Mental Wellbeing in the Legal Profession:

The Unique Challenges of Women Lawyers and a Path Forward

ABA AMERICANBARASSOCIATION
Commission on Women in the Profession

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The Unique Challenges of Women Lawyers and a Path Forward

Prepared and written for the
ABA Commission on Women in the Profession by
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AMERICAN BAR ASSOCIATION
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Letter from the Commission on Women in the Profession Chair

Thank you for taking the time to read our groundbreaking report *Mental Well-being in the Legal Profession: The Unique Challenges of Women Lawyers and a Path Forward*. The fact that you are reading this report signals something very important: you care about the wellbeing of those who make up our profession, and you recognize that change is both necessary and possible.

At the time I was appointed to Chair the Commission on Women in the Profession, I was deeply troubled by what I was hearing and observing about the mental well-being of women in the legal profession. This led me to ask a critical question – what can we quantify about the wellbeing experiences of women in the profession that differs from men based on such factors as race, ethnicity, disability, and gender identity—and what must decision makers understand in order to create meaningful change? This report is the result of that inquiry, and it reflects the voices and lived experiences of women (and men) across our profession.

After hearing from almost 3,000 lawyers, the study's findings unfortunately point us toward a clear and uncomfortable truth: the challenges described within this report are not primarily rooted in individual resilience, but in the systems, expectations, and cultural norms that define our profession. Women in particular describe stress that is cumulative, often invisible until it becomes overwhelming. They speak of policies that exist on paper but fall short without corresponding cultural change. They connect these pressures to real consequences—decisions to step back or even leave the profession altogether. They also underscore, with striking consistency, the needed role of leadership in shaping whether mental wellbeing is genuinely supported.

That is why your role matters. Readers of this report are not passive observers. You are leaders, influencers, and decision makers—whether formally or informally—who have the ability to help shift the trajectory of the profession. Change does not require a single sweeping solution; it begins with deliberate choices about what we prioritize, what we measure, what we reward, and what we model every day.

As you reflect on the findings, I encourage you to consider:

- How are expectations around workload and availability shaping well-being in your sphere of influence?
- Where might there be a gap between stated policies and what is happening in your workplace?
- What signals—intentional or not—are leaders sending about what is truly valued?
- What meaningful changes could begin to move the culture forward?

The path forward is both challenging and deeply important. Supporting mental wellbeing is not separate from sustaining excellence in the legal profession—it is fundamental to its very existence. When lawyers thrive on a personal level, the profession as a whole is stronger, more resilient, and better equipped to serve all of our stakeholders.

On behalf of the Commission on Women in the Profession, I invite you to see this report not as an endpoint, but as a starting point—one that depends on engaged readers like you to translate insight into action, today, tomorrow and forever.

Sincerely,
Karol Corbin Walker
Chair, 2023–2026
Commission on Women in the Profession

Karol Corbin Walker

Letter from Co-chairs of the ABA Commission on Women in the Profession Mental Wellness Committee

In August 2023, under the leadership of Chair Karol Corbin Walker, the American Bar Association's Commission on Women in the Profession (CWP) established the Mental Wellness in the Legal Profession Committee (Committee). The Committee was charged with examining the state of research on lawyers' mental wellbeing, with particular focus on whether—and how—the experiences of women lawyers differ from those of men, and how factors such as race, ethnicity, disability, and gender identity shape wellbeing within the profession.

What the Committee discovered was both striking and concerning. While the legal profession has increasingly acknowledged the importance of mental health, the genesis of this project was driven by Chair Karol Corbin Walker, who recognized there was a need to address the mental wellbeing of women lawyers. Existing studies were limited in scope, and no comprehensive national study had been undertaken to center women's experiences. Recognizing the urgency, the Committee recommended that the CWP lead a comprehensive, data-driven study. It further proposed the creation of an Advisory Council composed of leaders in wellbeing, diversity, and the legal profession to guide and inform this work.

With the support of the CWP, the Committee developed and issued a request for proposals, ultimately selecting MindSetPower to conduct the study under the leadership of past ABA President Paulette Brown. In 2025, MindSetPower undertook a wide-ranging data collection effort, gathering insights from lawyers across the country and across all demographics. Through a combination of in-person and virtual Focus Groups and a nationwide anonymous survey, participants shared their experiences with workplace stressors and the strategies they use to navigate them. The final Focus Group was convened in January 2026, marking the culmination of a rigorous and inclusive research process.

At the heart of this report are the voices of those who chose to speak and share—openly, honestly, and with extraordinary courage. We offer our sincere gratitude to the lawyers who offered their stories, reflecting on experiences that are difficult to name and even harder to relive. Their willingness to be vulnerable to provide, to speak, and to give truthfully about stress, struggle, resilience, and survival within the legal profession is an act of generosity and leadership. In giving voice to their lived experiences, they have illuminated what too often remains unseen and unspoken and made it possible for this report to exist—not as an abstract study but as a depiction of real lives. We honor them, and we carry forward their words mindfully and responsibly.

The study has already sparked significant dialogue. In February 2026, a program highlighting its scope and purpose was presented at the ABA Midyear Meeting to a highly engaged audience. This 2026 report represents a critical step forward in expanding our understanding of mental wellbeing in the legal profession. Its findings will continue to be shared and explored, including at the ABA 2026 Annual Conference.

We are grateful to have contributed to this important work alongside our dedicated colleagues on the Committee, whose commitment has guided this effort since its inception. This report is not an endpoint—it is a call to action. It asks us not only to listen, but also to respond. We hope its findings will compel employers, bar associations, and legal professionals to take meaningful, sustained steps to prioritize mental wellbeing, expand support, and address the systemic and organizational conditions that shape workplace experiences and affect wellbeing across the profession, including stress, burnout, and other workplace pressures. The path forward necessitates intention, accountability, and cooperative effort to build a profession that supports the overall health and wellbeing of those within it.

We convey our profound gratitude to Chair Karol Corbin Walker, past ABA President Paulette Brown, and the MindSetPower team for their exemplary vision, leadership, and commitment to this vital project. We also extend our sincere appreciation to Melissa Wood, the Commission's Director, for her exceptional guidance and support in furthering both this Committee's work and the mission of the CWP. We are equally and immensely grateful to the Commission on Women in the Profession and the members of the Advisory Council, whose insights, leadership, and thoughtful contributions helped inform and strengthen this work, and whose care and commitment to advancing equity and wellbeing in the legal profession have been essential to the realization of this report.

Diandra D. Benally

Kathleen D. Wilkinson

Tiffany Shimada

Foreword

By the Authors of the Report

Stressors impacting the mental wellbeing of lawyers have been for far too long a secret in plain sight. Over the past several years, mental wellbeing of lawyers has rightfully become a focus of various legal entities, including bar associations, law firms, and other organizations that employ lawyers. That focus, however, has not been centered on women lawyers and the manner in which their experiences are different than those of men. This Report is a first of its kind, focused on the mental wellbeing of women lawyers—a matter that is both urgent and integral to the advancement of the legal profession. Through rigorous research and thoughtful engagement, we have endeavored to shed light on the multifaceted challenges and remarkable strengths that define the experiences that impact the mental wellbeing of women within the legal profession.

This Report is grounded in the authentic voices and diverse experiences of women lawyers, spanning various demographics, practice areas and settings, and stages of their careers. The Report directly compares the lived experiences of men and women within the profession, while also examining the nuanced ways those experiences diverge for women across race, gender identity, and disability. We have carefully examined their realities through an anonymous online survey and four in-person and eight virtual Focus Groups, acknowledging the resilience and determination that permeate their careers and work as lawyers. To protect the participants, we have, in this Report, amalgamated quotes to de-identify participants.

Our findings identify persistent barriers, ranging from workplace pressures and systemic inequities to external societal demands. Our recommendations provide adaptive strategies, many cultivated by the participants in this Research, providing a path forward. The mental wellbeing of women lawyers is not merely a personal concern; it is a foundational pillar for the ethical integrity, innovation, and sustainability of the legal profession as a whole. Creating environments that prioritize mental wellbeing requires intentional, ongoing efforts to foster inclusivity, strengthen support structures, and eliminate the stigma surrounding mental health.

This Report is intended to serve as both an informative resource and a call to action. We urge decision makers, leaders, policymakers, and organizational stakeholders to engage actively with our findings and recommendations. It should be understood that achieving excellence and ensuring mental wellbeing are not competing interests. Policies are necessary that champion mental wellbeing, remove stigmas associated with mental wellbeing, and provide meaningful support. The responsibility of shaping a healthier, more equitable profession is the responsibility of all of us. The transformation begins with decisive leadership and a steadfast commitment to positive change.

We would be remiss if we did not extend our sincere gratitude and appreciation to all who made this critical Research and Report a reality. It is incredible to witness a vision come to fruition. The Commission on Women in the Profession has long been thorough in its initiatives, in the forefront of innovation. It has come to be expected. Under the leadership of Commission Chair Karol Corbin Walker, there was no exception. We are grateful for her vision and for her support and that of the entire Commission. Project committee co-chairs Kathleen Wilkerson, Diandra Benally, and Tiffany Shimada were nothing short of extraordinary in providing support, encouragement, and guidance. We also offer a special thanks to the MindSetPower and MayaTech support teams. Last but certainly not least, to the Commission Team who were true partners in this project, Melissa Wood, Madeline Amonick, and Katrina Donaldson, we thank you.

It is our desire to have this Report inspire ongoing collaboration, policy development, and a renewed focus on the mental wellbeing of women lawyers, ensuring the profession's continued vitality and excellence.

Paulette Brown, Esq.

Suzanne Randolph Cunningham, PhD

Lauren Ramsey, PhD, MPH

Executive Summary: Mental Wellbeing of Women Lawyers

Purpose/Background

The American Bar Association Commission on Women in the Profession conducted groundbreaking Research examining how workplace experiences impact the mental health and the mental wellbeing of women lawyers compared to men, with particular attention to differences across race, ethnicity, disability, and gender identity. This Research fills a critical gap, as no previous national study has centered mental wellbeing specifically on women lawyers.

Methodology/Approach

The Research employed a mixed-methods design comprising an anonymous online survey (n=2,915 lawyers, 69% women) and 12 Focus Groups, four in-person and eight virtual. The Survey included validated measures of depressive symptoms, anxiety symptoms, and wellbeing, alongside open-ended questions about stressors and workplace policies. Focus Groups provided rich qualitative data on lived experiences, with participants representing diverse practice settings, demographics, and geographic locations across the United States.

Key Findings

- **Persistent Gender Disparities:** Women reported significantly higher stress levels across nearly all domains—financial strain (40% vs. 29.5% for men), mental wellness issues (35.9% vs. 26.1%), sleep disturbance (30.6% vs. 18.6%), and family relationship issues (29.9%

vs. 18.6%). Women also showed higher rates of anxiety (36.9% vs. 22.7%) and depressive symptoms (19.4% vs. 15.1%) warranting clinical evaluation.

- **Cumulative, Systemic Stressors:** Women described stress as ongoing and embedded in legal practice structures—billable hour requirements, workplace culture, gender bias, and work–life conflict—rather than isolated personal challenges. Caregiving responsibilities, particularly the "motherhood penalty," emerged as a critical stressor.
- **Policy-Implementation Gap:** While mental wellness policies exist, women rarely utilize them due to stigma, confidentiality concerns, professional risk, and unchanged workload expectations. Leadership modeling and cultural change are absent.
- **Intersectional Variations:** Women requiring workplace accommodations and LGBTQIA+ lawyers reported substantially higher mental health symptoms and lower wellbeing. Women of color frequently described stress related to marginalization, bias, and additional burdens of proving competence.
- **Structural, Not Individual:** Women emphasized that mental wellness challenges stem from organizational structures and professional norms, not personal resilience deficits.

Recommendations

We recommend treating mental wellbeing as an organizational responsibility through leadership accountability, workload reform (including billable hour review), equity-informed policy design, and routine education on gender-specific stressors. Organizations should improve policy communication, normalize its use through leadership modeling, and provide confidential mental health resources while addressing structural contributors to stress.

Conclusion

Meaningful progress requires moving beyond individual coping strategies to address the systemic workplace conditions that disproportionately impact women lawyers, creating sustainable change through leadership commitment and cultural transformation.

1.0 Introduction

The American Bar Association (ABA) Commission on Women in the Profession (CWP) launched a Mental Wellbeing Research Project entitled *An Empirical Study Regarding Women Lawyers' Mental Wellness in the Legal Profession*. The Research included three components—an online Survey, a Policy Analysis embedded within the Survey findings, and Focus Groups to examine how the workplace experiences of women and men impact their mental health and wellbeing. The primary purpose of the Research was to collect perspectives from both women and men across all demographics in the legal profession about stressors in their workplace, what they do for self-care, and ways their employers respond to these situations and promote mental wellbeing.

This Research is of particular interest to the ABA's CWP because, while there have been other research studies conducted related to the mental wellbeing of lawyers,[1] including a study conducted by the ABA, this Research differentiates itself and is groundbreaking. This Research compares the experiences of women and how they are different from men and the nuances of experiences of women based upon race, ethnicity, disability, and gender identity. To date, while there have been several studies concerning the mental wellbeing of lawyers, no national research has been conducted where mental wellbeing has been centered on women lawyers.[2]

The Survey component of the Research included questions about participants' experiences in their workplaces and the impact on their mental wellbeing. The Focus Groups provided an opportunity to have direct interaction with participants and, similar to the Survey, asked questions related to experiences in the workplace that impact their mental wellbeing. The Focus Groups also posed questions concerning external experiences that influenced workplace stressors.

This Report summarizes the quantitative and qualitative findings from the Survey and Focus Groups. The "Survey Findings" section also reports the findings on employers' policies that contribute to knowledge about impact of workplace conditions on the mental wellbeing of women lawyers.

1. Stephanie A. Scharf, Roberta D. Liebenberg & Paulette Brown, Legal Careers of Parents and Child Caregivers: Results and Practices from a National Study of the Legal Profession (Am. Bar Ass'n Comm'n on Women in the Legal Pro. 2023).

2. *See* Justin Anker & Patrick R. Krill, *Stress, Drink, Leave: An Examination of Gender-Specific Risk Factors for Mental Health Problems and Attrition Among Licensed Attorneys*, 16(5) PLOS One e0250563 (2021); ALM & Law.com Compass, 2023 Mental Health & Substance Abuse Survey; Chelsey Fredlund, *Mental Health by the Numbers: An Infographic Mapping the Legal Industry's Well-Being*, ALM & Law.com Compass (May 18, 2023), https://www.law.com/americanlawyer/2023/05/18/mental-health-by-the-numbers-an-infographic-mapping-the-legal-industrys-wellbeing/; Staci Zaretsky, *Mental Health May Be Improving for Lawyers, but Severe Stressors Remain—And They're Getting Worse*, Above the Law (May 14, 2025), https://abovethelaw.com/2025/05/mental-health-may-be-improving-for-lawyers-but-severe-stressors-remain-and-theyre-getting-worse/; Press Release, ABA and Krill Strategies Launch New Lawyer Mental Health Research Project, Am. Bar Ass'n (June 24, 2025), https://www.americanbar.org/news/abanews/aba-news-archives/2025/06/aba-krill-lawyer-mental-health-project/.

2.0 Research Questions

The study was designed to collect information to address six research questions:

1. What types of stressors are associated with women's mental wellbeing?
2. Are women lawyers aware of their employer's policies to assist with mental wellbeing issues? Are women using these policies for themselves or their women employees? What are the women's perceptions of the effectiveness of these policies?
3. What information would women lawyers want decision makers to know and understand about the impact of stress on their mental wellbeing?
4. What recommendations do women and men lawyers have for the types of educational programs needed to recognize stressors unique to women lawyers and mitigate the adverse impacts of these stressors?
5. What self-care methods do women lawyers use to mitigate the adverse impacts of these stressors or improve their mental wellbeing?
6. What are the variances, if any, between races and ethnicities? Are there other lawyer characteristics that result in variances in mental wellbeing?

Findings from the Survey and Focus Group components are reported separately and followed by Conclusions, Implications, and Recommendations based on both components.

3.0 Survey

3.1 Methodology

Design. The Survey component was designed as a cross-sectional study that used a one-time, anonymous online survey to collect data from respondents.

Sample. The sample included female and male lawyers identified in collaboration with the ABA, the CWP, organizations with which CWP members were affiliated, law firms with whom CWP members and the lead researcher were affiliated, and general word of mouth among lawyers who learned of the Survey and passed the links to colleagues. Neither the number of lawyers in the pool sampled nor the response rate could be determined because of this sample approach.

Measure. The Survey instrument, comprised primarily of closed-ended items, was developed in collaboration with the CWP. The Survey was launched on October 22, 2025. Respondents were asked to complete the Survey by December 17, 2025.

Procedure. The 20-minute online Survey was developed and distributed by the ABA to its members via a mass emailing, by members of the Commission through select contact lists, and by the research team through partnering organizations with members in legal professions that agreed to distribute the Survey link. The Survey was conducted between October 22, 2025, and December 17, 2025. Analyses included frequencies, percentages, and themes in the open-ended Survey responses. Female vs. male comparisons were also conducted, where appropriate.

The Survey was administered as an anonymous online survey with no access to personally identifiable information for respondents. A secure online platform was used to administer the Survey. No names, email addresses, or physical addresses were provided to the survey analysts. Respondents were not required to answer all questions, and they were free to skip any items they did not feel comfortable answering.

Analysis plan. For the quantitative data, descriptive statistics (frequencies, percentages, medians, means, and modes, as applicable) were generated and tabulated. Cross-tabulations were also generated to examine the patterns of response for selected questions by race/ethnicity and gender. When collapsing of sub-groups was necessary due to small sample sizes, the research team has indicated the recoding in the "Survey Findings" section, as applicable. In the following section, Survey findings are reported by research questions for the overall sample as well as for, when sample sizes permitted, cross-tabulation results by race/ethnicity and gender.

3.2 Survey Findings

In addition to the demographics for the overall sample, the research questions were used as a guiding framework to summarize the findings. This section summarizes the Survey responses, with data organized under each research question. Also presented are highlights of racial/ethnic variations in responses as well as variations between women lawyers and men lawyers, when sample sizes permitted.

3.2.1 Demographics

A total of 2,915 lawyers participated in and completed the Survey. There were some respondents who started the Survey but did not complete all Survey questions. This section summarizes the demographic characteristics of the respondents who completed the demographic items on the Survey—sample sizes will vary.

The mean age of the respondents was 54, with respondents ranging in age from 21 to 95 years. Median year of graduation was 1999 and respondents indicated graduating between 1950 and 2025, indicating a range of new and seasoned lawyers. Most respondents were female (n=1,835; 69%), heterosexual (n=2,353; 90%), and married (n=1,875; 71.3%); identified their race as White/Caucasian (n=2,114; 80.5%); and had an annual salary between $200,000 and $499,000 (n=760; 31.8%). Table 1 summarizes these data (note: "n" is the number of people who answered the question).

TABLE 1. DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS (N=2,915)

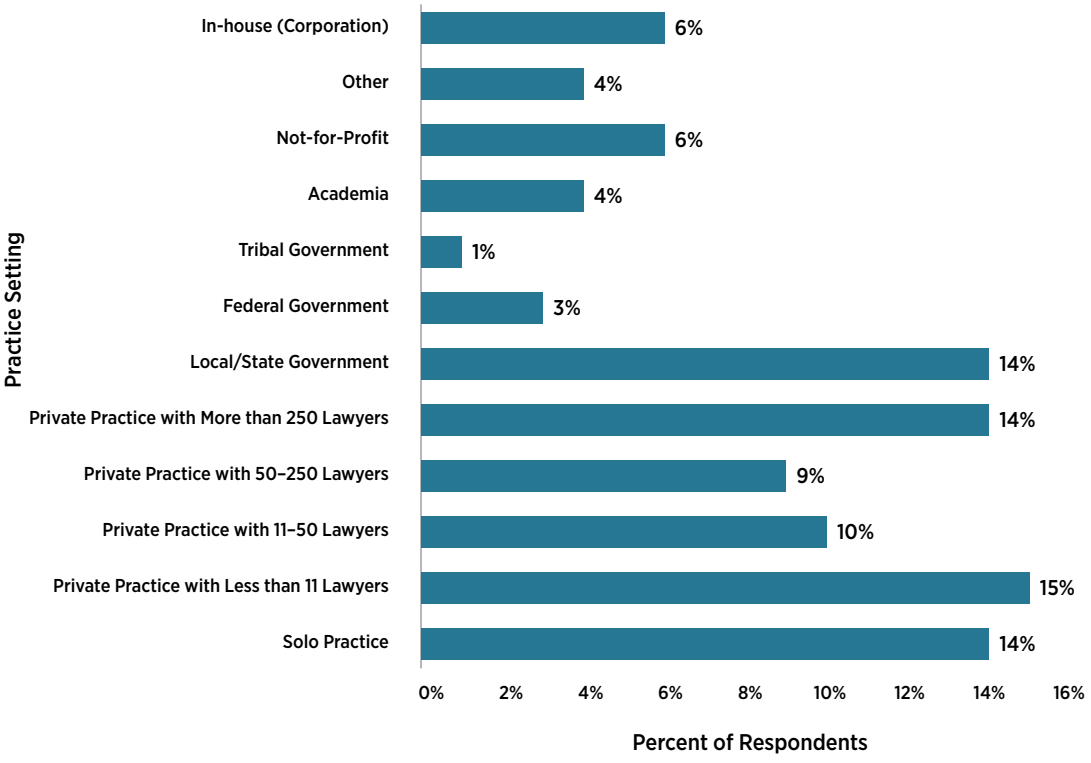
	n (%)
Gender	
Female	1835 (69)
Male	811(31)
Transgender Male (female to male)	3 (0.3)
Transgender Female (male to female)	1 (0.1)
Other/Not Listed	1 (0.1)
Sexual Orientation	
Gay	46 (2)
Lesbian	59 (2)
Heterosexual	2353 (90)
Bisexual	107 (4)
I don't know	4 (0.2)
I use a different term	45 (2)
Race and Ethnicity	
Hispanic/Latin Origin (yes)	155 (6)
African American/Black	229 (9)
American Indian/Alaska Native	29 (1)
Asian/Asian American	69 (3)
South Asian	21 (0.8)
Middle Eastern/North African	20 (0.8)
Native Hawaiian/Pacific Islander	3 (0.1)
White/Caucasian	2114 (81)
Two or more of races	93 (4)
Race or ethnicity not listed	48 (2)
Marital Status	
Single, never married or in domestic partnership	420 (16)
Married or in a domestic partnership	1875 (71)
Widowed	63 (2)
Divorced or separated	272 (10)
Annual Salary	
Less than $50,000	87 (4)
$50,000-$99,000	333 (14)
$100,000-$149,000	510 (21)
$150,000-$199,000	454 (19)
$200,000-$499,000	760 (32)
$500,000-$1,000,000	187 (8)
Over $1,000,000	57 (2)

Most respondents indicated that they were currently employed in a job that required a law degree (n=2,336; 88%). Approximately 10% (n=265) indicated having a physical and/or mental impairment that substantially limited one or more major life activities and 4% required one or more accommodation(s) to work in their job.

