

EDITORIAL

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and use often-misleading criminal-justice language --for example, "indecent liberties with a child" to depict simple teenage sex. Former offenders have a tougher time getting a job or normal life. Vigilante violence has led to instances of stabbings, houses burned, even targeted killing by strangers who found addresses through online registries. Other registrants have been driven to suicide.

Now things are turning even worse with a spate of laws restricting where former offenders can live. Twenty-two states, plus hundreds of municipalities, are setting minimum distances from 500 feet up to 2,500 feet that a former offender's residence must be from such places as schools, day-care centers, parks, movie theaters, stores, swimming pools, even public transit.

The result, all too often, is to make most or in some cases virtually all of a community off-bounds for a former offender to live. An exposé last spring by reporter Isaiah Thompson of the Miami New Times revealed a whole colony of former offenders camping out under the noisy Julia Tuttle Causeway because stiff Miami-Dade County residency requirement left them practically no other place to live.

One resident was "Big Man" a 6 foot, 250-pounder forced to leave his home because 23 years ago, when he was 19, he was charged with sexual assault on a minor. Big Man's wife regularly showed up with food and supplies, telling Thompson: "Look at this place! There's no running water to take a shower; there's no toilets. My husband can't work now; no body's going to hire him."

Big Man departed before Christmas, his case resolved by his parole officers. But, with newcomers, the under-the-bridge census is still more than 30. Dade County officials continue to profess no concern.

Which, in fact, is no unusual. Pressing a residency requirement in Georgia, state House Majority Leader Jerry Keen said: "My intent personally is

to make it onerous on those that are convicted of these offenses that they will want to move to another state."

Mayors and county officials who press harsh residency restrictions are doing the same effectively banishing individuals who've already been punished by the law. Talk about violating constitutional rights.

Human Rights Watch doesn't underestimate the horror of many sex crimes, or the need for close controls on dangerous offenders. But neither states nor localities, it argues, should pass blanket restrictions on all released individuals. Instead, as a model Minnesota law mandates, restrictions should be based on a careful evaluation of the offender's personal and family situation by a panel of law-enforcement, victim-advocacy and specialized-treatment providers.

The Megan and Jessica cases are deeply tragic, but they miss a glaring fact: Over 90% of sex crimes against children aren't committed by outsiders at all, but rather by family members or family acquaintances. If there's prevention work to be done, that's where it should be focused. Not by Internet scarlet letters, and certainly not by residency laws that hound ex-offenders out of their communities, separate them from their families, and quite possibly drive them into isolation and new criminal behavior. ■

ECHOES OF THE GULAG

Published at
Coalinga State Hospital

Articles for publication are always needed. But they cannot be returned. The Editor retains the right to edit, modify or reject any article submitted. Publisher does not accept responsibility for the veracity of any submitted article.

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Absent Comrades In Memoriam

ECHOES asks everyone, everywhere to pause for a brief moment each day and remember, with kindness, each of these, our 40 Absent Comrades.

Robert Cloverdance1998
Jim Davis.....01/21/99
Carl Colman.....06/19/98
Donald Hughes.....11/07/00
David Stansberry05/10/00
Donald Lockett.....01/23/01
Charles Rogers.....05/29/00
Edward Samradl.....05/10/01
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Cash O'Dowd.....12/11/03
Elmer Bock.....04/07/04
David Gonick.....08/23/04
Joe Vlahoitis.....12/04/04
Crowin Weltley12/13/04
Ross Washington01/30/05
Richard Bishop.....02/07/05
Alton Robinson08/19/05
Robert Canfield.....08/29/05
Geraldo Sanchez09/24/05
Jerald Brooks11/24/05
James Aceves07/20/07
Frank Valadao.....11/08/07
Donoven Myrick.....02/16/08
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Paul Pederson06/11/08
Kenneth Edmanton01/12/09
Jimmy Guthrie02/02/09
Berry Blake.....02/04/09
James Rosenberg02/12/09
Charles Greclen02/24/09
Joseph "Pepie" Vila06-22-09
Jari Stevens07-22-09

*Released from this oppressive prison by
the Compassionate Hand of God.*

This Publication is dedicated to and Written By American Citizens Fraudulently held under The California SVP Act.



Gulag News



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EDITORIAL

By: Neal Peirce - Seattle Times

The harm done by sex-offender laws

Everyone wants children protected against sexual predators. Few crimes are more heinous than rape or murder of a child. Even lesser molestation can spell years of depression, anxiety and nightmares for victims. Some even suffer self-mutilation and suicidal tendencies.

But the national surge of states adopting Megan's Law and Jessica's lawonline registries of convicted sex offenders and stiff restrictions on where they can live--is going way overboard and causing more harm than good.

The statutes are named after young girls who were abducted, raped and murdered by convicted child molesters. Now there's federal law virtually forcing states to set up publicly accessible Internet registries showing sex offenders' residential addresses.

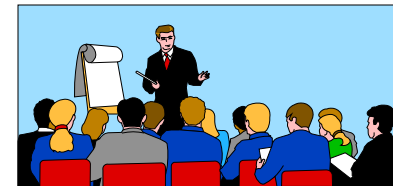
But the laws are turning out to be crude instruments with disturbing impacts.

First, they don't differentiate between truly serious sex offenders and other convicted of lesser charges such as urinating in public, or teenagers having consensual sex, or kids who expose themselves as a prank.

For one and all, there's a "scarlet letter," note Human Rights Watch, a nonprofit monitoring group. The Internet registry sites can be accessed by anyone

California's Disordered Mental Health System

Lance Purcell



THINK SICK / BE SICK

By: Robert Lefort

The mind seems to play a key role in kick-starting and "perpetuating" illness. When one is constantly being told he/she is "sick" the mind & body's reaction often makes it worse. Stress and anxiety play a major role. What really matters is the interpretation and your emotional reaction. "Stress seems to be the killer," says Carol Howard, President of the Chronic Fatigue Syndrome, Fibromyalgia and Chemical Sensitivities Coalition of Chicago. Fear of further damage and disability may keep a patient from trying to get back to a productive lifestyle. The behaviorist "cycle of abuse" model perpetuates this fear that relapse is inevitable.

