

Where Women Live Shapes Their Heart Health for Decades

Living in neighborhoods more vulnerable to natural disasters and public health emergencies affects women's heart health, according to a new study.

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A woman's neighborhood may influence her heart health for decades, according to a long-term study published in [Circulation: Population Health and Outcomes](#). The findings show that social and environmental factors impact women's risk of cardiovascular disease and highlight opportunities for cardiovascular disease intervention as women approach midlife and menopause.

"Our study shows that heart health in midlife is shaped by more than personal choices. Income, education, and neighborhood conditions may all play a role," said senior author Izzuddin Aris, PhD.

Cardiovascular disease is the leading cause of death for women in the United States. In 2023, the [Centers for Disease Control and Prevention \(CDC\)](#) found that heart disease was responsible for the deaths of 304,970 women, or about one in every five female deaths,. Among women age 20 or older, 45% are living with some form of cardiovascular disease, and less than 50% of women entering pregnancy in the U.S. have good heart health, [according to the American Heart Association \(AHA\)](#).

Despite the statistics, only 44% of women recognized that cardiovascular disease is their greatest health threat, according [to a 2019 report from AHA](#). A 2025 national survey also showed that cardiovascular health and cholesterol knowledge gaps are widespread, especially [among Black people and Latinos](#). Cardiovascular disease is the [number one killer of new moms](#) and accounts for over a third of maternal deaths. Although maternal mortality rates are on the decline, the rates remain significantly [higher for Black women](#).

For the latest study, researchers from Harvard Pilgrim Health Care Institute followed 1,200 women in eastern Massachusetts for over two decades from pregnancy to midlife. Women self-reported menopause status through questionnaires, and, at regular follow-up visits every three to five years, researchers tracked patient cardiovascular health scores based on blood pressure, cholesterol, sleep, diet and physical activity. On a scale of one to 100, a higher score meant better heart health. The researchers analyzed the heart health and menopause data against sociodemographic data, including household income, education, race, ethnicity and neighborhood Social Vulnerability Index (SVI). The Social Vulnerability Index, [a tool developed by the CDC](#),

identifies communities vulnerable to natural disasters and public health emergencies.

Of 1,200 women in the study, 15.4% had annual household incomes below \$40,000, 8.8% had a high school education or less, and 17.4% lived in high SVI neighborhoods. Black women and women with lower income and lower education were less likely to attend their cardiovascular health follow-up visits.

Women living in the most socially vulnerable neighborhoods scored 6 to 10 points lower on heart health across the two decades of follow-up. The differences were evident as early as three years after enrollment in the study and lasted into midlife. The heart health of women in more socially vulnerable neighborhoods declined faster in the years leading up to menopause. While menopause [does not directly cause heart problems](#), it marks a period of a women's life when cardiovascular risk factors can accelerate.

"The years before and around menopause may be an important time to support women's heart health," [said Aris](#). "This is especially true for women living in under-resourced neighborhoods."

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