

## FOR IMMEDIATE RELEASE

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## ASAM Statement on Executive Order to Increase the Use of Involuntary Civil Commitment of Unhoused People with SUD

**Rockville, MD** – In response to President Trump's Executive Order titled <u>"Ending Crime and Disorder on America's Streets,"</u> which aims to increase the use of involuntary civil commitment (ICC) and long-term institutionalization of unhoused people with substance use disorders (SUD), Stephen M. Taylor, MD, MPH, DFAPA, DFASAM, president of the American Society of Addiction Medicine (ASAM), issued the following statement:

"This Executive Order overlooks smart policy solutions that can effectively address SUD and homelessness, opting instead to prioritize coercive and enforcement-based measures. It also misleadingly portrays involuntary civil commitment (ICC) as a simple fix to the complex challenge of treating addiction among unhoused individuals. This short-sighted approach lacks evidence; research outcomes on ICC for people with SUD in America are scarce.

Meanwhile, affordable and effective addiction treatments remain out of reach for many. This administration has paused enforcement of the 2024 Mental Health Parity and Addiction Equity Act final rule. State Medicaid programs are still barred from using federal matching funds to cover room and board for patients in non-hospital-based residential addiction treatment programs, and Medicare has never covered those programs at all.

There's a lack of quality recovery housing in America. And, unbelievably, it's still a federal crime for addiction specialist physicians working in places like Federally Qualified Health Centers to prescribe methadone to treat opioid use disorder. It's past time to focus on real solutions that can connect unhoused people with SUD with the evidence-based care they need — and help reduce homelessness, too."

ASAM Resources on ICC, Housing, Methadone, and the Financial Sustainability of Addiction Treatment Services in the United States

ASAM's <u>Public Policy Statement on Medical Ethics in Addiction Medicine</u> offers guidance to healthcare professionals on ICC for SUD, noting that professionals should oppose it unless:

- An addiction specialist physician (ASP) conducts a clinical assessment of the patient and determines that civil commitment is in the patient's best interest;
- Judicial oversight is present to ensure that the patient can exercise their right to oppose the civil commitment;
- The patient will be treated in a facility that is staffed with medical professionals with training in the field of substance use and mental health disorders, and the patient has access to continuous treatment with all FDA-approved medications for SUD, including withdrawal management, as prescribed by the ASP; and
- The facility is separate and distinct from a correctional facility.

ASAM's Policy Round on Involuntary Civil Commitment of People with Substance Use <u>Disorders</u> evaluates the current research on ICC, arguments for and against it, and the outcomes of existing ICC programs for people with SUD.

ASAM's <u>Public Policy Statement on Housing's Role in Addressing Substance Use and Facilitating Recovery</u> recommends policies that promote stability in housing, and therefore, are important for SUD recovery and overall health and wellness.

ASAM's <u>Public Policy Statement on Reducing Federal Bureaucratic Barriers to Methadone</u> for <u>Opioid Use Disorder and Empowering State Innovation</u> recommends reducing federal red tape barriers to methadone treatment, allowing states to design their own safe and effective models to improve access to methadone treatment to meet the needs of their patient populations.

ASAM's <u>Public Policy Statement on Ensuring the Financial Sustainability of Addiction</u>
<u>Treatment Services in the United States</u> underscores the need for additional policy actions to ensure that the proper infrastructure is in place to support high-quality SUD and other addiction treatment services in the right place, and at the right time.

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## **About the American Society of Addiction Medicine**

The American Society of Addiction Medicine (ASAM), founded in 1954, is a professional medical society representing over 8,000 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM is dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction. For more information, visit <a href="https://www.ASAM.org">www.ASAM.org</a>.