

## **Going Forward with Gus**

**By Sterling Cunio**

Over a dying man stands another who has committed murder. The dying man speaks of his kids and of seeing angels. He talks in between bouts of choking on his own blood as the tumor in his throat hemorrhages. The other man nods silently. There will be no help for the dying man as the cancer consumes him. There will be no help for the other as he serves life without parole. Both will die in prison: One will be dead within days; the other when his sentence ends.

The two men cry and pray on the top floor infirmary of the Oregon State Penitentiary in Salem. Although situated in the middle of the state's capital city, the 2000 men who live, work, and die behind 30-foot walls are invisible. In a hall off the main ward, there are two rooms reserved for hospice, where men too weak to stand on their own or breathe without machines await death. Prisoners serving as hospice volunteers are their final earthly companions.

His name is Gus. He is a 63-year old father of 6 and grandfather of 13. He's been in prison for two years. He prides himself on the fact he worked his entire life and is leaving this world owing nobody. He is proud that his children are good parents. He played baseball for 30 years, worked as a chef, and drove long-haul trucks across America. When he wasn't working, he was fishing or playing in the park with the grandkids. He had strength then—he could walk, run, and play then. That was before a six-year battle with melanoma left him bedridden, weighing less than 100 pounds and struggling to breathe through an airway restricted by a throat tumor that was suffocating him.

I am the lifer standing over Gus in the final moments. Like him, I am expected to die in prison. Unlike him, I'll have spent most my life in prison, sentenced to de facto life without parole at the age of 16. The Center for Disease Control has established that life spans for prisoners are significantly shorter than the national average. Life expectancy for inmates is 50.1 years, according to the Oregon Department of Corrections Government Efficiencies and Communications Office. If my life conforms to the statistical norm, I will die here after having served 34.5 years for my responsibility in the murder of 2 people. I have, statistically, 13.6 more years to live.

When I was 12 years old, I was orphaned to the streets after my grandmother, the superwoman that raised me, died suddenly. After bouncing around the country to the homes of different relatives who either couldn't or didn't want to care for me and living like a runaway, I became involved in the culture of street crime. Seeking to enhance status and solidify inclusion among a group of peers fascinated with gangster archetypes and criminal lifestyles, I and another teenager kidnapped and shot a young couple. It happened right down the road from the prison where I now write this. In 1994, when I was 16 years old, I

shattered people's lives before I understood the value of life, and it has haunted me ever since.

Gus's cancer spread first by attaching itself to his jaw; the doctors had to cut out so much of the bone to remove it that what remained of his jaw broke and caused him to slur when he spoke. He managed to speak anyway, and whenever he talked to me about separation from family or facing death, he would advise, "Don't dwell on the negative—it only invites woe." It was an astonishingly positive message from a man dying in prison, but his words didn't begin to relieve the personal guilt I carry. Extinguishing life through violence is an irreparable act. My soul aches, and the only shaky solace I can seek is found in acts of service. There is no lasting relief. Guilt never allows those who accept responsibility for irreparable acts to move on. Yet, hope for spiritual redemption compels me to go forward in search of personal purpose through small acts of kindness. Fortunately, kindness is a choice and opportunities to practice it are abundant. Even in prison.

Because Oregon does not release the terminally ill, many die serving their sentences, separated from friends and family. For this reason, some prisons operate hospices within their walls. Oregon was one of the first, but now there are more than 75 in-prison hospices, 50 percent of which depend on prisoners as volunteers. I was one of the few people fortunate enough to be selected as a volunteer in the OSP hospice program developed in 1999 by prison administrators, medical staff, chaplains, and fellow convicts, and based on the idea that even those in prison should not die alone. Twenty volunteers selected from within the prison were trained for ninety hours by medical professionals and institutional counselors to provide support to others at the end of life. The prisoners are trained in concepts of death and dying; interpersonal communication; bereavement; understanding diseases and conditions; handling patients; hospice care; and comfort measures.

