Using Fall Behavioral Scale (FaB) to assess risk taking behavior in the elderly

Mr. Ernest Yu
Occupational Therapist I
Housing Society Elderly Resources Centre
Fear of Falling

• Consequences:
  - predict deterioration in physical functioning
  - decreases in activity
  - admission to institutions

most of the available instruments related to measuring “Fear of Fall” rather than “Fall risk taking behavior”

“Self-efficacy” vs “Actual perform” the activities
Available measures to measure Fall efficacy and fall behavior in the elderly

- **Fall Efficacy Scale** (Tinetti, M.E., 1990)
  - good test-retest reliability and high internal consistency
  - document fall efficacy related to daily activities by older adults
  - restricted to indoor activities, “ceiling effect” with high functioning elderly living in the community

- assess subjective balance confidence in ambulatory, community-dwelling older people
- contains 16 items, both indoor and outdoor
- high internal consistency, good test-retest reliability and construct validity
- discriminate between high and low mobility seniors
Activities-Specific Balance Confidence (ABC) Scale - Simplified version for community-dwelling elderly

- simplified version - ABC scale (Filiatrault, J., et al, 2007)
- difficult to rate from 0-100%, utilize 4 categories with descriptive anchors
- 15 questions, delete “walking on icy road) and more user-friendly cue questions
- hierarchy of difficulty (sweeping the floor) lowest vs (use an escalator without being able to hold the ramp because your arms are full (most difficult)
Survey of Activities and Fear of Falling in the Elderly (SAFFE) (Lachman, M.E., 1998)

- face to face survey instrument
- assess the role of fear of falling in activity restriction
- also included social and physical activity related to QoL
Falls Efficacy Scale International- I (FES-I) (Yardley, L., et al., 2005)

- both in long (16 questions) and short (7 questions)
- including 10 (FES questions) and 6 new items (e.g. walking on slippery, uneven or sloping surfaces, visiting friends or relatives, going to a social event, etc)
- 4 categories (not at all, somewhat, fairly and very concerned)
- validated in different languages and cross-culture (Kempen GIJM., et al, 2008)
Falls Behavioral Scale (FaB) for older people

- evaluate day-to-day behaviors related to falls in older people
- outcome measure in research
- contributing factors of falls in older people
- content analysis (literature and qualitative studies)
- expert panel reviews
Test retest reliability
refined by factor analysis (n=418, aged over 65 years old)
8 did not discriminate ("always" clean up spills as soon as they happen)
### Final version - Fab

<table>
<thead>
<tr>
<th>cognitive adaptations</th>
<th>protective mobility</th>
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<tr>
<td>avoidance</td>
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<td>pace</td>
<td>practical strategies</td>
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<td>displacing activities</td>
<td>being observant</td>
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<td>change in level</td>
<td>getting to the phone</td>
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Results

- high content validity
- reliability
  - internal consistency $\alpha = 0.84$
  - test retest ICC = 0.94 ($p<0.01$)
- construct validity
  - history of falling ass. with more protective behavior
Ms. Chan had recent stroke 6 months ago. Fall Behavioral Scale (FaB) was done and showed the following e. She was hurry to receive phone call. She never uses walking stick even in need. She did not use a light at night. She used small stools to reach high.

An Occupational therapist did the home visit and review home hazards. She joined the Fall Prevention Program as well.
tips

- use picture for illustration
- paper and pencil vs computer
- basis for setting objectives with the elderly
- planning for multi-factorial interventions
- behavioral strategies
- outcome measures


Kempen GIJM, Todd, C., Haastregt JCM., van, Zijstra GAR., Beyer N., Freiberger E., Hauer K., Pito-Ziegler C., Yardley, L. (2008) Cross-cultural validation of the Falls Efficacy Scale International (FES-I) in older people: Results from Germany, Netherlands and the United Kingdom were satisfactory
