

*This opinion is nonprecedential except as provided by
Minn. R. Civ. App. P. 136.01, subd. 1(c).*

**STATE OF MINNESOTA
IN COURT OF APPEALS
A26-0551**

In the Matter of the Civil Commitment
of Jamisen Eric Swenson

**Filed August 3, 2026
Affirmed
Halbrooks, Judge***

Blue Earth County District Court
File No. 07-PR-26-392

Steven D. Winkler, Brandt & Winkler, PA, St. Peter, Minnesota (for appellant Jamisen Eric Swenson)

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Considered and decided by Harris, Presiding Judge; Wheelock, Judge; and Halbrooks, Judge.

NONPRECEDENTIAL OPINION

HALBROOKS, Judge

Appellant Jamisen Eric Swenson challenges his commitment as a person who poses a risk of harm due to mental illness, under Minn. Stat. § 253B.09, subd. 1(a) (2024). Specifically, Swenson argues that the record lacks clear and convincing evidence that he: (1) is mentally ill and (2) poses a substantial likelihood of physical harm to himself.

* Retired judge of the Minnesota Court of Appeals, serving by appointment pursuant to Minn. Const. art. VI, § 10.

Swenson further argues that the district court failed to adequately analyze less-restrictive alternatives to civil commitment. We affirm.

FACTS

On January 16, 2026, respondent Blue Earth County Human Services (the county) received an application reporting concerns regarding Swenson’s mental health. The application contained the following information. Since September 2025, Swenson had exhibited increasingly severe mental-illness symptoms, including paranoia and anxiety. Swenson turned off the gas supply to his house because he feared someone was “poisoning him.” Swenson had no job or other income, and he had been relying on his mother to bring him food and water on a near daily basis. Rugs were nailed over his doorways and mice were “rampant” in his home.

On January 20, 2026, two pre-civil-commitment-petition screeners (the screeners) and a law-enforcement officer went to Swenson’s home to conduct an interview with him. They reported the following. The screeners spoke with Swenson through an open window. Swenson did not seem to understand the purpose of the visit and made numerous tangential comments during the conversation. For example, when the screeners explained the civil-commitment process, Swenson replied, “Well, I’m concerned for your safety at the bank!” There had been no conversation about the bank. Swenson then told the screeners that “someone d[ied] in the street.” When asked why he turned his gas off, Swenson replied, “Gas kills people.” And when asked about his income, Swenson stated that he “spent a lot of stuff on crystal rocks” and that he “see[s] faces in them.” The screeners then asked Swenson about his ability to obtain food, and he responded that his mother brought him

food almost daily. The screeners confirmed that Swenson did not leave the house or cook meals. Initially, Swenson expressed a willingness to get a mental-health assessment but then refused to leave his house.

The county petitioned to commit Swenson due to mental illness (commitment petition). Thereafter, an order for apprehension was issued, and Swenson was admitted to a mental-health hospital on February 13, 2026. Approximately one week later, the hospital filed a *Jarvis* petition for an order authorizing involuntary administration of neuroleptic medications to Swenson.¹ The *Jarvis* petition asserted that Swenson did not have the capacity to give informed consent to treatment with neuroleptic medications because he lacked awareness of his situation and the consequences of refusing treatment, and he did not demonstrate an understanding of the risks, benefits, and alternatives to treatment.

The district court held a preliminary hearing and appointed an expert to evaluate Swenson (first examiner). Following another hearing—and upon Swenson’s request—the district court appointed a second expert examiner (second examiner). Both examiners

¹ The supreme court has held that “medical authorities seeking to treat [patients] involuntarily with neuroleptic drugs must obtain pre-treatment judicial review.” *Jarvis v. Levine*, 418 N.W.2d 139, 150 (Minn. 1988). The request that the court approve the involuntary administration to a patient of neuroleptic medications is known as a *Jarvis* petition. *Id.* Neuroleptic medications are a treatment option for a patient who is civilly committed as a person who poses a risk of harm due to mental illness. *See* Minn. Stat. § 253B.092, subd. 1 (2024); *In re Civ. Commitment of Breault*, 942 N.W.2d 368, 373 (Minn. App. 2020).

conducted an evaluation of Swenson and submitted psychological evaluation reports.² The reports also included collateral information from Swenson's mother, wife, and sister.

Both examiners determined that Swenson met the criteria for commitment as a person who poses a risk of harm due to mental illness and supported the *Jarvis* petition. The first examiner diagnosed Swenson with "a major mental illness (unspecified psychotic disorder and rule out bipolar disorder)." The second examiner found Swenson met the criteria for "Unspecified Schizophrenia Spectrum and Other Psychotic Disorder, schizoaffective disorder, bipolar type versus schizophrenia." The parties stipulated to the admission of the examiners' reports.

