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Older prisoners: trends and challenges

e-brief

by Chris Angus

1. Introduction

Australians are expected to continue living longer in the coming decades, benefiting from one of the world's longest life expectancies.¹ Although this is undoubtedly a positive development, an older Australia creates numerous challenges, notably increased health and aged care costs.²

Australian prisons will face these same challenges, as increasing numbers of 'older prisoners'—commonly defined as inmates aged 50 years and over—place additional strain on State government authorities and resources.

This e-brief looks at a range of issues relating to older prisoners in NSW, as well as in other Australian and international jurisdictions. The paper provides statistics showing the number of older prisoners in NSW and Australia, along with historical trends that have seen a rise in the overall number and proportion of older prisoners, including older female and Indigenous prisoners.

An ageing prison population brings with it a number of problems, including: increased costs of remand; health issues such as age-related functional decline; a lack of appropriate and meaningful programs for older prisoners; and release and resettlement issues once older inmates leave prison.

In response to these concerns, stakeholders have advocated for a range of policies that could more effectively support the needs of older prisoners. Some policies, such as tailored facilities for older prisoners, have been implemented in NSW. Chapter 8 of this paper notes a broader range of policies that have been implemented overseas and which are considered to be best practice responses to the challenges of an ageing prison population.

2. How old are 'older prisoners'?

There is no consensus as to what age group constitutes 'older prisoners'. This is highlighted in a 2006 US study:

[Although Lewis's] study focused on evaluees aged 60 years and older; the [United States] federal government identifies its "older" population as above 45; some state prisons use the term "geriatric" for individuals over 59; and previously published literature on forensic populations has characterized elderly subjects based on the ages of 45, 50, 55, 60, 62, and 65.³

In its 2011 report, <u>Older prisoners—A challenge for Australian corrections</u>, the Australian Institute of Criminology (AIC) commented that a commonly used functional definition for older prisoners is 50 years and above.⁴ This definition was also endorsed in a 2010 Victorian Department of Justice report, <u>Growing old in prison?</u>, which commented that "[d]espite the variability of definition, most writers and researchers agree that 'older offenders' are at least 50 years of age."⁵

The definition sets a lower starting age than other definitions, notably the Australian Bureau of Statistics (ABS), which defined 'older people' as individuals aged 65 years or over.⁶ However, according to a 2015 <u>study</u> by Trotter and Baidawi, this lower starting age reflects the poorer health outcomes amongst prisoners compared to the wider community:

The utilisation of 50 years and older as an appropriate gauge for 'old age' in prison is based on research findings that identified a 10-year differential between the overall health of prisoners and that of the general population. This accelerated ageing is generally attributed to a combination of the lifestyle of offenders prior to entering prison (including poor nutrition, substance misuse and a lack of medical care) and the understanding that prison environments may escalate age-related illnesses and conditions. [references omitted]⁷

Accordingly, this e-brief uses, where possible, the functional definition of 50 years and older to define older prisoners. If a different age group is used, this will be specified in the paper.

3. Number of older prisoners

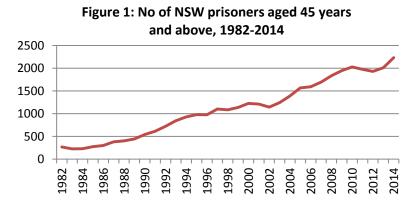
3.1 Older prisoners in NSW & trends

According to Corrective Services NSW's <u>Inmate Census</u>, as of 2014 there were 10,578 prisoners in full-time custody in NSW. Of this total, 1,383, or approximately 13%, were older prisoners.⁸

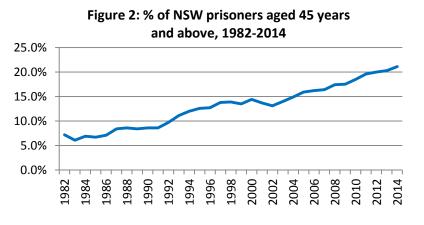
Table 1 on the following page provides a further breakdown of older prisoners (that is, 50 years and over) by gender and age group:

Table 1: No	o of older	prisoner	rs in full-tim	e custoc	dy in NSW, 20	014 ⁹
Age group	Male	%	Female	%	Persons	%
50-54	513	5.2	47	6.6	560	5.3
55-59	344	3.5	28	3.9	372	3.5
60-64	207	2.1	8	1.1	215	2.0
65+	227	2.3	9	1.3	236	2.2
Total	1,291	13.1	92	12.9	1,383	13.0

The number of NSW prisoners aged 45 years and over has increased significantly over the past three decades. As shown in Figure 1, the number of prisoners aged 45 years and over increased between 1982 (269 inmates) and 2014 (2,232 inmates).¹⁰



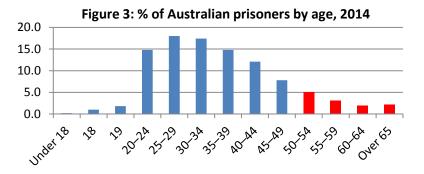
Over the same period, the proportion of NSW prisoners over 45 years old tripled, from 7.2% of the State's prison population in 1982 to 21.1% in 2014 (see Figure 2):¹¹



3.2 Older prisoners in Australia & trends

According to the ABS's 2014 report, <u>*Prisoners in Australia*</u>, there are 4,058 older prisoners in Australia, comprising 12.1% of Australia's prison population. Within this group of older prisoners:¹²

- 1,676 prisoners are aged between 50-54 years (5.0% of all prisoners);
- 1,047 prisoners are aged between 55-59 years (3.1%);
- 627 prisoners are aged between 60-64 years (1.9%); and
- 708 prisoners are over 65 years (2.1%).



The AIC's Older Prisoners report commented on the changing numbers and proportions of older prisoners in Australian prisons:

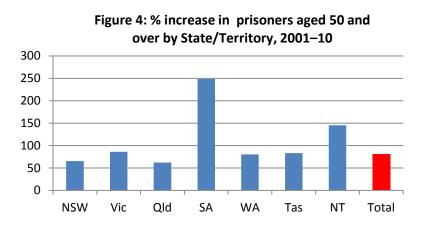
In 2010, inmates over the age of 50 comprised 11.2 percent of the Australian prison population. This contrasts with the situation in the year 2000, when only 8.3 percent of prisoners were aged 50 years and over. In terms of raw prisoner numbers, this equates to approximately 1,500 additional older inmates—an increase of 84 percent—across Australian prisons over the past decade. As shown in Table 1, of those prisoners aged over 50, the greatest growth has been observed among those aged over 65, whose numbers rose over 140 percent in the decade from 2000 to 2010. This far exceeds the increase in the national prison population, which was only 36 percent over the same time period. [references omitted]¹³

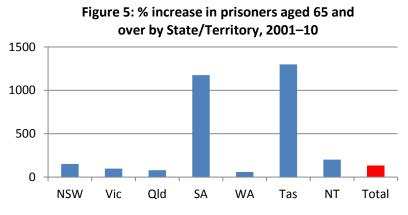
The following table shows the growth of the older prisoner population between 2000 and 2010:

Tab	Table 2: Older prisoners in Australia, population change 2000-10 ¹⁴				
Age	No of Australian prisoners (2000)	No of Australian prisoners (2010)	% increase between 2000–10		
50–54	848	1,445	70.4		
55–59	459	825	79.7		
60–64	281	529	81.8		
65+	218	527	141.7		
Total	21,714	29,696	36.8		

The table and figures below show the increase in the older prisoner population across Australian States and Territories (excluding the ACT) between 2001 and 2010:

Table	3: Olde	r priso	ners by	y State/1	Territo	ry, 2001	–10	
Change in priso	Change in prisoners aged 50 and over, 2001-10							
	NSW	Vic	Qld	SA	WA	Tas	NT	Total
No prisoners (2001)	717	353	381	78	234	36	33	1,832
No prisoners (2010)	1,185	657	618	272	422	66	81	3,326
% increase	65.3	86.1	62.2	248.7	80.3	83.3	145.5	81.6
Change in priso	ners age	ed 65 a	nd ove	r, 2001-'	10			
	NSW	Vic	Qld	SA	WA	Tas	NT	Total
No prisoners (2001)	64	60	61	4	37	1	4	231
No prisoners (2010)	161	118	109	51	59	14	12	527
% increase	151.6	96.7	78.7	1,175	59.5	1,300	200	128.1





The increase in the number of older prisoners is not an exclusively Australian phenomenon. According to Trotter and Baidawi, there is considerable evidence showing growing older prisoner populations in other nations such as the United States, Canada and the United Kingdom.¹⁵

Discussing this long term increase, the AIC suggested that it has occurred due to a combination of an ageing population and changes to prosecution and sentencing laws and practices:

While in general Western populations are ageing, it has been postulated that changes in prosecution and sentencing laws and practices—including mandatory minimum sentencing and reduced options for early release— have also contributed to the growth observed in older prisoner populations ... higher proportions of older Australian prisoners are convicted of offences that attract long sentence periods (in particular, sex offences, homicide and drug-related offences) and this may also be a contributing factor to the rise in their numbers nationwide.¹⁶

4. Older prisoners from minority groups

In its *Older prisoners* report, the AIC identified female prisoners and Indigenous offenders as two notable minority groups within the broader older prisoner population. Both groups are discussed below.

4.1 Older Female prisoners

According to Corrective Services NSW's latest census data, there are 92 older female prisoners in NSW; approximately 6.7% of the State's older

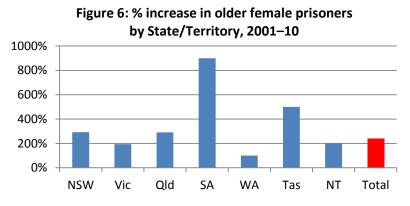
prisoner population (see Table 1 above). Turning to Australia-wide figures, the 2014 ABS report *Prisoners in Australia* gave the following statistics regarding older female prisoners (see Table 4):

Table 4: No	Table 4: No of older female prisoners in Australia, 2014 ¹⁷				
Age group	Number of female prisoners	% female prisoners			
50-54	135	5.2			
55-59	72	2.8			
60-64	32	1.2			
65+	27	1.0			
Total	266	10.2			

Although there are relatively few older female prisoners—according to Corrective Services NSW, approximately 93.3% of NSW's older prisoner population is male¹⁸—the AIC has commented that the proportion of older female prisoners has nevertheless increased sharply in recent decades:

While the number of female prisoners in Australia is far smaller than the number of males (and the number of older females even more so), the percentage increase observed in the female prison population over the decade 2000–10 is far greater than that of the male prison population (61% compared with 35%). The number of female prisoners in Australia aged 50 years and over has more than tripled over the period 2000–10 (an increase of 222%), far exceeding the percentage growth in the female prison population aged under 50 years (approximately 53%). Furthermore, this growth in the older female inmate population has far outpaced the growth in the general Australian population of females aged 50 years and over (approximately 27%), providing further suggestion that demographic population changes are not the sole driver of the changes observed in the older prison population. [references omitted]¹⁹

Figure 6, derived from data in the *Older Prisoners* report, shows the increase in older female prisoners by State and Territory between 2001 and 2010:



4.2 Older Indigenous prisoners

Indigenous Australians are overrepresented throughout the Australian criminal justice system, accounting for 27% of Australia's total prisoner population in 2014 despite comprising approximately 3% of the nation's population.²⁰

However, ABS data shows that the proportion of older Indigenous prisoners within the Indigenous prison population (approximately 4.9%) is significantly lower than the overall proportion of older prisoners in Australia:

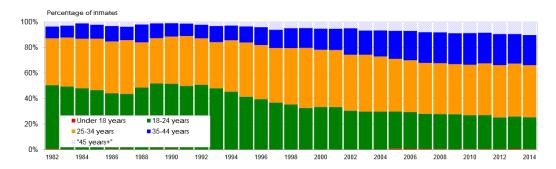
Table 5: No of older Aboriginal/Torres Strait Islander prisoners, 2014 ²¹						
	Males		Female	es	Perso	ns
	NSW	Aus	NSW	Aus	NSW	Aus
No of ATSI 50+ prisoners	413	111	39	11	452	122
% of ATSI prisoners	4.94	4.92	4.29	4.66	4.88	4.90

According to the AIC, the reason for these lower figures may be due to the lower median age of death of Indigenous Australians (69.1 years for men and 73.7 years for women) compared with non-Indigenous Australians (79.7 years for men and 83.1 years for women).²²

In order to account for the lower median age of death within Indigenous communities, commentators have argued that Indigenous prisoners aged 45 years and above should be classified as 'older prisoners', rather than 50 years and over.²³

In NSW, the *NSW Inmate Census 2014* shows the changing age profile of Aboriginal inmates between 1982 and 2014:²⁴

Figure 7: Trends in age profile of Aboriginal inmates in NSW, 1982-2014



As shown above, and like the wider older prisoner population, the number of older Indigenous prisoners has increased in recent decades. Referring to ABS data, the AIC reported that the fastest growing age groups among Indigenous prisoners during the period 2000–10 were 50-59 years for males and 45-49 years for females (see Table 6):

Table 6: Older Indigenous prisoners in Australia, by age and gender, 2000-10 ²⁵					
Indigeno	Indigenous male prisoners				
Age	No of prisoners	No of prisoners	% increase		
	(2000)	(2010)	2000–10		
45–49	95	363	282.1		
50–54	51	179	251.0		
55–59	14	65	364.3		
60–64	7	27	285.7		
65+	10	23	130.0		

Indigend	Indigenous female prisoners				
Age	No of prisoners (2000)	No of prisoners (2010)	% increase 2000–10		
45–49	6	36	500.0		
50–54	3	12	300.0		
55–59	0	0	0.0		
60–64	1	3	200.0		
65+	0	0	0.0		

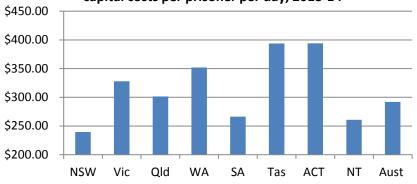
5. Cost of remand

5.1 Cost of remand in Australia

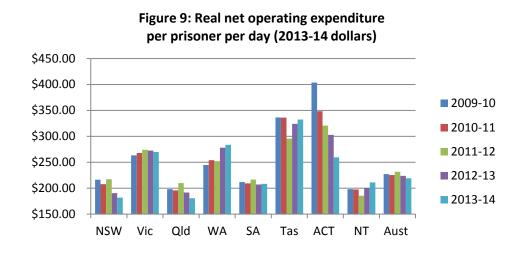
In its <u>Report on Government Services 2015</u>, the Productivity Commission calculated the total cost per prisoner per day by State and Territory. These daily costs are shown in Table 7 and Figure 8 below:²⁶

	operating expenditure and prisoner per day, 2013-14
State	Cost
NSW	\$239.64
Vic	\$328.08
Qld	\$301.55
WA	\$351.88
SA	\$266.32
Tas	\$393.83
ACT	\$393.97
NT	\$260.76
Australian average	\$292.06

Figure 8: Total net operating expenditure and capital costs per prisoner per day, 2013-14



The Productivity Commission also reported daily operating expenditures by State/Territory between 2009-10 and 2013-14, shown in Figure 9 below. In NSW, the average cost of remand per prisoner per day reduced from \$216.38 in 2009-10 to \$181.60 in 2013-14.²⁷



5.2 Cost of remand for older prisoners

Because the inmate population is not physically separated by age group or cost for statistical purposes, the exact cost of remand for older prisoners is unavailable.²⁸ Nevertheless, existing sources indicate that the cost of remand for older prisoners is higher than for younger inmates.

According to a 1999 AIC report, <u>*Elderly inmates: issues for Australia,*</u> health care costs for older prisoners were approximately three times greater than for their younger counterparts:

In terms of health care costs per inmate, providing care for elderly inmates appears to be second only to providing care for HIV/AIDS sufferers ... Medical and other costs for these greying prisoners are of the order of three times more expensive than required for the care of younger inmates. Kidney failure, advanced heart disease, lung cancer from increased smoking and other cancers and complicated diseases are far more prevalent among the elderly than the young or middle-aged.²⁹

These cost estimates reflect findings in international studies, as noted in 2010 by the Victorian Department of Justice:

In the USA, Aday (2003) and Kerbs (2009) suggest that the cost to accommodate an average younger prisoner is about US\$22,000 per annum, while it costs three times more (between US\$60,000 and US\$69,000 per annum) for the average older prisoner. They attribute this increase as partly due to the amplified health care costs to manage chronic illnesses.³⁰

6. Implications of an ageing prison population

In their 2015 study of Victorian and NSW prisoners, the first large-scale study of its kind in Australia, Trotter and Baidawi argued that the growth in the number of older prisoners "presents significant implications for planning, policy and service delivery across the correctional system":

Older prisoners are characterised by different issues compared to the overall prisoner population, and present unique challenges across a number of domains, including physical and mental health needs, costs associated with incarceration, vulnerability to victimisation, functioning within the prison environment, program delivery and release planning. Such challenges must

be managed in the context of complex prison systems, within which operational, safety, health and rehabilitation issues, among others, must be both practically and strategically managed by both administrators of individual prisons and government corrections departments. [references omitted]³¹

The prison environment itself can present difficulties for older prisoners. Trotter and Baidawi found that the majority of older prisoners (62.4%) reported at least one area of difficulty, including use of beds and bunks (37.0%), air temperature and ventilation (24.3%) and bathroom facilities (12.7%). Older female prisoners were significantly more likely to experience physical difficulties than older male prisoners (82.6% vs 59.3%).³²

The Older Prisoners report identified several additional issues relating to the management of older prisoners, which are summarised in Table 8:

Table	e 8: Issues in the management of older prisoners ³³
Health concerns	Concerns include coping with chronic disease and/or terminal illness, fear of dying, pain management, reduced levels of mobility, disability, loss of independence and cognitive impairments.
Mental health and adjustment	Research suggests that although older prisoners are generally less disruptive than younger prisoners, a considerable number experience depression and other psychological problems, suggestive of institutional adjustment difficulties.
	Historically, it seems that little attention has been paid to issues relating to older prisoners, partly due to the perception of prison staff that older prisoners are 'compliant' and therefore, not an overt 'problem'.
Suitability of prison programs	A lack of appropriate and meaningful programs for older prisoners has been noted in the provision of a range of program areas including education, vocation and exercise.
	Additionally, prison education programs are often focused on basic literacy and numeracy skills (targeting younger prisoners), while physical education programs may be too challenging or unsuitable for many older prisoners.
Vulnerability to victimisation	Older prisoners—especially those with limited mobility, frailty and/or disability—are perceived by themselves and others to be more vulnerable to victimisation than their younger, generally stronger counterparts.
Release and resettlement issues	Difficulties in post-release planning and support for older prisoners include lack of coordination between prisons, community correctional services and community agencies; priority being provided to younger inmates; and a lack of strategies to address the needs of older prisoners.

The report also outlined the consequences that may arise from an increasingly older prison population:

- Prison health services are likely to experience increased requirements for specialist services and chronic disease management services, as well as screening and treatment for age-related illnesses (including dementia and terminal illnesses).
- A greater need for accommodation arrangements suitable for prisoners with frailty and mobility issues is also a likely outcome. Correctional services may experience greater requirements for personal care,

therapeutic equipment and modifications to cells and facilities for older prisoners residing within the general prison population.

- The higher numbers of older prisoners also has implications for program delivery, given that many of these inmates may be either medically unfit for work or past retirement age. Prisons may need to assess the availability of appropriate social, educational and recreation programs for this prisoner group.
- As a result of these impacts, there are certainly implications for correctional budgets, including costs associated with catering for older prisoners with higher healthcare needs, or where alternative transport and accommodation measures are required.³⁴

The growth in the number of older prisoners brings with it the risk of increased levels of dementia in prison environments.

In a 2014 discussion paper, <u>Dementia in Prison</u>, Alzheimer's Australia NSW commented that increasing numbers of prisoners developing dementia—a result of age, but also due to risk factors such as post-traumatic stress disorder, and drug and alcohol abuse—pose significant challenges for both prison authorities and the prisoners themselves:

As the symptoms of dementia increase, a person with dementia in prison will have difficulty following rules, socialising appropriately and performing activities of daily living for themselves such as eating, dressing and bathing. If the person with dementia has not been diagnosed they can run the risk of reprimand or punishment due to lack of understanding of their behaviours which in turn can compromise their physical and mental wellbeing.

Due to the often frightening culture that exists in a prison setting people with dementia are also vulnerable to bullying and victimisation by other prisoners or alternatively they may become aggressive to other staff and prisoners.

The issue of safety, for the prisoners with dementia, the staff and other prisoners, is a significant consideration when addressing the needs of the prisoner with dementia. 35

7. NSW management of older prisoners

Corrective Services NSW has recognised that some older prisoners are illsuited to the mainstream prison environment. In response, the agency has created tailored facilities at Long Bay Correctional Complex to cater to older inmates:

... in recognition that some older inmates can no longer be managed alongside younger, more active inmates, in February 2010, CSNSW reopened the Kevin Waller unit for older and elderly inmates at the Long Bay Correctional Complex. The Unit works closely with staff from Justice Health and Statewide Disability Services (SDS) to determine which inmates move into the unit. In addition, for aged offenders that need physical assistance with personal care CSNSW has the Aged Care and Rehabilitation Unit located at Long Bay Hospital.³⁶

Several Additional Support Units (ASUs) have been established at Long Bay, overseen by the Statewide Disability Services (SDS) arm of Corrective Services NSW. Although designed for inmates with a wide range of intellectual disabilities, eligibility requirements for ASU assistance may also extend to older prisoners who suffer from dementia or other age-related illnesses. According to Corrective Services NSW:

[ASUs] accommodate offenders who, because of their disability, require placement outside the mainstream correctional centre environment for assessment, general management or to participate in a specific program to address offending behaviour. The majority of offenders placed in these units have an intellectual or other cognitive disability, although some individuals with sensory/physical disabilities may be accommodated.³⁷

Additionally, the Department of Attorney General and Justice noted in its 2012-13 Annual Report that Long Bay's Metropolitan Special Programs Centre was refurbished to create eight additional beds, which are used for assessing older offenders with suspected dementia and other impairments.³⁸

8. Recent developments and best practice approaches

8.1 Developments in the United Kingdom

Approximately 13% of England and Wales' prison population is comprised of older prisoners, similar to the proportion of older prisoners in NSW. The UK also faces similar challenges to Australia when managing its older prisoner population; a 2014 UK Ministry of Justice survey reported that older prisoners were more likely to face health and disability problems than younger prisoners.³⁹

In response to such challenges, a 2010 report by the Prison Reform Trust identified common themes of good practice in British prisons, including:⁴⁰

- Real consultation processes that ensure older peoples' views are heard and needs are met;
- Policies and action plans for older people, which enable staff to understand their duties and responsibilities in this area;
- Multi-disciplinary assessments that bring health and social care needs together and can be used across all aspects of prison life;
- A proactive, rather than reactive, approach to work with older prisoners; and
- Ensuring that older people can participate as fully as possible in social and educational activities within prisons.

Nevertheless, there remain shortcomings in the UK prison system, with a 2013 House of Commons Justice Committee inquiry into older prisoners describing existing social care as "variable, sparse and non-existent".⁴¹ The Committee made several recommendations aimed at improving social care conditions, including ensuring that older prisoners have appropriate accommodation and regimes, and improving awareness and training to respond to mental health issues.⁴²

The <u>Care Act 2014 (UK)</u> has since been introduced to address, among other things, social care issues amongst the older prison population. The Act clarifies which authorities are responsible for assessing the care and

support needs of older prisoners, and provides for care and support if eligibility criteria are met.⁴³

8.2 Age-segregated units

In its 2010 report on ageing offenders the Victorian Department of Justice concluded that, in terms of detention, age-segregated units or prisons were the best available option to older prisoners. The report outlined a number of minimum requirements that should be in place for age-segregated units or prisons to work effectively:

Age-segregated units or prisons must not only segregate older prisoners, but must also prioritise rehabilitation goals for older prisoners and provide programs and activities to address needs such as, health care, education, employment and income support, accommodation, physical fitness, mental health, personal development, relapse prevention skills for substance misuse and reoffending, and independent living skills.

Nevertheless, the Victorian Department of Justice acknowledged that, due to cost or resource limitations, not all prisons would be able to create agesegregated units. In those cases:

... the inclusion of assessment procedures, specific programs and suitable regimes, as well as specially-trained staff can assist to provide a more ageappropriate environment for older prisoners. In addition, prisons should consider modifications to actual prison environment to assist frail or infirm prisoners and those with disabilities or mobility issues.⁴⁴

In respect to both older female prisoners and prisons with few older inmates, their small population size suggests that these groups are unlikely to receive specialised support from authorities. Trotter and Baidawi commented that "[t]his may necessitate creation of partnerships between corrections departments and aged care providers in the general community to enable service delivery in some circumstances."⁴⁵

8.3 Other international best practice policy approaches

In its 2011 trends and issues paper the AIC identified policy approaches used overseas that could be considered by Australian policymakers (see Table 9):

Table 9:	Managing issues surrounding older prisoners in prison ⁴⁶
Nursing home prisons, prison hospices and special needs units	Both the United States and Germany have specialised prisons designed to accommodate older prisoners with chronic health concerns and/or terminal illnesses. These prisons provide specialised intensive services for these prisoners, while reducing costs because of an economy of scale.
	Other correctional facilities have established special needs units within prisons to service older populations. Reported benefits include 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.
Staffing, services and programs	Many services and strategies implemented to manage older prisoner populations have been done at a local level, and have utilised assessment, collaboration with community agencies, case management, mentoring and advocacy to identify and address

	issues affecting older prisoners.
	Other institutions have opted to hire specialist staff with training in aged care, gerontology and nursing to provide appropriate care to the ageing prison population.
Parole and early release	In Louisiana, the POPS (Project for Older Prisoners) program utilises law students to work with older prisoners who meet various selection criteria, who then investigate community placements available and consult with the prisoners' victims before advocating for release with the Louisiana Parole and Pardon Boards. Workers make recommendations as to release conditions based on multiple assessments of risk of recidivism. By 2001, the program had assisted close to 300 inmates to gain release without a single act of recidivism.

In response to concerns about dementia amongst older prisoners, Alzheimer's Australia NSW provided examples of international policies that could address the challenges of dementia in prison:

Table 10: Exa	Imples of good practice responses to dementia in prison ⁴⁷
Fishkill, N.Y.	A dementia-specific, 30 bed unit within the prison's medical centre to accommodate and care for prisoners from around the state with dementia.
	All staff undertake a 40-hour training course on dementia and cognitive impairment, which aims to minimise instances of confusion and anxiety for the prisoner with dementia, as well as building awareness that what may seem like irrational behaviours are actually symptoms of dementia.
California Men's Colony	A designated prison that accommodates prisoners with severe cognitive impairments such as dementia.
	Offers a psychosocial program called Special Needs Program for Prisoners with Dementia (SNPID) that supports the needs of the prisoners with dementia via changes to the physical environment, the social environment and individual activities for the prisoner with dementia.

9. Conclusion

As Australia's life expectancy rates continue to increase into the future policymakers will need to address the many challenges that come with an older population. These challenges will be even more pronounced in the prison environment.

Although they represent a comparatively small proportion of the NSW prison population, the continuing growth in the number of older prisoners, many already experiencing a range of co-morbidities, will impact existing government services. Responding to these challenges, a number of policy reforms have been implemented in NSW. A broader range of policy options are in place in various overseas jurisdictions.

¹ For example, see Productivity Commission, <u>An Ageing Australia: Preparing for the Future</u>, November 2013; Australian Bureau of Statistics, <u>Australian Social Trends: Future population</u> <u>growth and ageing</u>, cat no 4102.0, March 2009; Commonwealth Treasury, <u>2015</u> <u>Intergenerational Report</u>, March 2015.

³ C Lewis, C Fields, E Rainey, <u>A Study of Geriatric Forensic Evaluees: Who Are the Violent</u> Elderly?' (2006) 34 Journal of the American Academy of Psychiatry and the Law 324, p 331. Australian Institute of Criminology, Older prisoners-A challenge for Australian corrections,

2010, p 10.

6 Australian Bureau of Statistics, note 1.

⁷ C Trotter, S Baidawi, <u>'Older prisoners: Challenges for inmates and prison management'</u> (2015) 48 Australian & New Zealand Journal of Criminology 200, p 201.

Corrective Services NSW, NSW Inmate Census 2014: Summary of characteristics, October 2014, p 3.

¹⁰ Ibid p 60.

¹¹ Ibid p 60.

¹² Australian Bureau of Statistics, Prisoners in Australia, 2014, cat no 4517.0, 11 December 2014.

¹³ Australian Institute of Criminology, note 4.

¹⁴ Ibid.

¹⁵ Trotter and Baidawi, note 7, p 201.

¹⁶ Australian Institute of Criminology, note 4.

¹⁷ Australian Bureau of Statistics, note 12, Table 3.

¹⁸ Corrective Services NSW, note 8.

¹⁹ Australian Institute of Criminology, note 4.

²⁰ Australian Bureau of Statistics, <u>Australian prisoner numbers climb to ten year high</u>, Media Release, 11 December 2014; Australian Bureau of Statistics, Estimates of Aboriginal and Torres Strait Islander Australians, cat no 3238.0.55.001, June 2011.

Australian Bureau of Statistics, note 12, Table 20.

²² Australian Institute of Criminology, note 4; Australian Bureau of Statistics, Life Tables for Aboriginal and Torres Strait Islander Australians, cat no 3302.0.55.003, 15 November 2013, p 6. ²³ Trotter and Baidawi, note 7, p 201; Australian Institute of Criminology, note 4.

²⁴ Corrective Services NSW, note 8, p 61.

²⁵ Australian Institute of Criminology, note 4.

²⁶ Productivity Commission, <u>Report on Government Services 2015</u>, Table 8A.7.

²⁷ Ibid Table 8A.9.

²⁸ Phone advice received from Corrective Services NSW.

²⁹ Australian Institute of Criminology, Elderly inmates: issues for Australia, Trends & issues in crime and criminal justice no 115, May 1999, p 4.

³⁰ Victorian Department of Justice, note 5, p 14.

³¹ Trotter and Baidawi, note 7, p 202.

³² Ibid p 209.

³³ Australian Institute of Criminology, note 4.

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³⁵ Alzheimer's Australia NSW, <u>Dementia in Prison</u>, Discussion Paper no 9, March 2014, p 6.

³⁶ J Leach, A Neto, <u>Offender population trends: aged offenders in NSW</u>, Corrective Services NSW, 2011, p 9.

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³⁸ NSW Department of Attorney General and Justice, <u>Annual Report 2012-13</u>, p 56.

³⁹ UK Ministry of Justice, <u>The needs and characteristics of older prisoners: Results from the</u> Surveying Prisoner Crime Reduction (SPCR) survey, October 2014.

Prison Reform Trust, Doing time: Good practice with older people in prison, 2010, p 65.

⁴¹ House of Commons Justice Committee, <u>Older prisoners: Fifth Report of Session 2013–</u> 14, July 2013, p 3. ⁴² Ibid pp 52-6.

⁴³ UK Government, Care Act 2014 Factsheet 12: prisoners and people resident in approved premises, 4 February 2015.

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² Productivity Commission, note 1.

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- ⁴⁵ Trotter and Baidawi, note 7, p 216.

⁴⁶ Australian Institute of Criminology, note 4.
⁴⁷ Alzheimer's Australia NSW, note 35, pp 14-5.

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