Death has been one of the primary forces to shape the course of my life, and loss—both incidental and intentional—has been a constant. When I began attending hospice meetings in 2014, I felt conflicted, reluctant, and fearful of bonding intimately with someone who would soon be gone. But all of that changed after I sat through my first vigil. When the medical staff determines that death is imminent, the patient is placed on a vigil and accompanied by volunteers around the clock. Ideally, those scheduled for vigil have already had a strong connection with the patient. However, a mistake by a new officer and a new nurse thrust me into the heart of hospice when they sent for me instead of a fully trained volunteer.

It was in late June of 2015 when two officers appeared at my cell door. "Cunio, get ready," one of them said. "Ready for what?" I asked, with rising dread. In the past, the sudden appearance of officers at my door in the middle of the night generally meant beatings while being dragged off to "the hole," where I spent much of my first decade of imprisonment. Those who stay there long term, as I did throughout most of my twenties, develop a "me against the world" attitude. In the absence of everything that nourishes the heart, the idea of attachment seems impossible and eventually, the heart stops caring in order to survive.

And so, on that June night, as I reminded myself that it had been nearly a decade since I'd been in any kind of trouble that might send me back to the hole, I got dressed and followed the officers to the infirmary to give someone else what I had craved for so long and been denied—human empathy.

The infirmary is an approximately 800-square foot ward with 20 beds arranged less than 3 feet apart. That night, almost every bed was occupied. The air is refrigerated. The infirmary is the only air-conditioned room in the prison for prisoners. The room smells of unwashed bodies, disinfectant-mopped floors, and human decay. I hear labored breathing, groans. There upon what I fear will be my future deathbed lay an older Hispanic man who spoke no English. He was writhing in pain. He was shivering. I piled blankets on him and prayed he was warm. Because I was unable to communicate in Spanish, I simply held his clammy hand while wondering about his story. Who was he? What course through life led him here? Did he have family? What were his lessons and final thoughts? I wondered if he had time to resolve his regrets and make amends for his wrongs. In the absence of words, I became more sensitive to the power of presence and consciously tapped into feelings of compassion, hoping the energy would resonate with the stranger as he occasionally reached to the sky and spoke in Spanish. I wanted to snatch him up in a hug close enough that my strength and vitality could hold him, at least through the night.

When morning came and another volunteer arrived for his shift, I left the room. But the man remained in my thoughts as I went through my daily routine. Later that day while training for a half marathon, it struck me as unconscionable to be so healthy and spend so little time taking care of the sick. I decided to use the strength I had to help the weak. The idea enriched my heart with a sense of purpose. Ironically, just a few hours before I had been called to sit vigil, I'd been lying in bed, heartbroken, devastated and without hope.

On May 12, 2015, Ninth Circuit District Court Judge Thomas T. Coffin had dismissed a civil suit seeking the possibility of release for Oregon inmates who can demonstrate rehabilitation, yet serve de facto life without parole sentences for crimes they committed as minors. This had been my best chance for a meaningful opportunity to prove myself worthy of release. I could no longer dream of planting community gardens, running the Hood to Coast relay race, raising puppies, working in the field of water conservation, and volunteering to mediate conflict. The judicial confirmation of an imprisoned death denies the greatest hope for a redemptive legacy and restoration with society.

Two weeks after the judge's ruling, an important friendship of years ended for unknown reasons. No explanation, no communication, no goodbye: just gone. Prison burdens the bonds of relationships in ways that make lasting love an impossible dream. But although a prisoner knows that most companions come and go, abandonment and loss can break even the seasoned captive's guarded heart. I laid down and wept. My light had dimmed and seemed to vanish. But one night of opening my heart to a dying stranger changed my perspective. The realization I could reasonably expect to live through the day with good health shifted my focus away from my own problems. Helping him helped me. The fears and doubts I'd had about participating in the hospice program disappeared.

I never saw the Hispanic man again, but shortly thereafter met Gus, who was told by the doctors in late August of 2015 that his cancer was incurable and that he had a month to live. He agreed to enter hospice in the beginning of September.