Wayne Katon, Professor of Psychiatry at the University of Washington, in Seattle, makes the case that stress and anxiety play a primary role. "Whatever causes this impairment is probably not what's keeping it going," said Katon. "What's keeping it going to a large extent are the misbeliefs about getting back to [a] [healthy,] active lifestyle."

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their decisions to violate the law thus. This was articulated in the Legislative Intent. Put another way, it might be said that the sex offender goes to prison because he does *not* have a mental disorder.

However, in the mid-90s a new idea emerged as a result of the public perception that sex offenders ought to be confined beyond their mere prison sentences. Prisons seemed to release sex offenders too soon they needed more time off the streets. The Sexually Violent Predator Act was designed to meet this perception.

Many people were swept up in this new structure, but its justification was exactly opposite of that previously stated in the Legislative Intent now the offender had no volition for the acts they had committed. Instead, they were said to be operating under the overwhelming influence of a mental disorder which they could not control. (This is the part of the SVPA that requires a finding of a lack of volitional control.)

Leaving aside the fact that psychologically, *lack of volitional control* is generally descriptive of such disorders as Tourette's syndrome, ethical/legal requirements make proof of this lack of volition obligatory since liberty interests are at stake. A person may be dangerous, but in order to lock the person up under the SVPA it must be proven that the reason he's dangerous is because he has a mental disorder, and because it is that specific mental disorder which makes him so. However, the U.S. Supreme Court, in an important decision, stated that a person might be found to meet the criteria even though they had some small amount of choice in the matter, using the phraseology 'serious difficulty' in describing the threshold of volition. This decision is wrong for the following reasons.

The price for the prospective SVPs willful criminal behavior has already been exacted under the prior doctrine that he *had* volitional control. Indeed, he has exercised his ability to recognize his choices and to avail himself of them, and there remains no excuse for his behavior.

It is at this point many people think, "If I lock up a morally culpable agent for

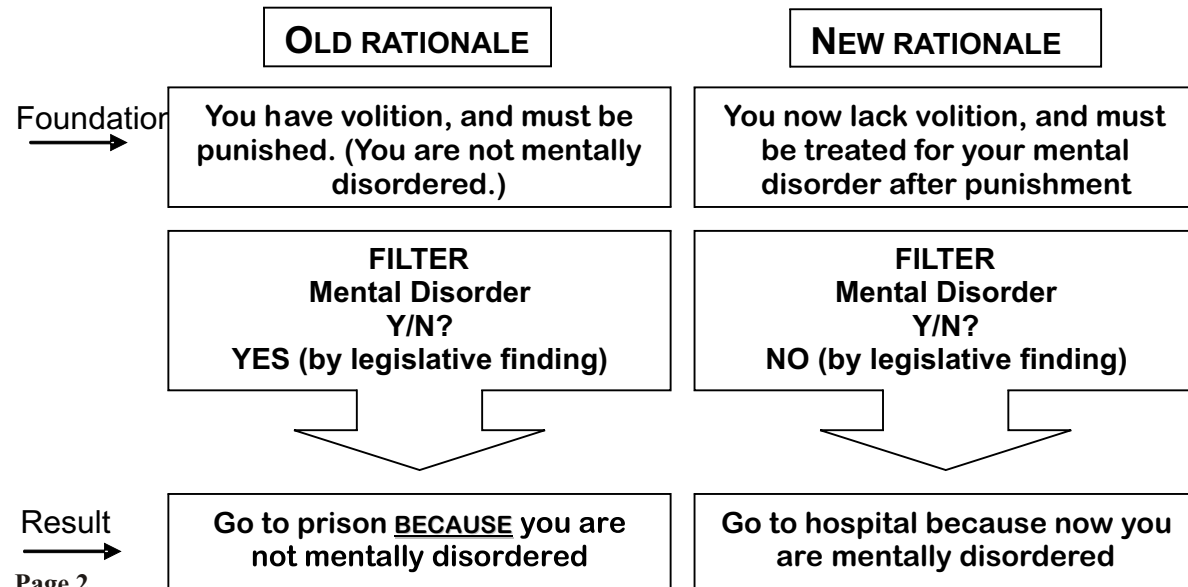
the *choice* to commit crimes, how can I then turn around and confine that same person after that on the basis of his *not* being morally able to make a choice in the commission of those same crimes?"

It is claimed that the justification for additional confinement is for treatment rather than for punishment. However, I do not raise that thorny issue. Instead, I raise this one: When the state exacts punishment for violating a law based on one rationale, it cannot then turn itself around and form an *opposite* rationale to further remove the liberty of that individual.

View Chart Below

Ex Post Facto should apply to *the foundation*, or *rationale*, of these two opposite schemes. The state should not be allowed to use opposite bases after one of them has been invoked. This is because the law, and the foundation upon which it rests, are one and the same; they are moral equivalents. Once a rationale has been decided on, and action taken based thereon, the state should not then

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New Static 99

A Power Point presentation will be conducted by Leslie Helmus, and Karl Hanson at the annual Association for the Treatment of Sexual Abusers in Atlanta Georgia, on October 23, 2008

The power point slides show that the static 99 over predicts by an enormous amount. The significance cannot be over stated.

The evaluators have been using an actuarial tool that is now being questioned by its creator.

The new study used a much larger sample group than the original static 99, with over 6000 offenders (the original had about 1200).

However, the new set, are more modern releases (people released in the 1990's and followed, where the majority in the original where released in the 1970's).

In the 50 slides and grafts, one can see that the jagged look of the original curves of the graft, are replaced by a much smoother flowing curves on the graphs.

This tells us that with the much larger sample size, there is less influence caused by the odd ball data points that skew things in small sample plots.

