



Maine Medical
Association



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**TESTIMONY OF THE MAINE MEDICAL ASSOCIATION
AND
THE MAINE OSTEOPATHIC ASSOCIATION**

In Support Of

LD 1962 - An Act to Establish the Corrections Ombudsman

Joint Standing Committee on Criminal Justice and Public Safety
Room 436, Cross Building, Augusta, Maine
Wednesday, January 7, 2026

Senator Beebe-Center, Representative Hasenfus and Members of the Criminal Justice and Public Safety Committee, my name is Lani Graham, MD, MPH. I am a physician and the former chief public health officer for Maine. I am submitting this testimony in support of LD 1962 - An Act to Establish the Corrections Ombudsman, on behalf of the Maine Medical Association and the Maine Osteopathic Association.

The Maine Medical Association (MMA) is a professional organization representing more than 4,300 allopathic and osteopathic physicians, residents, and medical students in Maine. MMA's mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine people. The Maine Osteopathic Association (MOA) is a professional organization representing more than 1,200 osteopathic physicians, residents, and medical students in Maine whose mission is to serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy, and member services in order to ensure the availability of quality osteopathic health care to the people of this State. The MMA and MOA's legislative committees have joined to advocate with one voice. We believe that LD 1962 can make a big difference in the health and welfare of Maine people.

Immediately after I completed my Internship, I worked for a year in a Massachusetts prison. One day, when I was working, a young man was brought in by guards who had clearly received a number of severe blows to the head. His head and face were covered in blood. When I asked him what had happened, he said he had fallen downstairs. I thought he was making a joke. He wasn't. He stuck to his story even in the face of potential brain damage. He was afraid to say what had actually happened to him for fear of retribution, either from a guard or from a fellow inmate.

LD 1962 is a process by which such fears are removed. An inmate, a correctional employee, or a member of this body can raise concerns confidentially without fear of retribution. Complaints can be investigated and, if indicated, changes made to policies and procedures.

It is well known that people who are incarcerated and those caring for them have shortened life spans. The average life expectancy for a correctional officer is significantly lower, often cited as around 59 years, which is about 16 years less than the general U.S. population average, largely due to extreme workplace stressors.¹ And, incarcerated people also die younger than the average Mainer. Isn't it our responsibility to try every option to improve these dismal statistics?

Every system only reaches its highest and best performance through consistent examination by unbiased observers. This is true of everything from business ventures to elder care, health care, and foster care. All of those systems are subject to independent oversight. Working without that benefit, as the Maine Department of Corrections has done since its inception, has many disadvantages. The Maine Correctional system has deservedly been held up as a model for other state systems; however, many developed nations have more successful systems. Critical observation of work is the price of improvement and of getting the best, most efficient outcomes. We hope that this legislature will see the value in this timeless principle.

We in health care and public health hope you will unanimously support LD 1962.

Thank you for your time, and I would be happy to answer any questions.

Lani Graham, MD, MPH

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<https://news.siu.edu/2024/06/062624-siu-researchers-find-prison-guards-suffer-ptsd-and-other-issues-but-get-little-help.php>