

**NOTICE**

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**FILED**

November 8, 2016  
Carla Bender  
4<sup>th</sup> District Appellate  
Court, IL

2016 IL App (4th) 160270-U

NO. 4-16-0270

IN THE APPELLATE COURT  
OF ILLINOIS  
FOURTH DISTRICT

THE PEOPLE OF THE STATE OF ILLINOIS,	)	Appeal from
Plaintiff-Appellee,	)	Circuit Court of
v.	)	Sangamon County
CHARLES E. BRAMLETT,	)	No. 99CF1053
Defendant-Appellant.	)	
	)	Honorable
	)	Rudolph M. Braud, Jr.,
	)	Judge Presiding.

JUSTICE TURNER delivered the judgment of the court.  
Justices Harris and Steigmann concurred in the judgment.

**ORDER**

¶ 1 *Held:* The appellate court affirmed, stating the jury’s finding that defendant remained a sexually dangerous person was not against the manifest weight of the evidence.

¶ 2 In August 2000, the trial court found defendant, Charles E. Bramlett, to be a sexually dangerous person and ordered him committed to the Illinois Department of Corrections (DOC) for care and treatment. In May 2006, defendant filed a *pro se* petition for recovery. In January 2016, a jury found defendant remained a sexually dangerous person.

¶ 3 On appeal, defendant argues the State failed to prove by clear and convincing that he remains a sexually dangerous person. We affirm.

¶ 4 I. BACKGROUND

¶ 5 In October 1999, the State charged defendant with one count of aggravated criminal sexual abuse (720 ILCS 5/12-16(c)(1)(i) (West 1998)). In January 2000, the State filed

a petition to proceed under the Sexually Dangerous Persons Act (Act) (725 ILCS 205/0.01 to 12 (West 1998)). In July 2000, the State filed an amended petition, alleging defendant was a sexually dangerous person.

¶ 6 In August 2000, the trial court found defendant suffered from a mental disorder which had existed for more than one year immediately prior to the filing of the petition, and which was coupled with criminal propensities to the commission of sex offenses; and he had demonstrated propensities toward acts of sexual assault or acts of sexual molestation of children. The court found defendant to be a sexually dangerous person and ordered him committed to the custody of DOC for care and treatment. On appeal, this court affirmed the trial court's judgment. *People v. Bramlett*, 329 Ill. App. 3d 286, 767 N.E.2d 961 (2002).

¶ 7 In August 2002, defendant filed a *pro se* petition for relief from judgment under section 2-1401 of the Code of Civil Procedure (735 ILCS 5/2-1401 (West 2002)), seeking to set aside the trial court's August 2000 judgment. The court dismissed the petition *sua sponte* as frivolous and patently without merit. On appeal, this court affirmed the trial court's judgment. *People v. Bramlett*, 347 Ill. App. 3d 468, 806 N.E.2d 1251 (2004).

¶ 8 In May 2006, defendant filed a *pro se* application showing recovery pursuant to section 9 of the Act (725 ILCS 205/9 (West 2006)). Defendant stated he had been an active participant in a program for civilly committed persons, claimed he was not sexually dangerous, and indicated he was eligible for discharge. Defendant requested a hearing on the application.

¶ 9 The trial court appointed counsel for defendant. In July 2007 and May 2008, counsel filed motions for an independent examination. In September 2014, defendant requested a jury trial on his application.

¶ 10 In January 2016, defendant's jury trial commenced. Dr. Melissa Weldon-Padera,

a psychologist, testified as an expert in sex-offender evaluations. In her recovery evaluations, Dr. Weldon-Padera stated she reviews police reports, court records, previous evaluations, treatment notes, and medical files. She also interviews the applicant and his or her therapist.

¶ 11 Dr. Weldon-Padera testified she evaluated defendant in January 2015 and authored a report. She stated defendant declined to participate in an interview. She stated defendant's therapist indicated he regularly attended one therapy group but did not actively participate. His therapist also reported defendant made minimal progress in treatment.

