

A Requiem for Freddy

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His liver destroyed by hepatitis C, Robert Hagenson did not receive a transplant but a type of early parole – in a body bag. His sudden deterioration and death hit many of his fellow prisoners hard, particularly me. Watching a man die by inches is unsettling, especially when he is a fellow prisoner and a friend.

Everyone called him “Freddy”. I forgot why. He was forty-five years old when he began serving a sentence of twenty-five years to life for an armed robbery committed in 1997. Barely over five feet tall, his body covered in tattoos and his head shaved clean, he looked every bit the convict and criminal.

Freddy walked ramrod straight. With half of a cigar clamped between his teeth, he always had a determined look in his eye, even if only on his way to the water fountain. He reminded me of a soldier on patrol. A blunt-spoken grouch, Freddy vociferously said what he thought. Notorious for his rants against God, government, and the GOP, Freddy rarely let the facts get in the way of his opinions.

“George Bush needs a few good men!” Freddy loved to scream out. As the 2004 presidential election converged with the debate surrounding the war in Iraq, he was quick to challenge anyone on politics. Freddy hated Bush, but he did not discriminate either. “You pigs got it too easy”, Freddy would yell, mainly to antagonize the guards. “It’s time to get a real job”. His legendary sarcasm complimented his belligerent tirades. No one, including Freddy, really took it seriously.

As cellmates, Freddy and I became friends in 2004. Anyone willing to put up with me bouncing off the walls at all hours, coupled with incessant racket from my typewriter, earns my undying friendship and respect. We remained friends even after I moved to another cell.

Freddy’s criminal career spanned four decades and numerous prison terms. In the mould of the hardened criminal, Freddy was a robber – a stick-up man from the old school and he harboured no illusions. On many occasions, he told me he expected to die in prison, but he never expressed a desire to die from the hepatitis C virus (HCV).

“These cry-babies think they’re getting out”, Freddy would tell me. “This is the end of the line, buddy. Get your head out of your ass and do your time”. It was true. We all suffered from the glimmer-of-hope syndrome. We convince ourselves hope is just on the horizon, but Freddy was right. When lifers like us start talking about the streets, we sound like fools. Freddy

pulled no punches. "I'm never getting out", he'd say casually. This sober dose of reality hit me hard for many years to come: "I'm a criminal and I'll die in prison".

Freddy's first real attempt to seek medical attention began in the summer of 2004. He had lost a lot of weight. Once muscular, Freddy was now thin as a rail. "I don't feel right", Freddy told me one morning, "Something is wrong with me. I keep forgetting stuff, and I can't sleep". I know nothing of medicine. Weight loss and insomnia are symptoms of liver disease. Loss of memory is a sign of liver failure. Naively, I thought him too ornery to fall prey to illness. I helped him anyway, because that is what we do.

In the next few months, Freddy saw a half dozen different prison doctors. Rather than see a specialist, or even just one doctor who possesses an intimate knowledge about a patient's condition, prisoners will often go months without seeing the same doctor twice. "Every doctor has a different opinion, and they all tell you something different", Freddy complained to me one day. I can still see the lines of old age on a wrinkled face accelerated by a deadly virus. Since he always complained, I saw no real reason to worry.

August 2004 blood tests, however, showed Freddy's liver enzymes at double and triple the high range. These levels alarmed me. In obvious need of treatment, he received nothing but the run-around. By October, a slew of "unreadable", "partial", and "lost" test results, in addition to empty stares from the medical practitioners, greeted Freddy at every turn. In response to Freddy's pointed questions, they ordered more blood tests. I helped an angry Freddy file an administrative appeal.

A month later, the chief medical officer of the California Correctional Center cancelled Freddy's appeal. The CMO stated Hagenson waived his appeal rights by refusing to cooperate because he had grown angry with the medical staff. The appeal, ironically, had nothing to do with his attempt to seek treatment, but the complete breakdown in accountability. I did not know it at the time, but the entire medical department was broken. All I knew when I wrote the appeal was that Freddy still had not received treatment.

Prison is a breeding ground for all manner of blood-borne illnesses, especially pathogens like HCV. Tainted needles follow the path of the contraband drugs like the angel of death. Since Freddy had shared needles his whole life, he assumed he had HCV. I convinced him to keep going to medical. "Those motherfuckers are like vampires", Freddy complained, "All they do is take blood".

