

# WOMEN@HEART

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



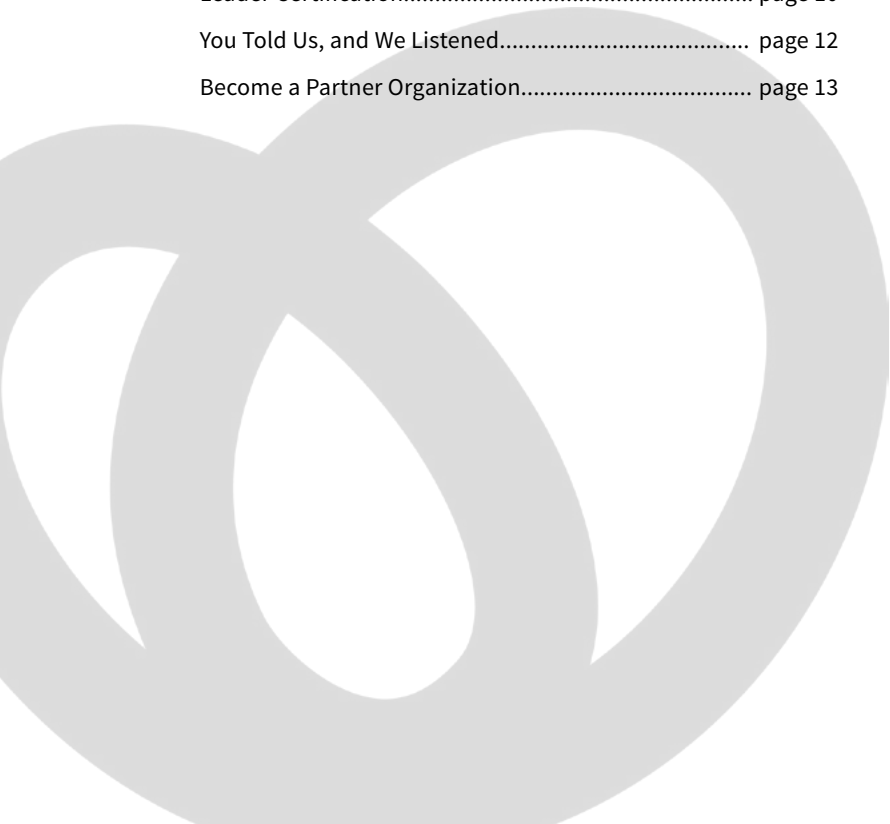
CANADIAN WOMEN'S  
HEART HEALTH CENTRE  
CENTRE CANADIEN DE SANTÉ  
CARDIAQUE POUR LES FEMMES

**WOMEN@HEART**  
PEER SUPPORT PROGRAM

# TABLE OF **CONTENTS**

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At a Glance.....	page 1
Goal.....	page 1
Objectives.....	page 1
Program Impacts.....	page 1
The Reality.....	page 2
The Time for Change.....	page 3
Why Peer Support.....	page 4
How it Works.....	page 5
Features.....	page 6
Group Session Curriculum.....	page 8
Leader Certification.....	page 10
You Told Us, and We Listened.....	page 12
Become a Partner Organization.....	page 13



## AT A GLANCE

The Women@Heart program is designed to create a caring environment for women to learn from each other and support one another in the road to recovery.

## GOAL

To provide women with heart disease, in every community, with access to emotional support, education support and a caring environment for a better recovery after a cardiac event.

## OBJECTIVES

1. To promote coping to reduce risk of isolation associated with heart disease diagnosis in women;
2. To empower women to take charge of their heart health and to better understand their condition;
3. To create a caring environment for women to learn from each other by sharing their stories; and
4. To represent a volunteer force of women who will become agents of change by being advocates for heart healthy women in their communities.

## PROGRAM IMPACTS

Increased awareness and knowledge of heart disease among women.

Improvement in psychosocial well-being and health behaviours of women.

Improvements in the delivery of patient-centered care for women after a cardiac event.

Enhanced patient satisfaction.

Increased advocacy for women's heart health.

## THE REALITY

Quality of life is significantly lower for women than men after a cardiac event, and women who lack social support have a higher risk of fatal heart disease.

