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14 March 2024

ROSEN BIEN
GALVAN & GRUNFELD llp
Gail LaPurja
Sr. Paralegal
P.O. Box 390
San Francisco, CA 94104-0390

Re: Your File No. 0489-03
ADA/ELDER ABUSE

Dear Ms LaPurja:

Thank you for your letter of October 19, 2023, inquiring on my M/H concerns by impetus of PLO referral. I apologize for this late reply however I wanted to become static before my response.

Currently, I am CCCMS status, simpatico with my M/H handlers and relatively safe in my housing circumstances. This may appear "case closed" to your perspective however I am squarely under the sword of Damocles. In reality this is only part of a vicious cycle that is at the point of killing me; see enclosed essay BEHIND THE CURTAINS OF REHABILITATION.

During this latest cycle in December 22, I was hospitalized for a week with heart failure, in June/July 23 abused and harassed due to my M/H chronic PTSD symptoms and later due to my ADA physical disabilities; see enclosed essays PRIME PRISON PREY / ADA INTIMIDATION / PUBLIC OPINION / OPINION REPLY / WE SHOULD CARE BECAUSE .. / HQ DENIED 602.

At 80yrs old, with debilitating mental and medical health, navigating the stressors of intolerance, ageism, indifference, abuse and being bounced from prison to prison, while pleas of mercy are ignored, and/or mocked, is a recipe to an elderly prisoner's death.

Far too long, prison staff abuse prisoners with impunity and I believe the public needs to know. Consequently, I have begun posting these prison improprieties on the internet by evidence of the enclosed. As an old man facing state sponsored senicide, unlike my many elderly peers who have succumb to a state of Learned Helplessness, with what time I have left I subscribe to Poet: Dylan Thomas' "Do not go gentle into that good night." The plight of elderly and vulnerable prisoners within the confines of these lethal fences needs to be chronicled.

History has well proven transfers and abuses of the elderly to be dangerously contraindication to mental health and equally perilous to extensive medical comorbidities, Yet, custody is completely indifferent to the fragilities of us CASE IN POINT:

Ignoring a history of previous move consequences I was moved October 22, CHCF to MCSP to CMF (crisis bed) to SATF November 22, to Adventist Hospital, Bakersfield December 22 (1wk heart failure) back to SATF to be advised transfer will be recommended at Committee Nov. 23. This transfer plan was intervened by my PCP's sage sentience. However I remain in constant dread of their next assault.