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Federal Adam Walsh Act Questioned

Adapted from CNN.com

June 22, 2009

In the new session, beginning this October, the United States Supreme Court will review the Adam Walsh Child Protection and Safety Act, signed into law in 2006. At issue is the constitutionality of "civil commitment" statutes being used to imprison sexual offenders beyond the completion of their sentences.

Graydon Comstock served a 37-month federal prison sentence for processing child pornography. Six days before his release, he was certified as "sexually dangerous" and was ordered to remain in custody at the Butner Federal Correctional Complex in North Carolina. Comstock and three other prisoners each served between three- and eight-year sentences for such crimes as unlawful sex with a minor and child pornography. A fifth man was declared incompetent to stand trial after he was initially charged with child molestation. Each of the men was scheduled for release over two years ago, and have since been fighting the government appeals that have blocked their discharge.

Comstock and the others were evaluated by corrections personnel and prosecutors and were found to be a high risk for "further sexually deviant behavior" if set free. Defense attorneys have argued that continuing to confine these men is a violation of their constitutional due-process rights; a federal appeals court in Richmond, Virginia, agreed, ruling that the United States Legislature had "overstepped their authority" by passing the Adam Walsh Act, specifically that provision which allows for the indefinite confinement of sexual offenders. The US Court of Appeals found that the federal government was "civily confining former federal prisoners without proof that they have committed any new offense," and that the Adam Walsh Act improperly gave the attorney general unrestricted authority to do so without presenting any new evidence. The ruling would have freed up to 77 inmates in North Carolina.

An emergency appeal was filed, prompting the Supreme Court in April to block the
(Continued—see "Court" on page 8)

AHLIN, VALENCIA OPTIMISTIC AT BYLAWS CONVENTION

The First Coalinga Bylaws Council Convention was held at the Grand Meeting Room on August 19th at 3:00 PM, chaired by Michael Seaton and called to order by Robert Bates. In attendance were the hospital's Executive Director, Pam Ahlin, and Clinical Administrator Jose Valencia, as well as the elected unit chairmen and Unit Supervisors for each of the hospital's seventeen WIC6600 living units.

Mr. Seaton's opening statement introduced himself and the other members of both the informally-organized Advisory Council and the Bylaws Committee. "I was called back into service by members of the Hospital Wide Unit Representatives to address the matter of our bylaws, and the need to jump-start the Advisory Council," he said. "Also called into service was Mr. Robert Bates, recognized as a spokesman/representative of the PCDG; together with the spokesmen of the HWUR, Carnot Lyles and Jorge Rubio, we addressed a
(Continued—See "BYLAWS" on page 3)

HWUR SPOKESMEN OUTRAGED:

NO-CONFIDENCE VOTE SEEMS AN ATTEMPT TO SEW DIVISION

The Hospital Wide Unit Representatives convened a meeting at three o'clock Tuesday afternoon to address what one unit chairman called "an internal tug-o-war for power and control."

Sixteen voting members of the HWUR (i.e., each unit's elected chairman, or his designee) met in response to a memorandum seeking a vote of no-confidence against HWUR spokesmen Carnot Lyles and Jorge Rubio. The memorandum, authored by Unit 7 Representative Scott Emerson Felix, dated August 16th, 2009, called the HWUR together "to discuss a vote of no confidence against the elected spokesmen" and alleged that the elected spokesmen had "refus[ed] to do the will of the people."
(Continued—See "HWUR" on page 5)

"There is no greater weapon in the hands of the oppressor than the mind of the oppressed."

--Steven Biko

*Slain South African
Anti-Apartheid Activist*

"History does not teach fatalism. There are moments when the will of a handful of free men breaks through determinism and opens up new roads. People get the history they deserve."

--Charles de Gaulle

"Revolutions are not made: they come. A revolution is as natural a growth as an oak. It comes out of the past. Its foundations are laid far back."

--Wendell Phillips

"You cannot contribute anything to the ideal condition of mind and heart known as brotherhood, however much you preach and posture, or agree, unless you live it."

--Faith Baldwin

"God arrives in a sleek Italian sports car with doors that open like wings. Go ahead, God says, tossing me the keys. Take it for a spin. But where would I go in a car like that? Strangers would stare. Friends would shake their heads and think I had sold out. Sorry, I tell God. That's not the car for me."

--Sy Safransky

"The most striking contradiction of our civilization is the fundamental reverence for truth that we profess, and the thoroughgoing disregard for it that we practice."

--Vilhjalmur Stefansson

"The great enemy of clear language is insincerity. When there is a gap between one's real and one's declared aims, one turns, as it were, instinctively to long words and exhausted idioms, like a cuttlefish squirting out ink."

--George Orwell

"You don't see things as they are. You see things as YOU are."

--Talmud

"Could anything be absurder than a man? The animal who knew everything about himself--except why he was born and the meaning of his unique life?"

--Margaret Storm

From the Editor

By Andrew J. Hardy

July saw the first-ever edition of *The Ally*, and I am proud to say it was a raving success! I would like to thank those residents and staff members who contributed to this great achievement.

Special thanks to Tech and Muhammed for their support, without which *The Ally* never would have happened. Special thanks also to those who contributed articles and stories. This newsletter is here to give everyone a chance to share their experience, their beliefs, their opinions—and their voice. I want to encourage each and every person to find that voice inside of them, and to reveal it on these pages.

I also want to remind everyone that elections will soon be held in Coalinga State Hospital. We, the residents, will decide so many issues with just one ballot: Who will represent our interests to the administration? Who will advocate for our right to clinical assessments and appropriate medical care? Who will defend our civil rights in matters of conditions of confinement? Who will speak for us at Contraband Committee meetings and other workgroups?

We must be mindful that the people we elect will have the ear of the administration, and what they do with that forum will impact every single one of us. To those who run for election and win: We implore you to be diplomatic, to work hard and maintain an open dialogue with both the administration and the people you will represent.

Guidelines for Submission

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

Please note:

We want your voice to be heard; please work within these guidelines in order to have your work published.

The United States Constitution--First Amendment:

"Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof; or abridging the freedom of speech, or of the press, or the right of the people peaceably to assemble, and to petition the government for a redress of grievances."

Administrative Directive 620 to be Enforced?

The word is out, and the people are anything but happy.

Staff have apparently been instructed to begin enforcing the newly-amended AD-620, strictly governing patients' off-unit conduct and behavioral standards.

The guidelines laid out in AD-620 regulate a number of patient conduct issues, including forcing patients to line up and march to the patient dining rooms; controlling what clothing, and of what size, a patient may wear; policing where a patient may go inside the hospital; etc.

"What does it matter if I stand in the hallway talking to my friend?" asks one patient. "I go to my friend's unit, ask someone to go get him, and when he comes out, I talk to him for five minutes and then I leave. What's the problem with that? Where is the threat to safety and security?"

Another patient chimed in, "How can I be out of bounds if I am standing in a doorway? I am in direct line-of-sight of DPS officers and/or unit staff. Plus, even when I go outside, I am still behind walls and razor wire, so all that 'out of bounds' talk is a bunch of bull[]."