**26% OF WOMEN** WHO HAVE A HEART ATTACK DIE WITHIN ONE YEAR COMPARED TO 19% OF MEN

PEOPLE WITH ADEQUATE SOCIAL RELATIONSHIPS ARE AT A **50% LOWER RISK OF DEATH** THAN THOSE WITH POOR OR INSUFFICIENT SOCIAL RELATIONSHIPS

**35% OF WOMEN** WITH CARDIOVASCULAR DISEASE DO NOT VIEW THEIR EVENT AS A CHRONIC CONDITION THAT NEEDS TO BE MANAGED





## THE TIME FOR CHANGE

The low participation rate of women in cardiac rehabilitation (CR) programs has been known for years, yet persists despite the known improvement in survival rate; women in developed countries are 36% less likely to participate in CR than men. One reason may be that conventional CR programs do not meet the recovery needs of women. It has been suggested that women's primary 'rehabilitative need' may be social support, particularly from women with similar illness experience.

Research suggests that supportive cardiac care for women must create opportunities to comfortably discuss their health concerns with their peers.

New strategies to build social support for women with heart disease are vital given their specifically expressed needs, adverse psychosocial responses, and poor participation and completion rates in traditional cardiac rehabilitation.

*“Thank you so much for coordinating this outstanding program. It was a tremendous help to me in dealing with my heart attack and the emotions and anxiety that followed. This program is a treasure for all women who have suffered a heart event or heart disease”.*

***Female participant, December 2023***

## WHY PEER SUPPORT?

We know that people are more likely to hear and personalize messages, and consequently to change their attitudes and behaviours, if they believe the peer is similar to them and face the same concerns and pressures.

The most effective role models are those who are most similar yet more competent at the modeled behaviour.

Support interventions empower patients to improve the management of their health and provide meaningful opportunities to help others facing similar challenges.

Despite the multiple applications, peer support is comprised of three specific and common attributes: emotional support, informational support and appraisal support. These attributes fully support those navigating through various stressors in order to achieve desired health outcomes.

## ADVANTAGES TO PEER SUPPORT PROGRAMS

- Benefits of reciprocal models in which peers both receive and extend support to each other.
- Functions to supplement and enhances other health care services.
- Peer support interventions are significantly less expensive than traditional case management models because they train and mobilize volunteers who are not health care providers.
- Increases the number of social relationships.
- Psychological and physical health benefits for both the peer and the leader.

### EMOTIONAL SUPPORT

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

### INFORMATIONAL SUPPORT

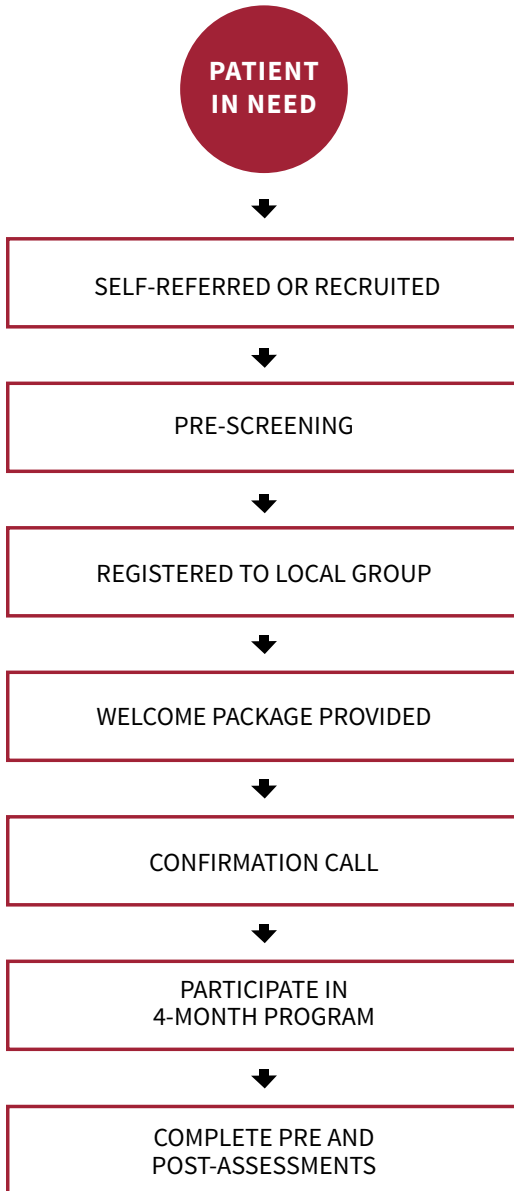
Gain the knowledge relevant to problem-solve and achieve health goals.

