"Committed" to being heard

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A voice indefinitely
"Committed" to being heard
TELL ALL YOUR FRIENDS

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Any questions and/or comments leave them at:
Russell John Hatton | 218-351-1900 ext. 70887 &
Terry L. Branson @ 218-351-1900 Ext. 97666 and mail via
1111 Highway 73 Moose Lake, Minnesota 55767

Check out Committed to being heard on the following website:
http://www.cure-sort.org/mn---committed-to-being-heard.html

I haven't changed but I ain't the same. . .

By: Sixx|R

Hello everyone, it's getting tiring to continue to report on the abuses of being forcefully detained in an alleged treatment facility. The reasons to this sustained trauma? They are excruciatingly, painfully unlimited and one person reporting on the punishment suffered on a daily basis, could only ever be strengthened by another under the same dark mental and emotional anguish. But mostly, it's the time.

Being considered an 'individual' in an institutional setting mounts to reinforced selfishness. Originally, it may have been an engrained sense of "selfishness" emerged from a form of survival and self-protection. But the M$OP has exploited it for the masses who have giving in to institutionalization and conditioned to survive on acts of self-preservation. The concept of "crabs in a bucket" rings true here.

The reality is, nothings gained, and so, so much more is lost. The culture of abuse reinforcing 'status degradation' is only ever compounded, from staff, peers, administration and the larger institutional "community." The realizations are, there is not much to lose when someone with the perception of there is nothing at all to lose, including self-respect, dignity and integrity.

I'd been asked, how have I not lost heart after all these years, with a population that only sustains such a negative outlook, on the past, present and future. In fact, the very concept of a future is lost on most. They've chosen to develop and nurture their most immediate gratification's, food and entertainment, to suppress all reality.

In this, I truly feel a great sense of sorrow, and I'd worked to instill hope.

Trauma . . . we suffer trauma everyday that we are forced to lock into a prison cell. This sustained trauma is compounded when we are restricted from communicating with my family, and treated like criminals every-single-day.

The concept of developing trust has long been out these M$OP gulag walls. On top of being directed to give up our personal identities, and if not, we will surely die here. We are directed to put 100% trust and faith and belief and thoughts and feel-

(Reintegration continued on page 3)

"We have killed each other with our ignorance, our prejudice, and our silence."
Mary Fisher

"Committed" to being heard

MISSION STATEMENT

This newsletter has the full intent and purpose of presenting a continuous uncensored, thought provoking informative service within the space it resides in. Its functions are to spread a message which offers a better understanding of what transpires within the Minnesota Sex Offender Program ("M$OP"). We believe every individual ultimately possess a natural ability to overcome every negative force which impacts their daily life. Through understanding and obedience of Universal Law we are afforded a more informed "freedom of choice". Freedom of choice allows each of us to encircle ourselves with those who share the same interests and values. Freedom of choice is making decisions for yourself; decisions which does not inflict harm upon another human being.

Disclaimer:

Statements, viewpoints and opinions expressed in articles, letters to the editor, or from other writers, are those of that individual author; and **do not** reflect the position/opinion of this newsletter. All submissions become the property of "Committed" to being heard and may be eligible for reprint without that authors consent.

Guidelines: This newsletter will attempt to perform research, conduct interviews and gather information in an effort to create content that will inform and educate its readers about activities, events of interest which transpire throughout the M$OP's detention facility. We possess the right to not publish any submitted materials. As editor(s), We may edit any submitted materials to bring the material into conformance with acceptable journalistic standards to the best of our knowledge, ability, and/or available space. This newsletter reserve the right to publish employees name based upon their relevant involvement to the circumstances pertaining to identified articles. All articles submitted for publication must include the authors first and last name. The editor(s) reserve the right to submit questions for reader's views and comments on any subject matter published within these pages.

Minnesota Constitution
ARTICLE I—BILL OF RIGHTS

Sec. 3. **Liberty of the press.** The liberty of the press shall forever remain inviolate, and all persons may freely speak, write and publish their sentiments on all subjects, being responsible for the abuse of such right.

Thought for the Month

An individual finds himself in an evil environment to which he is committed by external forces. But he has an inner relationship with a superior man, and through this he attains the stability to free himself from the way of the inferior people around him. This brings him into opposition to them of course, but that is not wrong.

