

Black Folks, Women Less Likely to Survive After CPR for Heart Attack

White people were three times more likely to survive CPR for cardiac arrest compared with Black people.

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Black people and women in general are less likely to survive a heart attack after receiving conventional [cardiopulmonary resuscitation](#) (CPR), according to a study published in the American Heart Association (AHA) journal [Circulation](#).

Every day, nearly 1,000 Americans experience a heart attack outside of a hospital, and their odds of survival increase if a bystander performs timely CPR (also known as mouth-to-mouth resuscitation).

Lead study author Paul Chan, MD, a cardiologist at Saint Luke's Mid America Heart Institute, in Kansas City, [told USA Today](#) that survival outcomes differed depending on the recipient's race and biological sex.

In the United States, Latino and Black Americans, two groups that have experienced longstanding structural racism and limited access to education and health care, are at higher risk for [cardiac arrest](#) outside of a hospital setting as well as worse survival outcomes.

Indeed, the study found that white people were three times more likely to survive CPR after a heart attack compared with Black people. What's more, men of any race were twice as likely to survive compared with women.

Prior research has shown that [Black and Latino individuals are less likely to receive CPR](#) from a bystander than white individuals. Yet even when Black folks receive bystander CPR, their odds of survival are low. Researchers found that white men who had a heart attack and received CPR from a bystander were 41% more likely to survive, the highest odds of any group. At just 5%, Black women had the lowest survival chances.

Researchers don't know what's to blame for the discrepancy in outcomes but wonder whether training could be a factor. Chan noted that mannequins commonly used in CPR certification courses are often white and male. He also pointed out that some bystanders may perceive women as weak or may not want to touch a women's upper body to perform CPR.

Additionally, some bystanders worry they will incorrectly perform CPR. Quality of training in different communities may also be a factor, according to researchers.

"The study points out that CPR saves lives, but high-quality CPR is also very important," Comilla Sasson, MD, PhD, vice president of health science for the AHA, told USA Today in a statement. "There are some things we can do to help ensure equitable outcomes for all patients needing CPR."

However, quality of CPR is not the only concern. Lisa Cooper, MD, MPH, director of the Johns Hopkins Center for Health Equity, who was not involved with the study, noted that the medical history of those in the study experiencing a heart event is also relevant.

To teach Latinos and African Americans hands-only CPR, which is simpler but also effective, the [AHA launched the "Héroes Salvando Corazones/Heroes Saving Hearts" campaign in 2022](#). The campaign promotes a two-step method of CPR that does not include breaths but advises bystanders to first call 911 and then push hard and fast in the center of a person's chest at a rate of 100 to 120 beats per minute.

In recent years, the proportions of Latino and Black Americans [who feel confident performing CPR has increased](#). One AHA survey found that 44% of Latinos feel confident performing conventional CPR compared with 37% in 2021. Similarly, Black Americans' confidence performing CPR increased from 30% to 44% in 2023.

To read more, click [#CPR](#). There, you'll find headlines such as "[Cardiac Arrest Deaths in College Athletes Decline, Still High for Black Athletes](#)," "[New Campaign Encourages African Americans and Latinos to Perform CPR](#)" and "[For People Faced With Cardiac Arrest, Where They Live May Matter](#)."