



Senator Cassidy, Stop Blaming Black Birthing People for Our Own Deaths Kelly Davis, Dr. Oni Blackstock

The racialized health inequities revealed and amplified by the ongoing COVID pandemic, the continued threat to reproductive rights, and spiraling racist violence make [recent comments by U.S. Senator Bill Cassidy of Louisiana](#) about Black women and maternal mortality all the more appalling. During an interview discussing Louisiana's maternal mortality rate - ranked among the highest in the country - the Senator remarked, "About a third of our population is African American; African Americans have a higher incidence of maternal mortality. So, if you correct our population for race, we're not as much of an outlier as it'd otherwise appear." He added, "Now, I say that not to minimize the issue but to focus the issue as to where it would be. For whatever reason, people of color have a higher incidence of maternal mortality."

Since the remarks surfaced on the national stage, many people have expressed disbelief and outrage, even as Senator Cassidy [refuses to retract his remarks](#). As Black health equity experts dedicated to addressing racism's deleterious health impacts, we know that every part of Senator Cassidy's analysis of Louisiana's maternal mortality crisis contains glaring and willful obstructions of scientific facts and public health guidance. According to the Louisiana Health Department's most recent data on pregnancy-associated mortality, Black birthing people accounted for nearly 60% of all maternal deaths in 2018 (despite representing 37% of births). However, Louisiana continues to fail *all* of its birthing people from this [mostly preventable cause of death](#). White birthing people in Louisiana experience 53 maternal deaths per 100,000 births. In contrast, in New York the average white maternal mortality rate from 2016 to 2018 was 12.6. Simply put, the Senator's assertion that to "correct [Louisiana's] population for race" would align the state's mortality rate is a lie.

The Senator's remarks are just the newest insult to a festering moral injury that has plagued this nation since its inception. Rhetoric about "correcting" the population by presumably minimizing or disappearing Black people has been the baseline of centuries of eugenics and population control campaigns that have ascribed environmental degradation, poverty and poor health to the [reproduction of people who are poor, disabled or non-white](#). These racist ideologies have not only informed decades of public policy and healthcare practice, but also undergird the current [Replacement Theory national debate](#).

Systemic racism contributes to the feckless disregard for the sanctity of Black life in all sectors of society, including healthcare. Over 25 years ago, a group of Black women and femmes launched the [Reproductive Justice movement](#) which connects the need to name intersecting spheres of oppression and re-envision a world where Black women and gender-expansive persons can choose how and whether or not to have families, and thrive in safe and secure communities.

For Senator Cassidy to posit that there is no known root cause for the nation's Black maternal health crisis flies in the face of global maternal health advocacy work that has been



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anchored by policy, advocacy and research catalyzed within his own state. The intense national news coverage about Black American maternal health has focused on [Louisiana](#). National maternal, infant and reproductive thought leaders like the [National Birth Equity Collaborative](#) and [Women With A Vision](#) are helmed in New Orleans. A team of researchers led by Louisiana's Tulane University proved that across the United State [the risk for homicide actually increased during the perinatal period](#).

Senator Cassidy's blaming Black people for poor health outcomes despite concrete evidence to the contrary is not happenstance, rather an age-old tactic used to evade the moral and political accountability of those in power. It's easier for Senator Cassidy and others to shift the narrative to blame Black women than to use their power as leaders and legislators to create the social supports Black birthing people need to thrive like [comprehensive health insurance](#), [abortion access](#), [gun control](#), and [anti-racist medical care](#). Advancing even just one of these policy areas could drastically improve Louisiana's maternal health. The ruling political class in Louisiana, including Senator Cassidy, has failed to meaningfully address any of these issues.

Irrespective of any politician's contempt for the lives of Black birthing people, we know our liberation is not dependent upon the legislature. Black birthing people are the experts in what they need to thrive. By leading with equity and centering the needs of the most marginalized, politicians could help co-create pragmatic solutions to improve birth outcomes, not just in Louisiana, but across the globe. That should be Senator Cassidy's ultimate goal. With or without him and other legislators, it will certainly be ours.

Kelly Davis is the Executive Director of New Voices for Reproductive Justice and the Co-Founder/Chief Equity Officer of KINSHIFT.

Dr. Oni Blackstock is a primary care and HIV physician and founder and Executive Director of Health Justice.