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At holde balance
Betingelser for og perspektiver i forhold til forebyggelse af fald blandt gamle mennesker

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Opponent, Ass. Professor Carsten Hendriksen, Københavns Universitet, Danmark
Bedømmelsesudvalg, Professor Elisabeth Severinsson, Høgskolen i Vestfold, Norge; Professor Lis Wagner, Syddansk Universitet, Danmark; Ass. Professor Margaretha Strandmark, Karlskadt Universitet, Sverige.

Afhandlingen bygger på følgende delstudier


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Abstract

Background. Falls among older persons are a public health problem in Denmark, the Nordic countries and the rest of the Western world. In a population perspective fall-prevention has been characterised by an individual behavioural modification and a regulating mode. This kind of fall-prevention discourse is now breaking up.

Aim. To describe how community-dwelling older adults experience and handle falls, falling and loss of balance. The focus is also on examination of falls as contextual phenomena with the older adults’ experiences. This study will contribute to develop health promotion and fall-prevention to individuals and to the fall-prevention as so.

Methodology. This thesis consists of four studies/articles (I-IV). Interpretative phenomenology as philosophical and analytical method was used. In one study (III) case study method was used as a framework, complemented by critical discourse-analytic interpretation of documents. Within the four studies nine women and four men (75-94 years old) were interviewed in narrative in-depth interviews about falling. In article III, five health and social workers and a nurse were interviewed.

Results. In coping with falling accidents, vulnerability, frailty and death imminence the participants developed various methods of managing everyday life at home. They described adaptive resources used to achieve an adequate quality of life and experience a feeling of well-being (I). Fear of falling was always present and was met in different ways. On one hand was worry about ungraceful situations not able to manage on your own; on the other hand was the will to live with the fear. (II). The two protagonists, dependent on home-care developed their own strategies for preventing falls. The health professionals created a supportive network; a platform of continuity where the efforts of the older persons and the staff complemented each other. The staff had no clear approach to addressing issues raised by accidental falls or the prevention of falls (III). Eating and appetite on food were not trivial everyday routines. The participants showed no particular interest in eating but ate to stay alive. Even if they had little appetite for food, the participants showed great appetite for establishing social relationships with family, neighbours and health care staff, as well as appetite for establishing an influence in these relations and in local communities and society.

Conclusion. In the future, fall-prevention must take a health promotion approach and contextualise falling accidents with experiences and meanings as point of reference. Fall-prevention will be not only multifactorial, but also multidimensional and existential.

Keywords. Old age, fall-prevention, health promotion, interpretive phenomenology, social connectedness, appetite.