Law Practice Setting (n=2,575)

Respondents most frequently reported working in private law firms, which accounted for over half of the sample. Approximately 15–20% reported employment in government or public sector settings, while around 10% reported working in corporate or in-house legal departments. Smaller percentages reported working in nonprofit, academic, or other practice settings, each generally representing less than 10% of respondents. This distribution highlights that the findings primarily reflect experiences within private practice, while still capturing perspectives from a range of other legal environments. Some respondents indicated "other" responses that included "Bar Association," "Chief Magistrate," "Consulting," and "Arbitrator." Figure 1 summarizes these data.

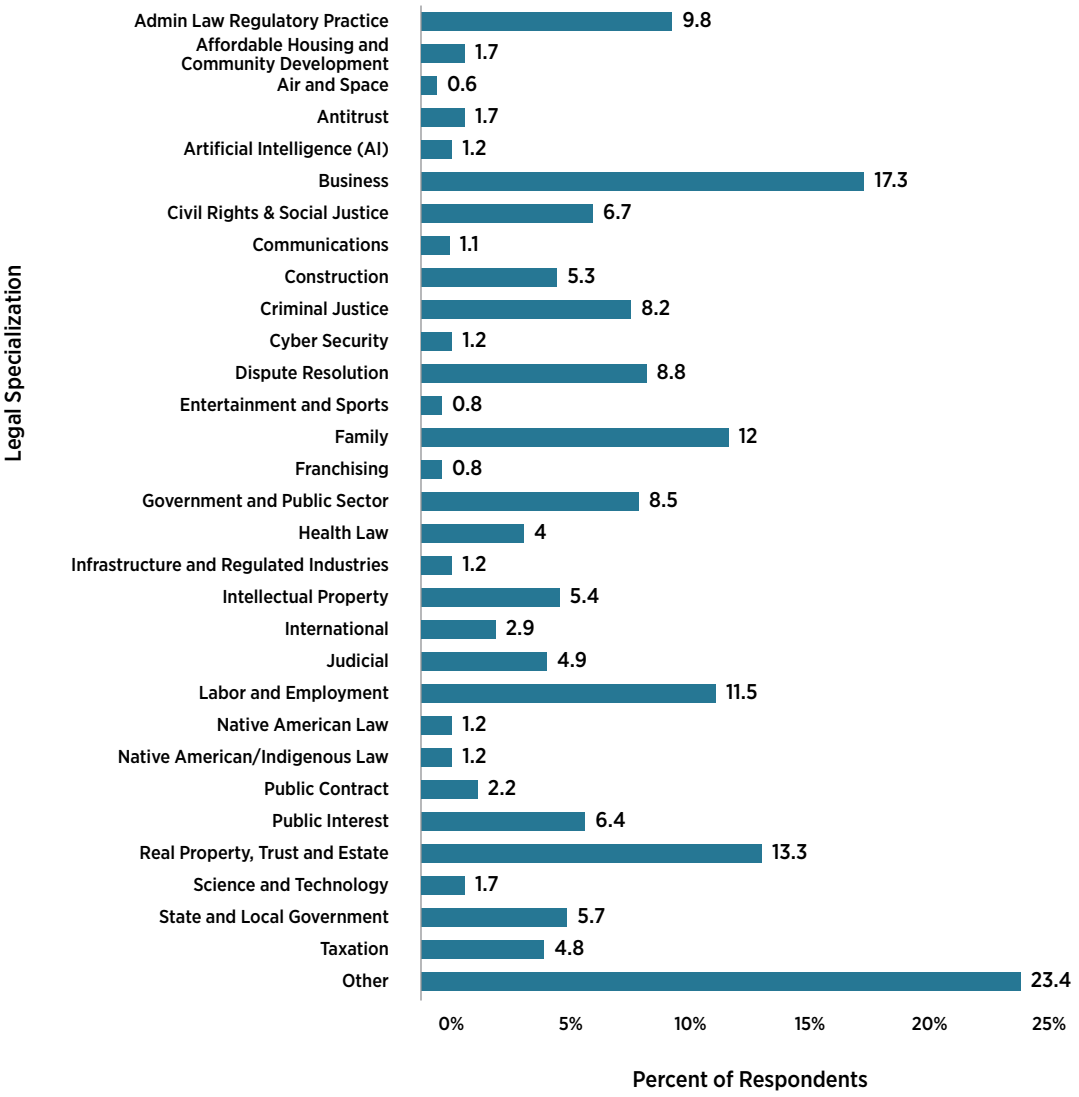
FIGURE 1. DISTRIBUTION OF RESPONDENTS BY LAW PRACTICE SETTING (PERCENT OF RESPONDENTS)



Legal Specialization (n=2,915)

Respondents reported practicing across a broad range of legal specializations. The largest proportion reported working in litigation-related practice areas (approximately 25% of respondents), followed by corporate or transactional law (roughly 20%). Smaller but notable percentages reported practicing in family law, employment/labor law, and public interest or government-related practice areas, each representing approximately 10–15% of respondents. A wide range of additional specializations were reported by smaller percentages, generally below 10% each, indicating substantial diversity in practice areas represented in the sample. Respondents could select all that apply. Figure 2 summarizes these data.

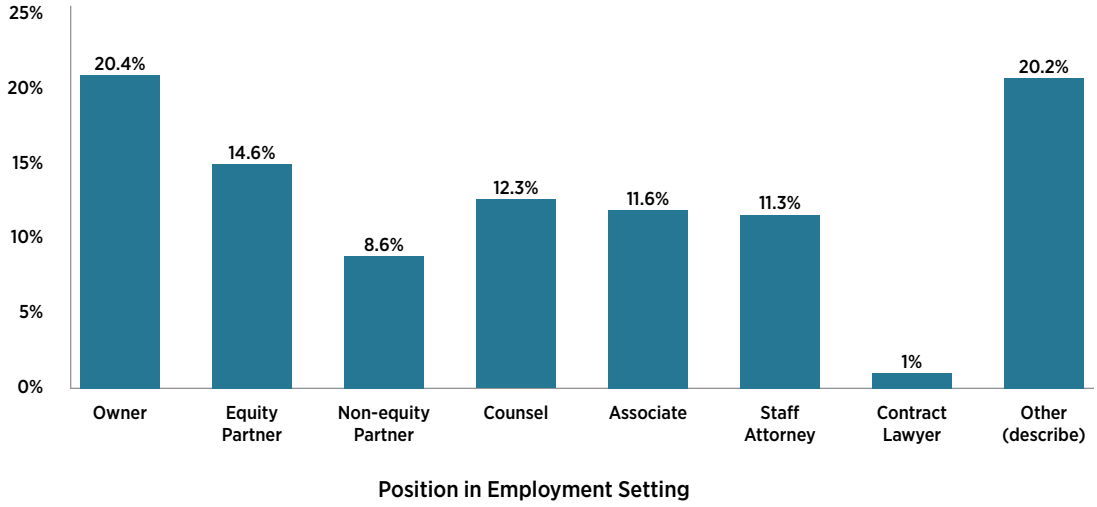
FIGURE 2. DISTRIBUTION OF RESPONDENTS BY LEGAL SPECIALIZATION (PERCENT OF RESPONDENTS)



Position Within Employment Setting (n=2,575)

Most respondents occupied mid- to senior-level positions within their employment settings. Approximately one-third of respondents reported holding partner, principal, or equivalent senior roles, while just over one-quarter identified as associates. An additional 15–20% reported working in counsel, staff attorney, or similar roles, and a smaller proportion reported entry-level or non-attorney positions, each accounting for less than 10% of respondents. This distribution indicates that the sample largely reflects individuals with substantial professional responsibility and decision-making roles. Respondents who indicated "Other" (20%) included "Administrative Law Judge," "Assistant General Counsel," and "AI Tutor/Legal Engineer." Figure 3 summarizes these data.

FIGURE 3. DISTRIBUTION OF RESPONDENTS BY POSITION WITHIN THEIR EMPLOYMENT SETTING (PERCENT OF RESPONDENTS)



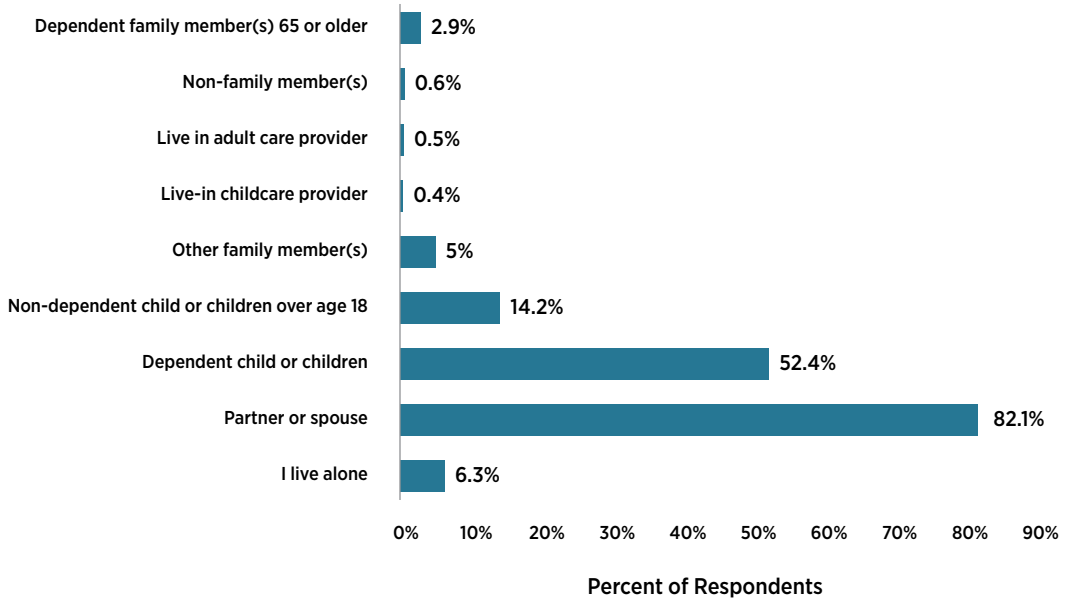
Average Number of Hours Caring for Children/Family

Over half of the lawyers (n=1,330; 54%) were parents/caregivers who spend an average of 39 hours per week engaging in childcare, eldercare, or related activities. The amount of time that lawyers spend on these activities varied. Some indicated they did not spend any time providing caregiving activities, while others indicated spending up to 50 hours per week on activities such as driving children to school, cooking for children or the elderly, and helping children with homework or activities of daily living.

Composition of Household (Who Lives in the Home)

Among lawyers who identified as parents/caregivers, most indicated living with a partner or spouse (82.1%), dependent child(ren) (52.4%), and/or non-dependent child(ren) (14.2%). Respondents could select all that apply. Figure 4 summarizes these data.

FIGURE 4. HOUSEHOLD COMPOSITION OF LAWYERS WHO ARE PARENTS/CAREGIVERS



3.2.2 Research Question 1: Types of Stressors Associated with Women's Mental Wellbeing

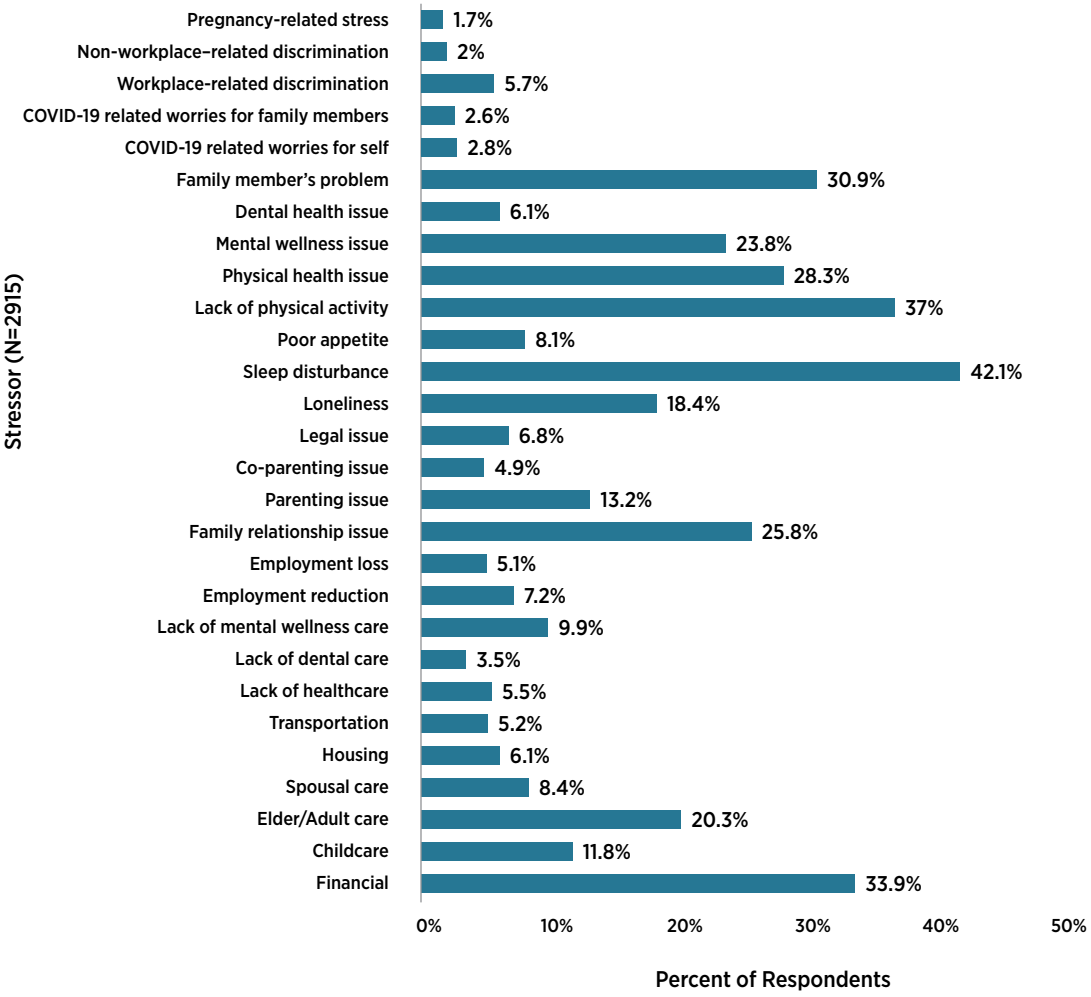
Types of Stressors

Respondents were asked to identify stressors they perceived as stressful from a list of commonly experienced factors. They could then share other stressful factors that were not listed, but worth mentioning. Respondents could check all that apply. Sleep disturbance was the most frequently reported stressor, endorsed by 42.1% of respondents. Lack of physical activity was also commonly reported (37.0%), followed by financial stress, which was endorsed by 33.9% of respondents. Family-related stressors were prominent, including family members' problems (30.9%) and family relationship issues (25.8%). Health-related stressors were reported by a substantial proportion of respondents. Physical health issues were endorsed by 28.3%, while mental wellbeing issues were reported by 23.8%. Loneliness was reported by 18.4% of respondents. Caregiving-related stressors included elder or adult care (20.3%), parenting issues (13.2%), and childcare (11.8%).

Employment and access-related stressors were reported by smaller but notable proportions. Employment reduction was endorsed by 7.2%, and employment loss by 5.1%. Access-related concerns included lack of mental wellbeing care (9.9%), lack of healthcare (5.5%), and lack of dental care (3.5%). Legal issues were reported by 6.8% of respondents. Stressors related to discrimination were reported by relatively small percentages, including workplace-related discrimination (5.7%) and non-workplace-related discrimination (2.0%). COVID-19–related worries were infrequently reported, including concerns for oneself (2.8%) or family members (2.6%). Pregnancy-related stress was reported by 1.7% of respondents.

Overall, the distribution of responses indicated that respondents most frequently reported stressors related to sleep, physical activity, finances, family, and health, with additional contributions from caregiving, employment, and access-related challenges. Figure 5 summarizes these data.

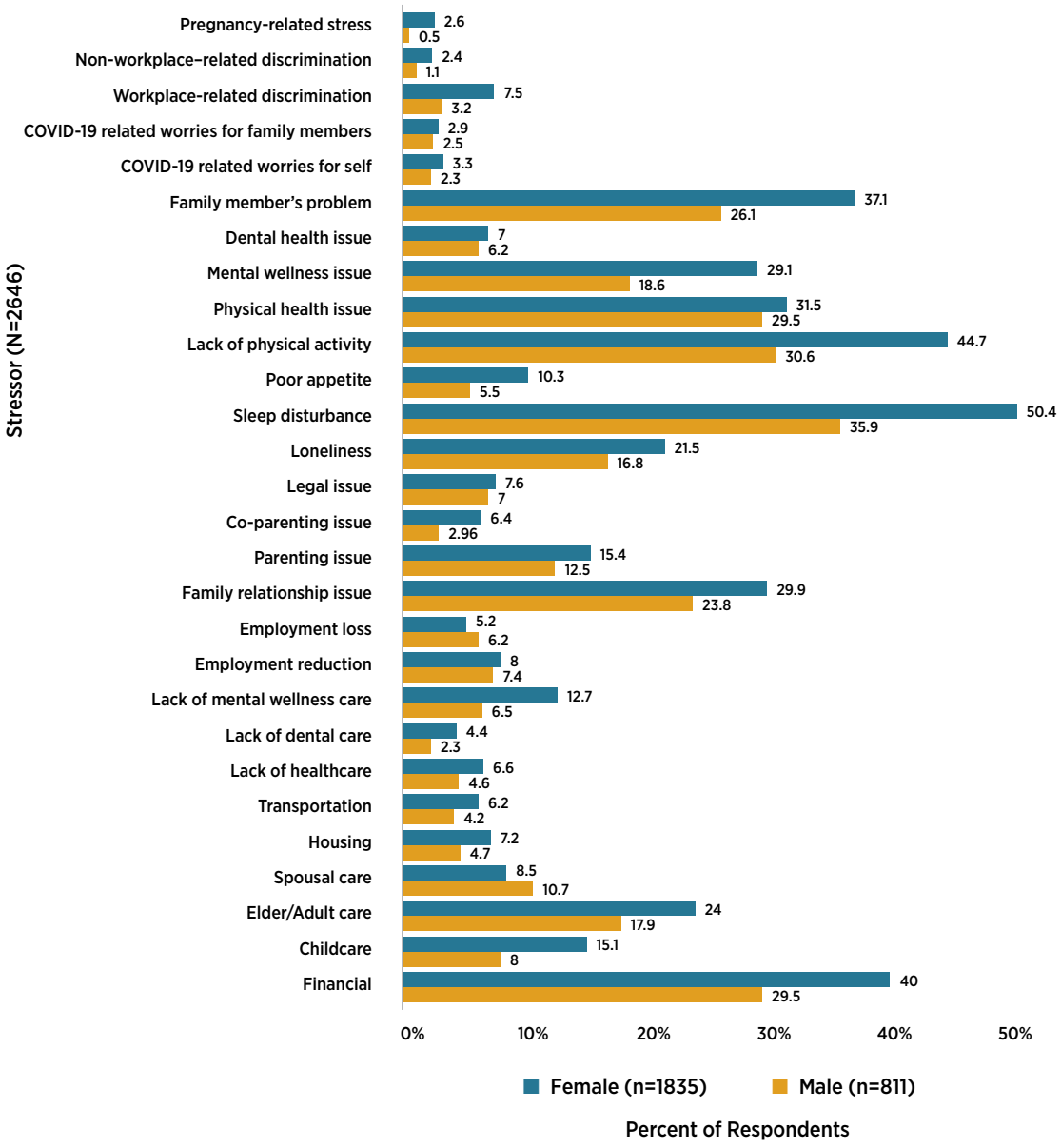
FIGURE 5. IDENTIFIED STRESSORS AMONG SURVEY RESPONDENTS (PERCENTAGE REPORTING)



Gender Comparisons (Women vs. Men)

Women reported higher endorsement than men for most stressors, particularly financial stress (40.0% vs. 29.5%), mental wellbeing issues (35.9% vs. 26.1%), sleep disturbance (30.6% vs. 18.6%), and family relationship issues (29.9% vs. 18.6%), while men reported similar or slightly higher percentages for a small number of stressors such as spousal care (10.7% vs. 8.5%).

FIGURE 6. GENDER COMPARISON (WOMEN VS. MEN): TYPES OF STRESSORS (N=2,646)



The data paint a picture of layered and intersecting burdens for women:

- Economic stressors (financial strain, employment reduction)
- Caregiving responsibilities (childcare, elder and spousal care, parenting, and co-parenting)
- Access barriers (healthcare, dental care, mental health care, transportation, housing)
- Health-related challenges (sleep, appetite, physical and mental health issues)
- Discrimination and pregnancy-related stressors

Women do not just report one type of stressor at higher rates; rather, the higher rates appear across almost every major stressor domain, suggesting that many are managing multiple, simultaneous issues. Again, women are the majority among those endorsing each stressor. Notable points:

- Stress related to co-parenting, mental wellbeing, and family members' problems is particularly female-skewed.
- Stress related to legal issues, loneliness, and physical health is more gender-balanced than some other items, though still majority female.

Across the 28 stressor items, women consistently report more stressors than men. Men do appear across all categories, but usually as a minority share of those endorsing each specific stressor. Taken together, this suggests that gender differences in types of stressors experienced by those in the legal profession are not limited to a single domain.

