

## **The Owl and the Fox Trap**

by Michael Kiesow Moore

I hold the great horned owl in the crook of my arm as if cradling a baby. It is sound asleep, its eyes closed against the glare of the sun. I watch the owl take in slow, deep breaths. Not even the sound of a passing car makes it stir. Once we get to the field, my fellow volunteers set out the various ropes while I stand holding the owl. In a few minutes we are ready.

“Okay kid,” I say to the sleepy owl, “it’s time. Wake up and fly!”

The bird’s eyes open and stare into mine, two golden orbs that seem almost human. I throw the owl into the air. Its wings spread out and begin to flap furiously. It takes off, flying a few feet above ground. The owl’s body is big and barrel-shaped; its wingspan seems disproportionately short. Yet it flies, defying logic the way a 747 defies natural sense. Big things like that should not float. Planes or birds.

The owl does not rise far above the ground. It wobbles in the air, favoring the left wing. The broken wing is still mending and a 50-foot flight is the best it can do today. But the owl is healing. A couple weeks ago it was almost left for dead. With continued care—and flying exercises like today’s—it won’t be long before someone will throw it into the air one last time, letting it take back its true place in the world.

Before becoming a caretaker to birds of prey, I was a caregiver to people with AIDS. I began in the early years of the disease when no one knew how it spread or why. All that was known was that people were dying. I thought I knew what I was getting into. When I shook hands with the first men and women I met who had the illness — Sunnye of the charming disposition and Larry of the purple sores — I said to myself, I can do this. I’m strong enough. Then they began to die. Sunnye and Larry weren’t the first, but within a couple years of meeting

them, they were gone. Funeral followed funeral in furious succession. Next thing I knew, I had buried nearly an entire generation of my friends and lovers.

It didn't matter how hard I worked at keeping them alive, how many times I cleaned sheets after night sweats, massaged sore feet, bathed chilled young men who looked older than my grandpa, or stayed up all night long listening to stories of angels and mysterious visitors. Their bodies withered and shrank until there was nothing left but their memory. That's why I decided to take care of owls. I wanted to see something that was ill and brought back to life again.

There was another reason I turned to birds. I believed that I needed to "do time," to help those from the animal kingdom who had been hurt by their interactions with human beings. The vast majority of patients at the Raptor Center—from tiny saw-whet owls that could fit in the palm of my hand to the great bald eagles who were about half as big as me—were there because of their contact with humans. Owls that flew into power lines. Hawks hit by cars. Falcons that bumped into skyscraper windows. Countless raptors who had been injured by hunters, often left to die. There was even a golden eagle from Wisconsin who had been beaten by a group of boys with a baseball bat.

The Raptor Center at the University of Minnesota was founded in 1974 and treats over 800 birds a year. Raptors are not the only birds you will see at the Center. Sometimes you can walk into a room and find a trumpeter swan hissing at you. Some years ago, trumpeter swans in Minnesota were dying from lead poisoning. Though the Center specialized in birds of prey, its expertise was considered useful for treating the sick swans. For a time the halls were filled with honking creatures, acting more like abrasive geese than paragons of grace. Most of the swans were returned to the wild and the crisis averted, and in the process the Center became expert in treating trumpeters.

There are two types of duties a volunteer can do. One is the “clinic crew.” This involves feeding the birds, giving them their meals, and assisting the clinicians. I thought it sounded interesting until I learned what the raptors ate. The kitchen has huge trash cans filled with frozen rats and mice. This “food” comes from killed laboratory animals that have not been used in research experiments. Anything else—even the best steak—may cause malnutrition and rickets within two or three days. However, you can not simply hand thawed rodents to the birds; you have to remove the entrails first. In the wild, the birds know all about this. An owl will dig into its meal-to-be and fling the intestines out, for the intestines are full of bacteria, usually from what the animal has eaten but not fully digested that can harm the bird if ingested. Since the birds at the center are still in recovery, humans take on this task. There is also a blender in the kitchen. You can be sure it isn’t for making daiquiris.

Although I have a fear of rats, as well as of blood—and I’m a vegetarian to boot—I managed to disembowel the rats better than I thought I would. But I worried about fainting if I saw a bleeding bird in the clinic. I asked if I could be on the “flight crew.”

