

Canadian Physical Activity Guidelines

FOR OLDER ADULTS - 65 YEARS & OLDER

Guidelines



To achieve health benefits, and improve functional abilities, adults aged 65 years and older should accumulate at least 150 minutes of moderate- to vigorous-intensity aerobic physical activity per week, in bouts of 10 minutes or more.



It is also beneficial to add muscle and bone strengthening activities using major muscle groups, at least 2 days per week.



Those with poor mobility should perform physical activities to enhance balance and prevent falls.



More physical activity provides greater health benefits.

Let's Talk Intensity!

Moderate-intensity physical activities will cause older adults to sweat a little and to breathe harder. Activities like:

- Brisk walking
- Bicycling

Vigorous-intensity physical activities will cause older adults to sweat and be 'out of breath'. Activities like:

- Cross-country skiing
- Swimming

Being active for at least **150 minutes per week** can help reduce the risk of:

- Chronic disease (such as high blood pressure and heart disease) and,
- Premature death

And also help to:

- Maintain functional independence
- Maintain mobility
- Improve fitness
- Improve or maintain body weight
- Maintain bone health and,
- Maintain mental health and feel better

Pick a time. Pick a place. Make a plan and move more!

- ☒ Join a community urban poling or mall walking group.
- ☒ Go for a brisk walk around the block after lunch.
- ☒ Take a dance class in the afternoon.
- ☒ Train for and participate in a run or walk for charity!

- ☒ Take up a favourite sport again.
- ☒ Be active with the family! Plan to have "active reunions".
- ☒ Go for a nature hike on the weekend.
- ☒ Take the dog for a walk after dinner.

Now is the time. Walk, run, or wheel, and embrace life.



There are 14 dangerous things in this picture

Can you spot all of them?



Stay safe!

- Stairs without handrail
- Deactivated fire alarm
- Cloth on space heater
- Overloaded outlets
- Loose extension cords in traffic areas
- Smoking. Cigarettes left unattended
- No automatic shut-off on coffee maker
- Open bottles of medicine
- Outdated medications in cabinet
- Loose rugs
- Flip-flop slippers
- Clutter on staircase
- Newspapers too close to lamp
- No handle and no deadbolt on door

12 steps to stair safety at home

Seniors are more at risk for falling on stairs than younger adults, and more likely to suffer severe injuries. In fact, seniors 65+ account for 70% of the deaths resulting from stair accidents.

Take a few minutes to review the safety of your stairs and how you use them.

1. Is there a light switch at the top and bottom of your stairs?

Install lights and switches to ensure all your stairways are well lit.

2. Are all your steps in good repair?

Make sure there are no uneven surfaces, cracks, bunched-up stair-covering or protruding nails.

3. Are the steps all of the same size and height?

Have a carpenter correct uneven steps. They are a major hazard.

4. Are you able to see the edges of the steps clearly?

Paint a contrasting colour on the edge of wooden or concrete steps (or on the top and bottom steps), or apply special strips you can buy to enhance the visibility of each step.

5. If you have a covering on your stairs, is it fastened securely?

Stair carpeting can cause slips. Consider removing it or replacing it with well-secured rubber stair treading.

6. Is the handrail well attached to the wall and easily grasped?

Make sure the handrail is well-secured and that you can get your full hand around it.

7. Is the handrail at a height of 34 to 38 inches (86 to 97 cm)?

There should be a handrail on at least one side of all stairways. The height should allow you to use it comfortably when your arm is slightly bent at the elbow.

8. Are your stairs free of clutter?

Avoid storing things temporarily on your stairs. Always check the stairs as you walk up or down.

9. Have you removed loose carpets or throw rugs from your stair landings?

Loose floor coverings are a hazard. If you have rugs make sure they are non-slip, or have a rubber backing.

10. Do you take your time when going up or down the stairs?

Go slowly with your hand on the handrail. Rushing is a major cause of falls.

11. Do you make sure your vision isn't blocked as you go up or down your stairs?

If you're carrying something, make sure it doesn't hide the stairs and that one hand is free to use the handrail.

12. Do you remove your reading glasses when using stairs?

Be sure to remove your reading glasses when walking or climbing up or down stairs. If you use bifocals, adjust your glasses so you can see the stairs clearly.



Take 12 steps to be safe!

www.publichealth.gc.ca/seniors



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**You CAN
prevent falls!**

The facts

- 1 in 3 seniors will experience a fall each year, and half of those more than once.
- 40% of seniors' falls result in hip fractures.
- 20% of injury-related deaths among seniors can be traced back to a fall.
- Seniors are injured **at home** more than any other location. The bathroom and stairs are particularly dangerous.

Protect yourself

Anyone can fall. But as we age, our risk of falling becomes greater. That's the bad news. The good news is that falls can be prevented. The first step to avoiding falls is to understand what causes them. For example, poor balance, decreased muscle and bone strength, reduced vision or hearing, and unsafe conditions in and around your home can increase your chance of falling. Staying safe and on your feet is a matter of taking some steps to protect yourself.

You **can** prevent falls by making the needed adjustments to your home and lifestyle, and by making sure you eat well, stay fit, and use whatever devices will facilitate your daily life while keeping you safe. Your independence and well-being are at stake. Take action!



Your home

Bathroom

- Ensure that you have non-slip surfaces in the tub and shower.
- Install grab bars by the toilet and bath to help you sit and stand. Make sure they are well anchored.
- Use a raised toilet seat, and a bath seat in the shower, if you need them.
- Wipe up moisture or spills immediately.



Living room and bedroom

- Reduce clutter! Get rid of loose wires and cords as well as any other obstacles.
- Consider using a cordless phone to avoid rushing to answer.
- Have good lighting throughout the house and install night lights.
- Make sure the path is clear between the bedroom and bathroom.
- Scatter mats are tripping hazards. Get rid of them or make sure they are non-slip.
- Move slowly out of your bed or chair. Getting up suddenly can make you dizzy.

Kitchen

- Store kitchen supplies and pots and pans in easy-to-reach locations.
- Store heavy items in lower cupboards.
- Use a stable step stool with a safety rail for reaching high places.
- Always wipe up any spills immediately to prevent slipping.
- If you use floor wax, use the non-skid kind.
- Ask for help with tasks that you feel you can't do safely.

Your health



Stairs

- Make sure your stairs are well lit.
- Have solid handrails on both sides of the stairway.
- Remove your reading glasses when you go up or down the stairs.
- Never rush up or down the stairs. It's a major cause of falls.

Exterior

- Keep front steps and walkway in good repair and free of snow, ice and leaves.
- Keep front entrance well lit.
- Put gardening implements such as hoses and rakes away when not using them.



Eat healthy meals

- Nutritious meals keep up strength, resistance and balance. Eat lots of vegetables and fruits.
- Don't skip meals. It can cause weakness and dizziness.



Keep fit

- Engage in physical activity every day. It's your best defence against falls.
- Walk. Try Tai Chi. Do what you can to maintain your flexibility and balance.
- Build your muscle and bone strength by doing "resistance" activities or exercises (such as weight lifting). Consult your doctor before you embark on an exercise program.
- Have your hearing and vision checked regularly.

Use medication wisely

- Ask your doctor or pharmacist about possible side effects of prescription or over-the-counter medication.
- Read directions carefully so you're aware of potential reactions with other medications.
- If your medication causes dizziness or sleepiness, adjust your activities so you aren't at risk of falling.
- Don't mix alcohol and medications. Alone or in combination with drugs, alcohol can cause falls.

