



## Research Brief

### Life satisfaction in individuals with long-term traumatic spinal cord injury: An investigation of associated biopsychosocial factors

#### Introduction

Life satisfaction, a core component of subjective well-being, is a very important part of understanding quality of life after spinal cord injury (SCI) because it reflects how a person evaluates their own life. Individuals with traumatic SCI may experience significant physiological, psychological, and social changes after injury, and they have reduced life satisfaction compared with people without SCI. Aging further contributes to health and physiological changes, as well as decreased satisfaction with social life. Our objective is to investigate relationships between self-reported biological, psychological, and social factors and global, vocational, and home life satisfaction in individuals with traumatic spinal cord injury (SCI) an average of more than 30 years postinjury.

#### Key Findings

- Less severe depressive symptoms, greater emotional social support, and greater instrumental social support were significantly associated with greater global life satisfaction.
- Being in a relationship, having less severe depressive symptoms, having greater emotional social support, and having greater instrumental social support were significantly associated with home life satisfaction.
- Being White, non-Hispanic, having more years of education, being in a relationship, having less severe depressive symptoms, and having greater emotional social support were significantly associated with greater vocational satisfaction.

#### What does this mean?

This study identified significant individual relationships between life satisfaction and biological, psychological, and social factors. Together these biopsychosocial factors account for a large variability in global, home life, and vocation life satisfaction, and support the need for inclusive consideration of biopsychosocial variables for person-center conceptualization. Emotional social support appears to be a unique facilitator of greater life satisfaction, whereas depressive symptoms is a barrier. Identifying modifiable facilitators and risk factors associated with life satisfaction in individuals aging with SCI may help improve intervention strategies to improve quality of life.