

AUGUST 2011

Voices of California's Civil Detainees at Coalinga State Hospital

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Judge Denies Rapist Conditional Release

By Virginia Hennesey, Hearld Salinas Bureau, for the Monterey Star

After comparing Eldridge Chaney's crimes to a horror movie, a judge Thursday denied a request by the serial rapist to be released under supervision from the state's Sexually Violent Predator Program.

Judge Russell Scott said his questioning of Chaney in May and a review of his introspective "homework" while in Coalinga State Hospital showed he made progress in his therapy, but not enough.

"I think you are beginning to learn about (empathy and transparency), but your understanding is very superficial," Scott told Chaney. "Your proclivity, your core, is just below the surface."

The judge said Chaney acknowledged two "triggers" for his violent behavior were rejection and being told what to do. Citing the experience s of James Lamb, the only man released to Monterey County from the sexual predator program. Scott said Chaney would experience an overload of both if released to the community.

Chaney was convicted in the 1970's and 1980's of sexually assaulting three females and trying to rape a fourth, all during home invasions in Seaside. One victim was babysitting a sibling.

After serving more than a decade in prison, Chaney was committed to the state's sex-offender program in 2000.

Experts there say he has completed the first four phases of the program and they unanimously recommend he enter Phase 5, a transitional release into the community where he would be monitored while continuing treatment.

It is Chaney's first request for "conditional release." Scott acknowledged the state's experts believe Chaney is the poster child for the program's success, but said he wasn't convinces the former Seaside resident had control of his impulses for deviant sexual conduct.

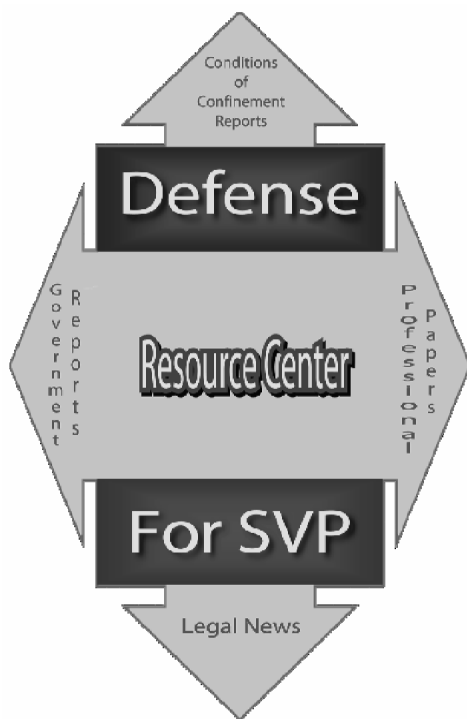
"You are a danger to the community," he said. "It's too soon to let you out, even under supervised release."

Prosecutor Angela McNulty said Chaney has "convinced himself" that he is a changed man and has gained empathy for his victims, but initially denied on the witness stand in May that he had a mental disorder. She said experts are hopeful that he can control his compulsions, "but all it is, is a hope."

Defense attorney Don Landis argued that the voter-approved laws that created the Sexually Violent Predator Program laws that created the sentence without possibility of parole. They established a treatment system that ends with a supervised transition to society.

The experts whose opinions result in commitment to the program is saying Chaney is ready for conditional release, he said. They would not risk their reputations, the

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program and the public's safety by recommending release of a man who was likely to reoffend.

"He is their best student, their best example, their best effort for fulfillment of their vigorous program," he said. "If he isn't ready, then who is? And then the question becomes, "What more can be done by the staff?"

Scott should base his decision on who Chaney is now, Landis said, not what he did in the past.

The judge disagreed.

"How can we avoid that?" he said. "We have to know what we're dealing with . . . we have to know there's been a change."

Cataloguing Chaney's crimes, the judge described the terror a movie theater audience would feel if they watched the attacks on screen. Instead of that repulsion, he said, Chaney felt a thrill.

Scott said Chaney's sexual depravity dates to when he was a juvenile and groped strangers on the street. The conduct escalated in 1978 when, at age 19, he entered a military wife's home armed with a rifle, raped her as her baby slept nearby, marched her at gunpoint across the street and raped her again.

Scott said Thursday that Chaney drugged the woman and threatened that another man at her apartment would kill her baby unless she complied. When he was done, he took her to

a field, where he loaded his rifle to shoot her before he was scared off.

He then went to the home of his girlfriend, whom he raped on the bed where two of her children were sleeping. After the children awoke, he forced the woman into her bathroom and raped her again.

Ten years later, he forced his way into a 46-year-old woman's home and tried to rape her. After she fought him off, he climbed through a window into the home of a 16-year-old acquaintance who was home baby-sitting her younger sibling. He used scissors to terrorize the girl into submission, sexually assaulted her and fled when her mother came home.

Scott, over Landis' objection, read voluminous journaling Chaney did as part of his therapy in 2004, detailing his crimes and motivations. On Thursday, the judge said Chaney wrote that he felt powerful and thrilled at the fear he saw in his victims' eyes.

His actions, the judge said, left a wake of destruction and permanent scars on the women, who internalized their shame, and in the case of his girlfriend, her children, who saw their mother being raped. The woman's 6 year-old son, he noted, eventually ended up in prison, where he ran into his mother's attacker. He forgave Chaney, Scott said because he had to for his own healing.

"It's like a piece of sand in oyster," the judge said of the damage Chaney caused. "It just grows and it grows inside."

