

Testimony before the NYC City Council
Committees on Aging and Criminal Justice

Oversight- Justice in Aging-
Reentry Issues for Older New Yorkers

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Thank you for the opportunity to speak with you today. My name is Tanya Krupat, and I am the Vice President of Policy and Advocacy at the Osborne Association. I am joined by my colleague Christina Green, Director of Marcus Garvey Supportive Houses, Osborne's first permanent supportive reentry housing program for older adults. For nine decades, our organization has been committed to transforming lives, communities, and the criminal legal system, including focusing on the needs of older people in prison and jail, and offering reentry services that begin inside. We also serve people in the context of their families and recognize how critically important relationships, connectedness, and belonging are, yet how many of the policies and practices within the criminal legal system (including reentry) break, limit, and shrink these.

Thank you for holding this hearing today to address this intersectional, urgent issue, hidden in plain sight. As a City and a society, we are ignoring the needs of older people in prisons and jails, and those returning to our communities at an enormous cost, in dollars, lives, well-being, and lost wisdom and contributions to society. Today, close to one in 4 people in NY State prisons is over age 50¹; as of this week, 802 older people (50+) are incarcerated on Rikers Island.² The NYC Comptroller calculated that one year on Rikers for one person costs \$556,539,³ an astounding and deeply concerning figure considering what people- and all of us- are "getting" for this amount of money. With this figure, we are currently spending more than \$446 MILLION to keep older people on Rikers. This is close to NYC Aging's entire budget (which in FY23 was \$459.7 million⁴) and this does not include what we are spending to keep NYC residents incarcerated in prisons for 30 or 40 years, decades past their minimum sentence (Brooklyn has the highest number of residents serving life sentences, more than other boroughs or counties in the State).⁵

¹ As per DOCCS January 2023 [Custody Report](#), 7,273 people in their custody are age 50 and over, 23.4% of the total incarcerated population.

² Due to a phenomenon of "accelerated aging," 50 is the age that we use to define someone incarcerated as "older"- the trauma that preceded incarceration plus the trauma of incarceration (including decades of unhealthy food, lack of exercise, lack of age-appropriate healthcare, disconnection from family, and perpetual stress and anxiety) age a person beyond their years.

³ See NYC Comptroller's report [HERE](#).

⁴ "The Department for the Aging (DFTA) has a Fiscal 2023 Preliminary Budget of \$459.7 million, which represents less than one-half of one percent of the City's \$98.5 billion budget. DFTA's budget decreases by \$27.5 million from the Fiscal 2022 Adopted Budget of \$487.2 million." Mar 23, 2022

<https://council.nyc.gov/budget/wp-content/uploads/sites/54/2022/03/DFTA.pdf>

⁵ <https://brooklyneagle.com/articles/2019/08/29/elder-parole-brooklyn-life-sentences/>

We refer to being released as “coming home,” but far too often this term masks a scary, unstable, and confusing reentry experience. To add to the costs of incarceration, thousands of people are discharged from prison directly to NYC homeless shelters, which cost up to \$300/ day (that’s \$9,000 per month!), and includes rules like being locked out all day, which can increase the likelihood of rearrest generally or for parole violations.⁶

From Prison to a Shelter: Coming “Home”?



– Each year since 2015, more than 40 percent of people released from State prisons to New York City were released directly to shelters.

– From 2017-2019, 1 in every 2 releases from NYS prisons to NYC was to a shelter (2021, 41% of such releases were to a shelter).



The resources and money we are spending on ineffective institutional downstream responses are important to consider because they not only take away resources from effective upstream solutions, they are making things worse (and more costly). Earlier today you heard from some of the residents of Osborne’s Marcus Garvey Supportive Housing. One resident there served more than 40 years. In this time, his health worsened, he was misdiagnosed and learned to not trust prison medical providers (based on his own and others’ experiences), and he didn’t prepare for reentry because he truly came to believe he would never be let out. When he finally returned home, he faced medical issues and trauma that were entirely preventable.

⁶ <https://www.prisonlegalnews.org/news/2018/nov/6/new-yorks-prison-shelter-pipeline-poor-option-parolees/>

The resources we are “investing” in keeping older people locked up are hurting them and us. We could almost double NYC Aging’s budget (as it should be) by decarcerating. This would achieve more public safety than endless incarceration or criminalizing addiction, mental illness, and poverty.⁷ And simply bringing **two people** off Rikers who are there for one year would fund an entire specialized unit within NYC Aging (at \$1 million) to focus on justice-impacted older adults. We recommend creating such a unit, as well as investing in community-based programs, accessible housing, peer support models, and more. The money to do all of this IS there. It’s just currently being spent on punitive institutions instead of on people and communities.

