Issues and Challenges faced by Ageing Ex-Offenders

Introduction

Older people have traditionally been overlooked by the criminal justice system (Wahidin, 2010). The absence of attention to the elderly in the criminal justice system has been regarded as a 'latent form of ageism'. Studies have identified a series of unique problems that elderly population experience in prison, which have previously gone largely unnoticed in many governments' policy and practice. While some research has briefly contemplated the implications of the experiences for resettlement, there is very little known about the re-integrative needs of elderly prisoners. The lack of research on the elderly prisoners might be the reluctance to support older prisoners because of the serious nature of crimes that some of these individuals have committed particularly life-sentenced prisoners. Some prison officers have expressed that working with elderly prisoners represents a challenge to their working status, since elderly inmates tend to be passive and predictable and working with them equates to domestic 'women's work' which runs counter to their organisational ethos (Crawley and Sparks, 2006).

Findings from different studies indicate that elderly prisoners have very unique problems within the prison setting which can exacerbate problems of release and resettlement (Davies, 2011). For example, it has been suggested that many elderly prisoners may experience heightened psychological shock upon being incarcerated (Cohen and Taylor, 1972). Additionally, they are at increased risk of losing contact with friends and family and simultaneously face a number of health-related issues (Prison Reform Trust, 2008). Some elderly prisoners particularly those who have served prolonged sentences, might also experience strong effects of 'institutionalisation', which meant that they might lack basic essential skills for coping upon release (Kerbs, 2000).

Definition of older prisoners

Goetting's (1984) classic typology identified four main sub-groups of elderly prisoners. The first group is the 'old offenders' who have been imprisoned after committing an offence for the first time aged 55 or older. The second group is considered the 'old timers' who are imprisoned before the age of 55 and who have served over 20 years of their prison sentence. The third group is the 'career criminals', the recidivists who committed their first offence before 55 and have spent their lives in and out of prison. The fourth group is the 'young short-term offenders' who were incarcerated before 55 and have served less than 20 years in prison (Crawley and Sparks, 2006). A further fifth group might be identified in the form of an 'historic offender' who has committed a crime in their youth but has only been convicted in old age. Based on the different sub-groups that Goetting identified, one cannot assume that all elderly prisoners share the same experiences in prison. However, many of the problems that these different types of elderly prisoners encounter do overlap.

Release and Resettlement

Many older prisoners need help to prepare for release. Some will have served long sentences and lost all contact with their families and communities, or the conditions of their release will prohibit them from making contact. Life in the prison is completely different from life in the community. Without adequate preparation, most elderly prisoners may find it difficult to cope after their release. The psychological consequences of long periods of incarceration may interfere with the transition

from prison to home, impede an ex-offender's successful reintegration into a social network and employment setting, and may compromise an incarcerated parent's ability to resume his or her role with family and children. The implications of the psychological effects for parenting and family life can be profound (Haney, 2001). Parents who return from long periods of incarceration dependent on institutional structures and routines cannot be expected to effectively organize the lives of their children or exercise the initiative and autonomous decision making that parenting requires. Those who had suffered the negative effects of a distrusting and hypervigilant environment will find it difficult to promote trust and authenticity within their children. These older ex-offenders will have the tendencies to socially withdraw, remain aloof or seek social invisibility which would cause dysfunctionality in the family setting in which closeness and interdependency is required.

Psychologically, reintegration for these older prisoners might be particularly challenging. Jewkes (2005) argues that life-sentenced prisoners are in a permanent state of transition. Having spent a considerable period of their lives in prison, they are less likely to disengage with previous identities which make reintegration particularly problematic, since these prisoners must engage in a new environment without necessarily being psychologically ready to do so (ibid.). This relates to the concept of institutionalisation which is created by the monotony of the prison lifestyle and results in apathy, decreasing motivation and dependency on routine (Irwin and Owen, 2004). When the elderly prisoner was in prison, the prisoner exists in an almost robotic state as they have a strict day-to-day structure to follow during their incarceration in prison. The prison experience has the potential to strip a prisoner of responsibility by making decisions for him (Pyror, 2001). Due to a prolonged period of exposure to the prison system, the elderly prisoner is at risk of losing the ability to function as an autonomous, responsible being.

According to a study by Crawley and Sparks (2006), many of the elderly prisoners that they had interviewed lacked the enthusiasm and excitement necessary for dealing with life after release. In their research, they observed that the severe health problems experienced by many such prisoners meant that they had become dependent upon both the formal and informal healthcare provided in prison. They were extremely apprehensive about how they would cope without any support for their health considerations after leaving prison and some expressed a desire to remain in prison beyond their release date. They felt they had insufficient number of years left to live and did not have the energy to start a new life outside of prison. For many prisoners, moving out of prison equates to 'starting from scratch', with a limited number of resources and connections outside (Crawley, 2004). Fatalistic attitudes are therefore common against this demographic and mean that few predictions into the future are made, especially for those with serious health concerns (Flanagan, 1982).

Re-integrating into the community also demands a series of practical adjustments which might be experienced more by the elderly. Those that have been imprisoned for long periods of time will have to learn to cook, clean and take care of themselves as well as adapting to changes that may have taken place in society (Stojkovic, 2007). Adaptation might become all the more problematic in the face of hostility from the community.

The needs of older adults are significantly different from other prisoners as they tend to be sicker and require more medical attention. Higgins & Severson (2009) highlights that a significant number of older adults in prisons require specialized medical care for chronic health conditions such as degenerative arthritis, chronic respiratory ailments, cardiovascular diseases, diabetes and cancer.

Furthermore, the older prisoner population require a variety of health and social service interventions due to cognitive and emotional disorders (ibid.).

In a study conducted in Japan, Kamigaki & Yokotani (2014) examined 25 male participants who are more than 65 years old on their reintegration to society after their release. The authors developed reintegration programs that utilized the Social Development Model (SDM) to promote the successful adjustment to society and preventing them from reoffending. The Social Development Model used the concept of social bond and proposed that the lack of social networks will increase the risks of criminal behaviours while those with an extensive social network will decrease the risks of criminal behaviours (Kamigaki & Yokotani, 2014). Ten participants voluntarily participated in the reintegration programs while the other 15 did not participant in these programs. The program provided a temporary residence, money and job support wherever they decided to live. These reintegration programs embedded elderly released prisoners in multiple pro-social networks through official institutions. These pro-social networks prevented their illegal behaviours and promoted their social participation (ibid.). Continuous support from the day care staffs might function as regular monitoring, regardless of whether the staff intended to monitor them. Regular monitoring might decrease their criminal attempts because they fear being exposed for their crimes. This study shows that reintegration of older adults into society is more effective when done in the context of a prevention program and welfare support (ibid.).

Issues and Challenges after release

The literature has consistently pointed to difficulties in post-release planning and support for older prisoners. The causes underlying this shortcoming include a lack of coordination for example funding, resources and service provision between prisons, community correctional services and community agencies, priority being provided to younger inmates either due to higher perceived risk of reoffending or higher perceived chances of successful rehabilitation and re-integration and a lack of strategies to address the needs of older prisoners, combined with restrictive criteria for the early medical release of terminally or chronically ill prisoners. The need for support in negotiating the transition from prison may be amplified for older prisoners, who may experience higher levels of chronic illness (Crawley, 2004). In addition, those who have been incarcerated for longer periods are likely to have more difficulty adjusting to community living, particularly if they have lost family and social support, as well as housing, possessions and the capacity to be employed (ibid.).

The complexities of re-establishing life after release involve a complicated group of factors which are intertwined with one another. These factors include finding accommodation, securing formal identification, re-establishing ties with family, returning to high-risk places and situations, high cost of healthcare and the daunting challenge of finding a job, often with a poor work history and old age may make it difficult for them to secure employment. Recognizing the challenges that elder prisoners faced in the immediate post-release period and understanding how these ex-offenders succeed or fail in overcoming them may explain the long-term course of reintegration into society (Visher & Travis, 2003). Post-release success often depends of the nature and quality of services and support provided in the community, and this is where the least amount of societal attention and resources are typically directed. There should be clear recognition that ex-offenders face significant personal, social and structural challenges that they have neither the ability nor the resources to overcome on their own.

Gainful employment is the most critical aspect of post-prison adjustment (Haney, 2001). The stigma and the psychological effects of incarceration require active and prolonged agency intervention. Job training, employment counselling and employment placement programs are essential parts of an effective reintegration plan. Finding and maintaining employment are critical dimensions of successful reintegration into society (Mallik-Kane & Visher, 2008). Research has shown that employment and higher salary are associated with lower rates of criminal activity. At the same time, most of the elderly prisoners face many obstacles in gaining legitimate employment, including low levels of education, limited vocational skills and work experience, and reluctance on the part of the employers to hire older ex-offenders (ibid.).

Discussion and Suggestions

Most of the literature on elderly prisoners addresses the issues this group faces while in prison. Currently, there is a lack of literature that addresses the issues that elderly ex-offenders face upon their release. The following are some suggestions that can be considered to address the challenges that elderly ex-offenders face to ease their transition into society.

