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ocean newsletter

Overcoming Corruption Encouraging All Nations

In this 7th issue of the ocean newsletter we continue to plead with other civil commitment detainees to speak up. Then we will look at the story from another detainee. We will then look at what the Sex Offender Civil Commitment Advisory Task Force was charged to do with the gulag. Did they deliver? Next we will take another look at the Administrative Variances applied to the gulag, a crucial element to the Murder Machine. Finally, we will look at the Debwe (truth) by ocean editor Russell John Hatton.

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🌿 A Call to Arms! 🌿

ocean pleads with other civil commitment detainees to speak up.

On December 11, 2019 the Executive Director of msop came to talk about Provisional Discharge (PD). Obviously, there will be many restrictions for those released on PD. For those that don't know, PD is basically parole. Currently 23 out of 731 detainees are on PD. This is an improvement because in the first 20 years of msop's existence, there were none. Things are slowly changing, but work still needs to be done. Oh, in case you're wondering, none of those offenders on PD have reoffended.

I [DW] think it was a positive Meeting. First of all we learned that Ms. Johnston is trying to get funding from the Minnesota legislature for 50 beds in St. Peter. She has tried this for the past 4 years. However, this year DHS has a new commissioner and more importantly, our new governor has expressed support for detainee reintegration. If we do get the 50 beds, this will help detainees move forward. There is currently a bottle neck effect where the Moose Lake cite has many CPS approved guys waiting to be moved to St. Peter where they can begin working though the last stages of treatment and into society. This will lighten the pressure at the front of the line, allowing other detainees room to also move forward—or at least this is my theory.

The point is this: ocean has taken every opportunity to champion for this cause. We are part of this solution. I say this brazenly to convince others to join the fight. But the fight is not against msop, or the government, or your clinician. It is against your fears, "what's the use, they are going to do what they want?" is the common response. But this is a lie rooted in fear. For those in ocean, this is absolutely intolerable. Anyone with that mindset is not only wrong, they are a part of the problem. However, for those willing to be bold and courageous, we welcome you.

Having sad that, we all have fears. I do too. But courage is not lack of fear, it is action despite of it. I was just telling Russ how afraid I am to speak in public, but I do it every chance I get because I know my voice is my most valuable tool for change. I hate doing it, but as a DROP in this ocean, I have a duty to stand for what I believe and speak up when given the opportunity.

When I got up in the community meeting last week to tell my peers to attend the meeting with Nancy Johnston, I tried to be positive, while telling the truth: not easy. I later spoke to a clinician about what I said and she told me to try to be more "positive." Anyone who has been in treatment very long will hear this word thrown around a lot. I told her that I don't really consider whether I am being "positive" or "negative" but rather whether I am being "true" or "false." This is how I chose my battles. If I can preserve another's emotions, while staying real to my truth, that is the greatest victory I can have today. However honesty is sovereign over positivity.

I hope ocean encourages you to fight with us. But remember, if you want to get *onto* the battle field fighting against oppression, you will need to first get *into* the battle field of your heart and mind, or you'll never win the war. [DW]

Detainee Interviews:

If the state authorities are going to keep us locked up forever, they are at least going to know how we're getting along. *<The term Detainee is more fitting than detainee>*

The thoughts of a committed man

Here's a story of a journey called: Life.

It starts on a farm; a mouse looked through the crack in the wall to see the farmer and his wife open a package. "What food might this contain?" The mouse wondered. He was devastated to discover it was a mousetrap. Retreating to the farmyard, the mouse proclaimed this warning- "There is a mousetrap in the house! There is a mousetrap in the house!" The chicken clucked and scratched, raised her head and said, "Mr. Mouse, I can tell this is a grave concern to you, but it is of no consequence to me. I cannot be bothered by it."

The mouse turned to the pig and told him "There is a mousetrap in the house! There is a mousetrap in the house!" The pig sympathized, but said, "I am so very sorry, Mr. Mouse, but there is nothing I can do about it but pray. Be assured you are in my prayers."

The mouse turned to the cow and said. "There is a mousetrap in the house! There is a mousetrap in the house!" The cow said "Wow, Mr. Mouse. I'm sorry for you, but it's no skin off my nose." So, the mouse returned to the house, head down and dejected, to face the farmer's mouse trap... alone...

That very night a sound was heard throughout the house, the sound of a mouse trap catching its prey.

The farmer's wife rushed to see what was caught. In the darkness, she did not see it. It was a venomous snake whose tail was caught in the trap. The snake bit the farmer's wife. The farmer rushed her to the hospital. When she came home, she still had a fever.