BIRTH CERTIFICATES

Mr. Herschel Howell: PCLS would like to have birth certificates made available to any resident being released from DMH custody. Having an operational and current ID is crucial for men returning into society.

Staff Response: Mr. Goger will follow AD guidelines, as will all social workers when presented with requests for birth certificates. CSH will foot indigents' costs and do the initial contacts with any individual's county when asked to do so.

Editor's Note: The issue of California I.D. cards has been in process in CDAC for some time now. Recently, CDAC was notified by the Administration that it would be assisting residents with getting their birth certificates. CDAC is still working on getting California I.D. cards since it is law that you must register if and when you are released and getting registered requires an identification card.

COMMUNITY REINTEGRATION UNIT

Mr. Mike Starrett: MA4 was once set for a reintegration program for Phase V achievement. We have heard from enough men newly out in society to know some kind of acclimation process would be a prominent event for men incarcerated for too long and are way out of sync with today's life on the outside. This is a vital need and one necessitating review.

Staff Response: Clinical Administrators wants treatment participants to know that CA is very much in support of this ideal, but budget and space concerns prohibit any such implementation at this time. Presently, there are not enough Phase V individuals to justify such a costly program.

FRAUD IN PROGRAM FLEXIBILITY REQUESTS

William Hester, Editor

The Insider is bringing you this story based upon information that was recently brought to the attention of the CDAC Spokesmen. Coalinga State Hospital, under the leadership of its many Executive Directors, has been perpetrating fraud against the resident population of this hospital since its inception. While this is no surprise to most of you, the way this is being done and the rights that got scrapped will be.

Under the Title 22, many of our rights are laid out for us. However, there is a provision that allows for them to get changed. It is as follows:

TITLE 22. Division 5 – Licensing & Certification of Health Facilities, §73227. PROGRAM FLEXIBILITY

1. **All intermediate care facilities shall maintain continuous compliance with the licensing requirements. These requirements do not prohibit the use of alternate concepts, methods, procedures, techniques, equipment, personnel qualification or the conducting of pilot projects, provided such exceptions are carried out with the provisions for safe and adequate care and with the prior written approval of the Department. Such approval shall provide for the terms and conditions under which the exception is granted. A written request and substantiating evidence supporting the request shall be submitted by the applicant or licensee to the Department.**

2. **Any approval of the Department granted under this section, or a true copy thereof, shall be posted immediately adjacent to the facility's license that is required to be posted by Section 73221.**

Simply put, this section allows a facility to request a modification of sections of the Title 22. This is done without our ability to give input, challenge errors, or defend our civil rights. It only requires that the facility give "substantiating evidence" to support its request. This evidence is not made available for challenge and the changes are made without our knowledge. Part (b) requires that the Program Flexibility waivers be posted next to the facility's license. It appears obvious that the facility had no intention of honoring its obligation to post this information. After all, they have only been getting them for six years now.

CDAC is in possession of numerous copies of Program Flexibility waivers that were granted by the California Department of Health Services. There are several issues that are raised by the information we have read. First, the fraudulent depiction of our population as being, "*correctional referrals requiring psychiatric services*" instead of civil detainees entitled to the least restrictive environment necessary to hold us. Next, the matter of responses being granted with the wording, "*consistent with other correctional facility security operations*," which indicates that the Department of Health Services sees us as prisoners and not patients. And lastly, there is the matter of the many rights that are being removed by Program Flexibility waivers.

To address the first matter, the use of the description, "*correctional referrals requiring psychiatric services*" to describe the residents of this institution, we need only look at the many instances of law where it has been determined that we are

CIVIL DETAINEES to find that any application of a penal or correctional label changes our status to prisoners. Since we are not prisoners, it is not possible to use such descriptive terms when describing us or seeking modification of our conditions of confinement. While it is true that we are initially correctional referrals (if CDCR has done its job), as soon as the matter is forwarded to the courts, our status as civil is immediately applied.

What is even more disturbing, the Department of Health Services (the group who handles licensing) apparently doesn't know that we are not prisoners. In one of the responses given regarding our being able to wear our own clothing, the response was, "The facility director shall specify the types of clothing that are authorized to be worn by patients in the facility, *consistent with other correctional facility security operations*." (Emphasis added by author.) As evidenced by the response given, they either are not aware of our status or don't care.

The issue of the Program Flexibility waivers being posted adjacent to the hospital license appears to be an obvious attempt to keep hidden from the residents here the fact that the administration has been rewriting our rights. The following are examples taken directly from the responses given to CSH by the Department of Health Services.

Item 1: Section 71223(e), Title 22, CCR, Psychiatric Rehabilitative Activities Service. "Signed progress notes shall be entered into the patient's medical record by the therapist at least weekly."

Response: Approved contingent upon the following conditions:

1. During the first sixty (60) days of treatment and stabilization, the therapist shall enter weekly progress notes into the patient's medical record.
2. After the initial sixty (60) day period, progress notes shall be recorded by the therapist at least monthly.
3. A comprehensive quality assurance monitoring system shall be instituted to ensure that appropriate therapist services are provided.

This approval shall remain in effect until revoked by the Department.

Item 2: Section 71659, Title 22, CCR, Screens. "To protect against flies and other insects, screens of six mesh per centimeter (16 mesh per inch) shall be provided on doors and openable windows. Screen doors shall be of a type approved by the State Fire Marshall."

This Acute Psychiatric Hospital is constructed to treat correctional inmates requiring psychiatric services, and thus must meet environmental security issues. The building is designed to prevent windows from opening and entry/exit doors have hardware to ensure closure.

