

Unintentional Falls Among Adults 45+ Years Old

June 2025



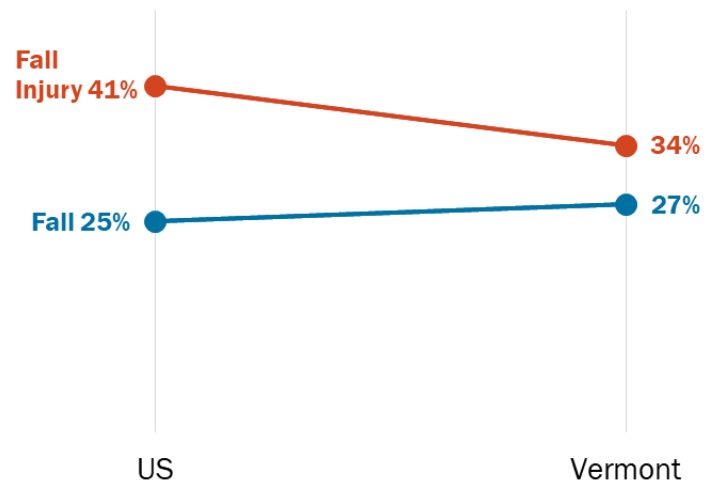
In the United States, accidental falls are a leading cause of all unintentional injuries and deaths among adults aged 45 and older. Nationally, unintentional falls for adults aged 45 and older resulted in 45,822 fatalities and over 5.5 million emergency department visits in 2023^{1,2}. In this data brief, we explore unintentional falls and fall-related injuries among adults 45+ in Vermont and preventative measures to reduce the risk of falls. All data below are from Vermont's 2023 [Behavioral Risk Factor Surveillance System \(BRFSS\)](#). If you need help accessing or understanding this information, contact: ahs.vdhdpdpanalytics@vermont.gov.

Key Points

- **Unintentional falls and fall-related injuries are a leading cause of death and injuries for adults 45+**
- **Risk factors for unintentional falls and fall-related injuries include poor physical health and disability status**
- **Protective factors for unintentional falls and fall-related injuries include aerobic activity and good mental health**

Unintentional Falls in Vermont Compared to US

In 2023, Vermont adults aged 45 and older reported a **statistically higher** prevalence of experiencing a fall in the past year compared to US adults of the same age range (27% and 25%, respectively). However, in 2023, Vermont adults aged 45 and older reported a **statistically lower** prevalence of a fall resulting in an injury in the past year compared to US adults of the same age range (34% to 41%, respectively).



Source: BRFSS, 2023

These results indicate that while Vermont adults experience a greater proportion of falls compared to the US, these falls are less likely to result in injury. The BRFSS defines an injury as a fall that caused limitations in regular activities for at least a day or a visit to the doctor and does not include fall-related deaths.



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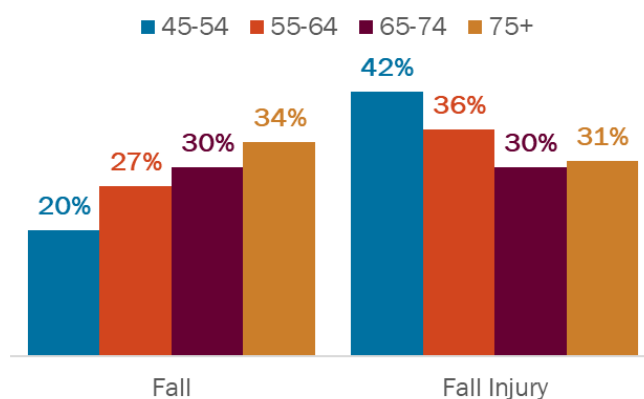
AGENCY OF HUMAN SERVICES
DEPT. OF DISABILITIES, AGING & INDEPENDENT LIVING
DEPARTMENT OF HEALTH

Demographic Factors that Influence Unintentional Falls in Vermont

Age

- The risk of experiencing a fall increases with age. Vermont adults ages 45-54 have a **statistically lower** fall risk compared to all other age groups (55 and older). No other age groups were statistically different from each other.
- The risk of being injured by a fall decreases with age until 65-74, but increases at 75+. All age groups were statistically similar to each other. Though these data show fewer injuries from falls as people age, this does not necessarily indicate a reduction in risk from falls as shown by an increasing rate of fall-related deaths among Vermont residents with increasing age³.