Birds who are regularly exercised fare better once they are released. The “exercise” consists of attaching leather thongs to the raptor’s feet, and then fastening them to a long parachute cord. After you toss the bird in the air and let it fly to the length of the cord, you retrieve it for more flights. The first flight or two can be startling to the raptor because it has never had a 50-foot leash restrain it before. Once it gets used to the restriction, it usually will choose to land before the cord runs out, preferring a short flight than being yanked to the ground.

The most challenging aspect of this work is getting your bird. To do this, you go to the room that keeps as many as 20 raptors together, mostly hawks and owls who spend their days perched on long rods. Smaller birds that could end up as their prey, such as kestrels, are kept in cages elsewhere. After sighting the bird you want, you turn the light off, walk right up to the bird

who is now as momentarily blind as you are, and grab its legs. If you're lucky, not only will you nab the correct raptor, but you won't step into its dinner on the way.

After a couple of days at the Center you notice that there are feathers everywhere. The floors of cages, counter tops, interiors of cabinets. Red tail feathers of hawks. Tiny grey feathers of saw whet owls that look like down from a torn pillow. Sleek black feathers from the wing of a vulture. Some have tags attached, or pencil markings on the shaft. We were supposed to bring to the clinicians any stray feathers we saw lying about because they could be used as prosthetic feathers to repair wings and tails. While cleaning the eagle cage you can count on picking up a handful. Long white pieces of wing with black markings. Some of their feathers were more black than white, for white feathers appear only after years of maturation. The word bald comes from the old English word—balde—that means white.

*There is a great rush of air as the eagles fly from their perches, their great wings beating around your ears. You duck down and put your arms over your head, afraid that a wing will dash against your face. There are cries all about you, loud and screechy. Wings and cacophony merge into a flurried blur as if a great heavenly host has suddenly descended, their great wings touching your face, wisps of feather against lips and closed eyelids. People have the wrong idea of angels. They are a fearsome lot, especially when in great number. Gentle names like Ari-el belie the nature of their true forms. When you can face the great ones without wanting to scream, you watch a large white wing dip into sun, feathers of silver glittering like ten thousand thousand prisms.*

When my crew and I were assigned to work with a vulture, we were not thrilled. We heard stories of the vulture's unusual defense mechanism. When a predator approaches, the vulture regurgitates its last meal, spitting it out like a projectile. The method behind this strategy

is that the smell of the regurgitated pulp disgusts the potential predator. Understandably. We were going to be prepared. A standard issue smock did not look sufficient to us. Crew member Jenny brought along a welding helmet. It had a green Plexiglas visor and it was big. It was meant for someone with a head the size of a gorilla. The rest of my crew refused to get the vulture, so I volunteered for the hazardous duty. I felt ridiculous walking through the hall wearing the huge helmet, but I figured if I explained I was retrieving the vulture, people would understand.

As I walked down the hall, I reviewed what I had learned about these eaters of the dead. When you hold a vulture in your arms and examine its feet, you discover that calling it a raptor is a misnomer. The word “raptor” comes from the Latin word “rapere” meaning to grip or grasp. Since most birds of prey hunt by using their feet to grasp their prey, raptor is a general term for any kind of predatory bird. Whereas an eagle can grip your arm so hard that it can break the bone, a vulture’s feet are so weak that by touching the toe pads of the bird, its claws barely grasp around your finger. A baby has a stronger grasp than a vulture. Since the vulture’s feet are used neither for killing nor defense, the muscles do not develop as fully as other birds of prey. Often the vulture doesn’t even use its feet to hold food. Instead, it seizes the food with its beak, shuffles backwards, and twisting its head back and forth, wrenches off bite-sized morsels. Vultures are adapted for eating carrion for they are resistant to disease; even botulism toxin has little effect on them. With such a strong immune system, they can eat as they please. I have many friends who would envy the vulture its powerful immune system.

