

research snapshot

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There Are Gender Differences in the Barriers to Cardiac Rehabilitation

What is this research about?

Heart Disease is the global leading cause of disability and death. The development and progression of heart disease is mainly due to a number of cardiac risk factors that may be changed. These factors include smoking, the amount of physical inactivity, high blood pressure, and poor diet. Reducing the burden of illness and death, while managing lifestyle changes, can be met with secondary prevention measures, such as cardiac rehabilitation (CR). CR is an outpatient secondary prevention program. CR consists of exercise training, education and counseling. The literature has shown that participation in CR results in improvements in quality of life and reductions in illness, death and cost of care. Despite the benefits of CR, evidence shows that participation in CR is still low. Also, research has shown that women are much less likely to participate in CR compared to men. While there are many factors affecting this difference, there is little available research that has assessed participation barriers related to gender.

What did the researchers do?

The researchers carried out a longitudinal study that investigated CR barriers associated with gender and program participation. At the first measure, 1496 heart disease outpatients were surveyed. Nine months later, 1262 participants (of whom 28.5% were -female) completed the follow-up survey. Within the second questionnaire, participants were

What you need to know:

Gender is an important factor that impacts health equity and access to healthcare programs and services. Healthcare professionals need to recognize that men and women behave differently within the environmental healthcare context. In order to improve women's participation in secondary management programs, such as CR, psychosocial roles should be addressed, health information should be carefully discussed, and finally, physicians should encourage women to take part in programs that are proven to improve their health.

asked to report if they participated in CR and list the percentage of sessions that they attended. Further, respondents did a 19-question survey that listed potential barriers to participation in the program. Each question was rated on a scale which ranged from 1 'strongly disagree' to 5 'strongly agree'.

What did the researchers find?

The researchers found that more males (43.9%) reported participating in CR compared to females (36.9%). Males were also more likely to attend more of their prescribed CR sessions (86.2%) than females (80.7%). While fewer females participated in CR, they did not see greater barriers to CR participation than males. However, the nature of their barriers differed. The most strongly rated barriers by females were:

- lack of need due to a home exercise routine;

- viewing exercise as tiring or painful;
- lack of CR awareness;
- other illnesses;
- the belief that their condition is not serious enough to warrant participation;
- lack of encouragement by their physician.

The least strongly rated barriers by women were:

- CR was not offered in their first language;
- the illness of a close relative;
- work responsibilities.

The most strongly rated barrier items by males were:

- engaging in an exercise routine at home or in the community;
- confidence in self-managing their own condition;
- perceived lack of need and the belief that their condition is not serious enough to justify participation.

The least strongly rated barriers by males were:

- CR was not offered in their first language
- the illness of a close relative
- the belief that CR would not improve their health.

How can you use this research?

This study supports previous literature in that women are less likely to participate in CR programs. While overall, there were no differences in barriers to program participation, the nature of the barriers differed by gender. The findings could help with the development of tailored interventions to promote greater CR participation among women and men. Future research is needed to look at ways to overcome these barriers. Further, upon referral to a

CR program, healthcare professionals should identify and address gender-specific obstacles.

About the Researchers

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Keywords

Barriers, Gender, Cardiac rehabilitation, Heart disease, Patient participation, Program utilization

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