Splitting Apart pg. 95 of the "Book of Changes" by Wilhelm/Baynes

There is one rule, above all others, for being a man. Whatever comes, face it on your feet. Robert Jordan.

Commentaries
By: Terry Branson

- *Trump says that he's not going to continue providing federal funding for programs that support transgender. He's identified that this the individual states can utilize their own taxation to support such groups. Hopefully he'll stop providing federal funding which supports civil commitment programs and place the entire financial burden back onto each individual state. It is my hope that someone who reads CTBH will contact Elon Musk and make this suggestion to him.*
- *According to what I've read by various district court decisions I have the same rights (if not more) than those convicted of criminal sentences. Yet according to submissions by the attorney generals office or the county attorney's office, my rights are limited to the point where I can't self-represent myself. Even the Anoka county district court continues appointing counsel to me when I file a motion pro-se. I've only been adjudged mentally ill when it comes to sexual matters, not mental health matters.*
- *I'm being detained without a right to treatment which would provide me a clear path to improving my mental health and allow me to achieve release. Permanent detention.*

(I haven't changed continued from page 1)

ings into those who have 100 percent control if we will—literally live or die in the M$OP. There are those of us who are not ignorant of this fact, and we are working everyday to stop this historic punishment, along with our strong community networks.

I titled this article "I haven't changed but I ain't the same. . ." As a child, I grew up with the attitude of a defender, a protector. It was a role I was placed into, just as it feels it is a role I have been and continue to be pushed into. It is in my *Inde'* - my heart. To stand up and speak up for those who have no defender, no protector.

But it can be exhausting and emotionally draining when there are times you're one of the only few standing up, and one of the only few speaking out. It's even worse, when those you are attempting to defend, help and protect, turn to vipers and spit poisonous gossip, weak character assassination attempts. Reverting back to the self-preservation way of thinking. Compassion fatigue is mounting.

I express my gratitude to all those who have been there, are still there, encouraging to "*love my life*" and to be proud of the resiliency and strength and to continue to pay it forward. Still, I want to accomplish more, to help more and leave a legacy my children will be proud of. I want to be out there doing real work with people who really care. I want to leave this world a little better than it was when I arrived.

All in all, I am the healthiest version of who I am. And there are many more in the M$OP who are the healthiest versions of who they are too. We are worthy of a second change.

Just thought you should know.

Have you finished reading your copy of "Committed" to being heard?
Why don't you give it to someone you know; let them read it; and keep sharing it. Leave it behind at the laundry mat, grocery store, bulletin board, or courthouse. Why not mail it to a friend. If you are interested in getting your own copy you can leave me a voice message at 218-351-1900 ext. 97666 or you can write me at the address listed on the front page. Your support is greatly appreciated.

State of Minnesota In the County of Ramsey

Case File No. 62-CV-23-5915

Thompson, Greene, Padron and Wilson,
vs.
Harpstead, Johnston, Herbert, Governor Tim Walz and Keith Ellison

Count 2 of the Amended Complaint, liberally reads,, relies on a different set of operative facts not raised in Karsjens. Count 2 alleges Plaintiffs are not progressing through the MSOP because treatment plans are not individualized to people of their racial backgrounds, because staff are not qualified to treat sex offenders who are minorities and of different cultural backgrounds and beliefs, and because the actuarial tools the MSOP uses to determine progress and to assess risk are, themselves, racially discriminatory. Amended Complaint ¶53, 87. Count 2 alleges the racially discriminatory practices violate the equal protection rights found in Article 1, Section 2, of the Minnesota Constitution, and of the Equal Protection Clause of the Fourteenth Amendment of the United States Constitution based on racial disparities in the entire civil commitment scheme. Factually, the absolute quality of treatment does not underly Count 2. Rather Count 2 alleges that members of minority groups (of which Plaintiffs allege they belong) progress through and are discharged from MSOP at a lesser rate than similarly situated non-minorities because of the insufficient care they receive. More bluntly, although the Eighth Circuit suggests the Due Process and Equal Protection clauses do not require "appropriate or effective or reasonable treatment," *Karsjens I*, 845 F.2d at 410, Count 2 does not turn on the appropriateness, effectiveness, or reasonableness of Plaintiff's treatment. Count 2 turns instead on a comparison of the treatment offered to Plaintiffs (and other members of the minority groups to which they belong) relative to the treatment available to non-minority group members. Thus, although, for example, *Karsjens I* suggests no person committed to the MSOP has a constitutional or statutory right to group or individual sex offender therapy or treatment that is appropriate, effective or reasonable, the Minnesota and Federal Constitutions' Equal Protection clauses might, prohibit MSOP from offering group and individual sex offender therapy only to non-minorities committed to MSOP, while denying the same to minorities. That is, although the constitutions do not require a certain standard of treatment, they do not allow lesser quality of treatment for members of a protected class.

