The 2025 National Falls Prevention Action Plan





Executive Summary

All of us want to live vital and active longer lives. Health challenges both large and small can make a big difference in how we age and how we think about our aging. And the risk of falling becomes one of the most consequential of those challenges as we get older. Falls have become the most frequent fatal injury in the United States for people older than 65. Other serious falls land hundreds of thousands more older people in emergency departments or hospital beds, costing an estimated \$80 billion annually, mostly paid by Medicare and Medicaid. What many of us don't know is that many serious falls and fall-related injuries can be prevented. During the past 20 years, evidence-based programs, services and technologies have been developed that help more older adults to stand tall and stay active. This very American ingenuity provides real hope for a future where many more of us are "falls free" and able to live our lives to their full potential.

Recognizing both the scope of the challenge and the opportunity ahead, the National Council on Aging (NCOA) and its National Falls Prevention Resource Center, with support from the federal Administration for Community Living, has prepared this **2025 National Falls Prevention Action Plan**. It expands on and refines the plans issued in 2005 and 2015, builds on the accomplishments resulting from the recommendations in those earlier plans, and reflects an awareness of what needs to be done to remove falling from the roster of top public health problems.

The production of this updated plan was an intensely collaborative process. It was guided by NCOA and a steering committee of 13 falls prevention leaders, which:

- Assessed the progress toward achieving each of the 12 broad goals, 40 strategies, and 240
 action steps detailed in the 2015 plan.
- Surveyed 327 professionals and providers to gauge opinion about the most important actions that have happened to prevent falls in the past five years.
- Convened the third National Falls Prevention Summit in September 2024, where 182 invited participants from 112 entities from government, health care, aging services, disability services, technology, nutrition, housing, academia, philanthropy, and communications joined one of six work groups to develop an array of recommendations for ways to dramatically reduce falls during the next decade.



The details of their discussions, and the full measure of their ideas, comprise the heart of this new Action Plan and are described in the following pages. The plan sets out these six goals – and priorities and action steps for achieving each – in the service of reducing and preventing the number of falls by older Americans:



Expand public awareness, messaging and advocacy by funding and creating a sustained, highly coordinated, multi-year, multimedia communications campaign that increases and reframes awareness about falls, builds knowledge about how to prevent falls, and expands demand for evidence-informed interventions.

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- **Broaden funding across sectors** by expanding and coordinating spending at the national, state and local levels on falls prevention awareness, screening, assessment, intervention and management and improve the capacity of health care and community providers to obtain funds from government, health systems, insurers, and philanthropy to achieve their aims.
- Scale evidence-based and proven interventions by increasing the number of evidence-based clinical interventions and community-based prevention programs with sizes and capacities sufficient to meet the needs of people at risk of falls, particularly those in underserved communities and those with the greatest social and economic need.
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Drive more clinical and community partnerships by creating the seamless infrastructure needed to support partnerships among clinical providers and community-based, aging network, public health, and other social service providers and systems to prevent and reduce falls.

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Generate new technologies and expand access to existing technologies by engaging a wide range of public and private partners so that products meet the unique needs of older people and are accessible to them no matter who they are or where they live.

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Improve data by increasing the quality and range of information, both quantitative and qualitative, about why older people fall and under what circumstances (the functional, activity, environmental, and personal factors), and whether older people of different economic, and social backgrounds fall for different reasons; and **expand research** via longitudinal (e.g., lasting 10 years) studies with participants who are heterogeneous with respect to age, level of frailty, existing medical conditions, and settings.



To be sure, these six focus areas do not exist in isolation, and so several recommendations overlap or reflect those noted in other goals, priorities and action steps. Several of the work groups concluded their goals would be much more easily achieved after the sort of national campaign envisioned by the work group focused on expanding public awareness, messaging and advocacy. Almost all work groups concluded that the collection of more and better data would lead to a more persuasive case for elevating the prevention of older adult falls as a national priority. In addition, improved data can show that increasing governmental, philanthropic, and other funding for evidence-based falls prevention programs and clinical interventions, which had virtually universal support at the Summit, would produce a clear and substantial return on investment for payors, health care and long-term services systems, and of course older Americans and their families.

Call to Action

For each goal and strategy, the Action Plan lays out barriers to and opportunities for achieving success along with specific priorities and action steps. Each chapter also describes what each sector or organization with a hand in falls prevention can do to help achieve the goals and identifies indicators that will guide an understanding of when and how success has been realized. As we well know, there are many contributors to falls. Not surprisingly, given the areas reflected in this plan, a wide-ranging set of actions is required to make a meaningful difference.

Healthy People 2030, a federal government effort to set data-driven national objectives to improve health and well-being, sets out the following two objectives for reducing falls:

- Reduce the number of <u>fall-related deaths</u> to 63 from 77 for every 100,000 people older than
 65; and
- Reduce the number of <u>emergency department visits</u> due to falls by older adults to 5,447 from 6,052 for every 100,000 people.

In addition to the six goals outlined in the Action Plan, progress towards these benchmarks can be made through the realization of the plan's recommendations and actions.

As the plan describes, all of us have a role to play. NCOA looks forward to working with this broad range of partners in government, health and social services, industry, and others to move this ambitious plan into action.