Besides eating carcasses, vultures are experts in two other arenas: sanitation and flight. The genus for vulture is “cathartes,” Greek for “a cleanser,” which refers to how vultures keep fields and woods (and in today’s culture, roads) free from decomposing animal remains. Vultures are the sanitation workers of the animal world, which is why vultures have bare, unfeathered heads. This is an adaptation that is all about cleanliness: a naked head can plunge into the interior of a carcass and not accumulate the kind of gore a feathered head would. More than

anything else, what the vulture does best is soar. The bird has an uncanny ability to take the meanest breeze and turn it into a wind that lifts it into the sky while other soaring birds—including the eagle—can only sit and watch.

I arrive at the flight room without anyone laughing at me. I take a breath, open the door, and enter the small room. The vulture and I stare at each other, sizing the other up. With my big, green helmet, it must have think me an odd looking human. I am surprised to discover that it isn't as ugly as I expect, probably because it is an adolescent. It has a black head, which means it will be two or three years before it turns red. This vulture's feathers are a shiny blue-black color, like the color of a black tulip. All I have to fear, I think to myself, is a little puke. I motion Jenny to turn down the lights. When it is pitch black, I walk up to the bird, grab its feet, and catch hold.

"Okay! Lights!" I call. The lights come up and the vulture is secure in my arms, albeit struggling fiercely to get away. The bird did regurgitate, perhaps more reflex than an act of intent. Not much came out of its beak, only enough to make a smelly mess on its own feathers. My smock was not needed, let alone the big, green helmet.

As the vulture tries to get free of my grasp, I feel the strength of its wings. I had never held a raptor with such strength. I have to work hard to keep it in control. All it has to do is extend its long wings, a span wider than my own out-stretched arms, and the great bird could fly to heaven.

*They wait. They know how to wait. Circling high among the clouds, they know when Death is about to appear. It is not so much the smell that the dying give off nor the final tugs for air. Those are bodily matters. It is instead the sense of the approaching force, like a cold wind that makes a smooth glide suddenly uncertain, an uncomfortable catch that can make one tumble in ungainly somersaults.*

*On the ground, they list back and forth, uncomfortably standing on legs that despise gravity. Swiftly, Death descends like a fierce eagle and sweeps away all things spirit, leaving behind only husks of matter that may as well be eaten by those who wait. The vultures approach warily, never quite certain that Death took away everything that could be dangerous.*

*Sometimes, though, it happens. Your eye opens one last time, spying the approaching vulture, the wings partially extended, the creature ready for a quick escape if needed. The impatient red head bobs back and forth, eagerly anticipating the next meal—which is you. When Death finishes the work, the vulture is the last to watch the living thing, and the first to see what happens next. Companion to Charon, the vulture witnesses the passing.*

When I started doing AIDS work in Maryland in 1982, the disease had no official name, just “The Gay Plague.” Horror stories filtered out of the hospitals, of dinner trays left out in the hall because orderlies were too scared to enter the patient’s room, and patients who lay in their filth for hours because nurses refused to touch them. Those who did dare enter the room covered themselves head to foot with masks, gloves, and gowns. These stories appalled me. I had to do something about it

I called the Whitman-Walker Clinic in Washington, D.C. to become a volunteer. They had just started a buddy program that linked volunteers with people who had the disease. I was told the initial training I needed was some weeks away, but there was office work I could help out with. It was there that I met Sunnye Sherman. Sunnye—pronounced “Sunny”—was a young woman with short blond hair and kind eyes. Sometimes people have names that shape them throughout life. Sunnye was one of them. She was that rare person who was cheery, but not annoyingly so.

We chattered away as we worked on a mailing. After an hour, we were best friends. Towards the end of our shift, she told me something that shocked me. She had the disease. It wasn't just gay men who got it. Sunnye was the very first person I met who had AIDS. She was flip in talking about it. Before she had AIDS she weighed 210 pounds. Now her weight hovered around 100 and it was a struggle to keep it on. When people told her how great she looked and asked how she did it, she answered "Oh...it was the AIDS diet. It's very effective." After our work was done, we continued talking on the sidewalk outside the clinic.

"If I die," she said, "no...I guess *when* because we will all die eventually, I'd like to set up some kind of fund where every year someone comes to my grave and throws some glitter. I think that'd be great. Lots of glitter."

