Falls Prevention Concerns among Family Caregivers of Persons with Alzheimer’s Disease or Related Dementias

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**Background** - Falls are common in cognitively impaired Persons with Alzheimer’s disease and related dementias (PwD). As part of a larger interventional study designed to engage family caregivers (CGs) in falls prevention efforts for PwD living at home, we surveyed CGs to gain an understanding of their specific Falls Prevention Concerns (FPC).

**Methods** - These family CGs of PwD were asked to “list the individual concerns that you have about preventing the person that you care for from falling, almost falling or having a loss of balance”. Using paper or electronic survey forms they described 3-10 specific FPC in their own words for: the PwD alone, the CG’s themselves in helping to prevent a fall for the PwD, or for them both together. This open-ended format allowed for CG reflection, offering richly nuanced responses for a data-driven Thematic Analysis. Identification of implicit and explicit ideas or themes was conducted before data analysis without pre-determined hypotheses and these themes were applied to the raw data.

**Results** - Forty-one CG Concern Surveys were independently reviewed by the first two authors and 221 FPC were examined. Initial review of CG FPCs identified 15 ideas, which when used to code the raw data suggested the following three themes.

1. **Functional Concerns** - included 6 ideas, 156 FPC were included: Gait (51), Stairs (32), Balance (25), Activities of Daily Living (ADLs - 22), Transfers (19) and CG Assisting PwD up from the ground (7).
2. **Cognitive/Behavioral/Social Concerns** - includes 5 ideas, 46 FPC were: Safety Awareness (12), Cognitive Deficits (11), Behavior Change (9), Loss of Social skills (9) and CG attributes (5).
3. **Medical Concerns** - includes 4 ideas, 19 FPC were: MusculoSkeletal (8), Vision (4), Medication side effects (3) and Other Medical issues (4).

**Conclusions** - The most prevalent FPC expressed by these 41 CGs were those related to physical function, followed by safety awareness and cognitive deficits. Behavior, social and medical concerns were expressed less frequently. These results provide a thematic framework for CG-centered falls prevention intervention strategies which will guide our continued development efforts.

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