¶ 12 Dr. Weldon-Padera testified defendant does not admit or accept responsibility for any of his sex offenses and "tends to blame others for his commitment." Defendant had received 17 disciplinary reports while in DOC. At the time of his original commitment, defendant had been diagnosed with pedophilia and probable pedophilia. Based on her review of the information and to a reasonable degree of psychological certainty, Dr. Weldon-Padera opined defendant suffers from pedophilic disorder, nonexclusive type, sexually attracted to females; narcissistic personality disorder; and other specified personality disorder with antisocial personality traits.

¶ 13 In performing a risk assessment on defendant, Dr. Weldon-Padera testified she utilized the actuarial approach known as the Static-99R, which has a scoring range between negative 3 to 12. Defendant received a score of two, which indicates he is a "low moderate" risk to reoffend. Dr. Weldon-Padera found this to be an inaccurate assessment because "it seems like it would be an underestimation of his risk, given the dynamic and case-specific risk factors that came up in the report as well." She stated defendant exhibits dynamic risk factors, including "sexual preoccupation, emotional congruence with children, lack of emotionally intimate relationship with an adult, lifestyle impulsivity, and grievance thinking and hostility." She also

stated defendant demonstrated case-specific factors, including “Machiavellianism,” which includes “a view of others as weak, cowardly, and selfish” and “an interpersonal strategy in which it is viewed as acceptable and appropriate to take advantage of others.”

¶ 14 Dr. Weldon-Padera stated defendant had not completed any sex-offender treatment. As stated, she opined defendant suffered from three mental disorders. She also opined defendant’s pedophilic disorder is coupled with the propensity to commit additional sex offenses and “it is substantially probable that he will commit additional sex offenses if not confined.” She stated there were no conditions or restrictions that the trial court could impose that would keep the community safe if defendant were released. She concluded her testimony by opining that defendant continues to be a sexually dangerous person in need of confinement.

¶ 15 On cross-examination, Dr. Weldon-Padera testified to two reports authored by Dr. Terry Killian in 2000. Dr. Killian did not diagnose defendant with pedophilia in February 2000 but did note probable pedophilia in July 2000. He also opined defendant did not meet the definition of a sexually dangerous person in his first report and could not state such an opinion with certainty in his second report.

¶ 16 On redirect examination, Dr. Weldon-Padera stated defendant had also been evaluated by Dr. Joseph Bohlen in 2000. Dr. Bohlen initially found defendant did not meet the criteria for a sexually dangerous person, but he later did meet the criteria after being diagnosed with pedophilia.

¶ 17 Following closing arguments, the jury found defendant remained a sexually dangerous person. In February 2016, defendant filed a posttrial motion, arguing the State’s evidence was insufficient to prove he remained a sexually dangerous person. In April 2016, the trial court denied the motion. This appeal followed.

¶ 18

## II. ANALYSIS

¶ 19 Defendant argues the State failed to prove by clear and convincing evidence that he remains a sexually dangerous person. We disagree.

¶ 20 After an individual is committed as a sexually dangerous person, he may file a written application setting forth facts showing he has recovered and is thus entitled to a discharge from commitment or a conditional release. See 725 ILCS 205/9(a) (West 2006); *People v. Craig*, 403 Ill. App. 3d 762, 766, 934 N.E.2d 657, 662 (2010). Either the sexually dangerous person or the State may elect to have the recovery hearing before a jury, and “[t]he State has the burden of proving by clear and convincing evidence that the applicant is still a sexually dangerous person.” 725 ILCS 205/9(b) (West 2006).

¶ 21 A person is sexually dangerous if (1) he suffers from a mental disorder for at least one year prior to the filing of the petition; (2) the mental disorder is associated with criminal propensities to the commission of sexual offenses; (3) he demonstrated that propensity toward acts of sexual assault or acts of sexual molestation of children; and (4) there is an explicit finding that it is substantially probable that he would engage in the commission of sex offenses in the future if not confined. 725 ILCS 205/1.01 (West 2006); *People v. Masterson*, 207 Ill. 2d 305, 330, 798 N.E.2d 735, 749 (2003).

¶ 22 On appeal, the determination as to whether defendant remains a sexually dangerous person will not be disturbed unless it is against the manifest weight of the evidence. *People v. Donath*, 2013 IL App (3d) 120251, ¶ 38, 986 N.E.2d 1222. “A decision is against the manifest weight of the evidence only if an opposite conclusion is clearly apparent.” *Donath*, 2013 IL App (3d) 120251, ¶ 38, 986 N.E.2d 1222.

