

Awareness and Attitudes Toward Falls Prevention Final Report on a Survey of Ontario Seniors

**Prepared for
Partners for Senior and Veterans**

**Prepared by
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I. Executive Summary

Incidence of Falls

- Four in ten Ontario seniors responding to this survey reporting having a trip or fall that resulted in some injury, in the past year – a slightly higher figure than previous Health Canada estimates. Most of the reported falls caused just soreness or a bruise, but 8% needed medical treatment. This latter figure closely matches the previous Health Canada estimate that eight percent experienced a serious injury (one-quarter of the one-third who had experienced a fall).
- There was a definite, positive correlation between experiencing a fall and being in poor general health.
- Despite the commonly held belief that most accidents occur inside the home, almost two-thirds (63%) of the reported trips and falls in this group occurred outside. Those who had fallen inside seemed to have a more proactive attitude toward precautions than those who had fallen outside.

Awareness and Attitudes

- About six in ten Ontario seniors are clear on the relationships between falls and injury or nursing home admissions. Slightly fewer fully appreciate the more serious consequence of falls – the number of deaths. The remainder could benefit from additional fact-based information about patterns and trends.
- Between 11% and 14% of senior Ontarians don't want to think seriously about fall prevention. One in seven respondents denies the seriousness of falls ("Falls aren't that serious. Life goes on as usual after a fall"), or is resigned to the possibility ("Falls just happen. There's nothing I can do to avoid falls"). One in nine feels falls are only a problem for those over 75.
- Most respondents were able to think of some way to reduce the risk of falls, although no single strategy was mentioned by more than one-quarter of the respondents.

Preventative Action

- Respondents report a high likelihood of taking three specific precautions: using stairway railings, checking their homes for obstacles, and having their vision and glasses checked regularly. Checking for worn footwear that could be slippery, asking health professionals about the side effects of medicines, and installing brighter lights in halls and stairways seemed to be a possibility for about four in ten respondents. Joining an exercise group and considering using a cane or walker were embraced by very few seniors in the survey.
- Respondents rated their own health and physical independence very positively. Eight out of ten said they felt well always or most of the time. Nine in ten could manage around the home with little or no help.
- Respondents appear to over estimate their level of fitness – most reported being in better physical shape than most people their age.

- Respondents probably under estimate their loss of visual acuity. Two-thirds claim that it is the same as it was ten years ago.
- While many respondents know that rushing can be a cause of falls, six in ten admit that they often do so to get things done or to get places.
- Many respondents feel that they do not need to be concerned about falls prevention yet, that they are sufficiently fit, or that they have already taken many of the precautions. Surprisingly, the cost of precautions is not often raised as a deterrent.

Implications for the Public Awareness Campaign

- Those seniors most likely to fall and least aware of their vulnerability are females over 65 years of age and males over 75 years of age, with lower education, lower income, living alone and in poor health. Raising awareness is the first step to change with this group.
- Younger, fitter seniors who have not yet made changes are more likely to be contemplating change, or may even be preparing to make changes. This group should be assisted in the process with messages that motivate them and provide guidance with concrete actions they can take.
- The most widely acceptable means for getting information about falls prevention is in print – both publicly distributed brochures, and magazine or newspaper articles were likely to be read. Electronic media should be considered, particularly to reach those less educated and literate seniors.
- Many respondents, particularly older ones and those in poor health, want to receive information from already over-burdened doctors. Toll-free phone lines and a web site have lower appeal, although they are rated better by “younger” seniors. Surprisingly, most seniors said they were unlikely to attend local information sessions.
- Of four possible titles for a brochure on falls prevention, “Prevent a Fall, Protect your Way of Life” and “It’s All About Independence” were clearly preferred over other alternatives. The former had broader appeal across all age groups and demographics surveyed, and was the choice of the focus groups previously held. “Prevent a Fall, Protect your Way of Life” is recommended for the campaign.