PROJECT INFORMATION

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Using One-on-One Peer Mentors to Help Patients with a Spinal Cord Injury Transition from Rehabilitation to Home

Principal investigator

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Organization

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What was the research about?

A spinal cord injury, or SCI, can cause paralysis, or the loss of movement. People with an SCI need to learn new ways to manage daily life. Staff at rehabilitation, or rehab, facilities can teach patients how to care for themselves after their injury. Sometimes a peer who has had similar life experiences can also help patients learn to care for themselves.

In this study, the research team compared two ways to help patients with SCIs who were leaving a rehab facility to manage their care at home. Both programs used peer support. The first program was a one-on-one peer mentor program. It included a weekly meeting with a peer mentor at the rehab facility and continued for three months after patients went home. The second type, called general peer support, was a single meeting with a peer mentor at the rehab facility.

The research team looked at unplanned hospital visits, ability to function in social and work settings, depression symptoms, and life satisfaction.

What were the results?

In the six months after leaving the rehab facility, patients in both types of peer support had a similar number of unplanned hospital visits. But patients in the peer mentor program spent fewer days in the hospital during these visits than patients who had general peer support.

Compared with patients who had general peer support, patients in the peer mentor program had more confidence in taking care of themselves.

Patients in the two programs were similar in

- Ability to function on their own in social and work settings
- Depression symptoms
- Satisfaction with their lives

Who was in the study?

This study included 158 patients with an SCI who received care at one rehab facility in Georgia. Of these, 74 percent were white, and 26 percent were other races. The average age was 38, and 77 percent were men. Also, 76 percent had private insurance.

What did the research team do?

The research team assigned patients by chance to either the peer mentor program or general peer support. In the peer mentor program, the team matched peer mentors and patients based on injury level, age, gender, and interests. Each patient and mentor met every week during the rehab stay. When patients went home, they stayed in touch with their mentor for three months. Mentors gave patients information about community resources and invited them to join a Facebook group for people with SCIs. The mentors also encouraged patients to go to monthly peer-group activities.

Patients who received general peer support met with a peer mentor one time while they were in the rehab facility. Mentors gave patients information about available community resources. Upon request, patients could also keep working with a peer mentor, join the Facebook group, and go to monthly activities.

The research team called patients one, three, and six months after they left the rehab facility.

Patients with an SCI and their family members, doctors, nurse educators, and peer-support staff helped design the study.

What were the limits of the study?

Most patients in this study were male, white, and had private insurance. Future studies could include patients from other backgrounds.

How can people use the results?

Rehab facilities can use these results when deciding how to help patients with an SCI manage their care at home.

To learn more about this project, visit www.pcori.org/Jones169.