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**An Act to Restrict the Use of Solitary Confinement, Segregated Confinement and
Residential Rehabilitation in Maine's Prisons and Jails**

Testimony by Edward Pontius MD

**An Act to Ban Solitary Confinement
Presented by Representative Grayson Lookner**

Before the Criminal Justice and Public Safety Committee, February 9, 2022

**Senator Deschambault, Representative Warren, and Members of the Criminal
Justice and Public Safety Committee,**

**I provide here testimony in support of LD 696, An Act to Ban Solitary
Confinement.**

Today I am here to give you the benefit of my experience working with men and women who have undergone solitary confinement in Maine prisons and jails. My aim is to make sure you understand that solitary confinement damages human beings, that solitary confinement particularly damages those suffering from mental illness and substance use problems, and that Maine's continued use of solitary confinement hinders rehabilitation, produces worse outcomes for former inmates and their families, and increases costs born by the public for these damaged people for the rest of their lives.

I am a psychiatric physician and I have practiced since 1998, more than half of my career, in Maine. In my career I have had broad experience in my field (including inpatient, consultation, outpatient, emergency, disaster, administrative, research and teaching). The experience I wish to share with you stems from my service as Medical Director of an Assertive Community Treatment (ACT) Team in Portland/Cumberland County, Maine, from 2005-2011. ACT teams work with those with the most serious mental health problems in our state, frequently complicated by severe substance use disorders. Important goals for the ACT Team are to help the individual patient to maintain stability in the community, reducing the need for psychiatric hospitalization and

incarceration.

Those referred for ACT team services have not been doing well in the community, often with frequent psychiatric hospitalizations and arrest. Once inside Maine jails and prisons, these individuals have continued to make poor choices and exhibit problem behaviors consistent with their illness. During my time as Medical Director for the ACCESS ACT Team in Portland, a majority of patients referred to us had a history of incarceration and one third were referred to us while in jail or prison. I had the opportunity to witness men and women in jail who had been in solitary confinement, and my team and I had the opportunity to follow individuals who had this experience very closely once they returned to the community.

What we saw on my ACT Team was a disturbing pattern. Those who had experienced solitary confinement prior to their return to the community were more impaired, less able to connect with our team working non-stop to help them, less able to resist impulses, less connected with real-world perception. They were in particular more likely to have more serious and fatal outcomes, including overdoses. Despite our best efforts providing the most intensive treatment in the community, those who experienced Solitary Confinement did not do well, more often returning leaving the community for psychiatric hospitalization or repeat incarceration. And too many of them died, tragically young.

In short, I want to impress upon you this reality- solitary confinement- social isolation or severe restrictions in social/physical environment for those in custody- is damaging. I want you to understand that these individuals are FRAGILE, and that solitary confinement makes them significantly worse. If we believe that rehabilitation is a good thing, that helping individuals to return to the community and contribute is worthwhile, that it's good to avoid making people dependent upon publicly-funded justice system or mental health support for the rest of their lives- If we believe these things, then we must move beyond solitary confinement.

LD 696 is an important bill, addressing an issue that continues to concerns us in Maine. I ask that you please support this bill and put Maine on the constructive, responsible and cost-effective side of this issue.

Thank you.

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