



128 Dorrance Street, Suite 400
Providence, RI 02903
Phone: (401) 831-7171
Fax: (401) 831-7175
www.riaclu.org
info@riaclu.org

ACLU OF RI POSITION: NEUTRAL

**TESTIMONY ON 23-H 5200, ARTICLE 3, SECTION 9.
RELATING TO LIFE WITHOUT PAROLE
January 9, 2023**

Article 3, Section 9 of the Governor's proposed budget would allow the state to classify to "community confinement" – and subject to electronic surveillance and/or a monitoring device – persons sentenced to life without parole (LWOP) who have a serious medical condition that renders them confined to a medical facility. The goal of this provision appears to be to save the Department of Corrections some money by not requiring correctional officers to guard such a medically incapacitated person 24 hours a day. It does not, however, provide any additional or meaningful medical or other relief to the seriously ill person.

We find it unfortunate that the Governor is not using this opportunity to recognize and address the broader financial (not to mention policy) implications of LWOP sentences. This budget provision is an implicit recognition that these unforgiving sentences, which have proliferated over the years even though LWOP was initially designed as a sentence rarely to be imposed, is only helping to turn the ACI into a geriatric facility.

According to a recent report issued by The Sentencing Project, 31% of the ACI's population consists of people who are 55 years of age and older. Prison facilities do not have the means or capability to serve the medical needs of elderly prisoners, and the public itself is not served in any way by keeping people locked up in their last years of life when they clearly represent no threat to society and have just as clearly "served their time."

Two years ago, in partial recognition of this problem, the Governor commendably proposed, and the General Assembly approved, amendments to the state's "medical parole" statute to address the geriatric consequences of long – but not LWOP – sentences. However, we believe it is time to extend it to LWOP. Obviously, people who commit heinous crimes and represent a danger to society deserve punishment. But at some point it must be recognized that keeping individuals in prison after 30, 40 or 50 years and as they, not surprisingly, become seriously medically ill or disabled, serves no public or institutional purpose, as any retributive goal to the punishment has long since expired. Merely labeling these individuals as eligible for "community confinement" is window dressing that, from both the state and the taxpayer's point of view, remains extraordinarily wasteful in terms of public resources and dollars.

We urge the committee to carefully consider the reason this proposal needs to be offered in the first place and to instead address the problem in a more prudent, fiscally responsible and thoughtful way by allowing the general medical parole statute to apply to those serving LWOP sentences. We hope it can also generate a broader discussion about eliminating LWOP sentences from the state's sentencing repertoire altogether. We thank you for considering these views.