
Implementing Telehealth technology for South Asian seniors with cardiovascular disease



Student Name: Safia Nazarali
Program Stream: Global Diseases
Research Advisor: Dr. Al-Karim Mawani
Practicum Organization: Stouffville Family Health Practice; Immigrant and Refugee Health
Practicum Supervisor: Dr. Al-Karim Mawani

The growing burden of chronic disease, including CVD, is escalating both health care spending and morbidity and mortality rates.¹ CVD is the leading cause of morbidity and mortality for men and women, causing 34% of all deaths in Canada.² By causing premature death, CVD has a significant impact on the quality of life of those afflicted by the disease, while resulting in negative economic and social consequences, particularly in SA seniors.³ The risk and burden of heart disease in SA immigrants living in western societies is higher than in non-immigrants.³ This is a concerning trend considering that SA immigrants are the fastest growing group of Canadian ethnic immigrants.⁴ Given the demographic shift in Canada's immigrant population, HCPs must respond to the increased prevalence of CVD in Canadian SA seniors in order to effectively meet the health care needs of this population.

Historically, CVD prevention programs in Canada have focused on non-immigrants, with little research on ethnic differences in cardiovascular health and ethnically tailored prevention strategies.^{3,5}

As a result, the primary role of HCPs working with SA seniors is to increase the senior's awareness of CVD and associated risk factors in hopes that this may provide the incentive to make healthy lifestyle changes.⁶ HCPs who assume active roles in reducing the risk of CVD in vulnerable populations can positively influence overall morbidity and mortality rates.⁷

CVD is growing out of proportion in the SA seniors' population due to a lack of knowledge and awareness in self-care management strategies, resulting in poor lifestyle choices. This results in a significant increase in modifiable risk factors, such as blood pressure and cholesterol. In order to better manage their disease and prevent rapid deterioration of their health, the SA senior population requires prompt, quality health information. The current health care delivery model is inefficient as seniors struggle with barriers, such as accessibility and timely interventions. Hence, Telehealth is a technology solution to reduce the risk of CVD among the seniors. It is the delivery of health care services to clients, such as the frail senior with mobility concerns, in the privacy of their home, to maintain or restore their health, improve their independence, and reduce disability or exacerbation of illness.

Global Health Relevancy

This paper discusses the literature on CVD and a Canadian ethnic minority group of SA seniors while identifying that SA seniors require strategies that differ from the general population as a result of their cultural practices and barriers to health. It is relevant to the field of global health as it focuses on the risk of CVD in South Asian populations and discusses barriers faced by SA immigrants who have limited access to healthcare resources in Canada.