The original static 99 had points for example that, a '4' had a lower recidivism rate than a '3'.

That was obviously based on faulty data points.

The curves have appearance of better data, and show significantly lower recidivism rates.

In some cases the Static 99 overestimates the risk of offenders in excess of 1/3. In people with a Static 99 score of 4, 5, or 6, **IT OVER PREDICTS DRAMATICALLY!!!!**

The last words are Dr. Hanson's own words....

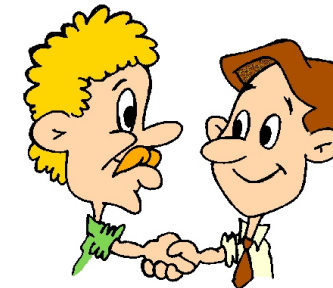
The five year rate for the new set (a score of 6 or above) is 26% at five years (the original was 39%) and 35% at ten years (the original was 45%). ■

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Yet when he demonstrated the soundness of their hypothesis *they sought to send him to prison!* Just in case you have any lingering doubts about the malevolence of California's mental health system, it is required they drop his petition for recommitment as mentally disordered in order to file criminal charges against him. The direct implication is that now he *has* volitional control enough for punishment, and does *not* have a mental disorder. How can the commission of previous sex offenses be the basis for finding that he lacked volitional control over his mental disorder, when a further sex offense is evidence proving he possessed it?

Because checks and balances are inoperative does not mean that the decisions agreed upon by the powerful elites are necessarily the correct ones. The United States of America is the best experiment in Democratic Republicanism, but United States' history is littered with examples of demographically-derived but wrong majorities, from authorized slavery to Japanese interment camps, from genocidal Manifest Destiny to Abu Ghraib and Guantánamo. Who stands against the majority? ■



Thank you!

The Gulag Editor would like to thank Robert and Sam Landis and any others for bearing the expense for copying this current issue of The Gula News Letter. ■



Senate Bill 669

The Governor signed this bill into law on August 6, 2009. The summary of this bill is as follows:

Provides that, in a trial to determine whether or not a person is still a sexually violent predator (SVP), the court shall instruct the jury that failure to participate in or complete the prescribed sex offender treatment may be considered evidence that a person's condition has not changed.

Specifically, this bill:

1. States that where the SVP's failure to participate in or complete treatment is relied upon as proof that the person's condition has not changed, and there is evidence to support that reliance, the jury shall be instructed.

2. Provides that the jury shall be instructed as follows: "[T]he committed person's failure to participate in or complete the State Department of Mental Health Sex Offender Commitment Program(SOCP) are facts that, if proved, may be considered as evidence that the committed person's condition has not changes. The weight to be given that evidence is a matter for the jury to determine." ■

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turn the premise on its head and under the pretext of treatment do anything whatsoever to that person.

Within the context of public policy, psychology, and the law, there is a deep connection between the basis or reason behind something, and the thing itself. The reasoning behind the imposition of punishment flows naturally from the fact that the criminal exercised a choice. He *decided* to violate the law. For the decision and the act together he ought to pay a penalty, and so he does. However, the punishment aspect is tied directly to the use of his own volition, or knowing willfulness, in the commission of the offense.

The severity of damage is really only peripheral. We don't punish inanimate objects for damaging breakdowns even when they kill people, since that would be irrational. What's the point? We can't "teach it a lesson." This is the requirement of *mens rea* (guilty mind). If a crane collapses, we send it to a place that repairs cranes, or we trash it. We don't get mad at it. If a person *can't* stop violating the law we send him to a mental institution: hopefully they might be able to fix him up. Prison is for those we think deliberately violated the law. If we find he didn't do it intentionally, that he had no choice in the matter because he had no volition, it's no different than the collapse of a crane. Punishing the person first, but then sending him to a place where he might be "fixed" is the exact equivalent of punishing a crane for collapsing, but afterward sending it in to the repair shop. Often such punishment might render the crane irreparable. This analogy extends to the state's unavoidable damage to people by imprisonment. Should they then squeeze out of them whatever remains of life with "treatment?" They may become so injured by the penalty nothing remains to repair, even if they could.

Sex offenders, like other kinds of criminals, are punished for their crimes under the doctrine of retributive justice, derived from *lex talionis*. Does the public think that it is serving justice by imposing retribution on mentally disordered persons believed to be unable to control their impulses? Can't you just see it? Thousands of people lining up to righteously bang away on obnoxious construction cranes?

But punishment also serves as a deterrent to other potential criminals. Think about all those budding potential criminals watching from the wings, whose unconscious and ongoing evaluation of their society's irrational, indiscriminate, and malicious justice leads them toward a calculus of contempt. Will they identify with this society or their own *ad hoc* class structure? Yet we wonder at how outlaws always have an sense of being justified even in their antisocial behavior. Deterrence *is* being accomplished; however, it is most likely deterrence from identification with an absurd social order in an irrational society.

The state must select whatever rationale it will before acting. It must then stand by that choice. Whatever it does thereafter, it must not retract the choice it previously made which justified punishment, turn that foundation on its head, and act adversely against the person (though nothing has happened in the intervening time) merely because it now wants to explain things differently. To do so is to establish a new doctrine within the criminal justice system; one which allows the state to manufacture new rationales or pretexts *ad infinitum*, and perpetually incarcerate those it will, at will. What would prevent the state from such actions against sex offenders? Certainly not a compassionate public, nor the judiciary intent on winning reelection. Who will hold the Legislators' feet to the fire on this issue? The Governor? The Courts? An outraged public?

Vote-chasing legislators have compelled the Department of Mental Health to abandon their primary mission

in the treatment of the mentally ill. Instead, places like Coalinga State Hospital have become Hotel California for sex offenders who cannot be further confined through penalological methods: an extension of their prison sentence through maneuver. "You can check out anytime you like, but you can never leave."