Response: Approved contingent upon the following conditions:

Should flies or other insects enter the facility through entry/exit doors, wind screens or other devices will be installed to prevent such entry.

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This approval shall remain in effect until revoked by the Department.

Item 3: Section 73523(a)(13), Title 22, CCR, Patients' Rights. "To associate and communicate privately with persons of the patient's choice, and to send and receive his personal mail unopened." AND Section 71507(a)(5), Title 22, CCR, Patients' Rights. "To have ready access to letter writing materials, including stamps, and to mail and receive unopened correspondence."

The Acute Psychiatric Hospital is constructed to treat correctional referrals requiring psychiatric services, and thus must meet patient safety and security concerns.

Response: Approved contingent upon the following conditions (for both issues):

1. The right to confidential communications with an attorney, either through correspondence or through private consultation, during regularly scheduled visiting days and hours shall be honored.
2. All outgoing and incoming correspondence and packages shall be opened and inspected by designated facility employees for contraband.

This approval shall remain in effect until revoked by the Department.

Item 4: Section 71507(a)(1), Title 22, CCR, Patients' Rights. "To wear his own clothes, to keep and use his own personal possessions including his toilet articles; and to keep and be allowed to spend a reasonable sum of his own money for canteen expenses and small purchases." AND Section 73523(a)(15), Title 22, CCR, Patients' Rights. "To retain and use his personal clothing and possessions as space permits, unless to do so would infringe upon the health, safety or rights of the patient or other patients."

The Acute Psychiatric Hospital is constructed to treat correctional referrals requiring psychiatric services, and thus must meet patient safety and security concerns.

Response: Approved contingent upon the following conditions (for both issues):

1. The facility director shall specify the types of clothing that are authorized to be worn by patients in the facility, consistent with other correctional facility security operations.
2. Patients have the right to keep possessions as space permits, except items and materials that are listed as contraband by the facility for health, safety and security reasons.
3. Patients have the right to keep and spend a reasonable sum of money via the facility monetary replacement system.

This approval shall remain in effect until revoked by the Department.

Item 5: Section 73523(a)(16), Title 22, CCR, Patients' Rights. "If married, to be assured privacy for visits by the patient's his/her spouse and if both are patients in the facility, to be permitted to share a room."

The Acute Psychiatric Hospital is constructed to treat

correctional referrals requiring psychiatric services, and thus must meet patient safety and security concerns.

Response: Approved contingent upon the following conditions:

1. Patients have a right to personal visits during regularly scheduled visiting days and hour. The right to have visits shall not be denied except as is necessary for reasonable security of the facility and the safety of persons.

This approval shall remain in effect until revoked by the Department.

Item 6: Section 73509(a)-(d), CCR, Title 22, Division 5, Chapter 4 (Intermediate Care Facilities), which allow residents/patients to smoke in designated areas. You (Pam Ahlin) have noted that the prevalence of information regarding smoking and individuals exposed to "second hand smoke" supports the position that the use of tobacco products is universally acknowledged to be a health hazard. The California Department of Public Health supports all interventions to individuals to cease the use of tobacco.

Response: Your request for a program flexibility to support Napa State Hospital's determination to be tobacco free is granted, with the following conditions:

1. Each new admission will be assessed for tobacco use and given a choice of multiple tobacco cessation programs.
2. The resident's / patient's choice will be documented as part of their Wellness Program and monitored with the other identified program components.
3. Strict monitoring of staff and visitors will include prohibiting tobacco products from becoming a "black market" item in the facility.

This approval shall remain in effect until revoked by the Department.

These are some of the more important revocations made to our rights. There are many more program flexibility waivers that cover matters from desk lamps in rooms to nurse calls in the rooms.

The Title 22 establishes what many of our rights are. The allowance for program flexibility is sensible **IF, and on IF**, it is properly applied to improve treatment or conditions. What we are seeing here is the administration using it as a tool to deny many of our most important right. Not only are they denying our right, they are doing it in a manner that is based on lies. The California Department of Health Services is equally at fault in not verifying the truth of CSH's claims regarding our commitment.

For all of you that have faith that the administration is here to help, take a real good look at what they are doing behind your backs. This has been going on for six years at CSH.

What else are they doing that we haven't yet discovered?

(A letter to the California Department of Health Services, the people that handle licensing has been sent by the Civil Detainees' Advisory Council spokesmen inquiring about the obvious lies and failures on DMH's part.)

What Do You Think?

**When I'm not thanked at all, I'm thanked enough, I've done my duty, and I've done no more.
'Tom Thumb the Great' (1731) act 1, sc. 3**



CALIFORNIA STATE AUDITOR

Elaine M. Howle, State Auditor

FACT SHEET

Date: July 12, 2011

Report: 2010-116

The California State Auditor released the following report today:

Sex Offender Commitment Program

Streamlining the Process for Identifying Potential Sexually Violent Predators

Would Reduce Unnecessary or Duplicative Work

BACKGROUND

Sex offenders who are identified and designated, through the Sex Offender Commitment Program (program), as sexually violent predators (SVPs)—those that represent the highest risk to public safety due to mental disorders—may be committed by the courts to a state hospital for treatment rather than released from prison. The program consists of various key players. The Department of Corrections and Rehabilitation (Corrections) and its Board of Parole Hearings (Parole Board) review certain sex offenders scheduled for release or parole to determine whether the offenders meet the criteria for SVPs as defined by law. If Corrections and its Parole Board determine an offender meets the criteria, the law requires that they refer the offender to the Department of Mental Health (Mental Health). Mental Health assesses potential SVPs using administrative reviews, clinical screenings, and evaluations to determine whether to recommend an offender to the designated county counsel, who files a petition to commit the offender if the counsel agrees with the recommendation.