Use safety aids

- Don't be embarrassed to use aids to daily living—they can keep you safe and active.
- Wear your glasses and hearing aid.
- Consider using a walker or cane. If you use a cane, make sure that it's the correct height and that it's rubber-tipped for safety.
- Appropriate footwear is important. Comfortable shoes that provide good support can help to prevent falls.
- Find out about other gadgets that can make your life safer: reachers, anti-skid soles, hip protectors, etc.
- Use them!



Take action!
You CAN prevent falls!

If you fall...

- Try to land on your buttocks to prevent more serious injuries.
- Don't rush to get up. Make sure you are not injured before trying to get up or letting others help you get up.
- Don't let the fear of falling again prevent you from being active. Inactivity creates an even greater risk of falling.

For more information

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Public Health Agency of Canada

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Web site: www.publichealth.gc.ca/seniors

Cette publication est disponible en français sous le titre : *Vous POUVEZ éviter les chutes!*

Other DAS publications

- *The Safe Living Guide—A guide to home safety for seniors*
- *Go for it!—A guide to choosing and using assistive devices*
- *Bruno and Alice—A love story in twelve parts about seniors and safety*
- *12 steps to stair safety at home*
- *Stay safe! (poster)*
- *Assistive devices info-sheet for seniors*

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If you fall or witness a fall, do you know what to do?

We all fall from time to time. With age, both the number of falls and the likelihood of injury increase. So, it's important to know what to do if you fall or if you see someone else fall.

Reacting properly to a fall can make the difference between a “serious” fall and a “less serious” one. It often helps to decrease its physical and psychological consequences. It enables you to regain your confidence more quickly and to continue to be as independent as possible.

A few facts

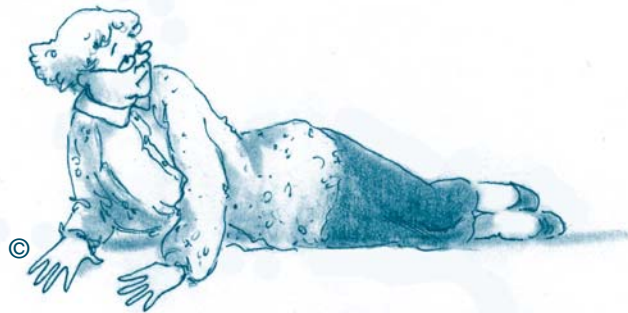
- One-third of seniors (age 65 and over) have a fall every year; half of them have more than one fall.
- Falls are the most common cause of injury among seniors.
- Seniors are nine times more likely to be hurt in a fall than someone under age 65.
- Nearly two-thirds of injury-related hospitalizations for seniors are the result of falls.
- Roughly half of all falls occur at home.



What to do after a *fall...* if you **CAN** get up

The first thing to do is to catch your breath. Check and see if you are injured. Even if you think you're OK, take your time before getting up again.

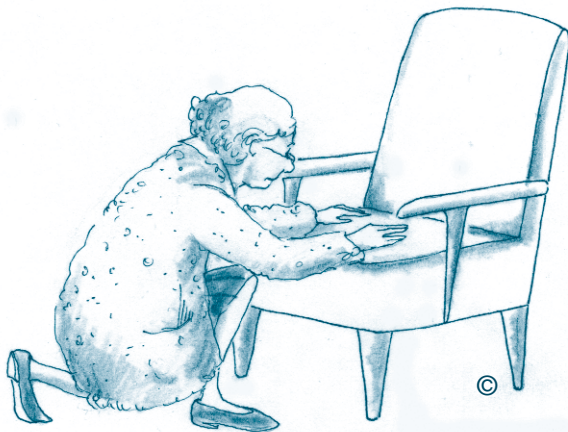
Follow these five steps for getting up:



1 Lie on your side; bend the leg that is on top and lift yourself onto your elbows or hands.



2 Pull yourself toward an armchair or other sturdy object, then kneel while placing both hands on the chair or object.



3 Place your stronger leg in front, holding on to the chair or object.



4 Stand up.

5 Very carefully, turn and sit down.



Most of all,
stay calm.

“ Practice these steps often and be prepared in case you fall. ”

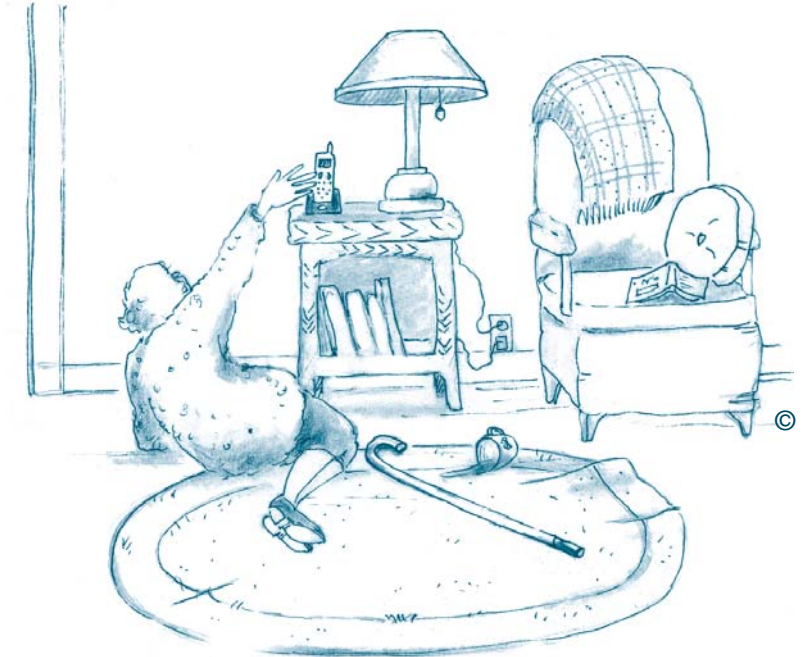
What to do after a *fall...* if you **CANNOT** get up

If you feel any discomfort or are unable to get up, try to get help.

1 Call out for help if you think you can be heard.

2 If you have an emergency call device or telephone at hand, use it.

3 If you don't, try to slide yourself towards a telephone or a place where you will be heard.



4 Make noise with your cane or another object to attract attention.

5 Wait for help in the most comfortable position for you.



6 If you can, place a pillow under your head and cover yourself with a piece of clothing or a blanket to stay warm.

7 Try to move your joints to ease circulation and prevent stiffness.

What to do after a *fall*...

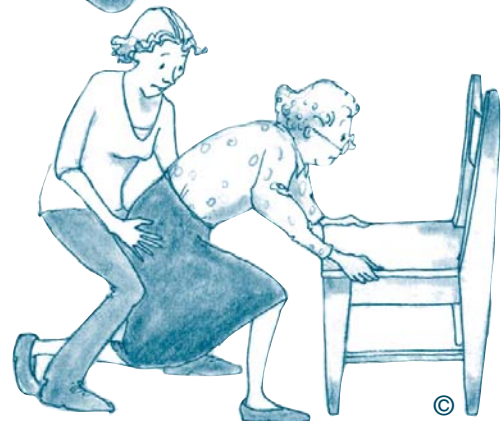
if you are the **WITNESS**

If you see someone fall, resist the urge to get the person up immediately. First check for condition: is the person conscious or unconscious? Does the person appear to be injured? Reassure the person.

If the individual cannot get up, call for help and administer first aid if you are able to do so. Help the person find a comfortable position and keep him or her warm using an item of clothing or blanket.

If the individual appears able to get up, proceed with care and follow the steps below:

- 1** Bring a chair close by; help the person turn onto the side and bend the upper leg; help the person into a semi-seated position.



- 2** Placing yourself behind the person and getting a firm grip on the hips, help the person to a kneeling position with both hands on the chair.

