

WB and the big C

Well-being from an acute perspective

I dedicate this article to my amazing wife Saffron.

I am Ian Griffin and I have the great fortune and honour of being Head of Chambers at 4 Brick Court Chambers. I was made Head of Chambers on the 1st of April 2017. That and a number of dates from 2017 are seared into my memory for what will become obvious reasons as you read this. On 9.6.2016 I was told by a GP practice nurse that I required an urgent colonoscopy. The colonoscopy experience is an entire article in its own right especially if you are interested in photography. Using the obscure language of the medic, this 'procedure' revealed a large colo-rectal mass. Then in early July whilst I was squeezing my wife's left hand very very tightly I was gently but brutally informed by an alarmingly young, dapper but nonetheless ashen faced Surgeon that I had stage 4 inoperable colo-rectal cancer with secondary tumours in liver, lungs and right pelvis.

Until late May of 2017 I had been playing squash and a back ache was my main problem. I had no indication of the severity of my situation. Thus, as you can imagine, the softly spoken words of this stranger came as a bit of a surprise to say the least.

"Now that I have seen you I WILL recommend you for Chemotherapy," were his parting words. It



Anton Chekhov once said "Any idiot can face a crisis - its day to day living that wears you out."

became apparent to me that the recommendation for the 'poison,' as I imaginatively call it, was not a forgone conclusion. I later realised that this was because of the 'riddled' nature of my disease {Riddled - a word only associated with the negative and now associated almost entirely with Cancer}. On meeting my Oncologist his first words spoken to me in a slightly derogatory tone were, "Have you seen your scans." I felt like shouting "Yes I [expletive] have and I have also paid my [expletive] taxes," so please just get on and treat me!!!

And treated I am. As it happens the doctors and nurses are magnificent. Some communication has been interesting. The medical profession seems to have an adversity to adverbs and adjectives. In addition, I think I would be described as a 'challenging' patient to say the least or another unprintable term, if adjectives were used of course. I am not sure that many patients express their views with my direct style or make demands (of course I mean requests) as to how and when I have my poison.

Between July and the end of December last year I had 12 cycles of poison. So, I did not die in October, which was nice. My much loved (loved as it keeps me alive), and much hated medicine had worked and shrunk the tumors. I had a welcome 'treatment break' to celebrate the New Year. Then a set-back at the end of March this year with 'disease progression' which in the 'Queens English' means more riddling so back on the poison. At the time of penning this I have had 4 more fortnightly poisoning sessions.

As it happens its not all bad!! I am a big strong chap. I currently have few clinical symptoms. I have my chemotherapy over 3 days (it comes home with

me) and apart from the hideous first day (worst ever hangover combined with worst ever seasickness) I seem to be able to tolerate the side effects quite well. I am working. I cycle to Chambers. I am back playing Squash. On Monday mornings, before Court, I cycle to Guys Cancer Centre for 8.30 a.m. to get disconnected from my chemotherapy paraphernalia by a slightly amused but equally concerned nurse, “you cycled here, what if you had an accident?” The love and affection that has come my way from the Family Bar has been incredible and deeply life affirming. I have many people praying for me which is profoundly comforting. They know who they are and thank you. There are a number of positive initiatives that we are implementing in Chambers. So apart from the obvious it is all going rather well!

When I was first told that I was going to have chemotherapy I was medically advised to eat as much as possible as often as possible. The advice was that the poison would render one unable to eat and I would have a lot diarrhoea. “Eat your favourite foods” the nurse conducting my ‘introduction to chemotherapy’ told me. I grew up in Cornwall and my default comfort food is Cream teas and Cornish pasties thus a lot of these were eaten in due course. It is true got say that I did notice a sizeable and alarming weight change over the next 6 months. I put on 10 kilograms.

It is very normal to get Cancer over the age of 50 years. One has to develop a new normal. I



Above: Ian Griffin and Peter Lynch in the Edgar Wallace



Learning to forgive yourself and value the things that matter, remembering that out of all the roles you play in life, be it, son, daughter, mother, father, brother, sister, friend, best friend, godparent, fisherman or dog owner; a barrister is just one of them.

have mantras. The first derives from the facts; as Barristers, we are familiar in dealing with FACTS. MY Cancer as a fact is a cell mutation, it has no moral context, it's not fair or unfair, it just IS!! Millions of people have Cancer. It is normal. I am living with cancer as a normal illness. I am keeping it normal. Notwithstanding that I sound like a bearded hipster from Hoxton my first mantra is, 'keep it normal.'