Everyone knows you treat a fever with fresh chicken soup. So the farmer took his hatchet to the farmyard for the soups main ingredient, chicken.

But his wife's sickness continued. Friends and neighbors come to sit with her around the clock. To feed them the farmer butchered the pig. But, alas, the farmer's wife did not get well... she died.

So many people came for her funeral that the farmer had the cow slaughtered to provide enough meat for all of them for the funeral luncheon. And the mouse looked upon it all from his crack in the wall with great sadness.

So, the next time you hear someone is facing a problem and you think it doesn't concern you, remember when one of us is threatened, we are all at risk. We are all involved in this journey called life. We must keep an eye out for one another and make an extra effort to encourage one another, you may want to send this story to everyone who has ever helped you out... and let them know how important they are.

Remember, each of us is a vital thread in another person's tapestry. Our lives are woven together for a reason.

Live simply, love generously, care deeply, speak kindly, and

Leave the rest to the Creator for we walk by faith and not by sight.

"Anyway"

People are unreasonable, illogical, and self-centered. Love them anyway.

If you do good, people will accuse you of selfish, ulterior motives. Do good anyway.

If you are successful; you will win false friends and true enemies. Succeed anyway.

Honesty and frankness may make you vulnerable. Be honest and frank anyway.

What you spent years building may be destroyed overnight. Build anyway.

People really need help but may attack you if you help them. Help anyway.

Give the world the best you have and you may get kicked in the teeth.

Give the world the best you've got anyway!

Sign on the wall of Shishu Bhavan –

Commissioner Shall Develop Less Restrictive Alternative Programs

On December 2, 2013 a federal court ordered the Sex Offender Civil Commitment Advisory Task Force to be charged with examining certain specific aspects of Minnesota's process for the civil commitment of sex offenders. The Task Force was directed to provide recommended legislative proposals to the Commissioner of Human Services on the following three topics:

- A. The civil commitment and referral process for sex offenders;
- B. Sex offender civil commitment options that are less restrictive than placement in a secure treatment facility; and
- C. The standards and processes for the reduction in custody for civilly committed sex offenders.

After twenty public meetings over a period of 14 months, the Task Force was unanimous in its conclusion that the serious problems that exist in the current program can and should be addressed by legislative actions¹ that:

- (1) rationalize the process,
- (2) make it more objective, and
- (3) eliminate to the greatest extent possible the influence of politics on commitment, placement and release decisions

With the ultimate goal being the rights of those persons subject to civil commitment proceedings and the interests of the public be better protected.

Commitment decisions are too often all or nothing adjudications. Under current law, all offenders committed to msop are presumptively placed in the highest level of security.

An independent judicial body, one that is not subject to local or other political pressures, should make commitment, transfer, and release decisions.

Perhaps the most significant impediment to effective Less Restrictive Alternatives is the absence of facilities and funding for programs to which offenders can be committed short of a secure facility, or outright release.

Existing law allows a court to commit an individual to a less-restrictive alternative if the individual "establishes by clear and convincing evidence that a less restrictive treatment program is available that is consistent with the patient's treatment needs and the requirements of public safety." Minn. Stat. § 253B.185, subd. 1(d) (2012). However, the lack of programs and facilities makes this provision of limited value.

The Legislative Auditor's March 2011 report highlighted this issue in its findings and recommendations: "Minnesota lacks reasonable alternatives to commitment at a high security facility." (p. xi)

- "One problem with Minnesota's commitment process is that it results in an all-or-nothing outcome.
- The decision that prosecutors and judges face is that either a sex offender is civilly committed in an expensive, high security facility, or the offender is released to the community, sometimes with no supervision if he has served his complete prison sentence." (p. 42)
- "Minnesota may be committing some sex offenders who could be treated and supervised in other less costly settings." (p. 43)

The Legislature must provide adequate funding for less secure residential facilities, group homes, outpatient facilities, and treatment programs. The Legislature must ensure that such facilities and programs are operational within a reasonable period of time.

The Department of Corrections, the Department of Human Services, prosecutors, the courts, and persons subject to the commitment process must have full ability to access these Less Restrictive Alternatives. To the

extent that any of the current statutory or regulatory laws are obstacles to Less Restrictive Alternatives, appropriate legislative changes should be made.

Less Restrictive Alternatives must ensure public safety. The Legislature should provide for increased resources for public education regarding the rehabilitative aspects of such programs and the provisions for public safety.

