



## Reproductive Health Equity Alliance of Maryland

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### HB 837

**Public Health - Maternal Mortality and Morbidity - Implicit Bias Training and Study  
Hearing of the House Health and Government Operations Committee  
February 26, 2020; 1:00pm**

### **Position: SUPPORT**

The Reproductive Health Equity Alliance of Maryland (RHEAM) is a cohort of community-based birth workers, policy and legal advocates and organizations focusing on reproductive justice, pregnancy and infant health. We aim to reduce pregnancy and infant health disparities in Maryland's Black, Brown and immigrant communities by advocating for evidence-based legislative and policy solutions that expand access to quality reproductive, pregnancy and infant health options designed to build healthy and stable families of color. We stand in strong support of HB 837, which would require perinatal health care professionals to receive implicit bias training.

The growing disparities in health outcomes across race, gender, sex, and all socioeconomic categories are a concern not only for those within the healthcare system, but also the diverse populations they serve and support, who are directly impacted. The crossroads between internalized biases, both explicit and implicit, are compounded with structural and historical prejudice and discriminatory practices, which places many in dangerous circumstances. It is imperative for that medical institutions to address the injustices of the past and its continued impact, especially on Black, Brown, and Indigenous (BIPOC) populations, while simultaneously improving current policies and practices that continue to widen the divide between these populations and their white counterparts.

As pathways to accessing care are expanded to populations who were once uninsured, the diversity of the client base of health institutions is also increasing. This influx increases not only provider-client interactions but also increases the likelihood of the types of interactions shown to contribute to health disparities.<sup>1</sup> Though the training of medical professionals over the years has expanded, little to no emphasis is placed on cultural competency or the historical factors contributing to who is given access to care; how BIPOC's have been treated within medical institutions; longstanding stereotypes and prejudices; how language/colloquial phrases impact care; and the ethnic identity or traditional practices of patients.

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<sup>1</sup> White Coats for Black Lives National Working Group, *#Blacklivesmatter: Physicians Must Stand for Racial Justice* (October 2015), <https://journalofethics.ama-assn.org/sites/journalofethics.ama-assn.org/files/2018-05/sect1-1510.pdf>.

When we examine the birth outcomes of BIPOC and their Non-Hispanic White counterparts, the documented disparity in morbidity and mortality has been directly related to bias on the part of medical professionals, who along with their own biases work within institutional and structural models of care that perpetuate and exacerbate prejudice and discrimination. In order to address this continuing disparity, we must educate and empower medical staff and professionals on their direct impact on the health and well-being of the patients they support. By providing them with the insight, awareness and necessary tools to have impactful interactions with patients, HB 837 will enable physicians to have a better understanding of their patients' lives and how to tailor treatment plans and other supports to ensure a positive birth outcome and negate the possibility of complications in the postpartum period. This includes not only having medical professionals who are aware of the cultural backgrounds, traditions, and practices of their patients, but also knowing how their own implicit and explicit bias plays a critical role in how they view, treat, and interact with patients.

For these reasons, RHEAM urges the committee to issue a **favorable** report for **HB 837**. Please contact Andrea Williams-Muhammad at (443) 269-2926 or [andnic.williams@gmail.com](mailto:andnic.williams@gmail.com) if you have any questions about this testimony.

Thank you for your time and consideration,

Reproductive Health Equity Alliance of Maryland