### APPRAISAL SUPPORT

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

## HOW IT WORKS

The Women@Heart Program is grounded in the principles of peer support, which has strong research evidence in addressing gender-specific recovery barriers that women face.



## FEATURES

The Women@Heart Program consists of a series of 10 sessions of 2 hours held weekly followed by bi-weekly for 4-month period in a closed support format (same members, not revolving members). These two hour sessions are facilitated by trained peer leaders.

The Women@Heart modules first address emotional support to reduce the risk of isolation and promote coping with diagnosis; secondly, educational support to empower women to take charge of their health; and lastly offer a caring, social environment for women to learn from each other.

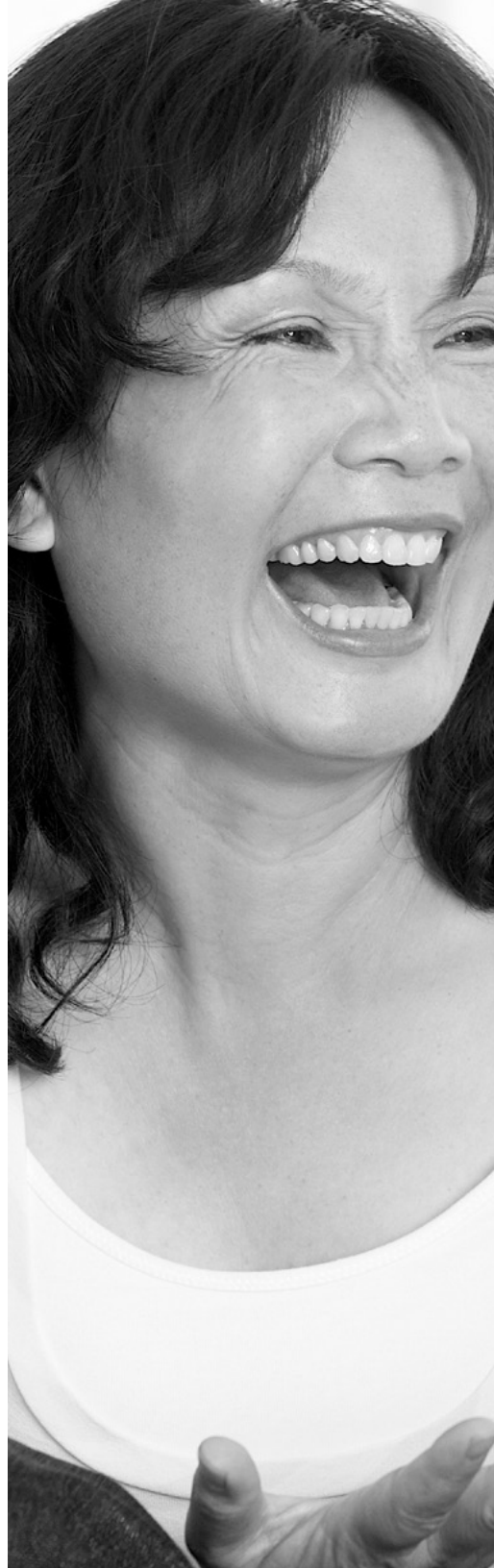
To ensure program accessibility, the program is completely free, the sessions are held within the community or virtually and physician referral is not required.

The Women@Heart program includes the most evidence-based components of peer support:

- Role modeling and effective listening;
- Empowerment, encouragement and motivation;
- Goal setting, action-planning and problem solving; and
- Helping patients to better navigate the health care system for resources.

*“The Women@Heart saved my life, it is the best program and could not be more complimentary.”*

**Female participant, March 2023**







*“I really learned a lot from the women in my group as well as the course material. I have even made a couple of friends from the group which we still talk to each other a lot.”*

**Female participant, September 2021**

## GROUP SESSIONS OVERVIEW

1

### **SESSION 1: WOMEN AND HEART DISEASE**

Participants tackle the most common myths and misperceptions of heart disease and gender differences, plus discuss treatments, symptoms, and diagnosis of heart disease.