The Legislature should provide for geographic distribution of Less Restrictive Alternative facilities and programs to serve the entire state through regional, multi-provider and other collaborative programs. The Legislature must consider how local government ordinances, resolutions, or similar laws which have the effect of limiting, excluding, or impeding the siting of Less Restrictive Alternative facilities or programs for civilly committed sex offenders should be dealt with when they conflict with the establishment of a statewide plan for Less Restrictive Alternatives.

The Commissioner shall develop Less Restrictive Alternative programs and facilities throughout the state after due consideration of the population of offenders to be served, the number of facilities and different programs necessary to serve that population, the expressed desire of the Legislature that facilities not be unduly concentrated, and the financial impact of programs and facilities providing overlapping services.

Certification and licensing of programs and facilities granted by either the Department of Human Services or the Department of Corrections shall be honored by both departments.

The Commissioner shall enter into contracts with governmental and nongovernmental entities and organizations agreeing to provide housing, supervision, and treatment of civilly committed sex offenders outside of secure treatment facilities.

The Commissioner may request proposals on an ongoing basis.

Footnotes

1. <https://edocs.dhs.state.mn.us/Ifserver/Public/DHS-6641-ENG>.

So What's the Big Deal about the Variances?

A Summary of the Ocean Article: Creating Civil Commitment Chaos.

Note: Some citations were omitted in this article because they are in the original document: *Creating Civil Commitment Chaos*, by msop lawyers in collaboration with ocean

msop clients should not have to sift through legal jargon and political bureaucracy to understand the laws that govern their treatment. However, we are compelled to try. In this article we are going to explain how msop circumvents the law to keep people committed, even if the person does not have a mental illness. However, in their attempt to sidestep the law to hold as many human beings, for as long as possible, msop has turned a simple issue chaotic. Be patient with us while we explain the msop scheme, and attempt to shed light on how complex msop has become.

The msop does not use the same Medical Model approach to treating their clients, as the courts did for their decision to commit them. It's like a court ordering someone to attend AA meetings. The person is brought to a building that says "AA Meetings" on the side of the building. They go in, get a cup of coffee, sit down at the meeting and start listening. After only a few minutes, someone starts talking about how Winston's desire for social justice compels him to seek a life of freedom, despite the Big Brother party agenda... That's when the person realizes there at a book club meeting—not AA. "Oh, no big deal" They think. "I'll just leave and go to the right place." That's when they realize that they are not allowed to leave and the worst part: no one will listen to them screaming, "I'm in the wrong place!"

"Court in, court out" is the msop mantra. However, it should change to "Court in—20 year book club—Court out." what's the book club have to do with it? Nothing. That's the problem. When clients go back to court, they find themselves talking a language the court cannot understand, because the client never received treatment for their "illness." But here is where it gets even crazier: they never had an illness.

Minnesota tax payers spent \$118,000,000 million¹ in fiscal year 2019 on a treatment that msop is not licensed to provide. msop is licensed to provide treatment, "...subject to the standards of Chapter 245A and Minnesota Rules, part 9515.3000 to 9515.3110."² Meaning these are the standards MSOP is required to follow when they administer treatment to their clientele. However, there is a law in Minnesota that allows the DHS commissioner to depart from the rules that govern msop. This departure is called a "variance." A variance is like a waiver that allows the license holder to do something other than what the license would normally permit.³

In 2005 msop applied for a "permanent variance" to Minnesota Rule 9515.3030 subpart 2. The rule states, "A psychiatrist must evaluate each person within three working days after the person is admitted and reevaluate each person at least annually." A permanent variance is restricted to protect detainees from being negatively affected by these changes. For instance, a permanent variance, "...cannot compromise the qualifications of staff to provide services..." However, with the variance that alters Minnesota rule 9515.3030 subpart 2, msop no longer has to allow psychiatrists to evaluate detainees. Instead, msop can use either a "licensed mental health professional" or a "licensed-eligible psychologist." Although the variance is "...compromising the qualifications of staff..." msop never gave a time limit for it and has renewed it repeatedly throughout the years. The variance has remained in effect since 2005.

Not all msop detainees need treatment. Minnesota Rule 9515.3030 subpart 2 is governed by a particular Minnesota law, and must reflect the intent of that law. The law that governs the rule states, in relevant part, "The commissioner shall establish an evaluation process to measure outcomes and behavioral changes as a result of treatment compared with incarceration without treatment, to determine the values, if any, of treatment in protecting the public."⁴ This law tells us that it is not necessary to provide treatment to all detainees. Some will need it. Some will not. In addition, the law that governs a detainee's discharge from msop says if a detainee "...is no longer in need of treatment..." he must be released.⁵ However, without each detainee getting evaluated by a psychiatrist, there is no way to know who no longer needs treatment.

