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February 8, 2015

TO: BETWEEN THE BARS Readers  
FROM: Timothy J. Muise, Steering Committee Director

RE: CURE-ARM Winter 2015 Newsletter

Dear Readers:

What follows is the Winter 2015 issue of the CURE-ARM Newsletter. We all hope that you find it infromative and enjoyable.

CURE-ARM is still seeking someone to facilitate our facebook, website, and email acount. Please contact us directly if this is something you feel you can assist with. We truly hope to make a difference this coming year.

Thank you for your time and anticipated continuing support.

Very Sincerely Yours,

Timothy J. Muise  
Steering Committee Director  
CURE-ARM, Inc.

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**CURE-ARM** (Citizens United for the Rehabilitation of Errants with Adherence to the Rehabilitation Mandate)  
is a special interest group which is dedicated to the reduction of crime through the reform of the  
Massachusetts criminal justice system and holding the Department of Correction  
to their legal mandate to rehabilitate

As always, thanks  
for your  
willingness to  
help out

Barbara Dougan, Esq.  
MA Dir. FAMM

# CURE-ARM



Citizens United for the Rehabilitation of Errants—  
Adherence to the Rehabilitative Mandate

Volume 2, Issue 1

Winter 2015

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## THE JUXTAPOSITION

by: Shawn Fisher

On a recent trip to the Lemuel LSH Hospital (LSH) I didn't know what to expect. Much like high school, the experience differs from person to person. It seems every prisoner has had an opinion of LSH ranging from inept and dirty to great but very deco. For me it definitely screamed of 50's deco, yet it was the medical staff who amazed me most. The nurses were patient and caring; the doctors were conscientious and professional; the medical student(s) who checked in periodically, no doubt have made their parents beam with pride. Unfortunately, the accolades end there.

The Correctional Officers stood in stark contrast from everything else at LSH. First, let me preface the fact that my

dealings were limited to a select few. So, I don't want to suggest that all the guards who work at LSH fall under this blanket scrutiny, but the guards I encountered on the 11pm - 7am shift were some of the most ignorant, disrespectful human beings I've met in my life.

The Department of Corrections (D.O.C.) has a secure hospital wing at the LSH that houses sick and dying men who are in need of constant medical attention. At any given time 2 to 6 guards would sit and congregate in the hallway outside my ward and carry on in conversation as if having lunch at Legal Seafood. Most of the time they were talking over each other and laughing aloud. Slowly, 11pm turned into 1am and the noise never faltered.

They talked of the administration not supporting them and how the State Police have ridiculous questions on their exams. Some spoke of Taylor Swift's legs and imagined them wrapped around them while others spoke of vacation time.

Finally I had enough and decided to say something. I got out of bed, reached for my IV drip and plodded out to the hallway. As I scanned the hallway I saw upwards of 11 guards at both ends of the hallway carrying on in conversations with laughter. I quickly realized the point saying something was mute. And decided to bite my tongue and stick it out.

The night became a test of my will versus their jaw muscles as I am (con't on pg 2)

## "LIKE US" ON FACEBOOK

<http://www.facebook.com/curearminc>

In our efforts to obtain small grant money to help operations it is important to demonstrate an interest in the work of CURE-ARM. Hits on Facebook is one way for us to do this.

## IN THE LAST TWO YEARS SINCE MILLER V. ALABAMA

Since the landmark decision concerning juveniles being sentenced to life without parole, six states have legislated the elimination of such laws: Delaware, Hawaii, Massachusetts, Texas, Wyoming and West Virginia.

Further, in Massachusetts the D.O.C. has changed its classification system that will now allow 1st and 2nd degree juvenile lifers to step down to minimum security incarceration and no longer be subject to the nondiscretionary override for loss of life crimes

to not be able to go to minimum security facilities. Despite the Acts of 2014 dictating these changes to classification, class boards have still generally denied juvenile lifers whose point base score justifies a minimum security setting to get the move. It is hard to change the thinking culture of the D.O.C.

In 2014 the National Association of Counties and the American Correctional Association also condemned juvenile life without parole sentencing. Pope Francis went a step further, denouncing all life imprisonment sentencing. Nearly all developed nations have never had sentencing of life without parole. †

Six states have  
abolished Juvenile  
Life Without  
Parole Sentencing

# THE JUXTAPOSITION

(continued from page 1)

turned into 4am. The point is, what reasonably competent person needs to be told "keep the noise down" so sick and dying patients can rest? Shouldn't it be inherently obvious? One could possibly chalk it up to an anomaly except that later that morning a social worker expressed her frustration to me on this very thing. Apparently this happens regularly and she has complained about it to deputies and shift commanders to no avail. "It shouldn't happen," she said, "at the end of the day this is still a hospital."

