

# A home-based program to manage concerns about falls

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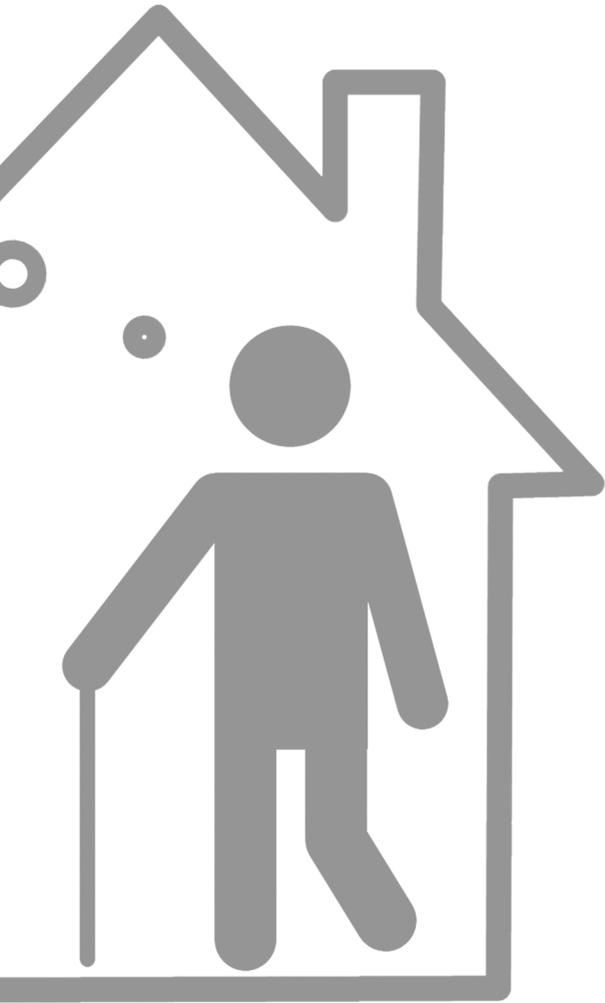
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## Valorization





## **Valorization**

This section focuses on how the results of this thesis can be used by scientists as well as by others, like healthcare professionals, policy makers, health insurance companies and older people.

### *Relevance*

One of the most common fear among older people is the fear of falling. This particular fear associated with concerns about potential falls, has great impact on older people's daily life and may be a threat to independent living of those who it affects. At the same time, national policies worldwide encourage and facilitate older people to live independently as long as possible. This policy reflects the preference of many older people themselves and is in line with the need to keep the healthcare costs affordable with the demographic trend of an increasing proportion of people aged 65 years and over. Therefore, interventions that support older people in their independence are needed. Self-management skills, like problem solving, resource utilization and action planning, can be a powerful tool in order to achieve this goal by community-dwelling older people.

### *Target groups*

The home-based, cognitive behavioral program 'A Matter of Balance at Home' (AMB-Home) stimulates the self-management skills of frail community-living older people. The program proved to be feasible as well as effective and cost-effective in reducing concerns about falls compared to usual care. Moreover, the program contributes to improved daily functioning in older people and consequently, implementation in regular healthcare is recommended. To put a widespread dissemination and implementation of this evidence based program into practice different target groups are identified. First, (home care) health organizations need to be reached and convinced about the added value of offering the program to their clients. This could be achieved by informing their trade and/or professional associations. Also the Centre for Healthy Living ('Centrum Gezond Leven') of the National Institute for Public Health and the Environment (RIVM) may facilitate further implementation. The program is included in their intervention database and this database is being consulted on regular basis by policymakers and practitioners ([www.loketgezondleven.nl/-interventies/i-database/1400744](http://www.loketgezondleven.nl/-interventies/i-database/1400744)). Furthermore, health insurance companies could stimulate the use of the program by reimbursing (part of) the costs of the program for their customers.