Two days later, another hospice volunteer and I went to the infirmary to meet him for the first time. As we entered the room, Gus quickly got up out of bed and shook our hands so firmly that I was shocked a terminally ill 63-year-old man could squeeze a hand so tightly. In the first minutes of conversation, I noticed that Gus's words were badly slurred; blood trickled out the corner of his mouth, and his breath was foul. The failed cancer treatment had left open sores inside his mouth, and the tumor in his throat made it difficult to swallow. Brushing his teeth was no longer an option. At first I was repulsed and automatically flinched in withdrawal. But then I realized this was a part of his struggle. I steeled my resolve and never backed away again.

Everyday I visited Gus for three hours, except on Fridays when I'd stay for six. It was painful for him to speak, but he realized that soon he would be unable to speak at all, and so he felt compelled to express his insights while talking about his life: a childhood filled with laughter; a father who was harsher on him than his younger siblings; work; vacations; outdoor adventures; how disconnected my generation is from the world around us; and how he believes so many people in prison are angry because they are actually hurting deep inside.

Although we talked about all sorts of things, Gus's favorite topic was the people in his life. "My kids are beautiful people," he often said, as he told countless stories about Ida, Sarah, Josh, Kyle, as well as his other kids and grandkids. Prisoners in hospice are allowed to have their families enter the prison for a special visit in the hospice room. Gus's three oldest were able to visit him, and he introduced me to them as the friend who wrote letters for him. Teary-eyed, his kids shook my hand while offering thanks. Now I had faces to place with the names in Gus's stories. I often forgot that because of his mental sharpness and the way he made his stories so vivid with exaggerated gestures, that he would soon be dead. Once he nearly fell from the bed while demonstrating a diving catch he'd made to keep his son Kyle from falling off a boat. He was dying, but he was full of life.

As Gus would speak about the love for his kids and the things he wished he had done better, I thought about what it would have been like to have a loving father—or any father. I do not know who my father is, nor did I have any constant, positive male role models growing up. After the death of my grandmother, who had raised me with love and good values; a grandpa who beat his woman; and uncles who sold weed, committed petty thief, and committed assaults became my idea of how men were supposed to act. At my grandmother's funeral, I remember walking away from the lowered coffin at age 12 and hearing my uncle tell my coach how proud he was of me for dealing with it like a "little man." He meant I didn't cry or show emotion. That was what being a man meant. The years I spent in Portland, Oregon, living with my uncles at age 13 and 14 and then, in the streets at 15 and 16 where I sought to impress aspiring thugs by stealing cars and selling drugs, followed by spending most of my twenties in the hole, had made me an expert in stifling my

feelings. To hear Gus reflect on how he could have been a better, more loving, father made me admire the fact that he was there for his kids at all.

One of Gus's greatest sources of joy was reuniting with and reestablishing friendships with Dale, his first wife, whom he loved his entire life. Gus had been married three times. His last wife was "crazy;" his second was a "good woman but we were too different." When he spoke of Dale, the mixture of joy and pain was obvious. Pressured by her family, she'd left him, but he never told me why. There must have been significant adversity for Dale to leave and take their kids. There were periods of their lives from which he was absent, yet in the man's final days he chose to speak of the good without mention of what split them. After she and the kids had gone, he "cried and cried" and then sought to drown the sorrow in alcohol. He admonished me sternly to never start drinking away sadness. I assured him that, even if it were available, I would not attempt to wash away woes with whiskey, but rather use them as the substance of poetic stanza. Gus lifted his eyebrow and gave a half-approving nod, satisfied that I swore off alcoholic solutions, but not enthused about the idea of poetry. As a rugged outdoorsman, truck driver, and athlete, he believed poetry "somewhat girly." However, he always wanted to hear the poems I wrote and listened intently as I read the works of Khalil Gibran, Rumi, Hafiz, Gwendolyn Brooks, Gloria Anzaldúa, Shakespeare, and other favorite poets.

"What is a lesson that you want your son Josh to remember?" I asked, before readying myself for the painful process of his reply that I would write to share in letters to his family. Before answering, he would sit in deep contemplation with his gaze fixed somewhere far off, as if looking back across space and time into different realms before embracing the sufferance to speak:

*"Always avoid"*  
cough cough hack  
[2 minutes later]  
*"situations that are not good for you"*  
cough cough hack  
[2 minutes later]  
*"in your thoughts and heart."*

After the five minute speaking tribulation, I would read back his words as confirmation: "Always avoid situations that are not good for you in your thoughts and heart." He nodded. Much of his wisdom was laced with the distinct insight of realizing what would have been better in the first place—too late.

