
TESTIMONY IN OPPOSITION OF HOUSE BILL 576
Mental Health - Emergency Evaluation and Involuntary Admission Procedures and
Assisted Outpatient Treatment Programs
Health and Government Operations
February 14, 2024

Dear Chairman Pena-Melnyk and members of the Health and Government Operations Committee,

Social Work Advocates for Social Change strongly opposes HB 576, which will significantly impact the procedures for emergency evaluation and involuntary admission, as well as the establishment of Assisted Outpatient Treatment (AOT) programs. This legislation proposes several amendments that raise concerns regarding the welfare and rights of individuals undergoing emergency evaluation. If enacted, the bill would mandate peace officers to transport individuals experiencing mental health symptoms to nearby emergency facilities, grant psychiatric nurse practitioners the authority to assess individuals for involuntary admission, and empower the Maryland Department of Health to require individuals be admitted immediately. Additionally, each county would be compelled to establish AOT programs, with the Maryland Office of the Public Defender (MOPD) tasked with providing representation in related proceedings. HB 576 will cause considerable harm by causing increased involuntary treatment, amplify the racial inequity of court ordered treatment, and negatively impact the relationships between mental health care providers and clients.

HB 576 will result in coerced mental health care. AOT requires patients to adhere to court-ordered mental health care with the threat of incarceration. Coercion is more pronounced in AOT programs, with individuals in AOT reporting feeling more forced into treatment than individuals receiving care as part of a mental health court ruling.¹ Research shows that a core aspect of successful psychiatric treatment is the therapeutic alliance that forms between providers and patients.² Coercion undermines the therapeutic alliance, making it harder for individuals to engage meaningfully in their treatment and recover. The resulting trauma of forced mental health treatment lingers for years, causing individuals to avoid and delay seeking help.³

¹ Munetz, M. R., Ritter, C., Teller, J. L. S., & Bonfine, N. (2014). Mental Health court and assisted outpatient Treatment: perceived coercion, procedural justice, and program impact. *Psychiatric Services*, 65(3), 352–358. <https://doi.org/10.1176/appi.ps.002642012>

² Flückiger, C., Del Re, A. C., Wampold, B. E., & Horvath, A. O. (2018). The alliance in adult psychotherapy: A meta-analytic synthesis. *Psychotherapy*, 55(4), 316–340. <https://doi.org/10.1037/pst0000172>

³ Molodynski, A., Rugkåsa, J., & Burns, T. (2010). Coercion and compulsion in community mental health care. *British Medical Bulletin*, 95(1), 105–119. <https://doi.org/10.1093/bmb/ldq015>



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HB 576 stands to disproportionately target racial minorities. Only 12% of Maryland's population is Black,⁴ yet they have the highest rate of receiving emergency petitions. Recent data collected by MOPD found that 51% of special emergency petitions for court ordered involuntary hospitalizations were for Black individuals.⁵ The implementation of AOT will magnify this disparity, perpetuating systemic racism within the mental health care system and exacerbating existing disparities in access to care and outcomes.

HB 576 will damage the provider-client relationship. A key part of the social work code of ethics is promoting the right of clients to self-determination.⁶ AOT goes against this principle by requiring providers to either enforce treatment or report a client's non-compliance to the court system. This coercive approach undermines trust and collaboration between providers and clients, hindering the effectiveness of mental health interventions and potentially leading to disengagement from care.

Establishing AOT is valuing the comfort of our communities at the expense of the health and safety of the community members with mental health issues. HB 576 fails to address the underlying issues contributing to involuntary admissions and instead exacerbates harm to vulnerable populations while undermining fundamental principles of ethical and effective mental health care. **Social Work Advocates for Social Change urges an unfavorable report on HB 576.**

Sincerely,
Social Work Advocates for Social Change
Baltimore, MD

Social Work Advocates for Social Change is a coalition of MSW students at the University of Maryland School of Social Work that seeks to promote equity and justice through public policy, and to engage the communities impacted by public policy in the policymaking process.

⁴ U.S. Census Bureau. (2023, July 17). *Maryland's Population Grew 7% to 6,177,224 Last Decade*. Census.gov. <https://www.census.gov/library/stories/state-by-state/maryland-population-change-between-census-decade.html>

⁵ State of Maryland, Dept. of Health Behavioral Health Administration. (2021). *Involuntary commitment Stakeholders' workgroup report*. Maryland Department of Health. Retrieved February 10, 2024, from <https://health.maryland.gov/bha/Documents/Involuntary%20Commitment%20Stakeholders.Final%20report%208.11.21.docx.pdf>

⁶ National Association of Social Workers. (n.d.). *Social workers' ethical responsibilities to clients*. Retrieved February 10, 2024, from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English/Social-Workers-Ethical-Responsibilities-to-Clients>