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DEPARTMENT OF HEALTH

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**2021 Session**  
**Written Testimony**

**BILL NO:** HB 28  
**COMMITTEE:** Health and Government Operations  
**POSITION:** Support  
**TITLE:** Public Health – Implicit Bias Training & the Office of Minority Health and Health Disparities

**BILL ANALYSIS:**

HB 28 Public Health – Implicit Bias Training & the Office of Minority Health and Health Disparities will publish a Health Care Disparities Policy Report Card and to require the Cultural and Linguistic Health Care Professional Competency Program to identify and approve certain implicit bias training programs.

**POSITION RATIONALE:**

The Anne Arundel County Department of Health supports HB 28 that intends to publish a Health Care Disparities Policy Report Card and to require the Cultural and Linguistic Health Care Professional Competency Program to identify and approve certain implicit bias training programs.

According to a publication produced by the American Public Health Association, health inequity refers to the uneven distribution of social and economic resources that impact an individual’s health and that inequities often stem from structural racism or the historical disenfranchisement and discrimination of particular marginalized groups, including racial and ethnic minorities, low-income populations, and members of the LBGTQ+ community. The aforementioned groups are exposed to risks such as poverty, violence, poor neighborhood conditions, and environmental health hazards.

The inequities create health disparities between groups. In October 2020, the Anne Arundel County Department of Health released its Report of Community Health Indicators. In July 2020, the Anne Arundel County Department of Health established the Office of Health Equity and Racial Justice (HERJ). This office will publish race and ethnicity data for health outcomes in order to understand health disparities and inequities. With data updated as of 2018, the Report of Community Health Indicators reported the following statistics.

- 4.7% Black and 19.0% of Hispanic residents were uninsured in comparison to 2.5% of whites. Overall, 4.2% of the county is uninsured.
- 12.1% of Black and 13.9% of Hispanic residents live below the poverty level in comparison to 5.0% of whites.
- 4.3% of Black and 6.3% of Hispanic residents were unemployed in comparison to 3.4% of whites. As of 2020, 2.9% of county residents were unemployed.

There are greater concentrations of minority populations in the northern and western regions of the county. Research shows that minority populations often face multiple levels of mutually reinforcing structural disadvantage that contribute to poor health.

Research shows that on average, racial and ethnic minorities are more likely than whites to be uninsured and underinsured, and also to have higher rates of illness and death from conditions such as heart disease, stroke, specific cancers, diabetes, HIV/AIDS, asthma, hepatitis B, and overweight and obesity compared with the rest of the U.S. population. Researchers have increasingly recommended standardizing the collection of critical information to promote a better understanding of barriers related to race and ethnicity, language, disability status, and sex in order to implement strategies to overcome them. It is critical for the Office of Minority Health and Health Disparities to publish a Health Care Disparities Policy Report Card in order for jurisdictions to understand their respective barriers to improving health outcomes.

The Anne Arundel County Department of Health also supports implementing a Cultural and Linguistic Health Care Professional Competency Program and Implicit Bias Training. Cultural competency and implicit bias both influence and impact health outcomes. Research shows that attitudes and behaviors of health care providers have been identified as one of many factors that contribute to health disparities. It also shows that implicit bias is related to patient-provider interactions, treatment decisions, treatment adherence, and patient health outcomes. The National Healthcare Disparities Report showed that White patients received better quality of care than Black American, Hispanic, American Indian, and Asian patients. Research has also shown that Black women are three to four times more likely to die a pregnancy-related death as compared with white women. Implicit bias is one of the factors this disparity can be attributed to. It is key to address the implicit bias of health professionals and to increase cultural competency in order to improve health outcomes for populations suffering from the greatest disparities.

#### Sources

1. <https://www.annualreviews.org/doi/pdf/10.1146/annurev-publhealth-032013-182423>
2. <https://ajph.aphapublications.org/doi/10.2105/AJPH.2018.304844>
3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4638275/pdf/AJPH.2015.302903.pdf>
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