

## **SAND RIDGE SECURE TREATMENT CENTER: Just Another Name For Prison**

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Any concerned citizen with knowledge of the Wisconsin Dept. of Corrections will quickly recognize that the inmate number above cannot correspond correctly and must relate to some other form of incarceration.

Actually, it is a "patient" number, such as might be utilized at Mendota MHI or Winnebago MHI. For me, the #100 is meaningless (it was #900 at WRC) so the #329 represents the fact that I was the 329th person admitted here at SRSTC, which opened in 2001. By 2005, when I arrived, I was the 329th person to have been committed. Today, the facility has been expanded from the original 300 beds to a total of 517, of which 350 are occupied. In the hotel business, that would represent a 67% occupancy rate, not profitable nor foresighted. Even worse, the overhead (cost per patient) is \$385 per day, so you can assume it must be a pretty lavish "operation" that would have to charge \$450 per day to make a profit.

Profit, however, is not the goal and the money is a drain on Wisconsin taxpayers to the tune of approximately \$49,183,750 per year, according to my cheap little calculator. These 350 prisoners are not included in the D.O.C. budget as Sand Ridge is operated under the Department of Health Services mantle. The department used to be called DHFS but the word "family" was deleted so as not to admit that this present boondoggle was a detraction from the amount available to children and family services. It was built in 2000 at an original investment of \$40 million. The amount for the addition of 200 beds built in 2009 is not available to this author at this point. I do know that there have been continuous problems with the HVAC system which don't seem to be correctable. The facility operates (and was set up) under the D.O.C. mode in regards to "security;" hence the name listed *before* the name "treatment" in its title. It is the only such facility of the twenty states which have adopted "civil commitment" (after incarceration) with an electricized perimeter fence with a 24 hr. auto patrol. There are no weekend passes or outside employment such as the axe murderers, etc at MMHI receive. We can wear our own personal clothes but that is just an excuse for them not providing any.

Treatment has to be included in the mantra because of a U.S. Supreme Court decision **Kansas v. Hendricks** in 1994 which upheld the Kansas law by a narrow 5-4 margin. The law has withstood numerous challenges over the past 20 years and was recently adopted by the Feds after the Adam Walsh Act hysteria. Thirty states supervise their released sex offenders in the traditional way: intensive supervision and parole at approximately \$10-15,000 per year as opposed to the costly option outlined above which the Wisconsin legislature has adopted. It was upheld in our Supreme Court on a 6-1 vote with a courageous dissent by Chief Justice Abrahamson in **State v. Post, etc.** 541 N.W. 115.

Did you note "sex offenders" in the previous paragraph? The scheme, codified as a civil statute in **Ch. 980**, pertains only to soon-to-be-released such offenders who have *completed* their prison sentences and are designated as "sexually violent," conforming to the worst stereotype about such offenders. In reality, they may be your friends and neighbors or relatives. Those who have engaged youth in premature sexual activities may be the focus. Incest and rape may be more problematic. In a 2006 research project, submitted to Sen. Alberta Darling, the original sponsor of the bill, sex offenders were revealed to be less of a threat to reoffend than ubiquitous drug offenders, armed robbers, or drunk drivers. Older men are even less of a threat according to the actuarials which have been developed similar to an insurance model. "Romeo & Juliet" offenders may be far less dangerous.

Is there any truth to the theorem that "therapy" is the answer or cure to sexual offending? This may be an easy option for judges and legislators elected by the public but there is no real proof of such and the cost compared to incarceration is massive. If sexual offending is seen as the greatest public threat, then the only equitable (and constitutional) way of dealing with offenders is by sentence to long prison terms, exactly the opposite of the trend supported by many forward thinking citizens of Wisconsin. The high rate of incarceration in this state and the nation is killing our prospects for a just and healthy society. This present system here is akin to a return to Salem in the days of morbid hysteria.