¶ 23 In the case *sub judice*, the evidence indicated defendant suffered from a mental

disorder associated with criminal propensities to the commission of sex offenses and he had demonstrated those propensities. Dr. Weldon-Padera opined defendant had been diagnosed with pedophilic disorder and committed offenses against children. Defendant does not challenge these elements of the sexually dangerous person finding. Instead, he argues the State failed to show it is substantially probable he will engage in the commission of sex offenses in the future if not confined. Courts have found “the phrase ‘substantially probable’ means ‘much more likely than not.’ ” *In re Detention of Hayes*, 321 Ill. App. 3d 178, 188, 747 N.E.2d 444, 453 (2001). We find the State’s evidence was sufficient for the jury to conclude it is substantially probable that defendant will commit sex offenses in the future if not confined.

¶ 24 Dr. Weldon-Padera testified defendant had been confined since 2000 and was still in phase one of the four-stage treatment program. Defendant received unsatisfactory ratings in areas related to sex-offender treatment, including accepting responsibility, offense disclosure, assault cycle, cognitive distortions, court issues, deviant arousal, victim empathy, and relapse prevention. Defendant does not accept responsibility for his actions, blames other people, and “has never addressed his high-risk situations, his triggers, his progression to offending, much less any interventions to avoid reoffense.” Thus, the evidence indicated defendant had failed to make any progress in his treatment, and Dr. Weldon-Padera noted treatment is “the biggest predictive factor, because research has shown time and time again that it’s the only thing that can reduce [the] risk to reoffend.”

¶ 25 Dr. Weldon-Padera also testified defendant exhibited a number of dynamic risk factors that indicated a risk of reoffending. Those factors include sexual preoccupation, emotional congruence with children, lack of emotionally intimate relationships with an adult, lifestyle impulsivity, and grievance thinking and hostility. Dr. Weldon-Padera stated defendant

showed “an abnormally intense interest in sex,” instability in employment, low self-control, irresponsibility, and “a perception of having been done wrong by the world.” She stated prison staff members have described him as “angry, belligerent, cynical, defensive, hostile, resentful, and rude.”

¶ 26 Along with the dynamic risk factors, Dr. Weldon-Padera stated defendant exhibited case-specific factors, including Machiavellianism, which consists of “a view of others as weak, cowardly, and selfish” and an interpersonal strategy whereby “it is viewed as acceptable and appropriate to take advantage of others.” Defendant has demonstrated this by lying as well as conning and manipulating others.

¶ 27 Dr. Weldon-Padera opined it is substantially probable that defendant will commit additional sex offenses if not confined. In forming this opinion, she found defendant is “too high of a risk when you consider the dynamic and case-specific factors in addition to the actuarial and, of course, when you consider his insufficient treatment progress.”

¶ 28 Defendant points out Dr. Weldon-Padera performed the Static-99R risk assessment. Defendant’s score of two placed him in the low moderate risk category for reoffending. Dr. Weldon-Padera agreed that persons with the same score were charged with or convicted of another sexual offense at the rate of 12.2% over 5 years and 19.7% over 10 years. Defendant argues these rates show the State failed to meet its burden of showing a substantial probability that he would engage in the commission of sex offenses in the future. However, Dr. Weldon-Padera found the results “would be an underestimation of his risk, given the dynamic and case-specific factors.”

¶ 29 Here, the jury was not required to base its decision solely on the results of the Static-99R assessment. See *Hayes*, 321 Ill. App. 3d at 188, 747 N.E.2d at 453. “Instead the jury

must consider all factors that either increase or decrease the risk of reoffending and make a commonsense judgment as to whether a respondent falls within the class of individuals who present a danger to society sufficient to outweigh their interest in individual freedom.” *Hayes*, 321 Ill. App. 3d at 188, 747 N.E.2d at 453. The State’s expert concluded defendant continued to be a sexually dangerous person based in part on the dynamic and case-specific factors, the test results, and his insufficient progress in treatment. We find the jury’s conclusion that defendant remains a sexually dangerous person was not against the manifest weight of the evidence.

¶ 30

### III. CONCLUSION

¶ 31

For the reasons stated, we affirm the trial court’s judgment.

¶ 32

Affirmed.