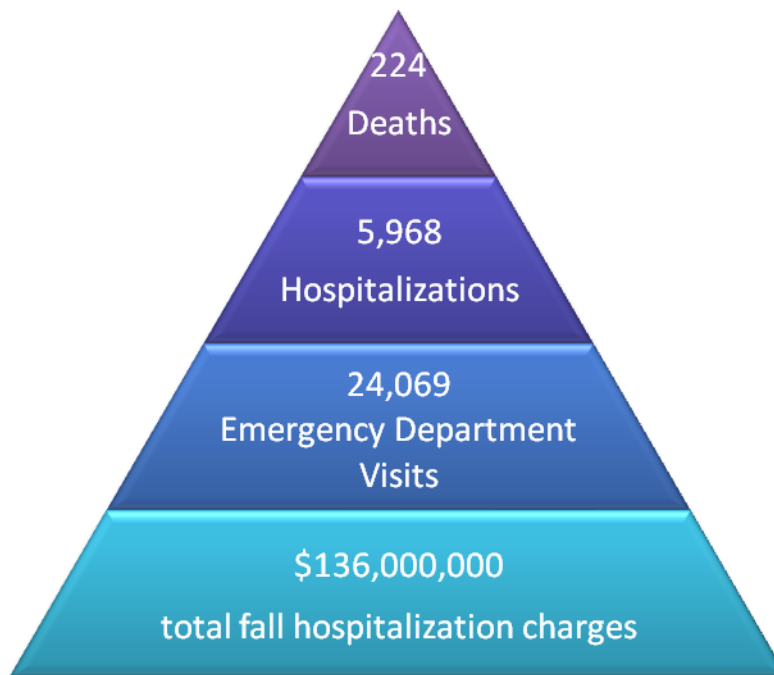




Connecticut Falls Facts

- Falls are the leading cause of injury related death for Connecticut residents 65 years and older and the fourth leading cause for residents of all ages.
- Falls caused in 897 deaths among Connecticut residents age 65 and older from 2005 to 2008.
- Falls resulted in 23,856 inpatient hospitalizations and 89,049 emergency department visits for the state's older residents during the same time period.
- Approximately 83% of all fall-related deaths and 68% of fall-related hospitalizations occur among Connecticut residents 65 and older.
- Falls are costly. Fall-related inpatient hospital charges totaled over \$273 million for state residents 65 and older from 2005 – 2006. These charges do not include rehabilitation or long term care costs.
- Falls were the leading cause of fatal and non-fatal traumatic brain injuries for Connecticut residents of all ages.

Fall Deaths are Only the Tip of the Iceberg



Fall –related deaths in Connecticut are only the tip of the injury iceberg...

For every older adult who dies from a fall there are 27 inpatient hospitalizations and 107 emergency department visits.

Although falls occur across the life span, the rate of fatal falls is approximately 32 times higher for older adults than for the rest of Connecticut's population.

Connecticut's fall death rate for residents 65 and older has increased by 127% from 2000 to 2007

Average annual statistics from 2005-2008 for Connecticut residents aged 65 years and older.

Average annual inpatient hospital charges from 2005-2006 for Connecticut residents aged 65 years and older.

During the past decade Connecticut's 65 and older population has increased by 7.7% from in 470,183 in 2000, to 506,559 in 2010. Connecticut's population is older, on average, compared to the U.S. population as a whole. In 2010, 14% of the state's population was age 65 or older. **As Connecticut's population ages, the impact and cost of fall-related deaths and injuries will increase dramatically unless this serious public health issue is addressed effectively.**



Connecticut Responds

Falling is NOT an inevitable result of aging. Through evidence-based interventions, practical lifestyle adjustments, and community partnerships, we can substantially reduce the number of falls. Connecticut is taking action to prevent falls through the following initiatives:

- The Connecticut Injury Community Planning Group (ICPG), identified falls as one of its injury priorities, provided input to the fall section of the state injury plan and established an unintentional injury work group to address fall prevention strategies.
- The CT Departments of Social Services (DSS) and Public Health and the Yale University/CT Collaboration for Fall Prevention worked together to receive and implement a U. S. Administration on Aging evidence-based program grant for fall prevention.
- **Tai Chi: Moving for Better Balance**, an evidence based fall prevention program has been implemented in two service regions of the state through U.S. Administration on Aging funding. A recently completed evaluation showed significant improvement among participants. Additional workshops to train **Tai Chi: Moving for Better Balance** instructors are being conducted so that certified instructors are located throughout the state.
- The CT Department of Social Services has changed its allocation of Federal Older Americans Act Title III-D health promotion funds. Excluding funds for medication management, 100% of Title III-D funds will be targeted to evidence-based prevention programs including fall prevention programs by 2013.
- The Connecticut Injury Prevention and Control Plan 2008-2012 designated falls as a priority.

Contact Information

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Developed by the National Council on Aging. The National Council on Aging is a nonprofit service and advocacy organization with headquarters in Washington, DC. The NCOA is a national voice for older Americans – especially those who are vulnerable and disadvantaged – and the community organizations that serve them. For more information, please visit www.ncoa.org