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**STATE OF MINNESOTA
IN COURT OF APPEALS
A13-2168**

In the Matter of the Civil Commitment of: Daniel John Stepaniak

**Filed March 31, 2014
Affirmed
Larkin, Judge**

Ramsey County District Court
File No. 62-MH-PR-13-586

Rick E. Mattox, Prior Lake, Minnesota (for appellant)

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Considered and decided by Larkin, Presiding Judge; Worke, Judge; and Kirk,
Judge.

UNPUBLISHED OPINION

LARKIN, Judge

Appellant challenges his civil commitment as a person who is mentally ill, arguing that the district court's findings of fact are clearly erroneous and do not support the conclusion that he posed a substantial likelihood of physical harm to himself. We affirm.

FACTS

This case arises from the district court's commitment of appellant Daniel John Stepaniak to the custody of the head of Regions Hospital and the Commissioner of Human Services for six months after holding a commitment hearing and concluding that Stepaniak "is a mentally ill person who meets the statutory criteria for civil commitment." The district court found the following facts based on evidence presented at the hearing.

Paramedics brought Stepaniak to Regions Hospital on October 24, 2013, after he met with a social worker for a crisis assessment. Stepaniak told hospital staff that he was there because he called the police after he had been assaulted with microwave guns. He stated that "people are turning into moonbeams. I can feel them hitting me." Stepaniak reported that he had not slept for four days, that he was not eating because the "side reactions are the effects," and that he would not eat because of "radar waves." Stepaniak further reported that he thinks about suicide and has ideas about how he would commit suicide. During his hospital stay, staff described Stepaniak as delusional, paranoid, and guarded, with tangential and rambling speech. He was focused on his belief that a neighbor had attempted to harm him with moonbeams and microwave guns. He asked hospital staff to identify and destroy a "strong energy" coming from the hospital ceiling. Because Stepaniak did not believe that he had a mental illness, he refused medications.

According to Stepaniak's mother, with whom he had lived for most of his life, Stepaniak had been isolating himself and rarely came out of his bedroom. He had not been eating or sleeping, and he had lost 30 pounds in four to five months. Stepaniak's

mother stated that Stepaniak has no source of income, is unable to support himself, and will not seek help.

Dr. Peter Meyers, a court-appointed psychologist, diagnosed Stepaniak with schizophrenia. Dr. Meyers observed that Stepaniak had suffered a significant amount of weight loss and sleeplessness as a result of his psychotic symptoms, delusional beliefs, and paranoia. Dr. Meyers reported that Stepaniak's perceptions were so distorted that it was difficult to talk with him about his mental illness or treatment options. Dr. Meyers concluded that Stepaniak was not able to care for himself, lacked the capacity to make a reasoned decision regarding treatment, and was a threat to himself because of his inability to meet his basic needs.

As support for the commitment order, the district court found that “[Stepaniak] is a danger to self or others and has attempted physical harm to himself or others and has failed to provide himself with food, clothing, shelter, safety or medical care.” The district court concluded that Stepaniak “poses a substantial likelihood of physical harm to self or others. This is demonstrated by a failure to obtain necessary food, clothing, shelter or medical care as a result of the impairment or by a recent attempt or threat to physically harm self or others.” The district court committed Stepaniak, effective November 5, 2013, and authorized Stepaniak's treating physician to administer neuroleptic medications. This appeal follows.

DECISION

Minnesota law provides for the judicial commitment of mentally ill persons. Minn. Stat. § 253B.09, subd. 1(a) (2012). As is relevant to this case, the civil commitment act defines a person who is “mentally ill” as

[a]ny person who has an organic disorder of the brain or a substantial psychiatric disorder of thought, mood, perception, orientation, or memory which grossly impairs judgment, behavior, capacity to recognize reality, or to reason or understand, which is manifested by instances of grossly disturbed behavior or faulty perceptions and poses a substantial likelihood of physical harm to self or others as demonstrated by:

(1) a failure to obtain necessary food, clothing, shelter, or medical care as a result of the impairment;

....

(3) a recent attempt or threat to physically harm self or others.

Minn. Stat. § 253B.02, subd. 13(a)(1), (3) (2012). The determination of a “substantial likelihood of physical harm to self or others” is crucial, because there is no constitutional basis for confining mentally ill persons involuntarily if they are not dangerous to anyone and can live safely on their own. *O’Connor v. Donaldson*, 422 U.S. 563, 575, 95 S. Ct. 2486, 2493 (1975).

A commitment order must be based on clear and convincing evidence that the proposed patient is “mentally ill” and that “there is no suitable alternative to judicial commitment.” Minn. Stat. § 253B.09, subd. 1(a). In a commitment proceeding, the district court “shall find the facts specifically, and separately state its conclusions of law.” *Id.*, subd. 2 (2012). This court’s review is limited to determining whether the district

court complied with the civil commitment act and whether the commitment is justified by findings based on evidence presented at the hearing. *In re Knops*, 536 N.W.2d 616, 620 (Minn. 1995). This court will not set aside the district court's findings unless they are clearly erroneous. Minn. R. Civ. P. 52.01. We accept the findings of the district court if they are "reasonably reached from the evidence, viewing the evidence most favorably for petitioner, but having due regard for the requirement of clear and convincing evidence." *In re Leebl*, 352 N.W.2d 135, 137 (Minn. App. 1984) (citing an earlier version of section 253B.09, subdivision 1). But "[w]e review de novo the question of whether the evidence is sufficient to meet the standard of commitment." *In re Civil Commitment of Janckila*, 657 N.W.2d 899, 902 (Minn. App. 2003).