KEY FINDINGS

During our review of the program, we noted the following:

- Current inefficiencies in the program's process of evaluating potential SVPs are partly due to Corrections' interpretation of state law and were compounded by Jessica's Law—a proposition approved by voters in 2006.
- . Corrections refers all offenders convicted of sexually violent offenses to Mental Health rather than assessing whether offenders' crimes were predatory and if the offenders meet other criteria before referring them as potential SVPs. Of the nearly 31,500 referrals Corrections made over a five-year period, less than 2 percent were ultimately recommended to designated counsel for commitment.
- . Jessica's Law added more crimes to the list of sexually violent offenses and reduced the number of victims required for SVP designation, resulting in many more offenders becoming potentially eligible for commitment under the program—the number of Corrections' referrals to Mental Health ballooned from 1,850 in 2006 to 8,871 in 2007.
- Corrections does not consider whether Mental Health determined that an offender did not meet the criteria to be an SVP based on a prior referral and thus, re-refers the offender to Mental Health. Of the offenders Corrections referred between 2005 and 2010, 45 percent were referred at least twice and 8 percent of those were referred between five and 12 times.
- During a three-year period, Corrections failed to refer many offenders to Mental Health at least six months before their scheduled release as required by law—in one case, the referral came one day before the scheduled release.
- Because it has made limited progress in hiring and training more staff, Mental Health has used between 46 and 77 contractors each year to perform its evaluations and clinical screenings and has not reported to the Legislature about its efforts to hire state employees as evaluators or the effect of Jessica's Law.

KEY RECOMMENDATIONS

We make several recommendations aimed at eliminating duplicative effort and increasing program efficiency including that Corrections not make unnecessary referrals to Mental Health and that jointly, Corrections and Mental Health revise the screening instrument used to refer offenders to Mental Health. Further, we recommend that Corrections promptly make referrals to allow Mental Health sufficient time to complete screenings and evaluations. We also recommend that Mental Health continue its efforts to obtain enough qualified staff to perform evaluations and report its progress to the Legislature.

THE COST OF THE RELEASE OF CONFIDENTIAL INFORMATION

There has been an ongoing issue in the courts related to personal information of residents being released outside of the hospital without authorization. This is known as a “security breach” and there are penalties written into law that go with it. Several hundred residents of CSH had their personal information e-mailed out of the hospital by one of their employees to their personal files on the last day they worked here.

The state has argued the case before a judge in Small Claims Court and lost.

What does this mean?

There were several hundred people whose information was released and there is a fine attached to each one. When the state is done paying up, they are going to be out a lot of money (in the hundreds of thousands). On top of this is the court cost and any other fees that have to be paid out. How much do you want to bet they fight all of them instead of cutting their losses?

Fiscal responsibility in action!

Rumors Regarding End Of Phases

There are too many rumors about Phases ending and new programs replacing them. Is there any clearer information on these issues?

Staff Response: Dr. Kasdorf assures all participants that no major changes will occur too soon. The present proposal that DMH has not denied is to begin steps in assessing new residents and a small core group of selected treatment participants. These will be observed and recorded based on the ‘*Good Lives*’ model of strength-based processing. The focus will be on personal dynamic risk factors and individualized rating through stages-of-change specifically targeting and identifying behaviors as they relate to their risk assessments. These individuals will be rated periodically throughout this trial program.

CERTIFICATES

Mr. Norman Bell: What is the current process and status on this? PCLS believes that certification can be an important part in a resident’s possession demonstrating progress and accomplishments that can be a reliable record.

Staff Response: Mr. Clark assures PCLS that certification will continue once all the logistics on who participated in a group from those who actually completed a group. Verifying which individual in which group and when they attended is a complex and problematic process while Mall Services works out how to track and validate issuance. No one will be issued a certificate for old groups taken in the past, that is not realistically feasible. Currently efforts are concentrating on getting the group facilitator notes in sync with group rosters and then connecting TEAM and WRP factors all on the same page. CA reminds everyone that certificates only intrinsic value is for an individual’s sense of accomplishment and NOT for courts, legal concerns, or charting.

Dr. Kasdorf believes fully in the personal recognition and validity of certifying individual accomplishment. However, CA is tasked with identifying someone who just takes a course but who also has anger issues or problematic coping skills outside of group.

Negative behaviors can render certificates pointless in these kinds of cases. To give a certificate some validity, a person needs to present some evidence of long-term behavioral improvement that reflects that he applies what he has learned. Having completed a course has to match what his WRP notes when there are differences.

POLYGRAPH ELIMINATION

Mr. Mike Starrett: There is an amazing preponderance of data demonstrating how ineffective a polygraph is. PCLS understands it is costly and it slows up the staffing process as well. Canadian programs do not seem to use them as frequently as CSH. Will CSH do less polygraph exams as do most state programs when the new modalities become adopted?

Staff Response: Dr. Kasdorf understands there is controversy with using polygraphs and he will look further into the most recent research.

WAL-MART VS. THE GOVERNMENT

BY DANIEL BURGAN

EVEN IF YOU DON'T LIKE WALLY WORLD YOU HAVE TO ADMIT THEY ARE ON TOP OF IT.

OUR GOVERNMENT IS ON THE BOTTOM OF IT.

