



July 13, 2020

**Association of  
American Medical Colleges**  
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The Honorable Kamala Harris  
United States Senate  
Washington, DC 20510

Dear Senator Harris:

On behalf of the Association of American Medical Colleges (AAMC), I write to thank you for your bill, the COVID-19 Bias and Anti-Racism Training Act, authorizing grants to health entities and health professions education programs to establish anti-racism initiatives. The AAMC is pleased to support this legislation.

The AAMC is a not-for-profit association dedicated to transforming health care through innovative medical education, cutting-edge patient care, groundbreaking medical research, and effective community collaborations. Its members are all 155 accredited U.S. medical schools; nearly 400 major teaching hospitals and health systems, including 51 Department of Veterans Affairs medical centers; and more than 80 academic societies. Through these institutions and organizations, the AAMC serves the leaders of America's medical schools and teaching hospitals and their more than 173,000 full-time faculty members, 89,000 medical students, 129,000 resident physicians, and more than 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

As the Coronavirus Disease 2019 (COVID-19) pandemic tragically has illustrated, our nation's existing structures, systems, and policies lead to preventable racial health inequities. Data shows that individuals from Black, Latinx, and Indigenous communities are more likely to get sick and die from the novel coronavirus.<sup>1</sup> These outcomes are not because the virus is naturally more harmful to racial and ethnic minorities, but rather are the result of social and economic conditions that put racial and ethnic minorities at greater risk. It is unacceptable.

We appreciate that your bill would take a step toward addressing these inequities by authorizing grants to health care providers, public health professionals, and health professions education programs to establish or enhance bias and anti-racism training. Bias negatively affects patient care, patient experience, and overall health outcomes. Dismantling structural racism will require strategies to address biases that drive unfair practices and policies exacerbating health and health care disparities. While the ability of any single educational intervention on its own to overcome pervasive societal and systemic challenges is limited, we believe that support for targeted implicit bias training would represent an important step in raising awareness among health professionals of conscious and unconscious discrimination in health care delivery, particularly if it includes an opportunity for educators to use a portion of the grant awards to evaluate which strategies are most effective in generating meaningful behavior change and improved patient

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<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html>

health care outcomes. We commend you for including language specifying that the training should be evidence-based and believe such evaluations only would add to that knowledge. We also appreciate that the bill requires collaboration with relevant experts in developing the requirements for such programs.

Thank you again for your ongoing efforts to promote health equity and toward our mutual goal of improved health for all. We look forward to continuing to work with you as the legislation moves forward.

Sincerely,

A handwritten signature in black ink that reads "Karen Fisher". The signature is written in a cursive, flowing style.

Karen Fisher, J.D.  
Chief Public Policy Officer