What about the opposite? During the Reagan governorship of California funding for mental hospitals was drastically cut and their patients released into the community. We have lived with the results of this decision for a long time. Mentally ill persons crowd sidewalks at night for sleeping places, subsist under bridges, and line freeway on-ramps with "will work for food" signs hastily scrawled on cardboard. Some resort to crime in order to survive in a hostile, competitive world, and are sent to prison for their trouble. By the criminalization of mental illness thus have prisons become the new repository of the mentally ill. At the California Men's Colony in San Luis Obispo for instance, almost half of the medium custody bed space is taken up by men taking one or more psychotropic medications. Ironically, Atascadero State Hospital down the road regularly receives prisoners for psychiatric treatment from this and other prison institutions. Most of these men are familiar denizens of this sterile dungeon, having been cast out earlier by Reagan, *et al.*

Prisons are full of mental patients, and mental hospitals are full of prisoners in this disordered world of mental health. And in the most telling and paradoxical piece of whimsy yet, today, as I write this piece, a well-known pedophile and collector of child pornography in Coalinga State Hospital, Brian B., was arrested and dragged off to jail to await trial for its possession. Here is the incongruity: he was at Coalinga because they said he had a sexual mental disorder over which he had no control, *which was the reason he is in the mental hospital.*

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Think Sick / Be Sick

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This "misbelieve system" may be originating from the "highly structured interventions" which include "cognitive" and "emotional therapy." Being convicted of a sex offense, even two or three times, does not evidence a mental disorder that is out of control, anymore than "shoplifting" ect., makes you a kleptomaniac (unable to control your behavior).

"Your beliefs about the illness are important," says Dedra Bushwald, an internist at the University of Washington's Chronic Fatigue Clinic, in Seattle. Ironically, studies have shown that patient advocacy groups may be more harmful than helpful. Possibly by reinforcing the sense of perceived victimization or by giving misguided advice, based on the tainted information provided by the "professionals."

"The support groups are very anti-psychological," says Katon. "A lot of times they act to inadvertently reinforce illness beliefs [such as fear of relapse or exhaustion] that are potentially harmful to patients." This belief included a teaching that "you are sick and you must live with the fact that you have this uncontrollable mental disorder. Those in support groups [e.g. the "phases"] often report more severe illness, and say that they feel worse since joining than do dropouts. But critics dispute these findings, saying, "dropouts leave because they feel better."

Pat Fero, Executive Director of the Wisconsin chapter of CFIDS (Chronic Fatigue and Immune Dysfunction Syndrome) Association of America, a patient advocacy group says, "If you're feeling negative about everything around you, yes, you're going to feel worse."

"What they don't want you to believe is that most of us do not need a 'therapist' to tell us we have made some 'bad choices' and mistakes. But that does not mean we are incapable of changing, and learning from our mistakes as we

have grown older. We just need the chance to prove ourselves." You don't need "cognitive therapy," based in the behaviorism sect of psychology, to learn how to "displace" or replace erroneous, fearful thoughts with more positive ones, such as, "I don't have to collapse," [give-up, (or relapse),] "this [thought] will soon pass," says Laura Hillenbrand, author of Seabiscuit and a noted Chronic Fatigue Advocate. As a result of crediting cognitive therapy, she says, "I have been able to live a better, happier life."

Just because AA, NA, SA support groups, and cognitive therapy works for these people who have tried other "alternative" way to learn how to change their behavior(s), does not mean the state should free mandate an individual to adhere to that specific belief system. Especially when it is contrary to their own belief system, and the individual has found the "alternate" to be a successful way to prevent re-offense. It is unethical for a medical "profession" and is a misuse of the courts and the Constitution of both state and federal governments.

Jim Malone learned the hard way that "being told you're ill can actually make you sick." Being told, and believing that he had AIDS, Malone developed symptoms of the disease. If you keep telling someone that they are "sick" and you tell them often enough, they will start believing it. I feel sorry for those who are not intelligent enough to know better. Just ask those who participate in the "Phase Treatment Program," where they must sign an admission that they are in need of outside assistance to reduce[not cure] their chance of re-offense.

"I have more empathy with people who are actually sick," says Malone. I can see how they exhibit signs of the disease [paraphilia] that they, the state's evaluators, say we all have just because of a criminal conviction from long ago. This is pertinent seeing that the California SVPA clearly states that a "conviction...shall not be the sole basis for the determination." This is why "jurors shall be admonished that they

may not find a person a [SVP] based on prior offenses **absent relevant evidence of a currently diagnosed mental disorder.**"

Now, if we can only get our defense attorneys to understand that this procedural safeguard starts at the screening stage and proceeds through both the "administrative and judicial" due process protections. If we do not stand up for our right to fair process, this illegal application of the SVP Act will continue to result in many illegal commitments, without "relevant evidence" to support a "currently diagnosed mental disorder."

As previously addressed in earlier writings, to qualify for the California Sexually Violent Predator Act, there must be signs, exhibiting sexual psychopathology. Without "relevant evidence" the state hired evaluators base a current diagnosis "solely" on the risk assessments that rely on the number of "arrests" verse the actual convictions.

Don't continue to allow these so called professionals to convince you "you are sick" until you finally start to exhibit the signs of the sickness they are convinced you have, although there is no "relevant indicia" of a mental disorder, and not "relevant basis" for a dangerousness finding. ■

Articles Needed

Up to date articles are needed for The Gulag News. If you have factual stories, legal case cites, or anything that pertains to this commitment, please submit them to Tony Iannalfo or Glen Green at Coalinga State Hospital. Anyone, this includes staff, free persons and so-called patients can send articles to us at Po. Box 5003, Coalinga, Ca. 93210-5003. ■



Revisit Jessica's Law

From the Los Angeles Times, Jan. 20, 2009

"Of all the ill-considered ballot initiatives approved by California voters over the years, few can match Jessica's Law for sheer self-destructiveness. The measure, billed as a way to protect children from sexual predators when it appeared on the ballot in 2006 as proposition 83, is worsening the yawning state budget gap amid zero evidence that it's protecting anyone----in fact, according to a state panel, it may be threatening public safety."