Unfortunately, she is fighting a losing battle. The D.O.C. and the guards'

union have removed us (the prisoners) from the moral realm so that treating us as less-than human is acceptable. As far as they are concerned, working the night shift is boring and if they were not allowed to converse they would fall asleep. So if a prisoner cannot sleep – too bad – don't come to prison.

It's an unfortunate reality every prisoner must face regardless of the circumstances. But in this particular case, who a person is should not be define how they are treated – especially in the confines of a hospital. The mere fact this article had to be written speaks volumes of the character of those

guards and the D.O.C.'s lack of ethical standards and conduct expected of them.

Maybe the D.O.C. can ask the medical staff at LSH to help heal them of their own moral dilemma. The heroes and heroines who cared for me treated me with the same care as they would for someone not in prison. It made no difference that I was chained to a bed. To them, their own morality guided their actions; creating a culture of healing rather than a moral compromise. In the end, isn't that what a hospital should be? †

## ALTERNATIVE CUSTODY FOR THE INCARCERATED ELDERLY

A nationwide effort

by: Ken Seguin

Kudos to Jane Dorotik who is fighting for the aged and infirmed women held in the California state prison system. Like Massachusetts, 20% of the CA prison population is made up of lifers. In CA, that is more than 32,000 prisoners! Of those who have a parole date, approximately 20,000 are past their initial parole eligibility date. A lifer's chance of being paroled in CA (18%) is currently better than in MA (10%??). However, unlike MA where the lifer parole rate has declined from 32% in 2010 to 10% under the Vall regime, in CA the parole rate has climbed to 18% from approximately 6% in 2010.

After reading an article by Tim Muise on Compassionate Release published in the Abolitionist, Jan Dorotik sent CURE-ARM an excellent write up and Pro Forma proposal for alternate custody for the aged and severely infirmed prisoners in CA. She cited a study that showed the cost of incarcerating a sick, elderly woman prisoner averages \$138,000 per year despite the extremely low possibility for recidivism. Further, the age range for geriatrics varies from 45 to 65 in CA where there is empirical evidence of dramatically lower recidi-

vism with advanced age. The point being that public safety issues are extremely minimized should an older, geriatric be released from prison. Yet with these facts, just 16 states have a geriatric/compassionate release and neither CA or MA are included in that number despite legislators having been informed.

The problem is that today's legislators are more concerned with emotional responses than they are with sound legislation. In a Justice Policy Institute report on the aged in prison they concluded by saying:

"As the prison population ages, government agencies should consider releasing more older people on parole because as people age they are less likely to engage in illegal behavior. People over the age of 45 are significantly less likely to participate in illegal activity and have lower re-arrest rates than younger people... Decision makers and legislators should use this statistical risk information to reduce the number of older people behind bars.

Instituting and making use of opportunities for geriatric release would yield significant savings without imposing an increased

threat to public safety.

Our states are slashing social services and not investing more in education while all the time allowing the prison jobs program run by guard unions keep the prisons full. Some states have woken up and are making progressive sound decisions. For instance, New York has cut their prison population by 25% in four years with no negative public safety result.

Public apathy toward medical release of prisoners combined with twisted "tough on crime" rhetoric still seems to rule the day.

So what can we do about it?

Here in Massachusetts there will, again in 2015, be a bill proposed for early release on parole for serious medical reasons. When that happens we will communicate this and registered voters need to call their legislators to prod them to get real with this issue and allow for the sick and dying in prison to have a means to be released. It is the right thing to do.

And may our west coast allies also succeed in this endeavor in this new year. †



# The Wartime General

by: Timothy Muise

In our last newsletter I wrote an article "Speak To us Before You Speak For Us" concerning the state funded "Prisoner Legal Services"(PLS) organization that has taken upon itself to represent the prisoner without spending time talking to the prisoner. The leadership from another Massachusetts prisoner group in Norfolk wrote voicing their concern as to why I would castigate PLS and its long-time director Leslie Walker. What the good folks in Norfolk don't know is just how abandoned their dying friends here at MCI Shirley's medical unit are and just how MISSING PLS and Ms. Walker are in that fight (of which CURE-ARM is the tip of the spear!).