2

### **SESSION 2: ROAD TO RECOVERY**

Participants write their heart disease story and share their personal journey with each other. Participants will also learn about the emotional and physical road to recovery.

3

### **SESSION 3: YOUR EMOTIONS AND HEART DISEASE**

Participants explore the most common emotions of surviving a heart incident, including sadness, anger and frustration, in addition to learning the most effective ways of coping with change.

4

### **SESSION 4: MANAGING EMOTIONS**

Building on session 3, participants gain specific tools to best manage their emotions, including relaxation techniques, positive thinking, and effective communication strategies.

5

### **SESSION 5: MANAGE YOUR HEART**

**DISEASE RISK** Participants receive their personalized Risk Factor Profile, and a road map to identify the health strategies that will have the most positive impact on their health. Participants will engage in discussion on key tips to improve their risk factors.





6

**SESSION 6: ACTIVATE YOURSELF FOR HEALTH**

Participants learn about how to remain motivated, tackling issues such as confidence, activation and decisional balance. Participants also learn about goal setting and creating an action plan to manage their risk factors and maintain a heart healthy lifestyle.

7

**SESSION 7: PROBLEM SOLVING SKILLS**

Participants will discuss the barriers they encounter to making healthy changes and learn to problem-solve challenges and triggers in their everyday lives.

8

**SESSION 8: THE SLIPPERY SLOPE OF LIFESTYLE CHANGE**

Participants learn to recognize slips from their health goals and how to build effective strategies to prevent or recover from relapses, including dealing with negative self-talk.

9

**SESSION 9: BECOMING AN EMPOWERED PATIENT**

Participants learn how to navigate the community resources available to them and work with their health care team to better manage their condition and risk factors.

10

**SESSION 10: THE JOURNEY GOES ON...**

Participants look back over the 9 sessions and tie together the most important skills and tools to move confidently into the future.

