting their problems with statements like “. . . oh, that doesn’t seem so bad. . . .”
- Don’t be sworn to secrecy—at least when it comes to calling in professional help.

More importantly, however, find out if your state has a Lawyers’ Assistance Program and write down the number. These programs can help you or any colleague you know who may be suicidal. If you don’t know whether your state has a program, call the American Bar Association’s Commission on Lawyer Assistance Programs. (See “ABA CoLAP is a key resource for bars,” page 25.)

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