I was his final earthly companion, and he shared with me his most intimate thoughts and final regrets as he attempted to convey profound insights in simple words uttered with excruciating effort. Gus became the embodiment of poetry. Short verses packed with powerful reflections on love, life, heartbreak, and death expressed not as fanciful prose but in short, simple phrases. Few speak as thoughtfully in life as he did in dying.

We spoke a lot about women. Where my experiences were few, his were vast. My encounters with sex as a young teenager were wrapped up in a cycle: roaming the street at night, stealing cars, partying, having sex with girls who'd trade their bodies for compliments. When I shared my stories about spending nights on the street after being kicked out of my uncle's place so he could have a woman over, and how I ran around with other delinquent kids who had nowhere else to go, he listened carefully and responded with wisdom and advice born of experience.

One day, I told him about the judge's denying me a chance of freedom and redemption. It might seem obvious to someone else that I should do all I can to achieve a better life beyond these walls, but decades of denials—lost court battles, depleted funds, inadequate resources, and emotionally exhausting legal proceedings—have taken their toll on my ability to persist against the odds. Sometimes I feel so overwhelmed that surrendering to my circumstances almost seems appealing. But Gus remained optimistic saying, "Promise you'll keep trying—one day you'll have a chance." I made the promise.

As the tumor grew up behind his eye and prevented his eyelid from closing, his eye became infected and his vision diminished, so I took it upon myself to read him the letters from his kids and Dale. One particular note from Dale was his favorite. She called him Augie (his real name was Augustine) and written on small, flowery, perfume-scented stationary were 19 words:

*"Dear Augie, I will never forget the happiness we shared and cherish our children. I will always love you."*

I would often arrive to our visit to find him sleeping with Dale's love note in one hand and a family portrait on his chest. When he awoke we would write response letters, as I recorded the words he choked out to convey to his daughter the importance of pursuing her dreams, or to tell Dale that his favorite memories included trips to Disneyland with the kids in the Corvette. At the conclusion of these letters, he made a point of telling people that he still pulled himself up to pee, a declaration indicative of his sense of autonomy.

Gus was fiercely independent. At the beginning of his hospice time he'd insist on doing everything himself—cleaning the room, changing his clothes, showering, getting stuff out of drawers—and he always made me leave the room when he had to take a piss. As he weakened, he began using a hand-held urinal bottle, and the simple act of standing up to take a leak became a monumental task. First, he'd maneuver around his IV tube and grab a hold of the bed railing to pull himself up into a sitting position. Pausing to stabilize himself and catch his breath, he'd slowly reach around with one hand in search of the urine bottle, while the other hand stayed firmly affixed to the railing. Once gathered, he'd slide his legs off the edge of the bed and again silently stabilize himself. Focusing on his legs, he'd begin the laborious struggle to stand up. Rarely making it up on the first attempt, he'd typically rise five or six inches before crashing down to the bed. Undeterred, he'd repeat the process until he'd completed the Herculean effort of getting, and staying, upright long enough to empty the tiny amount of fluid in his bladder.

Gus's pride compelled him to accomplish a feat that lasted no more than a minute and left him exhausted and choking, but also enlivened by the knowledge that he could do it on his own. It is that same sense of pride that compelled him to tell others, as if sharing it in his letters gave his loved ones a way of witnessing his strength.

Of course, there were times when Gus was deeply sad, but that's not how he wanted to spend his final moments. As his energy decreased, words became fewer, his pain increased, and his light grew dimmer. But his hopes remained high. Every day Gus spoke of what we'd do when he felt better: watch the Lord of the Rings trilogy in its entirety without him falling asleep; drink orange juice; listen to Bob Marley; look at his pictures again. Deteriorating daily, but now two weeks beyond the "month at max" he was given to live, Gus was so hopeful that he purchased vitamins from the prison commissary.