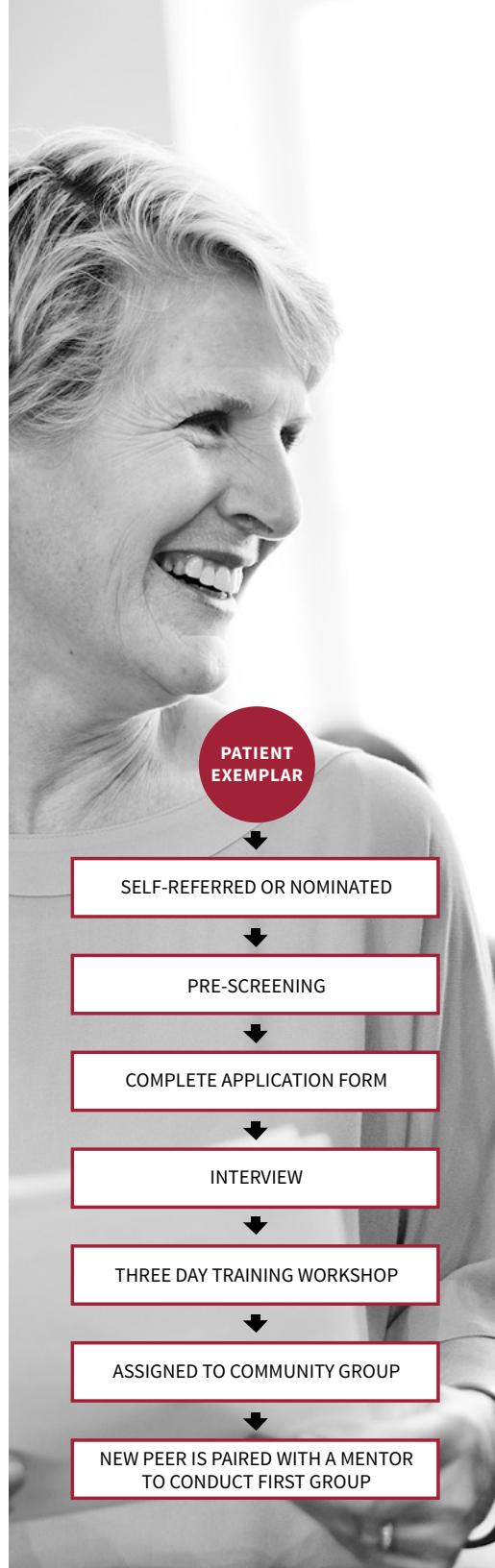
## LEADER CERTIFICATION

Peer leaders are women who have been diagnosed with heart disease and have a strong passion for supporting and helping other women in their recovery. Leaders must have come to terms with their own heart disease diagnosis, and be physically, emotionally, and psychologically ready to help other women. Leaders undergo a screening process to determine eligibility in becoming a leader, after which they complete a 3-day training workshop led by experts at the Heart Institute.

## TRAINING PROVIDED

Peer leader training will consist of:

- Disease specific information (general disease information, women and heart disease, risk factor management, stress coping and emotional management).
- Communication skills (active listening, sharing stories, facilitation skills, coaching skills, public speaking).
- Support skills (non-directive support, building motivation).
- Self-care skills (goal setting, action plan, problem solving).
- Access to community resources to address ethical concerns, role conflict, crisis management.



PATIENT  
EXEMPLAR

SELF-REFERRED OR NOMINATED

PRE-SCREENING

COMPLETE APPLICATION FORM

INTERVIEW

THREE DAY TRAINING WORKSHOP

ASSIGNED TO COMMUNITY GROUP

NEW PEER IS PAIRED WITH A MENTOR  
TO CONDUCT FIRST GROUP



## COMMUNITY OF PRACTICE

Peer Leaders meet quarterly to support each other, share knowledge and experiential learning, and, most importantly, keep each other committed to, and consistent with, the values and principles of practice of peer support.

The camaraderie experienced within a group of like-minded individuals who share similar values and lived experience can help to maintain the health, hopefulness and wellness of the leaders, provide opportunity for learning and the sharing of wisdom, and remind each other of peer support's guiding values.

## BENEFITS

It has been demonstrated that people who provide peer support experience higher rates of physical health, life satisfaction, and lower rates of distress and are more optimistic about their health.

Here are some of the benefits that Peer Leaders can gain by becoming involved:

- Sense of purpose (accomplishment and competence).
- Well being (making people feel good about themselves).
- Knowledge gain (more knowledgeable and confident in own skills).
- Acceptance (opportunity to come to greater terms with own illness).
- Social Connection (protection from social isolation and physical decline).

## YOU TOLD US, AND WE LISTENED

### A NATIONAL SURVEY TO IDENTIFY HEART HEALTH NEEDS AMONG CANADIAN WOMEN.



#### WE ASKED YOU:

How valuable would it be to have local community members, trained by qualified health care providers, to conduct heart health education and outreach in communities where they live?

The survey identified that **83% of women** across Canada wanted a local heart disease support network for women in their community.

## BECOME A PARTNER ORGANIZATION

**WITH THIS “TRAIN THE TRAINER” APPROACH THE WOMEN@HEART PROGRAM CAN BE INTEGRATED INTO YOUR ORGANIZATION.**

Here are the site requirements to become a partner organization to adopt the Women@Heart Program:

**PHASE 1: IN-SERVICE AND READINESS ASSESSMENT**

**PHASE 2: PARTNERSHIP AGREEMENT**

**PHASE 3: TRAINING AND PROGRAM IMPLEMENTATION**

To facilitate successful implementation of the Program, the Site must:

- Designate a representative to oversee implementation of the Program at your site, and to liaise with the University of Ottawa Heart Institute (program coordination and logistics, peer leader screening and registration, patient screening and enrollment).
- Screen group sessions and/or set up videoconference/teleconference accounts for virtual groups.
- Ensure selected Peer Leader candidates attend the training workshop to become designated W@H Program Peer Leaders.
- Pay the Women@Heart annual program fee to access the licensed program material and have the peer leaders trained.



FOR MORE INFORMATION AND HOW TO GET INVOLVED  
WITH THE WOMEN@HEART PROGRAM PLEASE CONTACT:

**WOMEN@HEART PROGRAM**  
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