Qualitative Descriptions of Interrelated Stressors: Women's Perspectives

Respondents were also asked to describe stressors, their workplace environments, and other lived experiences in several open-ended response questions. They described a constellation of interrelated stressors that affect their mental wellbeing. These stressors were most often framed as cumulative and persistent rather than episodic, with many women emphasizing that stress is experienced as an ongoing condition of professional life rather than tied to a single event or role.

Women frequently described stress as stemming from the structure and culture of legal work, including expectations around performance, time, and availability, as well as from competing demands across professional and personal domains. While individual stressors were often named, respondents regularly conveyed that it was the *stacking* of responsibilities, expectations, and pressures that most negatively affected their mental wellbeing.

Importantly, women did not describe stress solely as an internal or personal issue. Many framed stress as produced or intensified by organizational norms, workplace cultures, and systemic expectations, suggesting that mental wellbeing challenges are closely tied to how legal work is organized and rewarded. Table 2 summarizes the emerging categories of stressors.

TABLE 2. STRESSORS AMONG WOMEN LAWYERS (OPEN-ENDED RESPONSES)

Category	Stress-related Characteristics	Mental Wellbeing Outcome	Illustrative Quote
Workload Intensity and time pressure	Long work hours, high caseloads, billable hour requirements, constant deadlines.	These pressures were often described as leaving little room for rest, recovery, or attention to personal wellbeing, contributing to chronic stress and emotional exhaustion.	"Focus on parenting obligations and stressors has impacted my ability to fully focus on my career at times, which has affected advancement opportunities." "Likely that family caregiving has affected professional opportunities and advancement, especially when expectations require long hours and constant availability."
Work–life integration and competing roles	Balancing professional responsibilities with caregiving. Managing household responsibilities alongside demanding work schedules. Feeling pulled between work expectations and family or personal needs.	Stress was often framed not as poor time management, but as structural incompatibility between professional demands and other life roles.	"Time away, feeling misunderstood or alone. Trying to balance everything makes it feel like you're failing at all of it." "The stress of continuously dealing with the needs of my family while trying to meet professional expectations has strained my mental health significantly."

TABLE 2. STRESSORS AMONG WOMEN LAWYERS (OPEN-ENDED RESPONSES), *continued*

Category	Stress-related Characteristics	Mental Wellbeing Outcome	Illustrative Quote
Workplace culture and expectations	Norms that reward overwork. Expectations to be constantly available. Pressure to "push through" stress without acknowledgment.	Some women described feeling that expressing mental health concerns could be viewed as weakness or professional liability, which itself became an additional stressor.	"Women are seen as irrational or emotional, so their concerns and feelings are often downplayed or disregarded. Also, we have a culture where women are taught not to complain and just be nice—which leads to lots of resentment or not speaking up for ourselves."
Gendered experiences and professional identity	Navigating male-dominated environments. Feeling the need to prove competence or credibility. Managing gender-based expectations around behavior, leadership, and communication.	These experiences were often described as subtle but persistent, contributing to emotional strain over time.	"Women are often viewed as not being capable or unqualified for their positions. If they stand up for themselves, women are often viewed as masculine on one hand and whiny on the other." "Women's failure to consistently perform at a high level can be used against them for promotions, leadership roles, etc." "Women are not shown the same respect. I notice that with male coworkers that I supervise, they question and challenge every instruction they get from me. They look for opportunities to make me look less intelligent than them. I am not always respected as an equal, which is demoralizing."

TABLE 2. STRESSORS AMONG WOMEN LAWYERS (OPEN-ENDED RESPONSES), *continued*

Category	Stress-related Characteristics	Mental Wellbeing Outcome	Illustrative Quote
Lack of organizational support or responsiveness	Employers do not adequately recognize mental wellbeing challenges. Available supports are insufficient, unclear, or difficult to access. Responsibility for coping is placed on the individual rather than the organization.	This contributed to feelings of isolation and frustration among some respondents.	"Assistance with IVF, Family Leave policies. However, it's important to note that if you are a member of senior staff, you are less likely to take advantage of such policies and practices. The oxygen levels thin out as you rise through the ranks—you are expected to suffer in silence." "Yes, and I've used them and found them insufficient."

Impact of Stressors Experienced by Women: Women's and Men's Perspectives

Both women and men were asked to share whether the stressors identified (e.g., financial, caregiving, employment) affected women lawyers personally, professionally, within their family, and in other ways. Figure 7 summarizes these data. Respondents were also asked to share other ways that stress affects women lawyers in an open-ended question. These responses were analyzed and high-level themes are summarized below. These responses were grouped by gender (Female/Male) to identify any nuances or differences in the perception of the impact of stress on women lawyers in different life domains (emotional, professional, personal, family, and other areas of life) (see Figure 7).

Emotional toll and cumulative impact of stressors on women. Rather than naming stressors in isolation, many women described burnout, anxiety, emotional fatigue, and a sense of being overwhelmed. These responses emphasized the cumulative mental and emotional impact of ongoing stress rather than discrete stress events. Women's descriptions of stress frequently moved beyond individual coping to highlight organizational and cultural contributors. Stress was often discussed as normalized within legal practice, which may influence both help-seeking and perceptions of what is "acceptable" to acknowledge.

Professional impact of stressors on women. When asked about the professional impact of stressors on women lawyers, 71.9% of women reported that stressors affect women "very much," compared with 36.1% of men. Smaller proportions of women reported that stressors affect women only "somewhat" (22.1%) or "not at all" (1.6%). In contrast, men were more likely to report lower perceived impact, with 27.9% selecting "somewhat" and 7.9% selecting "not at all." Notably, 28.1% of men reported being "not sure," compared with 4.4% of women, indicating greater uncertainty among men regarding the professional impact of stressors on women lawyers (see Figure 7).

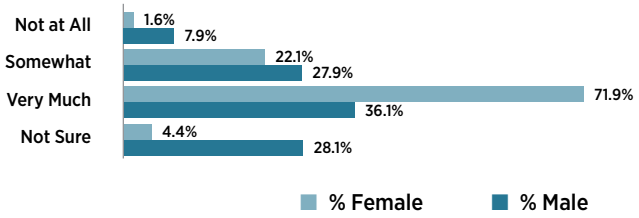
Personal impacts of stressors on women. Perceived personal impact of stressors on women lawyers differed markedly by gender. While 69.8% of women reported that stressors affect women personally "very much," only 34.0% of men responded this way. An additional 24.3% of women and 29.4% of men reported that stressors affect women "somewhat." A very small proportion of women (1.6%) and a slightly larger proportion of men (6.9%) reported "not at all." As with professional impact, men were substantially more likely to report uncertainty (29.7% selected "not sure") than women (4.2%).

Familial impacts of stressors on women. Gender differences were pronounced in perceptions of family impact—70.1% of women reported that stressors affect women lawyers' family lives "very much," compared with 38.6% of men. An additional 23.1% of women and 26.0% of men reported "somewhat." Reports of no family impact were uncommon among both groups (1.9% women; 6.9% men). Men, again, showed higher uncertainty, with 28.5% selecting "not sure," compared with 4.9% of women.

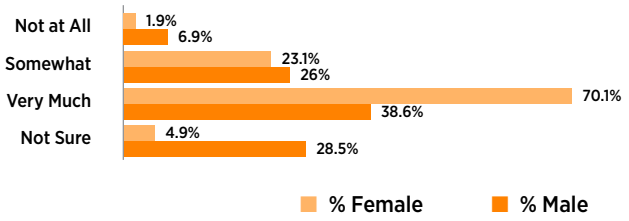
Other areas of impact of stressors on women. Perceptions of stressors affecting women lawyers in other areas of life showed lower overall endorsement but continued gender differences—20.8% of women reported that stressors affect women in other areas "very much," compared with 5.6% of men. Smaller percentages of women (7.5%) and men (4.9%) selected "somewhat," while 14.0% of women and 16.5% of men reported "not at all." Uncertainty was high in this domain for both groups but especially among men, with 72.9% selecting "not sure," compared with 57.7% of women.

FIGURE 7. IMPACT OF STRESSORS ON WOMEN LAWYERS: PERSPECTIVES OF BOTH WOMEN AND MEN

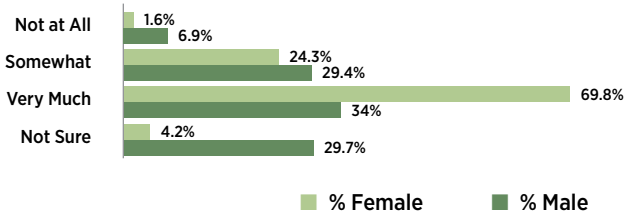
Women were substantially more likely than men to report that stressors affect women lawyers **professionally** "very much" (71.9% vs. 36.1%).



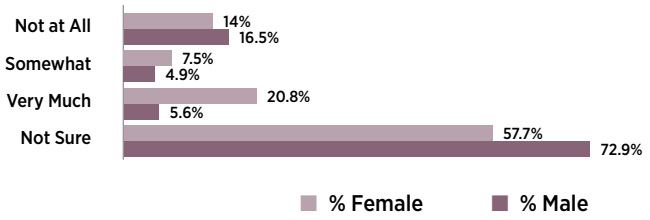
Women were almost twice as likely as men to report that stressors affect women lawyers' **family** lives "very much" (70.1% vs. 38.6%).



Nearly seven in ten women (69.8%) reported that stressors affect women lawyers **personally** "very much" compared with 34.1% of men.



Women were nearly four times as likely as men to report that stressors affect women lawyers in **other areas of life** "very much" (20.8% vs. 5.6%).



Gender-Based Differences in Perceptions Among Women and Men on the Impact of Stressors Experienced by Women: Open-Ended Responses

This section summarizes the open-ended survey response data by gender (Female vs. Male). Due to small sample sizes, other gender identities (Transgender Male, Transgender Female, Two Spirit, etc.) were not included in this analysis, warranting further study for these populations.

Across both men's and women's open-ended responses, the personal stressors mentioned most often clustered around work–life imbalance, demanding work structures, and workplace culture. Respondents frequently referenced long work hours, billable hour expectations, and limited flexibility as key sources of stress. Work–family conflict—including caregiving responsibilities and competing personal and professional demands—was repeatedly cited, as were interpersonal and cultural stressors such as competitiveness, lack of support, and strained workplace dynamics. Mental and emotional strain, including burnout, were also commonly referenced across responses.

However, the gender-based thematic comparisons demonstrate consistent differences in how women and men responded to the open-ended question about stressors among women lawyers. Women's responses were detailed and grounded in personal experience, frequently describing work–family conflict, workplace culture, mental health strain, and structural features of legal practice. Women framed stress as cumulative and embedded across professional and personal domains.

Men's responses, by contrast, were typically shorter, more abstract, or focused on questioning the premise of gender-based framing. When men acknowledged stressors affecting women, they did so at a general level without describing specific mechanisms or lived experiences. Some responses emphasized resilience or suggested stress was universal. Overall, the contrast reflects differences in both content and tone, with women articulating stress as a lived and systemic experience and men more often positioning themselves as observers or critics of the framing. Table 3 summarizes these data, with quotes to demonstrate key themes and differences among women and men.

TABLE 3. GENDER-BASED COMPARISON OF KEY STRESSORS FOR WOMEN LAWYERS: THEMES IDENTIFIED BY WOMEN AND MEN (OPEN-ENDED RESPONSES)

Theme	Women – Summary of Responses	Illustrative Quotes (Women)	Men – Summary of Responses	Illustrative Quotes (Men)
Work–family conflict & time pressure	Women frequently described difficulty balancing legal work with caregiving, pregnancy, household labor, and expectations to perform at high levels across domains.	"The legal profession doesn't make much space for those seeking part-time positions for those who wish to ensure family is not neglected." "Women often leave the office to do the work at home too . . . house work not split."	Men rarely discussed work–family conflict directly; references were limited or abstract.	"I don't feel qualified to answer, but women have generally had to work harder to 'make it' than men." "Seriously, how would I know what stresses female lawyers?"
Workplace culture & gender bias	Women cited gendered expectations, penalties for assertiveness, and competitive or toxic cultures shaped by limited advancement opportunities.	"I find being a strong woman makes you a bitch—but for men it is a sign of strength." "The way my office treats women cause[s] a competitive atmosphere between the few women in the office that is quite toxic."	Men occasionally acknowledged gender bias, but without personal examples or detail.	"Women have had to work harder to succeed in the profession."

TABLE 3. GENDER-BASED COMPARISON OF KEY STRESSORS FOR WOMEN LAWYERS: THEMES IDENTIFIED BY WOMEN AND MEN (OPEN-ENDED RESPONSES), *continued*

Theme	Women – Summary of Responses	Illustrative Quotes (Women)	Men – Summary of Responses	Illustrative Quotes (Men)
Mental health & burnout	Women explicitly linked stress to mental health strain, burnout, and self-blame, often describing cumulative effects.	"Women tend to blame themselves for not achieving at the typical high levels, which adds another layer of mental stress." "The stress is constant and never really turns off."	Some men questioned or critiqued the mental health framing of stress.	"We need more focus on resilience and less on equipping women with the crutch of 'mental health' impairment." "Stress is part of the profession and something everyone must learn to manage."
Structural barriers in legal practice	Women highlighted rigid work structures (billable hours, lack of flexibility) as contributors to stress.	"There is little flexibility in billable-hour requirements." "The profession is not designed to accommodate family responsibilities."	Men generally did not identify structural features of legal practice as gendered stressors.	"Why is this question gender based? Men also practice law." "Everyone deals with the same workload expectations."
Legitimacy of gendered stress	Women treated gendered stress as rooted in lived experience and workplace dynamics.	"Being a woman lawyer means constantly proving yourself." "There is pressure to perform perfectly in every role."	Several men questioned the premise of the gender-specific question.	"This question assumes differences that may not exist."

Other notable differences between females and males about the impact of women lawyers' stressors emerged. Women more often than men described the impact of stressors in concrete, experiential terms, explicitly linking structural features of legal practice (e.g., billable hours, lack of flexibility) to caregiving responsibilities, gender bias, and cumulative mental health strain. Women's responses also more frequently than men's emphasized the compounding nature of multiple stressors across work and home environments. In contrast, men's responses were more likely than women's to be abstract, limited in detail, or focused on questioning the gender-based framing of the question itself, rather than identifying specific stressors or their impacts.

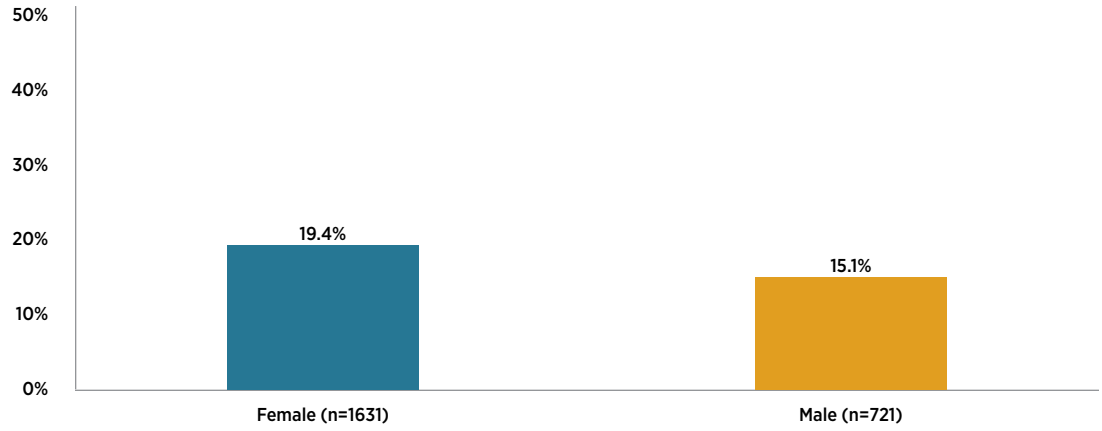
Mental Health, Wellbeing, and Work-Related Stress

Depressive and anxiety symptoms were assessed using the four-item *Patient Health Questionnaire* (PHQ-4).[3] Respondents were asked to respond to four items related to anxiety and depressive symptoms over the past two weeks. To assess depressive symptoms, respondents were asked to share how often they felt (1) down, depressed, or hopeless and (2) little interest or pleasure in doing things over the past two weeks. To assess anxiety symptoms, respondents shared how often they felt (1) nervous, anxious, or on edge and (2) unable to stop or control worrying over the past two weeks. Respondents shared the frequency of these feelings based on the following response options: 0—*not at all*, 1—*several days*, 2—*more than half the days*, or 3—*nearly every day*. Each response was scored and summed to create (1) a total score for depressive symptoms and (2) a total score for anxiety symptoms. The total scores for depressive and anxiety symptoms are the sum of the respective two items for each. While the total symptoms score is not a diagnosis of anxiety or depression, scores of 3 and above for the two-item score warrant further clinical evaluation for anxiety or depression, as applicable.

3. Kurt Kroenke, Robert L. Spitzer, Janet B.W. Williams & Bernd Löwe, *An Ultra-Brief Screening Scale for Anxiety and Depression: The PHQ-4*, 50(6) Psychosomatics 613–21 (2009).

Depressive symptoms among women and men lawyers. Among women (n=1,631) and men (n=721) lawyers who completed the PHQ-4, a higher percentage of women (19.4%) reported total depressive symptoms scores greater than or equal to 3 than did men (15.1%), suggesting that women are more likely to be experiencing symptoms that warrant further evaluation for depression. Figure 8 displays these data.

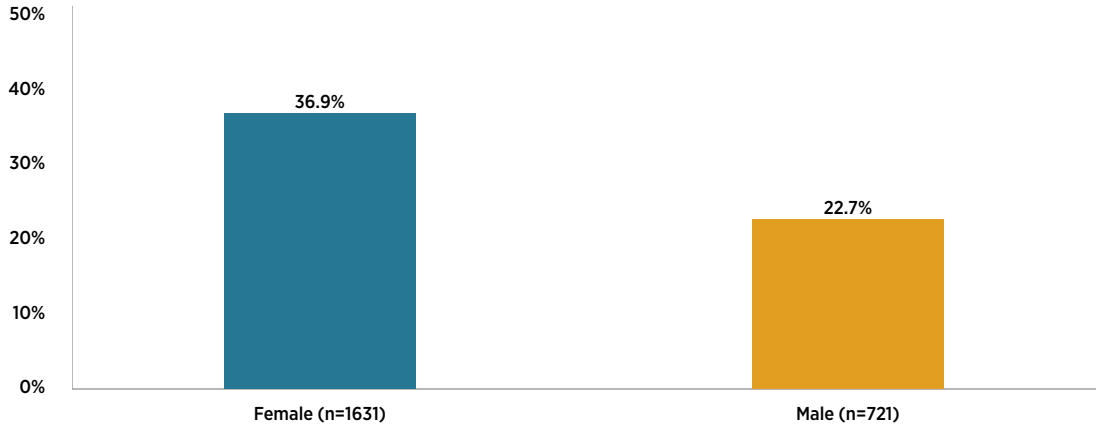
FIGURE 8. DEPRESSIVE SYMPTOMS SCORES AMONG WOMEN AND MEN LAWYERS (PERCENTAGE REPORTING TOTAL SCORES OF 3 OR HIGHER)*



**Scores of 3 or higher warrant further clinical evaluation for depression.*

Anxiety symptoms among women and men lawyers. Among women (n=1,631) and men (n=721) lawyers, a higher percentage of women (36.9%) than men (22.7%) had total anxiety symptoms scores greater than or equal to 3, suggesting that women are more likely than men to be experiencing symptoms of anxiety that warrant further clinical evaluation for anxiety. Figure 9 displays these data.

FIGURE 9. ANXIETY SYMPTOMS SCORES AMONG WOMEN AND MEN LAWYERS (PERCENTAGE REPORTING SCORES OF 3 OR HIGHER)*



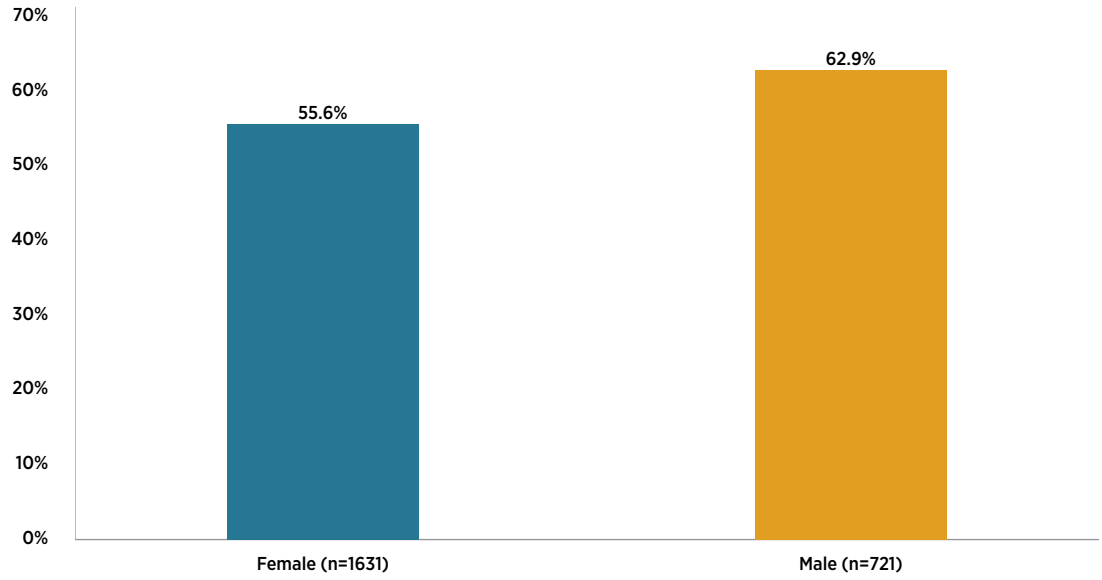
Scores of 3 or higher warrant further clinical evaluation for depression.

Overall Wellbeing

Two items asked respondents to self-report (a) how happy and calm and (b) how peaceful they have been in the past two weeks to determine subjective wellbeing—an overall sense of self-reported wellbeing for women and men lawyers. Responses ranged from 1—*all of the time* to 6—*none of the time*. The response to each individual item was reverse-coded (such that *none of the time* = 1 and *all of the time* = 6) and converted to a scale of 0 to 100, so that higher scores reflected better wellbeing.