The CSH Resident Council of Six issued a memorandum to the Executive Director on August 24 requesting an emergency meeting to address the enforcement of this A.D. Taking issue with the AD, the Council said the directive "...is replete with items that are violative of the concept of involuntary civil detainment/commitment and ignores in its entirety the fact that persons held here within this forensic facility are not on parole...and maintain every constitutional right, save the Second

Amendment right to bear arms... This is not a prison, and persons detained/committed to this hospital should not be treated as though they are [prisoners]. These restraints...restrain the resident and practically turn CSH into a ghost town, where the resident is seen only at the times deemed reasonable by staff and DPS."

"I'm a no-nonsense kind of representative," said independent spokesman Michael Seaton. "I don't take lightly misuse of power and authority by administration... But I do believe this is going to be resolved. I believe that the Director has been honest with us, but it is possible that other members of the administration who are 'anti-SVP' are attempting to undermine her authority."

The Council's memorandum challenges AD-620 on ten specific issues, taking on the directive point-by-point and answering each complaint with both common sense and reason, clearly stating patients' legal rights as citizens of this state and country.

Echoing the concerns of another patient, the Council's memorandum added: "Security cannot be compromised where individuals do not have access to keys, cannot pass through key control, [and] are surrounded by high walls on every courtyard, with a double-strand of barbed wire and double-stranded, double-edged cylindrical razor-wire wrapped around that."

A meeting will take place between the Resident Council and the Executive Administration sometime in the early part of this week. AD-620 will not be enforced until after this meeting has taken place. Let's all please give negotiation a chance; hopefully we can find a resolution.

BYLAWS *Continued from page 1*

memorandum to the Executive Director...seeking to have a bylaws committee chosen by us to work in collaboration with her administration to prepare and present our bylaws to the residents of this hospital. To the Executive Director's credit, she called together each of us, along with members of the group known as The People's Committee, manned by Curtis Canada and Muhammed Shazier. Each of us form the Hospital Bylaws Council."

The Civil Detainees' Advisory Council—or CDAC—Bylaws are a proposed set of guidelines drafted to govern a democratically-elected patient representative body. In September, the patients of Coalinga State Hospital will have the opportunity to either ratify these bylaws or to reject them. Once a set of bylaws is ratified, there will follow general democratic elections to seat a representative patient council.

Following Mr. Seaton's introduction, Ken Herman addressed the assembly regarding recent changes to the proposed bylaws. Specifically, significant changes have been made to the structure of the two-tiered advisory council, limits on policies and procedures for the removal of an elected representative from his position, and the "service agreement" which outlines what is expected of a person who wants to serve in office. There were concerns about previous versions of the CDAC bylaws which some felt might give too much authority to the CSH administration to remove a person from office; for example, should someone prove to be an aggressive—and effective—advocate for the people, some feared that administrators may simply get rid of that representative if they had the authority to do so. The Bylaws Committee remedied that issue, and Mr. Herman explained that process and several other changes.

When the floor was turned over to Executive Director Pam Ahlin, rather than speak about the bylaws themselves, she expressed gratitude for the labor that went into their development. "I wanted to say thank you for all of the hard work. These bylaws are something we all look forward to working with, and it is something I support."

The only hitch in the entire program was a series of unrelated but tauntingly-pointed questions hurled at the Executive Director by Unit 7 representative Scott Emerson Felix. Maintaining her composure, Director Ahlin replied, "I am not going to answer these questions. I would prefer that we stick with the bylaws issues, that's the reason we're here right now."

Toward the tail end of the hour-long convention, Jose Valencia articulated his feelings about the bylaws development process. "It's taken us a long time to get to this point. I am personally looking forward to the rewards that we will all enjoy." Mr. Valencia reiterated his commitment to the fluid flow of information through the elected patient representatives, and established what role the unit supervisors would be playing in the upcoming ratification and representative elections. "The Unit Supervisors will be impartial facilitators, helping the unit representatives; US's have been instructed to keep their unit representatives informed as much as possible at every step."

The convention adjourned in an affirmative, upbeat mood, with plenty of hand-shaking and optimism. "This has been an excellent effort by an able coalition that did their best to represent the population," said Jose Valencia, making time for the Ally after the convention. "And as for myself as a clinical administrator, I'm appreciative of the efforts of this coalition and the bylaws committee, and I believe the population will appreciate the results."

"I look forward to getting the bylaws in place and getting representatives elected so that we can really get the facility moving forward," Pam Ahlin added. "We're all gonna get there together."

Muhammed Shazier
Chairman

Curtis Canada
Vice Chairman

Mike Starrett
Secretary

Andrew Hardy
Chief of Staff

Greg Grant
Administrative Coordinator

Robert Martinez
Sergeant at Arms

Carlos Dominguez
Parliamentarian

Gregory Shehee
Chair-Patients' Rights Committee

Star Lopez
Chair-Contraband Committee

Bernard Brinkley
Chair-Medical Committee

James Parkinson
Chair-ADA Subcommittee

Rock Hernandez
Chair-Services Committee

Bryan Cooke
Chair-Health & Safety Committee

Robert Johnson
Chair-Nutrition Committee

Allen Fields
Chair-Events Committee

Don Hale
Chair-Music Committee

Ishmael Carter
Chair-Sports Committee

MEDICAL COMMITTEE

Medical Committee Chairman Bernard Brinkley is currently working on solving unit med-room cleanliness problems that seem to be affecting the entire hospital. Regarding the sanitation of med-room water pitchers, Mr. Brinkley has requested that "either a consistent method of cleaning be implemented, or that bottled water be used when dispensing medication." The second issue, also having to do with the med-rooms, is unit staff's frequent use of fingernails, pens, and other inappropriate utensils when opening medication "blister packs." The Medical Committee has requested that the hospital provide appropriate utensils for this purpose.

SPORTS COMMITTEE

Ishmael Carter, Chairman of the Sports Committee, is addressing recent incidents with the hospital's Heat Plan. Revisions have been made to the Heat Plan, but outdoor recreational activities, such as softball, still appear to have been affected by cancellations. Additionally, Mr. Carter is working on getting Sports Yards Five and Thirteen reopened by Level of Care staff.

SERVICES COMMITTEE

The Chairman of the TPC Services Committee, Rock Hernandez, has been primarily focused on improving the Visiting Room environment. Specifically, proposals have been submitted to get comfortable sofas for the visiting area; silverware for weddings; and playground equipment for small children.

CANTEEN & NUTRITION COMMITTEE

Robert Johnson, Chairman of the C&N Committee, is continuing to work hard on grill pricing issues. Additionally, he has addressed complaints that Patient Dining Room staff have been frequently misdirecting trays to the wrong units, causing shortages and time problems.

HEALTH & SAFETY COMMITTEE

The H&S Committee Chairman, Bryan Cooke, is working with Dennis Mitchell and Plant Ops to resolve problems with patient restroom access. Among suggested resolutions are that patients have access to unit restrooms for emergencies, and that Plant Ops install a permanent restroom adjacent to and accessible from the Main Court Yard. Other issues being addressed include requests for a water fountain to be installed on the softball diamond.

PATIENTS' RIGHTS COMMITTEE

Greg Shehee, Chairman of the Patients' Rights Committee, is working on getting clarification of the policies and practices in place for medical transportation by CDC, including the use of soft and hard restraints. Additionally, Mr. Shehee has taken on the "Narcotic & Consent" form being used on some units; his stance is that use of the form denies a patient of his privacy rights and forces him to give up what medical rights he does have.