- 3** Holding on to the chair, the person should then place the stronger leg in front. You may help by guiding his or her leg.

- 4** With a firm grip on the hips, help the person to stand, then turn and sit on the chair.



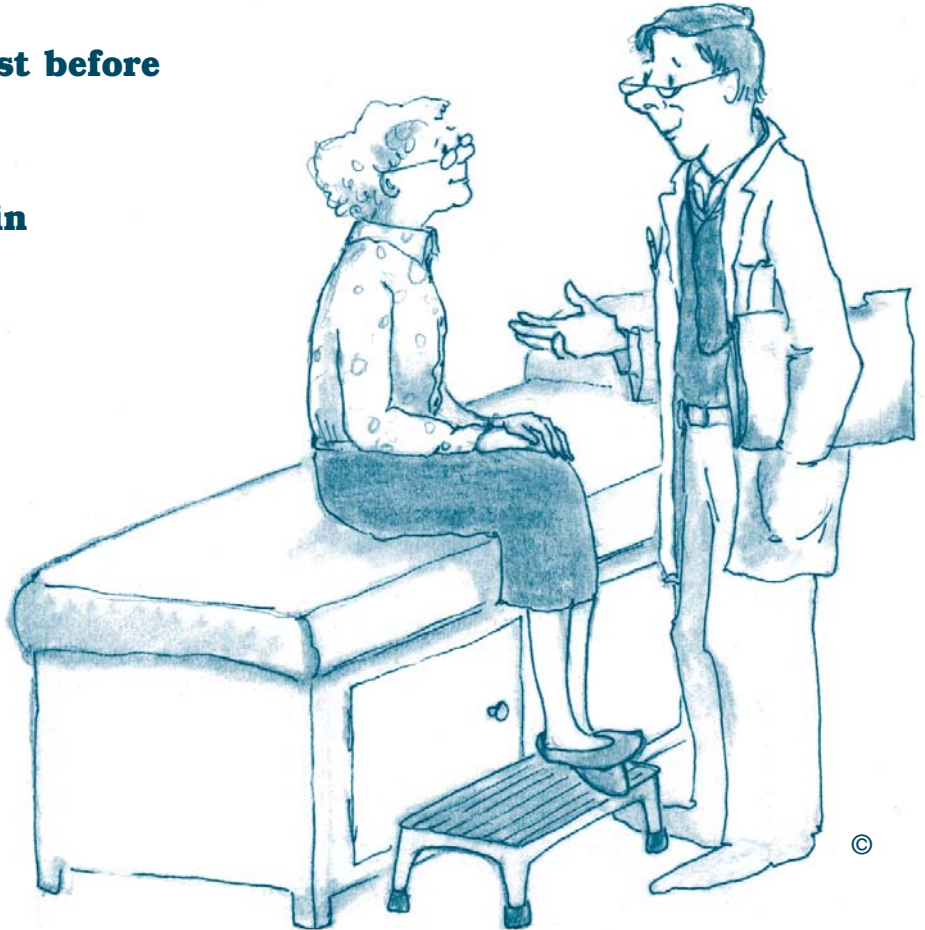
When to see a **doctor**

Whether you're the victim or the witness of a fall, never underestimate its seriousness. Even if it appears no harm was done, there could be after-effects.

Here are some of the reasons for seeing a doctor:

- **loss of consciousness just before or after the fall**
- **injuries**
- **a strong or lingering pain**
- **dizziness**
- **nausea**
- **overall weakness**
- **headaches**
- **vision problems**

Symptoms may appear in the days that follow a fall. If you fall, take note of your condition. If you witness a fall, take note of the person's condition.



In some cases, a fall may be the sign of an illness, or it may be caused by medication. It's always better to mention falls to your doctor. He or she can then assess the situation and see if the fall is linked to an illness, prescribed medication or over-the-counter drugs.

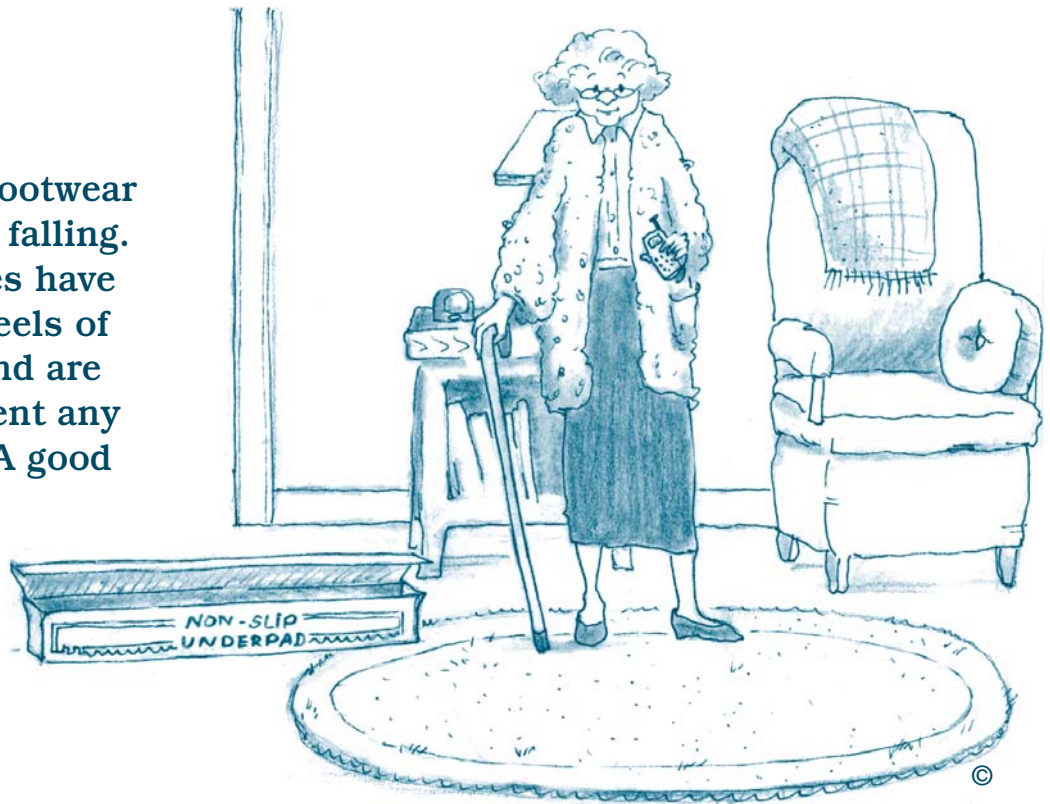
Preventing **another fall**

Surroundings

It's a good idea to check your environment to discover any fall hazards, particularly if you have had a fall. Simple changes to prevent falls include grab bars, non-slip rugs and a handrail on both sides of stairs.

Shoes

Wearing unsuitable footwear increases the risk of falling. Make sure your shoes have non-slip soles and heels of reasonable height, and are wide enough to prevent any twisting of the foot. A good heel cup that goes around the back of the heel also stabilizes the ankle.



Taking precautions

Thinking about your fall, come up with a plan so that you'll feel in control for the future. Share this plan with your family and neighbours. Consider getting an emergency call device or always have a cordless phone close at hand, especially if you fall often. Ask a friend or a family member to phone you at regular intervals, or get this service from a company or a volunteer centre. Give your keys to someone you trust who could use them in an emergency. In short, think about what you can do to get help if you have a fall.