Gender-based differences. Men lawyers reported an average wellbeing score of 62.9, while women lawyers had a lower mean score of 55.6, suggesting that men have increased wellbeing where they feel happy, calm, and peaceful compared to women lawyers. Figure 10 displays these data.

FIGURE 10. AVERAGE WELLBEING SCORES AMONG WOMEN AND MEN LAWYERS*



**Of a total possible score of 100, with higher scores indicating greater wellbeing.*

3.2.3 Research Question 2: Employer's Policies to Assist with Mental Wellbeing Issues

Across responses, respondents described uneven awareness and inconsistent use of employer-sponsored policies intended to support mental wellbeing (see Table 4). While some respondents indicated that policies or benefits existed within their organizations, many described limited clarity about what was available, how to access support, or whether use would be viewed as acceptable within workplace culture. Awareness of policies did not consistently translate into utilization. Even when respondents knew that mental wellbeing supports existed, women frequently described hesitation or reluctance to use them, citing concerns related to professional reputation, workload expectations, confidentiality, or perceptions of commitment. As a result, policies were often described as theoretically available but practically inaccessible.

Women also distinguished between policies on paper and policies in practice. Perceptions of effectiveness were shaped less by the existence of formal policies and more by organizational culture, leadership behavior, and whether mental wellbeing was meaningfully supported or merely acknowledged. In several responses, women suggested that responsibility for managing stress was implicitly placed on individuals rather than shared by the organization. Finally, women in supervisory or leadership roles noted challenges related to supporting women employees, including uncertainty about how to encourage policy use without stigma and concern that available policies did not adequately address the realities of women's stressors. Thus, women's responses suggest that policy existence alone is not sufficient to support mental wellbeing. Organizational norms and leadership practices strongly influence both utilization and perceived effectiveness of wellbeing policies and practices.

TABLE 4. KEY AREAS OF AWARENESS OF EMPLOYER MENTAL WELLBEING POLICIES AMONG RESPONDENTS: QUALITATIVE FINDINGS

Theme	Findings	Description of Findings	Illustrative Quote
Awareness of employer mental wellbeing policies	Women's awareness varied widely: • Some respondents clearly identified specific policies or benefits. • Others were unsure whether any formal supports existed. • Several noted that information about policies was not well communicated or regularly reinforced.	This variability suggests that policy visibility and communication play a critical role in awareness.	"I am aware that my employer offers mental health resources, but they are not communicated clearly or consistently." "I believe there are policies, but I would not know where to find them or how to access them."
Utilization of policies for oneself	Among women who were aware of available supports: • Many reported not using them. • Hesitation was linked to: – Fear of professional consequences – Concerns about confidentiality – High workloads that made time away feel unrealistic	Utilization was often framed as a personal risk calculation, rather than a routine or encouraged practice.	"I do the wellness activities sometimes." "I have used the employee assistance counseling, but only after things became overwhelming." "I have not used any policies because taking time away feels unrealistic given my workload."
Use of policies to support women employees	Women with supervisory responsibilities described: • Difficulty encouraging employees to use mental wellbeing supports • Uncertainty about how to balance productivity expectations with wellbeing needs • Concern that policies did not align with the intensity of legal work demands	In some cases, women leaders expressed that policies existed without sufficient guidance on how to operationalize them for staff.	"My health insurance covers some of my mental health care." "EAP group programs." "Ability to take mental health days, flexibility."

TABLE 4. KEY AREAS OF AWARENESS OF EMPLOYER MENTAL WELLBEING POLICIES AMONG RESPONDENTS: QUALITATIVE FINDINGS, *continued*

Theme	Findings	Description of Findings	Illustrative Quote
Perceived effectiveness of employer policies	Perceptions of effectiveness were mixed: • Some respondents viewed policies as helpful when: – Leadership modeled use – Organizational culture normalized mental wellbeing • Others viewed policies as symbolic or insufficient, particularly when: – Work expectations remained unchanged – Use was discouraged implicitly or explicitly	Effectiveness was therefore closely tied to organizational culture and leadership behavior, not just policy design.	"The benefits exist, but they do not address the workload expectations that cause the stress in the first place." "Having access to providers helps, but the culture still discourages actually stepping away."
Individual responsibility versus organizational accountability	A recurring thread across responses was the perception that: • Employers acknowledge mental wellbeing challenges • But expect individuals to manage stress independently	This tension shaped women's overall perceptions of whether employer policies meaningfully addressed mental wellbeing needs.	"There are policies but using them feels like it could reflect poorly on your commitment." "Mental health is acknowledged, but productivity always comes first."

Policy Analysis: Employer Mental Wellbeing Policies

Employer-sponsored mental wellbeing policies are generally intended to promote psychological wellbeing, reduce burnout, and support employee productivity and retention. Typical instruments include Employee Assistance Programs (EAPs), mental health insurance coverage, flexible work options, and mental health days. Implicitly, these policies aim to normalize help-seeking and distribute responsibility for mental wellbeing between employees and organizations.

However, the findings from this study indicate a substantial gap between policy intent and policy impact, particularly for women working in high-demand professional environments. While many employers have formal policies in place, the effectiveness of these policies is mediated by organizational culture, leadership practices, and gendered workplace norms.

A central policy issue emerging from these findings is that policy existence does not equate to policy accessibility. Women frequently described employer mental wellbeing policies as *theoretically available but practically inaccessible*. Limited clarity about what policies exist, how to access them, and what use might signal to supervisors undermines their functional value.

From a policy analysis perspective, this reflects weak policy communication and diffusion, where benefits are offered without sufficient infrastructure to ensure understanding and uptake. Policies that rely on passive dissemination (e.g., benefit handbooks or onboarding materials) fail to reach employees at the moment of need. As a result, awareness varies widely, producing inequitable access to supports across employees and organizations.

Even when women were aware of available policies, utilization remained low. Respondents framed the decision to use mental wellbeing support as a personal risk calculation, shaped by fears of reputational harm, confidentiality concerns, and workload pressures. This suggests that employer policies operate within a cultural environment where mental wellbeing is acknowledged rhetorically but not normalized behaviorally.

Policy-wise, this reflects an implementation failure rather than a design failure alone. Policies that do not explicitly protect employees from adverse professional consequences—or that coexist with unchanged productivity expectations—implicitly reinforce stigma. As a result, mental wellbeing policies function as optional, discretionary benefits rather than routine components of acceptable workplace behavior.

Moreover, the findings point to gender-differentiated policy effects, even when policies are formally gender-neutral. Women disproportionately reported hesitation to use mental wellbeing supports due to concerns about perceived commitment, professionalism, and leadership credibility. This suggests that existing policies may inadvertently reinforce gender inequities by failing to account for gendered expectations around availability and emotional regulation; unequal caregiving responsibilities; and power dynamics affecting women's willingness to disclose mental health needs. Through an equity lens, this indicates that employer mental wellbeing policies may benefit men more readily than women, not because of differential eligibility, but because of differential social and professional costs associated with use.

Women in supervisory or leadership positions identified a separate but related policy gap: uncertainty about how to encourage policy use among employees without reinforcing stigma or sacrificing productivity. This highlights the absence of implementation guidance for managers, leaving leaders to navigate mental wellbeing support on an *ad hoc* basis. This is a critical policy weakness. Without explicit organizational frameworks, supervisors become *de facto* policymakers, deciding when and how policies are "allowed" to be used. This undermines consistency and can perpetuate inequities across teams and departments.

A recurring theme in the findings is the perception that employers acknowledge mental wellbeing challenges while expecting individuals to manage stress independently. This reveals a deeper ideological tension embedded within current policies: mental wellbeing is framed as a personal resilience issue, rather than an organizational responsibility shaped by workload, staffing, and institutional expectations. From a policy standpoint, this framing limits effectiveness. Without addressing structural contributors to stress—such as billable hour expectations, chronic understaffing, or lack of flexibility—mental wellbeing policies risk serving a symbolic function rather than a remedial one. Policy effectiveness should be determined less by the presence of benefits and more by how organizations operationalize, communicate, and legitimize their use.

3.2.4 Research Question 3: Information Women Lawyers Want Decision Makers to Know

Women respondents' responses are summarized here and displayed in Table 5. Across responses, women lawyers expressed a strong desire for decision makers to understand that stress affecting mental wellbeing is not episodic, individual, or peripheral, but rather structural, cumulative, and closely tied to how legal work is designed and managed. Women emphasized that mental wellbeing challenges are not the result of personal weakness or lack of resilience, but of sustained exposure to high expectations, intense workloads, and organizational cultures that normalize chronic stress. Women frequently communicated that decision makers underestimate the long-term mental and emotional toll of legal work, particularly when stress is experienced continuously without adequate recovery, flexibility, or meaningful support. Respondents described stress as something that builds over time, often leading to burnout, disengagement, or difficult personal tradeoffs before it becomes visible or formally acknowledged.

Another recurring message was that decision makers need to recognize the disconnect between stated concern for mental wellbeing and lived workplace realities. Women noted that policies, statements, or benefits alone are insufficient if expectations around availability, productivity, and performance remain unchanged. In this context, stress is perceived as being implicitly accepted or even rewarded, while wellbeing is framed as an individual responsibility.

Women also wanted decision makers to understand that stress affects more than job satisfaction. Respondents linked ongoing stress to mental health, physical health, family relationships, retention, and professional longevity, suggesting that unaddressed stress has organizational consequences as well as personal ones.

Finally, women emphasized the importance of leadership behavior and accountability. Decision makers were described as setting the tone for what is acceptable, supported, and safe. When leaders model balance, encourage use of supports, and adjust expectations, stress is perceived as more manageable. When they do not, stress is amplified regardless of formal policies.

TABLE 5. KEY MESSAGES WOMEN WANT DECISION MAKERS TO UNDERSTAND

Key Message	Description	Illustrative Quote
Stress is systemic, not personal	Women want decision makers to understand that stress is produced by: • Workload expectations • Time pressures • Cultural norms around overwork and availability	"This is not about being resilient enough. The system is not designed for people to be well." "The expectation that we can just handle it ignores how the work is structured and rewarded."
Chronic stress has cumulative consequences	Respondents emphasized that: • Stress builds over time • Effects may not be immediately visible • Burnout often emerges after prolonged strain	"Stress doesn't show up all at once. It builds slowly until you are burned out or ready to leave." "By the time leadership notices a problem, people have already been struggling for a long time."
Policies without cultural change are insufficient	Women repeatedly highlighted that: • Written policies do not guarantee real support • Fear of stigma or professional consequences limits use • Culture and leadership behavior determine whether policies are effective	"You can have all the policies in the world, but if workloads don't change, nothing really improves." "Saying you support mental health while rewarding overwork sends a mixed message."
Stress impacts retention, performance, and longevity	Women linked unmanaged stress to: • Reduced engagement • Decisions to leave positions or the profession • Tradeoffs that affect career advancement	"Stress affects retention, morale, and long-term commitment to the profession, not just individual wellbeing." "People leave not because they don't care, but because the cost to their health is too high."
Leadership modeling matters	Decision makers were described as: • Gatekeepers of norms • Influencers of whether wellbeing is genuinely supported	"Leadership sets the tone. If leaders don't model balance, no policy will matter." "What decision makers do matters more than what they say."

3.2.5 Research Question 4: Recommendations of Women and Men for Educational Programs

What recommendations do women and men lawyers have for the types of educational programs needed to recognize stresses unique to women lawyers and mitigate the adverse impacts of these stressors?

Across responses, women and men lawyers emphasized the need for education that moves beyond awareness and into practical, structural change (see Table 6). Respondents were clear that educational efforts should not be limited to individual coping or resilience, but should instead help decision makers, managers, and colleagues recognize gender-specific stressors, understand their organizational impact, and adjust expectations and practices accordingly.

Many respondents described existing education or training related to mental wellbeing as too generic, optional, or disconnected from the realities of legal work. In contrast, respondents called for programs that are contextualized to legal practice, responsive to the lived experiences of women, and embedded into leadership development and organizational accountability structures.

Importantly, recommendations were not limited to women-focused audiences. Respondents frequently emphasized that men, supervisors, and senior leaders should be key targets of education, particularly those who shape workload expectations, advancement pathways, and workplace culture.

TABLE 6. KEY TYPES OF RECOMMENDED EDUCATIONAL PROGRAMS (WOMEN AND MEN RESPONDENTS)

Recommendation	Description of Recommendation	Illustrative Quote
Education to recognize gender-specific stressors	Respondents recommended programs that help participants: • Identify stressors that disproportionately affect women lawyers • Understand how caregiving, visibility, bias, and role expectations intersect with legal work • Recognize cumulative and less visible forms of stress	"There needs to be education on the realities women face that are not always visible, especially around caregiving and expectations outside of work." "Training should help people understand that women experience stress differently because the demands are different."
Leadership and management training	Recommended content included: • How leadership behaviors influence stress and wellbeing • How to support employees without stigma • How to align productivity expectations with wellbeing goals These programs were framed as foundational for building shared understanding across roles. Many respondents emphasized the need for education targeted at: • Partners • Supervisors • Decision makers • Managers of teams Leadership education was frequently described as more impactful than individual wellbeing training alone.	"Supervisors and partners need training on how their expectations directly impact mental health." "Education should be targeted at leadership, not just employees, because leadership sets the culture."
Training focused on organizational culture and accountability	Respondents recommended programs that: • Address norms around overwork and availability • Examine how policies are applied in practice • Encourage accountability for creating psychologically safe environments Education was seen as a mechanism to shift culture, not just to provide information.	"Generic wellness programs don't address the real issues in legal work." "More yoga or mindfulness isn't helpful if workloads and expectations stay the same."

TABLE 6. KEY TYPES OF RECOMMENDED EDUCATIONAL PROGRAMS (WOMEN AND MEN RESPONDENTS), *continued*

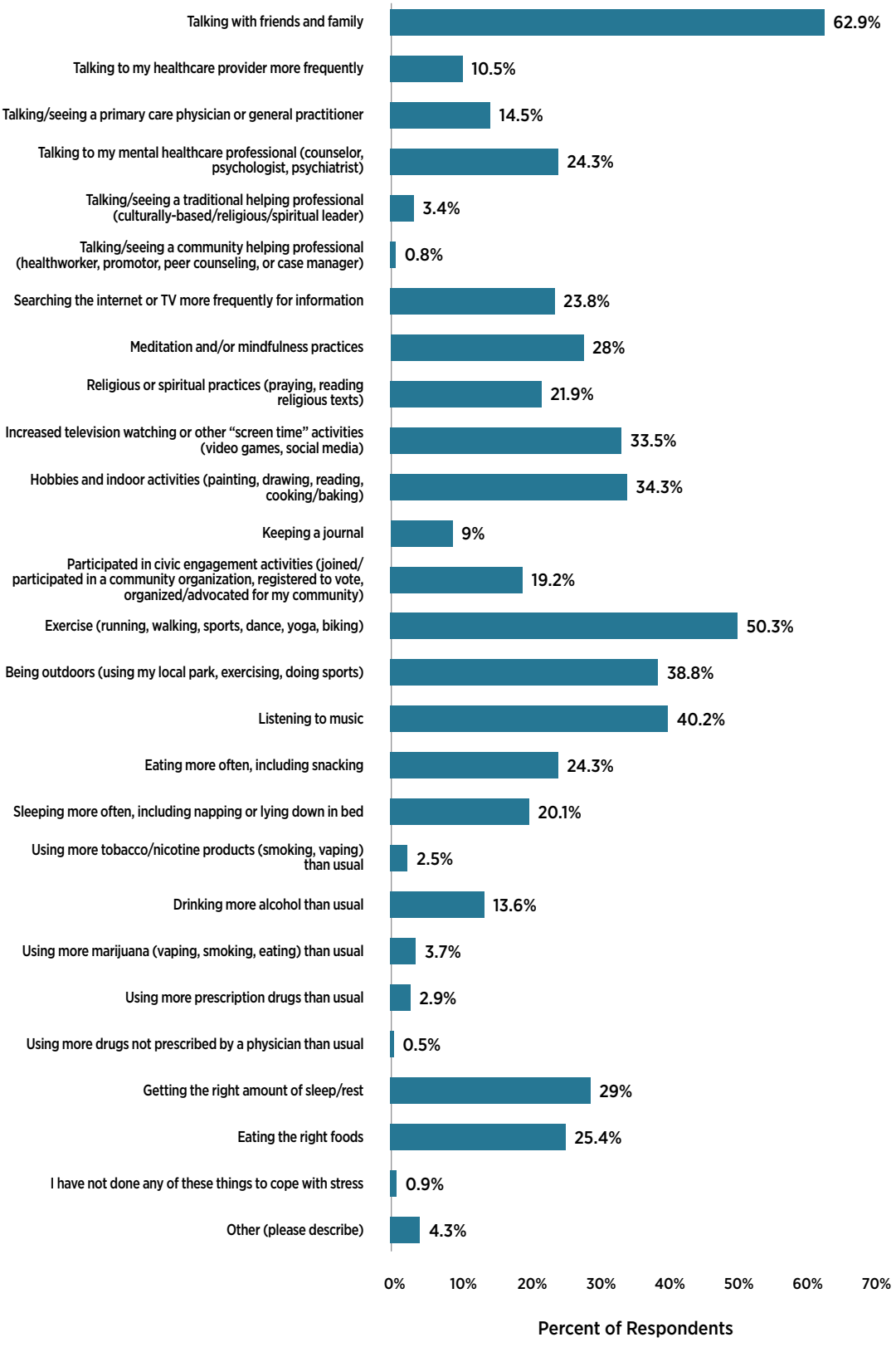
Recommendation	Description of Recommendation	Illustrative Quote
Practical guidance for supporting women employees	Women in supervisory roles recommended education that provides: • Concrete tools for supporting women employees • Guidance on discussing mental wellbeing appropriately • Clarity on how to encourage use of supports without negative consequences This type of training was described as especially important for mid-level leaders.	"Managers need concrete guidance on how to support women without penalizing them professionally." "Training should include how to have conversations about mental health without stigma."
Ongoing, integrated education rather than one-time training	Respondents frequently noted that: • One-time workshops are insufficient • Education should be ongoing and reinforced • Training should be integrated into onboarding, leadership development, and professional growth Sustained education was viewed as necessary to produce meaningful change.	"This can't be a one-time training. It needs to be ongoing and part of professional development." "Education should be built into leadership development and not treated as optional."

3.2.6 Research Question 5: Women Lawyers' Self-Care Methods to Mitigate the Adverse Impact of Stressors

Women respondents were asked to share any coping and self-care activities in which they engage to manage stress. The most mentioned strategies included talking with friends and family, endorsed by 62.9% of respondents. Other commonly reported strategies included listening to music (40.2%), exercise (50.3%), and being outdoors or using local parks (38.8%). Meditation or mindfulness practices were reported by 28% of respondents. Several coping strategies related to healthcare utilization were reported by smaller but notable proportions. These included talking to a mental healthcare professional (24.3%); talking to a primary care physician or general practitioner (14.5%); and talking to a healthcare provider more frequently (10.5%).

Behavioral and routine-related strategies included eating more often, endorsed by 24.3%, and sleeping more often, reported by 20.1%. Religious or spiritual practices were used by 20.9% and keeping a journal by 9%. Searching the internet or television for information was reported by 23.8%. Substance-related coping strategies were reported less frequently. Drinking more alcohol was reported by 13.6%, using more tobacco or nicotine products by 2.5%, and using more marijuana by 3.7%. Respondents could select all that apply. Figure 11 on the next page displays these data.

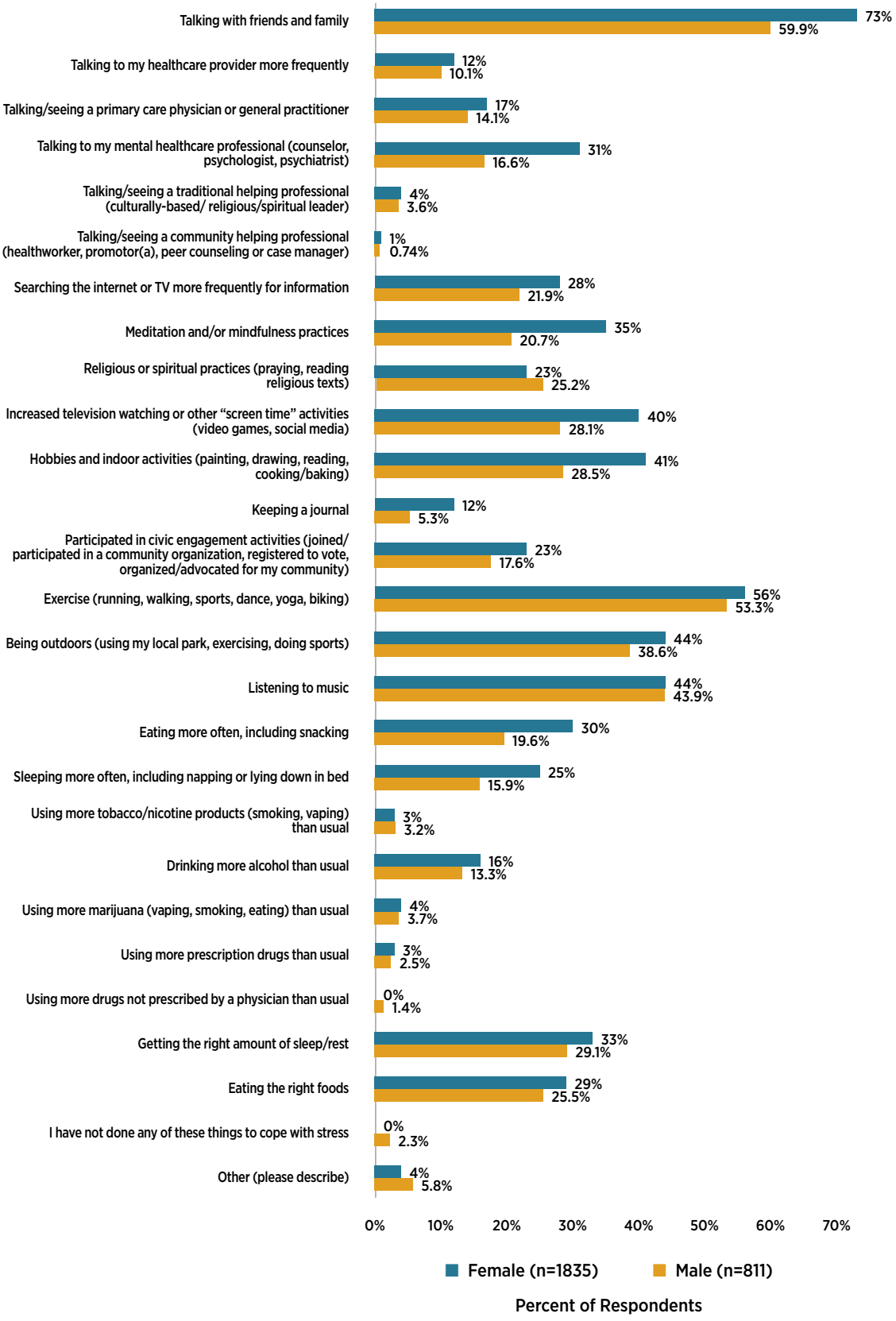
FIGURE 11. COPING AND SELF-CARE ACTIVITIES AMONG RESPONDENTS



Gender-Based Comparison of Self-Care Strategies Among Women and Men

Women reported higher use than men for most coping strategies, particularly interpersonal, mental health–related, and reflective approaches, while men were more likely to report not engaging in any listed coping strategies (see Figure 12 on the next page).

