



To: The Honorable Chair, Delegate Shane Pendergrass, and members of the Health and Government Operations Committee

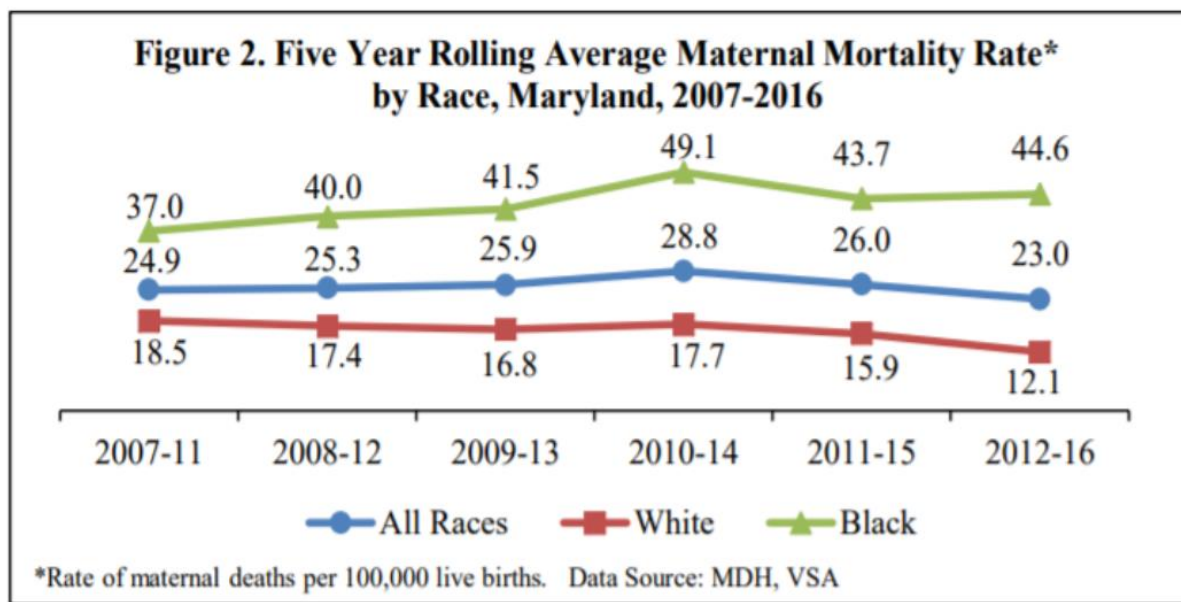
From: Melissa S. Rock, Birth to Three Strategic Initiative Director

Re: **HB 639: Public Health—Health Care Professionals—Cultural Competency Coursework or Training**

Date: February 27, 2020

Position: **SUPPORT**

There are significant racial disparities in birth outcomes for Black women and Black babies. Black women in Maryland are 3-4 times more likely to die after childbirth than White women. According to the State's Maternal Mortality Review Program, "compared to 2007- 2011, the 2012-2016 White MMR in Maryland **decreased 34.6 percent** and the Black MMR **increased 20.5 percent**, increasing the racial difference. The 2012-2016 Black MMR is 3.7 times the White MMR."ⁱ (Emphasis Added.)



The racial disparities in birth outcomes for Black individuals **cannot** be explained by biological differences, socio-economic status, or even education level. Rather, Black patients are treated differently by medical providers than White patients. It is critical that medical providers serving pregnant individuals receive training on implicit bias to reduce this bias and eliminate the racial disparities in birth outcomes for Black pregnant individuals and their babies. While we applaud this legislation's focus on eliminating discrimination, rather than merely cultural competence, it is critical that the training includes a focus on implicit bias. **We urge this committee to issue a FAVORABLE report on HB 639 to reduce the racial disparities in birth outcomes.**

ⁱ "Maryland Maternal Mortality Review 2018 Annual Report," Health –General Article § 13-207 at p. 6.
<https://phpa.health.maryland.gov/documents/Health-General-Article-%C2%A713-1207-2018-Annual-Report-Maryland-Maternal-Mortality-Review.pdf>