As this is going to be read by such a sophisticated and sensitive audience I debated how I would write this next mantra. The only way I can write it is as it is. My foundation mantra, my sacred utterance is quite simply “Fuck Cancer.” This covers every physical, psychological and emotional view of MY cancer. I don't know how many times I say this on a daily basis. It is a lot. For some reason, I don't really know why and to the surprise of any one proximate to me I quite often shout out at the top of my riddled lungs ...“Fuck Cancer” as I cycle over Blackfriars Bridge on my way into Chambers. What fun!!

Enough about me. Let's eventually discuss WELL-BEING.

Last year, oddly I cannot remember the date, it was PD (post diagnosis) and I was discussing 'Well Being' with a certain QC who also is a member of the Magic Circle. I use the term 'discussing' in the loosest possible sense as when ever one talks to this individual one normally gets assaulted by some type of magic trick. Thus between the Ace of Spades and the King of Hearts and a puff of fire and smoke and knowing that 'The Great Q-cini' is



It is important to recognise that day to day living, includes the unforeseen; 'life's curve balls' whether they are bereavements, mental health deterioration, other traumas or a building up of the common enemy; stress. You won't have the time to conduct a "Work/Life balance Crisis Review." The strategy needs to be in place, before it happens, and accessible, when it happens.

very active in 'well being' at the Bar I thought that with my ailment and, maybe to be truthful, with some arrogance, that from my current fairly acute perspective I could pass some of my thoughts on to others about 'well being' as I see it from the Family Barrister with a touch of Cancer point of view.

Although I did say enough about me there is some more to say that has some context to this article and my views. I used to be a nurse. I trained in Plymouth qualifying in March 1989. I came to London two days later and commenced work in a London Teaching Hospital. Can you imagine the culture shock? The majority of my first 23 years were spent in the magical, slow moving counties of Cornwall and Devon.

Looking back now I was a 23 year old boy then. My experiences at that time were very much total WASP. I had no interface with any alternative community or peoples of any type. I had no interface with any ethnic community or individuals, or those with a different sexual bias or lifestyle. There was no LGBT associates or friends in my world, just lots of sport and associated activities. The trainee Doctors from London (all WASP in those days) were as different as it got. Quite soon after arriving in the metropolis from the magical and otherworldly southern reaches of our land I got a 'job' on an infectious diseases ward. The term job is in fact incorrect term, I had no clock watching, it

was what I did.

For those of us old enough to remember, 1989 was the height of the AIDS epidemic in London. I worked on a highly specialised ward dealing with young people dying of AIDS, plus many other acutely seriously ill people with other very serious and often terminal medical conditions.

I wish to explain in one sentence how to describe this place, this ward, on one level a place of human devastation. It was a complete, total, utter, vile, amazing, frightening, vicious, brutal, exhausting, grief laden, uplifting, deeply saddening at times spiritually (not religiously) uplifting place to be and was always a privileged education in humanity at its worst and absolute best. I had arrived in London a 23 year old boy and by the time I turned 25 it was, at times, as if I were a middle aged man due to may experiences.

The ward had many patients who were young gay men with full blown aids, many British people originally from Africa, who presented with AIDS and TB, and other highly dangerous infectious diseases and it had negative pressure rooms, effectively to quarantine patients. For the patients it was like solitary confinement, some were so sick it did not matter, others found it very hard to be in 'solitary.'

As a nurse and a human being you were the most needed of souls. There was no place for half hearted nursing or indeed half hearted being. One had to give it one's utter all. Any Cornish youthful prejudice, ignorance or arrogance was burnt from my inner ID very quickly.

When I explain to people, some of them barristers, that I was once a nurse they often express surprise and say what a "difference from being a Barrister, what A change!" I always reply that I disagree and in fact consider that it is very similar. Nursing is helping people when they need you most, when they are desperate and frightened. You are the most needed of souls. Is this not exactly

the same as acting in the majority, if not all, family law cases?

In my strong view being a Family Law barrister, solicitor or being a Family Judge is a tough ask. Especially now with financial restrictions on many levels. Despite those restrictions the Family Law Barrister still has to give everything to any given case. Let us not forget committed and fearless representation is, entirely properly, written into the Code of Conduct.

From 2nd six pupils all the way up to the senior family judges who make life changing decisions you are all, in my view, the most needed of souls

There is no place for lack of commitment at the Family Bar.

I believe that apart from being highly skilled advocates and as Judges making compassionate but at the same time brutal life changing decisions what we are often faced with is in many ways no different from the incredible brew of emotions and experiences that I described of my ward work above. Equally importantly, it is a privileged role. It is an education in humanity at its worst and absolute best on a constant relentless basis.

What we do is not, in my view, a job. What we do is what we become and as a result we have no thoughts of our own pain, how we are being hurt by what we do, no thoughts of our own WELL-BEING.

