Support & Evidence-Based Resource List
for Unconscious (Implicit) Bias Training Licensing Criterion
HB 1105 (McQuinn) / SB 456 (Locke)

**State Data**
The most recent state data is Michigan’s announcement in April 2021 of the lowest infant mortality rate in state history and a decrease in disparities between Black and white infant deaths (from a ratio of 3.2 in 2018 to 2.6 in 2019). Infant mortality involves the death of an infant before reaching their first birthday. Birth defects, pre-term births, and pregnancy complications are several drivers of infant mortality. An unconscious bias training licensing criterion was one of Michigan’s 2019 maternal mortality interventions. California and Pennsylvania reported similar findings.

**Supporters of HB 1105 / SB 456 (Members of the PUSH maternal health coalition)**
- ACLU Virginia
- Birth in Color RVA
- Celebrate Healthcare
- Families Forward Virginia
- Healthcare for All (HAV) Coalition
- Consortium for Infant and Child Health Equity (CINCH)
- Inova Partnership for Healthier Communities
- League of Women Voters of Virginia
- March of Dimes Virginia
- National Women’s Political Caucus - VA
- Postpartum Support Virginia
- United Methodist Women
- Urban Baby Beginnings
- Virginia Coalition of Latino Organizations
- Virginia Interfaith Center for Public Policy
- Virginia NOW
- Virginia Poverty Law Center
- Virginia Public Health Association
- Voices for Virginia’s Children
- Young Invincibles

**Endorsements of HB 1105 / SB 456 (Health Care Organizations)**
- Virginia Public Health Association
- National Multiple Sclerosis Society – VA
- American Cancer Society Cancer Action Network
- American College of Nurse-Midwives – Virginia Affiliate
- Virginia Neonatal Perinatal Collaborative
Clinical Research on Effectiveness

The Implicit Association Test -- the brainchild of Anthony Greenwald (University of Washington), Mahzarin Banaji (Harvard University) and Brian Nosek (University of Virginia) established in 1998.

A decade of studying implicit racial/ethnic bias in healthcare providers using the implicit association test. Social Science Medicine, February 2018.


Examining the presence, consequences, and reduction of implicit bias in health care. Group Processes & Intergroup Relations (GPIR), May 2016.


Reducing Implicit Gender Leadership Bias in Academic Medicine with an Educational Intervention, National Institutes of Health Study. Academic Medicine, August 2016.


Non-conscious bias in medical decision making: What can be done to reduce it? Association for the Study of Medical Education, August 2011.


Clinical Research on Effectiveness (cont’d)

**Disparities.** *U.S. Department of Health and Human Services*, Updated April 2018.


**The actual versus idealized self: Exploring responses to feedback about implicit bias in health professionals.** *Academic Medicine*, April 2018.

**The role of unconscious bias in surgical safety and outcomes.** *Surgical Clinics of North America*, February 2012.

**Physicians and implicit bias: How doctors may unwittingly perpetuate health care disparities.** *Journal of General Internal Medicine*, November 2013.

**Sex differences in in-hospital management and outcomes of patients with acute coronary syndrome.** *Circulation*, April 2019.

**Dual-process cognitive interventions to enhance diagnostic reasoning.** *BMJ Quality and Safety*, October 2016.


