

1                   **MASSACHUSETTS MEDICAL SOCIETY HOUSE OF DELEGATES**

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4   Item #:                                   4  
5   Code:                                    Resolution A-18 A-104  
6   Title:                                    Limiting the Scope of Involuntary Civil Commitment of  
7   Persons for Reasons Related to Substance-Use Disorder  
8   Sponsor:                                Michael Sinha, MD, JD, MPH  
9  
10   Referred to:                            Reference Committee A  
11   Marian Craighill, MD, MPH, Chair  
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13   Whereas, Involuntary civil commitment is defined by law as the commitment of a person  
14   who is ill, incompetent, drug-addicted, or the like, without the consent of the person  
15   being committed; and

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17   Whereas, In response to the opioid crisis, the scope of these laws has rapidly expanded,  
18   as the number of states with such laws went from 18 in 1991 to 38 jurisdictions and  
19   counting;<sup>1</sup> and

20  
21   Whereas, Existing data on both the short- and long-term outcomes following involuntary  
22   civil commitment for reasons related to substance-use disorder does not support its  
23   broad utilization,<sup>2</sup> including recent data suggesting coercive treatment puts patients at  
24   higher risk of fatal overdose;<sup>3</sup> and

25  
26   Whereas, Current Massachusetts state law<sup>4</sup> authorizes the state to involuntarily civilly  
27   commit someone with an alcohol or substance-use disorder for up to 90 days; and

28  
29   Whereas, The legal standards and procedures for involuntary civil commitment in  
30   Massachusetts are very broad and allow for the presiding judge to over-rule the clinical  
31   determination of the commitment's appropriateness; and

32  
33   Whereas, Massachusetts Governor Charlie Baker introduced "An Act Relative to  
34   Combatting Addiction, Accessing Treatment, Reducing Prescriptions, and Enhancing  
35   Prevention" (CARE Act),<sup>5</sup> which proposes to expand involuntary civil commitment in  
36   Massachusetts to include a second, short-term civil commitment option without judicial  
37   involvement; and

38  
39   Whereas, Involuntary civil commitment of persons for reasons related to substance-use  
40   disorder has already been implicated in a number of human rights abuses and suicides  
41   in Massachusetts;<sup>6</sup> and

<sup>1</sup><http://www.namsdl.org/IssuesandEvents/NEW%20Involuntary%20Commitment%20for%20Individuals%20with%20a%20Substance%20Use%20Disorder%20or%20Alcoholism%20August%202016%2009092016.pdf>

<sup>2</sup> <http://jaapl.org/content/43/3/313.long>

<sup>3</sup> <http://www.mass.gov/eohhs/docs/dph/stop-addiction/dph-legislative-report-chapter-55-opioid-overdose-study-9-15-2016.pdf>

<sup>4</sup> Section 35 of Massachusetts General Law chapter 123

<sup>5</sup> <https://www.mass.gov/files/documents/2017/11/14/TheCAREAct.pdf>

<sup>6</sup> <http://www.bostonglobe.com/metro/2017/12/02/addiction-center-run-prison-system-draws-scrutiny-following-suicide/oWNbHtLRz8WiCoYus4doMO/story.html>

1 Whereas, Some contend Governor Baker’s proposal is part of a misguided national  
2 trend to use involuntary civil commitment or other coercive treatment mechanisms to  
3 address the country’s opioid crisis; and

4  
5 Whereas, Massachusetts’s own mandated evaluation of overdose data has found that  
6 people who were involuntarily committed were more than twice as likely to experience a  
7 fatal overdose as those who completed voluntary treatment;<sup>7</sup> and

8  
9 Whereas, MMS strategic priorities include providing a leadership voice through...  
10 advocacy, collaboration, and public health efforts and developing resources and tools  
11 on... opioid use, misuse, dependence and abuse; and

12  
13 Whereas, The MMS has no policy on this topic; therefore, be it

- 14  
15 **1. RESOLVED, That the MMS advocate to limit the practice of involuntary civil**  
16 **commitment for reasons related to substance-use disorder in Massachusetts**  
17 **and nationally in furtherance of health, ethical, and patient rights imperatives;**  
18 **and, be it further (D)**  
19  
20 **2. RESOLVED, That the MMS oppose further expansions of authority to**  
21 **involuntarily civilly committed persons for reasons related to substance-use**  
22 **disorder in Massachusetts and nationally; and, be it further (D)**  
23  
24 **3. RESOLVED, That the MMS work to advance policy and programmatic efforts to**  
25 **address gaps in voluntary substance-use treatment services; and, be it further**  
26 **(D)**  
27  
28 **4. RESOLVED, That the MMS advocate that the American Medical Association**  
29 **work to limit, and oppose further expansions of authority in, the practice of**  
30 **involuntary civil commitment of persons for reasons related to substance-use**  
31 **disorder; and be it further (D)**  
32  
33 **5. RESOLVED, That the MMS advocate that the American Medical Association**  
34 **work to advance policy and programmatic efforts to address gaps in voluntary**  
35 **substance-use treatment services. (D)**

36  
37 Fiscal Note: No Significant Impact  
38 (Out-of-Pocket Expenses)

39  
40 FTE: Existing Staff  
41 (Staff Effort to Complete Project)

<sup>7</sup> <https://www.mass.gov/service-details/chapter-55-overdose-report>.