### *Products*

AMB-Home is an individual, cognitive behavioral program to manage concerns about falls. The program comprises seven individual sessions, consisting of three home-visits of 60, 60 and 75 minutes, respectively, and four telephone contacts of 35 minutes each.

The program is founded on an evidence based group program and uses principles of cognitive restructuring, social modelling, education and other strategies for behavioral change. Because of the positive results, AMB-Home is made available by the National Institute of Mental Health and Addiction in the Netherlands (Trimbos institute) in cooperation with Maastricht University under the name of 'Zicht op Evenwicht'. Potential facilitators of the program, like community nurses, physiotherapists or occupational therapists, can attend an one-day training at the Trimbos Institute. In this training they get familiar with the main principles of the group as well as the individual format of the Dutch version of 'A Matter of Balance'. After this training the facilitators deliver the course independently, supported by the detailed handbook for facilitators and additional materials. In this way the program is hosted and delivering is guaranteed for the long term, see also [www.zichtopevenwicht.nl](http://www.zichtopevenwicht.nl).

### *Health care professionals*

There is a paradigm shift in healthcare towards people who are more responsible for their own health and well-being. In this self-management paradigm health care professionals have to act as supporters of independence of older people. AMB-Home was way ahead of its time and meets this new model of health and healthcare. Consequently it is an added value for health care professionals. A few recommendations could be given to facilitators who will offer the program to older people. First, a face-to-face intake procedure could prevent dropout of participants during the program. Eligibility and motivation of potential participants for the program can be checked during this intake session, moreover, clear information about the program can be provided to establish matching and mutual expectancies. Second, motivational interviewing is used as a technique to encourage active participation and behavior change of the participant in the present study. From observations during the present study and based on results from previous studies we conclude that more training of the facilitators is needed to master this behavior change counseling skill. Motivational interviewing is, however, a widely applicable tool for health care professionals in daily practice (e.g. with respect to medication adherence). Therefore an additional general training in this matter could be justified. Lastly, to replace the social support from other participants, which is an important component in the group format of AMB, participants were encouraged to invite a significant other, for example, a spouse, other relative, friend, or neighbor. Facilitators were highly positive about the role of the significant other in situations where someone was present. Based on these experiences more efforts on inviting a significant other could be recommended.

### *Policy makers and health insurance companies*

The responsibility of delivering many healthcare duties is currently shifted in the Netherlands from the national government to the local government and to healthcare agencies. This offers opportunities for more customized prevention. And as mentioned be-

fore, health is no longer considered as a state of total well-being, but rather the ability to adapt and to self-manage in the face of social, physical, and emotional challenges (Huber et al., 2011). AMB-Home perfectly fits with these new developments and should therefore be adopted and financially supported by healthcare agencies and local governments.

### *Researchers and future research*

During the last decades of research in the area of concerns about falling, different terms were introduced accompanied with different measures. The introduction of all these constructs of fall-related psychological concerns have led to confusion about which construct is meant in a study; instruments are often used to measure constructs other than for which the instruments were designed. Clear guidelines about which measure should be used to assess which construct of fall-related psychological concerns are needed. Moreover, consensus about a common outcome data set for the examination of fall-related psychological concerns and related factors would be a great step forward in the field of concerns about falls. In addition, much is known about the risk factors associated with fall-related psychological constructs, although much less is known about causal relationships between these risk factors and such outcomes. More knowledge about the offset and development of concerns about falls may help in establishing risk profiles and tailoring the programs to the needs of those who it regards. Furthermore, outcomes of comparable studies may support the external validity of our results and increase the evidence that an individual cognitive behavioral approach can contribute to the management of concerns about falls. Last, AMB-Home can be further refined and improved by testing and selecting the most effective components. There are also opportunities by using modern techniques, like websites or iPads. This can make the program less labor intensive for health care professionals and therefore less costly. The same holds for translating the program into a volunteer lay leader model, which is a very successful format for the group program in the US. However, the feasibility and effectiveness of this new delivery methods have to be examined before large scale dissemination.