"This page warned that the initiative would be an expensive mistake, but that didn't stop 70% of voters from approving it. That may be because sexual predators are nobody's idea of a good neighbor, and voters thought that forcing sex offenders to wear GPS tracking devices for life and forbidding them to live within 2,000 feet of schools and parks would keep them at bay. What they didn't consider were cost and practicality."

"Among its many failings, the measure doesn't distinguish between criminals who are at high risk of re-offense and those who aren't. That means a teenager convicted of having sex with his underage girlfriend, as just one example, is subject to GPS monitoring and residence restrictions for the rest of his life, even if he never commits another crime. It also fails to specify what agency

is responsible for monitoring those thousands of former inmates, or to devote money to pay for it."

"State corrections officials announced Jan. 12 that they are now monitoring all 6,622 paroled sex offenders with GPS devices, after Gov. Arnold Schwarzenegger set aside \$106 million in last years budget for the program. Where the state will come up with the money while facing a \$42-billion shortfall over the next 18 months is an open question. What's more, the state will monitor sex offenders only for as long as they remain on parole after that, it's up to municipal agencies, none of which have the staff, equipment or spare funds to do the job."

"The expense might be worthwhile if Jessica's Law were actually reducing sex crimes. Yet research has found no connection between where a sex offender lives and the likelihood that he'll offend again, nor is there any evidence that GPS monitoring lowers recidivism. Further, it's very hard for parolees to find homes that aren't near schools or parks, leading to a 12 fold increase in the number of homeless sex offenders since the law passed in 2006. A lack of stable housing only increases the odds that an ex-con will return to crime or as the state Sex Offender Management Board put it in a report Tuesday: Residency restrictions that preclude or eliminate appropriate offender housing can threaten public safety instead of enhancing it."

"Lawmakers rarely show the courage to fix problems created by get-tough-on-crime voter initiatives, but there will never be a better time to improve Jessica's Law. The state budget and the prison system are in crisis and must be reinvented and amending this law which the Legislature can do with two-thirds vote would benefit them both. Ideally, the measure should be overturned, but at minimum the Legislature should create a review process that allows low-risk offenders to escape the residency and monitoring rules. California simply can't afford to pay more to be less safe." ■



United States District Court District Of Massachusetts

U.S v Carta
Civil Action No. 07-12064-JLT
June 4, 2009

The Government filed a petition under the "Adam Walsh Child Protection and Safety Act of 2006 to commit Todd Carta. A three day bench trial was held and the court found the Government had failed to establish by clear and convincing evidence that Carta suffered a current mental illness, abnormality or disorder.

"[T]he individual's interest in the outcome of a civil commitment proceeding is of such weight and gravity" that this standard is required not only by the Act, but by the Due Process clause of the Constitution.

Carta was diagnosed by Dr. Amy Phenix as having Paraphilia NOS: Hebephilia. Prior federal courts have rejected it as a basis for commitment. In U.S v Shields the advisory jury ruled paraphilia NOS: Hebephilia was not a valid diagnosis and was not admissible expert testimony under Daubert. The court further conclude that paraphilia NOS: Hebephilia is clearly not supported by the DMS-IV-TR

In sum, the testimony of the psychologists in this case and the research presented to them at trial indicate that Paraphilia NOS: Hebephilia is not generally recognized as a serious mental illness by the psychological and psychiatric communities ■

Mr. Dean's Corner Once upon our time, someone Cared, but not lately.

When babies are sick and fussy moms need fast and fun filled ways to help the medicine go down. This sounds just like an ad, and that's because it is, but then it could also be our treatment. Our treatment is very much like an ad in that we need to go through a supposed nurse, or a broker just to get to see a doctor. In some cases it takes days or weeks just to get to talk with them about changing or discontinuing medications. Some time ago I was suffering from a job related back problem and couldn't get the doctor to agree with me on the medication. I had been through this before and knew what worked, but the doctor was not receptive to my request. When I explained to the doctor that if he was unable to help manage the pain without feeling drunk or unable to function at work, I would be forced to seek the drugs off the yard.

I called the D.A.'s office in my county and told them what I was doing (I didn't want the hospital to claim that I was refusing they're help) and telling on myself was the best way of telling on the hospital and forcing them to deal with my problem.

Now, when the hospital found out what I was doing they tripped over their bottom lips to get me the attention and pain meds I needed. The kind of changes a person has to go through just to be able to manage their suffering is a **crime and down right mean!** It's a shame that a person has to be willing to break laws just to receive pain relief. Or that he is forced to give up his job because he can't function properly.

The medical madness is not exclusive to our commitment. The class of patient that has a true mental illness goes through the same diversion tactics. The only difference is they truly don't understand what the hospital is doing to them and have little to no recourse because of their illness. Now, I

understand why they treat us the way they do, but to refuse care to someone that is truly unstable and can't care for themselves, is a crime and just plain mean. What kind of criminal does a crime like this? Maybe, the very same one that did this crime against us...

This is only my breath,
you need not inhale

A Take On How The Stimulus Plan Works

Three contractors are bidding to fix a broken fence at the White House. One is from Chicago, another is from Tennessee and the third is from Minnesota.

All three go with a White House official to examine the fence. The Minnesota contractor takes out a tape measure and does some measuring then works some figures with a pencil. "Well, he says, "I figure the job will run about \$900: \$400 for materials, \$400 for my crew and \$100 profit for me."

The Tennessee contractor also does some measuring and figuring, then says, "I can do this job for \$700; \$300 for materials, \$300 for my crew and \$100 profit for me,"

The Chicago contractor doesn't measure or figure, but leans over to the White House official and whispers, \$2,700."

The official, incredulous, says, "You didn't even measure like the others guys! How did you come up with such a high figure?"

The Chicago contractor whispers back, \$1000 for me, \$1000 fro you and we hire the guy from Tennessee to fix the fence."

