

Mobility limitation due to a lack of balance confidence

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A fall and subsequent injury decreases a person's balance confidence and increases his or her fear of falling. People aged over 60 years who had sustained a hip fracture and had a lower sense of balance confidence, also experienced difficulty in walking outdoors and climbing stairs. In addition, compared to those with higher balance confidence, they perform less well in walking and balance tests. This was found in a study performed at the Gerontology Research Center in collaboration with the Central Finland Health Care District. The participants in this project were 130 older people who had sustained a hip fracture due to a fall and lived independently.

"Balance confidence was assessed with the ABC (Activity-specific Balance Confidence) questionnaire. Participants were asked to rate their confidence to complete 16 different daily tasks without losing balance or falling," Postdoctoral Researcher Erja Portegijs explains.

After [hip fracture](#), mobility function often remains poor and rarely returns to the pre-fracture level. To enable people to independently live at home as long as possible, it is essential to maintain good mobility function. This may prevent the need for assistance and even moving to an institution for long-term care.

"The assessment of balance confidence is relatively easy. Potentially, this method can be used within the healthcare system as an initial screening tool. Identification of people with lack of balance confidence enables the planning of more intensive rehabilitation strategies that facilitate the recovery of mobility function," Portegijs says.

The results were published online in an international scientific journal *Archives of Physical Medicine and Rehabilitation* on December 2012.

More information: Portegijs, E. et al. Balance confidence was associated with mobility and

balance performance in older people with fall-related hip fracture: A cross-sectional study, *Archives of Physical Medicine and Rehabilitation*, 2012, 93:2340-2346. DOI: [10.1016/j.apmr.2012.05.022](https://doi.org/10.1016/j.apmr.2012.05.022)

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