I watched Gus fade day after day. Now the times were more frequent that he hurt too much to speak, except for begging the nurses to end his suffering and to help him die with dignity. The State of Oregon has had a death with dignity law since 1997, but the state's Department of Correction does not recognize it. While his pain was so intense that death might have seemed a relief, his plans for when he felt better led me to believe that his spirit wanted to live. Having never witnessed such suffering, I was forced to wrestle with the idea of allowing the terminally ill to end their own lives, concluding that his death should be his final act of autonomy. But all they could do in prison hospice was increase his morphine so he was able to sleep most of the time when I wasn't there with him. Somehow, the nurses said, he would always wake up just before I'd arrive.

In late October, when his ability to speak was nearly gone, he sat gazing more intently than normal as I eagerly prepared to write his piecemeal utterance. Suddenly, he burst forth a simple statement:

"I'm innocent."

*Cough, Cough.*

"My kids know and I want you to know."

The choking that followed was so violent that I thought Gus might actually die right then, as he coughed up a bit of internal tissue the nurses later speculated to be a piece of esophagus. "I believe you," I said.

I never asked why he was incarcerated, because it never mattered to me. Over the final months of his life as he was coming to terms with his imminent death, he spoke candidly and frankly, with painful labor he spoke slowly about many of his regrets, shames, and flaws. He spoke with such honesty; I never questioned the sincerity of his deathbed reflections.

On Thursday, October 29th, Gus was sleeping when I arrived. He had begun sleeping more during our visits, so I would clean the room, empty his urine bottle, and sit bedside thinking about my own existence until he woke up. The cancer had eaten through his skin, and the flesh had begun to decay, emanating an overwhelming stench and attracting flies that I

would spend hours swatting away, from both the hole in his neck and the one eye that could no longer close. However, on this day there was also a strong urine smell. I searched for spots where the urine bottle may have spilled before realizing that Gus had pissed on himself. Later that night, Gus was unresponsive to the nurses' evaluation and had begun an arrhythmic breathing pattering known as "agonal breathing" that resembles gasping and is caused by the lungs shutting down. This is usually an indication that death is very near.

A vigil was called. In the dark I sat next to the bed holding Gus's hand, while realizing that up to this point I was unknowingly hoping he would miraculously get better. Once, I had found a dying plant stuffed behind the cabinets in the prison chapel and nursed it back to life with water, loving energy, and reggae music. I was secretly hoping the same would work for Gus, so all night long I played Bob Marley's songs and poured energy into willing him through the night. Being fans of Bob Marley's music was the first commonality we had discovered early in our interactions. We both appreciated Bob's message that only love could conquer hate, set to mellow beats in socially conscious songs. It is said that a person's hearing is the last function to shut down. That night the infirmary sounded like a concert. That night I remembered plans I'd made to take my own life while in solitary confinement, desperate to escape the depression that overwhelmed me about my crime and the hopelessness of my existence. Over the past decade of healing and creating meaningful relationships, I came to fall in love with life's preciousness, but once again I was confronted with thoughts of the afterlife. Before knowing Gus, I'd believed the spirit would always exist as some form of energy. But as his life force faded, I wondered more deeply about the nature of the soul. I am now further from any conclusions than ever before.

Around noon the next day the doctor came in, listened to his breathing and shined a flashlight in. "He'll be dead within minutes," he said to me in the same tone a mechanic might use when speaking about a carburetor. The muscles of my upper body tightened my chest, squeezing at my heart, and my legs felt unstable as I stood there looking at Gus. The doctor's delivery of news was something I have long accepted: Prisoners are often treated dismissively, as less than human, but it enraged me that any person could speak so coldly about the final moments of another. Swallowing the lump in my throat and blinking back tears, I called out an eloquent response of "screw you" as the doctor left.

Ignoring three-hour shift rotation rules, I stayed by Gus's bed all day and into the night. An older inmate named John, who had been imprisoned 43 years earlier at the age of 19, was the senior volunteer in the hospice program and occasionally stopped by to see if I needed a break, but I said I didn't. There was no way I was going to leave Gus's side. So I sat staring at Gus, writing poems, drinking coffee, and fighting sleep. Years of solitary confinement had taught me much about waiting, and I was determined to stay with Gus until the end.