At this early stage of litigation, the Court offers no opinion whatsoever as to the merits of Count 2. The Court simply finds Count 2 is not precluded by the doctrine

(Count 2 continued on page 5)

(Count 2 continued from page 4)

of res judicata because it arises out of operative facts that are distinct from those asserted in *Karsjens* and that the claim is sufficiently pled to survive a motion to dismiss.

CONCLUSION

Count 2 of the Amended Complaint is based upon different operative facts than those presented in *Karsjens* or *Greene*. Count 2 is not barred by the doctrine of res judicata. Count 2 sufficiently states a claim upon which relief may be granted. Count 2 may proceed. Defendants' motion to dismiss count 2 is denied.

Editor's Note:

It is common knowledge that there are certain attorney's out there who want to put an end to civil commitment. These guys need your help! Are you an attorney who would be interested in representing some pro-se litigants? As you can see this is a winnable case. It's already survived the motion to dismiss and is ready to move forward. All it needs is an attorney who can see the true potential after winning this case in state court.

I know Guy Greene personally and he is a pretty damn good pro-se litigant and he is pretty quick when it comes to legal ideas. He's got a pretty good head on his shoulders and he's pretty easy to talk too. Should you be interested in representing these guys in district court you can contact Guy at 218-351-1900 ext. 63602. Please take note that this voice message allows only a fifteen second message. I'm sure that he'll be happy to bring you up to date on what progress has transpired with their complaint. I know he'll be very appreciative if you contact him and discuss your thoughts about the complaint and how to proceed.

I'd recommend that you also take the time to read the complaint for a better understanding surrounding Guy's comprehension of the law.

I'm going to suggest that you not only think about the present phase of this case, but that you also think about what comes after a major win for you and/or your law firm. Because in reality this is a case where (in my opinion) the court has already laid out the direction that the case should head for a successful conclusion.

They also have an e-mail address that you may contact should you have an interest in wanting to have Guy contact you.

The e-mail address is: titus.nonprofit@gmail.com

Continuous Confusion

By: Terry Branson

I talk about it all the time. When I first got here they use to deliver the mail to each room and drop the mail into a locked mailbox that was on the wall outside each room. Due to the fact that the night staff couldn't deliver the mail to the appropriate room, they stopped delivering mail onto the units. They even went so far as to take out all the mail boxes that were on the walls.

Then they started delivering the mail in what they identified as the mail room. This has gone on for at least a couple of years now and there has always been long lines of patients waiting to pick up their mail. The two mail room staff have actually been pretty good at knowing who everyone is and ensuring that the line moves as steady as possible. In fact a person typically only stands in line for approx. 5 minutes to get their mail.

Now on Feb. 4, 2025 Sara Kulas, Group Supervisor Special Services has distributed the following Memo involving Mail Distribution for Complex Units. It states the following justification for implementing these changes:

This memo serves to inform you of an upcoming change to the distribution of mail for the complex units. Effective Tuesday, February 18, 2025 mail will be distributed at the Special Services Distribution Area. The distribution times will remain consistent with the current posted schedule.

This relocation aims to enhance the flow of client movement and improve the overall efficiency of services. Please note that clients will only be able to access their mail during the designated mail distribution times. Outside of these times, the mail banks will be secured and unavailable.

Additionally, this change will allow us to handle required signatures for money orders and personal checks during the scheduled mail times, eliminating the need for clients to wait until property times.

We appreciate your understanding and cooperation during this transition and believe it will result in a smoother process for everyone involved.