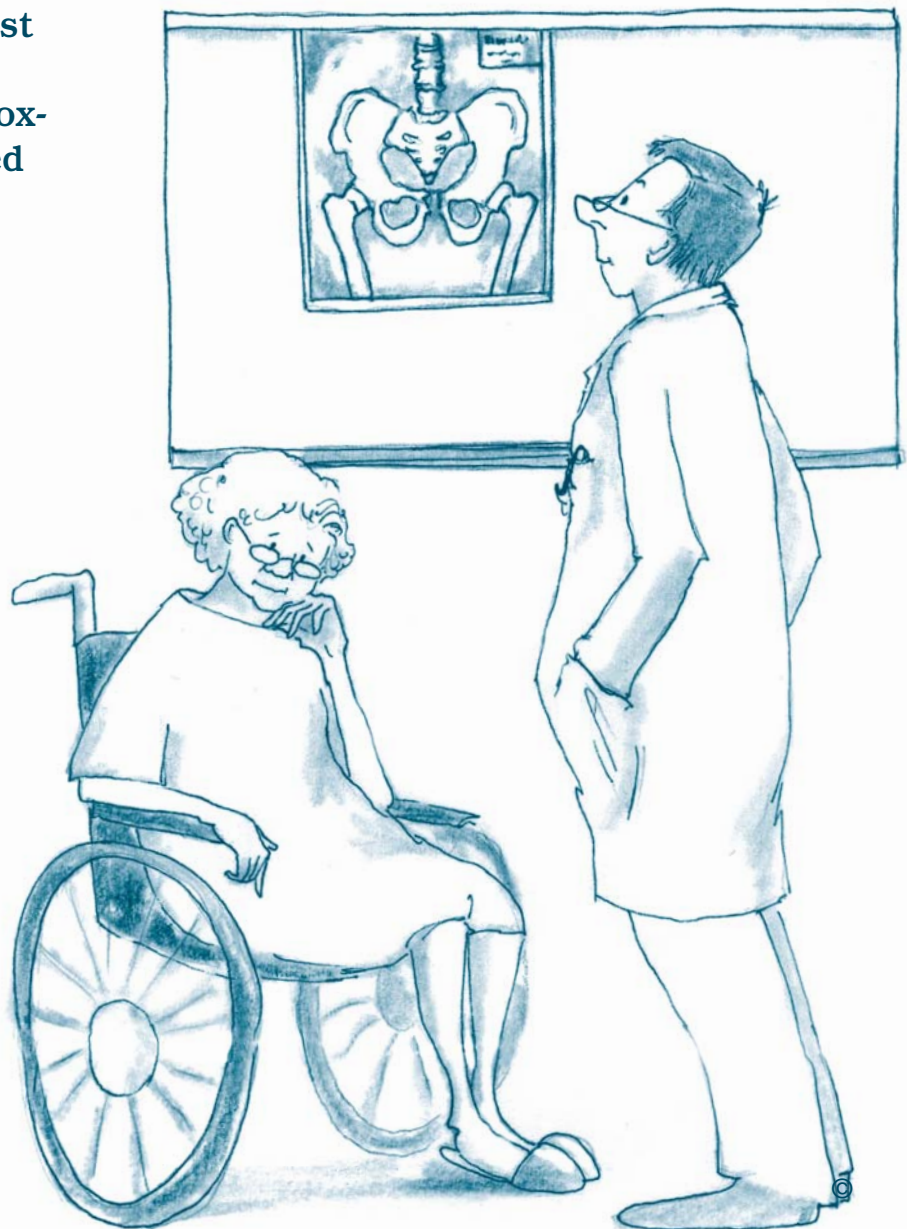
Consequences of a fall:

the physical aftermath

A fall is often accompanied by physical complications. As a matter of fact, falls are the most common cause of injury among seniors.

Besides bruises and scrapes, one-third of seniors who fall suffer fractures or muscle damage. They can also develop pneumonia, blood clots or other after-effects after they lie on the ground for an extended period.

Hip fractures are the most common injury. Among people over age 65, approximately 40% of fall-related injuries resulting in hospitalization are due to hip fractures.

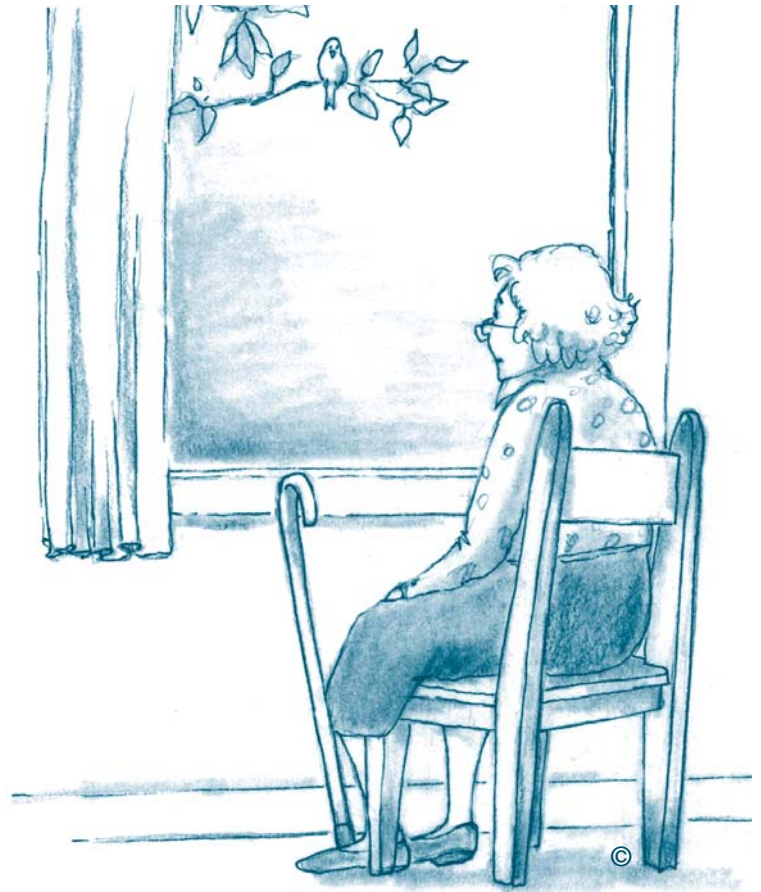


Consequences of a fall: the psychological aftermath

It's normal to be more cautious after a fall, but the fear of falling again may lead you to restrict your activities. This is a vicious circle: the less active you are, the more your strength and flexibility decrease, which increases your risk for falling. What's more, if you isolate yourself because you feel vulnerable, the reduced social contacts may undermine your spirits.

Discussing your fear of falling with your family or with health professionals should help diminish your fear. A physiotherapist can also suggest various rehabilitation exercises that will help you.

Taking a fall brings your physical limitations to the surface and may jeopardize your independence. It's a difficult experience to go through. Knowing the potential consequences of a fall and knowing what to do will set you on the path to a faster physical recovery and a return to enjoying life.



Find out more

- View the many publications about falls by the Division of Aging and Seniors, Public Health Agency of Canada, including the brochure *You CAN prevent falls* www.phac-aspc.gc.ca/seniors-aines
You can also order by telephone by calling **613-952-7606**
- Visit the fall prevention site of the *Institut universitaire de gériatrie de Montréal*, www.vieillissement.ca



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Bruno and Alice



*A love story in twelve parts
about seniors and safety*

Canada

To promote and protect the health of Canadians through leadership, partnership, innovation and action in public health.