"Done!" replies the government official.

And that is how the new stimulus plan will work. ■

Orson Wells

BIG BROTHER IS WATCHING

NOW A REALITY ! GPS Implants to Track Sex Offenders?

Washington State lawmakers may decide the best way to track sex offenders is to surgically implant GPS trackers in their bodies. A bill is being introduced in the House of Representatives to study the cost and feasibility of such a program. It comes after several cases in which sex offenders disappeared after disabling or cutting off their GPS bracelets.

Rep. Al O'Brien (Democrat), says he knows how to solve the problem. "We're going to put it someplace in them so he or she can't get it out," a retired Seattle Police sergeant. His legislation would implant GPS devices like those used for the state's toll roads into shoulders of the state's most predatory sex offenders. More than 100 of those offenders are now monitored with bracelets.

"For every system we in the law and justice community devise, somebody will be working just as hard to defeat it," said Don Pierce, head of the association that manages the state's GPS tracking system.

Pierce expects civil liberties advocates to come to the Capitol to testify against the bill. Rep. O'Brien understands that. "I don't want to infringe on anyone's civil liberties. This is a very small population we're talking about. These people are dangerous. We know they're dangerous. We know they will re-offend if they're not contained," said O'Brien. ■

wonderful. He was going to make substantial changes. Blah, blah, blah. But when we lost our representation, we lost our vital link to the purpose for the strike. The **PCDG** took it upon themselves to forge ahead in good faith negotiations with Kramer, *et al* and call it "presentation."

By the time it had become apparent administration was choreographing the show too much time and effort had been invested by our spokespersons. They were trapped. So they did the next best thing: they put a good face on it and pretended everything was still okay, they were still making headway. Meanwhile, the momentum for the strike had lost its steam. Why? Because these same bastard liars, the hospital administration, the ones we were in "negotiation" with, were busy fabricating a lie; telling the Phase guys, "Hey, everything's alright, we're in negotiation, the strike's over, come back to group." So the Phase guys trundled on back to their respective groups, cutting the heart out of our efforts. From then on, it was downhill.

Was the strike effective? The answer is a qualified, "You betcha." Every time we have struck it has shaken the administration and forced them to the table. We never actually got a significant response *until* we struck. What happened subsequent to that strike was shameful; not something to boast about. Our leaders dealt away our demands during the strike, claiming that administration would not

budge on certain issues. We failed to understand the collective power we have. We lost sight of it.

What we *should* have done was to turn the heat up. Why negotiate with a 'no'? The minute they said that, they gave up their real intent. That was where we were supposed to call for arbitration. That was the reason we had arbitration as one of the main points in the strike. They

did not need to have the strike package explained to them; they've gone to school and know full well how to read. Further, they know exactly what they are doing and how it was done. Better to leave the table and let them think about what they *will* give in order to save what they can of the illusion they are creating for Sacramento and Washington D.C. Let 'em stew for a while in their own juices. *That* is strength. No one was ever considered a hero for surrendering! You may want to "get along" with the administration, by continuing your classes and treatment groups, but they have been caught lying to you over and over again.

What we desperately need is a truly representative government one which will not try and gain the approval of the administration, or leaders who have the balls to walk out of the room when staff plays hardball: someone who won't feel so frantic to gain approval from these clowns.

You have probably heard the term, "least restrictive" applied to how the law views how our conditions of confinement must be structured. The fact is that the DMH firmly believes, and has issued statements to the effect that, they assume powers not granted to them to regulate your life however they please, regardless of that phrase "least restrictive." Their mind-set is a big part of the problem. You cannot expect them to negotiate their point of view away. The overarching paradigm for DMH is *control*; control that has been unlawfully usurped. How can we wrest our self-management away from them? Will they negotiate away their power? Absolutely not. Why should they? The only way we will ever obtain our rightful powers back from them is to effectively and collectively *strike*, and to have a coordinating government that understands the use of power and possesses the will to use it. If we support one another we simply cannot fail.

Representative government

I am calling for a Congress to discuss the form and functions of *our*

government. Each Unit should elect a delegate to meet at specified times and places for this purpose. Do not let the hosprison determine who represents you, or how. We understand the nature of this place, and we have decades of past experience from which to draw conclusions about how they will likely behave. As they love to say, "The past is the best indicator of the future."

We are being consumed one bite at a time every day by these people. One bite equals one day. Soon, there won't be anything of you left. Your life will be gone, and you'll be dead, and somebody else will be sitting in your chair wondering what the heck happened to you, and how can they get out of it happening to them. ■

First of all, do no harm
California
Sexual Violent Predator
Recidivism



An Empirical Statistic Report of Released Sex Offenders under California's Welfare & Institutions Code 6600.

Report compiled by Glen F. Green, a member of the National Paralegal Association.

Send an email and request the latest up to date report from the author himself at: gfg1258@yahoo.com.

ILLEGAL SCREENING AND EVALUATION PROCEDURES

Under California Government Code, §§11340, 11340.6, the CDC/BPT "Screening Procedures" and the DMH "Evaluators Handbook" must be approved through the "Office of Administrative Law" (OAL), and the "Administrative Procedures Act" (APA), before they are considered Law." This, as you know, has never been done!

Under Government Code §11335, Chapter 3.5 Administrative Regulations and Rule Making. (§§11340 11351, Chapter 3.5, added as "Office of Administrative Law" by Stats. 1994, c 567, §1, operative July 1, 1980, was amended by Stats. 1994, c. 1039 (A.B. 2531), §2, to read as now appearing; Also see, Governor Schwarzenegger issued the following Executive Order (S-2-03) dated, Nov. 17, 2003.

Whereas, the California Administrative Procedures Act requires the state agencies proposing to adopt, amend, or repeal any administrative regulation, must assess the potential for economic impact on California Business enterprises and individuals;

Whereas, the California Administrative Procedures Act requires all adopted regulations be easily understandable, the least burdensome and effective alternative, be consistent with underlying legislative authority and minimize the economic impact to the regulated communities;

Whereas, the California Administrative Procedures Act also provides that agency policy enforced as if it were a regulation, but which has not been adopted, amended or repealed subject to public notice and comment, is contrary to law and public policy because it subverts open government; &.....