AMERICANS SPEND \$36,000,000 (THIRTY-SIX MILLION DOLLARS) AT WAL-MART EVERY HOUR OF EVERYDAY.

THIS WORKS OUT TO \$20,928 PROFIT EVERY MINUTE.

WAL-MART WILL SELL MORE FROM JANUARY 1ST TO ST. PATRICK'S DAY (MARCH 17TH) THAN TARGET SELLS ALL YEAR LONG.

WAL-MART IS BIGGER THAN HOME DEPOT, PLUS KRÖGER, PLUS TARGET, PLUS SEARS, PLUS COST CO. PLUS K-MART COMBINED.

WAL-MART EMPLOYS 1.6 MILLION PEOPLE, IS THE WORLD'S LARGEST PRIVATE EMPLOYER, AND MOST SPEAK ENGLISH.

WAL-MART IS THE LARGEST COMPANY IN THE HISTORY OF THE WORLD.

WAL-MART NOW SELLS MORE FOOD THAN KRÖGER AND SAFEWAY COMBINED, AND KEEP IN MIND THEY DID THIS IN ONLY 15 YEARS.

DURING THIS SAME PERIOD 31 BIG SUPER MARKET CHAINS FILED FOR BANKRUPTCY.

WAL-MART NOW SELLS MORE FOOD THAT ANY OTHER STORE IN THE WORLD.

WAL-MART HAS APPROXIMATELY 3,900 STORES IN THE U.S.A., 2,906 OF WHICH ARE SUPER CENTERS. THIS IS 1,000 MORE THAN IT HAD ONLY 5 YEARS AGO.

THIS YEAR 7.2 BILLION DIFFERENT PURCHASING EXPERIENCES WILL OCCUR AT WAL-MART STORES ACROSS AMERICA.

THE EARTH'S POPULATION IS APPROXIMATELY 6.5 BILLION PEOPLE AND YET 90% OF ALL

AMERICANS LIVE WITHIN 15 MILES OF A WAL-MART STORE.

WAL-MART HAS GROSS SALES THAT TOTAL MORE THAN THE TOTAL REVENUE OF ALL BUT SIX OF THE COUNTRIES IN THE WORLD.

NOW THIS MAY SOUND LIKE I'M COMPLAINING, BUT I'M REALLY LAYING THE GROUND WORK FOR SUGGESTING THAT MAYBE WE SHOULD HIRE THE GUYS WHO RUN WAL-MART TO FIX OUR ECONOMY. THIS ARTICLE SHOULD BE READ CAREFULLY AND UNDERSTOOD BY ALL AMERICANS (DEMOCRATS; REPUBLICANS; FREE CITIZENS; PRISONERS; TAX PAYERS; FINANCIAL DEPENDENTS; EVERYONE).

TO: THE PRESIDENT AND ALL 535 VOTING MEMBERS OF THE LEGISLATURE FROM BOTH PARTIES. "IT IS NOW OFFICIAL: YOU ARE ALL MORONS!"

THE UNITED STATES POSTAL SERVICE WAS ESTABLISHED IN 1775, YOU HAVE HAD 236 YEARS TO GET IT RIGHT, YET IT IS STILL BROKE.

SOCIAL SECURITY WAS ESTABLISHED IN 1935 YOU'VE HAD 76 YEARS TO GET IT RIGHT, AND IT IS STILL BROKE.

FANNY-MAY WAS ESTABLISHED IN 1938 YOU'VE HAD 73 YEARS TO GET IT RIGHT, AND IT IS STILL BROKE.

THE WAR OF POVERTY STARTED IN 1964, YOU HAVE HAD 47 YEAR TO GET IT RIGHT, BUT ONE TRILLION DOLLARS OF OUR MONEY IS CONFISCATED EVERY YEAR AND TRANSFERRED TO THE POOR AND THEY STILL WANT FOR MORE.

MEDICARE & MEDICAID WERE ESTABLISHED IN 1965 YOU'VE HAD 46 YEARS TO GET IT RIGHT, YET THEY ARE BROKE.

FREDDY-MACK WAS ESTABLISHED IN 1970 YOU

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HAVE HAD 41 YEARS TO GET IT RIGHT, YET IT IS BROKE.

THE DEPARTMENT OF ENERGY WAS CREATED IN 1977, TO LESSEN OUR DEPENDENCE ON FOREIGN OIL. IT HAS BALLOONED TO 16,000 EMPLOYEES WITH A BUDGET OF 24 BILLION DOLLARS A YEAR, AND WE IMPORT MORE OIL THAN EVER BEFORE, YOU HAVE HAD 34 YEARS TO GET IT RIGHT, AND IT IS AN ABYSMAL FAILURE.

YOU HAVE FAILED.

IN EVERY GOVERNMENT SERVICE THAT YOU HAVE SHOVED DOWN OUR THROATS YOU HAVE BEEN OVER SPENDING OUR TAX DOLLARS, AND YOU WANT AMERICANS TO BELIEVE THAT YOU CAN BE TRUSTED WITH A GOVERNMENT RUN HEALTH CARE SYSTEM. YOU THINK YOU CAN RUN THE AUTO INDUSTRY AND THE BANKING SYSTEM, BUT MAYBE WE SHOULD JUST KICK YOUR EGG-HEADED BUTTS OUT OF OFFICE AND HIRE WAL-MART TO RUN THE GOVERNMENT; ESPECIALLY THE ONE IN THE STATE OF CALIFORNIA. WAL-MART SEEMS TO KNOW HOW TO RUN A BUSINESS, WHY DON'T YOU GOVERNMENT OFFICIALS, JUST ADMIT THAT ITS WAY BEYOND YOUR PAY GRADE TO DO SO AND JUST QUIT.

