

## HEARTWISE WEBINAR SERIES

# WOMEN@HEART: HOW PEER SUPPORT CAN HELP WOMEN WITH CORONARY ARTERY DISEASE DURING COVID-19

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Woman@Heart Participant, Patient with lived experience

# WELCOME HOUSEKEEPING

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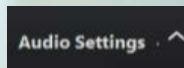
To notify the presenters and moderators if you are having any technical difficulties



To ask questions through session



To check your audio settings by clicking "Test speaker and microphone"



1. To provide an overview of women's **rehabilitative needs** and how **peer support** can help them.
2. To provide details on the **Women@Heart peer support programs** and the benefits in this time of isolation.
3. To hear about the **personal journey** of a patient with lived experience who was supported from the bedside to her home.



## WEBINAR TOPICS



# HEART DISEASE IN WOMEN

**WHEN IT COMES TO HEART  
DISEASE, WOMEN ARE...**

- **UNDER-RESEARCHED**
- **UNDER-DIAGNOSED**
- **UNDER-SUPPORTED**
- **UNDER-AWARE**

Source: [Heart and Stroke Report](#), February, 2018



**2/3**

of heart disease  
clinical research  
focuses on **MEN**

## UNDER-RESEARCHED

### WHY?

- Safety concerns
- Hormone fluctuations
- Lack of participation

Women are slow to identify the signs and symptoms of a heart event.



Early heart attack signs are missed  
in **78% of women.**

## UNDER-DIAGNOSED

### WHY?

Women delay seeking help due to fear, embarrassment, living alone, not wanting to bother anyone, or misinterpretation of signs and symptoms

### EVERY MINUTE COUNTS.

Getting treatment as fast as possible is critical to survival and to minimize damage.



## UNDER-AWARE

- Substantial **gaps in women's knowledge** of heart disease.
- Disconnect between **perceived and actual risk** of heart disease:
  - **Perceived:** your own perceptions of your personal risk
  - **Actual:** Determined by measurable risk factors and health behaviours
- Women's understanding and awareness of their **own risk status** is less than optimal.



## UNDER-SUPPORTED

### WHY?

- Lack of physician referral
- Physical and psychosocial barriers
- Putting herself last.

After a heart disease diagnosis, **women are 50% less likely** to participate in cardiac rehabilitation.



## THE NEED

- Support from women with similar experiences
- Bring care to places that female patients are most likely to go
- Information related to their diagnosis and medical management
- Improving communication with their health care providers
- Opportunity to express their emotions and stress of living with condition



## EMOTIONAL SUPPORT

Availability of a peer to discuss personal difficulties to support a full recovery.

## INFORMATIONAL SUPPORT

Gain the knowledge relevant to problem-solve and achieve health goals.

## APPRAISAL SUPPORT

Discuss information for self-evaluation and validation of emotions and behaviours.

## PEER SUPPORT

Provision of  
support from a  
person sharing  
similar experiences  
with a condition

## ANALYSIS

- Literature review
- Environmental scan
- Consultations
- Best practice models
- National survey

## DESIGN

- Advisory committee
- Delivery Model
- Curriculum

## DEVELOPMENT

- Manual(s)
- Training workshop
- Evaluation & refinements



**ANALYSIS,  
DESIGN &  
DEVELOPMENT**

# WOMEN@HEART

PEER SUPPORT PROGRAM LED  
BY WOMEN WITH HEART DISEASE  
FOR WOMEN WITH HEART DISEASE



## PROGRAM OUTLINE



## DELIVERY MODEL

- In person or virtual meetings
- Group size: 6-10 people/group
- Length of sessions: 2 hours/session/bi-weekly
- Number of sessions: 12 sessions /6 months
- Closed support
- Online registration and pre/post assessment

# SESSIONS OVERVIEW

	EMOTIONAL ATTRIBUTE		INFORMATIONAL ATTRIBUTE		APPRAISAL ATTRIBUTE	
	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6
<b>EVERY 2 WEEKS</b>	Road to Recovery		Risk Factor Awareness and Management		Reinforcement and Feedback	
	Emotional Management Coping		Self-Management Skills Empowerment Advocacy		Health system and Community Navigation	



## LEADERS ROLE

- Reduce isolation
- Support by phone
- Connect to resources
- Guide through tough times
- Provide self-management skills



## RESULTS TO DATE

### Improvement in:

- Adaptive coping
- Health activation
- Stress, anxiety and depression
- Communication with providers
- Vegetable consumption
- Waist circumference



## MEET SUE

- My Story
- Support at the bedside
- Road to recovery
  - Feelings
  - Needs
  - Challenges
- Women@Heart program
  - What I learned
  - How it helped me





UNIVERSITY OF OTTAWA  
HEART INSTITUTE  
INSTITUT DE CARDIOLOGIE  
DE L'UNIVERSITÉ D'OTTAWA

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## QUESTIONS?

All sessions will be recorded  
and available on our  
Prevention and Wellness Centre (PWC) website.

**[PWC.OTTAWAHEART.CA](http://PWC.OTTAWAHEART.CA)**

Please email [heartwisewebinar@ottawaheart.ca](mailto:heartwisewebinar@ottawaheart.ca)  
if you have any questions or ideas  
for additional topics.

**THANK YOU FOR JOINING!**