

Vera Institute of Justice

Criminal Justice Issues and Prisoners' Rights

<https://www.vera.org/blog/elderly-people-in-prison-present-little-risk-but-staggering-costs>

Public Facing Advocacy Writing

The amount of money we spend to incarcerate aging and infirm people is staggering: In 2009, California spent more than \$42 million in one year on medical care and continued incarceration of just 32 aging and infirm people who were chronically ill. Of these, 21 were receiving treatment in outside hospitals at an annual average cost of almost \$2 million each, and 11 were housed in a Correctional Treatment Center bed at an [annual average cost of \\$114,000](#) each.

The growing population of aging prisoners is not a new development, but there is renewed attention to the [costs of their continued incarceration](#), the provision of adequate medical care, and [policy mechanisms](#) that would allow for some of them to be released back into the community.

And what counts as aging is surprising, when it comes to prisons. While age 65 or older connote aging or elderly in the general population, researchers and departments of correction use a range of ages from 50 to 65 to define people who are aging behind bars. That's because people in prison are physiologically [seven to 10](#) years older than their chronological age due to a range of factors, including, but not limited to, the conditions and stress of incarceration and outside of prison a lack of access to adequate medical care and histories of substance use.

The number of people aging behind bars is growing at an alarming rate, due to more individuals receiving longer sentences under habitual offender and mandatory minimum sentencing laws. From 1995 to 2010, the total number of people in prison ages 55 and older grew [282 percent](#), compared to a 42 percent increase in the total prison population. This increase has had a significant impact on corrections budgets, with some states estimating that incarcerating people who are aging [costs four times as much](#) as it does for younger people. Much of this cost is due to increased medical care. Aging prisoners are [three times more likely](#) to have chronic medical issues or infectious diseases than are their younger counterparts and [eight times more likely](#) to experience catastrophic medical events, single medical incidents largely involving heart and lung conditions that result in costs over \$35,000. People in prison who are aging or infirm also consume a disproportionate amount of health care services in systems, taxing already-overstretched systems and preventing those with less serious ailments from receiving necessary medical care.

Another substantial cost of incarcerating aging prisoners is overtime pay for correctional officers tasked with guarding prisoners who require off-site treatment. In one case, a person serving a sentence who was in a vegetative state was guarded by two round-the-clock correctional officers at an outside nursing facility at a rate of [\\$2,317 per day](#).

Faced with these challenges, many states are looking for ways to save. One option is to release some people aging in prison before their sentences are finished. The majority of states have policies in place that allow for the release from prison of people who are terminally ill, incapacitated, or in some states simply age-eligible. Such policies are known by a variety of names, including compassionate release, medical parole, medical clemency, and geriatric parole. States, however, [rarely use these mechanisms](#) despite crowded institutions and rising costs, largely due to lingering public safety concerns. However, research has shown that elderly people released from prison have [much lower recidivism rates](#) than their younger counterparts.

Faced with the challenges of providing adequate healthcare and necessary accommodations, state prison systems are approaching a turning point to either construct new, accessible geriatric facilities that house aging people or to expand the use of current policies that allow for the release of eligible incarcerated people into the community. By coming together to develop and evaluate effective strategies, corrections officials, policymakers, and researchers can reduce the number of aging people in prison and ensure that the people released under these policies receive appropriate and necessary services.

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