

**TESTIMONY OF RUTH FINKELSTEIN SCD
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BEFORE THE NEW YORK STATE SENATE COMMITTEE ON CRIME VICTIMS, CRIME AND CORRECTION
AND THE SENATE STANDING COMMITTEE ON JUDICIARY**

**JOINT PUBLIC HEARING
"PAROLE JUSTICE: HOW THE ELDER PAROLE AND FAIR & TIMELY PAROLE BILLS WILL IMPROVE PAROLE
RELEASE LAWS AND PUBLIC SAFETY IN NEW YORK STATE"**

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My name is Ruth Finkelstein and I'm the executive director of the Brookdale Center for Healthy Aging, a research and policy center at Hunter College of the City University of New York. I am also a professor of public health. The Brookdale Center conducts research and promotes policy and practice to make it possible for *everyone* to age as well as *anyone* can.

I am here today to testify in strong support for a fair elder parole process in New York State by passing both Elder Parole (S15A/A.3475A) and Fair and Timely Parole (S7514/A.4231A). The two bills together would allow people over 55 who have served at least 15 years to be considered for parole

I am surprised when people ask, "Why is elder parole an aging issue?" Here's why.

One in every four prisoners is an older adult. The physical and mental stresses of living in the prison environment have created a health crisis in the prison system, with prisoners in their 50s exhibiting sickness and disability at a rate equal to community-dwelling people in their 70s and 80s. Nothing about the Correctional Health System is geared for this population. Nor is the living environment, work assignments, or disciplinary structures. Not surprisingly, death rates are rising, with an average of one death every three days even *before* COVID. The average age of death for those over 50 is 58 years. These startling human outcomes show prisons to be an apartheid system within our country. If New York State's prisons were a country, a life expectancy of 58 would rank it among the ten worst countries in the world.

In general, prisons lead to worse health outcomes. While 31% of the community-dwelling population has had a chronic condition (e.g., asthma, hypertension, heart disease, arthritis, liver problems), 44% of incarcerated people do. For incarcerated people aged 50 or above that number skyrockets to over 72%. Along with the physical impacts of incarceration on the older population, mental health issues are an equally urgent concern. Older incarcerated people experience higher rates of cognitive impairments, depression, anxiety, and trauma. Prison is bad for people's physical and mental health and it is REALLY bad for the health of older people. So bad that we call it "accelerated aging" because people in prison have disease and disability equivalent to people 10-15 years older who are community-dwelling. So being 55 in prison is like being 70 on the outside.

Needless to say, prisons are not designed for older people. The physical plant is built for younger people. Expectations of daily routines are designed for younger people. Work assignments are designed for younger people. Healthy food is a challenge for everyone – and those requiring special medical diets encounter extreme difficulty. And the physical and mental health services available are barely adequate for the healthiest, and often sadly lethal for the less so.

To what end are we keeping people locked up? While the overall population of people in prisons in New York State is declining, the proportion who are over 55 is increasing steadily because of long and indeterminate sentences – even more common in the 1980's and 1990's – which leave people still in prison who were convicted decades ago. There is virtually no risk to community safety from release of older prisoners, who have the lowest re-incarceration rate of any age group. Re-incarceration rates for those over 65 in New York State is essentially 0. But there is grave risk to the well-being of those left inside.

Furthermore, the costs to the State of maintaining older people in the prison system is extraordinary. Research shows that annual costs for those over 55 are 2-4 x higher than for others – ranging from \$100,000 to \$240,000 per year (as compared to \$60,000 per year for younger people). And what are we getting for this expenditure? There is no increase to community safety, as there is virtually no risk from people returning home at this age.

Almost all people inside who are over 55 have already served 15+ years. Many are already parole-eligible, yet face denial after denial based solely on the one thing they can never change,

namely their crime of conviction. People are dying behind bars no matter how much they have done to improve themselves and regardless of whether they pose a risk to community safety.

New York State is best served by releasing people while they can care for themselves, find employment and housing, and make positive contributions to their families and communities. Upon release, formerly incarcerated older adults often make important contributions to their communities, including by interrupting gun violence, mentoring young people, and ultimately promoting community safety.

To prevent our state prisons from becoming *de facto* nursing homes, passage of The Elder Parole and Fair & Timely Parole bills is a modest first step. Some people erroneously believe that these bills require people to be released. They do not. What they do require is that people aged 55 or older who have served 15 or more years on their current sentence have the opportunity to make their case for release to the Parole Board.

Too often, people in prison are left out of the conversation, including conversations about “aging issues”, no doubt in part because of racism – and the results are painfully clear. Please support this rational, humane, and fiscally sound policy for elder justice.