

Why are Black adults at greater risk of death from heart disease? Study blames social factors

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ayawn@tulane.edu
504-247-1443



Black Americans are 54% more likely to die of cardiovascular disease than White Americans, but a new study found that social risk factors may be to blame. (photo by iStock)

Black Americans are 54% more likely to die of cardiovascular disease than White Americans, despite a substantial overall reduction in cardiovascular disease mortality nationwide.

Now, a new study from Tulane University published in [Annals of Internal Medicine](#) has found that this racial disparity can be attributed to social factors such as unemployment, low income, and lack of a partner rather than known factors such as hypertension and obesity.

“For so many years we have focused on smoking, diet, physical activity, obesity, hypertension, diabetes, and high cholesterol – and we know those are important for the prevention of cardiovascular disease – but it surprised me that the Black-White difference in cardiovascular disease mortality is mainly due to social

factors,” said Dr. Jiang He, lead author and Joseph S. Copes Chair in Epidemiology at Tulane’s School of Public Health and Tropical Medicine.

Using health data from more than 50,000 adults, the study examined the association between clinical risk factors (obesity, diabetes, hypertension, and high cholesterol), lifestyle risk factors (smoking, unhealthy diet, lack of exercise, and too little or too much sleep), and social risk factors (unemployment, low family income, food insecurity, low education, no regular access to healthcare, no private health insurance, not owning a home, and not married nor living with a partner) with cardiovascular mortality.

When the study adjusted for age and sex, Black adults had a 54% higher cardiovascular disease mortality rate compared to White adults. That dropped to 34% and 31% after adjusting for clinical and lifestyle risk factors, respectively. But the racial difference in cardiovascular mortality completely dissipated after adjusting for social risk factors.

“When we adjusted for lifestyle and clinical risk factors, the Black-White disparity in cardiovascular disease mortality was diminished but still persisted,” He said. “However, after adjusting for social risk factors, this racial difference totally disappeared.”

This study follows another recent Tulane study which similarly found Black Americans are 59% more likely to die prematurely than White Americans. That disparity was [reduced to zero](#) after adjusting for these social factors, also called social determinants of health.

Social determinants of health, while a relatively new framework, was emphasized by the CDC’s [Healthy People 2030 initiative](#) as eight areas of life critical to health and well-being.

For He, the findings emphasize the importance of well-paying jobs, health care access and social support that can come from a family or tight-knit community.

Going forward, He is putting these findings into practice with a program that aims to address hypertension in New Orleans’ Black communities by [partnering with local churches](#) to provide health screening training and free medication.

“It is essential to develop novel community-based interventions for reducing cardiovascular disease risk in Black populations,” He said.