SO MANY PEOPLE BELIEVE, THAT CALIFORNIA IS ALONE IN IT'S ECONOMIC CRISIS YET THAT IS FAR FROM THE TRUTH. IT IS TRUE THAT CALIFORNIA IS IN FAR WORSE FINANCIAL SHAPE THAN ANY OTHER STATE, BUT THE ENTIRE COUNTRY FACES FINANCIAL MELTDOWN. TWO OF THE BIGGEST WASTES OF TAX DOLLARS HOWEVER ARE THE DEPARTMENT OF MENTAL HEALTH (D.M.H.) AND THE PRISON SYSTEM.

D.M.H. HOUSES PEOPLE WHO HAVE ALREADY SERVED THEIR TIME AND IN MOST CASES REPRESENT NO REAL SUBSTANTIAL THREAT TO SOCIETY. I MEAN, HECK IT COSTS APPROXIMATELY \$200,000 A YEAR PER PATIENT OF TAX PAYERS MONEY TO KEEP US LOCKED UP. PLUS ALL THE LAWS ABOUT BOTH S.V.P.s AND M.D.O.s, ALIKE VIOLATE THE U.S. CONSTITUTION.

NOW THE PRISON SYSTEM (C.D.C.R.) IS A FAILED ATTEMPT TO REHABILITATE CONVICTED

FELONS. IN PRISON YOU LEARN TO HATE THE SYSTEM, TO HATE AUTHORITY, TO HARBOR ILL WILL AGAINST ALL GOVERNMENTAL OFFICIALS AND LAW ENFORCEMENT OFFICERS OF ALL VARIETIES. PLUS VERY FEW PAROLEES ARE SUCCESSFULLY DISCHARGED FROM PAROLE AND OVER HALF OF THOSE WHO ARE WILL END UP IN PRISON OR ON PAROLE AGAIN AT A LATER PERIOD IN THEIR LIVES, BECAUSE ONCE YOU HAVE A FELONY ON YOUR RECORD YOU TEND TO LOSE HOPE AND FALL BACK INTO YOUR OLD HABITS.

SO INSTEAD OF PUNISHMENT ALONE, THERE SHOULD BE GREATER MEASUREMENTS TAKEN TO REHABILITATE CONVICTS AND TEACH THEM PRACTICAL LIFE SKILLS AND VOCATIONS.

THIS WOULD PREVENT RE-OFFENSES AND GIVE EX-CONS A SENSE OF ACCOMPLISHMENT AND BETTER SELF ESTEEM. BUT THE REHABILITATION SHOULD BE APPLIED IN THE FREE-WORLD INSTEAD OF BEHIND BARS.

OBVIOUSLY THERE NEEDS TO BE STRUCTURE AND GUIDELINES AND RULES AS WITH PAROLE, BUT THERE SHOULD BE LESS TIME SPENT BEHIND WALLS OF CONCRETE AND BARS OF STEEL AND MORE TIME SPENT ON CORRECTING THE PROBLEM IN A FAR LESS HOSTILE ENVIRONMENT. PRISONS AND STATE HOSPITALS ONLY MAKE THE PROBLEM WORSE. MOST OF THIS SO CALLED TREATMENT COULD AND SHOULD TAKE PLACE IN THE FREE WORLD, WHILE THE TRULY DANGEROUS PEOPLE WHO ARE BEYOND HELP CAN RECEIVE BEDS IN PRISONS OR STATE HOSPITALS WHERE CURRENTLY THERE IS NO ROOM FOR THEM.

BUT ACCORDING TO MY EXPERIENCE ONLY ABOUT 20 TO 30 PERCENT OF ALL INMATES ARE ACTUALLY BEYOND HELP. 70 TO 80 PERCENT CAN BE SUCCESSFULLY REHABILITATED AND 90 PERCENT OF THE HOPEFUL ONES CAN BE REHABILITATED IN THE COMMUNITY, REQUIRING FAR LESS PRISONS AND STATE HOSPITALS AND SUBSTANTIALLY LESS TAX MONEY.

I FOR ONE, BELIEVE THAT IF WAL-MART RAN

OUR GOVERNMENT EVERYBODY WOULD GET A MUCH BETTER DEAL IN COURT AND THERE WOULD BE 70 PERCENT LESS PRISONS AND STATE HOSPITALS AND 70 PERCENT LESS CRIME FOR THAT MATTER, BECAUSE PEOPLE WOULD BE WORKING FOR WAL-MART INSTEAD OF SELLING DRUGS OR ROBBING BANKS AND CONVENIENCE STORES.

IT WOULD NOT NECESSARILY CUT DOWN ON CRIMES OF PASSION, BUT AS BRILLIANT AS THE WAL-MART PEOPLE ARE, I'M SURE THEY COULD COME UP WITH AND SUCCESSFULLY APPLY A WORKING SOLUTION TO THAT PROBLEM AS WELL. AND IF WAL-MART RAN THE PHASE PROGRAM, IT WOULD NOT BE SUCH A FAILURE EITHER. A LOT OF PEOPLE I KNOW CLOWN WAL-MART, AND MAKE FUN OF YOU IF YOU SHOP THERE, SO IT'S THE BUTT OF A LOT OF JOKES ABOUT POOR PEOPLE. BUT WAL-MART'S NOT POOR; THEY ARE THE WEALTHIEST CORPORATION IN THE HISTORY OF THE WORLD.

