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Alignment of fall risk and balance confidence in older adults: Insights for fall prevention interventions

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Objective: Fear of falling among older adults has been the target of interventions to improve low confidence. However, many older adults report high balance confidence, which may not be appropriate given their known fall risk. We examined the alignment of fall risk and balance confidence in a sample of older subjects with a history of falls or balance loss (n=229).

Methods: Trained research staff gathered fall history and Activity-specific Balance Confidence (ABC) data during interviews for larger studies. Fall risk was categorized as: High (history of injurious falls), Moderate (multiple non-injurious falls), At-Risk (single non-injurious fall), or Low (balance loss only). ABC standardized scores were grouped into four categories reflecting lowest to highest balance confidence. Crosstabulations were examined to determine alignment between fall risk and balance confidence.

Results: 62% of subjects were female; mean age=78.5 ($\pm$6.35) years. Most subjects were at high (44%) or moderate (36%) risk for falls. 20% reported lowest balance confidence, 29% below average, 37% above average, and 14% highest confidence. 51% of all subjects reported confidence levels aligned with their level of fall risk (e.g., lower fall risk with higher balance confidence). However, 40% were higher fall risk and reported higher balance confidence (overconfident); 9% were lower risk and lower confidence.

Conclusion: Misalignment in the direction of balance overconfidence in relation to known fall risk is quite common in older adults with a history of falls or loss of balance. Fall prevention interventions should not overlook potential overconfidence when gauging fear of falling against fall risk.