



Olivia Bartlett, DoTheMostGood Maryland Team

Committee: Finance Committee

Testimony on: SB0005 – Public Health – Implicit Bias Training and the Office of Minority Health and Health Disparities

Position: Favorable

Hearing Date: February 2, 2021

Bill Contact: Senator Melony Griffith

DoTheMostGood (DTMG) is a progressive grass-roots organization with more than 2500 members who live in a wide range of communities in Montgomery and Frederick Counties, from Bethesda near the DC line north to Frederick and from Poolesville east to Silver Spring and Olney. DTMG supports legislation and activities that keep its members healthy and safe in a clean environment and which promote equity across all of our diverse communities. DTMG strongly supports SB0005 because overcoming health disparities is an important step in promoting equity and the Implicit Bias Training proposed in SB0005 will go a long way to achieve that goal.

The pandemic has focused national attention on already flagrant disparities in healthcare. COVID-19 has hit minority communities at disproportionately high rates in Maryland. Prince George's County has the highest number of COVID cases in Maryland, and the 20783 zipcode in PG County, a largely immigrant and Latino community, has Maryland's highest number of COVID cases. While Maryland's population is 29.8% black, 36% of COVID-19 deaths are black patients.

Furthermore, studies show that unconscious implicit bias against people of color and women is a barrier to quality care for a wide variety of diseases and conditions. For example:

- Maryland's maternal mortality rate for black women is 3.7 times that of white women due to disparities in maternal and child health care.
- Racial and ethnic minorities and women are subject to less accurate diagnoses, curtailed treatment options, less pain management, and worse clinical outcomes.
- White physicians, particularly males, may associate black patients with being uncooperative and noncompliant, which may limit the extent and quality of the care they receive.
- Black and Hispanic patients are significantly less likely than whites to receive pain medications, even for acute injuries like bone fractures.
- Physicians are less likely to treat suicidal thoughts in elderly patients despite those 85 and older having the second highest rate of suicide of any age group.
- Women are three-times less likely to be referred for total knee replacement than men even when clinically indicated and are less likely to be diagnosed with chronic obstructive pulmonary disease than men despite having similar histories and medical examinations.

SB005 directly addresses health care disparities caused by implicit bias by mandating both data collection and training of health care professionals.

SB0005 will expand the collection of health data by the Office of Minority Health and Health Disparities to include race and ethnicity information in the Maryland Policy Report card – last done in 2010. This data should be submitted yearly and updated every 6 months. SB0005 also mandates implicit bias training for all licensed and certified health care providers.

Importantly, SB0005 includes dedicated funding for the Office of Minority Health and Health Disparities to carry out the data collection and to identify and approve appropriate bias training courses.

The saying goes “an ounce of prevention is better than a pound of cure.” SB0005 directly addresses prevention of implicit bias which will improve health care and increase equity. Therefore, DTMG strongly supports SB0005 and urges a **FAVORABLE** report on this bill.

Respectfully submitted,

Olivia Bartlett
Co-lead, DoTheMostGood Maryland Team
oliviabartlett@verizon.net
240-751-5599