



Research Week 2020

Behind the responses to Fall Prevention Motivational Interviewing: Patient perceptions about fall risks, fall prevention strategies, and self-identity

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Fall Prevention, Behavior Change

Abstract

Background

Older adults are often reluctant to engage in fall prevention activities.

Objectives

Understand how older adults respond to fall prevention and identify attributes that affect their responses to fall prevention.

Methods

Qualitative content analysis of the brief Fall Prevention Motivational Interviews (FPMI) that were delivered in a clinical trial to older adult inpatients in a VA hospital.

Results

Thirty patients (mean age 72.3; standard deviation = 5.7; 93.3% male) participated in the FPMI. Participants showed various responses to fall prevention from acceptance and engagement to ambivalence to denial or giving-up. Three attributes affecting how they respond to fall prevention were: (a) their perception of fall risks, (b) their perception about fall prevention strategies, and (c) self-identity. If participants perceived that their fall risks were temporary or modifiable, they were more likely to engage in and accept fall prevention activities. If participants perceived that their fall risks were rather permanent or unmodifiable, they seemed to have difficulty accepting fall prevention or gave up from engaging in fall prevention. Participants were more willing to adopt fall prevention strategies that involve minor adjustments or that were not too obvious but expressed more resistance to adopting strategies that required major adjustment or more obvious. Finally, their response accepting or not accepting fall prevention was influenced by their perception whether the fall risks and fall prevention strategies are acceptable as their self-identity.

Conclusion

These findings underscore the importance of understanding older adults' perceptions about fall prevention and their self-identity to better facilitate individualized approaches to engage patients in fall prevention.

