

CONNECTICUT

RISK WARRANTS

&

COURT-ORDERED MENTAL HEALTH TREATMENT

HOW DO THEY DIFFER?



Bloomberg American Health Initiative

Information on this website does not constitute legal advice. Every factual situation is unique; if you want legal advice specific to your particular circumstances, please consult knowledgeable counsel.



Risk warrants temporarily remove firearms and ammunition from individuals at risk of harming themselves (including suicide) or others. Criteria for a risk warrant focus on dangerous behaviors, not mental illness diagnoses.

A **72-hour hold** and **involuntary civil commitment** are primarily concerned with ensuring that a person with a suspected or diagnosed mental illness receives appropriate treatment.

WHAT IS A RISK WARRANT?

In Connecticut, a **risk warrant**¹ is a civil order that temporarily prohibits individuals who possess a firearm and pose a danger of injury to self (including suicide) or others from possessing firearms and ammunition.² If at a hearing where the respondent has notice and an opportunity to be heard the court determines that continuing to hold the firearms and ammunition that have already been removed by law enforcement pursuant to a risk warrant is justified, the individual will also be temporarily prohibited from purchasing firearms and ammunition.³

Mental illness diagnosis

Connecticut's risk warrant law does not require the petitioner to demonstrate that the respondent has a suspected or diagnosed mental illness; however, a court may consider prior involuntary confinement in a hospital for persons with psychiatric disabilities when considering whether to issue a risk warrant. Dangerous behaviors are the main criteria for a risk warrant. The court will consider relevant evidence including recent threats or acts of violence toward self or others and recent acts of cruelty to animals, among other dangerous behaviors.⁴

Firearm prohibition

Risk warrants require respondents who possess a firearm to temporarily turn over those firearms and any ammunition. If, at the court hearing following the execution of the risk warrant, the court orders the respondent's firearms and ammunition held for up to one year, the respondent must refrain from purchasing any new firearms or ammunition for the duration of the court's order.⁵

WHAT IS A 72-HOUR MENTAL HEALTH HOLD? COMMITMENT UNDER EMERGENCY CERTIFICATION? INVOLUNTARY CIVIL COMMITMENT?

In Connecticut, a **72-hour hold** is the examination at a hospital of a person who is believed to have psychiatric disabilities⁶ and be a danger to self or others or gravely disabled⁷ and in need of immediate care and treatment.⁸

A **commitment under emergency certification** is the admission of a person, for up to 15 days, who a physician concludes has psychiatric disabilities and is dangerous to self or others or gravely disabled.⁹

Involuntary civil commitment is the hospitalization by order of the court after a hearing of a person with psychiatric disabilities who is a danger to self or others or gravely disabled and less restrictive options are unavailable, and the person will not voluntarily receive services.¹⁰

Mental illness diagnosis

An individual may be detained for a 72-hour hold if they are *believed* to have psychiatric disabilities and are a danger to self or others or gravely disabled.¹¹ An individual may be committed under emergency certification if a physician *concludes* the person has psychiatric disabilities and is dangerous to self or others or gravely disabled.¹² An individual may be involuntarily committed if the court *finds* that the person has psychiatric disabilities and is a danger to self or others or gravely disabled.¹³

Firearm prohibition

In Connecticut, an individual must obtain an eligibility certificate from the Commissioner of Public Safety prior to purchasing firearms or ammunition.¹⁴ A person who has been involuntarily committed by the court within the preceding sixty months is ineligible for a firearm or ammunition eligibility certificate and is prohibited from purchasing firearms or ammunition.¹⁵ Connecticut does not prohibit firearm purchase and possession for persons committed under emergency certification or detained for a 72-hour hold.

CONNECTICUT RISK WARRANTS VS. COURT ORDERED MENTAL HEALTH TREATMENT: HOW DO THEY DIFFER?

*Information on this website does not constitute legal advice. Every factual situation is unique; if you want legal advice specific to your particular circumstances, please consult knowledgeable counsel.

ENDNOTES

1 Conn. Gen. Stat. § 29-38c.

2 Conn. Gen. Stat. § 29-38c..

3 Conn. Gen. Stat. §§ 29-36f(b); 29-37p(b).

4 Conn. Gen. Stat. § 29-38c(b).

5 Conn. Gen. Stat. § 29-38c(d).

6 "Person with psychiatric disabilities" means any person who has a mental or emotional condition which has substantial adverse effects on his or her ability to function and who requires care and treatment, and specifically excludes a person who is an alcohol-dependent person or a drug-dependent person. Conn. Gen. Stat. § 17a-495(c)

7 "Gravely disabled" means that a person, as a result of mental or emotional impairment, is in danger of serious harm as a result of an inability or failure to provide for his or her own basic human needs such as essential food, clothing, shelter or safety and that hospital treatment is necessary and available and that such person is mentally incapable of determining whether or not to accept such treatment because his judgment is impaired by his psychiatric disabilities. Conn. Gen. Stat. § 17a-495(a).

8 Conn. Gen. Stat. § 17a-503.

9 Conn. Gen. Stat. § 17a-502.

10 Conn. Gen. Stat. §§ 17a-497; 17a-498(c)(3), (e).

11 Conn. Gen. Stat. § 17a-503.

12 Conn. Gen. Stat. § 17a-502.

13 Conn. Gen. Stat. § 17a-498(c)(3), (e).

14 Conn. Gen. Stat. §§ 29-36f(a); 29-37p(a); 29-38n(a).

15 Conn. Gen. Stat. §§ 29-36f(b); 29-38b(b); 53a-217c(a)(4).

ABOUT THIS PROJECT

In 2013, following the Sandy Hook massacre, the Consortium for Risk-Based Firearm Policy published evidence-based recommendations to address all forms of gun violence. Among the recommendations was a call for states to pass a new policy called Extreme Risk Protection Orders. As of September 1, 2020, seven years since the Consortium released its report, 19 states and the District of Columbia have passed new ERPO laws. Dozens more states have introduced ERPO bills.

With many laws in place, and several additional states poised to enact ERPO laws, there is a need for information, technical assistance, and support for implementing ERPO laws. This project was created to address that need. Please visit the central resource for ERPO implementers at americanhealth.jhu.edu/implementERPO.