“I know, bro”, I agreed, “Just quit busting their balls”.

Freddy laughed. “I called them veterinarians”.

I heard from numerous prisoners about his tirades at medical. The California Department of Corrections and Rehabilitation (CDCR) had medical technical assistants who were also guards – some were decent, but many made fatal decisions when they decided a prisoner needed rough treatment.

A liver biopsy in January 2005 not only confirmed HCV, but also disclosed that it had progressed to severe cirrhosis of the liver. Time was of the essence. A doctor told him he would soon be starting a regimen of interferon-ribavirin, known as combination drug therapy. Freddy had chronic HCV, considered an incurable disease. The combination drug therapy, however, has cleared the virus from many and greatly extended the lives of many others. For some, who have a certain strain, it does not work. But wonder drugs cannot even try to work their magic if they are not administered.

Months crept by. Chronic HCV is the end stage of life. Such a crucial juncture requires action, not indifference. More blood tests were taken, but still no treatment for Freddy. Then came July. Nearly a year from his first report of symptoms, prison doctors determined Freddy’s ammonia levels were too high to qualify for treatment. Instead, they told him, his paperwork had been sent to the CDCR headquarters in Sacramento.

“They gave me a year or two to live”, Freddy told me one day. I did not know what to say. Rarely at a loss for words, I silently walked the track with him. He seemed calm.

Freddy’s tattoos caught my attention. The peacock on his forearm blended into a mosaic of mediocre body art, covering his dying body. They seemed to tell a sad story of a hard life. “Are you alright?”, I asked. It seemed like a lame question. By now, he should have already been on the medication. This scenario played out too many times. Sending his paperwork to CDCR headquarters made no sense (deliberate...). Another round of delays, and the only therapy Freddy received was another layer of bureaucracy (indifference). Another year elapsed while his condition was treated like a procurement order.

At some point, excuses do not cut it. When they should say, “Sorry, our total incompetence as practitioners of medicine has allowed your narrow window of opportunity to close”, instead they say, “Oh by the way, you are going to die”. I am not going to lie. Many people, including the guards, consider telling the truth snitching. Some truths, however, need to be told.

Freddy loved to get high. He shot heroin his entire life. Like many in prison, he was a hardcore drug addict. Freddy committed robberies and shot dope. Nevertheless, he did not want to die. While he went through the process of trying to secure treatment, he promised himself he would not do drugs. For the most part, he stayed sober. He wanted to live.

“You can’t live forever”, he calmly said as we slowly walked around the track. “Now I can get the hell out of this place. I hate prison”.

I believe his attempt at sobriety came to an abrupt end. As far as the truth is concerned, that is the best I can do. By October, massive gastrointestinal bleeding brought Freddy to death’s door. One morning he vomited blood – and a lot of it, the first stage of liver failure. Organ failure is an excruciating death. I will never forget the look on his face, a look I had never thought to see on the ever stoic Freddy. He was afraid.

They took him in for emergency surgery as he went into a coma. It shook up the whole yard. Since the infected can live with HCV for decades, the end stages of the disease are a mystery to most. While only 2 percent of the general population have the disease, 12-35 percent of prisoners, depending on the state, have HCV, with California near the top at 34 percent (CDCP, 2013). The rumours ran the gamut, anything from a “liver transplant” to “he died”. Then, about a week later, Freddy came back to the yard. So glad to see the old grouch, I almost cried. He looked like shit. His eyes had sunk into a skull attached to a pencil-thin neck. For a while, however, Freddy seemed to bounce back. Some of his old humour and sarcasm returned.

But Freddy’s improvement did not last long. His liver gave out again in early December. They took him to a Reno hospital in what would be a last attempt to stave off death. The only thing that could have saved Freddy was a liver transplant.

When Freddy returned from the second surgery, I was determined to document his story. “If they got me eighteen months ago”, he told me, “They probably could have saved me”. Three of us sat at a table in the dayroom. Two of us listened intently. Interviewing a friend just before he died created a strange dynamic. Since I consider myself a writer, I had to put my money where my mouth is. As an activist and a jailhouse lawyer, I always take an aggressive stance in all my jailhouse journalism. This was different. I mainly listened as I took my notes. I was mad.