One particular variance allows a "licensed mental health professional" or a "licensed-eligible psychologist" to do assessments. But neither is a psychiatrist who is able to identify mental illness.

The Minnesota Judiciary has consistently ruled that a person must have a “mental illness” to be committed to msop. A “Person who is mentally ill” is defined by Minnesota law as “...any person who has an organic disorder of the brain or a substantial psychiatric disorder...” which is often demonstrated by “... a *recent* attempt or threat to physically harm self of others...”⁶ In addition, the DSM-5—used by psychiatrists to diagnose mental illness—requires that an individual display a “*current* presentation” of mental illness for the detainee to get branded with a diagnosis. For sexual disorders, “current presentation” is within 6 months. In other words, if the detainee has not shown any signs of mental illness, as described by the DSM-5, then he is in remission, and must be released.

Mental illness is a *medical* issue in the same way the *illness* of cancer is a *medical* issue. Do you go to a medical doctor to get chemotherapy for a cancer you *used* to have? No. You would only get chemo if you *currently* have cancer. In this way, *medical* illness is no different than *mental* illness. For someone to get civilly committed in Minnesota, a court has to find that the person is “mentally ill.” According to Minnesota law, these individuals must go to a facility that, “... is consistent with the persons treatment needs...”⁷

So what kind of treatment does the detainee need? Well, they clearly need a type of treatment that addresses the clients *current* and *recent* behaviors. Therefore, an evaluation by a psychiatrist is in order. The reason is simple: a psychologist looks at past behaviors to conclude whether or not commitment is necessary. But a psychiatrist look at *recent* behaviors to determine whether the detainee must be released. Therefore, the kind of treatment that would be “...consistent with the persons treatment needs...” would be a treatment provided by a psychiatrist. A “licensed mental health professional” or a “licensed-eligible psychologist” cannot provide adequate treatment to the msop client.

What was originally a straight forward rule is now two pages of confusion. The qualifications of staff were compromised by the variance which substituted a psychiatrist for multiple clinical staff. Now, if the detainees thought to have a mental illness, his case may be addressed by one of 11 different clinical staff, each with a different set of credentials. None of these staff persons are psychiatrists. If a psychiatrist does ever get involved with a detainees case, it could take up to 19 days after admission for the psychiatrist just to *review* the detainees record, if they ever do at all. When msop replaced the psychiatrist, they settled for a “licensed mental health professional” or a “licensed-eligible psychologist.” This change made it impossible for detainees to receive the type of quality treatment they need. A psychologist is trained to look at past issues and behaviors—the same issues and behaviors used to determine the detainees initial commitment—and use them to consider continued commitment. The result: hundreds of Minnesotans remain unlawfully detained because it is impossible to treat the unique clientele of msop with a treatment model that does not abide by the rules of the license.

Many of the laws used to govern msop are the same laws used to govern hospitals in Minnesota. However, Clinical Director of msop, Jannine Herbert, gave testimony of March 5, 2015 before The Honorable Donovan Frank, and explained that the msop has not been a hospital since at least 2008. In fact, according to Mrs. Herbert, msop is a “treatment program” that deals with folks who are “not sick.” In addition, one of the variances states, “The vast majority of patients committed to the Minnesota Sex Offender Program do not experience symptoms of mental illness that requires psychiatric treatment...” This is a problem because one cannot receive medical care and attention at a facility that does not provide medical services. More importantly, the law requires that in order to lock someone up in a mental institution, they need to have a mental illness.

On December 11, 2019 Ms. Johnston, Executive Director of msop, held a forum for detainees to ask her questions. She told detainees at msop that she had requested funding from the Minnesota legislature to expand the msop program. She was then asked by a detainee if she would be willing to get a psychiatrist to evaluate the entire msop population, potentially finding hundreds of detainees ready for discharge. The client even referred to the statement made by Eric Janus, Professor of Law at the Mitchell Hamline School of Law, “...over 400 human beings are being held unconstitutionally...” Ms. Johnston said that it is “too expensive” and “out of [her] control” to authorize such evaluations. Another detainee then told her that if she were to ask the DHS commissioner to expire the variance, she likely would. The law would then require Ms. Johnston to hire a licensed psychiatrist to evaluate the msop detainees and the legislature would certainly fund the evaluations, especially if doing so is in the interest of the law. However, Nancy Johnston said that she did not know anything

about the variances, even though she gave testimony on March 2, 2015, before The Honorable Donovan W. Frank, about them, and she signed the paperwork.

