



To: The Honorable Members of the Senate Finance Committee

From: Red Dress Committee of the DMV Chapters of The Links, Incorporated

Date: January 27, 2026

Position: Informational Only

On behalf of the Red Dress Committee of the Washington DC, Maryland and Virginia (DMV) Chapters of The Links, Incorporated, an international, not-for-profit volunteer service organization of professional women of color, we are pleased to submit written testimony on Senate Bill 0019 – Maryland Commission on Women’s Health Advancement to the Senate Finance Committee. We urge you to explore the cardiovascular health needs of Black women in perimenopause, menopause and post menopause when considering a women’s hospital and a statewide network of clinical sites for women.

Cardiovascular disease remains the number one killer of Black women, with roughly 59% of Black women ages 20 and older living with some form of heart disease. Our work has shown that these risks are not static; they evolve throughout a woman’s life. Heart disease is the leading cause of maternal death, and Black women are 3.5 times more likely to die from pregnancy-related complications like postpartum cardiomyopathy. As women age, the decline in estrogen during menopause can lead to significant changes in cardiovascular health. Notably, Black women often enter menopause earlier than their peers, increasing their cumulative risk for heart failure and stroke.

This February, the DMV chapters will host our 18th Annual Red Dress weekend, titled "Ladies First!" This year, our program focuses specifically on the intersection of menopause and heart health. We have found that while menopause is a natural transition, for Black women, it is often where existing health gaps—such as undiagnosed hypertension and diabetes—converge into life-threatening crises.

SB 0019 seeks to establish a statewide clinical network to ensure a full continuum of care for women across their lifespans. Specifically, the network should:

Address Lifespan Disparities: Clinical protocols must account for the early onset of cardiovascular risks in Black women, starting from reproductive years through post-menopause.

Integrate Specialist Care: A statewide network should ensure that a woman in Southern Maryland has the same access to cardio-obstetrics and menopausal heart specialists as someone in a major metropolitan hub.

We appreciate the opportunity to submit testimony. Our work promoting heart health happens 365 days a year and we need a healthcare infrastructure that is as committed as we are. By establishing this Commission and eventually a clinical network, Maryland can move from awareness to action, ensuring that every woman—regardless of her zip code or ethnicity—has a heart-healthy future. Should you have any questions, please contact Krysta Jones, Advocacy Chair, at krysta.n.jones@gmail.com.