After two days of not moving and nearly twelve hours beyond "dead in minutes," Gus suddenly flopped towards the bed's edge and fell forward. He was trying to stand up. Barely catching him and preventing a face plant onto the floor, I wondered if this was it. I then realized that Gus was peeing on both the floor and me. Back in bed, he made some half gurgling and half raspy whispering noise resembling a failed vocalization. I was ecstatic to see him alive and grabbed his hand and asked if he could hear the music. I was playing Bob



Marley's "No more trouble." He squeezed my finger so feebly that I wondered if it was just my imagination, but I believe that it was Gus's last conscious act of will.

In the week that followed, Gus was in diapers. He needed to be turned to relieve the pressure on his bed sores, which had gotten so bad that the bones were visible through his rotting flesh. Cleaning him up, turning him gently, wiping ointment on his open wounds, squirting drops of water into his mouth with a medical turkey baster were humbling moments that demonstrated the true value of tenderness and attentive care. The desire to be gentle was so overwhelming that I began to understand the deep human need to ease difficulty for those we care about—and how the most basic gestures of kindness can be the most meaningful.

The medical staff was amazed that Gus was still alive. He'd had no fluids in over a week, no solid food in three months, no liquid meal replacements in almost a month, and was taking twelve breaths a minute. Nurses remarked that he was waiting for something; the doctor said it was a medical oddity. I said it was love and Bob Marley. He survived nine days beyond "dead in minutes" and each night and most days—minus three to four hours of sleep while John was there—sat with him, playing music, silently reflecting on life, and swatting away flies. At one point, a bird flew into the room through a barred but screenless window that looks out over the prison yard where the sounds of men playing softball and horseshoes drift up into the rooms of the terminally ill. The bird perched on the windowsill. Earlier in the month, another bird (or perhaps the same one) had flown into the room and I had kept people from chasing it away, because it might have been there for reasons beyond our comprehension. Perhaps it was the spirit of the unknown to which the Hispanic man had reached from the same bed. The bird and I sat as minutes ticked away. At times, Gus's breath would stop for half a minute. The bird flew off and Gus kept breathing.

On the morning of November 8, 2015, while changing the bandages on the hole in Gus's neck, a nurse discovered maggots coming out of the wound. She made the hospice volunteers leave until further notice. After returning to my cell, I sat and worried about Gus. Would he die alone, was somebody playing music, what if he tried to stand up and pee again, who was swatting away the flies? Outside of his friends and family, he was just an invisible man locked away. Yet, to me, he was an example of grace, a man whose spirit in the presence of death inspired gratitude in me daily. He faced the worst adversity with a sense of peace I had never before witnessed.

Despite my exhaustion, I passed that night without sleeping, ready to go if I were summoned back to the infirmary. As I lay in my cell, tossing and turning, surrounded by the snores of men whose dreams served as temporary release from their realities, I reflected on my two months with Gus and all he had shared with me. I had learned so many lessons: In the end it is as in the beginning, we will always need other people. Our lives will only be remembered by the lives we touched. Regrets are our greatest burden, but memories may prove the greatest treasures. Music helps the sick and strangers can become good friends quickly. Worry is a form of caring, yet holding on to negative energy invites woe. It is wise to cherish health, treat breath as a blessing, and embrace love as inspiration. I had now been both an inflictor of harm and a giver of care, and what I discovered was that the

magnitude of harm, damage, or failure that I was responsible for in the past did not prevent my ability to do good in the present. Gus had helped me to become a source of love in the exact spot I was once a source of pain after so many years of isolation and apathy.

At 5:15 a.m., the first of 32 bells that signals the day's events would sound, loud as a fire alarm, and startled me out of my reverie. When the alarm bell for breakfast went off, and the doors finally opened, I took it upon myself to go straight to the infirmary, regardless of quarantine restrictions. I prepared to insist on being allowed to stay, no matter what.

I walked in. "Gus died yesterday." The officer told me.

"What time?" I asked.

"Around three in the afternoon."

That had been my regular arrival time. I turned and walked out the door and down the enclosed stairwell. I went to breakfast and sat alone. I watched my tears fall into my bowl of cornflakes and the tiny ripples they created as they splashed against the milk.