

SAMPLE LETTER

Dear (Legislator):

Our state needs to adopt a release process to reduce the lengthy time-served requirement for older people in prison for those 60 and older. Legislation must be introduced to strengthen existing policy regarding geriatric incarceration.

It is well documented that people in prison experience accelerated aging due to harsh prison conditions, inadequate health care, long-term trauma and loneliness, and increased isolation. People in prison are considered geriatric at age 55 or older.

Geriatrics are far less likely to re-offend. They are also the fastest-growing population group, and due to their increased health care needs, the cost of their care is staggering. Using tax dollars on this low-risk/high-cost population makes no sense. By offering geriatric release, money could be spent on rehabilitation or initiatives that curb criminalization. All states have some form of geriatric and/or medical release, but it is simply not enough.

Geriatric parole is not guaranteed as release is up to the Parole Board. By the time an elder is up for parole, they would have already served much of a long sentence. Due to the disproportionate number of long and life sentences in our country, especially among black and brown populations, most are likely to die in prison.

The human cost of lengthy incarceration is beyond measure. For geriatrics, time is running out to see their remaining loved ones. We can only address the vast societal consequences of geriatric incarceration when we have humane, socially responsible, and cost-effective policy in place,

Our state policies must address the issue of geriatric release. Prisons should not be de facto nursing homes. I look forward to discussing our state's policy agenda and speaking with you.

ISSUES TO RAISE WITH THE DEPARTMENT OF CORRECTIONS AND LEGISLATORS ON GERIATRIC CARE

(State prisons are funded by state government tax revenue, and the taxpayer costs of prisons continue to grow. The Department of Corrections provides legislators and state officials input and reports on their budgetary needs. Ask your Department of Corrections to address funding for the unmet needs of geriatrics in prison with their state budget committees.)

Palliative Care:

Implement palliative care programs and train staff in how to manage serious illnesses and end-of-life care, especially for those with substance abuse histories.

Address Dementia:

Some states deal with the growing number of prisoners with dementia by including programs where fellow inmates take care of elderly inmates with dementia. This is much needed, but the burden of care should not fall solely on low-paid people in prison. Hire staff with expertise in geriatric and dementia care.

Research and Data:

Identify risk factors for high medical expenditures among older prisoners and test interventions to improve healthcare value.

Geriatric Housing Units:

Establish specialized geriatric housing units within prisons and ensure that geriatrics can access programming, physical activity, and healthcare like the general population. Create age-friendly spaces with lower beds and proximate access to toilets and dining halls..

Safety:

Ensure the safety of older inmates from others who are younger and more violent.

Reentry

Fund transitional homes for older people to have safe, ADA-compliant housing if released without a home plan with family.