



Research Brief

Social Participation as a Mediator of the Relationships of Socioeconomics and Longevity after SCI

Introduction

Individuals with spinal cord injury (SCI), with high healthcare utilization rates and costs, require special attention and tailored care protocols to meet their healthcare needs. This qualitative study collected narrative information from adults with SCI and their family members and/or caregivers to examine the perceived role of healthcare providers and systems in the development and treatment of secondary health conditions (SHCs).

Key Findings

- Two overlapping themes emerged from the qualitative analysis of focus group narratives: (1) iatrogenic (relating to illness caused by medical examination or treatment.) and nosocomial (disease originating in a hospital) factors; and (2) Relationships with providers.
- Iatrogenic and nosocomial factors had three subthemes: (1) Misdiagnosis; (2) Perceived mistreatment or mistakes made during treatment; and (3) Unintended consequences of medical treatment.
- Three subthemes were identified for Relationships with providers: (1) Respect; (2) Knowledge and experience; and (3) Patient Expertise.

Conclusion

The management of SCI is complex and requires the coordination of patient health behaviors with the support of knowledgeable care and evidence-based protocols to ensure optimal outcomes and patient safety and satisfaction. Results from this study speak to the importance of healthcare systems and providers creating cultures that respect the experience and expertise of patients and family members while developing the protocols, knowledge, and collaboration needed to prevent iatrogenic and nosocomial conditions.

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