Did you know...every year in the U.S., more than 1/3 of adults age 65+ have a fall, with approximately 1/3 of fallers sustaining an injury? Research indicates that people who fall are 2-3 times more likely to fall again, and each fall increases the likelihood of more serious injury or death.

**Georgia Falls Facts**

- Georgia has the 9th fastest growing 60+ population and the 18th fastest growing 85+ population in the U.S.

- From 2005 thru 2009\(^1\), adults aged 60 years and older accounted for 83% of Georgia’s fall-related deaths and had a death rate of 41.59 per 100,000 persons, higher than the U.S. rate (36.13) for this age group.

- Falls are the leading cause of injury-related deaths, hospitalizations and emergency department (ED) visits in Georgia among older adults. The age-adjusted hospitalization rate due to falls for Georgia during 2005 thru 2010 was 222 per 100,000 persons; the fall rate increases dramatically among older age groups\(^2\) (908 per 100,000 adults aged 60 years and older).

- Falls impact Georgians across all life stages. From 2005-2010, more than 1.5 millions Georgians were seen in Emergency departments because of Fall-related injuries\(^2\). Young people are also affected by falls. Falls are the leading cause of injury-related hospitalizations and ED visits among Georgia children 1 - 19 years of age.

**Older Adult Fall Deaths are Only the Tip of the Iceberg**

![Data represents age 60 and older population in Georgia 2010](http://www.cdc.gov/injury/wisqars/index.html)

![Medical Costs from Older Adult Fall injuries and deaths in Georgia are only the tip of the injury iceberg...](http://oasis.state.ga.us/oasis/oasis/qry/MorbMort.aspx)

- For every Fall-related ED visit, the average work loss cost per person is $1,669

- For every Fall-related hospitalization, the average work loss cost per person is $15,208

- For every Fall-related death, the average work loss cost per person is $96,340.

\(^1\) [http://www.cdc.gov/injury/wisqars/index.html]

\(^2\) [http://oasis.state.ga.us/oasis/oasis/qry/MorbMort.aspx]
As the population ages, the impact and cost of fall-related deaths and injuries will increase dramatically unless funding is increased to address the issue.

Georgia 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. Georgia is taking action to prevent falls through the following initiatives:

- The Department of Public Health (DPH), Office of Injury Prevention (OIP), and the Department of Human Services (DHS) Division of Aging Services have served as the lead agencies for the Georgia Fall Prevention Coalition since the fall of 2008. The purpose is to develop a sustainable, multi-agency coalition that serves populations at risk for falls and fall related injuries and supports the agencies that serve them.
- The Georgia OIP has monitored older adult falls and fall injuries, as well as fall injuries across the life span since 1998, when it formed the Georgia Injury Prevention Advisory Council (GIPAC) with high-level representation from diverse government and non-governmental agencies and organizations. The OIP has used Public Health Injury Surveillance Program funding to develop infrastructure and build core capacity to prevent injuries, including falls among older adults.
- Surveyed Public Health districts and the Area Agencies on Aging in 6 regions in Georgia to evaluate ability to conduct evidenced based falls prevention programs
- Coordinated multidisciplinary Falls Prevention Awareness Day in Atlanta in September 2010 and 2011.
- Safe Kids Georgia supports over 30 local coalitions that work on many childhood injury issues, including falls.

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Sources:

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