FIGURE 12. COPING AND SELF-CARE ACTIVITIES BY GENDER



Self-Care: Open-Ended Survey Responses (Women Only)

Across open-ended responses, women lawyers described a wide range of self-care strategies used to manage stress and support mental wellbeing. These strategies were often framed as necessary for survival within demanding professional environments, rather than optional or leisurely activities. Many women emphasized that self-care was something they had to be intentional and proactive about, particularly in the absence of sufficient organizational support. Table 7 displays the themes generated from the qualitative data and illustrative quotes.

Women frequently described self-care as occurring across multiple domains, including mental and emotional health, physical wellbeing, boundaries around work, and reliance on informal support networks. At the same time, many respondents acknowledged that self-care alone is often insufficient to fully offset structural and workplace-driven stress, particularly when workloads and expectations remain unchanged.

Importantly, self-care practices were not always framed as effective or sustainable. Some women described engaging in self-care reactively, during periods of heightened stress or burnout, rather than preventively. Others noted that limited time, fatigue, or guilt made consistent self-care difficult to maintain. Overall, responses suggest that women lawyers view self-care as an important coping mechanism, but one that exists within—and is constrained by—broader organizational and cultural contexts. For example, recurring themes across responses were the recognitions that:

- Self-care is often framed as an individual responsibility.
- Organizational expectations can undermine consistent self-care.
- Women may feel pressure to manage stress privately rather than seek systemic change.

This framing reinforces earlier findings that self-care cannot substitute for organizational responsibility, even though it plays an important role in individual coping.

TABLE 7. SELF-CARE STRATEGIES: QUALITATIVE THEMES (WOMEN ONLY)

Theme	Strategies/Techniques Identified	Description of Strategy/Theme	Illustrative Quote
Mental and emotional health supports	• Therapy or counseling • Mindfulness or meditation • Journaling or reflection • Stress management techniques	These strategies were often described as helpful for processing stress, managing anxiety, and maintaining emotional balance.	"Therapy has been essential for me to manage stress and stay mentally well." "Mindfulness and meditation help, but only when I can make time for them."
Physical health and wellbeing activities	Respondents referenced: • Exercise or movement • Rest and sleep • Attention to physical health needs	Physical self-care was frequently described as connected to mental wellbeing, though often difficult to prioritize consistently	"Exercise is one of the few things that helps me clear my mind and manage stress." "I try to prioritize sleep and taking care of my body, though it's not always possible."
Setting boundaries and limiting exposure	Some women described self-care as: • Setting limits on work hours • Taking breaks or time away when possible • Reducing availability outside of work hours	Boundary-setting was often framed as both protective and challenging within legal work cultures.	"I've had to learn to set boundaries around my time, even when it feels uncomfortable." "Taking breaks and saying no has become a form of self-care for me."
Social support and connection	Women described relying on: • Family • Friends • Colleagues • Peer networks	Social support was frequently cited as a key buffer against stress, particularly when organizational supports felt lacking.	"Talking with friends and family helps me cope when work feels overwhelming." "Having colleagues who understand what this work is like makes a big difference."
Adaptive or compensatory coping strategies	In some cases, respondents referenced: • Pushing through stress • Compartmentalizing emotions • Adjusting expectations of themselves	These strategies were often described as necessary but not ideal, highlighting limits of self-care in high-stress environments.	"Sometimes self-care looks like just pushing through because there isn't another option." "I compartmentalize a lot just to get through the day."

3.2.7 Research Question 6: Racial/Ethnic and Other Variations in Survey Responses

This section summarizes any observed differences by race and ethnicity related to types of stressors, mental health outcomes (depressive and anxiety symptoms), and wellbeing. This section also provides a general summary of differences by disability (accommodation) status.

3.2.7.1 Variations by Race and Ethnicity

Stressors

Women across racial and ethnic groups reported many shared stressors, particularly related to workload, time pressure, and workplace expectations. Some women from underrepresented racial and ethnic groups additionally described stress linked to visibility, representation, and navigating professional spaces where they felt marginalized or scrutinized. These observations are descriptive and preliminary. Across race and ethnicity groups, the open-ended stressors most frequently clustered around workplace culture, structural demands of legal practice, and experiences of bias or marginalization, though the content and framing of stressors differed by group. While many responses were single mentions, clear thematic patterns emerged within racial and ethnic groupings. Table 8 displays the key themes along with illustrative quotes by racial/ethnic group. The following summarizes the key themes for each racial/ethnic group.

Black Respondents. Black respondents most frequently identified stressors related to workplace culture, inequitable treatment, and heightened scrutiny. Responses often referenced feeling undervalued, needing to work harder to be perceived as competent, and navigating unwelcoming or exclusionary environments. Stress was frequently framed as ongoing and cumulative, tied to professional identity and day-to-day interactions rather than isolated events.

Dominant themes:

- Workplace culture and lack of support
- Differential treatment and bias
- Pressure to prove competence or legitimacy
- Emotional toll of navigating professional spaces

Hispanic/Latina Respondents. Among respondents who identified as Hispanic/Latina, stressors most often centered on financial pressure, job instability, and work–family demands, alongside experiences of marginalization. Responses frequently linked stress to economic precarity, limited access to advancement, and competing responsibilities both inside and outside the workplace. Stress was commonly described in practical and resource-focused terms.

Dominant themes:

- Financial and economic stress
- Job security and career advancement concerns
- Balancing work with family responsibilities
- Feeling marginalized within professional settings

White Respondents. White respondents most frequently cited general workplace stressors, including workload, time pressure, and the demands of legal practice. Responses were often broad and generalized, focusing on the profession itself rather than identity-specific experiences. Stress was typically framed as universal or inherent to legal work, with fewer references to discrimination or marginalization.

Dominant themes:

- Workload and time demands
- Structural features of legal practice
- Generalized stress associated with the profession
- Limited reference to stressors specific to their racial/ethnic or gender identity

Other Respondents. Due to small sample sizes, this group included Asian, South Asian, Middle Eastern/North African, Native Hawaiian, Pacific Islander, and American Indian/Alaska Native. Other respondents most often described stressors related to high performance expectations, pressure to succeed, and internalized stress. Responses frequently emphasized self-imposed pressure, fear of failure, and intense professional demands, with less emphasis on overt interpersonal conflict. Stress was often framed as internal, persistent, and tied to achievement.

Dominant themes:

- High expectations and performance pressure
- Chronic stress related to success and failure
- Emotional strain tied to professional standards
- Limited discussion of workplace relationships compared to other groups

TABLE 8. KEY STRESSOR THEMES IDENTIFIED WITH ILLUSTRATIVE QUOTES BY WOMEN LAWYERS BY RACE AND ETHNICITY (OPEN-ENDED RESPONSES)

Theme	Black – Summary & Quotes	Hispanic/ Latino – Summary & Quotes	Other Race/ Ethnicities– Summary & Quotes	White – Summary & Quotes
Workplace culture & treatment	Described unwelcoming environments, inequitable treatment, and heightened scrutiny. "Feeling like I constantly have to prove myself." "Being treated differently and not supported in the same way as others."	Highlighted marginalization and lack of support within professional settings. "Not feeling included or valued in the workplace." "It feels harder to advance or be taken seriously."	Referenced culture less often; when noted, framed as pressure-filled environments. "The expectations are very high and constant." "There is always pressure to perform."	Described culture in broad terms as stressful but inherent to the profession. "The culture of law practice is inherently stressful." "The profession itself creates stress."
Structural & economic stressors	Occasionally linked stress to access and opportunity constraints. "Opportunities don't feel equally available." "Advancement feels harder to achieve."	Frequently emphasized financial pressure, job security, and balancing work and family. "Financial pressure and lack of job security cause constant stress." "Balancing work demands with family responsibilities is overwhelming."	Less focus on finances; stress framed around workload and expectations. "The workload is intense and unrelenting." "There is little room to slow down."	Frequently cited workload, billable hours, and time pressure. "The workload and hours required are exhausting." "Billable-hour demands create ongoing stress."

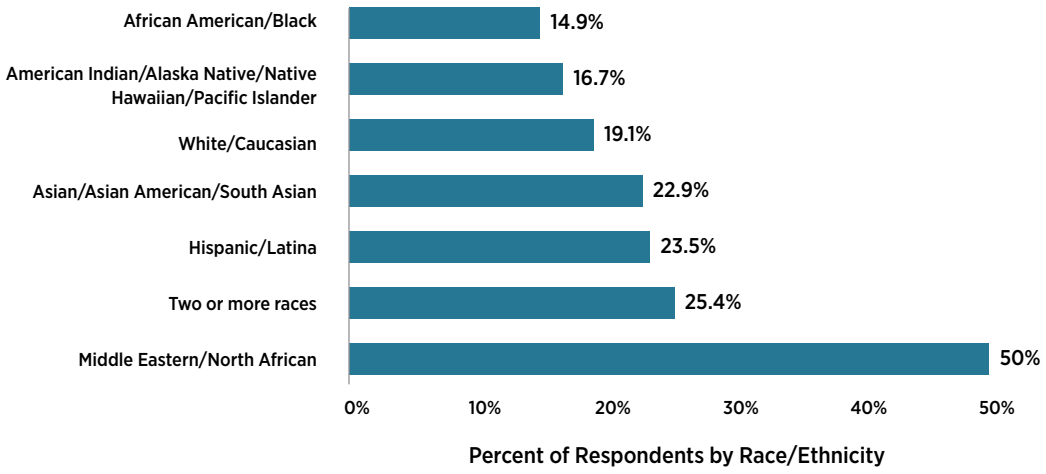
TABLE 8. KEY STRESSOR THEMES IDENTIFIED WITH ILLUSTRATIVE QUOTES BY WOMEN LAWYERS BY RACE AND ETHNICITY (OPEN-ENDED RESPONSES), *continued*

Theme	Black – Summary & Quotes	Hispanic/ Latino – Summary & Quotes	Other Race/ Ethnicities– Summary & Quotes	White – Summary & Quotes
Performance expectations & pressure	Linked pressure to visibility and scrutiny in professional spaces. "Mistakes feel more visible." "There is pressure to be perfect."	Occasionally referenced pressure to succeed while meeting external demands. "There is pressure to perform at a very high level." "Failure feels costly."	Most frequently emphasized internalized pressure, fear of failure, and high expectations. "The pressure to succeed is constant." "High expectations make it hard to ever feel at ease."	Referred to expectations as part of the profession rather than identity-based. "High expectations are part of legal work." "The job demands excellence at all times."
Emotional & mental strain	Stress described as cumulative and emotionally taxing. "The emotional toll builds up over time." "It's exhausting to always be on guard."	Described stress as persistent and draining, often alongside other pressures. "The stress never really goes away." "It feels overwhelming at times."	Focused on internal stress and difficulty sustaining wellbeing. "It's hard to ever relax." "The stress is always there."	Referenced stress and burnout in generalized terms. "Burnout is common in this profession." "The stress of the job never really goes away."

Mental Health and Wellbeing

Depressive Symptoms. Among women lawyers, there were some notable differences by race and ethnicity related to depressive symptoms. Among the sample of women lawyers who identified as Middle Eastern/North African (n=16), 50% reported scores of 3 or higher, suggesting they may warrant further clinical evaluation for depression. Of those who identified as multiracial (two or more races; n=93), Hispanic/Latina (n=155), and Asian/Asian American and South Asian combined (n=90), 22 to 25 percent of women lawyers scored 3 or higher on the depressive symptoms. It should be noted that the sample sizes for these groups are small. Lawyers who identified as African American/Black (n=229), the combined group of American Indian/Alaska Native and Native Hawaiian/Pacific Islander (n=32), and White/Caucasian (n=2,114) had smaller percentages of lawyers than these other groups who had total depressive scores of 3 or higher (15%, 17%, and 19%, respectively). Figure 13 displays these data.

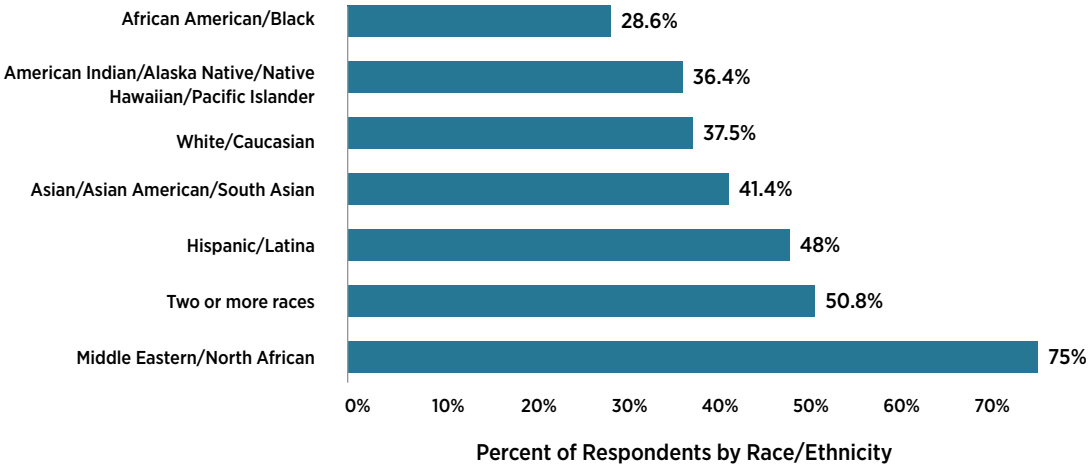
FIGURE 13. DEPRESSIVE SYMPTOMS BY RACE/ETHNICITY (PERCENT OF WOMEN LAWYERS SCORING 3 OR HIGHER)*



**Note: To analyze data by race and ethnicity, some racial and ethnic groups were combined to provide an adequate sample size for analysis: Asian/Asian American and South Asian groups were combined into one group; and American Indian/Alaska Native and Native Hawaiian/Pacific Islander were combined into one group due to small sample sizes. Total symptoms scores of 3 or higher warrant further clinical evaluation for depression.*

Anxiety Symptoms. While the sample of lawyers who identified as Middle Eastern/North African was small (n=16), 75% had anxiety symptoms scores of 3 or higher, which warrants further clinical evaluation for anxiety. Those who identified as multiracial (two or more races), Hispanic/Latina, and Asian/Asian American/South Asian also had a larger percentage of lawyers who scored 3 or higher on the anxiety symptoms items than other groups, but these groups' numbers are small. Lawyers who identified as African American/Black had the smallest percentage of respondents (29%) with scores of 3 or higher. Figure 14 displays these data.

FIGURE 14. ANXIETY SYMPTOM SCORES BY RACE/ETHNICITY (PERCENT OF WOMEN LAWYERS SCORING 3 OR HIGHER)*



**Note: Some groups were combined as described earlier due to small numbers. Total scores of 3 or higher on the anxiety symptoms warrant further clinical evaluation for anxiety.*

Wellbeing. As shown in Table 9, women lawyers are relatively similar in their well-being scores as averaged by racial/ethnic groups, ranging from a mean of 60 (highest score is 100) down to 51.2. African American/Black women lawyers reported the highest mean wellbeing score (60) as compared to other racial/ethnic groups. The other groups' average scores were clustered in a range from 51 to 56. However, the "mode" (the most frequently reported score) for each group ranged from 60 to 80, indicating some women have relatively higher wellbeing scores than most of their respective racial/ethnic group.

TABLE 9. WELLBEING SCORES AMONG WOMEN LAWYERS BY RACE/ETHNICITY (MEAN, RANGE, MODE)*

Race/Ethnicity	Number of People	Mean Score (SD)	Range	Mode
African American/Black	194	60 (22.9)	0–100	80
Asian/Asian American/South Asian	75	56 (25.9)	0–100	80
American Indian/Alaska Native/ Native Hawaiian/Pacific Islander	25	55.8 (25.5)	0–100	70
North African/Middle Eastern	16	51.2 (24.2)	10–100	60
Hispanic/Latina	116	55.3 (22.7)	0–100	60
White/Caucasian	1,399	55.2 (23.7)	0–100	60
Two or more races	73	52.5 (21.3)	10–100	60

**Note: Scores range from 0 to 100 with higher scores indicating greater wellbeing. SD=Standard Deviation.*

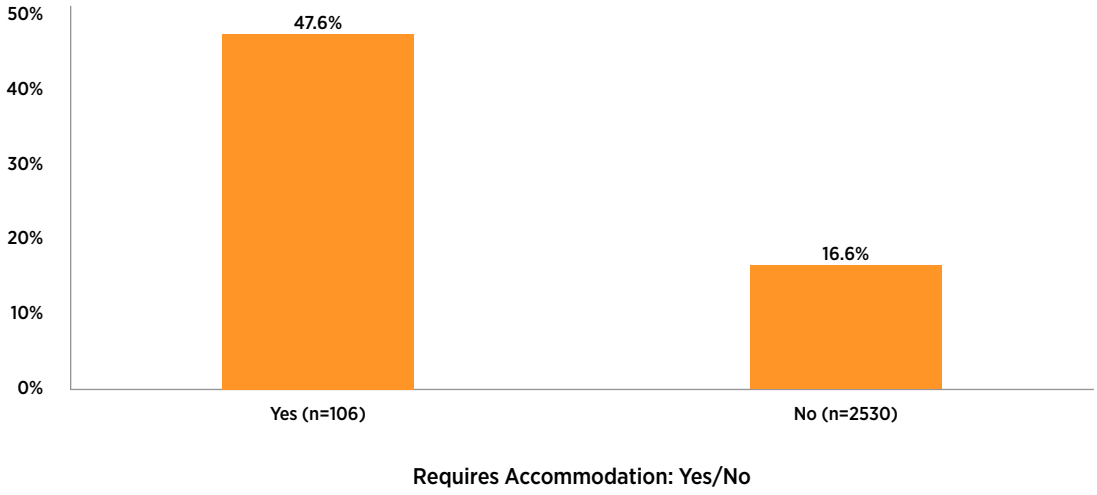
3.2.7.2 Variations by Other Lawyer Characteristics

In this section, findings are reported for differences in mental health and wellbeing based on variations related to disability (accommodation) status, sexual orientation, and parent/caregiver status.

Disability/Accommodation Status

Depressive Symptoms. Among the lawyers who took the Survey, 4% or 106 lawyers required accommodations to work their job. Respondents who required accommodations to complete their work tasks had a larger percentage of PHQ-4 scores of 3 or higher (47.6%) on the depressive symptoms items compared to those who did not report requiring accommodations to complete work tasks (16.6%). Figure 15 summarizes these data.

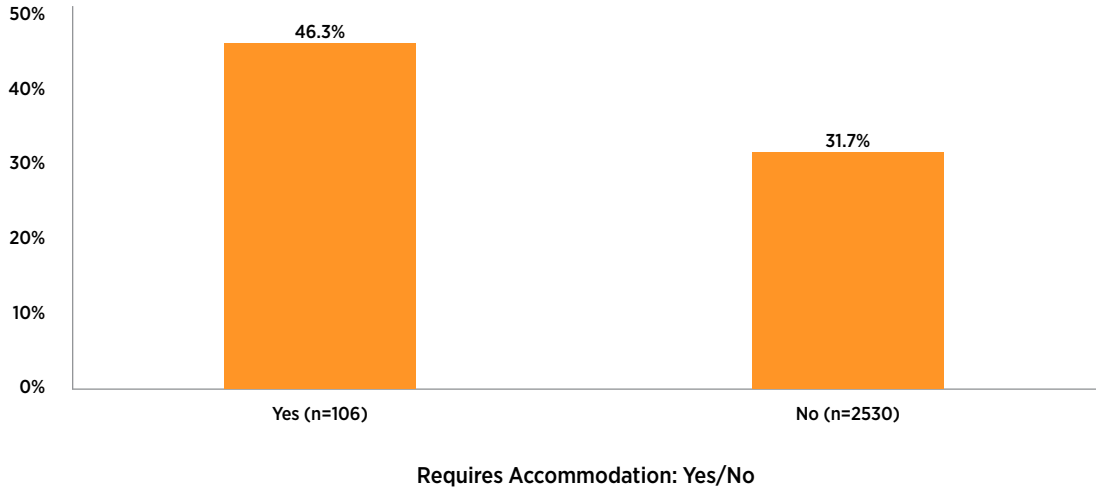
FIGURE 15. DEPRESSIVE SYMPTOMS BY ACCOMMODATION STATUS (PERCENT REPORTING SCORES OF 3 OR HIGHER)*



Scores of 3 or higher warrant further clinical evaluation for depression.

Anxiety Symptoms. Respondents who required accommodations to complete their work tasks had a larger percentage of PHQ-4 scores of 3 or higher (46.3%) on the anxiety symptoms items compared to those who did not report requiring accommodations to complete work tasks (31.7%). Figure 16 summarizes these data.

