D1.4: Recovery from Traumatic Injury: Facilitators, Barriers, and the Experience Expert

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Abstract:
Introduction: Traumatic injury affects up to 50 million individuals annually (WHO, 2008) and is a leading cause of death and disability in the United States (CDC, 2009). Trauma patients experience losses in multiple realms leading to poor recovery outcomes. Despite its impact, little intervention research has been conducted to support trauma recovery. The study purpose was to identify the barriers and facilitators to recovery to identify what interventions may be most effective in supporting a successful recovery. The research questions were 1) What are the facilitators to recovery from traumatic injury? 2) What are the barriers to recovery from traumatic injury?

Method(s): A qualitative descriptive design was employed. Using purposeful sampling techniques, individuals who sustained an unintentional traumatic injury requiring hospitalization in the previous 6 months were recruited. Participants completed one audio-taped, in-person interview and one follow-up interview by phone. Data collection continued until data saturation was achieved. Interviews were transcribed verbatim, and Atlas Ti5.2 software was used for data management. Data analysis included line by line coding to identify patterns and themes, validation using constant comparison to the original data, and documentation procedures to promote transparency.

Results: The sample included 13 participants, 9 men and 4 women. Barriers included pain, lack of information, physical limitations, altered family roles, inability to work, financial losses, anxiety, and loss of independence. Facilitators were family support, acceptance of limitations, time, work leave and financial benefits, health insurance, and physical therapy. Interaction with an “experience expert,” helped participants process the emotional aspects of recovery or provided information about anticipated outcomes.
**Discussion & Conclusions:** Multidisciplinary strategies are needed to aid trauma patients with resource acquisition; including health information, financial resources, and rehabilitation to shorten physical recovery time and promote a return to social roles. Future research will include developing a web-based intervention to provide resource information and an avenue for dialogue to help trauma patients find “experience experts” from which to learn.

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