The district court held a hearing on the commitment and *Jarvis* petitions. Both examiners testified. During their testimony, the examiners addressed whether less-restrictive alternatives to commitment might be appropriate. Both examiners opined that, due to Swenson's lack of insight into his mental illness, civil commitment was necessary.

The district court found that Swenson met "the statutory criteria for civil commitment" as "a person who poses a risk of harm due to mental illness" and ordered an "initial period of commitment . . . for six months." The district court also granted the *Jarvis* petition, authorizing any facility providing care or treatment to Swenson to involuntarily administer neuroleptic medications.

This appeal follows.

² The first examiner filed an initial psychological evaluation report prior to interviewing Swenson and filed an amended report after conducting an interview.

DECISION

When reviewing an order for civil commitment, “we are limited to an examination of whether the district court complied with the requirements of the commitment act.” *In re Civ. Commitment of Janckila*, 657 N.W.2d 899, 902 (Minn. App. 2003). “We review de novo whether there is clear and convincing evidence in the record to support the district court’s conclusion that [an individual] meets the standards for commitment.” *In re Thulin*, 660 N.W.2d 140, 144 (Minn. App. 2003). And we review the district court’s factual findings for clear error. *In re McGaughey*, 536 N.W.2d 621, 623 (Minn. 1995).

A finding is clearly erroneous when it is “manifestly contrary to the weight of the evidence or not reasonably supported by the evidence as a whole.” *In re Civ. Commitment of Kenney*, 963 N.W.2d 214, 221 (Minn. 2021) (quotation omitted). When reviewing factual findings for clear error, appellate courts “view the evidence in a light favorable to the findings” and “will not conclude that a [fact-finder] clearly erred unless, on the entire evidence, [the reviewing court is] left with a definite and firm conviction that a mistake has been committed.” *Id.* (quotations omitted).

To commit someone as a person who poses a risk of harm due to mental illness, the district court must find “by clear and convincing evidence that the proposed patient is a person who poses a risk of harm due to mental illness” and “there is no suitable alternative to judicial commitment.” Minn. Stat. § 253B.09, subd. 1(a). Under Minnesota law, a “person who poses a risk of harm due to a mental illness” is

any person who has an organic disorder of the brain or a substantial psychiatric disorder of thought, mood, perception, orientation, or memory that grossly impairs judgment,

behavior, capacity to recognize reality, or to reason or understand, that is manifested by instances of grossly disturbed behavior or faulty perceptions and who, due to this impairment, poses a substantial likelihood of physical harm to self or others[.]

Minn. Stat. § 253B.02, subd. 17a(a) (2024). This may be demonstrated by any of the following:

- (1) a failure to obtain necessary food, clothing, shelter, or medical care as a result of the impairment;
- (2) an inability for reasons other than indigence to obtain necessary food, clothing, shelter, or medical care as a result of the impairment and it is more probable than not that the person will suffer substantial harm, significant psychiatric deterioration or debilitation, or serious illness, unless appropriate treatment and services are provided;
- (3) a recent attempt or threat to physically harm self or others; or
- (4) recent and volitional conduct involving significant damage to substantial property.

Id., subd. 17a(a)(1)-(4).

In its commitment order, the district court determined that Swenson has a mental illness, as defined in Minn. Stat. § 253B.02, subd. 17a(a), and “poses a substantial likelihood of physical harm to self or others” as demonstrated by the evidence regarding Swenson’s inability to provide food and shelter for himself.

A. Mental Illness

Swenson first argues that the district court erred when it determined that he has a mental illness because that determination is not supported by clear and convincing evidence. Specifically, Swenson contends that “the record reveals substantial diagnostic

uncertainty” and “substantial evidence of alternative explanations” for his behavior that do not necessitate a finding of mental illness. We are not persuaded.

Swenson asserts that discrepancies in the examiners’ diagnoses undermines any assertion that he has a mental illness. We have rejected similar arguments regarding inconsistent diagnoses in prior decisions which are persuasive here. For example, in *In re Civil Commitment of Nordstrom*,³ we stated that “[g]iven the complex nature of commitment proceedings, which require assessments and evaluations by experts, a diagnosis need not be stated with exact certainty as long as the disorder meets the standard for commitment.” No. A14-0276, 2014 WL 3802578, at *2 (Minn. App. Aug. 4, 2014) (citing *In re Civ. Commitment of Navratil*, 799 N.W.2d 643, 648 (Minn. App. 2011)).⁴ Moreover, Minn. Stat. § 253B.09, subd. 1(a), requires a finding of mental illness—not a specific diagnosis. Here, both examiners concluded that Swenson has a mental illness that meets the standard for commitment under Minn. Stat. § 253B.02, subd. 17a(a).

