Dignity Denied: The Price of Imprisoning Older Women in California

Executive Summary

A Report by Legal Services for Prisoners with Children
1540 Market Street, Ste. 490
San Francisco CA 94102
(p) 415-255-7036 (f) 415-552-3150
www.prisonerswithchildren.org

For more information contact Heidi Strupp (ext. 321) or Donna Willmott (ext. 319).

Elder prisoners are costly to care for, yet research indicates that many of these older inmates represent a relatively low risk of reoffending and show high rates of parole success. We estimate that [releasing nonviolent prisoners over 55] would result in state savings of approximately 9 million in the budget year and significantly more in the out-years without jeopardizing public safety. – Legislative Analyst’s Office, 2003.¹

Some older inmates may be good candidates for community placement. Perhaps some who committed murder a long time ago truly no longer pose a threat to society. – California Department of Corrections, 1999.²

Prisons are alien and intimidating to the sensitivities and vulnerabilities of old age and illness. In short, providing care in prison settings poses significant challenges to ethical and effective medical practice. - National Institute of Corrections, 2004.³

Staff says all inmates are to be treated just alike. There is no differentiation, whether you’re old, crippled or whatever. – Myrtle Green, 73

The only fear I’ve got is dying in prison. – Martha Roberts, 82⁴

Aging Prisoner Crisis
California legislators currently face an urgent fiscal crisis generated by the graying of the state’s prison population. Because of “tough on crime” policies such as mandatory minimum sentences, the “Three Strikes” law, and a general reluctance to release long-term prisoners on parole, more Californians are growing older in prison than ever before. Additionally, prisons are not geared to the specific needs and vulnerabilities of older people.

The continued incarceration of frail elders – who represent the smallest threat to public safety but the largest cost to incarcerate – embodies failed public policy. California policymakers have an opportunity to create meaningful solutions to this crisis by taking measures to ensure the rights and dignity of older prisoners and create community-based alternatives to their incarceration. Such measures are in accordance with a social commitment to ensuring that society’s elders live out their lives in dignity, and are ultimately in the interest of building a safer California.

¹ Legislative Analyst’s Office, Analysis of the 2003-4 Budget Bill, Judiciary and Criminal Justice, Department of Corrections, February 2003.
⁴ Not her real name.
Scope of the Problem

- According to the most recent statistics, the state incarcerated approximately 7,550 persons over the age of 55. It is estimated that by 2022, more than 30,000 older persons will be incarcerated in California.
- The annual cost of incarcerating an older prisoner is nearly double that of a younger prisoner, approximately $70,000 a year.
- Older prisoners have the lowest rates of recidivism of any segment of the prison population and have the highest rates of parole success.
- Older prisoners face a unique set of health and safety concerns as they grow old in a system not designed to address their specific needs.

Concerned by this situation, Legal Services for Prisoners with Children (LSPC), a prisoner advocacy organization, spent nearly two years investigating the health and safety concerns of older women prisoners. As part of the investigation, LSPC surveyed 120 women prisoners over 55 incarcerated in the California state prison system, which represents approximately 34% of over 55 female prison population. Additionally, LSPC conducted a series of semi-structured interviews with older women prisoners, their families and friends. The results of this investigation as well as policy recommendations are presented in our report *Dignity Denied: The Price of Imprisoning Older Women in California*.

Summary of Findings

- Older prisoners must contend with prison rules that require them to drop to the ground for alarms, climb onto top bunks, and undress for strip searches. Additionally, the built environment (for example, the limited number of bottom bunks, cells without handrails, and long-distance walks to the dining hall) contributes to making life difficult for older people.
- Most older women prisoners are housed eight to a cell with only minimal consideration for an individual’s age, health status, or physical limitations. While many older women articulate the frustrations of overcrowding, noise, lack of privacy, and intergenerational tensions, they also reaffirm the importance of maintaining social relationships with younger prisoners.
- There is no retirement age in the CDCR; all but the most ill and disabled prisoners are required to work or participate in a prison program. Failure by prison staff to adequately consider an individual’s age, abilities, health status, and physical limitations when issuing job assignments routinely puts older prisoners at risk for injury.
- The CDCR’s systemic failure to provide humane medical care was a prominent theme in the surveys. Respondents cited several issues: the barrier to care imposed by the $5.00 co-pay, long delays in receiving treatment, difficulties in obtaining medication in a timely manner, lack of preventative care, inadequate nutrition, and lack of mental health services.
- Older women reported a pervasive fear of abuse, from both fellow prisoners and staff.
- Nearly half of older women responded “yes” to questions that are indicators of depression. The majority identified outside support of family and friends as their greatest source of emotional support during their incarceration.

Statistics at a Glance

- Three out of four respondents are serving sentences of either Life or Life Without Parole. (n = 90/120)
- Almost half of respondents have been in prison more than 16 years. (n = 56/120)
- Half of respondents identified domestic violence as a factor in their crime. (n = 61/120)
- Over half of respondents report falling in the last year. (n = 61/120)
- Nearly half of respondents report being injured performing a prison routine, such as climbing onto top bunks, dropping to the ground for alarms, undressing for strip searches. (n = 51/120)
- One out of four respondents reported difficulty getting help during an emergency. (n = 33/120)

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5 California Department of Corrections, Data Analysis Unit, *Prison Census Data as of December 31, 2004*, Ref. No. CENSUS1, February 2005, Table 5.
• Two out of three respondents report being assigned to a prison job difficult to perform, such as janitorial positions, yard crew and kitchen duty. (n = 73/120)
• Nearly half of respondents experience difficulties paying the $5 co-pay. (n = 51/120)

Recommendations

LSPC presents two categories of recommendations: measures to reduce the number of older prisoners, and short-term recommendations to ameliorate the conditions of confinement faced by older prisoners. Geriatric prisons are not a recommended solution because of CDCR’s troubled history of providing specific and specialized care to its most vulnerable prisoners. Highlighted recommendations follow.

Reduce the Numbers of Older Prisoners:
• Implement the Legislative Analyst’s Office (LAO) recommendation to save the state over $9 million dollars in a single year by releasing all nonviolent prisoners over 55 on geriatric parole.
• Expand the Compassionate Release law to include older and disabled prisoners.
• Establish a home monitoring program for older prisoners to serve the remainder of their sentences on home confinement.
• Reform current parole policies to ensure release for eligible prisoners serving indeterminate sentences
• Repeal California’s “Three Strikes Law” to curb the exponential increase of the elderly prisoner population.

Improve the Lives of Older Prisoners:
• Establish training for correctional staff on working with older prisoners.
• Appoint an ombudsperson who reports directly to the legislature about CDCR’s progress in enforcing new policies aimed at meeting the specific needs of older prisoners.
• Establish a yearly comprehensive geriatric assessment for prisoners over 55.
• Establish an “over 55” status affording older prisoners age-specific consideration and assistance regarding housing, programming, and activities of daily life.
• Designate a certain number of cells within the general population housing units as “over 55” cells.
• Establish a retirement policy for prisoners coupled with the development of age-appropriate activities.
• Work with community volunteers and organizations to establish age-appropriate programs and activities specially geared to seniors.
• Conduct health education classes available to prisoners on aging that include information about the unique health and psychosocial issues faced by older people.
• Eliminate the $5 co-pay prisoners are required to pay for medical visits.
• Allow pre-release prisoners to apply for MediCal benefits prior to release to ensure that benefits begin immediately upon release.
• Establish case managers to coordinate pre-release planning and post-release services designed to address the specific concerns of elderly parolees.