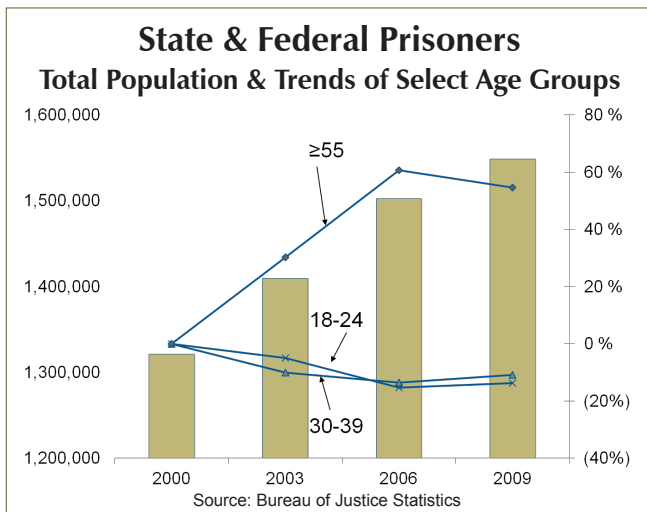




RESPONDING TO THE NEEDS OF AN AGING PRISON POPULATION

America’s criminal justice system is facing new challenges that reflect the changing demographics of the prisoner population. In particular, the number of older adults in prison is exponentially growing: the percentage of prisoners age 65 and older has grown by 67 percent in the past four years – even though the total state/Federal prison population stayed flat. In the past decade, between 2000 and 2009, the number of sentenced prisoners under state and Federal jurisdiction increased 17 percent, while the number of older prisoners (prisoners aged 55 or older) increased 79 percent.

various special considerations that need to be examined when accommodating this aging prison population. The 29 participants at this meeting were national experts in correctional health care, academic medicine, nursing, and civil rights. The meeting was funded by the Jacob and Valeria Langeloth Foundation, and was convened with the goal of producing a list of action items that could be pursued to advance a policy agenda to optimize older prisoner health care. Below are consensus action recommendations.



The implications of this growth are momentous for behavioral, medical, and social considerations.

To assess and evaluate the challenges an older prison population creates for the criminal justice system, an interdisciplinary meeting was organized at John Jay College of Criminal Justice in New York City in 2011. The purpose of this meeting was to create a policy agenda proposal for improving the care of older prisoners in America’s criminal justice system. When applicable, the participants identified some of the knowledge gaps that need to be addressed to create effective policy. In addition, the participants identified

Recommended Actions

Define “Older Prisoner”

The terms “older,” “elderly,” and “geriatric” are subjective terms in the criminal justice field. They lack a consistent and clear definition across the field. This inconsistency creates challenges in the collection and reporting of standardized data that specifically addresses the older prisoner population, such as medical and health needs and costs.

- Develop and adopt a nationally accepted and consistent definition of “older prisoner.”
- Define “older” or “geriatric” prisoners as prisoners who are aged 55 or older.

Train Staff and Health Care Providers on Aging

The availability of geriatric training programs for professionals outside of healthcare, such as correctional officers, is limited. Developing and implementing geriatric training programs would create opportunities designed for criminal justice professionals, namely correctional healthcare staff, correctional officers, and custodial staff, to become knowledgeable about aging and the needs of older adults. This training would help to create an informed and aware workforce.

- Implement training programs on aging, and ensure staff become trained and aware of common health conditions and the diverse needs of older adults.

Define Prison-Based Functional Impairment

While a definition of functional impairment – the inability to perform daily physical tasks necessary for independence – exists, a definition of prison-based functional impairment does not. Independence in the correctional setting differs from independence in the community. For example, in the community, an individual may be able to get into his bed – which is low to the ground – and is thus functionally unimpaired. This same individual, however, may be unable to climb onto a top bunk, which is what may be expected in prison, and thus experiences prison-based functional impairment. Identifying, triaging, and stratifying the differences between functional impairment in prison and functional impairment in the community would give correctional staff the opportunity to identify older prisoners in need of additional supervision, assistance, and support due to functional impairment.