Prison Legal Services is the only state-funded organization charged with legally assuring proper treatment of incarcerated

don't like smashmouth tactics? Tough. The one thing I took offense to in their letter was saying I did not talk to any prisoners. If, by that, it was meant I did not talk to the Norfolk Lifers Group, that was by design. I knew their answer would be; let's sing Kumbayah. Not happening! I took offense because I speak with more prisoners not only at Shirley but across the country than anyone else in the system. So shame on you for your demagoguery. You guys write great reports, best in the system, but when we storm the Bastille we need a wartime general.

The CURE-ARM newsletter ain't some College Journal or Medical Reporter; this is a newsletter of warriors. PLS, with all their funding, has abandoned us. Kathleen Dennehy, who PLS asked to "speak for the prisoner" signed off on fake "suicide" reports when Commissioner of D.O.C.

When CURE-ARM contacted numerous agencies from border to border and coast to coast seeking help for the dying, isolated men in the prison system's hos-

pital and assisted daily living units here at Shirley they all referred us to Leslie Walker and her Ghost Ship PLS. You mentioned she was "hurt" by my article; do you think the men in HSU are hurt? You think the man with maggots in his adult diaper was hurt. I care not if Ms. Walker is hurt; I care about the hurting troops here.

The truth is that when you lifers end up here in this hospital (which you eventually will), it will be Tim Muise, not Ms. Walker or PLS who will fight for you. CURE-ARM will fight for you and try to rescue you when the bombs start falling; when nurses conversing with guards leave you in your shit filled diaper. You call Leslie Walker a "friend" but, when the sick and dying send a letter or call PLS, it results in, at best, a self-help guide on how to fight the system even though you can no longer hold a pen. Then you will find out who your real friends are: it will be CURE-ARM.



Dismantle PLS!!! Agitate, disrupt, revolt, FIGHT for victory. This is a war to change the long-time culture in corrections. And PLS has become part of that culture.

I am a "Wartime General" and this fight is indeed a war. I think my friends at Norfolk's Lifer Group forget that at times. As they age and try to "talk" the enemy into submission, I place my neck on the chopping block. I challenge the establishment in unorthodox ways whereas the great "thinkers" try to out think the enemy. How's that been working? You guys

## SSCHA-CHINGSS



by: Miguel Lozada Sr.

Willie Horton was the catalyst to more change in the Massachusetts prison system than most people care to admit. After the fiasco that cost Michael Dukakis a seat in the White House, the tax-payers were more than happy to fork over a little extra cash to ensure that the next willie Horton never saw the light of day, and the state wasted no time spending to its heart's content in the name of "justice." The problem is that



none of those extra tax dollars were reaching their intended destination. Sure, the money paid for more officers and higher pay checks for those brave souls who **walk the toughest beat in the state** (at least according to the union's website), but did little to ensure the average convict soon-to-be-released has the needed tools and skills to make a go of it with two strikes already against him, giving him

a fair shot at NOT being the next illie Horton, the next Danny Tavaris, the next Domiic Cinelli, the next... you get the picture.

The black eye is in the logic behind the response to Horton's actions in the emotional, political pressure-packed response to Cinelli's own misdeeds, in the lack of action to equip Tavaris with enough self worth to steer him towards an honest paycheck and away from the young couple in Washington state whom he brutally murdered after his release on a "wrapped-up" twenty year sentence straight from maximum security, with no gradual "step down" process available to him and no post-release supervision even offered. Post release supervision that would have released him earlier but ensured some accountability on his part in a supervised release. While the responses charged the "patriotism" of the state's law-abiding citizens and inspired them to empty

their wallets and fork over another hike in tax rates in the name of "justice" (i.e. to pad the already comfortable coffers of the aforementioned "brave souls"), nothing was actually accomplished.

Hey Massachusetts, do you know where your tax dollars are **REALLY** ending up? Wouldn't you want to know? After all, it is your money. Here's an idea. Talk to your local representatives. Tell them you support the establish of an objective "Oversight Committee" to make their own judgments in your behalf, and oversight committee that the MDOC has been vehemently lobbying against since the idea was first proposed years ago (**HELLO!!! RED FLAG ALERT!!!**). If Cha-Ching is the only language we have a mutual understanding of, then let's talk cheddar. Come see how many "Brave Souls" are paid \$40 an hour to hold up a wall from 9 to 5— e need an oversight committee.



Send your comments/feedback to  
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- Donna Barnoski.....President
- Holly Barnoski .....Secretary
- Shawn Fisher .....Director
- Tim Muise.....Dir. Steering Com.
- Ken Seguin.....Outreach Cord.

