2019 Regular Session

SENATE RESOLUTION NO. 240

BY SENATOR CARTER

HEALTH CARE. Requests the Louisiana Department of Health to take immediate action to address racial disparity in maternal and child health outcomes and the alarming rate of mortality for African-American infants and mothers in Louisiana.

| 1 | A RESOLUTION |
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| 2 | To urge and request the Louisiana Department of Health to take immediate action to address |
| 3 | racial disparity in maternal and child health outcomes and the alarming rate of |
| 4 | mortality for African-American infants and mothers in Louisiana. |
| 5 | WHEREAS, the United States ranks thirty-second out of thirty-five of the world's |
| 6 | wealthiest nations in infant mortality, and Louisiana has the fourth highest infant mortality |
| 7 | rate in the country; and |
| 8 | WHEREAS, according to research by the Robert Wood Johnson Foundation, low |
| 9 | birth weight is a significant factor in infant death and the number of low-birth-weight babies |
| 10 | born in the United States is increasing at a rate greater than in other comparable countries, |
| 11 | based largely on the unsettling data for African-American infants; and |
| 12 | WHEREAS, African-American infants are now more than twice as likely to die as |
| 13 | white infants, with a death rate of eleven out of one thousand African-American infants |
| 14 | dying as compared to five out of every one thousand white infants, which results in more |
| 15 | than four thousand unnecessarily lost African-American infants each year; and |
| 16 | WHEREAS, based on a survey of United States government data, racial disparity in |
| 17 | infant mortality rates is astonishingly wider now than in 1850, thirteen years before the |
| 18 | signing of the Emancipation Proclamation; and |
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ORIGINAL SR NO. 240

WHEREAS, the United States is one of only thirteen countries in the world where
the rate of maternal mortality, the death of a woman related to pregnancy or childbirth, is
worse now than it was twenty-five years ago, with an estimated seven hundred to nine
hundred maternal deaths annually; and

5 WHEREAS, according to the United States Centers for Disease Control and 6 Prevention, African-American women are three to four times as likely to die from 7 pregnancy-related causes as their white counterparts; and

8 WHEREAS, studies over the past twenty-five years show that education and income 9 are not key determinants in this alarming trend as an African-American woman with an 10 advanced college degree is more likely to lose her baby than a white woman with less than 11 an eighth-grade education; and

WHEREAS, recently there has been a growing acknowledgment among researchers and healthcare professionals that the debilitating effects of societal and systemic racism have created a toxic physiological stress for African-American women, causing health problems such as hypertension and pre-eclampsia that directly lead to higher rates of infant and maternal death that are more reflective of the lived experience of race in this country as opposed to the genetics of race; and

WHEREAS, researchers have also indicated that there is a pervasive, longstanding racial bias in healthcare that results in the dismissal of legitimate concerns and symptoms of African-American women during pregnancy which may result in misdiagnosis of conditions that can be fatal to the mother and infant; and

WHEREAS, national attention is now being given to the undeniable inequality and racial disparity in infant and maternal birth outcomes and Louisiana statistical data confirms that despite access to prenatal healthcare, African-American infants in Louisiana are more than twice as likely to die as white infants, with more than twelve African-American infant deaths per one thousand live births as compared to five white infant deaths per one thousand live births, the worst ranking in the United States; and

WHEREAS, these outcomes are utterly reprehensible and there is no time to waste studying this matter further as each day represents a chilling risk of losing yet another African-American infant or mother in our state; and

1 WHEREAS, the current secretary of the Louisiana Department of Health, Dr. 2 Rebekah Gee, is an obstetrician/gynecologist, and a trained policy expert who has served in 3 numerous state and national policy roles, and prior to being appointed secretary, came to 4 Louisiana to serve as the director for the Birth Outcomes Initiative where she led the charge 5 to reduce unnecessary early caesarian section births; and

WHEREAS, Secretary Gee is the ideal expert to take a leadership role in this matter
and implement, through the many programs in her department, immediate and tangible
initiatives to protect the lives of African-American infants and mothers in Louisiana.

9 THEREFORE, BE IT RESOLVED that the Senate of the Legislature of Louisiana 10 does hereby request the Louisiana Department of Health to take immediate action to address 11 racial disparity in maternal and child health outcomes and the alarming rate of mortality for 12 African-American infants and mothers in Louisiana.

BE IT FURTHER RESOLVED that Secretary Gee's medical and policy expertise, the expertise of the many offices under her authority, including the bureaus and divisions within the office of public health and Medicaid, and the countless contacts she has both locally, nationally, and internationally make her department the ideal agency leader to champion this effort.

BE IT FURTHER RESOLVED that the department take immediate actions within its jurisdiction and control, through an organized effort of healthcare, community, and religious professionals, or through regulatory action considered appropriate, to implement measures to combat this crisis, including requiring healthcare professional diversity sensitivity training, increasing access to home visits and doulas, and any other measure considered appropriate.

BE IT FURTHER RESOLVED that on or before August 1, 2019, the department submit a summary report to the Senate of the Legislature of Louisiana identifying the immediate actions being taken to address mortality outcomes for African-American infants and mothers in Louisiana.

BE IT FURTHER RESOLVED that on or before October 1, 2019, the department host a summit on this matter to gather representatives from a vast network of expertise in one setting to ensure that proper attention is given to this crisis and to chart a pathway

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- 1 forward to save the lives of African-American woman and infants in Louisiana that can be
- 2 used as a national and world-wide model of excellence.
 - BE IT FURTHER RESOLVED that on or before December 31, 2019, the department
- 4 submit a summit recommendation report to the Senate of the Legislature of Louisiana
- 5 identifying the long-term actions being proposed by summit participants to address mortality
- 6 outcomes for African-American infants and mothers in Louisiana.
 - BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the
- 8 secretary of the Louisiana Department of Health.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Christine Arbo Peck.

SR 240 Original

DIGEST 2019 Regular Session

Carter

Requests the Louisiana Department of Health to take immediate action to address racial disparity in maternal and child health outcomes and the alarming rate of mortality for African-American infants and mothers in Louisiana and submit a summary report of immediate actions on or before August 1, 2019.

Requests the department to host a summit on or before October 1, 2019, and submit a summit recommendation report of long-term actions to address mortality outcomes for African-American infants and mothers in Louisiana to the Senate of the Legislature of Louisiana on or before December 31, 2019.