Sunnys and I stayed in touch, soon starting our own self-made volunteer program at the National Institutes of Health. Sunnys's mother, Ina Sherman, was a nurse at NIH and told us that there were a number of patients with AIDS from all over the country in protocols there, allowing their bodies to be used like guinea pigs for experimental procedures. Many of the patients were alone and had no friends or family around. Sunnys and I started going to NIH every week, bringing homemade food and, we hoped, good company.

NIH is located just outside Washington, D.C. in the Maryland suburbs of Bethesda. The word Bethesda comes from the Bible. Bethesda was a pool in Jerusalem that healed the sick. Its healing powers were said to be the result of an angel's visits. Like many institutions on the East Coast, NIH is a mix of the very old and the very new. Historical Federal-style buildings sit primly amongst sprawling 1960s cement behemoths. It's a maze inside. Long hallways connect to mysterious corridors that take you further away from the world of the known.

The first patient I met at NIH was Larry. He barely weighed ninety pounds and had lost all his hair. He was a bundle of bones with skin so taut it seemed that just lifting a glass of water



would tear it. Because of candidiasis, one of many ailments, he coughed up a white foam, as well as bloody mucus from his lungs. I hardly noticed any of this on first meeting him. When I first looked at Larry, about the only thing I was aware of was his lesions. The large purple kaposi sarcoma blemishes covered every part of his body, from his bald scalp down his face and nose, along his arms and hands, to his toes. Some of his large purple lesions even had lesions themselves—lesions on top of lesions. He looked like a newly hatched bird, purple and fragile. Nothing but tight skin that barely kept the bones in place.

When I sat at Larry's side, I wanted him to get better. I wanted those purple spots to disappear. I wanted him to put on weight, to stop looking like a baby bird and become human again. Perhaps even more than wanting him to live, I wanted to be the one responsible for the great miracle. By my help, my constant presence, my sheer unwavering will, I would save him. The vultures would have to look elsewhere for a meal because I would keep him alive.

One morning I get a call from the Raptor Center. A great horned owl is stuck on a bridge that spans the Mississippi River, with a fox trap attached to its foot. I am asked to rescue the owl. My initial reaction is to say, "You want me to do *what*?!" But there is no one else who can go and I am the owl's only hope.

When I arrive in Anoka, the young man who made the call to the Center meets me. He is in his early twenties, wears jeans and a Rush tee-shirt. After shaking hands, Jamie leads me to the owl. Sure enough, there it is. The owl calmly sits on the bridge over the Mississippi River, far enough to the side of the road so that it is out of the way of the constant traffic of cars and trucks. A rusty fox trap, with a long metal-link chain, is snapped tight on one of its legs. A simple operation, I think. I put on my leather gloves and lean down to pick up the owl. As my fingers near its body, there is a flurry of feathers and the owl is in flight, the trap still on its foot, the long chain dangling in the air—a metal kite tail.

“Wow,” says Jamie, “I thought that trap would keep him from flying. What do we do now?”

I look over the side of the bridge. The owl landed on a cement block below the bridge, near the water’s edge.

“We go down. Come on!”

Before heading to the river, we grab a blanket from my car. We follow a trail down and approach the owl. It rained the day before and the river is muddy brown. The water flies by furiously, its currents thick with hostile movement. The owl perches on the cement block, staring across the churning water to the bridge struts in the middle of the river, poised to take flight. We have only one chance to nab the bird before it finds refuge in the middle of the Mississippi.

“Jamie, this is what I want you to do. Take this blanket and keep the owl distracted. While he’s eyeing you, I’ll go from behind and grab him. If I miss, net him with the blanket.”

I very slowly make my way to the owl. Jamie follows my directions to the letter, hopping and flapping his arms, forcing the owl to pay attention to this strange-acting human being. I am now in arms-reach and the owl still doesn’t know I am there. I lunge at it. The owl spins its head around, and then it is in the air, its legs flying out of my grasp. Jamie throws the blanket into the air, and owl and blanket collapse to the ground.

“All right!” Jamie cries out. “We did it!”

“Good going. That was great!”

“Now what do we do? Do you know?”