—Public Health Agency of Canada

Bruno and Alice—A love story in twelve parts about seniors and safety
is available on the Internet at the following address:
<http://www.publichealth.gc.ca/seniors>

Également disponible en français sous le titre :
Bruno et Alice — Une histoire d'amour en douze épisodes sur les aînés et la sécurité

To obtain more information on this publication, please contact:

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Foreword

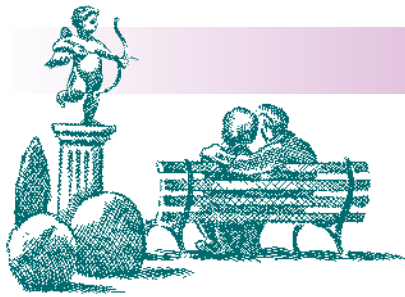
Injuries are responsible for the discomfort, hospitalization, disabilities, institutionalization, and even death of many Canadians in their senior years. A great number of these injuries are preventable and measures to prevent them should be the concern of health practitioners, governments and communities everywhere.

This series of twelve illustrated stories follows the whimsical romance of two active seniors who, through lack of prevention, end up in awkward situations and almost miss their rendez-vous with love. The stories offer insight into some of the *personal* preventive measures seniors can take to make their environment safer and prevent injuries.

The series was produced to promote a greater awareness of the issue of injury prevention for seniors. The text, with illustrations, can be reproduced (if proper credit is given) as a series or as a whole by any organization, newspaper or other publication wishing to foster seniors' injury prevention.



Canada, a society for all ages



Episode One

Running to get behind

Before Canada went metric, we used to say that an ounce of prevention was worth a pound of cure. Now we figure that fifty grams of prevention is worth about half a kilo of cure. The poetry has suffered but the point is still valid, and I was reminded of that one hot day last summer.

Since my wife passed away eight years ago, I have made a habit of walking to the statue garden of a local gallery, relaxing on one particular bench off the beaten path, reading the paper in peace. In July, a woman I didn't know began sitting on the same bench every day to read.

Hardly a word passed between us but, over time, I began to get the impression that she was there to see me. Her possible interest made me think about her differently. I found myself making sure I was at the garden at exactly the same time every day. Right through August I never missed. Nor did she. Pretty soon, I was thinking a whole lot more about her than about the daily news. I figured I'd ask her out.

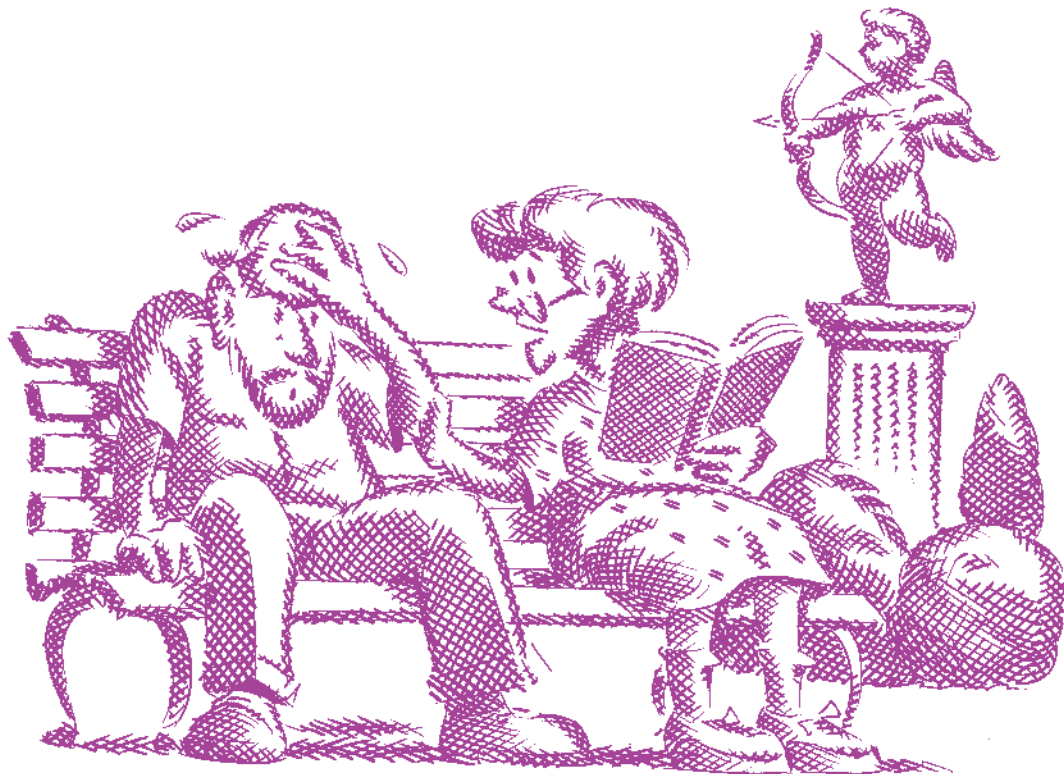
I had been out of the dating scene for a while—fifty years or so—and it took a bit of doing for me to muster the courage to ask her out dancing. There's a spot not too far from my place where they still bring in a dance band once a month. I decided to ask her to come dancing with me the following Saturday night.

But I kept putting it off. Friday rolled around and I still hadn't thought of a good line to open the conversation. Nervous, I cut the lawn, cleaned the kitchen, then swept the garage to keep myself busy. In fact, I distracted myself so well that, the first time I looked at the clock, I saw that I was nearly an hour late! She might be gone! I ran out of the house, leaving my wallet, sunglasses, hearing aid and newspaper on the hall table. Hoping she hadn't left yet, I ran most of the way to the gallery.

Now I keep pretty active, but it had been quite a while since I pushed myself this hard. And the day was hot—a real scorcher. The sun beat down on me and, by the time I arrived, I was wiped. In fact, I was really in trouble. Fortunately (actually *unfortunately*), she was still there when I arrived. I dropped down onto the bench exhausted, heaving and gasping for breath. I hadn't yet learned the great secret of aging—keep active but pace yourself. I was fried.

She leaned over, probably to ask me if I was okay, but I never heard a word she said; my hearing aid was back in the house with my cash and shades! I muttered that I was fine and, to hide the truth (that I couldn't hear her at all) I waved her off as though I wanted to be alone.

And alone is exactly how I spent Saturday evening. The big first date would have to wait.





Episode Two

One woman's poison

As a rule of thumb, if you're attracted to a man and want him to take an interest in you, you should try not to poison his descendants.

I learned that lesson last summer, when a gentleman who lived in the neighbourhood strolled by my apartment building with his two great grandchildren in tow. This man was no stranger—we had often shared a bench down at the statue garden but had never spoken. In fact, the last time I had seen him, I had asked after his health and was brushed off like I had asked for spare change.

But here he was in front of my ground-floor apartment with two beautiful little ones, and I thought I'd take another shot at showing him that I was interested. I waved hello and asked

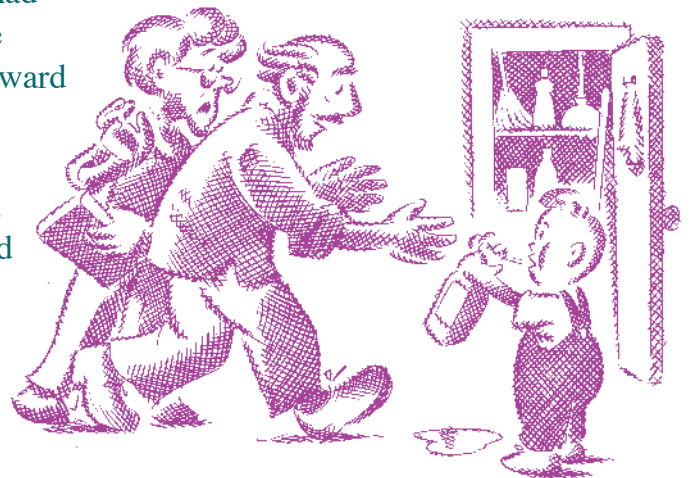
him if the toddlers might like a cool drink. He accepted and approached, introducing himself at last. His name was Bruno.