Currently, in Singapore, there is no special reintegration programmes specially catered for elderly ex-prisoners. According to a study by Tan (2014), a majority of the elderly ex-offenders will live in half-way houses after their release from prison as these former prisoners do not have immediate housing and employment arrangements. As elderly ex-offenders have special needs due to their health and old age, finding accommodation for the elderly ex-offenders require one to take into account getting a place that has elderly-friendly facilities for them. One suggestion is to include a few elderly-friendly toilets which will include features like support railings, and large flush and shower activation buttons in the halfway houses.

Studies on elderly inmates highlighted specialized housing which has well-trained staff to handle elderly prisoners and this includes having recreational programs and classes for this group of inmates. For example, in the United States and Australia, a number of strategies have been presented and implemented with a view to managing the issues surrounding older offenders in the prison environment. In these countries, there are specialised prisons designed to accommodate older prisoners with chronic health concerns and/ or terminal illnesses, including Laurel Highlands, a geriatric and special needs facility in Central Pennsylvania and a 50 bed prison in Singen, Germany (Gaseau, 2001). The reported benefits of such units are similar to that of the nursing home prisons, with centralised resources reducing costs associated with staffing, medical care and transport, and age-segregation of prisoners alleviating issues around prisoner victimisation and enabling more targeted programming and rehabilitation efforts (Baidawi et. al., 2011).

We could adopt the idea of having specialized housing for the elderly ex-offenders for their accommodation arrangement. This requires a pool of well-trained healthcare workers to care for the elderly, a well-equipped elderly-friendly facilities and having a group of staff and volunteers who are willing to engage the elderly ex-offenders with daily recreational activities and conduct employment training for them which would allow them to secure a job. This specialized housing can be a permanent or temporary housing for this group of ex-offenders as it would be heavily dependent on the amount of funding that can be granted by the government and other relevant organisations.

As elderly ex-offenders may lack the required skills to be gainfully employed, most of the elderly ex-offenders find it difficult to secure a job. Depending on their health status and the nature of the job, some employers may not be willing to employ elderly ex-offenders. In Singapore, relevant organisations such as SCORE, ISCOS and WDA may consider organising employment training that is specially catered for elderly workers. Apart from that, the jobs offered to this group of ex-offenders should not be too taxing as employers have to take into consideration the health status of these elderly ex-offenders. Employers need to be more flexible when employing such people.

In the United Kingdom, there are two organisations which are currently active in assisting elderly ex-offenders re-integrate into society; Restore support network and RECOOP (Resettlement and Care for Older ex-offenders and Prisoners). The following are the primary objects of the aforementioned organisations;

1. Aims to raise awareness of the needs of older prisoners at regional and national level;
2. Collaborates with key statutory and voluntary partners to support the rehabilitation of older offenders;
3. Works towards better understanding of the needs of older offenders' families, carers and supporters, and contributes to better support systems;
4. Supports and advises older people on release from prison to improve opportunities for resettlement and rehabilitation;
5. Supports older people with non-custodial sentences;
6. Aims to develop and provide opportunities for volunteering, training and employment.

These two organisations aim to assist older ex-offenders to have an easier transition back to society. Based on the initiatives currently being carried out in the United Kingdom, one suggestion is to have an organisation that supports the reintegration of elderly ex-offenders and providing services similar to the ones mentioned above. However, one needs to take into consideration the pool of volunteers required in running this initiative and the knowledge and funding required. Apart from that, these volunteers can be a friend to the older ex-offenders so that they have someone to talk to.

It is important to address the issues that elderly ex-offenders face upon their release as this would ensure that this group of ex-offenders is able to re-integrate into society. As there is a lack of research done in this area, it is also important to note that more research needs to be conducted to examine how elderly ex-offenders are coping with their resettlement into society.

References

Abner, Carrie. 2006. *Graying Prisons: State face Challenges of an Aging Inmate Population*. Retrieved from http://www.csg.org/knowledgecenter/docs/sn0611GrayingPrisons.pdf

Aday, R.H. 2003. *Aging Prisoners: Crisis in American Corrections*, Westport,CT:Praeger.