"Now therefore, I Arnold Schwarzenegger, Governor of the State of California, by virtue of the power and authority vested in me by the

Constitution and statutes of the State of California, do hereby issue this order to become effective immediately;

"1. Each agency, department, board, commission and office of the Executive Branch (herein referred to as 'Agency or "Agencies") shall"

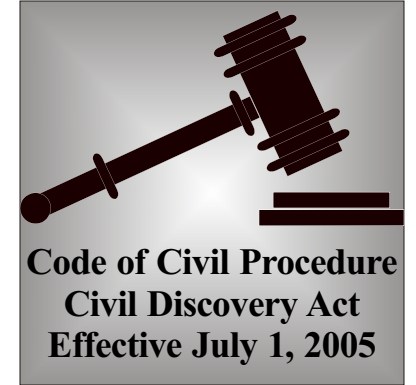
"a.) Subject to any exceptions the Director of the Department of Finance allows for emergency or other situations relating to health and safety, request, pursuant to the California Administrative Procedures Act, the immediate return of any proposed regulation, including emergency regulations, for final adoption, amendment, or repeal or other processing by the OAL for further review for a period not to exceed 180 days;

"2. Within 30 days of the date of this Executive Order, each Agency shall assess and identify any present issuance, utilization, enforcement or attempt at enforcement of any guideline, criterion, application which has not been adopted as a regulation in potential violation of California Government Code §11340.5(a) and submit its findings to OAL pursuant to California Government Code §11340.5(b) and the Legal Affairs Secretary;

(West's Calif. Codes, Ann. At pp. 71-72)

Also see, California Constitution, Article IV, §22: "It is the right of the people to hold their legislators accountable." (Legislators are accountable to their constituents. See Tenny v. Brandhove, 341 U.S. 367, 378, 71 S. Ct. 783, 789, 95 L. ED 1019 (1951).) And, California Constitution, Article V, §1:"The supreme executive power of this is vested in the governor. **The Governor shall see that the law is faithfully executed.**"

For the good of us all, we are the ones who need to act, to make a change. Unless you are content with the way things are, sorru to bother your comfort zone!■



§2016.010
 Short title "Civil Discovery Act"

§2016.020 Definitions (a)"Action" includes a civil action and a special proceeding of a civil nature."

Chapter 2 - Article 1
General Provision

§2017.010 Person entitled to discovery; matters discoverable, anyone who has an action filed or is thinking of filing an action ("Pending Action") or determination of any motion made in that action.

Chapter 3
Use of Technology in Conducting Discovery in Complex Cases

§2017.710 Technology defined. Defines technology; includes telephone, CD-ROM, Internet Websites, Electronic documents (generally scientific accepted devices)

§2017.720 Rights and Duties of Parties; Use of Stenographic Reports.

§2017.730 Order authorizing use of technology; Notice of Motion; Criteria

§2017.740 Contract with Service Provider Contracts with Service Providers [Possibly contracted SVP Evaluators]

(a) If the service providers are used and compensated by the parties in discovery under this chapter the court shall appoint the person or organization agreed on by the parties. The court's shall appoint

Code of Civil Procedure Civil Discovery Act

service providers among nominees.

Chapter 5

Methods and Sequence of Discovery

Article 1

General Provisions

§2019.010 Approved Methods

§2019.020 Sequence and Timing; Discretion of Parties; Court Order

§2019.030 Court-imposed Restrictions

Chapter 15

Physical or Mental Examination

Article 1

General Provisions

§2032.010 Application to Paternity Blood Test Statutes

§2032.020 Persons Subject to Discovery; Restrictions; Qualification of Examining Physician and Psychologists

(a) "Any party may obtain discovery, subject to the restrictions set forth in Chapter 5 (Commencing with §2019.010), by means of a physical or mental examination of (1) a party to the action, (2) an agent of any party, or (3) a neutral person in the custody or under the legal control of a party, in any action in which the mental or physical condition (including blood group) of that party or other person is in controversy in the action."

(c) "A mental examination conducted under this chapter shall be preformed only by a licensed physical, or by a licensed clinical psychologist who holds a doctoral degree in psychology and has at least five years of postgraduate experience in the diagnosis of emotional and mental disorders."

Article 3

Motion for Physical or Mental Examination

§2032.310 Other Forms of Examination by Leave of the Court, Form and Content of Notice of Motion; Parties

Served

(a) The evaluator must obtain leave of the court to perform the mental examination.

(a) A motion for this mental examination "shall" specify the Time, Place, Manner, Condition, Scope, Nature or the examination and identity of the person who will perform the examination.

(b) Notice of the motion "shall" be served on the person to be examined and all parties who appear in the Action.

§2032.320 Standard of proof; Exceptional Circumstances; Stipulation of Parties; Form and Content of Order; Mileage Limits.

(a) The Court shall grant a motion for physical or mental examination only for good cause shown.

(b) The Parties may stipulate

(c) An order granting a physical or mental examination shall specify the person or persons who may perform the examination, as well as the Time, Place, Manner, Diagnostic Tests and Procedures, Conditions, Scope and Nature of the examination,

Article 4

Failure to Submit to Mental Examination

§2032.410 Failure of Party to Submit to Mental Examination; Available Sanctions

In lieu of or in addition to other sanctions [*People v. Sumahit*, 27 Ca. Rptr. 3d. 233 (may be prevented from challenging sufficiency of evidence)] ability to present evidence, may include monetary sanctions for anyone who fails to submit on the motion of the party entitled to the examination.

Article 5

Conduct of Examination

§2032.510 Attendance of Attorney or Attorney's observer at examination The attorney or his representative shall be permitted to attend and observe "any physical examination."

