Opportunities and Challenges

While considerable progress has been made since the 2003 fall prevention conference, many more challenges and tasks lie ahead. Much has been learned from research about the importance of multifactorial interventions in fall prevention, how to engage older persons in fall prevention, and the role of professionals, community organizations, and policymakers in reducing falls. Participants in the 2007 California Fall Prevention Summit generated fall policy recommendations and action steps suggesting change that will make fall prevention a key public health priority in California.

Several themes emerged after two days of demanding work:

- Good fall prevention data are needed to develop sustainable, evidence-based fall prevention programs and activities at local, county, and state levels.

- Leaders in fall prevention are called upon to make the case for the cost effectiveness of fall prevention. Falls and fall-related injuries affect us all and place an enormous burden on the nation’s health care system; a “fall prevention business plan” is useful in convincing policymakers and health providers about the importance of investing in fall prevention.

- Budget cuts at local, state and national levels invite creative, not pessimistic, thinking about new fall prevention efforts. “How can we ensure that limited, but available funding is directed toward fall prevention?” was the question. We are challenged to find creative solutions to limited resources.

- Many good and effective fall prevention programs have been developed. Rather than reinventing the wheel, future fall prevention efforts should build on or adapt and upgrade existing programs to make them as effective as possible, thus requiring fewer resources for measureable improvement.

- Fall prevention programs don’t carry the label one size fits all. Instead, fall prevention efforts have to adequately address the needs of older adults at risk for falls and have to promote the understanding that falls are preventable, not inevitable. Whether or not fall prevention efforts are effective depends largely on older adults’ acceptance of and compliance with interventions, their awareness of their own risk of falling, and their motivation to work towards change.

- “It takes a village to prevent a fall” was the message at the 2007 Fall Prevention Summit. Advocacy groups, organizations and agencies who have not collaborated in the past will have to join forces to engage in effective fall prevention activities that address individual risk factors for falls, physical activity levels, changes in medical practices and medication management,

“As the population ages, falls will become a very serious problem for which we are not prepared. The Summit shows us that there is a lot we can do about it now.”

-- Ileana Arias, PhD
Director, Center for Disease Control and Prevention
modifications in the home and the environment as well as behavior change required of the older adult at risk of falling.

- It is necessary to develop a consistent message about fall prevention that is sensitive to and culturally appropriate for California’s diverse population.

- Professionals and practitioners need education and training so they can play a more effective role in fall prevention.

- The fall prevention community must take responsibility for the policy recommendations generated at the 2007 California Fall Prevention Summit and to implement fall prevention in our homes, our work and our communities.

“I thank you for the most worthwhile conference and congratulate you! We are talking about fall prevention ever since, especially at the community level. The Orange County Supervisor will sponsor a senior forum which includes fall prevention.”

-- Brenda B. Ross, EdD
Council Member, City of Laguna Woods