Every professional that acts and makes decisions in family law becomes part of the very fabric of the family law world; the family law barrister, solicitor, magistrate's clerk, magistrate, District Judge, the Circuit Judge, the High Court Judge and the Appellate Court Judge all make up this wonderful but difficult world. I consider that this 'world' in which we act, although profoundly rewarding, is also inevitably dangerous to our health.

We change our holidays, we miss our children's

school and life events, we work when barely capable through illness and often personal grief, we commit totally to our clients and we put the clients before our families and of course our own health. We often neglect those who love and support us to the point that it ruins our close relationships. We deal with the most awful of subject matters, a world most extreme and excoriating on one's physical, emotional and psychological inner person.

Ultimately, in my view, we are all burnt and we are all scarred to a lesser or greater extent by what we do. There is no escape. We love what we do. We



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do good and sometimes great things. **But we are inevitably hurt by what we do and what we are.**

The current estimate (from my Google search) is that 30 % of nurses leave their profession in the first year of qualification. Then by the age of 29-30 most will have transitioned from front line nursing to other careers either within a nursing framework or something completely different. As it happens it was always thus even when I was a nurse. I am an example of that change but in my case and in my view from the frying pan into the blast furnace.

In my experience the stress of nursing was hard stress but it was clean stress. I was young so maybe I look back with rose tinted spectacles but I never woke up in the middle of the night thinking about the ward or a patient. In the last few years I have woken up at night with 'brain rush' thinking about a missed question in a cross examination or with anxiety about a skeleton argument, the same thoughts whizzing around one's brain again and again unable to sleep, ruminating and worrying. I have also had what I call 'complete exhaustion' affecting me all around me. I think these are the symptoms of what I call 'toxic stress.'

So most nurses move away from the front line. This appears to me to be somewhat different to the family lawyer who acts for clients, and the family judge who deliberates and sits, for many years, entire careers, decades, dealing with unrelenting deeply harmful subject matter

And, of course, the evidence is that the Family Bar is providing an amazing and excellent service thus we must all be coping with this stress. Or are we? How do we cope?

Do we employ proactive ameliorative measures to de-stress, generally? NO,
Do we all work far too hard and not turn work down? YES.
Do we ignore the physical emotional harm we are suffering from? YES.
Do we completely ignore our own stress

level? YES.

Do we drink too much alcohol? YES.

Do we ignore / neglect our families and our partners? YES.

The internet has meant much less actual real professional and social interaction at the Bar and thus less opportunity to 'decompress' and 'debrief' 'with colleagues over a glass of something cool. In my view those that think they are the most resilient are the ones most at risk as the layers and layers of stress build up then to create obvious severe physical and emotional symptoms

For too long the approach to the mental, emotional and physical well being of members, pupils and staff within Chambers, and at the Bar generally, has been in the dark ages. **There is no HR department in any chambers that I know of. Well-being at the bar is in its infancy. It needs to grow to be a normal part of our professional careers.**

Thankfully we do now have an embryonic understanding of the need for Well-Being, we have initiatives from the Bar Council (see www.wellbeingatthebar.co.uk) and as far as the Family Bar we have the FLBA actively promoting Well-Being by Cyrus Larizadeh QC. But I believe there is more we have to do as individuals as well as the collective of Chambers.

Returning to my nursing I looked after many very ill and frightened people. On one occasion I had the privilege to care for a very brave young man who had been abandoned by his family and community because he had AIDS. Something that happened a lot at that time even though the science should have dispelled the ignorant attitudes held by many by then. He was very scared and would not sleep in the fear that he would not awake. He asked me one night to hold him in my arms whilst he sobbed. I did and as his sobbing ebbed he fell deeply asleep. A few days later he asked me again to hold him and as his sobbing ebbed away I laid his head on his pillow. He had died.

This brief moment in time is close to my heart and one I have shared only on a couple of occasions. I believe that there are many similarities as to what I did then to what I do now for a 'job.'

It was an utter privilege to be with him at the time of his death. The way he was ostracised by his community was shocking. He acted with immense dignity despite grotesque injustice. The bottom line is that he was a very frightened human being, he needed help, he needed a committed person, in what was the most difficult of times for him. And he was helped. By me. Dying is an acute but normal part of life it was in its own way a beautiful and dignified death. Death is normal. Being with him was normally stressful, sad but a complete privilege.

But what **we as family lawyers** do puts the stress and pain and associated hurt of nursing, significant though it was, in a different place on the stress spectrum. This is mainly because of the long term nature of our involvement with our subject matter but also because the subject matter is far from the norm.