SO MAKE FUN OF MY CHEAP WAL-MART MERCHANDISE IF YOU CHOSE, BUT WAL-MART'S LAUGHING A WHOLE LOT HARDER AND WITH MUCH BETTER REASON. LET WAL-MART RUN D.M.H. AND THE PRISONS ACROSS THE COUNTRY. LET WAL-MART RUN THE COURTS AND COUNTY JAILS AND THE WHOLE GOVERNMENT AS WELL. NO ONE COULD DO WORSE THAN THOSE CURRENTLY IN CONTROL.

THE BIBLE HAS A SCRIPTURE THAT SAYS SOMETHING TO THE EFFECT OF, "YOU CANNOT RULE A KINGDOM IF YOU CANNOT RULE YOUR OWN HOUSEHOLD." WAL-MART RUNS ITS OWN HOUSEHOLD SO WELL THAT IT HAS BECOME A KINGDOM.

WHY NOT LET THEM TRY THEIR HAND AT RUNNING THE UNITED STATES GOVERNMENT AND TURNING OUR ECONOMIC CRISIS AROUND. THEY HAVE ALREADY PROVEN THAT THEY HAVE THE FINANCIAL KNOW HOW. IF WAL-MART COULD BE ALLOWED TO TAKE OVER, I FORESEE A MUCH BRIGHTER FUTURE. WE COULD EVEN CHANGE OUR COUNTRY'S NAME TO, THE UNITED STATES OF WAL-MARTNAH!

BUT WE WOULD DEFINITELY NEVER HAVE MONEY PROBLEMS AGAIN.

THIS IS DANIEL BURGAN FOR THE INSIDER.

ACKNOWLEDGEMENTS

THIS ARTICLE WOULD NOT BE POSSIBLE WITHOUT THE ASSISTANCE WITH RESEARCH I RECEIVE FROM JANICE KENNEDY, MY VERY SUPPORTIVE MOTHER AND ALL THE FACTS AND STATISTICS ON WAL-MART AND ON OUR GOVERNMENT'S FINANCIAL SHORTCOMINGS.

THANKS MOM!

CDAC INFORMATION UPDATES

The spokesmen are currently engaged in working on a variety of issues with the CSH Administration. Among the topics being worked on are: mail being opened, search procedures, program flexibility waivers, grill cleanliness, differential diagnosis, a visitor's handbook, and assorted other topics.

The advisors are working on many issues. As always, the advisors each carry a load of issues from the many written proposals that arrive at the office. Some of the matters being worked on are: the creation of an appeal process similar to the CDC-602 system so that individual issues can be addressed in a timely manner; several proposals related to creating a yard for musicians to use for relaxation, practice and performances; multiple matters related to Wellness and Recovery Plan implementation, operation and function; Contraband is, as always, working to increase the number and type of items that we can get; the ever decreasing quality and quantity of our food; the conditions and services offered to our sick and recovering brethren.

As always, The Insider encourages anyone with a hospital wide issue to get resolved to please fill out a CDAC Proposal / Appeal Form and send it up through the proper channels.

We also recommend that, for the many residents here that have complained about CDAC not being able to just jump in and fix a problem immediately, everyone remember that the bylaws must be changed to make that happen. Suggestions due to General Advi-

When Grandma Goes to Court

Lawyers should never ask a Mississippi grandma a question if they aren't prepared for the answer.

In a trial, a Southern small-town prosecuting attorney called his first witness, a grandmotherly, elderly woman to the stand. He approached her and asked, "Mrs. Jones, do you know me?" She responded, "Why, yes, I do know you, Mr. Williams. I've known you since you were a boy, and frankly, you've been a big disappointment to me. You lie, you cheat on your wife, and you manipulate people and talk about them behind their backs. You think you're a big shot when you haven't the brains to realize you'll never amount to anything more than a two-bit paper pusher. Yes, I know you."

The lawyer was stunned. Not knowing what else to do, he pointed across the room and asked, "Mrs. Jones, do you know the defense attorney?"

She again replied, "Why yes, I do. I've known Mr. Bradley since he was a youngster, too. He's lazy, bigoted, and he has a drinking problem. He can't build a normal relationship with anyone, and his law practice is one of the worst in the entire state. Not to mention he cheated on his wife with three different women. One of them was your wife. Yes, I know him."

The defense attorney nearly died.

The judge asked both counselors to approach the bench and, in a very quiet voice, said, "If either of you idiots asks her if she knows me, I'll send you both to the electric chair."

Say What?

Since the issue of Program Flexibility has reared its ugly head, let us address one aspect of it.

By writing this section into the Title 22, the Department of Health Services has created a useful tool for the improvement of a program if certain aspects of the Title 22 don't work well for certain commitments. This is a good idea on its face.

However, enter the Department of Mental Health and its long established policies of ignoring rules and regulations. The Program Flexibility section has now allowed DMH to rewrite the Title 22 and remove any of our right they don't want us to have.

So far, we have lost the right to wear our own clothes, the right to private visits with a spouse, the right to send and receive unopened mail, and many other things.

THIS HAS ALL BEEN DONE UNDER THE CLAIM THAT WE ARE, "CORRECTIONAL REFERRALS IN NEED OF PSYCHIATRIC CARE."

So much for our status as civil detainees with all our rights being respected by DMH.

THE SENILITY PRAYER

"God grant me...

*The senility to forget the people I never liked
the good fortune to run into the ones that I do
and the eyesight to tell the difference."*

HEALTH ISSUES

William Hester, Editor

There are two medical issues brought up in the hospital's in-house version of *The Insider* that I do not have enough room to publish here. I do feel that it is important that someone know about them.