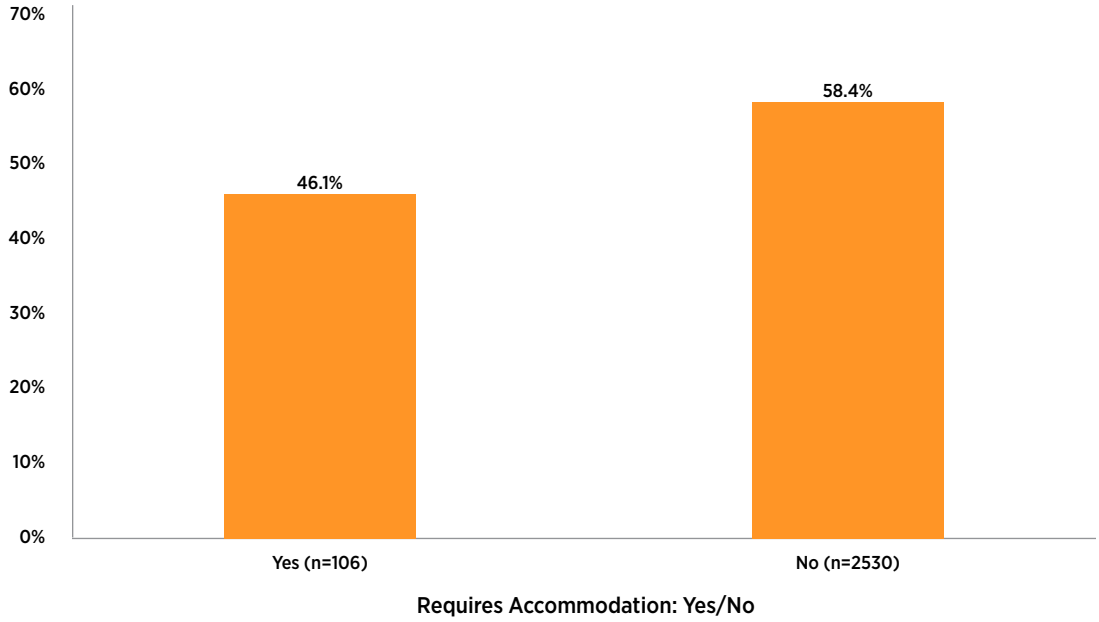
FIGURE 16. ANXIETY SYMPTOM BY ACCOMMODATION STATUS (PERCENT REPORTING SCORES OF 3 OR HIGHER)*



**Note: Scores of 3 or higher warrant further clinical evaluation for anxiety.*

Wellbeing. Lawyers who required accommodations reported an average wellbeing score of 46.1 (highest score is 100), while their colleagues who did not need accommodations had a higher mean score of 58.4, suggesting better wellbeing for the latter group. Figure 17 displays these data.

FIGURE 17. AVERAGE OVERALL WELLBEING SCORE BY ACCOMMODATION STATUS*

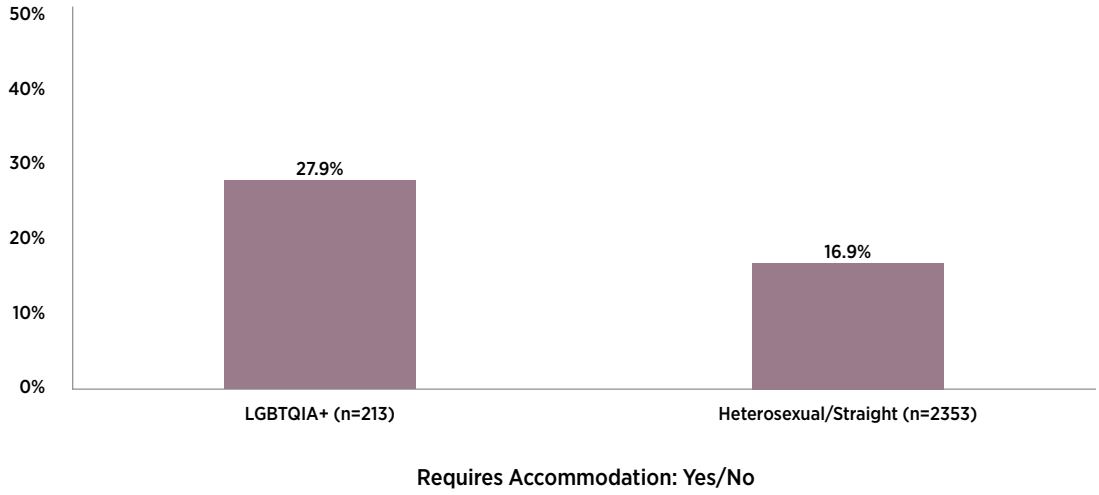


**Note: Scores range from 0 to 100, with higher scores indicating greater wellbeing.*

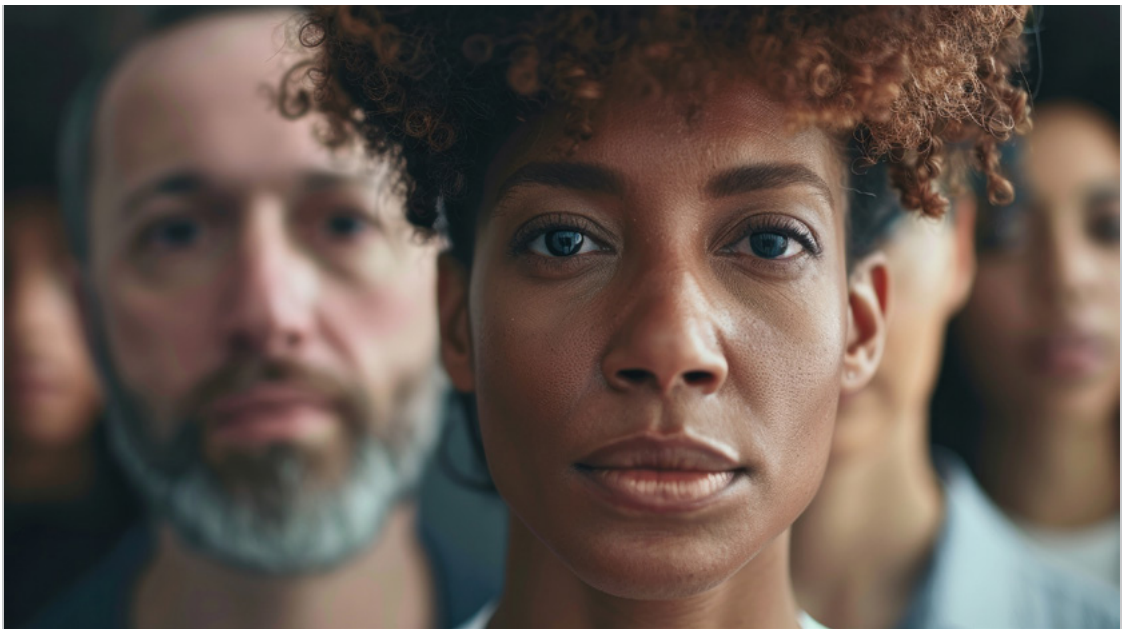
Sexual Orientation

Depressive Symptoms. Over a quarter (n=53; 27.9%) of the lawyers who identified as LGBTQIA+ had a score of 3 or higher on the depressive symptoms items, while 16.9% (n=354) of the lawyers who identified as heterosexual/straight reported scores of 3 or higher on the depressive symptoms. This suggests that more lawyers who identify as LGBTQIA+ may warrant further clinical evaluation for depression as compared to their heterosexual/straight-identifying colleagues. Figure 18 displays these data.

FIGURE 18. DEPRESSIVE SYMPTOMS BY SEXUAL ORIENTATION (PERCENT OF LAWYERS SCORING 3 OR HIGHER)*

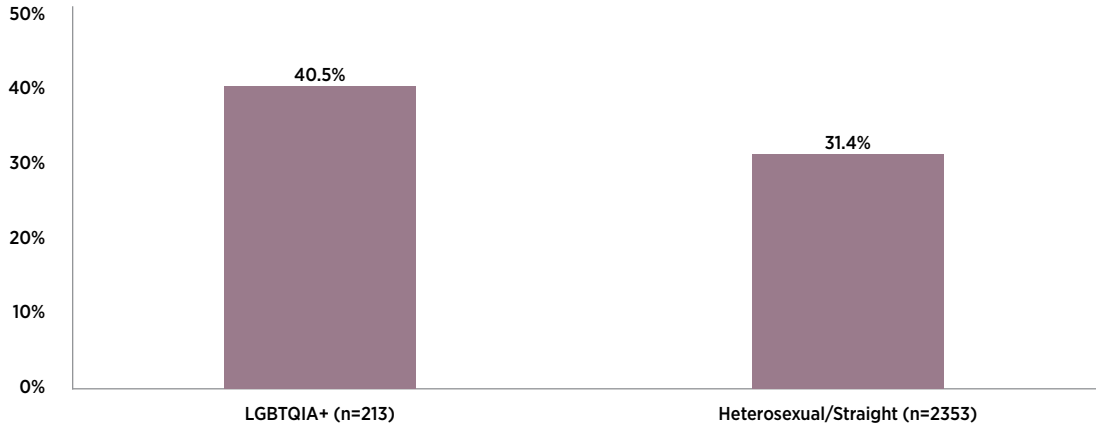


**Note: Scores of 3 or higher warrant further clinical evaluation for depression.*



Anxiety Symptoms. Among lawyers who identified as LGBTQIA+ (n=213; 8.3%), almost half (n=77; 40.5%) had a score of 3 or higher on the anxiety symptoms, while 31.4% (n=658) of lawyers who identified as heterosexual/straight reported scores of 3 or higher for anxiety symptoms. This suggests that lawyers who identify as LGBTQIA+ may be more likely to warrant further clinical evaluation for anxiety than their heterosexual/straight-identifying colleagues. Figure 19 displays these data.

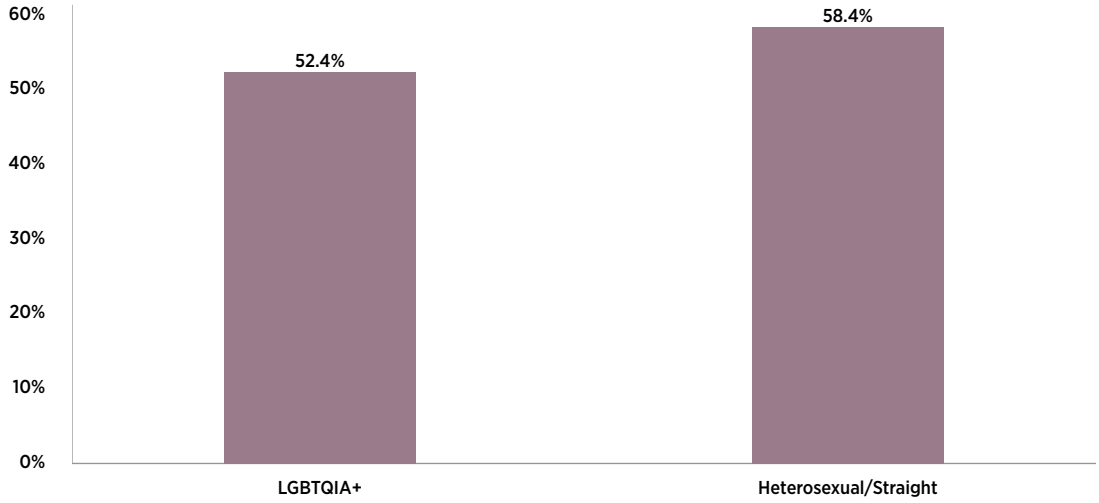
FIGURE 19. ANXIETY SYMPTOMS BY SEXUAL ORIENTATION (PERCENT SCORING 3 OR HIGHER)*



**Note: Scores of 3 or higher warrant further clinical evaluation for anxiety.*

Wellbeing. Scores ranged from 0 to 100, with higher scores reflecting better wellbeing. Lawyers who identified as LGBTQIA+ reported an average wellbeing score of 52.4, while their heterosexual/straight colleagues had a higher mean score of 58.4, suggesting that lawyers who identify as heterosexual/straight have greater wellbeing where they feel happy, calm, and peaceful as compared to their LGBTQIA+ colleagues. Figure 20 displays these data.

FIGURE 20. AVERAGE WELLBEING SCORES BY SEXUAL ORIENTATION*

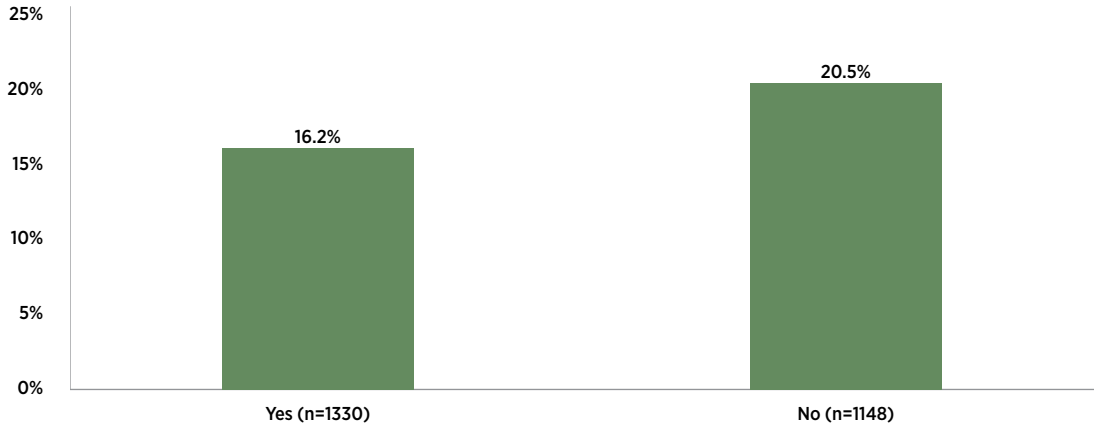


**Note: Scores range from 0 to 100, with higher scores indicating greater wellbeing.*

Parent/Caregiver Status

Depressive symptoms. Among parents/caregivers, a smaller percentage had depressive symptoms scores of 3 or more (16.2%) compared to lawyers who were not parents or caregivers (20.5%). Lawyers who were not parents/caregivers may be at a greater risk for poor mental wellbeing. Figure 21 summarizes these data.

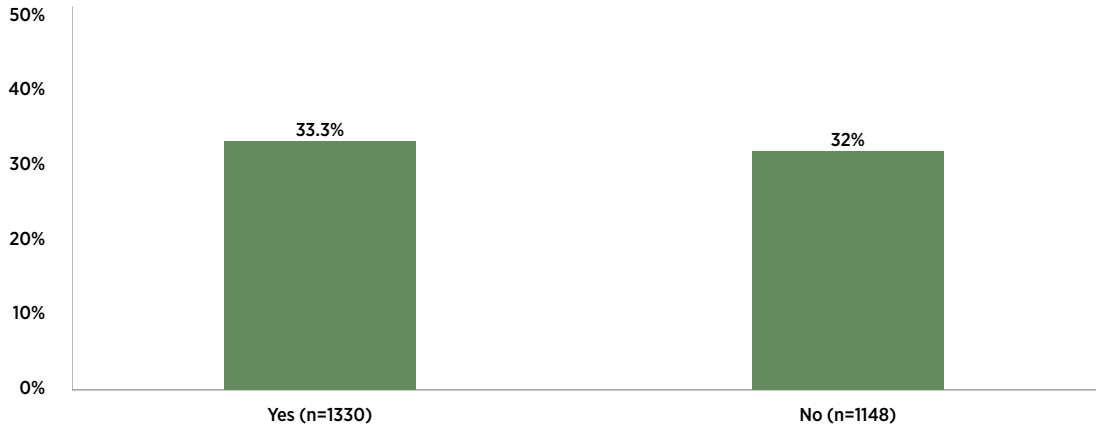
FIGURE 21. DEPRESSIVE SYMPTOMS BY PARENT/CAREGIVER STATUS (PERCENT REPORTING SCORES OF 3 OR HIGHER)*



**Note: Scores of 3 or higher warrant further clinical evaluation for depression.*

Anxiety Symptoms. Parents/caregivers had anxiety symptoms scores of 3 or higher at a similar rate (n=424; 33.3%) as their colleagues who were not parents/caregivers (n=351; 32%). Figure 22 displays these data.

FIGURE 22. ANXIETY SYMPTOMS BY PARENT/CAREGIVER STATUS (PERCENT REPORTING SCORES OF **3 OR HIGHER**)*



**Note: Scores of 3 or higher warrant further clinical evaluation for anxiety.*

4.0 Focus Groups

4.1 Background

As a key component of the Research, Focus Groups were conducted to determine the stressors that impact the mental wellbeing of women lawyers. The Focus Groups were held to supplement and amplify and provide qualitative data that would potentially support the quantitative data obtained through the online Survey conducted as a part of this Research.

The primary goal of the Focus Groups was to gather qualitative data to determine whether women lawyers across varying demographics and practice areas experience challenges to their mental wellbeing (i.e., the stressors that impact mental wellbeing) and whether the experiences are different than those of men; whether bias plays a role; how various stressors manifest themselves; and whether there are common themes among women participants and common themes expressed by both men and women. Ultimately, the aim is to determine whether the experiences can be converted into recommendations that are executable and sustainable to improve the mental wellbeing of lawyers and, in particular, women lawyers.[4]

The strategy for the Focus Groups was to ensure that data were gathered in a confidential and comprehensive manner. To ensure that the Research was as comprehensive as possible, as with the Survey, men were strongly encouraged to participate in the Focus Groups. While there was no male participation in some of the Focus Groups, they participated in most of them. Moreover, men must be a part of and included in the conversation.

Anecdotally, men who lead law firms are drawn from the equity partner ranks. According to the National Association for Law Firm Placement (NALP), men comprise more than 75% of equity partner roles in law firms.[5] Consistent with this NALP data, according to AmLaw Leadership Surveys, men hold 80–85% of managing partner or chair roles in law firms.[6] The *National Law Journal* reported similar results.[7] Inasmuch as men still dominate leadership roles, particularly in law firms, the impact of mental wellbeing of women lawyers cannot be viewed in a silo. It is crucial that men be included in any conversations impacting the mental wellbeing of women lawyers.

To ensure maximum confidentiality, lawyers in the Focus Groups were asked to sign a Participation Agreement. Included in the Agreement was a commitment to maintaining confidentiality. As a reinforcement of that commitment, at the beginning of each Focus Group, the importance of confidentiality was explained to participants. To further ensure confidentiality, quotes contained in this Report are not reflective of any one individual. To maintain confidentiality and anonymity, quotes have been amalgamated. To the extent, however, that explicit authorization was provided, the exact quote has been included.

4. Krill, Johnson & Albert, *Substance Abuse Use & Mental Health Among At*torneys (ABA & HBFF 2016); Patrick R. Krill, Ryan Johnson & Linda Albert, *The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys*, 10(1) J. Addiction Med. 46–52 (2016); ABA CoLAP "Study on Lawyer Impairment."

5. Nat'l Ass'n for Law Firm Placement, 2024 Report on Diversity in U.S. Law Firms (2025), https://www.nalp.org/uploads/Research/2024-25_NALPReportonDiversity.pdf.

6. ALM Intelligence & The American Lawyer, 2025 Am Law 100 (April 15, 2025), last visited May 29, 2026).

7. *The 2025 NLJ 500: Ranked by Head Count*, Law.com (June 5, 2025), https://www.law.com/nationallawjournal/2025/06/05/the-2025-nlj-500-ranked-by-head-count/.

More than 300 lawyers registered for the in-person and virtual Focus Groups across all demographics and practice areas. This number of registrants highlights the importance of this Research.

The data obtained from the Focus Groups were rich and insightful. While every experience shared is significant, with more than 40 hours of information gathering (including several one-on-one conversations), unfortunately, every singular experience cannot be captured in this Report. However, there were common themes, noted later, that capture the essence of all experiences shared during the Focus Groups. Additionally, other themes that highlight variances among demographics have been included along with themes where there was not complete consensus among Focus Group participants but generated significant discussion in several Focus Groups.

4.2 Focus Group Methodology

Twelve Focus Groups were conducted, of which eight were held virtually and four were held in person. The four Focus Groups held in person were in San Diego, California; Detroit, Michigan; New Orleans, Louisiana; and Philadelphia, Pennsylvania. These cities were chosen because there was an interest in seeking a different type of diversity of thought on the issue of mental wellbeing. Traditionally, Focus Groups are not held in what may be considered secondary cities as opposed to cities such as New York, Atlanta, Chicago, and Los Angeles. Moreover, the virtual Focus Groups provided an opportunity to participate no matter the geographic location.

For the purpose of this type of highly sensitive research relating to mental wellbeing, it was important to have in-person Focus Groups, which generally create a more comfortable environment to share experiences of a sensitive nature. When the facilitator of the Focus Group is present in the room with participants, empathy and trust are fostered among participants, creating a more supportive environment and sometimes causing them to be less inhibited. Additionally, the facilitator is better able to observe non-verbal cues (e.g., hesitancy by someone wanting to speak) like body language and facial expressions.

In-person Focus Groups also allowed for more intimate conversations without the potential for distractions. The thought was that there would possibly be a richer exchange of information with participants knowing exactly who was in the room. Finally, it was also important to have in-person Focus Groups in the four primary regions of the United States to ensure geographic diversity.

There were, however, very important advantages to having both in-person and virtual Focus Groups. Virtual Focus Groups allowed for the opportunity for individuals to participate no matter their location or time zone, and virtual participation also allowed in several instances for women to continue to attend to their other responsibilities. In these instances, like the women who participated in the ABA CWP Caregiver Study,[8] virtual Focus Groups provided an opportunity for several women to care for their children while simultaneously participating in the Focus Group. This highlighted the fact that caregiving for women in particular is an ongoing concern that affects their mental wellbeing.

The required employment time and other responsibilities was also a key factor in conducting virtual Focus Groups. Participants were not required to spend time traveling.

As noted, and as with the Survey, confidentiality was crucial to having effective and meaningful participation in the Focus Groups. At the beginning of each Focus Group (both virtual and in person), in addition to participants being cautioned concerning confidentiality, they were also cautioned concerning revealing personal medical and health information. When sharing experiences concerning mental wellbeing, from time to time, it is not possible to extract matters concerning wellbeing from personal health information. Yet, as will be revealed further, there were some participants who viewed sharing their personal health information as vital to understanding their mental wellbeing experiences.

The number of participants in each Focus Group varied. Participants in the Focus Groups represented every geographic area in the United States and at least one U.S. territory. There were participants from Hawaii to Massachusetts and California to Florida and most states in between. It was helpful to the Research to also have perspectives from those participants from the Midwest and states in the Great Plains region of the country. Participants were from rural, suburban, and urban areas. Participants worked in government, non-profit organizations, law firms, and academia. Participants also included judges (both active and retired) and those who are self-employed.