There was never a problem with the mail system for years when distributing the mail at the current mail room. Granted the lines have always been long during mail pickup; just as they are whenever they release everyone for what they call the dining hall. But the flow of traffic continuously moves without disruption.

What these changes amount too is someone getting a hair up their ass and wanting to make a changes that disrupt the normal everyday operations that have been ongoing for years.

(Confusion continued on page 7)

(Confusion continued from page 6)

At one point when a person received a check or money order from the outside, it remained in the envelope and was delivered with their regular mail. Now all at once they take the check or money order out of the envelope and issue a notice of secured receipt identifying it as contraband. They (MSOP Employees) fail to identify why they feel a need to make these drastic changes?

What I notice is that when they crack the doors open for chow, mail call, property or other events that require mass movement - patients are on a mad dash (much like when the doors open for black Friday) to be the first to be in line. This is how badly MSOP employees have conditioned/institutionalized those they continue detaining under the civil commitment law. Patients are programmed to rush when scheduled movement occurs as they need to experience that immediate gratification of getting whatever service they are being provided in that moment.

At what point in time are those who are continuously making changes (probably out of complete boredom from performing the same boring job over and over) going to start making changes that will actually start releasing patients back into society?

In their effort to create less work for themselves, they actually end up creating more work for others. I often think of how this relates to the placement of furniture. No one is happy with the placement of the furniture and it is constantly being moved from one part of the room to another. Even when a decision is finally made as to where to put the piece of furniture, someone comes over to visit and suggests that that piece of furniture would look much better somewhere else in the room.

One thing is for sure! As long as those currently in charge are in charge there will always be some form of changes going on. Change causes chaos and most of MSOP employees love causing some form of chaos. In some instances they thrive on it.

And, it is also well known that they are consistently short of staff in all areas. They got staff working out of class; staff being forced to work mandatory overtime; staff calling in sick; staff quitting; staff being walked out and all sorts of other deficiencies when it comes to having a sufficient number of staff.

I keep asking how much longer is it going to be before the staff at MSOP start doing some serious complaining about having to perform duties that aren't actually necessary. They are unhappy with those who are supervising them and forcing them to perform more made up work on a daily basis.

MSOP's CORE Groups

By: Terry Branson

My primary therapist is still not back from whatever happened to her. But MSOP's executive clinical director Rebecca Skur cannot say anything about the status of Kayla. Instead what she states is "we don't know what her status is at this time".

Now it's been at least two months since my primary therapist has been seen anywhere within this facility. And, what I'm constantly being told is - her belongings are still on her desk - and we aren't being told anything about her status. I once again call bullshit!

Here is what I've recently heard. Another client got a Behavioral Expectation Report ("BER") for attempting to contact Kayla. I do not know what the disposition from the BER was upon a hearing being conducted

Staff are unwilling to say anything positive or negative about Kayla. I've never witnessed such suppression involving the topic of why a particular staff is no longer showing up for work. When it comes to the topic of Kayla staff responses are pretty consistent "I don't know what's going on with Kayla, her stuff is still on her desk".

Now there is another issue that coincides with Kayla not showing up for work. Other therapist are starting to cancel Core groups on a regular basis. They simply don't have a sufficient number of clinicians to handle the number of patients civilly committed here at MSOP-ML. Today February 6th they cancelled both Core groups due to lack of coverage by available therapists.

And, this isn't the first time that Core groups have been cancelled this quarter based upon therapists availability.

Is the lack of therapist availability due to the upcoming transitioning from DHS to Direct Care and Treatment? I've heard a rather large number of staff commenting on their personal unsuredness of how negatively impacting this transition will effect them. Some comments involve qualifications when it comes to meeting DCT's requirements when providing therapeutic services to the patient population.

It is my hope that DCT will relieve several of the clinicians currently employed here at MSOP-ML from their positions. Many of them lack any true clinical skill when it comes to providing therapeutic services to those detained here at MSOP. Of course this is only my personal opinion!

Ms. Skur even suggested that they replace Kayla with a different clinician. What is she eluding too - that Kayla isn't coming back? I think I'll go without a primary therapist until they hire someone else who has the same or better qualifications as Kayla.