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EXISTING AND INTERVENING RISK FACTORS FOR GERIATRIC FALLS IN THE HOME - QUANTITATIVE STUDY.

Architect Mariana L. Yeannes. y Doctor Diana
Scharovsky .

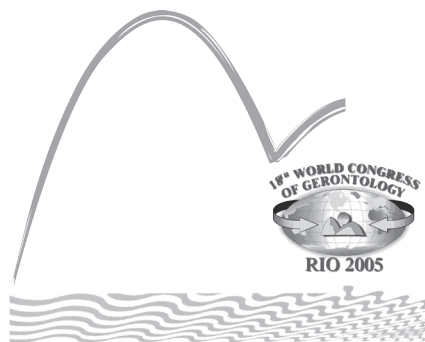
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Abstracts

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ment of continued residence seems positive, as most persons prefer to stay in their own homes, but there may be some negative consequences. For example, are housing accessible for a walking frame? The accessibility is a function of the interaction between the design of the environment and the old person's functional ability. Purpose: to explore if there is a relation between accessible housing and need of home service. Method: a sample of persons was selected from the following criteria; (a) 65 years or older (b) living in their ordinary home in Malmö (c) receiving community home service. Data was collected from registers of community home service (for example shopping and laundry) and through observations of accessibility (mainly stairs and elevator) of each home. Results: 46 845 persons were 65 years or older, of these did 4 907 receive home service. Preliminary results indicate that the need of service increase with decreasing accessibility. Conclusions: With more accessible housing old persons would have greater opportunity to keep an independent lifestyle while remaining at home.

Present and intervening factors of risk in house falls

Yeannes ML (Faculty of Architecture and Urbanism, Universidad de Mar del Plata, Argentine), Scharovsky DM (Hospital Privado de Comunidad, Argentine)

Introduction: The fall is one of the most important geriatric syndromes; three of ten Elderly Adults (E.A) suffer a fall in a year and more than 50% take place in the house. The objective of this study was to analyse in each house the presence, interaction and intervention of factors of risk falls, environmental (ERF) and behavioural (BRF); and to check the modification of the risk on the side of Elderly Adults Fallers that receive preventive treatment. Development: 129 independent, fallers and no-fallers people compound the sample, of Mar del Plata city. The construction of the data was made by an instrument of evaluation through direct observation in the house. The data are analysed, by a Scale of Presence of Risk Factors. (High - Average - Low). The results show the presence and interaction of ERF and BRF in different areas, and conditions (that according to this study take part in the happening from 3 to 4 of each 5 house falls). Difficulties have been detected, on the side of the E.A, in the identification of the mentioned present risks; and even though these are identified, not necessarily are modified. The conclusions of this study will serve as a base to rule and to carry out the re-education of habits and behaviours in the adaptation of the house like an unavoidable condition to prevent falls.

Existing and intervening risk factors for geriatric falls in the home - quantitative study

Yeannes ML (Faculty of Architecture and Urbanism, Universidad de Mar del Plata, Argentine), Scharovsky DM (Hospital Privado de Comunidad, Argentine)

Introduction: Falls are one of the most important geriatric syndromes; three out of ten older adults (OA) fall once a year, and more than 50% of these falls take place in the home. The objective of the present study was to analyse the presence, interaction and intervention of risk factors for falls, both environmental (ERF) and behavioural (BRF), in every living accommodation; and to check whether modifications regarding the risk factor had been implemented by older adult fallers (OAF) who underwent preventive treatment. Development: The sample included 129 independent older adults, both fallers and non-fallers, from the city of Mar del Plata. The relevant data was built by means of an assessment tool by direct observation in the living space. The data were analysed applying a Scale of Existing Risk Factors (High - Average - Low). The results show the presence and interaction of ERF and BRF in different areas, and of certain conditions (which according to the present study are intervening conditions in 3/4 of every 5 falls in the home). Difficulties have been detected in the OA being able to identify the above-mentioned existing risks; and even when risks happen to be identified, modifications are not necessarily implemented. The conclusions of the present study will serve as the base to define and implement a re-education programme concerning habits and behaviours in the adaptation of the living space as an unavoidable condition to prevent falls. It would be advisable to consider the relevant conclusions when assessing, when implementing preventive approach plans, and when designing health policies.

Detection of necessities and satisfiers in elderly living in housing

Bazaldúa LA, López JL, Quintanar OF

Evaluate the necessities and satisfiers in older people who are living in a residence of social assistance in Mexico City and the perception of workers about of those necessities. Method: The investigation realized is observational, transversal and descriptive; It was used an census strategy in the case of older people, the information was obtained through an face to face interview. In the case of workers, was a systematic random sample. with auto applied scale. In elderly was applied the Satisfiers Questionnaire (CS) and the Necessities List (LN). In the case of workers we only applied the LN. Both questionnaires were development by the Residences Evaluation System Elderly (SERA, 1995). Results: From 129 older adults population, were interviewed 92 (71.3 percent), the principal cause of no applied it, was the psychiatric alteration. From the workers (N=37) we obtained information about 52.5 percent (n=72); in that case the refused cause was that they did not accept to participate in it (8%). We realized correlation analysis between CS and LN, we found a low correlation, but it has significance between the variables ($r=0.2593$, $P < 0.01$). Conclusions: