Dementia in Corrections: Treatment Challenges and the Delivery of Compassionate Care

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Disclosures & Disclaimers

• No financial disclosures to report

• The views expressed in this presentation are those of the presenter and are not to be construed as official or reflecting the viewpoints of the Minnesota Department of Corrections

Overview

• Unique demographic/health characteristics of an offender population

• Treatment challenges

• Innovative correctional programs for dementia in prison
U.S. Correctional Population

- The United States incarcerates more people than any other country in the world
- An estimated 6,899,000 persons were under the supervision of adult correctional systems in 2013

*FIGURE 1: Estimated number of persons supervised by adult correctional systems, 2000-2013*

Source: U.S. Department of Justice, Bureau of Justice Statistics, December 2014
Minnesota

- Minnesota has the second-lowest incarceration rate in the nation

- 9,947 Adult Offenders
  - Males: 9,273
  - Females: 674

- Age 50 or Older: 1,404

Varying Definitions of Older Adult??

- Ohio defines “elderly” offenders as those aged 50+
- Minnesota sets the age at 55+
- Michigan: 60+
- Colorado: 65+
Why is a 50-year-old, OLD!!

- Offenders tend to age faster
- Research indicates physical age of offenders is 10-15 years older than chronological age (Reimer, 2008)
- A 50-year-old offender may likely experience age-related health problems consistent with a 60-year old

Silver Tsunami

- Between 2007-2010:
  - The number of offenders aged 65+ grew 94 times faster than the general population (Bureau of Justice Statistics, Prisoner Series, 1997 to 2010)
  - Of those age 65 or older 54% were white males.
- Between 2007 and 2010:
  - Minnesota’s correctional population increased by 0.7%.
  - The 65+ population increased 63%!!
Why the Increase in the Older Adult Prison Population?

- **Aging of Society**
- **More older adults committing crimes**
- **1970s through the 1990s, “war on drugs” was declared**
- **Three-strike laws and Life-without-parole**

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Dementia: Prison

- **Unaware of any good epidemiological studies of dementia within corrections**
- **Based on 10 published studies, estimates range from 1% to 44% (Maschi, et al., 2012)**
- **Proposed MN DOC Study**

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FIGURE 3: Growth projections of dementia in general population vs. prison population, 2009, 2015, 2030, and 2050

Protective Factors: A few examples

- Higher education: 47% of prisoners did not obtain a HS degree (US Dept. of Justice, 2003)
- Moderate alcohol intake: ~2/3 of American prisoners meet criteria for substance abuse or dependence (Mumola & Karberg, 2006).
- Exercise, nutrition, physical activity

Health Characteristics: Dementia Risk Factors

- Lack of access to health care services prior to entry
- Mental Health: 2 out of 3 offenders have a mental health condition
- Vascular risk factors: high blood pressure, high cholesterol, COPD

Health Characteristics: Dementia Risk Factors

- ADHD: Possible risk factor for Lewy Body Dementia (prevalence rates of 21%-48% in correctional populations)
- Traumatic Brain Injury
  - Prevalence: ~60%
  - MN DOC: 82%
Recent data from the MN DOC:

- 638 offenders age 65+ met criteria for one or more of these conditions:
  - Hypertension
  - Diabetes
  - High Cholesterol
  - Hx of cerebral vascular accident
  - Chronic Obstructive Pulmonary disease (COPD)

Health Characteristics: Dementia Vulnerability

- An older offender will experience an average of three chronic illnesses during his or her term (Turley, 2007)

- While a younger prisoner costs approximately $34,000 to house annually, states pay an average of $70,000 per year for older offenders

Identification Issues

- Structure of prison often masks and obstructs proper identification of the onset of dementia

- Available mental health services are directed towards more vocal, younger prisoners
Identification Issues

- Lack of appropriately trained staff to identify dementia
- Mindset: Secondary Gain/Malingering
- Co-morbid Conditions

Challenges: Prison Environment

- Environment: designed to deter future criminal activity
- Across the nation, a typical offender lives in a four-by-four-foot prison cell often without windows and with a roommate.
- Large, loud, multiple stimuli!
50 Shades of Grey!!

Survival
- Basic Rules of Prison:
  - Follow Directions
  - Avoid Discipline
  - Stay Vigilant and Independent
- For individuals with dementia these requirements become quite challenging

Vulnerability
- PIN numbers
- Canteen
- Medications
- Money
- Bullying
- Sexual victimization
Specialized Programs

- No legal mandate for older adult specific services
- Very few states provide any type of specialized services/seggregation living units for the older adult
- A former assistant commissioner in New Jersey was quoted as saying: ‘I know how to run prisons, not old-age homes’ (Malcolm, 1988).

What’s Needed?

- Early Identification
- Dementia-appropriate living environments
- Properly trained staff
- Consideration for Medical Discharge

California Men’s Colony

- Peer Support Driven Community
- Six volunteer offenders with 10 years of discipline-free behavior

References