“The rest will be a piece of cake.” I slowly lift the blanket. The owl stretches its legs toward me, making quick lunges. Its long talons click loudly as they grasp handfuls of air. In a quick motion that surprises me as much as the owl, I have its legs firmly in my grip. I lift the owl off the ground, freeing it from the blanket, and rest it in the crook of my arm. The owl quiets.

“He’ll be easy to handle now. Birds spend their whole lives either upright on their feet or in flight. They never have the experience of being on their backs. The experience is so startling to them that I could lay this owl down right now on its back and it wouldn’t even move. While I’m holding him like this, can you see if you can get the trap off?”

Jamie approaches the owl warily. Its talons are almost as long as human fingers and razor sharp. I have the bird firmly in control and Jamie doesn’t need to fear. Being used to a world where hunting and fishing are as common to him as theater and opera to me, Jamie knows exactly what to do and the trap comes off. We look closely at the owl’s leg. The trap had broken skin, and blood is mixed in with broken feathers, but the leg is not broken.

“Now what are you going to do?” Jamie asks. “Are you going to let it go?” In his voice is an eagerness to see the owl released into the wild again.

“No. I’m taking it back to the Raptor Center where they’ll treat his leg. And they’ll give him a complete physical to see if there’s anything else that needs to be taken care of. When he’s better, they’ll send him back to the wild.”

Jamie follows me up the river bank and helps me get the owl into a cardboard pet carrier I brought. We part with a handshake, two strangers who have shared together the rescue of an owl.

I take the injured owl into the clinic, a brightly lit room with metal table tops that glisten in the bright artificial lights. It is like any modern hospital examination room, except that this one is used for wild birds of prey. The doctor on-call asks if I can assist with the examination. She has a curt manner. Her main concern is the patients that come in daily, birds with broken wings, head injuries, lead poisoning. Staff and volunteers are walking tools to her, either things to use or discard. Though I am afraid that if I see any more blood I may faint, I am not willing to appear ineffectual. I will help.

The doctor asks what happened and I recount the story, showing her the fox trap. She shakes her head sadly at the rusty, metal contraption. “If you don’t mind, we’d like to keep that trap. We’ll use it for educational programs.” As I hold the owl in the crook of my arm, she sterilizes the examination table. “I’m going to anaesthetize the owl so it will be easier to take x-rays and carry out the rest of the exam. What I want you to do is let me know if it ever stops breathing.” I lay the owl on the table and anesthesia is pumped into a bird-size mask. In a moment it looks like the owl is dead, although its chest still moves with breath.

“Ugh,” the doctor grunts, “it’s crawling with lice.” She sprays the owl with a delouser and dead vermin litter the table. I begin to feel itchy all over. Before examining the owl further, she cleans and bandages its wound

I have not seen the owl’s chest move in a while. I watch carefully. Nope. No movement. “I think it’s stopped breathing.”

“Oh damn it. Hold on.” She goes away and comes back with a hand-held plastic pump. She inserts a tube down the owl’s gullet and starts squeezing the pump. The lungs, with air forced into them and sucked out, expand and contract. “Come on. Breathe!” the doctor says. The owl does not cooperate. It only breathes by the doctor’s efforts. “This is actually pretty common,” she explains. “Especially with great horneds when you give them anesthesia. Breathe, damn you!”

Then the owl does it. He takes a breath on his own. We watch another minute. The breathing is regular again. The doctor removes the tube and returns to the examination. Everything else is in order and it is time for the x-ray. “I’ll do this part as we don’t like our volunteers getting near the radiation.” She takes the owl to another room and returns after a few minutes. One of the last things we do is clip its talons, cutting off the ends much the same way a dog’s toenails are cut.

“While the film’s developing, would you mind taking its weight?” she asks. I was hoping she would ask me that. I take the owl to the room with the scale and set it down on its back, slowly removing my hands. The owl lies there, barely moving, and the scale comes to rest so that I can read its weight. Owls are not the only raptors that act just like this one. I have seen an eagle put on its back and it too lay motionless. There are always exceptions to this rule, which adds an element of danger, but finding the rule played out always impresses me.