Participation in the Focus Groups was not limited to members of the American Bar Association. Participation was open to all who identified as attorneys. To ensure that experiences, thoughts, and opinions were captured across as many demographics as possible, there were a number of means by which participants of Focus Groups were recruited.

8. Stephanie A. Scharf, Roberta D. Liebenberg & Paulette Brown, Legal Careers of Parents and Child Caregivers: Results and Best Practices from a National Study of the Legal Profession (Am. Bar Ass'n Comm'n on Women in the Pro. 2023).

As a part of this research, there was an active Advisory Committee whose co-chairs and members provided resources and conducted personal outreach to prospective Focus Group participants. Members of the greater CWP also assisted with outreach. Additionally, invitations to participate in Focus Groups were sent to a wide swath of bar associations, including but not limited to local and national women's bar associations, ethnic and racially diverse national and local bar associations, and LGBTQIA+ local and national bar associations, as well as predominantly White local and national bar associations. Invitations were also extended to individuals who did not identify as a member of any bar association. Invitations were sent to law schools, law school organizations, the judiciary, judicial membership organizations, and various governmental entities. There was a concerted effort to be as inclusive as possible.

Because confidentiality was, as noted, crucial to the process of removing inhibitions for participation in the Focus Groups, care was taken in providing details for each of the Focus Groups. Invitations without details were sent to potential participants, and only once registered would they be given the location of the Focus Group, if in person, or the Zoom log-in information, if virtual. The identity of the participants, in advance of the Focus Groups, was only known to the ABA team member assisting in the coordination of the Focus Groups.

To ensure that there was a good cross-section of practice areas and components of the legal profession, certain audiences were targeted for participation. For example, additional recruiting efforts were made for law professors and/or people who worked in academia, the judicial system, government, and the non-profit sector.

The methods used to recruit individuals to participate in the Focus Groups were varied and expansive. Those additional efforts yielded very positive results, including but not limited to a significant number of participants from the legal academy, judges at all levels, members of the LGBTQIA+ community, and several lawyers with self-identified disabilities.

Virtual Focus Groups were held on several different dates and the times varied to capture potential participants from all US time zones. The following includes the dates for the virtual Focus Groups as well as a brief description of the composition and responsiveness of each Group:

- October 30, 2025
  - This first virtual Focus Group was very diverse in all respects with the exception of male participation. Multiple generations were represented as well as varied legal disciplines and racial and ethnic diversity. Women with disabilities and women who identified as being a part of the LGBTQIA+ community also participated.

- November 6, 2025
  - This was a very active Focus Group. None of the participants had to be coaxed into responding to any of the questions. There was male participation in this Focus Group. This Focus Group had several participants who worked in the public sector.
- November 13, 2025
  - In this Focus Group, many participants were judges or retired judges. There were a few who owned their own firms and some who worked in government, and "big law" was also represented. This group had participants from every geographic region of the United States, there was a participant who identified as LGBTQIA+, and every race and ethnicity was represented. There was one male participant in this Focus Group.
- November 18, 2025
  - This was a smaller group resulting in the sharing of very detailed and personal experiences, demonstrating how mental wellbeing and physical wellbeing can be intertwined. Although it was emphasized that personal health information should not be revealed, participants in this Focus Group shared egregious acts committed against them affecting their wellbeing. The participants had varied practices and primarily were from the Midwest and Eastern regions of the country.
- November 19, 2025
  - This Focus Group was populated with both men and women. Men initially chose to be listeners rather than full participants. As with other Focus Groups, the participants were geographically diverse and included members of every racial and ethnic group.
- December 9, 2025
  - Members of this Focus Group were not as talkative as some of the other groups but nevertheless had thoughts about how the legal profession can be more accommodating to women who are caregivers of children.
- December 16, 2025
  - This group had more participants from the legal academy than many of the other Focus Groups. Initially, many of them did not consider themselves as "practitioners." When advised that indeed they are, they freely shared experiences. Some participants were from what is considered to be a rural area. Prior to going to the government, several participants worked in law firms.

- January 6, 2026
  - This Focus Group was the most populated. It also had the most male participation of all virtual Focus Groups. Several of the participants were with non-profit organizations and had different and mostly more positive experiences than those working in non-profits who participated in earlier Focus Groups.

Four in-person Focus Groups were held. All were held at the same time of day, 1 p.m.–3 p.m. in their time zone, incorporating lunch to ensure minimal disruption to the participant's day.

- San Diego, CA, October 9, 2025
  - In the San Diego Focus Group all participants (21 at various points in time) were women. While two men registered for this Focus Group, neither was able to attend. The women who participated represented several generations, various racial and ethnic backgrounds, and a diversity of practice areas. There were several bar leaders, past and present.
- Detroit, MI, November 4, 2025
  - Although it was election day in Detroit, more than 15 lawyers, judges, women, and men participated in the Focus Group. There were three men who participated in this Focus Group who needed no prompting to voice their own experiences as well as their observations concerning women. There were participants who held positions at the highest levels of their organizations.
- New Orleans, LA, December 4, 2025
  - Extreme weather in New Orleans likely affected attendance but there were 11 participants, most of whom were in private practice. The Focus Group included one retired lawyer and one retired judge. There was also one person in academia. No men participated in this Focus Group. All the participants, with the exception of the two retirees, are included in the generation known as Millennials.
- Philadelphia, PA, December 11, 2025
  - Philadelphia was the final in-person Focus Group. This was likely the most diverse of all the in-person Focus Groups, with representation of most racial and ethnic identities, the LGBTQIA+ community, different genders, and different practice areas. There were also bar leaders who participated in this Focus Group. There were approximately 15 participants in the Philadelphia Focus Group.

A fifth in-person Focus Group was scheduled to be held in Phoenix, Arizona, specifically designed to capture the Native American experience. However, while that Focus Group did not go forward, Native American lawyers did participate in other Focus Groups and shared their experiences.

There was a common set of questions posed to the participants of each Focus Group. On occasion, follow-up questions were necessary based upon some of the responses from the participants to a previous question. More specifically, the questions were designed to elicit how women and men experience stress and/or what triggers stress that impacts their wellbeing and ability to practice law. Additionally, there were questions focused on various sectors of the legal profession, e.g., in-house; judiciary; government (other than the judiciary); large firm; small and medium-sized firms; not-for-profit; and the legal academy. Additionally, there were targeted questions based upon the demographics of the participants. Specific questions were asked to determine whether stressors were different for women of different racial and ethnic backgrounds and gender identity and those with disabilities and the impact of such stressors. The Focus Groups generally concluded with an examination of workplace policies; accommodations needed (e.g., for a disability); self-care strategies; and recommendations for better systems to support wellbeing and understanding of women's unique challenges in the legal profession.

Focus Group members were invited to speak freely and reminded repeatedly of the confidentiality of the process of the Focus Groups. What generated the most animated discussions in the Focus Groups is when participants were asked whether women are treated differently than men in the legal profession. As a follow-up to responses to that question, participants were asked whether those differences affected their wellbeing.

When asked about the stressors that impacted mental wellbeing, participants shared very personal experiences and, in many instances, emotions ran very high. For some, the experiences were heart-wrenching, causing the Focus Groups to be paused. Several participants shared that the mental stressors caused physical health issues.

4.3 Focus Group Findings

4.3.1 Key Focus Group Common Themes

1) Women and men continue to be treated differently in the workplace.
One of the very first questions posed in each Focus Group was whether men and women are treated differently in the legal profession. The response from both men and women was a resounding "yes." The issues women reported in past studies[9] that adversely affected them still persist in 2025 and 2026 according to Focus Group participants. From the courthouse to law firms, men are given deference and the benefit of the doubt whereas women are not. Women are still often second guessed and minimized. Women reported that consistent minimization and having to prove themselves over and over caused stress. When participants spoke of the concept of "emotional labor," women (for instance) shared, "[W]omen are required to 'police' their behavior."

Woman from the Midwest:

> "*When I am in the courtroom, I am referred to as intense when I am arguing my case when there is male counsel on the other side who is far more intense than I am, but he does not get the same description.*"

Millennial female from the East Coast:

> *"As a young attorney, when there were meetings in chambers, there were conversations between judges and male attorneys who obviously knew each other and would talk about subjects other than the case and have conversations that I would not be privy to. It made me understand that I had to be overprepared for every matter I had before that judge."*

Several women made similar comments to the two below:

> *"I am often mistaken for someone else, like the court reporter or paralegal. That does not happen with men. It is automatically assumed that the man is the lawyer."*

> *"Men don't have to think about how much time they have to take away from their career objectives to raise a family. Even men who are involved with caregiving responsibilities when considering their career trajectory don't have to contemplate what the next steps are, unlike women."*

9. Janet E. Gans Epner, Visible Invisibility: Women of Color in Law Firms (Am. Bar Ass'n Comm'n on Women in the Pro. 2006); Roberta D. Liebenberg & Stephanie A. Scharf, Walking Out the Door: The Facts, Figures of Experienced Women Lawyers in Private Practice (Am. Bar Ass'n Comm'n on Women in the Pro. 2019).

A male judge:

> *"If a man is aggressive in the advocacy of his client, he is looked at positively. If a woman does the same thing, she is viewed in not so pleasant terms."*

2) Both men and women agreed that women have more responsibilities within the work environment for which they get no "credit."

Women from several Focus Groups shared:

> *"Women are often required to serve on multiple firm committees for which they get no billable hour credit, whereas men are not."*

> *"In meetings, I am still asked to be the note taker."*

Woman in her second legal career:

> *"You are expected to be the soft police and deal with weeping victims."*

Some women shared their experiences working for a female:

> *"I'm sitting here listening and I have to say that it is making me reflect on how fortunate I am because my current supervisor is a female and I previously worked for a female judge."*

> *"I am heartbroken about the things I am hearing because my female bosses in the government were nothing like what is being described and I have just taken my situation for granted."*

3) Men and women experience stress differently: There is no even distribution of stress.

In only one Focus Group did any men express that they experienced stress.

Male lawyer in his 60s speaking of his physical health challenges:

> *"Mental stresses can cause physical harm. And physical health challenges can affect mental wellness."*

Young male partner:

> *"I didn't know women were experiencing these things. I didn't know."*

Male leader of an organization in his 50s:

> *"I have never seen a man have to think about some of the things that cause women stress. [His] partner very often carries most (caregiving and household) responsibilities that empower [him], free [him] up to do the work he has been doing."*

4) Implementation of mental wellbeing policies is a challenge.

To the extent that there were written policies focused on wellbeing, there were none designed specifically for women and no policies with provisions that specifically addressed women's mental wellbeing. Most Focus Group participants, especially the women, were aware that their organizations had policies and resources related to wellbeing. Most shared that they did not use the benefits provided for in the policies, particularly the counseling services, because of a lack of trust.

It is worthy of note that one policy, according to a participant, allowed for days off during the month of May, "Mental Wellness Month." Those who shared experiences of flexibility relating to time off for wellbeing were in organizations led by women. Most of those policies, however, were informal.

5) Parenting/caregiving responsibilities are key stressors that impact mental wellbeing.

The "motherhood penalty" is alive and well as shared almost universally among Focus Group participants.

Mid-40s woman on sabbatical, no children:

> "*If you have children, you are not going to have time and not [be] interested in major assignments.*"

Male practitioner of more than 40 years:

> *"I don't think it's very difficult to equally share responsibilities. I think that women often take on a lot of the household responsibilities even if they don't have to."*

Female partner in her late 30s:

> *"My husband wants to help and he is very helpful, but there is no substitute for the mom, the kids will literally bypass him and like, 'Mom, can you help me with this?' And the dad is sitting right there. What am I supposed to do?"*

Relatively newly minted female partner:

> "*One Halloween, I was sitting thinking, I wish I had a wife to take my kids out for Halloween, because I knew I had to stay to work.*"

There were a few instances of extreme cases where women were literally told to choose between their children and their career and had their children separated from them.

6) There continues to be a stigma associated with mental wellbeing.

In addition to the scheduled Focus Groups, there was also an opportunity for one-on-one conversations. They were requested and held because notwithstanding all of the promises of confidentiality, there was a lack of trust that other participants would keep their information confidential. Yet participants still deemed it important to share their experiences. They were primarily concerned with sharing information in a group setting because they believe that there is still a stigma associated with admitting to having mental wellbeing issues. Participants who held this feeling were women who had been practicing less than ten years.

Additionally, because of the stigma attached to sharing experiences of stressors and wellbeing, many of the participants began telling of their experiences with an apology for what caused a negative impact on their wellbeing. This phenomenon was so prevalent that by the third Focus Group participants were advised that an apology was not necessary when sharing an experience that impacted their wellbeing.

Young female associate:

> *"Although we had affinity groups in my firm, one of which was a neurodiversity affinity group, women would not attend because there was a sign-in sheet, and they did not want others to know of their participation in the affinity group."*

More senior women in the profession view this as a problem as well.

> *"A female associate periodically had her 'out of office' message on her email. I learned that it was because of mental wellbeing challenges. She ultimately left the firm to pursue what she believed to be less stressful opportunities. When learning of her departure, the male partners in her group were heard to say, 'She should have been outsourced; mental wellbeing is too hard to deal with.'"*
>
> *"People believe mental wellness issues are raised as an excuse for performance issues. Women don't want to share what's going on and what accommodations may be required."*

Gen Z female:

> *"People don't want people to know they are struggling."*

7) The current environment has adversely impacted mental wellbeing.

In the first Focus Group, which was in person, there was a reluctance to speak about the current environment and its impact on the mental wellbeing of lawyers until someone suggested, "Let's talk about the 'elephant' in the room." In most of the Focus Groups, no prompting was needed. Women expressed concern that any progress women had made over the past several years would be eviscerated by various executive orders. Others, men and women, shared how policies put in place by the federal government impacted their clients, particularly if their clients were in traditionally protected classes and sought to file discrimination lawsuits based upon a protected class.

Senior female partner:

> *"Women stand so much to lose in this current environment."*

Seasoned White female attorney:

> *"They are anti-anybody who is not a heterosexual White male."*

Partner in a large firm:

> *"People who have heretofore attempted to address the issues of discrimination and unconscious bias have now been given permission to ignore them and not be concerned about unconscious bias."*
>
> *"I have had the experience in recent months where someone in a leadership role said out loud that they wanted a White male to be the one to present the case because they liked the way White males present and that they felt that the clients respond better. So, this is what I am experiencing. They say it out loud."*

These Focus Group common themes are consistent with and amplify the responses to the Survey's open-ended questions.

4.3.2 Additional Themes

While there were several common themes, there were several other areas explored in the Focus Groups that yielded additional themes worthy of note.

1) Impact of the pandemic was largely positive.

Unlike in the Survey results, there were many women who indicated that the pandemic had a positive impact on their level of stress and mental wellbeing. In almost all of the Focus Groups, the initial reaction to the question regarding the impact of the pandemic on the mental wellbeing of women lawyers was that there was a positive impact because they did not have to "keep so many balls in the air." They also shared that some of the gendered issues that occurred in the workplace were diminished during the pandemic because men were in the same position. Interestingly, it was shared that the pandemic had a positive impact on access to justice. Participants who owned their own firms or were part of a smaller firm and those who worked in government offices, such as the public defender's office, shared that for their clients, for a variety of reasons (e.g., childcare, transportation costs, etc.), access to justice was less of an issue during the pandemic because the clients could appear virtually.

> "*There's no commute and there's extra time for relaxing and not taking your kids to and from daycare and those kinds of things.*"

> "*[For t]hose of us who are balancing so many things, the pandemic helped. I was not spending an hour and a half getting my hair done and driving to the office and then spending time seeing and talking to people; you could actually focus on getting your work done.*"

Focus Group participants also shared that mental wellbeing policies were actually implemented during the pandemic, referencing another benefit of the pandemic.

Not all participants believed that the pandemic had positive effects on mental wellbeing. Even participants who had positive thoughts about the impact of the pandemic also shared that they experienced feelings of isolation, for example.

Male partner, early 40s:

> "*Initially, there was something nice about the pandemic until it wasn't, when the expectation was for complete accessibility. The lines between work time and private time became very blurred.*"

Female lawyer, early 30s:

> "*I was single, I lived alone, just me and my dog, and I am a very social person, so I felt like the fact that I was stuck at home was not good for my mental health.*"

West Coast female partner:

> "*Practicing law requires human connection.*"

2) The impact of bias adversely affects mental wellbeing.

Focus Group participants shared several examples of how gender and racial/ethnic bias impact mental wellbeing in various settings, including non-profits.

C-suite Black female in her early 60s:

> *"For several years, I supervised a White male attorney. He applied for a promotion, and another White male received it. A few years following, he was assigned to work for a female. He resigned, rather than report to a female."*

Former C-suite White female in her mid-60s:

> *"I recommended a woman to represent our organization to work with one of our outside partners. She possessed all of the experience and bona fides to be successful in this role. A White male confronted me about my selection [and] indicated that he was best suited for the role. He tried to persuade me as to why it should be him and even said I had the audacity to select her over him when he had more experience in the 'world.' Not once did he say that the woman selected was not experienced for the role."*

Seasoned Black female attorney:

> *"I have been in rooms where people forget I am there. They were so unfamiliar with Black people, they would say inappropriate things."*

White female department head:

> *"I had recruiting responsibilities and was told by White male colleagues that HBCUs don't provide quality education. Having to constantly remind them of the lack of factual basis for such comments was very stressful."*

Non-profit organization employee:

> *"When they say, I want to bring a lawsuit on behalf of a 'bad girl,' you know they are referring to a poor, Black or Latina girl in an urban area. Looking at race or economic status, a legal strategy is very stressful."*

Female Asian partner:

> *"A proposal was submitted for (new) work, and we were awarded the proposal. My male partner unilaterally determined that he was the originator of the proposal even though it was jointly submitted. Is that conscious or unconscious, I'm not sure."*

Former law firm practitioner:

> *"Things were so difficult in a White male, privileged White law firm. I was penalized for having children. I never had a mentor, which I desperately searched for. It is incredibly important for women."*

Black female judge:

> *"When I first went on the bench, White lawyers assumed that I did not know anything about being a judge. They constantly threatened to appeal me."*

3) Women experience stress differently across various demographics.

Additional themes in this area were focused on the intersection of multiple characteristics of women that affect their mental wellbeing (e.g., being a woman of color and having a disability or need for an accommodation) and work settings that may have impacts similar to those identified in corporate or private settings (i.e., academia and not-for-profits). These sub-themes follow:

a. The Triple Burden.

Approximately one-third of the lawyers who registered for the Focus Groups self-identified as having a disability. Although not in large numbers, there were participants in the Focus Groups who were women of color with physical disabilities. There were also others participating in the Focus Groups who observed the treatment of women of color and other women with physical disabilities. Those women of color with disabilities shared that they believe that they have a triple burden and acts of bias are frequently committed against them. They shared that they do not know whether the bias is because they are a woman, because they are a woman of color, because they have a disability, or all three. Similarly, based upon observations, participants in the Focus Groups reported that women with disabilities are not given the benefit of the doubt as are men with disabilities:

> *"Sometimes I cannot determine whether the bias against me is because I am a woman, a woman of color, because I have a disability, or all three."*

> *"It's all those layers that make you invisible."*

> *"I observed a female associate who was gay routinely sexually harassed by my male colleagues and some were aggressive in their bullying of her."*

b. Women are not a monolith.

Based upon previous research, we know women are not a monolith. In these Focus Groups women shared how experiences of White women are different from experiences of women of color and that there are differences even among women of color.[10] Black women for example shared that they were made to feel like outsiders. Even when employed in an organization that was more welcoming, when Black women are required to interface with the general public, the perception of what a person in authority should look like was not what they (the general public) expected and, thus, caused more stress.

Latinas shared that within their workplaces, there were conflicting expectations:

> "*They believe they know more about your identity than you do. They believe they get to decide how you wish to be identified.*"
>
> *"Although in a professional environment, when I come to work dressed as a professional, surprise is openly voiced."*

A male participant shared that stereotypes remain pernicious:

> *"It comes up more with Asian women with South Asian women being stereotyped as aggressive and East Asian women as docile."*

Black female associate:

> "*When the administration started issuing executive orders impacting diversity, equity, and inclusion, I watched White female equity partners close ranks. It was disappointing.*"
>
> "*As a diverse woman you come into a meeting, well-dressed, expandable file, you are not recognized as the lawyer.*"
>
> *"Nothing was done to assist me in my development, then I was made to feel incompetent."*
>
> *"I can make the same mistake that a White woman makes, and I would get greater scrutiny. I'm judged differently. Yet, they won't provide you with that extra step of mentorship."*

On being disabled:

> "*You have to navigate based upon what your colleagues believe to be appropriate.*"
>
> *"I have not been given the opportunity to develop within my organization and in my career in the same manner as those without a disability."*

10. Destiny Perry, Paulette Brown & Eileen Letts, Left Out and Left Behind: The Hurdles, Hassles, and Heartaches of Achieving Long-Term Legal Careers for Women of Color (Am. Bar Ass'n Comm'n on Women in the Pro. 2020).

A senior female supervising attorney observed:

> *"Judges don't treat women with disabilities the same way they treat men with disabilities. Judges believe that they have to explain in more detail [to] women with disabilities."*

c. Academia can limit opportunities for advancement for women.
The academy is being included in this Report because, while unplanned, approximately 30% of participants in one of the Focus Groups were in the law school environment. Women in the Academy participated in other Focus Groups as well. What impacted their mental wellbeing most was being relegated to what was referred to as the "Pink Ghetto." Their experiences were analogous with those who practiced in law firms. It was shared that there is a clear hierarchy in the law school environment where female faculty are relegated to "housekeeping" assignments, without getting credit and without the opportunity for advancement. There is a different status for those who teach legal writing and for those who teach in the "Academic Success" programs. There are no employment protections and salaries are lower as compared to men's salaries.