In his brief, Stepaniak assigns error to the district court's factual findings regarding his lack of food, sleep, and medical care, arguing that the findings are "clearly erroneous because there was no evidence [of] any actual failure to obtain necessary food, clothing, shelter, or medical care or a recent attempt or any actual threat to physically harm himself or others." But Stepaniak is in effect also making a legal argument that the evidence is insufficient to meet the standard of commitment. For example, Stepaniak concedes that evidence was presented at the hearing that he "lost thirty pounds." But he argues that because he "had not stopped eating," was "not feeble," "was not malnourished," was not "deteriorating physically," and was "not in jeopardy for his life," "the only showing [was that his weight loss] was not harmful to him." Essentially, Stepaniak argues that the weight-loss evidence is insufficient to establish "a failure to obtain necessary food" under the meaning of Minn. Stat. § 253B.02, subd. 13(a)(1),

which in turn eliminates one of the factors on which the district court relied to demonstrate “a substantial likelihood of physical harm to self” under the statute. Because Stepaniak is effectively challenging a district court’s legal conclusion—rather than a factual finding—we address the issue de novo.

With regard to his weight loss, Stepaniak relies on *In re McGaughey* to argue that although he “may have lost some weight,” “[m]any people need to lose weight” and the district court’s conclusion that his weight loss poses a substantial likelihood of harm is based on impermissible “[s]peculation that he might fail to obtain necessary food . . . in the future.” See *In re McGaughey*, 536 N.W.2d 621, 623 (Minn. 1995) (“[S]peculation as to whether the person may, in the future, fail to obtain necessary food, clothing, shelter, or medical care or may attempt or threaten to harm self or others is not sufficient to justify civil commitment as a mentally ill person.”). But *McGaughey* also states that it is not necessary that “the person must either come to harm or harm others before commitment as a mentally ill person is justified,” and “[t]he statute requires only that a substantial likelihood of physical harm exists, as demonstrated by an overt failure to obtain necessary food, clothing, shelter, or medical care or by a recent attempt or threat to harm self or others.” *Id.* at 623-24.

On appeal, Stepaniak largely ignores the record evidence that his refusal to eat and resulting weight loss was caused by his deteriorating mental health. Despite Stepaniak’s assertion that “[m]any people need to lose weight,” neither the district court’s findings nor the record evidence support his insinuation that his weight loss was attributable to a health-conscious diet. Rather, the district court found that Stepaniak suffered a

significant amount of weight loss and sleeplessness as a result of his psychotic symptoms, delusional beliefs, and paranoia. The record evidence supports that finding. While at Regions Hospital, Stepaniak told hospital staff that he was not eating because the “side reactions are the effects” and because of “radar waves.” Stepaniak’s mother reported that he had not been eating or sleeping, resulting in his loss of 30 pounds in four to five months. Stepaniak argues that his mother’s testimony regarding his weight loss is not credible. That argument is unavailing. The district court heard his mother’s testimony, considered it, and included it in its findings of fact. The district court obviously credited the testimony, and we defer to the fact-finder’s credibility determinations. *See Sefkow v. Sefkow*, 427 N.W.2d 203, 210 (Minn. 1988) (stating that appellate courts do not reweigh the evidence and defer to the district court’s credibility determinations).

Furthermore, Dr. Meyers opined that Stepaniak is unable to meet his basic needs, denies he has a mental illness, and, if left untreated, would continue to decompensate. In sum, the evidence that Stepaniak refused to eat properly because of his mental illness is sufficient to meet the standard of commitment. His weight loss at home, along with his refusal to eat at the hospital resulting from his delusional belief that the food was contaminated by radar waves, constitutes “an overt failure to obtain necessary food.” *See McGaughey*, 536 N.W.2d at 623. The district court was not required to wait until Stepaniak further decompensated and physically harmed himself by becoming malnourished. The danger of Stepaniak’s condition had become apparent. The district court did not err by concluding that its findings demonstrated “a failure to obtain necessary food,” which “pose[d] a substantial likelihood of physical harm to self.” *In re*

Anderson, 367 N.W.2d 107, 108-09 (Minn. App. 1985) (affirming commitment where schizophrenic patient refused to eat properly and lost substantial weight even though “his condition was not yet life-threatening”).

To the extent Stepaniak contends that the evidence does not support the district court’s findings regarding his lack of sleep and medical care, we find his argument unpersuasive. We have carefully reviewed the record and conclude that the evidence supports each of these findings. The challenged factual findings are not clearly erroneous.

In sum, the district court correctly concluded that Stepaniak posed a substantial likelihood of physical harm to himself, and the evidence is sufficient to meet the standard of commitment.

Affirmed.