CONTRABAND COMMITTEE

Contraband Committee Chairperson, Star Lopez, has been making a lot of progress on contraband issues, and has gotten tentative responses on several requests. Footlockers and microwaves have been approved, and bedside tables and lamps are being considered. Star is still working on the Computer moratorium and the Napa State Hospital property list.

ADA SUBCOMMITTEE

The Americans with Disabilities Subcommittee, headed by James Parkinson, has been addressing specific issues, including seeking approval for a large-screen television for the hearing impaired; the lack of hearing aid batteries for the hard of hearing; and wheelchair ramp access and wireless microphone use at the Grand Meeting Room.

MUSIC SUBCOMMITTEE

Don Hale, Chairman of the Music Subcommittee, has been struggling in an uphill battle to get a pilot program instituted that would allow patients to purchase and maintain their own personal musical instruments.



HWUR *Continued from* page 1

The allegations stem from previous HWUR business in which a letter was intended to be sent to the CSH administration. "The HWUR have unanimously voted to submit an HWUR memorandum, requesting answers to the seven questions proposed and voted on. The spokesmen have indicated their refusal to sign any prepared memorandum... The record will reflect that this matter was fully discussed by the Hospital Wide Unit Representatives...and a consensus by the HWUR was that a vote of no confidence would be appropriate if the spokesmen continue to refuse to sign the authorized and unanimously approved memorandum."

In his written response to the allegations, HWUR Spokesman Carnot Lyles denied the existence of any such memorandum. "The single allegation is without merit in the first instance as no such HWUR document existed on 8-14-09... If a memo is proposed, one cannot be charged with refusing to sign it before its creation... This once again reflects Mr. Felix's propensity to misstate or embellish facts to suit his own purposes and ends. There is no record...of any discussion of a no confidence vote concerning myself or Mr. Rubio, period. Mr. Felix again manufactures a claim out of whole cloth. Therefore it is impossible for any consensus to have been reached by the HWUR member unit representatives present in the GMR on 8-14-09."

In apparent agreement with HWUR's elected spokesmen, the members who assembled on August 18th voted overwhelmingly in their favor. The vote tallied in identical support of both Carnot Lyles and Jorge Rubio, with the no-confidence vote failing 12 to 2, with two members abstaining from the vote.

"This was nothing more than a tug-of-war for power and control," said one of the unit representatives, who preferred to remain unnamed. "We have had this problem for a long time, one renegade member trying to seize control of the HWUR at all costs... It's really too bad that this one person's actions sabotaged the HWUR and led us to the point we are at today."



UNION SQUARE GRILLE ISSUES

Submitted by Erik K. Dannenberg (Independent)

In June, Coalinga State Hospital (CSH) officials announced their intention to raise prices at the Grille. These price increases, when looked at in a vacuum, may not seem unreasonable. But when looked at through the lens of our economic reality, as patients of CSH, these prices are not simply unreasonable--they are outrageous.

The former Hospital-Wide Unit Representatives (HWUR) determined that patients of CSH should boycott the grille to protest the senseless price increases. We wanted to negotiate with CSH administrators for more reasonable adjustments to grille prices, as the stated increases were just not reasonable given our collective economic situation.

Recently, some members of The People's Committee were recommending an end to the boycott. I contend that the boycott should continue. Here are some facts that you should be made aware of--facts that will help to paint the entire picture clearly:

The amount of the monthly indigent stipend (\$12.50) has not increased one penny since first being enacted in the mid-1970's;

The one-dollar-per-hour salary paid to patient workers has not been raised since 1990--even before the SVP Act became law;

Indigent patients at Patton and Napa State Hospitals receive a total of \$25.00 per month--the standard \$12.50 monthly stipend from the state, which is matched by their respective hospital, adding an additional \$12.50 per month;

Coalinga State Hospital selectively provides a monthly bonus of \$12.50 to those patients who are employed and work a specific amount of hours per month;

Patients with jobs at Atascadero State Hospital got pay-raises of 15% and 35% about two years ago--they are paid \$1.15 and \$1.35 per hour, dependant upon what time of day they work.

In short, for some decades, we have not received any increase in the money we receive from the state to support ourselves--in fact, we have NEVER received any increases. Yet the state is increasing the money they take from our pockets. Given this reality, the average 58% price-increase at the Union Square Grille is beyond reason or justification.

CSH officials claim that they are losing an average of \$10,000 per year operating the grille. They have steadfastly refused to allow us to see any accounting figure supporting this claim. Assuming that these officials are telling the truth, a \$10,000 per year operating loss should be subsidized by the state for the good will of the patients. At 1,000+ patients at CSH, this comes to slightly less than ten dollars (\$10.00) per patient per year. The states claims that they cannot continue to subsidize the grille's operating loss. I contend that the By-Choice Point Store runs at a 100% operating loss, and the cost of its operation is being wholly subsidized--and I am certain they are spending far in excess of ten grand per year to operate the Point Store.

The Union Square Grille boycott has been supported by the overwhelming majority of the patients. Until this week, approximately 97% of the patient body at CSH supported the boycott¹. Support has admittedly been dropping slowly. On the afternoon of Tuesday, August 4, approximately 98 patients ate in the grille. However, Wednesday and Thursday's participation has dropped substantially. As a sign of encouragement, the boycott still has the support of the majority of CSH residents.

We must continue to boycott. It is the only way that we can compel the administration to negotiate more reasonable price increases with us. If we quit the boycott now, we most certainly will not have gained anything. Worse--we will lose whatever bargaining position that we may have. The administration has not met with us in good faith. At the regularly-scheduled Canteen & Nutrition meeting for July, officials representing the Union Square Grille did not even bother to show up, claiming that "an emergency situation" had arisen. They informed the patient-representatives that they would reschedule for the following month; I personally informed the other officials present, including the Staff Liaison Officer, that this was blatantly unacceptable. I requested that the meeting be rescheduled as soon as possible; however, the administration has yet to reschedule the meeting. It seems safe to assume that they are counting on us collectively giving up the fight. Which is why it is guaranteed that we will not succeed if we give up now.

I am asking all of you to continue supporting our boycott. All we ask is that the price increases be more reasonable--for example, perhaps 25% across the board. With what the grille is currently charging, some items have had their prices doubled, tripled, and more.

Simply put--we cannot afford not to boycott.

[Editor's Note: The statistics in this statement could be seen by some as misleading. For example, if only 3% of the patient population patronizes the grille per day, then over a two-week span, it is possible that nearly one-quarter of the population could be seen as not supporting the boycott. That figure would, of course, increase drastically on such days as August 4th when, according to the author's own count, nearly 10% of CSH residents ate at the Union Square Grille. Please understand that Per day statistics are not the same as overall figures spanning a longer period of time, and if presented ambiguously, these figures could be easily misunderstood or misconstrued.]

Also note that the Ally neither supports nor opposes the boycott of the Union Square Grille. As it has ever been, the decision lies with each individual person whether to join arms in protest alongside his fellow man; the Ally respects the right of every person to choose for himself, and remains committed to providing accurate information as well as a forum for those who desire to share their unique voice.]