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ocean is about speaking the Truth, and not afraid of being blunt about it! I've [Russell] listened to guys after the Dec. 11th R.R. show and I hear their desperation, their gullibility to want to believe Ms. Johnston and Mr. Halverson really are doing what they're doing to "help" men in here. All of it was a ploy to present more lies to the governor and legislature. It was like they were giving their presentation to someone else. It's probably the same presentation they've been giving to communities all over Minnesota. A tactic of "let us *convince* you of how "dangerous" these men are so you're afraid of them moving into your community.

At the same time let's try to *convince* you that msop needs legislature to fund 50 more beds for CPS so we can continue to hold them for however long we want to while still committing men who we're really not sure need to be committed to a pseudo-treatment program at the misperception fo providing "medical treatment".

[DW][RH]

"Once social change begins, it cannot be reversed. You cannot uneducate the person who has learned to read. You cannot humiliate the person who feels pride. You cannot oppress the people who are not afraid anymore."

Footnotes

1. DHS Website.
2. Minnesota Department of Health license.
3. Minn. Stat. § 245A.04 Sub. 9 *Variances*.
4. Minn. Stat. § 246B.04 RULES; EVALUATION.
5. Minn. Stat. § 253D.31 DISCHARGE.
6. Minn. Stat. § 253B.02 Subd. 13 (a). *Person who is mentally ill*.
7. Minn. Stat. § 253D.07 Subd. 3.

Debwe—Truth

By Ocean editor Russell J. Hatton

Current msop Director Nancy Johnston and Reintegration Specialist Scott Halverson paid a first time visit, [*1st of its kind in 25 years*] to its secure site in Moose Lake.

It took all I could to sit through that God awful “Reintegration Roadshow.”

I maintained an open mind and listened wholeheartedly to every word Nancy and Scott spoke. I could not help but sense that their words were meant for a different population as they tried to convince their audience that they are assuring the public that Minnesota’s “Worst of the Worst” are being suspiciously watched every second [*while on provisional discharge*].

To (indirectly) tell the population that it doesn't matter how many months, years, or decades we have spent in ‘their treatment,’ once our Provisional Discharge is finally granted—don’t worry, you’ll have just as long, or the rest of your life, to pretend that you can convince us you can be “trusted.”

I felt like standing and taking that microphone and turning to the crowd of men sitting behind me and saying:

I want to take the time to congratulate all of you who are working your ass off to get out of this horrible place and back to your loved ones.

I am proud of each and every one of you guys and I believe in you.

I believe it is not going to take several more years of “treatment” to get you to understand the harm our choices have caused and to exhibit genuine empathy for everyone affected.

I wanted to stand and say that, but I am not trying to be a martyr. Besides, I have been told I already have a target on my back for the advocacy that I do.

I guess, to be honest, I do have a fear—see I’ve been a political prisoner in msop going on 13 years. I’ve witnessed quite a lot. Most of all, I’ve witnessed how gullible men can be when told pretty, colorful lies. I have nothing but empathy for them.

Because of this gullibility, no collective non-violent resistance has ever been established, nor will it ever be, no matter the violation of human liberty, rights and dignity.

These men are broken, Ms. Johnston. You’ve taken our hearts, and souls and control almost everyone as if we are the walking dead.

Ms. Johnston, Mr. Halverson, every Minnesota Legislator, Governor Tim Walz, Minnesota Attorney General Keith Ellison... None of you ever have to worry about ever losing your Gravy Train — the msop.

Why?

Because almost every one of your political detainees *really* doesn’t want to leave msop.

Not really when you put such veiled threats of character defamation and societal-political vengeance upon us through unconstitutional and inhumane registry tactics to almost certainly assure failure.

As I said, I’ve been here going on 13 years. I’ve never witnessed more broken souls in my life...

Sadly to say, the vast majority are perfectly complacent with the Minnesota tax payers shelling out millions of dollars every year to pay for their stay.

The trauma is, those who are working to get out are victim to the majorities complacency—including myself.

Yeah, you’ll hear some saying they want to *get out too*, it’s a blatant lie because they just want to “fit in with the group.”

Honestly their afraid because they may not have known anything else besides institutionalization.

So, no worry’s Ms. Johnston, save your breath Mr. Halverson. Don’t fret Mr. Ellison, this population is aging and 9 released in 25 years, isn’t bad.

Not while your main focus is where you’re going to retire away to after you’ve profited off the alleged “mentally ill.” [RJH]

“A man should be able to hear, and to bear, the worst that could be said of him” ~ Saul Bellow