I sat the little ones at the kitchen table with some juice and, as they were drinking, Bruno wandered into the living room. He was impressed by my wall of bookcases and, before long, we were pulling out one volume after another, talking about literature, art and music. We had many similar interests.

Then, all of a sudden, Bruno was struck by the silence in the kitchen, and ducked back around the corner to make sure the toddlers were okay. I followed him in just as the younger child, standing before the open cupboard under the sink, raised a squirt bottle of liquid cleanser to her lips.

It was awful. The child was unharmed, but could easily have been in real danger. I felt terrible, and sputtered something about being older and having to keep all the cleaning supplies within easy reach. It had never occurred to me, at 80 years of age, to childproof my own home!

Nothing terrible had happened, but the incident was awkward and embarrassing and, when he left with the children, I was sure I would never see him again...





Episode Three

See you next fall

In the late summer of last year, I met a man named Bruno and began to think that something might come of it. I could tell from the way he treated his great-grandchildren that he was both kind and patient.

But you know men. No matter how “visible” I tried to make myself through summer and into the fall, he never caught on that I was interested. I’m not shy, so I decided to ask him out myself. I live in a seniors’ apartment not far from his house, and our Friday card nights are pretty wild affairs, so one week I asked him to be my guest. He accepted.

I prepared for my date with a long hot bath. Reading for hours while soaking in bath oil has always been one of life’s little pleasures—at least since the day I learned to read. When I was ready to get out, I stood up and

reached for the towel on the rack opposite the tub. It was just a little too far away.

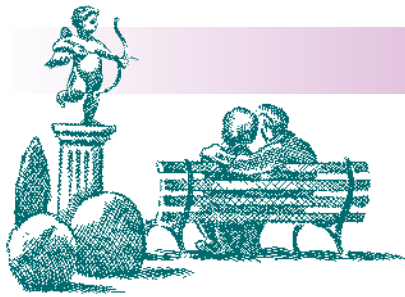
My feet shot out from under me and I crashed down onto the tub ledge, landing with all my weight on my hip, then falling right out onto the bathroom floor. I was in agony and for the longest time couldn’t find the energy to move at all. I was afraid I’d broken something, and wondered who would find me naked on the bathroom floor when I failed to pay my rent next month!

I struggled to reach the cordless phone I always bring into the bathroom (not just for safety—I hate to miss a call). I managed, and phoned Mrs. Lun next door. We keep each other’s keys... just in case. She came right in and helped me out. She also brought over a rubber bath mat and told me who could install a grab bar near the tub.

I was okay, nothing was actually broken—just bruised. But I can tell you, I sure wasn’t in any shape for an evening of cards, let alone a date!

In fact, I was beginning to wonder if I’d ever get to know this gentleman at all.





Episode Four

I, vampire

Things weren't going particularly well with Alice and me. I had met her last summer and was wild about her, but the relationship seemed jinxed; whatever plans we made to get together were frustrated by circumstances.

In spite of my efforts, we had spent our whole first evening together only a week before, sitting in her apartment talking about bathtub rails and hip replacements. She had taken a bad fall that afternoon and, contrary to my vow never to talk about health problems as I got older, we talked about everything from slippery tubs to prostate operations!

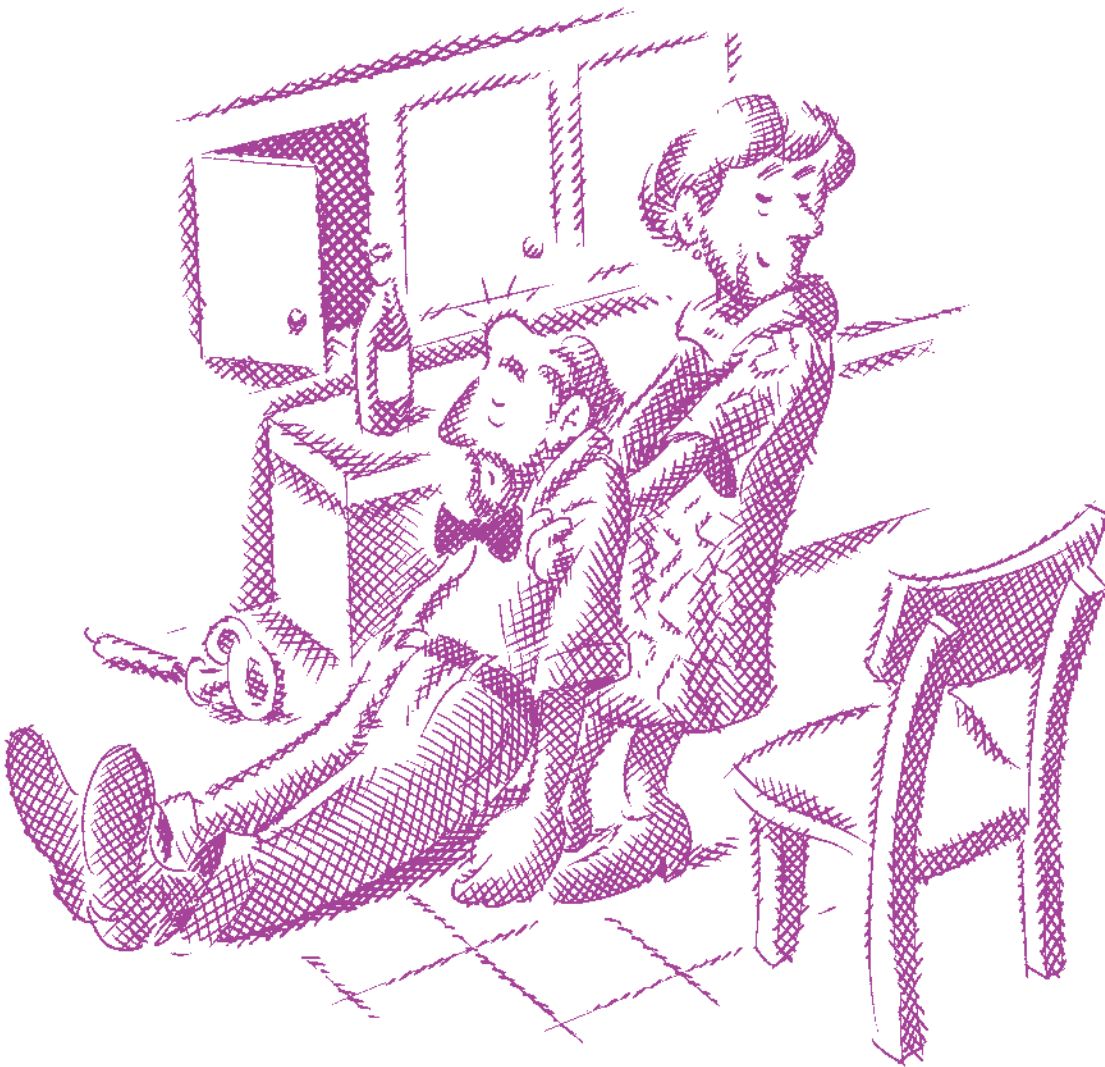
But this night was to be different. Pure romance. I had invited her over to my house for dinner, and it was going to be a great one. I had some steamy jazz on the turntable (yes, turntable,) lights dimmed and candles lit when she arrived. I thought the place looked great but, when I opened the door for her, she looked around at the candlelit rooms and said "Count Dracula, I presume." Her comment put me off a bit. I like candlelight but I'm no bloodsucker, and I hadn't learned yet that Alice says whatever she thinks, good or bad. For me, dimming the lights is romantic. Besides, I've always thought that using less light saved money and, frankly, I made a point of leaving most of them off all the time.