LETTERS

Editor:

The CSH staff (that is, "treatment providers" at all levels) seem to recognize no disconnect between what constitutes "negative" clinical behavior and "positive" clinical behavior. Level-of-Care staff appear to have been trained to document negative behavior only, and to skew and misconstrue what is honestly *positive* behavior as something to be ashamed of. The only way these people will document positive clinical behavior is if a patient specifically asks that it be done!

I strongly suggest to the other residents of this hospital that if your LOC staff sees you doing something positive or beneficial (i.e., being non-combative where you would otherwise seek physical confrontation; turning in another person's missing property rather than keeping it as you might have done in the past; helping another patient or volunteering on the unit; etc.), ask them to chart it, to explain in detail "why" and "how" you were able to do (or not do) something in a way that is different from what you would normally have done in the past. It might even help your cause to explain to the staff what tools you have learned and are applying in your daily life, whether they were picked up inside or outside of a mall group, from a self-help book, or whatever. It doesn't matter much what it is--as long as it shows a positive action, using positive cognitive and behavioral coping skills--no matter where these skills were acquired, be it in classes, on your own, in therapy groups, or during one-on-one counseling.

I hope that staff will take notice: It is your job to document positive cognitive and behavioral action and change. And I hope that patients will take notice: It is your job to encourage staff to do their job. When staff can verify something positive you've done, ask them to document it for you--because they won't likely write anything positive about you unless you ask them to. GET IT DOCUMENTED!

Respectfully submitted,
William Randall Baker

Editor:

How can there be so many hundreds of thousands of sex offenders in this country, who did something identical to what I did sixteen years ago, who went to prison and did their time just like I did...and yet are free to wander the streets, don't have mental disorders, don't fall under this SVP law, and a lot of times can't even be located?

I did ten years in prison for what I did. I never had a mental disorder while I was in prison--or at any other time in my entire life--until some DMH doctor (whom I have never seen or talked to, EVER!) determined that I have a mental disorder based exclusively on one bad thing I did sixteen years in my past.

Can someone please explain this: Now I sit in a mental hospital that has already cost taxpayers billions of dollars to build and operate. Dozens of psychologists and psychiatrists work here, and yet not one of them has done their job. They have never even taken the time to talk to me or help me, while I have tried for the last six years to seek their help in whatever mental disorder that they claim I have--a disorder that is diagnosed based on an event in my past, from which they say they can read my future.

Can somebody help me understand? All I can do now is wait out the rest of my life for them to someday determine an answer. And until then my life is in their hands.

Respectfully submitted,
Martin Smith

FORCED TREATMENT & CHEMICAL CASTRATION?

[The following was taken from a flyer/bulletin found posted on Treatment Unit 8.]

Author & Source Unknown

Dated August 2, 2009

As most of you know, AB669 recently passed and was signed into law by the governor. This new law permits the District Attorney to present to a court or jury that fact that, if you are not in SOCP treatment, this shows that your condition has not changed.

Now the Department of Mental Health is seeking legislative approval to require all SOCP participants to take a new and unproven drug: Urfucdt, a drug that combines two medicines, Phaseadrine and Urnevrcured.

There are several known side effects, some of which are very serious and life-threatening. You may develop these or other side effects not yet known to the manufacturer.

Some possible side effects are: loss of bone mass in the spine, depletion of male hormones, testes minima (severe shrinkage of the testicles), loss of all body hair (although a full lush growth to the scalp has been reported in many cases), gynomastoiditis (commonly referred to as "bitch tits" in gyms and weightlifting circles), hormonal rage (similar to 'roid rage), suicidal ideation, irrational bursts of crying, cramps, water retention and headaches, irreversible and severe Stockholm Syndrome, kidney and liver failure, and, in just .07% of the known cases, caused directly by the drug Urfucdt, death.

Your Wellness and Recovery Team (WRT) and Unit RN have additional information. You must complete a new and updated Advanced Healthcare Directive prior to starting this new test drug. The drug Urfucdt has been clinically tested on lower primates only and as such, the U.S. Food and Drug Administration (FDA) has NOT approved the drug Urfucdt for use in human beings.

[Editor's Note: This announcement was posted on bulletin boards, in the living units, in the hallways, and all over the hospital, with the heading all in capital letters: "IMPORTANT INFORMATION." Like many good fabrications, this notice is based partially upon the truth: an Assembly Bill was indeed passed which allows the DA to claim incontrovertibly that the condition of a WIC-6604 SVP (that is, one who has gone to trial and been committed) is unchanged without enrollment in the Phase/SOCP Treatment program.

Having said that, however, there is no law currently proposed which would force Phase participants to be chemically (or surgically) castrated.

Treatment Unit 8 LOC staff stated, "This did not come from my supervisor, and we don't know anything about it. I have never even heard of these drugs. As far as I know, staff did not post this flyer, and it is obviously not official. I would not take it seriously--It just looks like a joke to me."

Unit 8 RN Rebekka Baroi reviewed the document, made a copy, and excused herself to address the questions of probability and validity with her supervisor. When she returned, she said, "This is a joke. A patient must have written this and posted it to be funny."

Perhaps intentionally, the author did not specify that this was a prank, a shot taken at the legislature and other supporters of the SOCP/Phase program and/or the Sexually Violent Predator Act itself. Those of us who read this were forced to discern this intent for ourselves, taking our cues especially from the names of the alleged drugs: Urfucdt (pronounced "You're Fucked"), Phaseadrine ("PHASE-a-dreen"), and Urnevrcured ("You're Never Cured"). Because of the clever nature of this hoax, a lot of patients who didn't know better took this information as actual fact and Gospel-truth. Let me repeat: There is no statute or proposed legislation (at this time, anyway) that would force either Phasers or non-Phasers to submit to any form of castration.

As a personal side-note to the unknown author/humorist: My hat is off to you. This was a great gag, executed with a very sophisticated wit and a lot of creativity. It was hilarious, and I got a good laugh out of it... Nevertheless, in the future, please make it clear to the reader when a joke is a joke. Some of our fellow residents nearly had coronaries over this.]

Call It What It Is

By Andrew "Boots" Hardy

"How many legs does a dog have if you call the tail a leg?
Answer: Four. Calling the tail a leg does not make it a leg."

--Abraham Lincoln

There is something awesome about this quote, and every last man whose life is at stake under the SVPA should memorize these words for use in trial.

"Calling the tail a leg does not make it a leg..." Mr. Lincoln was a genius.

Okay, let's spin this so that it applies when Doctor Diablo says I'm going to reoffend, when the state says I'm a predator, when the DMH says I'm "dangerous," and that I can't control myself—that I have this mysterious "diagnosed mental disorder" which supposedly controls me and steals away my volitional capacity...

Just saying these things does not make them true. I was on the streets for a year and a half without a single violation, a single dirty test, a single absconding. This should tell you one of two things: Either I'm really good at breaking the law—which I'm obviously not, given my current housing arrangements... Or maybe—just maybe—I was doing the right things, obeying the law, making positive choices, and trying to get on with my life.

