

Op-Ed Contributors

## Giving Life After Death Row

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EIGHT years ago I was sentenced to death for the murders of my wife and three children. I am guilty. I once thought that I could fool others into believing this was not true. Failing that, I tried to convince myself that it didn't matter. But gradually, the enormity of what I did seeped in; that was followed by remorse and then a wish to make amends.

I spend 22 hours a day locked in a 6 foot by 8 foot box on Oregon's death row. There is no way to atone for my crimes, but I believe that a profound benefit to society can come from my circumstances. I have asked to end my remaining appeals, and then donate my organs after my execution to those who need them. But my request has been rejected by the prison authorities.

According to the [United Network for Organ Sharing](#), there are more than 110,000 Americans on organ waiting lists. Around 19 of them die each day. There are more than 3,000 prisoners on death row in the United States, and just one inmate could save up to eight lives by donating a healthy heart, lungs, kidneys, liver and other transplantable tissues.

There is no law barring inmates condemned to death in the United States from donating their organs, but I haven't found any prisons that allow it. The main explanation is that Oregon and most other states use a sequence of three drugs for lethal injections that damages the organs. But Ohio and Washington use a larger dose of just one drug, a fast-acting barbiturate that doesn't destroy organs. If states would switch to a one-drug regimen, inmates' organs could be saved.

Another common concern is that the organs of prisoners may be tainted by infections, H.I.V. or hepatitis. Though the prison population does have a higher prevalence of such diseases than do non-prisoners, thorough testing can easily determine whether a prisoner's organs are healthy. These tests would be more reliable than many given to, say, a victim of a car crash who had signed up to be a donor; in the rush to transplant organs after an accident, there is less time for a full risk analysis.

There are also fears about security — that, for example, prisoners will volunteer to donate organs as part of an elaborate escape scheme. But prisoners around the country make hospital trips for medical reasons every day. And in any case, executions have to take place on prison grounds, so the organ removal would take place there as well.

Aside from these logistical and health concerns, prisons have a moral reason for their reluctance to allow inmates to donate. America has a shameful history of using prisoners for medical experiments. In Oregon, for example, from 1963 to 1973, many inmates were paid to “volunteer” for [research into the effects of radiation](#) on testicular cells. Some ethicists believe that opening the door to voluntary donations would also open the door to abuse. And others argue that prisoners are simply unable to make a truly voluntary consent.

But when a prisoner initiates a request to donate with absolutely no enticements or pressure to do so, and if the inmate receives the same counseling afforded every prospective donor, there is no question in my mind that valid organ-donation consent can be given.

I am not the only condemned prisoner who wants the right to donate his organs. I have discussed this issue with almost every one of the 35 men on Oregon's death row, and nearly half of them expressed a wish to have the option of donating should their appeals run out.

I understand the public's apprehension. And I know that it could look as if what I really want are extra privileges or a reduction in my sentence. After all, in a rare and well-publicized case last December, [Gov. Haley Barbour of Mississippi released two sisters who had been sentenced to life in prison](#) so that one could donate a kidney to the other. But I don't expect to leave this prison alive. I am seeking nothing but the right to determine what happens to my body once the state has carried out its sentence.

If I donated all of my organs today, I could clear nearly 1 percent of my state's organ waiting list. I am 37 years old and healthy; throwing my organs away after I am executed is nothing but a waste.

And yet the prison authority's response to my latest appeal to donate was this: "The interests of the public and condemned inmates are best served by denying the petition."

Many in the public, most inmates, and especially those who are dying for lack of a healthy organ, would certainly disagree.

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