I showed her into the living room and offered her a drink. She asked for wine. I slid off the couch and headed through the dark for the kitchen where I marched directly into the corner of an open cupboard, driving it right into my forehead.

I must have yelled out (probably something unprintable) because Alice was beside me in a second, flipping on lights, hauling me up off my knees, helping me to a spot more comfortable than the kitchen floor.

The evening wasn't a total disaster. Alice spent the evening very close to me on the sofa where, tending the growing lump on my forehead, she lectured me on the wisdom of

turning lights on before entering a darkened room. That was the closest we'd been to date, but nothing compared to what happened the next evening we got together.





Episode Five

The fires of love

Let's face it, no matter how old you get, dating takes courage. Even in your seventies and eighties, despite the fact that you don't have to worry about your skin breaking out before a date, there are plenty of things to ruin a perfectly good evening.

One night last September, I was invited over for dinner to the apartment of the woman I was falling in love with. It was only our third date, but I was hoping that something big was going to come of it. "Snow on the roof, fire in the furnace" and all that kind of thing.

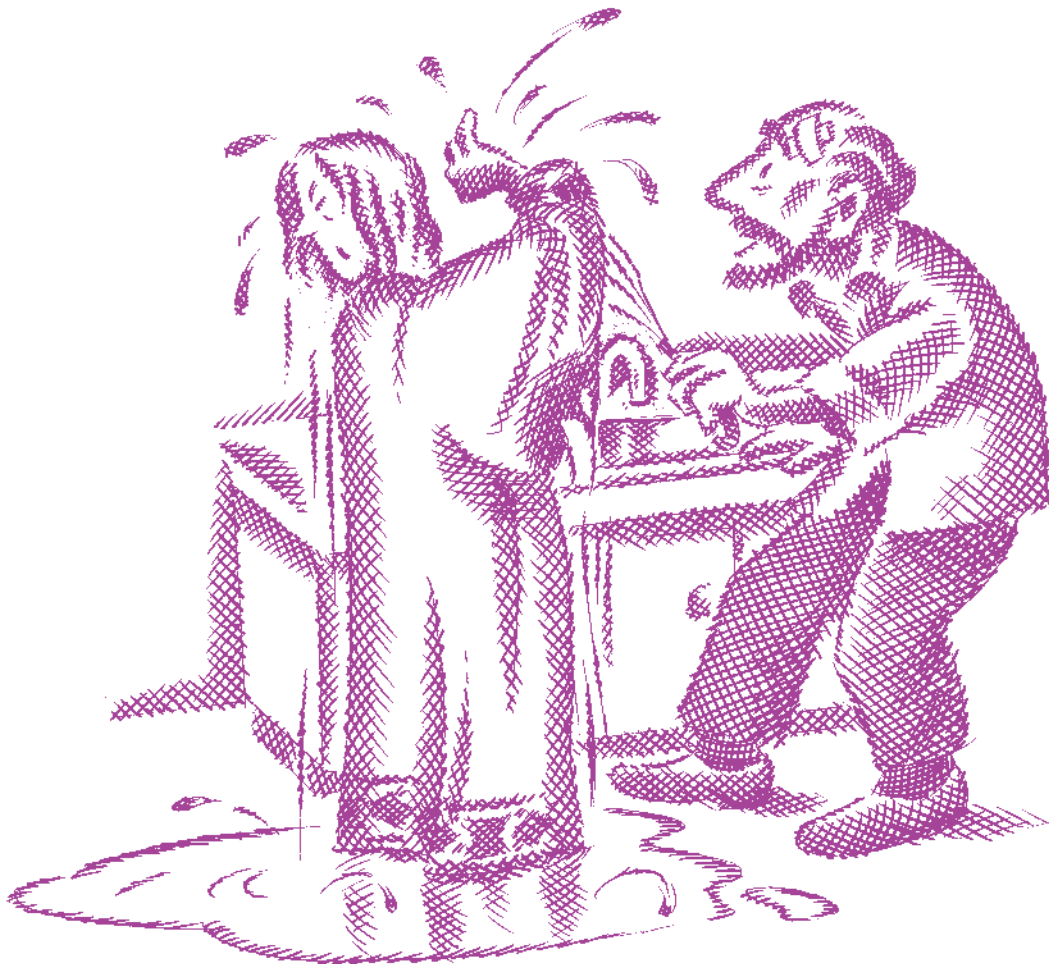
When I arrived, she was dressed in a comfortable gown, some kind of caftan, a cotton thing with wide sleeves. She looked fabulous. I'm a sculptor by hobby, clay and bronze, and I had brought her a small piece as a present. It was just a head of a woman, but it had plenty of personality and she loved it. She invited me into the kitchen where dinner was well under way. Behind the stove was a shelf with flowers, which she pushed aside to make room for my sculpture. There, she told me, she would be able to see it every time she cooked.

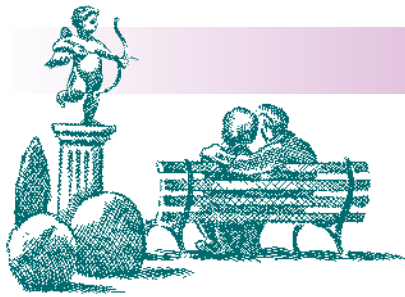
Leaning forward to straighten it, Alice kind of hovered over the stove. The sleeve of her gown touched an element and we soon discovered that cotton is not what you would call fire-retardant. Her sleeve burst into flame.

Without thinking about it at all, I grabbed her and pushed her over to the sink. I turned on the tap and used the flexible nozzle to spray her with water and put out the flames. Actually, I sprayed her a lot. "Hosed her down," you might say. Instead of being grateful (which someone careless enough to wear loose clothing while cooking should have been), she was furious.

Since then, I've tried to give her a few fire safety tips, even the old "stop, drop and roll" lecture, but I don't think she's listening. More than once she's asked if I've joined

the volunteer fire department yet and, when she's being really snide, she stills calls me "Sparky." She's obviously crazy about me.





Episode Six

It takes two to cha-cha

Part of growing older wisely is recognizing that, if you want to stay in shape, you have to work at it. I learned that lesson in the middle of a dance floor.

My gentleman friend Bruno fancies himself a dancer. In fact, as he has often told me, for years he signed his letters “Samba Boy.” Being seventy-something hasn’t slowed him down much, and one day last winter he took me dancing. There’s a hall near us that brings in big bands (I didn’t think there were any left!) and Bruno was waiting in line the day tickets went on sale.

Now, I never won any awards or anything but, in my youth, I could tango with the best of them, and my cha-cha had hopeful dance partners lining up to ask me onto the floor. So off we went. As the song says “We could have danced all night...” except for the fact that by the third number, I was exhausted. I guess I had let myself slip out of shape—never exercising. What an embarrassment. Bruno had paid a fortune for the tickets, and had even prepared for the event by dredging out his old Latin dance outfit (which, to be truthful, looked ridiculous on him). But I couldn’t keep up at all.

By the time they played the first cha-cha, I could hardly even stand up, but I made myself get back up onto the dance floor. About a minute into the dance, I felt dizzy. I stumbled toward the edge of the floor and stopped myself from falling by leaning right on someone else’s table. I recovered soon enough, but it amazed me that not being fit could have caused me an injury.

I was really humiliated. Bruno had kept himself in great shape all these years through exercise... walking, cutting the lawn, even doing the odd sit-up.