I guess it's possible, in an abstract kind of way, that the passage of Prop 83 in November of 2006 somehow irreparably altered my mental state to such a degree that I suddenly developed an Axis-One abnormality which makes me dangerous beyond redemption. Although... You know, it is amazing to me that this disorder developed so suddenly. If I recall correctly, I was assessed by psychologists upon my arrivals at both San Quentin and Corcoran. If I'd had some form of mental disease at that time, surely those highly-educated, licensed, certified and trained professionals would have seen some signs, symptoms or behaviors—right? And then, out of the blue, as soon as California's voters were bamboozled into passing Jessica's Law, all of a sudden I'm "dangerous..."

The point of my cynical sarcasm is this: simply saying that a pshrink can tell the future just by throwing some bones, chanting into some tea leaves, or maybe gazing into the proverbial crystal ball that DMH has endorsed, does not make it so. I know--without a doubt in my mind--that I will not reoffend. I simply do not have any desire to hurt people. I know what I did in the past; I'm not proud of it, but I was arrested, punished, and paid my debt to society.

I don't mean to sound cliché, but believe it or not, I learned my lesson. There is a reason that they call it a penitentiary—because it is a place where society sends their criminals to be *penitent*. I don't get off on putting someone through pain and agony. Yes, I've caused pain in the past—I have no way of denying it, nor do I want to hide this fact anymore. I can live with it, because by living with it, I can keep it at the forefront of my mind and, in some ways, maybe give back a little something for it.

IN MY OWN VOICE

Submitted by Aaron Klein

Regarding Patient Representation:

If any person or collective group fights for something, it is because they already have possession of it, and are defending what they already control. We—the patients of this hospital—are not now, nor will we ever be, in a position of authority over those who keep us under these circumstances. The system will never be ours to dictate.

Seeking solutions and finding an attitude for compromise means sharing and submitting new ideas--this is the main focus! Regarding administrative decisions that conflict with the things we need, want, deserve, or feel we are entitled to--these issues should be addressed concisely and diplomatically, and we need to always be mindful that, to some degree, we are at their mercy!

These attitudes and expressions for fighting, demanding, trying to prove what is right or wrong--or what did or did not happen--will only be received as a threat; therefore, we can all expect our wishes and our views to be discarded. Things change every day to protect and defend this precious system, while the core (US!) suffer. This is why we are being ignored; it is done intentionally, because we are, and ever will be, expendable to the majority. We can't change what we do not control, but we can contribute to positive change--so long as we understand our own position.

Regarding the Grille and Canteen:

I think that the patients should prepare our food in the grille and work in the canteen, just like they did in prison, with two staff supervisors. This would greatly cut down on overhead costs and would allow these enterprises to operate efficiently in this environment.

My people have assured me that at this present time, Burger King still has the 99-cent Whopper, and that Wendy's still has a wide variety of items on their 99-cent menu--and aren't these the same foods that the Union Square Grille sells for anywhere from \$1.50 on up to \$3.50? Didn't the administration say they were trying to make the grille prices *competitive*...?

Patients here do not earn minimum wage for the two hours per day that they work, and with the extremely limited employment opportunities and hours available here, the monthly \$12.50 stipend can not adequately sustain a patient for a period of 30 days.

Get rid of the monopoly of union employees that created the high overhead and is directly linked to the recent price gouging; create more jobs for the patient population; and restore canteen and grille prices to an amount within reason and appropriate to this environment of very limited income.

An Aspect of LIFE

Cultivating acceptance can improve daily relationships and help heal past hurts that have hindered the process of change and growth. Cultivating acceptance can help us to move on, to become more productive, less stressed, and of benefit to our "community." If ignorance is no excuse in the eyes of the law, then neither is ignoring oneself. Continuing to take a daily inventory propels self-awareness, and encourages us to strive to become a better person than we were yesterday.

Failure to meet our expectations is an inevitable part of "being human;" falling short and missing the mark is a part of life. Acknowledging a person's uniqueness and appreciating them without judgment or blame counteracts our ingrained selfishness--and it is hard work!

Let's bring into focus what plays out in all of our relationships, starting with the here and now, right where we are. What positive skills can be applied for seeking resolution to our conflicts and the injustices we face? The answer begins with our asking of ourselves: "What was my part? What can I do or say right now that would be helpful? What can I do that will help heal and relieve fears and bitterness?"

"We are, and ever will be, expendable to the majority."



Court *Continued from page 1*

immediate release of dozens of offenders whose sentences had already expired. The Obama administration declared that many of the men remained "sexually dangerous," and as a result, Chief Justice John Roberts ordered that the inmates remain in custody until the case can be heard and ruled upon.

Opposing any early release, Elena Kagan, Justice Department Solicitor General, wrote that it "would pose a significant risk to the public and constitute a significant harm to the interests of the United States."

As of June, 2009, at least twenty states have enacted legislation meant to keep sex offenders locked up indefinitely—or until they are no longer considered dangerous. The federal "civil commitment" program is still relatively new when compared to the "Sexually Violent Predator" program in Washington state and the several other states that followed—including California's own civil commitment scheme. These statutes typically include increased criminal punishments for certain sex crimes, and regulate various aspects of sex offender registration.

ATROCIOUS & UNCONSTITUTIONAL

Submitted Anonymously

The indefinite commitment of civil detainees is atrocious and unconstitutional. Many people have voiced this argument, thus far with no overwhelming successes. However, there is one spin on this argument that I have not yet heard, and I sometimes wonder why not.

Stripping a human being of his liberty, and committing him indefinitely to a forensic mental hospital, cannot be constitutional: The "indefinite" factor removes all mandatory and some discretionary judicial oversight of a person who is committed to the department of mental health. We are wards of the court, aren't we? And aren't the courts responsible for watching over their wards?

I was foolishly under the impression that we were to enjoy the rights and privileges accorded to our civil status. For some reason, I thought that when WIC § 6250 said, in mandatory language, that we are to be treated as sick persons and not as prisoners...I thought that it meant just that. I guess I really must be delusional.



Bill Kitchens: Jail House Attorney at Large

Fighting County Jail Housing Abuses

Submitted by William J. Kitchens

How many times have we been to court under this commitment, housed in the county jail, treated like so much dirt, and thought to ourselves, this has to be wrong. What can be done to change this? Well, there is something you can do. Sue their pants off.

Your conditions of confinement are protected by the statutes (California Penal Code §§1610 and 4002; Welfare and Institutions Code §6250) which govern both your placement and your treatment while in the jail. Further, there are cases which state that you cannot constitutionally be placed in a jail at all as a civil detainee. For example, see *Lynch v. Baxley*, 744 F.2d 1452 at 1463 (11th Cir.1984): "The Eleventh Circuit held that 'individuals awaiting involuntary civil commitment proceedings may not constitutionally be held in jail at all.'" This case was clearly iterated in *Jones v. Blanas*, but the 9th Circuit chose not to address this issue specifically. The *Lynch* decision, however, was very clear. As stated above, there are also statutes that protect SVPs from just the type of abuses we face every time we are subjected to the custody of the Sheriff and his or her agents.

Several individuals in our commitment have launched suits against their county jails, the Sheriff, the Board of Supervisors, and the medical personnel of the facility. Some have been successful. In order to be successful in any litigation you must be diligent and thorough. Tell your story, and leave nothing out no matter unimportant it may seem. Sometimes it is the smallest details that can make or break the case.

