

CARING FOR ELDERLY PERSONS INVOLVED IN THE JUSTICE SYSTEM

Considerations for Law Enforcement and Healthcare Providers

IMPACT OF INCARCERATION ON HEALTH

ACCELERATED AGING

Physiological age of prisoners is often 10-15 years older than chronological age. (1)



CHRONIC DISEASE

Older incarcerated individuals more commonly have chronic health conditions than younger prisoners. (2)

REINTEGRATING INTO THE COMMUNITY

Formerly incarcerated people often have less support on the outside and may be estranged from family and previous support systems.

MENTAL HEALTH

Disconnect to outside world and lack of functional environments for older adults can lead to increased risk of clinical depression and suicide-related behaviors. (3)

CHALLENGES FACED

PRISON ADLS (PADLS)

Prison environment and routine make certain tasks more difficult.

This includes lack of freedom to plan and prepare meals, mobility, managing medications, and hygiene.



LACK OF RESOURCES

Prisons are not healthcare facilities.

There may be difficulty accessing specialists, following up on chronic issues, using assistive devices, following specialty diets, and more.

QUICK FACTS



INCREASING AGE IN PRISONS

Incarcerated people ages 50 and older are the fastest growing incarcerated population, and by 2030 they will comprise 1/3 of US prisons. (2)



OLDER INCARCERATED WOMEN

Older female prisoners are disproportionately stressed by the inability to care for children or elderly female members as older male prisoners. (4)

REFERENCES

- 1.Kouyoumdjian FG, Andreev EM, Borschmann R, Kinner SA, McConnon A. Do people who experience incarceration age more quickly? Exploratory analyses using retrospective cohort data on mortality from Ontario, Canada. PloS One. 2017;12(4):e0175837
- 2.Statistics USD of JO of JPB of J. National Inmate Survey, 2011-2012.
- 3.Barry LC, Wakefield DB, Trestman RL, Conwell Y. Disability in prison activities of daily living and likelihood of depression and suicidal ideation in older prisoners. Int J Geriatr Psychiatry. 2017;32(10):1141-1149.
- 4.Barry LC, Adams KB, Zaugg D, Noujaim D. Health-care needs of older women prisoners: Perspectives of the health-care workers who care for them. J Women Aging. 2020;32(2):183-202.

AREAS OF IMPROVEMENT



DELIRIUM PREVENTION

In the case that a delirious older adult must go to the ED, it is best to minimize tethers, reorient to day vs night and, have a companion.



CONTINUITY OF CARE

When a healthcare provider is seeing an incarcerated patient, it is best to minimize the need for follow-up as it is much more difficult to coordinate care through the prison.



LAW ENFORCEMENT AWARENESS

Dementia and delirium can often be confused for disorderly conduct, so law enforcement training to distinguish between these situations is essential for safe management of these patients.