Policy Brief: Falls in Iowa, 2018

The Problem

Fall-related deaths for older Iowans are increasing and are higher than the national average. In 2016, older Iowan dying from a fall was 13.3 compared to 9.1 per 100,000 population nationally (CDC WISQARS, 2018). From 2012 to 2016, Iowa had on average 515 fall-related deaths each year (CDC WISQARS, 2018). Falls were the leading cause of all unintentional injury deaths for persons aged 65 or older in both Iowa and nationally.

In 2016, falls accounted for more than 73 percent of injury-related hospitalizations for Iowans 65 or older, which is higher than the national rate of 62 percent (CDC WISQARS, 2018; IDPH, 2018). Many falls do not cause injuries, but nearly one out of five falls causes a serious injury such as broken bone or a head injury (CDC, 2017). These injuries could limit a person’s ability to do everyday activities or live independently, especially for the growing number of older adults in Iowa.

What are the costs?

The estimated total cost for fall-related hospitalizations is increasing; Iowans aged 65 or older accounted for more than $242 million, or $38,571 per person (IDPH, 2018) compared to $26,400 in 2014 (IDPH, 2015).

How do falls impact someone’s life?

In addition to medical costs, falls contribute to a decreased ability to perform household tasks, a reduced quality of life, and may result in loss of independence for persons over age 65.

- Falls are the most common cause of traumatic brain injuries (TBI).
- Most fractures among older adults (65 or older) are caused by falls.
- Falls may result in long-term pain.
- Persons who fall are more likely to fall again.
- A person who falls is more likely to feel less confident and hopeless, experience depression, and become socially isolated.
- Many people who fall develop a fear of falling, which may cause them to limit activities. This leads to reduced mobility and loss of physical fitness, which increases their risk of falling.

For more information, visit [http://idph.iowa.gov/falls-prevention](http://idph.iowa.gov/falls-prevention)
Who is at Risk?

About one in four adults aged 65 or older falls annually (CDC, 2017). From 2012-2016, the rate of falls-related hospitalizations for adults 65 or older was six times that of adults 50 to 64 (IDPH, 2018). The rate of falls-related deaths was 18 times higher for adults 65 or older compared to adults aged 50 to 64 (IDPH, 2018). People age 75 or older who fall are four to five times more likely than those age 65 to 74 to be admitted to a long-term care facility for a year or longer. Older women are more prone to falls than men.

What can be done to reduce falls in Iowa?

- Health care providers can screen to identify patients at risk for falls, assess the scope of risk, introduce tailored interventions, and intervene to use effective clinical and community strategies to reduce risk.
- Communities can create programs to reduce seniors’ risk of falls and provide risk reduction education to older adults. Some examples of evidence-based programs available in Iowa include Matter of Balance, Stepping On and Tai Chi for Arthritis.
- Academic health care programs can include falls prevention education as a core subject area in professional courses of study.
- Health care settings can include falls risk assessment for older adults and make referrals for interventions to reduce risk.
- Communities can use Complete Streets initiatives that support safe walkable communities and improved access for all ages and abilities.
- Legislators can approve a refundable income tax credit for up to 50 percent of costs incurred for an individual to retrofit a primary residence to accommodate aging and disability access.
- Community leaders can annually designate the first week of fall to be Falls Prevention Awareness Week.

References


Iowa Department of Public Health. (2015). Falls in Iowa. [Data available upon request].

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