In preparation for this hearing, we held a discussion with 16 Osborne staff and residents of Marcus Garvey. Importantly, the staff at Marcus Garvey are formerly incarcerated, and the supportive community staff and residents have built there can be felt in the air when you walk in. Many who were part of this discussion had served decades and all of them were released over the age of 50. Together, these 16 people represented 322 years of incarceration; all except one were people of color, a reflection of the systemic racism baked into every point of our criminal legal system. Among the many challenges mentioned were loss (of family members and children; of time; of opportunities to give back, contribute, and be productive); trauma, frustration, and pain (cumulative exposure to inhumane conditions, randomly applied rules, racism, violence, abuse, and substandard, even unethical medical care). But we also heard incredible courage, fierce determination, hope, and self-advocacy. Against systems that had tried to break these, they persisted.

Out of this discussion emerged many areas in need of improvement, including:

- Being released without medical records, without ID or documentation. According to one resident, DOCCS charges 25 cents per page for someone released to receive their medical records. This would have cost him \$1,600! However, DOCCS will send your medical records for free to your doctor.

⁷ A recent [report](#) by the Vera Institute of Justice (Feb 2023) and an [initiative](#) launched by the Sentencing Project are calling on us to re-examine lengthy and life sentences, and to rethink this costly and ineffective paradigm of mass incarceration.

- Having to pay fees by banks and JPay, who holds the contract for the debit card people receive upon release from prison.
- Lack of adequate pre-release planning. This should include ways to orient and train people in using technology and preparing for the fast-paced world that awaits them.
- The need for a one-stop reentry center specifically for older people.

Additionally, Osborne's years of experience providing release and parole preparation and reentry case management specifically tailored to older adults leads us to offer the following recommendations (this is a sampling of the many, many changes that should be made to meet the needs of older people in jail and prison, release them, and support them when they return):

Healthcare

- Adapted geriatric assessments should be done inside when anyone turns age 50.
- Older people on Rikers need access to consistent medical care. There are countless missed medical appointments where there are no escorts provided to take people to the clinic, and no accountability when this happens. There should be an assigned unit of Officers with a Captain/Deputy Warden that can ensure that people have access to receive medical care that meets their needs. This includes oversight of needed medication, which people are not receiving in a timely manner.
- Dedicated housing should be established on Rikers so older adults are housed together. With a current population of around 800, it may be possible to house this group in a single facility with an enhanced medical presence to meet their needs.
- Training for medical and mental health providers in the community should include screening for incarceration, and being able to sensitively respond to the trauma and physical and mental health issues related to incarceration.
- NYC Aging's budget should be increased to allow the agency to lower the age of eligibility to 50 for those who are formerly incarcerated.

Housing & Program Models

- Investments should also be made in diverse forms of reentry housing.

- City Council should pass the Fair Chance for Housing bill, ending discrimination against the 750,000 New Yorkers with a prior conviction.
- Investments should be made in paid peers to provide counseling and support and intergenerational models (assist with technology and mutually beneficial)

Along with many others, including NYC Aging, we worked during 2022 on these and other recommendations as part of the Compassion and Assistance for Returning Elders (CARE) Task Force. We would like to see the City Council re-establish an interagency task force on elder reentry, with NYC Aging oversight, and this time invest in funding a staff person to coordinate it and require a report and progress benchmarks within one year.

In order to ensure people have a pathway out of prison before decades pass and more damage is done, we ask you to vote for Reso 241-A calling on the State legislature to pass the Elder Parole and Fair & Timely Parole bills. Osborne is a proud member of the People's Campaign for Parole Justice (PCPJ). Detailed information about both bills can be found on the PCPJ [website](#). We unequivocally believe in the urgency of these bills.

Lastly, as we look at the impact of mass incarceration on older New Yorkers, and as Chair Hudson pointed out in her constituent email this week, today is National Caregivers Day. Older New Yorkers include family members who are welcoming loved ones home from incarceration without additional resources to do so, and include grandparents and other family members caring for children whose parents are incarcerated. While Osborne is addressing both respectively, with our Kinship Reentry Program (monthly subsidies for families welcoming someone into their home from incarceration) and by coordinating our statewide NY Initiative for Children with Incarcerated Parents (NYC Aging's Grandparent Resource Center is a member), both of these efforts need additional funding and cannot meet the existing need.

We hope this hearing will be a beginning and not an end. We look forward to working with the Committees on Aging and Criminal Justice to improve the reentry experience for older New Yorkers. We also urge you to ensure that any next

steps continue to be guided by and include those who are formerly incarcerated and living “elder reentry” every day.

Thank you.

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