

# Taking Lived and Living Experience to Heart

*Welcome to the seventh installment in the MHCC & series, designed to get to know our HealthPartners membership, and discover how we can best support one another. To mark Heart Month, Chuck Bruce sat down with Christine Faubert, Vice President, Health Equity and Mission Impact with Heart & Stroke, to understand more about the organization's extraordinary successes, and what comes next in their storied journey.*

By: Chuck Bruce | Posted: February 13, 2025

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## A confession

My conversation with Christine began with a confession.

A year and a half ago, I experienced a heart attack that came seemingly out of nowhere –despite having no known risk factors. This unexpected health challenge was a transformative experience, connecting me more deeply with the world of heart disease and mental health.

After my admission, Christine and I dove into a compelling conversation, ranging from individual responsibility to national accountability.

She began by pointing out that while there are factors over which people have some control, there are others, like my age for example, which are incontrovertible. She highlighted decisions we can take to improve our overall health and wellness, from getting good quality rest, to eating well, and exercising.

But her advice comes with a big caveat.

## Uncovering inequities

“We have to remember,” she said, “these choices aren’t always available. Not everyone has the same access to affordable, nutritious food, and the time and opportunity for physical activity.”

So, while eight of every 10 cases of premature heart disease and stroke are preventable, risk factors aren’t so easily boiled down.

“Ethnicity, family history, genetics, age, sex,” Christine explained. “These are just the beginning. Where you live and your economic situation play equally critical roles in heart health.”

This insight underscores a crucial truth: social determinants of health aren’t peripheral –they’re central to understanding disease prevention and recovery.

Given her professional role, and her academic background in population health, Christine naturally views challenges through an equity lens. During our conversation, I found my own understanding of the complexities facing those living in recovery expanding well beyond my

personal experience.

## **The sex factor**

One striking revelation was the historical gender bias in medical research.

Until now, two-thirds of all heart and stroke research has focused on [men](#). This statistic is particularly alarming given that heart disease is the number one cause of premature death among women, with many experiencing unrecognized symptoms.

To be honest, I felt left in the dark about this inequity, which disadvantages my wife and daughter.

If you want to learn more, Heart & Stroke has some great [resources](#) to help women better understand their own risks and have conversations with their healthcare providers.

It's all part of an effort Christine and the organization are mounting to improve women's heart and brain health through research, education, and dismantling systemic barriers.

Heart & Stroke has launched awareness campaigns featuring prominent Canadian women like television and film producer Lisa Meeches, R&B artist Deborah Cox, and actress Julie Du Page. Their stories normalize conversations about recovery and provide platforms for shared experiences.

For example, women are hit hardest by depression following stroke, as explored in [Stroke and mental health: the invisible and inequitable effects on women](#), a report that looks at the higher risk of mental and emotional challenges women face after stroke.



*Christine Faubert, Vice President, Health  
Equity and Mission Impact*

## **Creating a life-saving culture**

Beyond their focus on priority populations, Heart & Stroke is also a big proponent of collective action for various conditions including cardiac arrest – which is when the heart suddenly and unexpectedly stops beating.

“An individual level of awareness around medical emergencies such as cardiac arrest is a good start,” Christine noted. “But we also need a national push to build a culture of cardiac safety.”

This is echoed in an excellent piece in the Globe and Mail by Heart & Stroke CEO Doug Roth. He writes there are about 60,000 out of hospital cardiac arrests in Canada each year, and only one in 10 survive. Those that do owe their lives to a confident bystander, who quickly and ably administered CPR and had access to an automated external defibrillator (AED).

## **Putting your heart into it**

Heart & Stroke is instrumental in upping general knowledge and competence including through programs like [CardiacCrash](#). It's a dramatic, team-based interactive program that teaches hands-only CPR and AED skills.

When not carrying out duties as Board Chair of the MHCC, I am the CEO of Provident10, which delivers management and oversight of the public service plan in Newfoundland and Labrador – one of Atlantic Canada's largest public sector pension plans. In that capacity, I've committed to building CardiacCrash into our organization's plans for 2025 – and I'd urge other leaders to do the same. I vowed to become re-certified in CPR this year, a promise I fulfilled in late January 2025.