Female professor from the South:

> *"At conferences, no one will ask me anything related to my research, publications, or potential job opportunities. They (men) want to ask me more mundane, more pedestrian questions like what it's like to work with minority students."*

Law school administrator:

> *"Most of the full professors are men. They are at a different salary scale. There is a completely different salary structure. Women are primarily the administrators, and we are at the bottom of the salary scale although the work demands can be greater than those of professors."*

Law School administrator:

> *"I was given a promotion with more responsibilities but no increase in compensation. When I asked why, I was told that if I were given more money, the male professors would be upset."*

Female law professor in her late 30s:

> *"I feel like I have to condition my students and prime[] them in a certain way, tell them before they respond, ask themselves whether that is the response they would give to a White male professor."*

d. Not-for-profit organizations are not exempt from creating stressors.
While not all women who worked for non-profit organizations had negative impressions of their organizations, some expressed that the very harm the organization was meant to cure was visited upon them.

> *"Some think that if you work for a non-profit organization or the government, the stress will be less. It is not true. There is a lot of moral injury."*

> *"The worst moral injuries occur at public interests and non-profit organizations. There is hypocrisy."*

> *"Non-profit organizations were once a place where women and women of color could feel safe. That is no longer true."*

> *"Mental wellness affects physical well-being. I had to represent an entire building in a landlord–tenant matter. The stress caused me to go to the emergency room. In the emergency room, I'm on the phone with another attorney screaming. I couldn't take a break. The weight on me was too much."*

4.3.3 Stressors Impacting Mental Wellbeing

Multiple layers of responsibilities:

> *"Women are caregivers beyond children. The stress is worse when you have both children and aging parents."*

Knowing that the expectations of men and women are gendered:

> Female White partner in her 60s:
>
> "*Young female associates came to me because they believed that male partners were 'dangling' them in the presence of male clients. They wanted the female associates to bring in business in ways the female associates did not deem appropriate. This was very stressful for them.*"

Catastrophic illness and death of a close family member:

> "*My mother died unexpected[ly] and two months later, one of my children was diagnosed with cancer. Work was not an option. I had to continue to work although I was under enormous stress. I am sure it affected the representation of my clients.*"

Billable hours and lack of sleep:

> "*I am constantly thinking about the number of billable hours required to get into the bonus pool, how I can meet them and fulfill all of my other obligations.*"

The unwritten rules:

> "*Men go out for beer or go bowling not for the sake of doing either but to learn about the rules of engagement that no one tells you about.*"

Having a label attached to you:

> "*You should be able to advocate for what you deem is necessary, [but] you receive the label of being difficult. I had to have a screaming match with the men in my firm to have tampons in the ladies' restroom when one in four people in the firm are women. I was deemed as difficult.*"

Constantly figuring out how to prioritize:

> *"Sometimes we have to accept what we can do at the moment."*
>
> Female government employee:
>
> *"When I expressed that I was having a tough day, I was told this is not the right place for you. It was a toxic environment. Statements like that, which were not made to men, caused even more stress."*

Unconscious bias and microinequities:

> "*In my presence, as I was about to have my first child, a White male partner said, 'I know you will return to work. Black women have to work.' Unlike White women who will get nannies and return to work.*"
>
> *"How much of my (physical) identity is going to impact how I argue my case?"*

Men believing that they are not receiving all their "entitlements":

> *"When building out office space, we thought it would be a good idea to have a lactating room. The men became so aggressive in their opposition that we abandoned the idea and created a wellness room available to everyone."*

4.3.4 How Women Cope with Stress

An overwhelming majority of the women who participated in the Focus Groups indicated that they see a therapist on a regular basis. (It should be noted that none of the men who participated in the Focus Groups stated that they had a therapist.)

Unlike in the Survey and other studies concerning mental wellbeing,[11] none of the Focus Group participants indicated that they consumed alcohol to cope with stress. Rather some participants complained that "*there is an expectation to drink even if you don't want to.*" The coping mechanisms varied from meeting on a regular basis with a licensed therapist, to spa treatment, to drinking "slushes every Sunday."

Other popular coping mechanisms used by women were exercise and getting together with family members and friends. Other women deemed it best to start their own practice.

> *"I want to be in a space where I can continue to do legal work and leverage my skills and not have to deal with other people's issues that cause[] me stress."*

While it was recognized that coping mechanisms are necessary, some said they did nothing.

> *"We know what we are supposed to do, we just don't do it."*

11. *See* Krill, Johnson & Albert, *Substance Abuse & Mental Health Among Attorneys* (ABA-HBFF 2016) .

4.3.5 The Wish List

In each Focus Group, participants were asked, *"If you could wave a magic wand, what would you wish to ensure the mental wellbeing of women lawyers?"* In the Survey open-ended questions, Survey participants were asked what they wanted decision makers to understand. The "wish list" items of Focus Group participants were similar to Survey responses:

1. **Limiting the number of hours women have to be physically present in the office without providing supplemental resources and support.**
   "You can't pour from an empty cup."
2. **Reduce the number of required billable hours.**
   "They are never going to get rid of them."
3. **Create a safe space to have more Focus Groups centered on the mental wellbeing of women lawyers.**
   Female federal judge:
   "It's important to know I am not alone."
4. **Sustained education around mental wellbeing.**
   Male participant in his late 40s:
   "Men really need to listen to women. The older I get, the more I know that I have to listen with compassion."
5. **Create an environment where overworking is not a virtue.**
   "We need to disabuse ourselves of the notion that overworking is something that validates us."
6. **More women in positions of power.**
7. **Policies that allow for days off for mental wellbeing as for any other sickness or illness.**
8. **Organizations should model the type of culture that they say they have.**
   C-suite male:
   "As the head of an organization, if you are sending emails over the holidays or late at night to support staff, your team will not be inclined to use the resources available to them."
9. **To be able to work for an organization that prioritizes mental health.**
   "We should be able to work in a place that allows you to do what you need to do to stay stable enough to keep you going."
10. **Equitable policies for all employers—not just law firms.**
    "Anybody who needs to [have] access to leave [should], regardless of your gender, how you became a parent. Discouraging men [from] tak[ing] paternity leave has a negative impact on women."

5.0 Conclusions

We drew the following conclusions based on the evidence for each research question.

Research Question 1: Types of Stressors Associated with Women's Mental Wellbeing

What types of stressors are associated with women's mental wellbeing?

The findings indicate that women's mental wellbeing is shaped by a complex and cumulative set of stressors spanning multiple domains, rather than any single factor. Women most frequently report stress related to sleep disturbance, lack of physical activity, financial strain, family responsibilities, and physical and mental health challenges, with additional burdens from caregiving, workplace demands, and barriers to accessing care. Compared to men, women consistently endorse higher levels

of stress across nearly all categories, reflecting intersecting pressures. Qualitative data further reveal that these stressors are experienced as ongoing and systemic, driven not only by individual circumstances but also by the structure and culture of the legal profession, including workload intensity, rigid expectations, gender bias, and work–life conflict. Together, the evidence suggests that women's mental wellbeing is affected by the accumulation and interaction of personal, professional, and structural stressors that collectively contribute to heightened emotional strain, burnout, and reduced overall wellbeing.

Research Question 2: Employer's Policies to Assist with Mental Wellbeing Issues

Are women lawyers aware of employers' policies to assist with mental wellbeing issues? Are women using these policies for themselves or their women employees? What are the women's perceptions of the effectiveness of these policies?

The findings indicate that employer policies intended to support mental wellbeing among women lawyers are inconsistently understood, underutilized, and often ineffective in practice due to organizational culture and structural constraints. While some women are aware of available resources, many report limited clarity about what policies exist or how to access them, and even when awareness is present, utilization is low due to concerns about professional consequences, confidentiality, and unmanageable workloads. Women consistently emphasize a disconnect between policies "on paper" and their real-world application, noting that workplace norms, leadership behaviors, and expectations around productivity often discourage use. As a result, mental wellbeing support is frequently perceived as an individual responsibility rather than an organizational priority, with policies viewed as insufficient unless accompanied by meaningful cultural change and leadership support that normalizes and enables their use.

Research Question 3: Information Women Lawyers Want Decision Makers to Know

What information would women lawyers want decision makers to know and understand about the impact of stress on their mental wellbeing?

Women lawyers want decision makers to understand that the stress affecting their mental wellbeing is fundamentally systemic rather than personal, arising from the structure, expectations, and culture of legal work rather than from individual shortcomings. The findings show that stress is experienced as chronic and cumulative, often building invisibly over time until it results in burnout, disengagement, or departure from roles or the profession altogether. Women emphasized that policies or wellbeing statements are ineffective when they are not accompanied by meaningful changes to workload expectations, performance norms, and leadership behavior, as such disconnects reinforce the idea that stress is normalized while wellbeing is an individual responsibility. Respondents also highlighted that unmanaged stress has far-reaching consequences not only for individual mental and physical health, but also for retention, performance, family relationships, and long-term professional longevity. Ultimately, women identified decision makers as central to change, noting that leadership modeling, accountability, and genuine alignment between values and practices determine whether mental wellbeing is truly supported or merely symbolic.

Research Question 4: Recommendations of Women and Men for Educational Programs

What recommendations do women and men lawyers have for the types of educational programs needed to recognize stresses unique to women lawyers and mitigate the adverse impacts of these stressors?

Women and men lawyers consistently recommended educational programs that move beyond generic wellbeing awareness to address the structural and cultural sources of stress unique to women in legal practice. Respondents emphasized the need for training that helps organizations recognize gender-specific stressors—such as caregiving demands; bias; visibility pressures; and cumulative, less visible forms of strain—and understand how these factors intersect with legal work expectations. Rather than focusing solely on individual coping or resilience, participants called for education embedded in leadership and management development, targeting partners, supervisors, and other decision makers who shape workload norms, advancement pathways, and workplace culture. Effective programs were described as those that foster accountability for organizational practices, challenge norms of overwork and constant availability, and provide concrete guidance for support-

ing women employees without stigma or professional penalty. Finally, respondents stressed that meaningful impact requires ongoing, integrated education incorporated into onboarding, leadership development, and professional growth, rather than one-time or optional training, to produce sustained changes in culture and practice.

Research Question 5: Women Lawyers' Self-Care Methods to Mitigate the Adverse Impact of Stressors

What self-care methods do women lawyers use to mitigate the adverse impacts of these stressors or improve their mental wellbeing?

Women lawyers reported using a broad range of self-care methods to mitigate the adverse impacts of professional stressors and support their mental wellbeing, with the most common strategies centered on social connection, physical activity, and emotional regulation. Talking with friends and family was the most frequently endorsed approach, followed by exercise, listening to music, spending time outdoors, and mindfulness or meditation practices. A meaningful proportion of respondents also relied on formal healthcare supports, including mental health professionals and primary care providers. Qualitative findings further revealed that women view self-care as intentional, effortful, and often necessary for survival within demanding legal environments, rather than as discretionary or restorative. Self-care practices spanned mental and emotional health supports, physical wellbeing activities, boundary-setting around work, and reliance on informal support networks. However, many respondents emphasized the limitations of self-care in the face of persistent organizational stressors, describing inconsistent engagement due to time constraints, fatigue, guilt, or workplace expectations. Overall, the findings suggest that while self-care plays a critical role in how women lawyers cope with stress, it frequently operates within—and is constrained by—broader structural and cultural conditions that limit its effectiveness when not paired with organizational change.

Research Question 6: Racial/Ethnic and Other Variations in Survey Responses

What are the variances, if any, between races and ethnicities? Are there other lawyer characteristics that result in variances in mental wellbeing?

Overall, the findings indicate that while women lawyers across racial and ethnic groups report many shared stressors—particularly related to workload, time pressure, and structural demands of legal practice—there are meaningful variations in how stressors are experienced and framed by race and ethnicity. Whereas White women more often characterized stress as general and inherent to the profession, women from other racial and ethnic groups more frequently described stress linked to marginalization, visibility, inequitable treatment, and pressure to prove competence. Quantitative indicators of mental health revealed some racial and ethnic differences in depressive and anxiety symptoms, with higher proportions of elevated symptoms observed among Middle Eastern/North African, multiracial, Hispanic/Latino, and Asian/South Asian women, although several of these findings are based on small sample sizes and should be interpreted cautiously. Wellbeing scores were relatively similar across racial and ethnic groups, with modest variation in mean scores. Beyond race and ethnicity, other lawyer characteristics were strongly associated with mental wellbeing. Lawyers requiring workplace accommodations and those identifying as LGBTQIA+ reported substantially higher rates of depressive and anxiety symptoms and lower wellbeing scores compared to their counterparts, while parent/caregiver status showed comparatively smaller and mixed differences. Together, these findings suggest that although many stressors are broadly shared among women lawyers, mental health and wellbeing vary meaningfully by social identity and structural position, underscoring the importance of considering both race/ethnicity and other key lawyer characteristics when examining mental wellbeing in the legal profession.

6.0 Implications

The findings highlight that stress among women lawyers is not confined to isolated workplace challenges but reflects cumulative demands across professional, personal, health, and family domains. This suggests that efforts to address stress and mental wellbeing in the legal profession must move beyond narrowly defined workplace interventions and consider how professional expectations intersect with broader life responsibilities.

The observed gender differences in both stress exposure and perceived impact have important implications for organizational awareness and leadership decision-making. Women's higher endorsement of stressors and greater likelihood of reporting substantial professional, personal, and family impact indicate that stress affects women lawyers differently and more intensively than men. The greater uncertainty expressed by men regarding the impact of stressors on women lawyers suggests potential gaps in understanding that may influence how workplace policies are designed, communicated, and implemented.

Some experiences shared in the Focus Groups resulted in devastating consequences. Women shared that they suffered marriage dissolution, heart attacks, strokes, and institutionalization. The mental wellbeing of women lawyers cannot be taken lightly.

Findings related to race and ethnicity underscore that stress is not experienced uniformly among women lawyers. Differences in how stressors are framed—particularly among women from underrepresented racial and ethnic groups who more frequently described stress related to marginalization, visibility, and access—highlight the need for approaches that recognize variation in lived experience rather than assuming a single, universal stress profile.

Results related to educational and wellbeing programs suggest that while such initiatives are valued, their effectiveness may be limited when implemented in isolation. Educational offerings focused on mental health, leadership, and workplace culture may raise awareness, but respondents' experiences indicate that programs alone do not sufficiently mitigate stress when workload expectations, inflexible structures, and cultural norms remain unchanged.

Patterns in coping strategies indicate that women are actively engaging in a wide range of interpersonal, behavioral, and self-regulation approaches to manage stress. However, reliance on individual coping strategies, particularly in environments characterized by high demands and limited flexibility, raises questions about sustainability. The findings suggest that individual-level coping, while important, may not be sufficient without complementary organizational supports.

In one of the Focus Groups a mid-level associate expressed that sometimes lawyers don't see a way out.

> *"One of my law school friends working in the corporate department of a law firm [was] working nonstop and went to talk to their supervisor. They were told to toughen up. Two days later, one of the associates committed suicide."*

Finally, women's qualitative responses signal a desire for decision makers to recognize stress as structurally produced rather than individually caused. Respondents emphasized that meaningful progress requires leadership attention to workload norms, flexibility, accountability, and workplace culture. Together, these findings imply that efforts to promote mental wellbeing among women lawyers are most likely to be effective when they combine individual supports with organizational and structural change.

7.0 Recommendations, Best Practices, and Action Steps Providing a Way Forward

The following recommendations are based on the key evidence drawn from this comprehensive analysis of stressors and mental wellbeing among women and men lawyers, with a particular emphasis on women's mental wellbeing. The recommendations are presented along with a sample action step after presentation of the key takeaways.

Key Takeaways from the Evidence

The findings demonstrate that:

A stigma concerning mental wellbeing is pernicious. There is a consensus regarding a lack of trust. Women therefore do not believe it is "safe" to share or reveal mental wellbeing concerns.

Stress is cumulative, systemic, and shaped by organizational structures and cultures rather than individual resilience alone.

Women lawyers report higher and more persistent stress across workload, caregiving, sleep disruption, health concerns, and workplace expectations.

While many women engage in active self-care, the evidence is clear that self-care and policy alone are insufficient without structural change.

Mental wellbeing policies exist in many legal workplaces, yet cultural stigma, workload expectations, and lack of leadership modeling often discourage use. As a result, responsibility for wellbeing is implicitly shifted onto individuals rather than shared by organizations.

Decision makers play a central role in change. Leadership education that addresses gender-specific stressors, workload norms, and accountability is critical to improving retention, performance, and long-term sustainability within the profession.

Experiences of stress and mental wellbeing vary meaningfully by race, ethnicity, LGBTQIA+ identity, and accommodation needs, underscoring the importance of equity-informed approaches.

Recommendations, Best Practices, and Action Steps Providing a Way Forward

Treat mental wellbeing as an organizational responsibility.

Action step: Incorporate mental wellbeing expectations into leadership performance reviews, workload planning, and organizational success metrics.

Action step: Create written policies that allow for time off without the employee being required to state a reason for taking time off.

Align wellbeing policies with culture through leadership modeling.

Action step: Require partners, supervisors, and managers to openly model use of wellbeing policies and explicitly communicate that doing so carries no professional penalty.

Embed education on gendered and systemic stressors in all organizations that employ lawyers (and judges).

Action step: Develop a curriculum for ongoing education on gender-specific stressors for all employees.

Embed education on gendered and systemic stressors into leadership development.

Action step: Make education on gender-specific, cumulative, and structural stressors a component of leadership onboarding and advancement.

Support self-care with realistic workloads and protected time.

Action step: Establish workload norms and scheduling practices that protect time for recovery, health care, and caregiving responsibilities.

Action step: Review billable hour requirements to assess the impact on mental wellbeing.

Action step: Eliminate or reduce billable hour requirements necessary as a prerequisite for bonuses.

Apply an equity-informed lens to all wellbeing initiatives.

Action step: Use disaggregated data and culturally responsive design (i.e., gather input from affected groups) to tailor mental wellbeing support for those at higher risk.

Improve visibility and clarity of mental wellbeing policies through regular, intentional communication.

Action step: Develop case studies and other educational tools to demonstrate how leaders can model and effectively communicate the utilization of policies, support mental wellbeing without stigma, and achieve individual and team wellbeing metrics.

Strengthen access to relational and mental health resources.

Action step: Given the central role of social connection and professional support in women lawyers' coping strategies, employers and professional associations should invest in peer support networks; mentoring opportunities; and confidential, affordable access to mental health services to reduce stigma and increase utilization.

Action step: Given the lack of trust among some that inhibits using organization-sponsored mental health resources, make available resources provided by other organizations such as bar associations.

Women can assist in ensuring their wellbeing.

Action step: Set boundaries. According to information gathered from the Survey and Focus Groups, women often agree to responsibilities despite having no physical or mental capacity to fulfill them.

Action step: Secure an accountability partner. Many women expressed that they know what they should be doing (e.g., exercising, etc.) but they don't do it. Having an accountability partner can assist with self-care.

Action step: Be another woman's "no" cheerleader. Encourage other women to say "no" when overextended and provide emotional support.

Action step: Establish a peer group. Having a safe place to share common experiences can potentially reduce stress.

Action step: Understand the policies that impact mental wellbeing.

Final Thoughts

Ensuring the mental wellbeing of women lawyers will require us to be intentional, requiring more than generic policies and solutions. The challenges facing women are rooted in systemic and cultural norms, which as this Research demonstrates are different than those of their male peers. It must also be recognized as solutions are being developed that women are not a monolith. Experiences vary based upon race, ethnicity, gender identity, sexual orientation, disability, and caregiving roles.

Environments must be created where all women can thrive. Organizations that address the mental wellbeing of women lawyers across all identities will strengthen the long-term growth and integrity of the legal profession. It is time to remove the stigma and structural barriers that negatively impact mental wellbeing.

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Appendix: Technical Notes

The Survey was launched on October 22, 2025, by the ABA and followed by launch dates of partnering organizations between October 29, 2025, and December 13, 2025. Respondents were asked to return the Survey by December 17, 2025. The Survey was launched via the Qualtrics platform.

All analyses were conducted using IBM Statistical Package for the Social Sciences (SPSS) version 29. Frequencies and percentages were calculated for all variables and means were calculated where appropriate. Cross-tabulations were also conducted where appropriate to better understand any differences on key variables such as gender, race/ethnicity, parent/caregiver status, sexual orientation, and disability/accommodation status. In some cases, variables were transformed to calculate scores (e.g., for depressive and anxiety symptoms and wellbeing).

Racial/Ethnic Categories

To analyze data by race and ethnicity, some racial and ethnic groups were combined to provide an adequate sample size for analysis. These groups had a smaller number of respondents. Asian/Asian American and South Asian groups were combined into one group, and American Indian, Alaska Native, Native Hawaiian, and Pacific Islander were combined into one group due to small sample sizes.

Gender Identity

Due to the small sample size of other gender identities (Transgender Male, Transgender Female, Two Spirit, etc.), the gender analysis focused on individuals who identified as "Female" or "Male," regardless of sexual orientation.

Mental Health—Anxiety and Depressive Symptoms Scores

Individuals were asked to self-report on anxiety symptoms and depressive symptoms as well as their wellbeing over the past two weeks using standard measures.

Anxiety and depressive symptoms. Two self-report items from the Patient Health Questionnaire (PHQ-4; Kroenke et al., 2009; CDC, 2020) were used to assess anxiety symptoms (i.e., feeling nervous, anxious, or on edge), which were originally from the Generalized Anxiety Disorder (GAD-2) Scale. Two other items in the PHQ-4 were used to assess depressive symptoms (e.g., feeling down/depressed or hopeless) and were formerly from the PHQ-2. The responses ranged from "not at all" = 0 to "nearly every day" = 3. Each two-item scale is summed up to create a total score on anxiety and depressive symptoms ranging from 0 to 6. The sum of the two-item scores for anxiety and depressive symptoms is categorized as either "0–2" or ">3" (greater than or equal to three), with scores that sum to ">3" indicating that symptoms are sufficient to warrant further clinical evaluation for anxiety or depression.

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Wellbeing

Two items selected and adapted from the RAND 20-Item Health Survey 1.0 Questionnaire Items (see Hays et al., 1993) were used to assess wellbeing. The two items asked the person to self-report (a) how happy and calm and (b) how peaceful they have been in the past two weeks. The responses ranged from all of the time = 1 to none of the time = 6. The response to each individual item was reverse-coded (such that none of the time = 1 and all of the time = 6) so that higher scores reflected better wellbeing. As recommended by Hays et al., the scale developer, we converted the scores to 0–100, with the recoded values of 1=0, 2=20, 3=40, 4=60, 5=80, 6=100. The total score was created by averaging the converted scores on the two items, with higher scores indicating better wellbeing.

Reference

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