Some of the things that people are facing in their county jails are: being forced to live in squalor and in filthy and contaminated cells; being regularly and frequently strip searched; being forced to live with criminal inmates; being forced to endure extreme cold or heat; lights on in the cells all night; food that is cold and/or has been contaminated by saliva or other more disgusting substances—just to name a few. While these conditions are all too common, more often than not they go unreported to any competent authority, and therefore continue unchanged. However, they are unconstitutional in the civil arena and can be challenged.

When you go to the Jail, be sure to document everything. Names, dates, times, locations, officers and other staff (Medical or otherwise) and what, specifically, occurred. This is all evidence or information that the person who helps you will be able to use to fight your case and have your issues resolved in your favor. Remember that information is power. I know this may sound like a cheerleading session, but the fact is that only 1 in maybe 25 (and that is a generous estimate) of the individuals who are mistreated and abused by County Jail officials ever complains or files suit.

When we are talking about abuses suffered in the jail by proposed or adjudicated SVPs, the best and most graphic cases that come to mind are *Meyers v. Pope* (being handcuffed to a wall while on the telephone as criminal inmates move freely about the area); *Kitchens v. Pierce* (being forced to live with 45 other criminal inmates in an open dormitory, without supervision or protection, and placed in isolation for no other reason than that they had no other place to put the individual); *Jones v. Blanas*, (Strip searched at gunpoint and forced to live in the general population of the jail for over a year); *Cerniglia v. Blanas*; and several others.

For those of you who recently came under the Sexually Violent Predator Act: Despite what the nay-sayers may tell you about pissing off your jailers, suffice it to say that if you want to be treated appropriately while in the county jail, file a suit, get the defendants served by the US Marshals, and beat them to death with the law they are required to observe and enforce. I guarantee you, not only will you get some respect, but if you do it correctly, you may also get a little chunk of change besides.

If you need any pointers or assistance in the area of filing a law suit, there are several people here at CSH who are competent and qualified to help out. I will assist anyone who wants to tighten the screws to their county, and in my next article, I will give you some specific cases and rulings for support in your fight against your county, including the most recent 9th Circuit Ruling in *Meyers v. Pope* concerning searches in the county jail setting and how this ruling can and does apply to searches here in Coalinga State Hospital.

THE DANGERS OF DIVISION

Author and Source Publication Unknown; submitted for reprint, with Introduction by Dennis Sharkey

History teaches us a lot about the faults and dangers of being divided. History also, as this article explains, sheds true light on what most perceive as "democracy." We need to help those in power to rule wisely, as this article stresses.

Human Beings Cannot Rescue Themselves

Most [people] think that if they could just get world leaders to follow their particular recommendations, things would turn out all right in the end.

Wisdom from a deeply respected American founding father will tell us otherwise. After their presidential terms ended, John Adams and Thomas Jefferson carried on a lengthy correspondence until both died. In a letter dated July 9, 1813, Adams told Jefferson:

"While all other sciences have advanced, that of government is at a stand[still]; little better understood; little better practiced now, than three or four thousand years ago. What is the reason? I say, parties and factions will not permit improvements to be made. "As soon as one man hints at an improvement, his rival opposes it. No sooner has a party discovered or invented an amelioration of the condition of man, or the order of society, than the opposite party belies it, misconstrues it, misrepresents it, ridicules it, insults it, and persecutes it." (Quoted by Norman Cousins, *In God We Trust*, 1958, p. 231.)

This is the Achilles' Heel of democratic government--rife with party spirit and strife. Adversarial opposition parties focus mainly on attaining high office rather than helping those in power rule wisely. Imperfect human governments (including multi-state organizations like the United Nations and the European Union) are not going to get a handle on this world's problems. A new president will not change the direction the USA is headed. A change of administration will not halt the nation's decline in morals and character.

Only the coming of a *divine* government, God's government, can overcome human imperfections and misjudgments. The Bible tells us this will bring "the times of restoration of all things" (Acts 3:21). Then, and only then, shall we have the good government that humanity has always longed for. No other solution will work. Only God can rescue humankind by sending Jesus Christ back to earth to save us from the chaos we have created. He will restore right government. Revelation 11:15 proclaims a wonderful announcement that will be declared throughout the earth at that time: "The kingdoms of this world have become the kingdoms of our Lord and His Christ, and He shall reign forever!"

"But the souls of the just are in the hand of God, and no torment shall touch them. They seemed, in the view of the foolish, to be dead. Their passing away was thought to be an affliction, and their going forth from us to be utter destruction. But they are in peace. For if before men, indeed, they be punished, yet is their hope full of immortality. Chastised a little, they shall be greatly blessed...because God tried them and found them worthy of Himself."
(From The Apocrypha-- WISDOM 3:1-5)

"Resplendent and unfading is Wisdom, and she is readily perceived by those who love her. She is found by those who seek her. She hastens to make herself known in anticipation of men's desire; he who watches for her at dawn shall not be disappointed, for he shall find her sitting by his gate."
(From The Apocrypha--WISDOM 6:12-14)

The following article was submitted anonymously. Though I support and encourage the free expression of each person's views and opinions, I also have views and opinions of my own, and I feel compelled to share them here: I have known Chaplain Michael Reed for a few years now, from when he ministered at Corcoran and SATF State Prisons. While I don't personally agree with his stance on homosexuality, I do know that his heart and his faith are bigger than Texas. Chaplain Reed has always impressed me as a fair and compassionate man of God. His counsel has always been that the practice of homosexuality is sinful; but his love for this particular homosexual has, at the same time, never been doubted. --BOOTS

THE CHURCH OF THE CHOSEN FEW

Submitted Anonymously

Is our Protestant church at odds with the gay community at CSH? It does seem peculiar that a population that is nearly fifty-percent homosexual and/or bisexual is being discriminated against by the one venue that should be the most supportive. By a wise man's words, "There are the *SHOULD*'s, and there are the *IS*'s." What *IS* is this:

At the All Faiths' Chapel in Atascadero, our choir and worship team were predominantly gay, if not entirely so. Reverend Dodd advocated for and respected the gay populace. Though there were homophobes and bigots at our services, the Reverend kept these people in check. Gays felt accepted, supported, and loved by our faith... But in the Church of the Chosen Few in Coalinga, the hired chaplains have allowed prejudice, bigotry, and discrimination against a large percentage of the population. The administration has done nothing to negate this attitude that God must love certain groups of people more than others. This *IS* the reason that many of us no longer attend church services. Surprisingly, many of these bigots are gays who deny themselves, and African Americans who should know a little about prejudice, but become hypocrites. Deny the gift of your sexuality in order to find Jesus--what a concept. I believe, gentlemen, that the goal is to find out who you are in relationship to God; it isn't to try to fool Him that you're something different. This isn't Phase II.

Another *IS* is that we have wanna-be preachers who think it is their role to advocate hatred, to tell men how to vote on such measures as Prop 8, and to ostracize men who dress too "effeminate" for their tastes. We have all the Antichrists we'll ever need right here in Coalinga, dressed in khaki. Allowing men of this nature to preach is equivalent to letting them practice psychology; the latter is at least laughable, while the former is an embarrassment to God's Word. Hiring a chaplain who brings baggage of judgment and prejudice against gays is like hiring mental health workers who hate sex offenders. Oh, wait--they already do that, don't they?