“By the time they did something, it was too late”. There was no anger in his voice, only resignation more alarming than any of his rants. “When

your ammonia levels are high”, Freddy explained, “You are supposed to be on a strict diet”.

The doctors at the Reno hospital could not believe the prison medical department simply left him untreated after his surgery. Complete inaction when a patient is screaming for treatment is unthinkable – and why so many suits have been filed. The Reno doctors had assumed that Freddy would be placed on a diet low in protein and sodium. The liver is an amazing organ, and stabilization opens the door for regeneration, treatment and perhaps experimentation. Diet alone can add months, or even years, to a dying patient’s life. Inexcusable. “They killed me, bro”, was Freddy’s verdict.

An outlaw of the highest order, Freddy hated the government. At some point, he always expected the entire tough-on-crime movement to give way to economic collapse. He wanted to see a total fiscal meltdown lead to prison and sentencing reform. This tsunami of change, he opined, might even extend to an old career criminal like himself. At this moment in his criminal career, ever the anarchist, Freddy stayed true to form. “I cost them a couple hundred thousand dollars”, Freddy bragged. “Good. I hope it bankrupts them. Every little bit helps”.

I keep replaying that last conversation in my mind. Sometimes I even hear it in my sleep. When the ambulance came on the yard a few days later, Freddy’s words immediately came back to me. In my gut, I knew they had come for my dying friend. All movement freezes when an ambulance comes into the yard. Hundreds of prisoners were seated silently on the yard. As the ambulance crew slowly brought him out on a gurney, the mood was bleak. We asked one of the guards about Freddy. “The old grouch told me to go to hell”. We all laughed.

It was December 29, 2005. Freddy died that day, in the ambulance on the way to the hospital. Most of us remain shocked by how quickly the virus took Freddy. Just a few years ago, he played handball and worked out with men half his age. Now he is dead. Freddy might have deserved to be permanently separated from society for a life of crime, but he did not deserve a death sentence administered through medical neglect and incompetence.

Citing the sixty preventable deaths a year like Freddy’s as the prompt, the CDCR’s medical department has been in federal receivership since 2005 (Verdin, 2013). Four years later, a panel of federal judges placed a cap on the population in order to bring these murderous and unconstitutional conditions of medical and mental health into decent standards of care

(*ibid.*). The Supreme Court recently ruled in favour of the prisoner class, an unprecedented measure.

For Freddy, who died just shy of his fifty-fourth birthday, it does not matter. In all his layers of ugliness and imperfection, Freddy was a true American outlaw. He went out like he lived, breaking the law. A few months after he died, a package of legal paper arrived. A small load of heroin had been secreted in the documents addressed to him. In my mind, the missive came from the grave. Always the criminal, Freddy must have sent the shit from hell just to aggravate the guards. It is my story, and that is the way I choose to tell it.

POSTSCRIPT

Freddy's 2005 death illuminates many of the problems that continue to plague the carceral. A number of improvements made by the federal receiver did not impress the judiciary. In a landmark decision, the Supreme Court held the delivery system was impossible to improve due to overcrowding and ordered California to lower the population by roughly 40,000 prisoners by 2013 (Brown, 2011).

California is the epicentre of the tough-on-crime movement. The pendulum of national reformation that started swinging in the early to mid-2000s is now being pushed by steady pressure from the courts (Dey, 2006). A higher level of accountability, expediency and professionalism is noticeable, but the abundance of chronic care prisoners, many of whom are elderly and doing life, forces medical to run almost twenty-four hours a day in Soledad (Dey, 2007; Dey, 2010).

This type of nonstop health care is draining correction's budget in a state on the brink of fiscal disaster (Brown, 2011). California barely has money to properly fund education and provide basic social services, let alone build more prisons and continue to house prisoners all over the country. By handing California a solution on a silver platter, alternatives to the \$10 billion nightmare of mindless incarceration can be developed.

California is now on a federal clock – and it is ticking. Major reforms matched by cutting-edge rehabilitative programming will have to be embraced to maintain the reductions. Freddy was right about economic collapse fuelling reform. The death of guys like him and depressing conditions that lead to suicide are now combined with the overriding need for fiscal constraint. It is a perfect storm – and may even result in lasting change.

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