The first is a recent outbreak of Norovirus that left many individuals laid up for days; you can contact the National Center for Immunization and Respiratory Diseases, Division of Viral Diseases and the Center for Disease Control for more information about.

The other medical issue is one that has been a problem for Pleasant Valley State Prison for a long time and now is being noted at Coalinga State Hospital: Valley Fever. For more information on Valley Fever, go to the following website for details and further informational resources: www.vfce.arizona.edu

The View from the Editor's Seat:

This is not going to be one of my usual editions. Since we are celebrating one year of this paper being around, I thought I would share some of my favorite quotes that relate to what I have been through working for this population...

“The universe doesn’t give you any points for doing things that are easy.”
Capt. John Sheridan (Babylon 5)

“I can only conclude that I am paying off karma at a vastly accelerated rate.”
Cmdr. Susan Ivanova (Babylon 5)

“I guess I keep hoping that someday, somewhere I’ll make a difference, that at the end of the day everything we have gone through here for the past few years will mean something.”
Chief Michael Garibaldi (Babylon 5)

“We are all slaves to our histories. If there is to be a bright future, we must learn to break those chains.”
Ambassador Delenn (Babylon 5)

“I don’t believe in the no win scenario.”
Captain James T. Kirk (Star Trek II: The Wrath of Khan)

“Death is that state in which we exist only in the memories of others. No goodbyes; just good memories.”
Lt. Tasha Yar (Star Trek: The Next Generation)

“You know, I used to think that it was awful that life was so unfair. Then I thought, wouldn’t it be much worse if life *were* fair, and all the terrible things that happened to us come because we actually deserve them? So, I take great comfort in the general hostility and unfairness of the universe.”
Ranger Marcus Cole (Babylon 5)

AND FINALLY...

“To understand where you are going, it is necessary to comprehend where you have been. This does not mean knowing the places, the faces and the events of the past. You must be able to answer the eternal question of your past – Why? Why have the moments of your personal history occurred in the order and fashion that they have? Why has history unfolded around you in its unique pattern? When you can answer this, you will be ready to move on with your future... and not a moment before.”
Durhan in Tuzanor on Minbar (Babylon 5)

A note to all of you out there that read this e-paper: The residents here at Coalinga State Hospital and the staff of The Insider: Outline would very much like to hear from someone, anyone outside who reads our work.

Please, if you have any thoughts, questions, information, or opinions (good or bad) send me a letter so that I can share you views with others here. If you have a question, I will do my level best to get an answer to it and publish it in the following issue.

The main thing I am asking is that someone out there let us know if we are reaching anybody.

William Hester
Editor and Writer for The Insider; The Insider: Online; and The Insider: Outreach

The Insider (in all its forms) is being produced to present news related to the Sexually Violent Predator Act, conditions of confinement here at Coalinga State Hospital, and daily events. It is also here to give every member of this population (6600 or 2972) and a chance to have their voice heard somewhere other than in these halls. We are inviting everyone to contribute something.

The Insider is available monthly in JPEG format for viewing on your DVD players within the hospital. For your connections outside, **The Insider Online** is at www.defenseforsvp.com. There is also a four page edition, **The Insider Outreach** that is being produced and sent to other institutions with SVP Detainees.

GUIDELINES FOR PUBLICATION IN THE INSIDER

All submissions to **The Insider** are subject to editing for proper grammar, punctuation, length, language, and clarity. They may not include hate-speech, inciting or inflammatory language, or unnecessary profanity. Submissions may be returned to the individual author for revision or rejected outright.

The Insider is produced at Coalinga State Hospital, in Coalinga, California. Material published in this electronic paper is written, edited, and published entirely by hospital residents without input or editing by staff.

The ideas and opinions expressed herein do not reflect the opinions of the hospital's staff or its administration, unless otherwise noted.

The Insider is dedicated to fair, unbiased and impartial reporting of information, current events and news that is of interest to civil detainees and others who are interested in finding out about the real people here. Any questions and correspondence can be submitted by mail to:

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Let' us remember all those who have fallen since the beginning of this law and pray that they now know the freedom that was denied them in life...

Robert Cloverdance; Carl Coleman; Jim Davis; Don Lockett; David Stansberry; Charles Rogers; Larry Goddard; Ed Samradi; Dean Danforth; Craig Rauwens; Wayne Graybeal; Donald Hughes; Lloyd Johnson; Robert Alperin; Tim McClanahan; Patrick Brim; Wayne Porter; Cash O'Doyd; Elmer Bock; Dave Gonick; Jose Vlahoitis; Corwin Weltey; Ross Washington; Richard Bishop; Alton Robinson; Robert Canfield; Jerry Sanchez; Gerald Brooks; James Aceves; Frank Valadao; Donovan Myrick; Paul Real; Paul Pedersen; Kenneth Edmonton; Jimmy Guthrie; James Rosenberg; Charles Grecien; David Harney; James Wallace; Jare Stevens; John Martinez; Delbert Smith; Dennis Boyer; Ruben Garcia; Wilbur Perryman; David Montgomery; William Laughlin; Richard Garcia; Francs Hansen; Steve Mendoza; Robert Berry; Ramon Malbrough; Vernon Madden; Victor "Weasel" Segovia; John "Colonel" Norman; Harold Eugene Carmony; Frederico Moreno (06-31-11); George Hulbert (07-11-11), and George Funes (1943-2011)