

Study finds need for educating older adults on outdoor fall prevention

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Many older adults have fallen outdoors but lack an understanding of the risks for falling and how to prevent them, warranting efforts for outdoor fall prevention, finds a new study by New York University researchers.

"Despite their frequency, [outdoor falls](#) receive little attention when it comes to education and prevention," said Tracy Chippendale, assistant professor of occupational therapy at NYU Steinhardt School of Culture, Education, and Human Development and the study's lead author.

The findings of this study, published in the *Archives of Gerontology and Geriatrics*, are being used to develop and pilot an outdoor fall prevention program, which is currently underway in New York City.

Approximately 30 percent of [adults](#) age 65 and older fall each year, with serious consequences for both the individual and the health care system. Although [falls](#) have been well studied, the focus has been on indoor rather than outdoor falls. Yet, research shows that 48 percent of the most recent falls among older adults and up to 72 percent among middle aged adults occur outdoors.

Although there are similarities in the risk factors for falling indoors and outdoors, such as depression, fall history, and use of certain medications, there are also a number of differences. People who fall outdoors are more likely to be male, younger, active, and fast walkers.

In addition to physical injuries such as open wounds, head injuries, and

fractures, outdoor falls can have emotional consequences, including fear and anxiety about falling again.

This study sought to explore the experiences and fall prevention knowledge of older adults living in the community, not in housing for seniors. Using random digit telephone dialing, the researchers surveyed 120 adults age 55 and older across the five boroughs of New York City.

A high proportion of adults surveyed - 85 people or 71 percent - had fallen outdoors in their adult years. Of those who had experienced an outdoor fall, 28 had minor injuries such as scrapes and bruises, 18 had moderate injuries with prolonged pain or soreness, and nine had severe injuries such as fractures, rotator cuff injuries, or injuries requiring stitches or surgery.

Beyond physical injuries, participants commonly described having an emotional response to a fall, including fear of falling again or embarrassment, which may affect one's willingness to disclose a fall or seek medical attention.

The participants attributed their falls to a number of causes. Environmental factors included objects (e.g. metal post, branch, stones), surface conditions (e.g. slippery or uneven), and stairs, particularly at entranceways. A number of people surveyed reported falls caused by otherwise healthy activities such as exercising or walking a dog. Many participants attributed falls in part to their own practices, such as wearing ill-fitting or inappropriate shoes, not paying attention, or walking too fast.

In addition, those surveyed frequently described multiple factors that contributed to their fall, such as rushing on an icy surface or being distracted on an uneven surface.

Overall, the survey revealed a number of unmet education and training needs for outdoor fall prevention among community-dwelling older adults. For example, [older adults](#) should be educated on the importance of wearing single vision glasses and proper footwear, which have been flagged as common causes for falls. They should also be educated on the risks associated with recreation areas and parking lots or garages, since these have been shown to be common fall locations.

Adults could also benefit from training on fall prevention strategies, including safety during routine activities such as carrying items on uneven surfaces, going up and down stairs, and opening or closing doors. Education around safe outdoor walking strategies (e.g. avoiding distractions, navigating sloped and uneven surfaces, and walking slower) would also be beneficial.

"Programs to prevent outdoor falls should include information on outdoor fall risks, action planning for the adoption of [prevention](#) behaviors, and training in safe performance of everyday activities," said Chippendale.

Provided by New York University

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