Swenson further asserts that the term “unspecified” in the examiners’ diagnoses undermines the district court’s determination that he has a mental illness. Again, we have previously rejected such an argument. In *Navratil*, we stated that the “‘not otherwise specified’ classification does not diminish the significance of the diagnosis. Rather, the psychologists agreed that . . . [the] disorder has too many facets to be more specifically

³ We may cite nonprecedential opinions as persuasive authority. Minn. R. Civ. App. P. 136.01(c).

⁴ We reached similar conclusions in *In re Commitment of Ebert*, No. A25-0738, 2025 WL 2828397, at *3 (Minn. App. Oct. 6, 2025), and *In re Civ. Commitment of Suchan*, No. A11-1415, 2012 WL 686187, at *4 (Minn. App. Mar. 5, 2012).

defined, *not that is it less of a disorder.*” 799 N.W.2d at 648 (emphasis added). Similarly here, the term “unspecified” does not indicate uncertainty as to whether Swenson has a mental illness. Both examiners opined that Swenson has a mental illness that meets the standard for civil commitment.

Finally, Swenson argues that the district court disregarded “substantial alternative explanations” for his behavior when it determined that he has a mental illness. Specifically, Swenson contends that his behavior could be explained by his substance use, “psychological trauma” caused by family abandonment, and financial crisis, rather than mental illness. And Swenson specifically asserts that he presented a rational explanation for turning off his gas.

As stated above, a commitment order must be supported by clear and convincing evidence. Minn. Stat. § 253B.09, subd. 1(a). Clear and convincing evidence requires proof that is “more than a preponderance of the evidence but less than proof beyond a reasonable doubt.” *Limberg v. Mitchell*, 834 N.W.2d 211, 218 (Minn. App. 2013) (quotation omitted). When reviewing the district court’s factual findings for clear error, we defer to the district court’s credibility determinations, and we do not reweigh or reconcile conflicting evidence. *See Kenney*, 963 N.W.2d at 222-23 (quotation omitted).

Here, Swenson argues that the record supports other explanations for his behavior that do not necessitate a finding that he is mentally ill. But both examiners’ reports—which acknowledged Swenson’s history of substance use—concluded that Swenson is at risk of harm due to mental illness. Swenson asserts that he turned off his gas due to “actual equipment failures” that he claims were confirmed by a utility company. But the record

contains no evidence of any equipment failures aside from Swenson's own testimony, which is contradicted by the information contained in the application and pre-petition screening, both of which reported that Swenson stated he turned off the gas due to fear of being poisoned.

The district court's findings regarding Swenson's mental illness are supported by the examiners' reports and testimony following their interviews with Swenson; collateral information obtained from Swenson's family members describing his behaviors, living conditions, and inability to provide food and shelter for himself; and Swenson's behavior reported by the screeners during their interview. The district court credited this evidence. Swenson's arguments would require this court to reweigh the evidence, which we decline to do on appeal. *Id.*

Therefore, we conclude that the district court's determination that Swenson is mentally ill is supported by clear and convincing evidence and is not "manifestly contrary" to the weight of that evidence. *See id.* at 221.

B. Substantial Likelihood of Physical Harm to Self or Others

Swenson contends that the district court erred when it determined that he poses a substantial likelihood of physical harm to himself because that determination is not supported by clear and convincing evidence.

Under Minn. Stat. § 253B.02, subd. 17a(a), in addition to finding that a person is mentally ill, the district court must find, by clear and convincing evidence, that a person "poses a substantial likelihood of physical harm to self or others as demonstrated by . . . a failure to obtain necessary food, clothing, shelter, or medical care as a result of the

impairment.” “[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.” *McGaughey*, 536 N.W.2d at 623 (emphasis added). But a person need *not* “come to harm or harm others before commitment as a mentally ill person is justified.” *Id.*

Swenson contends that the statutory requirement was not satisfied because his failure to obtain food and shelter has not resulted in any “medical consequences” or “documented medical crisis.” We are not persuaded. As provided in *McGaughey*, the statute does not require proof that *actual* harm has occurred but rather “that a substantial likelihood of physical harm exists, as demonstrated by an overt failure to obtain necessary food [or] shelter.” *Id.*

Swenson admits that he “shut off the gas, resulting in lack of heat, hot water, and cooking capability.” In *In re Schaefer*, we concluded that a lack of heat demonstrated a substantial likelihood of physical harm, reasoning that “[a] person may be able to survive winter in a house with limited heating, but it is substantially likely that attempting to do so will cause physical harm.” 498 N.W.2d 298, 300 (Minn. App. 1993).

