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<b>Disciplina</b>	617.100846
<b>Soggetti</b>	Falls (Accidents) in old age - Prevention Accident Prevention Accidental Falls - prevention & control Aged Ageing Behavior Disability Disease Education Evidence-based medicine Evidence-based practice Exercise Fall prevention Falls in older adults
<b>Lingua di pubblicazione</b>	Inglese
<b>Formato</b>	Materiale a stampa
<b>Livello bibliografico</b>	Monografia
<b>Note generali</b>	"This global report is the product of the conclusions reached and recommendations made at the WHO Technical Meeting on Falls Prevention in Older Age which took place in Victoria, Canada in February 2007. The report includes international and regional perspectives on falls prevention issues and strategies and is based on a series of background papers that were prepared by worldwide recognized experts. The papers are available at: <a href="http://www.who.int/ageing/projects/falls_prevention_older_age/en/index.html">http://www.who.int/ageing/projects/falls_prevention_older_age/en/index.html</a> .The report was developed by the Department of Ageing and Life Course (ALC) under the direction of Dr Alexandre Kalache and the coordination of Dr Dongbo Fu who was closely assisted by Ms Sachiyoshi Yoshida." - p.

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At head of title: Ageing and life course, family and community health.

Nota di bibliografia

Includes bibliographical references.

Nota di contenuto

I. Magnitude of falls : a worldwide overview -- II. Active ageing: a framework for the global strategy for the prevention of falls in older age -- III. Determinants of active ageing as they relate to falls in older age -- IV. Challenges for prevention of falls in older age -- V. Examples of effective policies and interventions.

Sommario/riassunto

The WHO Falls Prevention for Active Ageing model provides an action plan for making progress in reducing the prevalence of falls in the older adult population. By building on the three pillars of falls prevention, the model proposes specific strategies for: 1. building awareness of the importance of falls prevention and treatment; 2. improving the assessment of individual, environmental, and societal factors that increase the likelihood of falls; and 3. for facilitating the design and implementation of culturally-appropriate, evidence-based interventions that will significantly reduce the n