After the doctor records the weight, we take it to a cage. The procedure is similar to the weighing. You set the bird down on its back, then take your hand away and close the door. In the process of wiggling about, and with the help of gravity, the bird stands upright again. The owl follows the rules and rolls to its feet. I give it one last look and turn my back, knowing it can expect a good, intestine-free meal this evening.

One day a group of us gave Larry a party. “I don’t want to wait until after I’m dead for a party,” he said. “I want to attend the party myself.” So we threw his wake before he died.

I brought a bouquet of rainbow colored helium balloons. Others arrived with more decorations—streamers, party hats, noise makers—and champagne. The boom box played in the background. Diana’ Ross’ *I’m Coming Out* blared, a song as much about celebrating one’s self as it is about leaping into a new stage of life. A song about Larry.

*There’s a new me coming out  
The time has come for me  
To break out of the shell  
I have to shout  
That I’m coming out  
I’m spreadin’ love  
There’s no need to fear  
And I just feel so glad  
Every time I hear:  
I’m coming, coming...*

I popped the champagne bottle and offered Larry a glass.

“No thank you. I can’t drink that anymore. But you all drink as much as you want. I want you to have a good time.”

Permission given, we partied. There were a half-dozen of us gathered, plus the occasional nurse who popped in to give Larry his or her regards. Except for the nurses, everyone gathered in his small room was either fellow AIDS patients on protocols like his, or volunteers like myself. Neither that day—nor any other day—did I ever see evidence of a biological family in Larry’s life. Not even at his memorial service.

At one point during the party Larry needed to use the bathroom. Gingerly he got out of bed and used a walker to slowly cross the room. This twenty-year-old boy moved with the frailty of a ninety-year-old man. Watching him made me realize that AIDS is really a disease that propels one into old age. It isn’t just that the immune system sickens; the whole body becomes infirm. The skin dries up; hair thins and falls out in handfuls; bones wither and weaken, able to crack like a Thanksgiving turkey’s wishbone.

Eventually Larry made it to the bathroom. Though seeming to need help, he refused and went in alone. With Larry out of the room, we grew quiet. I was not the only one pretending to be cheerful, and with Larry momentarily away, we let our guard down.

“Oh no! Not there, too!” we heard him exclaim. Larry laughed. In a few moments he was back in the room. Smirking he said, “I can now say there’s not a single spot on my body that doesn’t have a lesion.”

We laughed, pretending not to be horrified. If Larry could take this as a joke, who were we to consider it otherwise?

King, Larry’s officially assigned AIDS buddy, raised his glass and made a toast. “To Larry. We love you.”

“To Larry!” we called out and drank as he looked on joyfully.

Just when I thought a human couldn't possibly get thinner, Larry surprised me. Maybe his bones themselves got smaller, too. A couple weeks after his party something wasn't right, a tension missing. The taut rubber band inside him that kept everything whirring lost its elasticity.

"See that picture over there?" he asked. "That cute young thing." I looked where he was pointing, a photograph of a young man standing on a pier wearing tight, yellow shorts. The young man was deeply tanned, and had beautiful blond hair mussed by the wind. He was an attractive youth who didn't seem to have a care in the world, the kind of person who went through life knowing he'd always be twenty.

"That's me," Larry said, still pointing. His finger nails were long and unclipped, making his hand look even bonier, the appendage of a recently killed chicken, dried out by the sun. "I was pretty, wasn't I?" he asked.

"Yes. Very." His eyes were the only part of his body unchanged. These were the eyes of that same carefree boy in the photograph. They did not show a glimmer of worry or fear.

"Oh well," he shrugged. "It's nice to be able to say you were pretty once."

"You still are, you know," I said, trying to sound convincing.

"And you need glasses!" He laughed. I envied his cheerfulness. I could not imagine going through what he had with the same carefree ease. This was how he always lived his life, so why should it be any different at its end? I wondered, as I gazed into his blue eyes, if I could cultivate such traits before it was too late.

"I'm tired," he said. "I'd like to take a nap." He lifted his hand up, and I gave the bony, purple fingers a light squeeze. Smiling, he closed his eyes. I turned around and left him to his sleep.