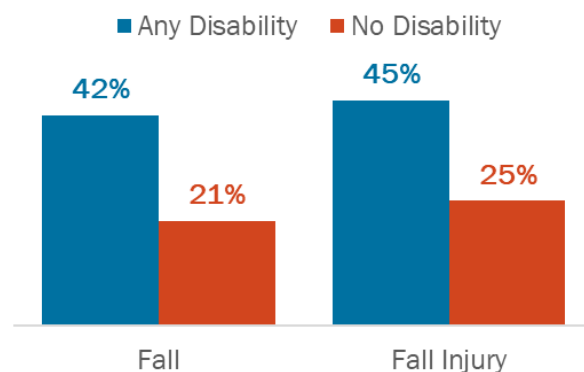
Percentage of Falls and Fall Injuries by Age and Disability Status



Source: BRFFS, 2023

Disability Status

- Adults 45+ with a disability are twice as likely to experience a fall and nearly twice as likely to be injured by a fall in the past year compared to adults with no disability. These differences are statistically significant.
- Disability includes anyone who reports having serious difficulty walking or climbing stairs, concentrating or making decisions, hearing, seeing, dressing or bathing, or who, because of a physical, mental, or emotional condition, has difficulty doing errands alone.



Source: BRFFS, 2023

Risk and Protective Factors for Unintentional Falls in Vermont

Risk Factors

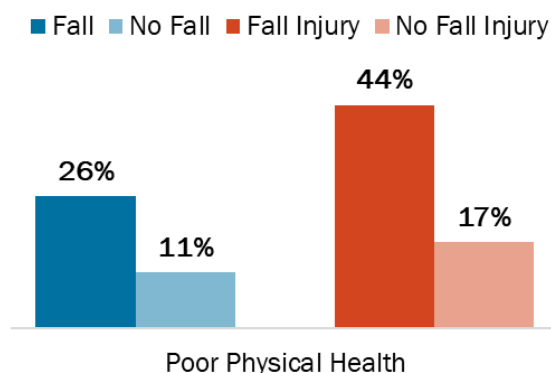
Risk factors include characteristics that may increase the risk of having a fall. All data reported below show statistically significant differences between: 1) Vermont adults who

experienced a fall compared to Vermont adults who did not experience a fall or 2) Vermont adults who were injured by a fall compared to Vermont adults who were not injured by a fall.

Those who experience a fall or a fall-related injury are more likely to report poor physical health.

Physical Health Status

- Vermont adults who have experienced or been injured by a fall in the last year are more than twice as likely to report poor physical health compared to those who did not experience a fall or a fall-related injury. Poor physical health is defined as 14 or more days of physical health not being good in the past month.

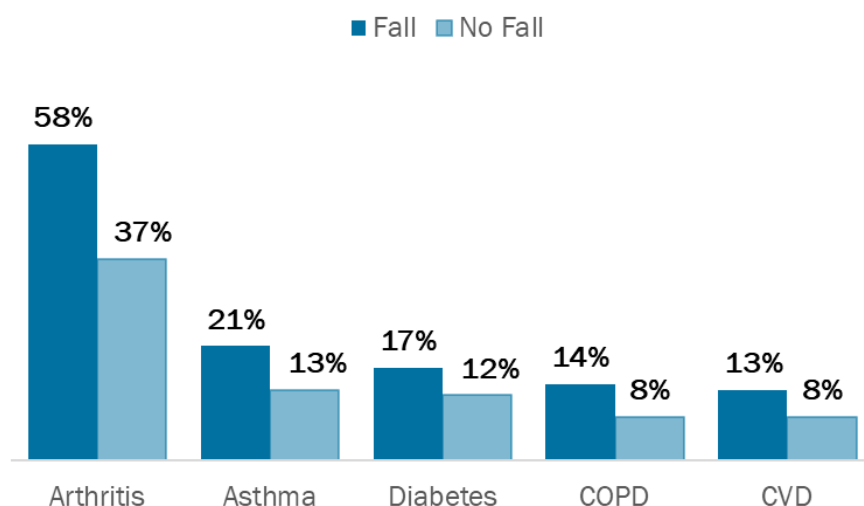


Source: BRFFS, 2023

Chronic Conditions

Vermont adults who experienced a fall in the last year are more likely to report having ever been diagnosed with arthritis, asthma, diabetes, chronic obstructive pulmonary disease (COPD) or cardiovascular disease (CVD)[^] compared to those who did not experience a fall in the last year. There were no significant differences between those who were injured by a fall versus those who were not, and reporting of any of these conditions.

