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NEW YORK  
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SENATE



SENATOR JULIA C. SALAZAR  
18<sup>TH</sup> SENATE DISTRICT

July 15th, 2020

## Statement on Sha-Asia Washington's Passing and Maternal Morbidity

Sha-Asia Washington was a pregnant, Black woman who, at the prime of her life, went to Woodhull Hospital in the 18 SD in Brooklyn NY for a routine pregnancy stress test and died immediately after delivering her baby. When doctors found that Ms. Washington's blood pressure was abnormally high, she was given medication to induce labor. While her baby, Khloe, was safely delivered, Ms. Washington subsequently went into cardiac arrest, and tragically died during the labor process.

Sha-Asia's story is devastating, and it is far too familiar. Racial and ethnic disparities in maternal mortality are a significant public health issue in NY. African American women have traditionally had a greater rate of increasing maternal deaths in NYS despite recent overall gains. According to the CDC, African American women are three to four times more likely than white women to suffer a pregnancy-related death, and twice as likely than their white counterparts to suffer a life-threatening complication. As with Ms. Washington, more than half of pregnancy-related deaths occur after delivery, with many at-risk conditions persisting as much as a year.

Undeniably, the pervasive and systemic racial bias in our medical system has led to the deaths of thousands of seemingly healthy Black mothers. Today, even a major gynecology association has recognized the role racism plays in negatively impacting the delivery of maternal health care. The prolonged exposure to the indignities and dangers of racism has cost many African American women their lives. The depth of this loss to our communities and the children and families left behind is incalculable.

The systemic racial bias in medicine and that the deaths of so many healthy Black mothers like Sha-Asia Washington are preventable. As the Chair of the NY's Senate Committee on Women's Issues, this has been a central issue for my office. Together with Senator Rivera, Chair of the NY Senate Health Committee, I am the co-prime sponsor of bill S8729, requiring all hospitals to provide statistics on childbirth complications, fetal loss, and other maternity related injuries to expectant mothers. Mothers should know this information so they can make informed decisions on where best to deliver their babies.

In addition to S8729, I have sponsored legislation that seeks to close the racial and socioeconomic gap in quality of maternal health care. I co-sponsored Senator Gustavo Rivera's bill, S1819, which establishes a maternal mortality and morbidity advisory council to investigate deaths like Sha-Asia Washington's. I've also introduced bill, S6889, to require anti-bias training for every medical student, medical resident and physician assistant student in the state to work towards eradicating the racial bias that has existed in our medical system for years.

It is important to note that public safety net hospitals like Woodhull provide crucial care and critical resources to working class communities of color across New York City. Woodhull, however, faced a \$10.5 million dollar budget cut due to the Governor's austerity budget, which I vehemently advocated against. Our public hospitals deserve more funding so we can invest in providing high-quality and equitable care for all New Yorkers. Investing in safety net hospitals like Woodhull, will also help to drive down maternal mortality rates by ensuring that high quality maternal care is a basic right across New York City and State.

My deepest and sincerest thoughts are with the family of Sha-Asia Washington who are left to recover from such a tragic loss. Ms. Washington's death is for each of us a call to action. I will continue to do everything within my legislative authority to use the tools at my disposal to address this egregious condition. I urge you to join me.

State Senator Julia Salazar, SD 18

A handwritten signature in black ink, appearing to read "Julia Salazar", with a stylized flourish at the end.