Swenson further argues that the district court erred when it “relied heavily” on his mother’s statements that she brought him food almost daily. But the record shows that during pre-petition screening, Swenson told the screeners that his mother brings him food almost daily, and the screeners reported that Swenson “does not leave the house [and] . . . does not cook meals.” Swenson’s mother also confirmed that she had been bringing Swenson food and water daily.

Moreover, Swenson reportedly lost approximately 50 pounds in the months preceding the hearing. Although Swenson claims his weight loss was due to lifestyle choices, as the county argues, we have determined that significant weight loss can be evidence of a failure to obtain food. *See In re Civ. Commitment of Stepaniak*, No. A13-2168, 2014 WL 1272453, at *3 (Minn. App. Mar. 31, 2014) (rejecting appellant’s contention that “weight loss was attributable to a health-conscious diet” and concluding that based upon evidence in the record, appellant’s “weight loss was caused by his deteriorating mental health”).⁵

By urging us to credit his testimony, Swenson again asks this court to reweigh evidence, which we are not permitted to do on appeal. *See Kenney*, 963 N.W.2d at 222-23. As previously stated, on appeal, we defer to the district court’s credibility determinations. *Id.* We conclude that the district court’s determination that Swenson poses a substantial likelihood of physical harm to himself is supported by clear and convincing record evidence.

C. Less-Restrictive Alternatives

Swenson, lastly, argues that the district court failed to fulfill its statutory requirement to consider less-restrictive alternatives to civil commitment. While Swenson acknowledges that the district court considered several alternatives to commitment, he contends that the district court did “not provide the specific, reasoned analysis required by statute.”

⁵ Cited for its persuasive authority. *See* Minn. R. Civ. App. P. 136.01(c).

Prior to ordering civil commitment, a district court must consider “reasonable alternative dispositions” to commitment. Minn. Stat. § 253B.09, subd. 1(a). As part of its findings, the district court must “identify less restrictive alternatives considered and rejected by the court and the reasons for rejecting each alternative.” *Id.*, subd. 2(b) (2024). A reviewing court will not reverse a district court’s findings regarding the least-restrictive means of treatment unless they are clearly erroneous. *Thulin*, 660 N.W.2d at 144.

Here, the district court concluded that “[a] stay of the petition, outpatient treatment, release before commitment, and voluntary admission are not appropriate The least restrictive alternative which meets [Swenson’s] treatment needs is an involuntary commitment.” In expressly rejecting those alternatives, the district court referred to the examiners’ testimony regarding less-restrictive alternatives. In their respective testimonies, the examiners stated that they had considered less-restrictive alternatives, including stay of commitment and Adult Rehabilitative Mental Health Services (ARMHS), a less-restrictive alternative proposed by Swenson. The second examiner specifically addressed ARMHS and opined that Swenson’s needs “far exceed what an ARMHS worker could provide.” Ultimately, both examiners concluded that civil commitment is appropriate due to the severity of Swenson’s mental illness.

The district court’s reasoning here is similar to that in *Thulin*. There, the district court concluded in its findings of fact:

Alternatives to the disposition herein have been considered and rejected as follows: Voluntary out-patient and informal admissions to a treatment facility have been considered by professionals. It is the opinion of both [experts] that these are not reasonable alternatives to commitment at this time.

Id. at 144-45. We determined that the above analysis satisfied the statute’s analytical requirement.

While the district court could have provided some additional explanation as to why it rejected specific alternatives, we conclude that under *Thulin*, the district court’s reasoning satisfies the statutory requirement. Here, as in *Thulin*, the district court explained that, in light of the examiners’ testimony, the less-restrictive alternatives do not meet Swenson’s needs.⁶ Thus, the district court met its requirement to consider alternatives to civil commitment and provide reasoning for rejecting those alternatives, and we conclude that the district court’s finding is not clearly erroneous based on this record.

Accordingly, we conclude the district court properly exercised its discretion when it civilly committed Swenson as a person who poses a risk of harm due to mental illness.

Affirmed.

⁶ To the extent that Swenson argues that the district court’s findings regarding less-restrictive alternatives are clearly erroneous, we are not persuaded. In *Thulin*, we concluded that “[b]ecause the [district] court heard evidence from two experts who both recommended the same treatment facility and because the court considered alternatives, the district court’s finding is not clearly erroneous.” 660 N.W.2d at 145. Similarly here, the district court’s finding regarding less-restrictive alternatives is supported by evidence from two expert examiners who both opined that there are no reasonable alternatives to commitment at this time.