"AEDs are essential life-saving devices. But we need to ensure they are registered, maintained, and people know how to use them," said Christine.

And while public awareness and education is one side of the coin, the other is Heart & Stroke's work in the broad category of policy change.

## **From policy insights to tangible progress**

"We're working to create healthier conditions across the board, because the onus shouldn't be on the individual alone," said Christine, who noted the death rate from heart or stroke related disease has decreased by 75 percent, largely due to concerted policy efforts.

This push has tangible impacts, from eliminating trans-fats in Canada's food supply, to educating the public about smoking risks. Over the past several years they've been turning their attention to emerging health challenges like vaping and nicotine pouches.

But Heart & Stroke is also using its considerable influence to cultivate a nation-wide support network for those affected by heart disease and stroke, and their caregivers.

"We want to scale up things that work, and so we evaluated the peer-support aspect of our Facebook communities, for example – one for caregivers and one for people in recovery – and the feedback from users is tremendous."

## **Heartfelt support**

Heart & Stroke is extremely fortunate to have an army of supporters and volunteers willing to share their stories, dispense tips and advice, and be a listening ear for others.

This I can relate to.

The weight I felt following my own heart attack was lightened immensely through informal peer support.

And here, I would be remiss if I didn't name names.

The MHCC's own president and CEO, Michel Rodrigue, happened to be diagnosed with prostate cancer only weeks after I'd had open heart surgery. This shared experience of ill health threw us together in an intimate and unexpected way.

I described it to Christine as, “Close enough, yet far enough away.” We were able to unburden ourselves to each other, in a way that would have felt too heavy to offload onto our spouses or loved ones.

I said, “It reminded me, yet again, that our brains and our bodies aren’t separate entities.”

To that end, I was interested to learn about a program Heart & Stroke is funding to tackle the emotional impacts of stroke. Dr. Swati Mehta, a psychotherapist at St. Joseph’s Healthcare London’s Parkwood Institute, has developed a 10-week self-directed course that teaches people how to cope in the face of an altered reality.

Drawing on community engagement and the principles of cognitive behavioural therapy, it’s a stepping stone to help people manage their emotional well-being after stroke.

And it’s the kind of approach we should be taking across the board – a beautiful segue to the final question I put to Christine.

## **A Valentine’s Day wish**

As we prepare to mark Valentine’s Day, which has taken on new meaning since my own experience, I expressed that my wish wasn’t for chocolates or a fancy heart-healthy dinner (though that would be nice!) but rather to see a healthcare system that embeds mental health across chronic disease management and major illness recovery, just as Dr. Mehta is doing.

Christine responded in kind.

“I’d like to unwrap new knowledge to better understand what barriers are preventing people from making the best recovery possible or living the best lives they can with a heart condition or stroke. I’d like to see greater access to education, resources, and supports as people navigate a complex and imperfect system. And, of course, my ongoing wish is to put patients at the heart of every aspect of healthcare.”

These are themes that are explored in a [report](#) Heart & Stroke just released on congenital heart disease to mark Heart Month.

Interestingly, my own experience has slowly proven to be one of transformation.

And it’s happened from the inside out.

What I once thought of as vulnerability has become a source of strength.

I’ve allowed a private experience to become a public call to action.

And I’ve gained a deep empathy for those battling a health challenge – be it heart disease, mental illness, or both – who don’t have the same resources, access, and choices that I do.

This awareness has sparked a renewed conviction that with privilege comes responsibility.

To that end, I offered to lend my voice as a survivor of heart disease – and as a mental health advocate – in support of Heart & Stroke.

Because we all contain multitudes.

And there is still so much work to do.

To get involved yourself, or to find supportive services and resources, visit [www.heartandstroke.ca](http://www.heartandstroke.ca).

**Author: Chuck Bruce** is an impassioned leader, lifelong learner, and national mental health advocate with more than 30 years of senior executive experience. As the inaugural CEO of Provident10, Chuck oversees the administration of Newfoundland and Labrador's Public Service Pension Plan, managing an \$11B fund and serving over 60,000 members with integrity and a commitment to excellence.

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