Those who experience a fall are more likely to report a chronic condition.^{^^}



Source: BRFFS, 2023

[^]Cardiovascular disease is defined as ever having been diagnosed with coronary heart disease, a myocardial infarction (heart attack) or a stroke

^{^^}Chronic conditions are not mutually exclusive (i.e., someone could have a diagnosis of asthma and COPD)

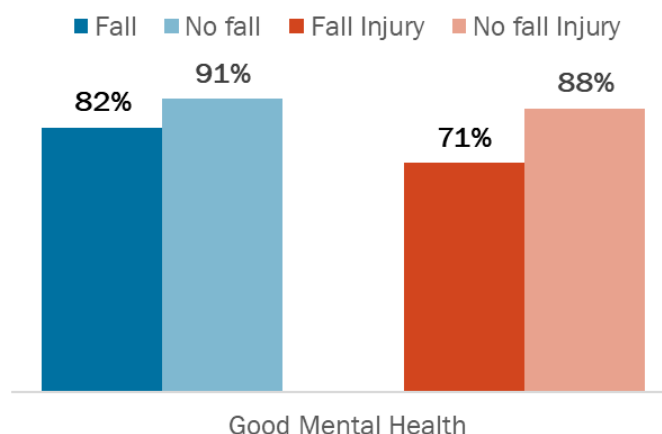
Protective Factors

Protective factors are ways to reduce or protect against the risk of falling. All data reported below show statistically significant differences between: 1) Vermont adults who experienced a fall compared to Vermont adults who did not experience a fall or 2) Vermont adults who were injured by a fall compared to Vermont adults who were not injured by a fall.

Those who have not experienced a fall or a fall-related injury are more likely to report better mental health and meet standard guidelines for aerobic physical activity.

Mental Health Status

- Vermont adults who have not experienced or been injured by a fall in the last year are more likely to report good mental health. Good mental health is defined as fewer than 14 days per month of poor mental health.

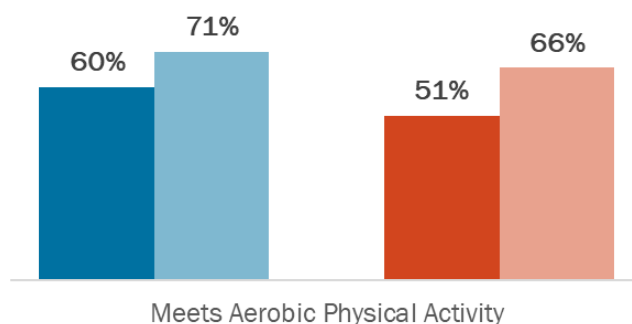


Aerobic Physical Activity

- Vermont adults who have not experienced or been injured by a fall are more likely to report meeting standard guidelines for aerobic physical activity.

There were no significant differences between those who experienced a fall or a fall-related injury versus those who did not and meeting standard guidelines for strength training.

See the following page for resources on ways to reduce the risk of falls and more information about falls among older adults.



Source: BRFFS, 2023

Resources for action

- Learn more about falls in Vermont and available resources at [Prevent Falls | Vermont Department of Health](#) and in the CDC's [Fall Prevention Brochure](#).
- Check out [Falls Free VT](#), a statewide coalition of organizations and individuals working together to reduce unintentional falls and fall-related injuries. Consider joining!
- Answer the [Falls Free Checkup](#) questions to get your falls risk score, and watch the National Council on Aging's video, [6 Steps to Prevent a Fall](#) for more resources.

References

1. National Center for Health Statistics-CDC annual mortality data files for [WISQARS Fatal data](#).
2. National Electronic Injury Surveillance System-All Injury Program for [WISQARS Nonfatal data](#), an estimated number of hospital visits for injury care that start in an emergency department based on a U.S. nationally representative probability sample of hospitals.
3. For more on fall-related deaths in Vermont, see the [Vermont 2023 Vital Statistics Report](#).
4. For all other demographic and geographic data for Vermonters who experience a fall or are injured by a fall, see the [2023 BRFSS Summary Report](#) (pgs. 31-34).