§2032.530 Audio Recording of Mental Examination

(a) The examiner and examinee shall

have the right to record the mental examination on audiotape.

(b) This section does not alter or amend the right to have attorney present [*People v. Burns*, 27 Cal. Rptr. 3d 352]

Article 6

Reports of Examinations

§2032.610 Demand for Copy of Examination Records; Right to Demand; Time to Deliver Documents; Waiver of Work Product Protection.

(a) If a party submits to the examination in compliance with demand under Article 3 (commencing with §2032.310) that party has the option of making a written demand that a copy of the report including: (1) the results of all tests, diagnosis, prognosis, and conclusions, (2) A copy of all earlier examinations of the same condition of the examinee by that examiner or any other examiner.

(b) If option (a) is exercised a copy of the requested reports shall be delivered within 30 days after the service of the demand or within 15 days of trial whichever is earlier.

(c) Work Product is included §2018.010 waived. Both examiner writing and reports and the taking of examinees testimony.

§2031.620 Untimely Delivery of requested Documents; Motion to Compel; Meet and Confer; Declaration; Monetary Sanctions; Failure to Obey Court Order.

§2032.630 Waiver of Work Product Privilege in Pending and Subsequent Actions.

§2032.640 Exchange of Documents and Reports to Condition; Exchange of Follow-up or Late Reports.

§2032.650 Failure to Deliver or Exchange Reports; Motion to Compel Delivery; Meet and Confer; Monetary Sanctions; Failure to Obey Court Order■

UNCOMMON SENSE

Effective governments exercise power only by means of the consent of the governed. If leaders wish to influence groups of people, there must be an underlying logic which justifies an expectation that the majority will follow their direction.

Previously, beginning at Atascadero State Hospital, "patient governments" and those who served in them were selected and approved by hospital staff. It often happened that individuals were removed as members of these organizations, sometimes for cause, but sometimes simply because some men were judged uncooperative.

Since the crucial issues that require staff and residents to interact are often adversarial in nature, and because staff has so much power to begin with, it always seemed to me unfair that they could so arbitrarily remove someone.

I would have kept my mouth shut, except that there are people going around saying things that are not true about the strike, and what it was all about. They're spinning the story to their own aggrandizement. Also, the present government has indicated that they intend to simply give the operation of the government over to Coalinga administration. Truth be told, we don't need Coalinga for *anything*: that's the whole point. They've hated our self-government from the start.

The First Act

The first strike we had was hijacked by the administration, who leaked a story to the press that we were striking for "more staff." The second strike here had internal problems we shall not investigate.

Act Two

The problem which eventually caused the formation of the Provisional Government was that even though they had such control over the **RPAC** staff that had the authority to make decisions would not attend their own scheduled meetings. Or they would ask for

suggestions they agreed with in principle to be written down in the form of a memo. Delay would follow delay, until eventually the issue would be replaced by another more acute problem. Patches, who did an enormous amount of work, finally quit in disgust.

When enough of us had finally surrendered to the idea that negotiation with staff was futile, we struck. And we did NOT strike, as has been suggested, in order to lay a foundation for later lawsuits, or to demonstrate that we had "exhausted all remedies." Rather, we felt that if we shut this monstrosity down they would finally be brought to the table, and would feel compelled to negotiate in good faith. We allowed those who were inclined to bring the issues to a forum, but the odor of compromise was decidedly *not* in the air. We had a list of issues that, for the most part, were minimums that had to be met before the return of what passed for normalcy in this sterile dungeon.

This time, we had a positive control regarding the media and the story, *our* story, of what the issues were. Some of these issues concern our continued incarceration; like Clinical Assessments instead of Forensic Assessments. It is possible to sustain the bogus claim that we have mental disorders (though we lack current signs and symptoms) but only through the use of Forensic Assessments. These are provided largely by the *Stepford Doctors* (Forensic Evaluators) hired by the District Attorney's Office. We could *not* have had a later lawsuit in mind on this critical issue, because a lawsuit would not be an appropriate forum to make them do the right thing, which was to simply provide Clinical Assessments. We still want Clinical Assessments, immediately. The U.S. Justice Department seems to agree that those assessments are wrongfully denied us, but they seem unwilling or unable to enforce their views on the hosprison. I want them, and if you want to get out of here sometime within this lifetime, you'll want 'em too.

Meanwhile, there were the other matters brought forward in the strike

package which pertain to our everyday conditions, and how they make the rules around this place. (There are rules about making rules, you understand; rules they're not even coming *close* to following.) Most of the substantial issues were ignored, while they were happy to grant us fluff, like Cable T.V. It's as if they're saying, "You can have the Cable TV sucker, but you aren't going anywhere, except into the bag."

One issue was the medical care provided here. Since the strike, Frank Valadeo suffered a possibly needless death, while staff fiddled. And Mr. Smith moved into the final stages of cancer as the incompetent bumbling idiots we are expected to call doctors continued to misdiagnose him. Mr. Pedersen died suddenly of cancer. I know you can die of a heart attack or stroke suddenly, but *cancer*? One day Mr. Pedersen was kicking a hacky sack like a Seattle native, the next he's on a slab. I wonder how *they* feel about our weakling **PCDG** roll-over on these issues or how the next ones to die will feel. The only way to move DMH is to hold their feet to the fire, not keep talking after they've shown you their contempt.

What's Wrong?

We don't have a strong government because it does not enjoy the confidence of the population. It is not representative. You men have lost heart because the people who have promoted themselves to the leadership have failed you. You have abandoned hope. Did the leaders of the strike keep you current and up to date with the negotiations as they occurred? No, they did not. We went for well over a month (around six weeks) before they even issued an update, and *that* was because they were confronted by one of the members of PCDG at a meeting. "Why," they asked, "have we not published an update?" One was grudgingly produced, but when it was posted on the bulletin boards in the Units, it turned out to be a specious and lustrous portrayal of our wonderful new administrator, Norm Kramer. He was so

Continued on Page 8