Baidawi Susan, Shelley Turner, Christopher Trotter, Colette Browning, Paul Collier, Daniel O'Connor and Rosemary Sheehan. 2011. "Older prisoners- A Challenge for Australian corrections". *Trends and Issues*, 426: 1-9. Retrieved from http://www.aic.gov.au/media_library/publications/tandi_pdf/tandi426.pdf

Chiu, Tina. 2010. *It's about Time: Aging Prisoners, Increasing Costs and Geriatric Release.* Retrieved from http://www.vera.org/sites/default/files/resources/downloads/Its-about-time-aging-prisoners-increasing-costs-and-geriatric-release.pdf

Cohen, S & Taylor, L. 1972. *Psychological Survival: The Experience of Long-term Imprisonment,* Harmondsworth: Penguin*.*

Crawley, E. 2004. "Release and Resettlement: The Perspectives of older prisoners, "*Criminal Justice Matters,* 56(1):32-33*.*

Crawley, E & Sparks, R. 2005. "Hidden Injuries? Researching the Experiences of Older Men in English Prisons," *Howard Journal* 44(4): 345-356.

Davies, M. 2011. *The Reintegration of Elderly Prisoners : An Exploration of Services Provided in England and Wales.* Retrieved From http://www.internetjournalofcriminology.com/davies_the_reintegration_of_elderly_prisoners.pdf

Flanagan, T.J. 1982. *The pains of Imprisonment,* London:Sage*.*

Gaseau, M. 2001. "Caring for the elderly behind bars." *Corrections Connection.* Retrieved from http://www.corrections.com/articles/11566-caring-for-the-elderly-behind-bars

Gaseau, M. 2004. "Caring for the aging inmate: Solutions for corrections." *Corrections Connection.* Retrieved from http://www.corrections.com/articles/3718-caring-for-the-aging-inmate-solutions-for-corrections

Grant, Anna. 1999. "Elderly Inmates: Issues for Australia". *Trends and Issues,* 115:1-6. Retrieved from

http://aic.gov.au/media_library/publications/tandi_pdf/tandi115.pdf

Goetting, Ann. 1984. "The Elderly in Prison: A Profile." *Criminal Justice Review,* 9:14-24.

Haney, Craig. 2001. *The Psychological Impact of Incarceration: Implications for Post-Prison Adjustment.* Retrieved From http://aspe.hhs.gov/basic-report/psychological-impact-incarceration

Higgins, D & Severson, M. 2009. Community Reentry and Older Adult Offenders: Redefining Social Work Roles. *Journal of Gerontological Social Work,* 52:784-802*.*

Irwin, J and Owen, B. 2005. "Harm and the contemporary prison", in A. Liebling and S. Maruna(eds) *The Effects of Imprisonment*, Cullompton: Willan Publishing.

Jewkes, Y. 2005. "Loss, liminality and the life sentence: Managing identity through a disrupted lifecourse," in A. Liebling and S. Maruna(eds) *The Effects of Imprisonment*, Cullompton: Willan Publishing.

Kamigaki, K & Yokotani, K. 2014. "A Reintegration Program for Elderly Prisoners Reduces Reoffending." *Journal of Forensic Science and Criminology,* 2(4): 1-8. Retrieved From *http://www.annexpublishers.com/articles/JFSC/volume-2-issue-1/A-reintegration-program-for-elderly-prisoners-reduces-reoffending.pdf*

Kerbs, J. 2000. *Elders, Crime and the Criminal Justice System: Myth, Perceptions, and Reality in 21st Century*, New York: Springer.

Lynch, J & Sabol, W. 2001. *Prisoner Reentry in Perspective*. Crime Policy Report.

Mallik-Kane, K & Visher, C. 2008. *Health and Prisoner Reentry: How Physical, Mental, and Substance Abuse Conditions Shape the Process of Reintegration*. Retrieved From http://www.urban.org/sites/default/files/alfresco/publication-pdfs/411617-Health-and-Prisoner-Reentry.PDF

Prison Reform Trust. 2008. *Doing Time: The Experiences and Needs of Older People in Prison*, London: Prison Reform Trust.

Pyror, S. 2001. *The Responsible Prisoner*, London: Home Office.

Stojkovic, S. 2007. "Elderly Prisoners: A growing and forgotten group within correctional systems vulnerable to elder abuse", *Journal of Elder Abuse and Neglect,* 19(3): 97-117.

Tan, Dorothy. 2014. *The Forgotten Generation: Incarceration and Reintegration Experiences of Older Ex-Offenders in Singapore*. Department of Sociology:NUS.

Today. 2015. *"Gray cells" wanted as Singapore's inmates age. Retrieved From* http://www.channelnewsasia.com/news/singapore/grey-cells-wanted-as/1853606.html

Visher, C & Travis, J. 2003. "Transitions from Prison to Community: Understanding Individual Pathways." *Annual Review Sociology,* 29: 89-113*.*

Wahidin, A. 2010. "How best should we meet the needs and understand the experiences of older offenders?", The Centre for Public Policy Seminars.