

# HOUSE BILL REPORT

## HB 1158

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*As Reported By House Committee on:  
Human Services  
Appropriations*

**Title:** An act relating to minors incapacitated by alcohol and other drugs.

**Brief Description:** Providing for minors incapacitated by alcohol and other drugs.

**Sponsor(s):** Representatives Brekke, Winsley, Leonard, Rayburn, Inslee, Rasmussen, O'Brien, Fuhrman, Hargrove, Riley, R. Johnson, Franklin, Scott, Haugen, Edmondson, Phillips, Bowman, G. Fisher, Sprenkle and Orr.

**Brief History:**

Reported by House Committee on:  
Human Services, March 4, 1991, DPS;  
Appropriations, March 10, 1991, DPS(HS).

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**HOUSE COMMITTEE ON  
HUMAN SERVICES**

**Majority Report:** *That Substitute House Bill No. 1158 be substituted therefor, and the substitute bill do pass.*  
Signed by 10 members: Representatives Leonard, Chair; Winsley, Ranking Minority Member; Tate, Assistant Ranking Minority Member; Anderson; Beck; Brekke; Hargrove; Hochstatter; R. King; and H. Myers.

**Staff:** John Welsh (786-7133).

**Background:** Individuals, including minors 14 years of age or older, who are alcoholics or drug addicts may voluntarily apply for and receive treatment directly from an approved treatment program. Parental consent is required for any minor under 18 who becomes a resident of a treatment program.

Any individual, including a minor, who appears to be incapacitated or gravely disabled by alcohol or other drugs, and who is in a public place and threatens or inflicts physical harm on oneself or another, may be taken into protective custody for detoxification for up to 72 hours. Parental consent for involuntary detoxification is not required.

Any individual, including a minor, incapacitated as a result of alcoholism, may be involuntarily committed through the judicial process for treatment for up to 60 days, and for a further period of 90 days.

Involuntary commitment for treatment of any individual, including a minor, incapacitated by drugs is not authorized by law.

**Summary of Substitute Bill:** There is a legislative finding that the use of alcohol and illicit drugs is a primarycrippler of youth, with incredible costs to families and society. While young lives are particularly at risk, there are three times as many deaths resulting from chronic diseases related to alcohol and drug abuse in later life.

There is a legislative declaration that an emphasis on the treatment of youth will pay the largest dividend in terms of preventable cost savings, and that providing augmented involuntary alcoholism treatment services to youths, as well as authorizing involuntary treatment for youths addicted by drugs, is in the public interest.

There is a further finding that many children who abuse alcohol or other drugs and are at risk of future chemical dependency, mental illness, conduct disorders or of becoming juvenile offenders; may not require involuntary treatment, but may be better served by the creation of a comprehensive integrated system for children in crisis.

Minors incapacitated by alcoholism and/or other drug addiction, may be involuntarily committed for treatment under the processes provided by law. Parental consent for involuntary alcohol and drug treatment is not required.

Minors admitted to a facility for treatment may be referred to a chemical dependency treatment facility if determined necessary by the mental health specialist and physician.

**Substitute Bill Compared to Original Bill:** The establishment of the Involuntary Treatment Program for Drug Addicted Youths is an enabling authority only, and must be done within available funds and current programs and facilities. Parents may, nonetheless, request commitment of children on an ability to pay basis. The study on the need for a comprehensive emergency and diagnostic system for the evaluation and treatment of minors in crisis is deleted.

**Fiscal Note:** Available.

**Effective Date of Substitute Bill:** Ninety days after adjournment of session in which bill is passed.

**Testimony For:** There is no process now for the involuntary treatment of youths who are addicted by drugs. The involuntary commitment of minors for treatment of drug addiction is not authorized by law. The alcohol involuntary treatment act should be expanded to include treatment of drug addicted minors. Drug abuse among youth has the most serious consequences for our society; focusing on youth presents the best hope for dealing with them. Some 16 percent of our young population have serious chemical abuse problems. All Washington citizens pay the social and financial costs of the state's drug problem, including higher costs for insurance, health care, law enforcement, prisons, as well as low-birth weight babies, school drop out, suicide, divorce, domestic violence and child abuse.

**Testimony Against:** The state cannot afford at this time to extend state involuntary alcohol treatment programs to drugs.

**Witnesses:** Jerry Wasson, Department of Health and Social Services (con); Peter Youngers, Jay West and David Richart, New Beginnings of the North West (pro); and Stephanie Carter, Washington State Association of Prosecuting Attorneys (pro).

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**HOUSE COMMITTEE ON  
APPROPRIATIONS**

**Majority Report:** *The substitute bill by Committee on Human Services be substituted therefor and the substitute bill do pass.* Signed by 28 members: Representatives Locke, Chair; Inslee, Vice Chair; Spanel, Vice Chair; Silver, Ranking Minority Member; Morton, Assistant Ranking Minority Member; Appelwick; Belcher; Bowman; Braddock; Brekke; Dorn; Ebersole; Ferguson; Fuhrman; Hine; Lisk; May; McLean; Mielke; Nealey; Peery; Pruitt; Rust; H. Sommers; Valle; Vance; Wang; and Wineberry.

**Staff:** Maureen Morris (786-7152).

**Summary of Recommendation of Committee on Appropriations Compared to Recommendation of Committee on Human Services:**  
No new changes were recommended.

**Fiscal Note:** Available. New fiscal note requested on March 11, 1991.

**Effective Date of Substitute Bill:** Ninety days after adjournment of session in which bill is passed.

**Testimony For:** None.

*Testimony Against:* None.

*Witnesses:* None.