

Experiences of racism may contribute to the disproportionately high incidence of cardiovascular disease in Black women

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Cardiovascular disease (CVD) is the leading cause of death in the United States. Black women have a disproportionally higher burden of coronary



heart disease (CHD) and CHD-related mortality and earlier onset than women of other racial and ethnic groups.

Myocardial infarctions (MI), or heart attacks, also occur at younger ages in Black women, and these events are more likely to be fatal than those of <u>white women</u>. While many of these CHD-related deaths are preventable, little is currently known regarding the association of perceived <u>racism</u> with incident CHD.

In a new study from Boston University Chobanian & Avedisian School of Medicine, researchers found Black women who reported experiencing racism in employment, housing, and interactions with the police were associated with a 26% higher risk of coronary heart disease. These findings were presented as an abstract at the American Heart Association Epidemiology, Prevention, Lifestyle & Cardiometabolic Health Scientific Sessions in March 2023.

"Our study provides longitudinal evidence on the relationship between perceived interpersonal racism and incident cardiovascular endpoints, suggesting that Black women with higher levels of perceived interpersonal racism may subsequently have a higher risk of incident CHD," said corresponding author Shanshan Sheehy, MD, MSc, ScD, assistant professor of medicine at Boston University Chobanian & Avedisian School of Medicine.

The researchers evaluated data from approximately 48,000 individuals enrolled in the Black Women's Health Study, the largest follow-up study on the health of Black women in the U.S., to investigate whether selfperceived interpersonal racism was associated with an increased risk of coronary heart disease. All participants were free of <u>cardiovascular</u> <u>disease</u> and cancer in 1997.

During the 22-year follow-up period, 1,947 women developed coronary



heart disease.

In 1997, the participants answered five questions about their experiences related to interpersonal racism in their <u>everyday activities</u>, such as "How often do people act as if they think you are dishonest?" They also answered questions about <u>unfair treatment</u> due to their race in employment (hiring, promotion, firing), housing (renting, buying, mortgage), or in interactions with police (being stopped, searched, threatened).

The researchers calculated perceived interpersonal racism scores for interactions that involved jobs, housing and police interactions by adding up the positive responses to those three questions. The self-perceived interpersonal racism scores ranged from 0 (no to all three questions) to 3 (yes to all three questions).

The researchers' analysis of perceived interpersonal racism scores for interactions that involved jobs, housing and police found that women who reported experiencing racism in all three categories had an estimated 26% higher risk of <u>heart</u> disease relative to those who answered negatively to all three questions.

According to the researchers, there were differences in associations with CHD between perceived racism in daily life and perceived racism at the job, in housing, and by the police.

"The types of perceived racism may be reported with different accuracy by participants. Participants might have a more accurate recall of experiences of racism in job, housing, and with the police than experiences of racism in daily life."

"Being denied a job promotion, mortgage application, or being treated unfairly by the <u>police</u> might be harder to forget and might have a greater



association with Black women's social, emotional, and physical wellbeing, compared with experiences of racism in daily life such as receiving poor services at a restaurant," explains Sheehy who also is an epidemiologist at the Slone Epidemiology Center.

These findings appear online in the journal Circulation.

More information: Shanshan Sheehy et al, Perceived Interpersonal Racism in Relation to Incident Coronary Heart Disease Among Black Women, *Circulation* (2024). <u>DOI:</u> <u>10.1161/CIRCULATIONAHA.123.066471</u>

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