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## LEGISLATION UPDATE

by: Timothy Muise

The new legislative sessions has begun and we are awaiting the formal bill numbers and resolution parchments to be supplied by our friends on Beacon Hill. CURE-ARM plans to publish a list of "Must Support" bills in our next newsletter which will include a "Plan for Action" and "Please Contact" Directory. Stay tuned, same bat channel...

One of the most pressing topics of course is the urgency for Compassionate Medical Release. Our dear friends, and true hero, State Representative Ben Swan has accepted a resolution draft from CURE-ARM on which we worked hand-in-hand with Bread & Water Prisoners, Inc., that details what we believe is the best legislation language on the topic. Representative Swan requested this draft after reading our views on the topic and personally discussing the issue with our members. We have also received word from Paul Tisdale at veterans for Peace that he personally spoke with Sen. Pat Jehlen about our work on the topic and that she has filed a new bill for the extraordinary medical release of prisoners and agrees with many of our solution concepts. The issue is gaining steam and we hope to continue to stoke the boilers here at CURE-ARM. You can trust that we will continue to be at the tip of the spear!

Rep Swan has also filed a powerful resolution to truly rehabilitate the counter-productive drug sentencing schemes here in the Commonwealth. He is working with our friend Barbara Dougan at FAMM to correct these sentencing failures from the last "tough on crime" Republican era here in the Bay State. Our prayers here at CURE-ARM are that new Gov. Charlie Baker has 20/20 hindsight and learns from past mistakes made by his party. We will have our eyes on coming developments from the Executive Chamber.

## CURE-ARM MISSION STATEMENT

The Commonwealth of Massachusetts has a very unique distinction in that General Laws of this state **MANDATE** that prisoners be rehabilitated as stated under the Powers and Duties of the commissioner of Corrections, M.G.L. 124 § 1(e):

*In addition to exercising the powers and performing the duties which are otherwise given him by law, the commissioner of corrections, shall: ...*

*(e) establish, maintain, and administer programs of rehabilitation, including but not limited to education, training and employment, of persons committed to the custody of the department, designed as far as practicably to prepare and assist each person to assume the responsibilities and exercise the rights of a citizen of the Commonwealth.*

It is apparent to our organization that the Department of Corrections has engaged in efforts to usurp the legal mandate to rehabilitate here in the Commonwealth of Massachusetts. The Massachusetts special interest group of CURE-ARM will work toward the melioration of that failure in accordance with justice and the enhancement of public safety.

### Our Platform Issues are:

- ◆ Re-establish a viable commutation system in Massachusetts
- ◆ Enacting a presumptive parole system focusing on managed successful reintegration to society as well as motivated and effective rehabilitation during incarceration
- ◆ Working toward the implementation of compassionate medical releases dovetailing into viable commutations and effective parole with more cost effective management of the D.O.C. medical budget.
- ◆ Effective use of the Massachusetts Department of Corrections medical budget which is the 2<sup>nd</sup> largest portion of their budget. Cost effective preventative care is the goal.
- ◆ Work toward realization of the mandated duty that the D.O.C. focus on care and custody that promotes successful reentry and goes beyond a predominant focus of security-only.

### WHEN LIBERAL PATERNALISM BECOMES COLLUSION WITH THE DOC

by: Susan Mortimore  
 Mass Prison Voice

Unfortunately many of the "improvements" touted by groups like the Disability Law Center and Prisoner Legal Services are just "continuity masquerading as change." DLC & PLS are cozy with the Commonwealth. DLC's Eicher goes back and forth between working for the Commonwealth and DLC! The DOC now gets more money and staff getting more "training" that does nothing to change the culture. For years PLS Director Walker has been pushing for maximum security 'mental health units' in all MA prisons. Sje ignores the reality that prisons manufacture disability & 'mental illness.' PLS has a history or marginalizing the voices of the prisoners & their loved ones. It appears that Walker had the power to black ball potential interviewees in the Globe's 2007 expose/series on MA prison suicides, and the Globe's Beth Healy did refuse to accept the only dissenting testimony at a State House hearing on Walker's proposed 'Residential Treatment Units' sponsored by Rep Ruth Balser. I was present at some of the meetings which Walker Naively called for "Residential Treatment Units" which have not stopped suicides but did increase the DOC budget, praise Sheriff Ashe of Hamden County (for sucking up state funds that should have gone to women and families in the community but instead went to shiny new steel cages in his jail), and supported Rep. Kay Kahn's call for new jails in every county for women.