I have acted on many cases where the clients have fear, uncertainty, terror and horror, but they, in the face of adversity and injustice, have acted with immense dignity. It again has been a privilege to act for these people.

But having a child permanently removed from you is not normal. Taking a child away from a natural parent or any long term carer for ever is extremely unpleasant and difficult for all those involved, especially a child, whichever way you look at it. That is our world! Can you imagine what it is like for the parent client who is to lose a child forever? Their utter horror. Their utter terror.

We are with that client directly feeling their fear. We look at autopsies of dead children, this is not normal. We deal with the most horrific acts of abuse, injuries and violence. We deal with international terrorism, and associated facts and images that are highly psychologically damaging.

We even have to deal with the fallout when clients commit suicide during the progress of a case or even during the hearing itself.

Despite the welcomed initiatives as set earlier we have no training or guidance as to how to deal with this at all.

My view is when are dealing with any human beings in our practice the default position is that we must view it is an UTTER privilege to do so. Whomsoever they are they put their world into YOUR HANDS at the most frightening of times.

But, in my view, this is where the danger to you and me arises. Through toxic stress. I am quite sure my Cancer has a toxic stress related element regarding causation.

But we MUST DO WHAT WE DO, the rule of law demands we exist.

The clients need us all, that is Barrister, Solicitors and Judges alike. We are involved in saving children, saving families and sometimes saving lives. Judges make the most difficult of life changing decisions. We love what we do. But it is us and it is our way of being. We cannot stop what we do. It is like an addiction. What we do can be and is extraordinarily rewarding on a daily basis. Every day is different. We 'work' in a rarified and privileged world but our own hurt is an inevitable side effect.

But we all pretend to have the defence to this hurt. We pretend not to care. We have open and overt cynicism (guilty as charged). We develop the darkest of senses of humour (guilty as charged). We drink too much alcohol, the 'care case medicine' to soothe our injuries. But in the end the relentless tsunami of subject matter will get to you. There is no defence. We all pretend to be hard as nails but look into yourself and look at and out for friends.

You are all suffering from significant harm.

What can we do to ameliorate this harm? Many

things!! I list a few things that I would like you to think about and even implement for yourself and in your Chambers.

1. Make sure you have some sort of pension and income protection. Financial stress needs to be reduced as much as possible. Don't overspend. Pay taxes on time. Ensure life insurance is fully in place.
2. Work less and learn to turn down work. We are hopeless at managing our life diaries. Learn to say no and never change your holiday. I have a rule that "away" is away and any clerk that asks me to change my holiday will be asked to change their holiday. Apply this rule to all members of Chambers, even the most junior.
3. Try and understand your stress moments. Listen to reality. Some will have obvious physical manifestations, like eczema, some have more nuanced emotional and mental health signs.
4. Implement a well-being policy in Chambers and appoint a well-being officer. The FLBA has a very useful template.
5. Chambers can link into counselling. It is not expensive apparently.
6. Educate members, especially junior members, of the dangers that face them. Organise social events in Chambers. Make yourself, especially as a senior member, available to others.
7. Education of Clerks. This may be a bit radical but let's try and get away from "them and us". Let us treat all in our organisations, including the clerks and anyone else, decently as human beings. Let's communicate clearly, firmly if necessary, but always fairly. By involving your clerks and by being focused on your practice and well-being you / we stop Clerks thinking it is "normal" to push us as Barristers to the absolute limit. This is true. You can ask my Senior Clerk when I was able to return to work my treatment was recorded fortnightly on a Thursday in my Chambers' diary as "Chemo-Holiday". I want no criticism at anyone about this. My

very excellent clerks were devastated by my ailment so they had absolutely no idea how to deal with it. And that, my friends, is the point! It shows the engrained way clerks have been made to think. But this is because WE allow them to think this way and arguably make them think of us in an entirely linear way. As a result of many things, not just the big C, I believe that my clerks are now becoming very attuned to my members' well-being and I would like to thank them for this.

8. We all need to accept advice on diet, exercise and alcohol and even though I thought I would never say this we need to look into alternative stress reduction therapies.
9. Do not pretend to be tough and fetishise how busy you are. No-one cares how many emails you get. I was tough once and oh so very busy and I thought I was oh so very important. Look where that got me.
10. **BUT** the most important thing to do is to put your family first. Put being with your family as an absolute priority. Make sure you spend time with your partner and children. Try and be there for your children at bed-time or when they wake up every day. I consider quality time with your family is actually healing time. You cannot think about work when reading a bed-time story! Listen to your partner. They do know you best by the way. The positive emotions from being with your family counteract the stress.

And as for me. Keep a look out. I hope to be around for a while.