Chaplain Reed is now attempting to demoralize gay Christians by offering contact with the Unitarian Church as an alternative to "his" church. But the Unitarian Church is a radical cult, one that doesn't believe in Christ's miracles, His virgin birth, or His bodily resurrection. According to the Unitarians, Christ is not even divine. They claim that they can "save" themselves through their own moral character. The chaplain is pulling an underhanded move to degrade all gay Christians, while likely finding humor in giving us a complete contrast to his religious viewpoints. How honorable.

This chaplain is like a Chronicler, one who waters down the Bible to fit his own definitions. He preaches that he knows what is right and wrong in the eyes of God. He tells us how to act, how to live, and in this process he elevates himself above us. I can tell him that faith presupposes that we cannot know. We can never know. Those who claim to know what life means are playing God. Those who act without any doubt are frightening. God is inscrutable, mysterious and unknowable. We do not understand what life is about, what it means, why we are here, and what will happen to us after our brief stay on this planet ends. We are saved, in the end, by grace and faith--faith that life is not meaningless and random, that there is a purpose to human existence, and that in the midst of this morally neutral universe, the tiny, seemingly insignificant acts of compassion and blind human kindness, especially to those labeled our enemies and strangers, sustain the divine spark--which is LOVE.

So tell us, Chaplain, was Paul a closeted gay or what? Why did Joseph dress in a girl's outfit? Why is YHWH [God] sometimes represented by an ephod? What are we to make of naked dancing prophets? Of males who offer sexual services as a way of honoring their deity? Of YHWH's sodomizing Dagon and Saul? Why, in biblical literature, is male beauty regularly associated with erotic attachment? Were Ruth and Naomi lesbians? How about the bene-*hanabi'im* (sons of the prophets) and the *qedeshim* (sometimes called the temple/cultic prostitutes), whose sacred power was also an erotic power that found expression in erotic practices with persons of the same sex? Is your Old Testament different from mine, Chaplain Reed? You quote Leviticus, but do you endorse slavery (Exodus 21:21)? Do you kill children who curse their parents (Exodus 21:15, 17)? Do you preach that women are subservient to men, without legal rights (Exodus 21:7-11)? If so, certain men at this hospital must love you.

Why do boy-companions so often accompany warriors? Why does Saul fall into a naked swoon when he comes into contact with Samuel's dancing associates? Why did Jeremiah complain that YHWH raped him? Did the sons of the prophets inseminate their followers literally or metaphorically? Why were the actions of Elijah and Elisha ignored by the Chronicler? Is the *teraphim* a phallic representative of YHWH, and the ephod and ark more or less disguised as phalli?

I read the Old Testament because of its dynamic history, which can be very homoerotic. We don't need Greek history to find such *eromenos* (beloved youth) as David, the object of adult male desire, be it YHWH, Saul, or Jonathan. To think, even in biblical times they needed an SVP law. Locusts, boils, flies, hail, fire, darkness, and psychologists... Now THAT is scary.

Alas, the Bible has long lain in the wrong hands, used not to Christianize our culture, but to acculturate the Christian faith. Our tolerance of this church is a virtue, but tolerance coupled with passivity is a vice.

Welcome—to the Church of the Chosen Few.

Announcements

Happy Anniversary!!!

On August 17, 1999, two people met in the midst of a really dark and dreary time. Their friendship grew strong, and their feelings for each other were inevitable. In 2003, the two found themselves romantically attached. On August 27, 2008, they united in vows of matrimony to love, honor, and cherish one another for the rest of their lives. Today, we will honor respectfully the life and love these two share together.

To my friends and yours,

Mr. and Mr. Randy & Frank Peyton-Grassinni:

HAPPY FIRST YEAR
ANNIVERSARY!!!

May your lives be blessed and your love continue to grow stronger with each passing day. Our song dedications to you:

“Hero,” by Mariah Carey; and

“Cherish,” by Al DeBarje.

(PS: I had to put Randy’s name first because you all know he would have yelled at me if I didn’t...HA-HA!!)

With love and respect,
Your friend,
Star

Photograph

COALINGA PRIDE LGBT SUPPORT GROUP PROPOSED

Submitted by D.J. Jones

It is being proposed that a group be established as an educational/support group for individuals who identify themselves as lesbian, gay, bisexual, or trans-gendered, (LGBT) or who are friendly towards such individuals. This group would also be for those that have questions, are curious about, and/or are investigating, aspects of their sexuality. This group would be available to **ALL** individuals regardless of their sexual or gender orientation/identity, as long as they are not there to disrupt or disturb the meetings, or to harass or point out for harassment other members of the group.

Contrary to the beliefs that might be held by some people, it is vital to provide this service to members of our community who are dealing with personal LGBT issues. It is intended that the group would provide for a safe and understanding environment in which to explore a person’s sexual and gender orientation / identity. It is widely recognized that misinformation is one of the greatest dangers and causes of prejudice. We would welcome anyone who is interested in being able to investigate the truths of these issues and is willing to challenge the prejudices that are present in the community.

NEED FOR GROUP: All individuals are in need of acquiring and practicing skills which will be helpful when living in a community setting. Individuals who identify themselves within a sexual identity or gender / identity minority will find themselves at a disadvantage in most social contexts. This group would be an informational, discussion, supportive group that would be facilitated by a CSH staff sponsor/facilitator who has current knowledge on issues of LGBT concerns and who also has experience in detecting and pointing out problematic issues. This group would be set up to provide comfort, safety, and support for the GLBT community here in the hospital. Its purpose is to provide help, relaxation in a safe environment, and support and **NOT** to be established as a dating service.

The Ally needs your submissions!

Please submit articles to Andrew “Boots” Hardy on Unit 8, or drop them off during office hours at VE-181!

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VALADAO MEMORIAL SOFTBALL LEAGUE

The softball league season has ended, playoffs have been held, and the 2009 Championship Game is scheduled for August 22. The Free Birds will be taking on the undefeated Shoeless Joes for the season title that afternoon as the two remaining teams vie for position as the league's Top Dogs.

The Championship game follows a brief--but extremely heated--two-day playoffs-weekend which began on Saturday, August 15th. Shoeless Joes appeared to slam their playoffs opponents without effort, taking yet another season victory against Under the Weather with a final score of 20-1. The very next day, DaRebels took a terrible beating from the Free Birds, scoring only half the runs scored by the victor. At final count, the Free Birds came out on top, 18-9. An "All-Star" game has been proposed and planned, date and time of this highly-anticipated event still to be announced. Patients will take on CSH staff for the ultimate in bragging rights! Good luck to all!

MY OPINION ON MICHAEL VICK

Submitted by Aaron Klein

Many upcoming college quarterbacks are entering the "pros," and both time and opportunity are of the essence; this may (or may not) be the window for Michael--and for his possible downfall--for becoming, once again, a first-string quarterback in the NFL.

The possibility for this outcome, I think, is very good, considering there are at least 5 teams that have suffered in the league and with their long-time fans.

As a fan, and like many others, I love the game and think that since Michael Vick did not violate the game and/or rules of football itself, but did in fact do his time, he deserves a second chance on the field.