- Establish a definition to delineate the differences between prison-based functional impairment and functional impairment in the community.
- Define those activities of daily living that are necessary for independence in prisons.

Develop a Tool for Correctional Dementia Screening

With the prisoner population growing older, medical conditions that are common among older populations, such as dementia, are increasingly present in correctional settings. Not only is age an indicator of the potential prevalence of dementia among older prisoners, prisoners often possess common risk factors for dementia, such as traumatic brain injury, low educational attainment, and drug and alcohol abuse.

- Develop an optimal cognitive screening tool for screening prisoners for dementia. Screening for dementia has the potential to lower health care costs and contribute to a safer environment for prisoners.

Expand Research on Older Women Prisoners

Currently, women account for five percent of the total prison population aged 55 or older. Aging female prisoners have different and diverse needs compared to their male counterparts. Women use more health care services than men, have different health care needs, and have different health care utilization patterns. Further research on the issue of the growing population of aging women in prisons can guide and inform criminal justice professionals on the unique health and social issues that may impact this population.

- Expand research on the specific needs of aging women in prison.

The growing number of older prisoners in America's prison system has significant implications on adaptations and changes that are necessary to safely, securely, and responsibly meet the unique needs of this population.

Expand Research on Geriatric Housing Units

Correctional facilities are facing challenges to successfully address the housing needs of an aging prison population. Wheelchairs and walkers are just two examples of transport and ambulatory aids that many prison facilities are not yet equipped to accommodate. Geriatric housing units might bring aging populations together in centralized locations and have the potential to enhance prisoner safety, decrease the costs of care, and increase accessibility of care.

- Expand research on geriatric housing units.
- Develop new plans for a continuum of care that runs the gamut from community independent living to assisted living to skilled nursing care.
- Develop validated criteria for long-term care classification that include patient preference, functional and cognitive assessments, and/or interdisciplinary assessment.

- Consider age-friendly architectural details such as low beds and toilets, wide doors for wheelchairs and assistive devices, and proximity to the dining hall in any new construction plans.

Expand Research on Transitional Programs

For all prisoners, regardless of age, developing a plan for and managing their needs, including health and behavioral health care needs, upon reentry into the community is immensely important. This is increasingly significant considering the high rates of mortality, homelessness, reincarceration for parole violations, and high use of emergency medical services following release. Post-release transitional programs have been successful at enhancing access to care and reducing emergency room visits for chronically ill, recently released prisoners.

- Expand research on the issue of post-release and transitional programs to inform criminal justice professionals about maximizing post-release outcomes.

Create Early Medical Release Policies

Medical release policies focus on prisoners whose age or health limits the risk they pose to the community. Releasing these prisoners has the potential to save correctional departments substantial amounts of money.

- Develop uniform, transparent medical eligibility criteria for compassionate/medical release. Ensure that the criteria developed reflect the ways that people experience serious medical illness and death.
- Address barriers to accessing early release, when medically appropriate.

Expand Research on Prison-Based Palliative Care Programs

While hospice care focuses on people who are actively dying, palliative care focuses on providing guidance and symptom control for seriously ill people. Palliative care has demonstrated, in community-based settings, the ability to improve quality of life while reducing health care costs. With the increase in aging prison populations,

many older prisoners will develop a serious medical illness that may ultimately lead to their death in prison. These individuals may greatly benefit from the care improvement offered by palliative care.

- Expand research on the benefits and cost-savings measures offered by palliative care.

Conclusion

For health, safety, and fiscal reasons, criminal justice professionals, including those involved in correctional health care, must take steps to identify the diverse needs of the older prisoner population, and ensure that the care, expectations, and services provided in prisons are an accurate reflection of the health and safety needs of this group.

Additional information can be found in Williams, B., Stern, M., Mellow, J., Safer, M., & Greifinger, R. (2012). Aging in correctional custody: Setting a policy agenda for older prisoner health care. *American Journal of Public Health*, 102(8).

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