*One day I walk through the intensive care unit where cages lie neatly stacked on top of each other, full of birds that sit on the border between living and dying. I look into*

*the cage marked “Bald Eagle.” I see Sunnye there, lying in a tiny bed, tubes attached to her arms. She lifts her head, her eyes blinking at the uncomfortable light. Her medications are making her blind now and she won’t blink much longer.*

*I go to the cage marked “Coopers Hawk.” I see Randy sitting in the corner. He lifts his injured wing, and then drops it. He turns his head away, closing his eyes. He doesn’t like being seen like this, sick and weak. It’s embarrassing. Maybe if he closes his eyes I won’t see what he has come to.*

*In the cage called “Kestrel,” Kerry grips the top of the cage hanging upside down. He cries angrily, wings beating against the wire mesh, “I’ll get out of here. Just wait and see!”*

*In the corner is the last cage, “Great Horned Owl.” It is Larry. All his feathers are gone, lying on the floor in great big piles like mounds of autumn leaves. With all his feathers gone he is so scrawny. Slowly his purple head lifts up and he looks at me. He smiles, glad that someone remembered him and came for a visit.*

When I return to the Raptor Center for my volunteer shift, I look for my owl. He isn’t in his cage, so I think that he has been moved to the flight room. Maybe I will get to exercise him that day. As I am leaving the room with the cages, a staff worker walks by me. Then he does a double-take and comes back. He seems to know who I am, but I have never seen him before. “It’s you,” he says familiarly. He pauses, his eyes suddenly looking sad. “I’m sorry.” I nod my head slowly, pretending to know what he is sorry about. Then he walks away.

I find my flight crew waiting for me and we go through our usual procedures for exercising the birds. That day we are assigned two red-tailed hawks and a vulture. No great horned owls. I am glad we are doing the vulture. That makes me happy. Though the vulture may have viewed its day otherwise, for me, it was a visit with an old friend.



After flying our birds, taking their weights, and returning them to their rooms, I try again to find my owl. I glance in the big flight room. I don't see him. Perhaps he is hiding where I can't see. Then I check the clinic. The clinician for the day doesn't know about the case and looks through her records. Nothing. Not even a record of the owl's having been there. I worry, remembering that strange encounter with the man who felt sorry for me.

The original doctor I assisted comes in. "I'm afraid I have bad news," she says. "The owl you brought in died a couple of nights later. Turns out he had meningitis. Even if he never got into that trap, he would have died anyway. At least he died here in some comfort." She returns to her current, living cases.

I walk out and enter the volunteer lounge, thankfully empty, and sit down. I put my head in my hands and close my eyes. This is exactly what I had hoped to avoid when I became a volunteer. To love another being only to see him go away. As I cry for the dead owl, all the other griefs inside me call their stories.

Every time I have sat with a dying friend, be it Larry or Sunnye or Randy or Kerry or Mark or Perry or Ed or Keith or John or Jeff or Richard or Andy or David or Frederic or Mahlon or Bill—or whoever else was dying that day—I have wished the same. Sit up. Get out of bed. Put some weight on your bird bones. Return with me to the world and stay on until we all finally die, years and years from now, at a much more appropriate time.

I often think of that owl I rescued, of how over and over again I have not been able to stop death. Keeping my eyes open all night long, barely blinking, would not do the trick. Nor willing it away. Not prayers to whatever gods I could name at the moment, hoping that should I call for the right one the miracle would happen. Nor holding my friend's hand and filling our touch with every single bit of love I have. Not even love. That great force that can besiege hatred and rage.

I thought it would be different this time. I would at last thwart Death, for it was my turn to finally have a victory. The owl had not been saved from dying. It had only been saved from a metal fox trap digging into its leg in its last moments. In the end, maybe that is the best we can do for the dying, take the fox trap off.

*I take Larry into my arms, holding him in the crook of my arm like a baby. His eyes are closed as his chest remains motionless. "Okay Larry," I say, "it's time. Wake up and fly!" His eyes open and gaze into mine, orbs of wonder and surprise. I throw him into the air. He wobbles slightly, unused to sky ways. And then it all makes sense and he is airborne. Before soaring to the place where eagles and vultures dwell, he looks down at me one last time. His great silver wings fold briefly for a final gesture to the living. Then he is gone. A tiny glint in the brilliant azure sky.*