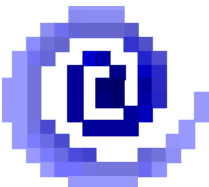
[Editor's Note: Don't we ALL deserve a second chance on the field?]

PHASE EVENT ANNOUNCEMENT:

Hopefully this doesn't "trigger" any "cognitive dissonance," but there has been a change of plans regarding the "Phase-Family-and-Facilitator" event. According to a flyer sent out by Event Chairman Billy Redding on August 11, 2009, this special and highly-anticipated event has been rescheduled.

"Unforeseen incidents have created a time-crunch problem," the flyer said. "The date we requested for November has been altered. The requested revised date is Valentine's Day Weekend--February 13 or 14, 2010, from 1200 to 1800 hours [12:00 noon to 6:00 PM]. The actual date, once determined, will be posted.

"Please remember--this is just a date we are trying to get approved, and it is not a guaranteed 'promise' of anything. Your task as Phase participants is to ask any visitors interested in attending this event about this date and event. As more information comes, it will be posted."



The Evolution of the League

Submitted by Bryan Cooke

In 2005, the first group of softball players transferred to CSH from Atascadero. One of the players was Luther Evans, from Unit 1. Luther initiated a program where Unit 1 became the go-to unit for softball. Every Saturday and Sunday, Evans would push a cart laden with bats, balls, gloves, and a water jug to Kiosk 16 with a handful of other players, including Rico, Carr, Mendoza, Red Horse (who, by the way, slammed out Coalinga State Hospital's first-ever home-run), and others who wanted to have some fun. Luther was highly dedicated, acting as the league commissioner, giving of himself to organize and coordinate weekend and holiday softball games.

In 2006, more players emerged to add to the rosters--players like Valadao, Love, Burns, Herman, Rose, Garland, Cunningham, 2-Scoops, Morrow and Asher. I hit the scene myself sometime thereafter and teamed up with Luther in choosing teams and having pitching duels with Mr. Evans himself and Frank Valadao. Over time, the fierce competition balanced out as more and more softball enthusiasts joined the ranks of our league--Rigby, Dominguez, Wick, Sumahit, Cheek--and later, Carter, Bill Naumowicz (who was recognized as Shoeless Joes' 2009 Season MVP), Klein, Juarez--and, of course, John Sundquist, the Home-Run King, still carrying the record for having hit the most total home runs in CSH history. These guys got into the game and escalated the level of play even higher than ever before.

In 2006 and 2007, leagues formed where Rico's team took both championship games with ease, but in 2008, Alan Rigby formed his team, Shoeless Joes and, competing with the rest of the six-team league, finished the 2008 season undefeated and went on to claim the that year's Championship title. All-Star Player Mike Cooper--who has since been released and is now enjoying the free life in Fresno, California--contributed to the league's many successes and his team's Championship victory.

This year, Commissioner Ishmael Carter rallied four teams together for the 2009 season. Once again, Shoeless Joe's took the league by storm with an undefeated record of nine wins and not a single loss. The playoffs were held the weekend of August 15-16, with Under the Weather losing to Shoeless Joe's on Saturday by 20 to 1. DaRebels took on The Free Birds on Sunday, scoring only nine runs to the Free Birds' eighteen. The two playoff-winning teams--Shoeless Joe's and the Free Birds--are left now only to face-off for the League Championship Series beginning Saturday, August 22. It will be a three-game series with the title going to the team that wins the best two out of three.

The last few years in softball have been exciting, with each season more interesting than the last. The program has surely evolved over the years. We have seen over 100 players compete on that diamond, and as time goes on, we get the chance to see new players take the place of the ones that have left us for one reason or another--like Frank Valadao slipping from this life into the next, and Luther Evans' serious injury on the field of play putting him on the sidelines. We are shown that the game will go forward, as will our fond memories of those comrades who helped to pioneer this exhilarating sport at CSH.

We will also be blessed to see even more changes in the coming months. New canopies have already been erected on the field for heat-protection; proposals have been submitted to open the ball diamond every day, so that any patient can enjoy it for jogging, walking, or whatever they desire; a water fountain is next on the list of wants. When the season is officially complete, we also invite new players to come out and enjoy the game with some open softball play, and perhaps soon CSH will answer our query and give us back our holiday softball games. Special thanks go out to the head of CPS, John Catano, Linda Clark, and gym staff James Lopez, for their continuous support of CSH recreational programs. These staff have given us a lot of opportunities to enjoy vigorous competition, build relationships, and encourage fitness and bodily wellness.

I would like to close with a heart-felt request on behalf of the softball players at Coalinga. In memory of one of our fallen brothers, we propose that the CSH softball diamond be renamed and dedicated as "Valadao Field," after Frank Valadao. We would like to honor our friend, our team mate, our brother, with the christening in his name of the one place in this hospital where he was free.

First Annual Multi-Cultural Carnival

Submitted by Star Lopez

Thursday, July 23, 2009, marked our First Annual Multi-Cultural Carnival at the Grand Meeting Room. This event was put together by your unit Activities Coordinators and Mrs. Stefanie Wagner, Ms. Lupe Macias, and Mrs. Debra Fortin. Emcee and Hostess for the evening was myself, Star Lopez, vice chair for the Hospital Wide Activities Coordinator.

I want to say a special thank you to those that partook in this event: Mr. Padilla, who opened the evening festivities by singing the Mexican National Anthem on behalf of our Mexican-American community; Mr. Andrew Chavez, who followed with a prayer and a Native American honoring song; Mr. "Free Mountain" Viramontes for his song and short story; Francis Iniguez, for her inspiring poems; Elder Frank Enepi Sisneroz from the Inyana Native American Circle for his story while accompanied by Mr. Michael Languien's heartwarming flute playing; Mr. Raven Clark for his drumming and song; Mr. Steve Smith, Mr. Mike Angulo, and Mr. Chris Dryden for the reading of the sacred cards booth; Gabba and Lee in serving medicine tea; George Vasquez and Vihn Nguyen, who accompanied as Elder Sisneroz shared the song and dance of his tribe, the Oglala-Lakota Nation, on behalf of the Native American community.

Mr. Eric Dannenberg, for his beautiful words on behalf of the Muslim community; Mr. Richard White for his words of wisdom and the playing of the Black-American National Anthem on behalf of the Unity Group; Mr. Allen Fields, for his enlightening words representing the Jewish Community; Francis Iniguez (again) for her story teaching us the history of the Mexican flag; Mr. Charles Stafford and Mr. Robert Johnson for all their hard work in helping arrange this; Elder Frank Sisneroz for his lovely prayer and outstanding dance in representing the Veterans Association in honoring the life of Mr. Joseph Vila, known as "Pepie" to all his friends; Mr. Mark Zavala, Mr. Gustavo Quintero, and Mr. George Rubio for representing the Mexican-American culture and donating chips and salsa for the event; Mr. Mike Marshall and his booth of genealogy; and anyone I might have left out. I commend you all on a job well done. You all have truly made this a memorable event. "There is nothing that can't be done if we use our voice as one."

Thank you!

"All along this path I tread

My heart betrays my weary head

With nothing but my love to save

From the cradle...

to the grave"

--Eric Clapton