It wasn't that 80 is too old to dance. It was just that I was just plain out of shape.

Since then, I've made a few changes. I walk to the library instead of drive. If I'm just

going up one flight, I take the stairs. And I'm thinking hard about that yoga class.

Next time they play a cha-cha, I'm going to be ready, and Bruno better be ready too!





Episode Seven

Out of our senses

I think it was in February. The temperature was minus-a-million Celsius (even colder in Fahrenheit) and Alice, the woman I had been seeing for a few months, was over at my place for the evening. I put on some coffee and joined Alice in the den. We had just watched a film—some depressing thing from Europe that she loved—and were chatting about whether movies were more art or industry when the wind outside really began to howl.

When it came time for her to go, Alice looked outside and winced. She was afraid to go out in case she slipped and fell. So she asked if she could spend the night... on the couch of course.

Well, why not? I have plenty of spare rooms. No one was waiting for her at her place. It was only right that she stay. But I'll tell you, it certainly

put a different complexion on the evening. I felt like a teenager. Frankly, I couldn't tell how much of Alice's wanting to stay over was actually the weather. I loved her like crazy, and was sure that whatever happened next would be the right thing. Boy, was I wrong!

I was upstairs showing Alice to her room when the alarm went off—a piercing howl that scared us both half to death. I figured it was an air raid, but Alice knew better. "It's the smoke alarm," she shouted.

In my place the smoke alarm is wired to the security system and, within moments, the fire department had arrived. They knew what the problem was right away, and headed for the kitchen. It was the coffee maker. I had turned the thing on but forgotten to put the pot in.

The coffee had poured out onto the element and had fried, sizzled and smoked until it set off the smoke detector. It wasn't a fire; it was a big stink.

There in the kitchen, we could smell it plain as anything but, to our surprise, neither Alice nor I had been able to smell it before. We were both forced to admit that relying on our senses is no guarantee of safety.





Episode Eight

Back flip onto wet grass

My friend Bruno is a sculptor. This March, when the forecast was for three warm, sunny days in a row, Bruno decided to throw a small party to get his family and friends over to see the pieces he had been working on over the winter. He puts on an event like this once or twice a year. It gives him a chance to sell his art, make a little cash, and see all his friends.

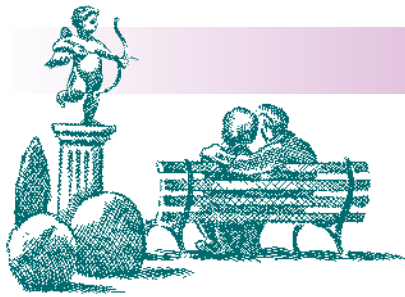
The day of the party, Bruno's place was packed. Everyone was very complimentary about his work, and the fine weather made everything seem even nicer. At one point, someone suggested we go out on the back deck to enjoy the warmth. It had been a long winter and the sun felt great. Bruno's daughter was out there with us. But she took one look at the deck and said "Dad, this old deck isn't getting any sturdier."

Bruno who, quite wrongly, fancies himself a handyman, waved her off by saying "Rock solid. Two-by-ten joists every twelve inches. It'll never budge."

Never tempt the gods. As though on cue, the railing which a couple had leaned against gave way, and they both fell backwards into a cold marsh of soupy wet grass. They weren't hurt, but they sure made a fuss about their clothes! Bruno's daughter got immediate permission to find a builder and make proper repairs. The incident was over.

After the party, we went back out onto the deck and checked out the damage. Looking down at the impressions in the wet grass, Bruno was quiet for the longest time. Then he turned to me and said "That could have been us."





Episode Nine

A few dollars and change

I figure Oscar Wilde was bang on when he said that youth is wasted on the young. At the tender age of 75, I was having the time of my life. Alice and I were getting closer all the time, and the loneliness I had felt since my wife died was beginning to disappear.

Alice was spending a lot more time at my house. That was great, except that she was also beginning to notice a number of things around the house that she wanted to change. Alice isn't pushy, but she's straight up and, when something is on her mind, it's on her lips soon enough.

She had attended a workshop on how to make a home safer for older people, and I guess I was her first experiment.

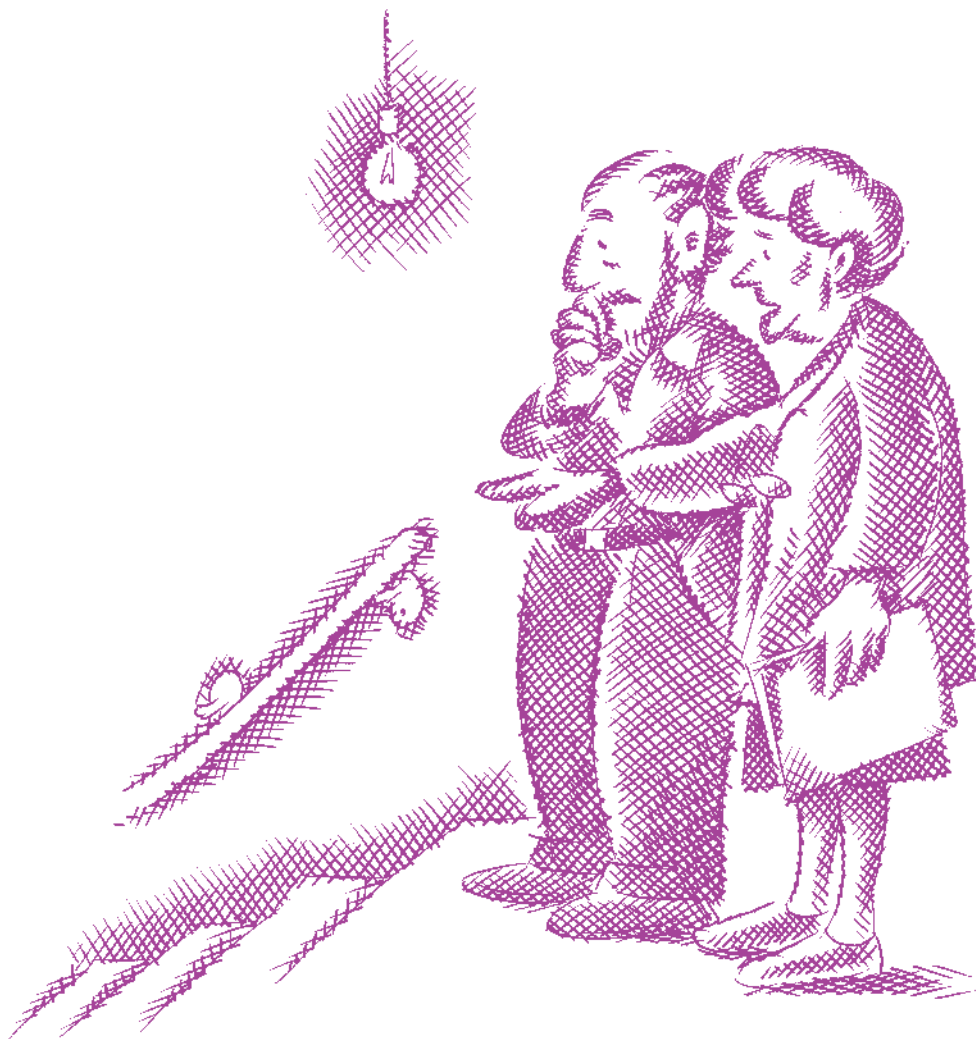
At first I wasn't too comfortable with the idea of making changes. Maybe I was more set in my ways than I thought. Or perhaps I figured that altering the place would somehow be disloyal to the memory of my wife.

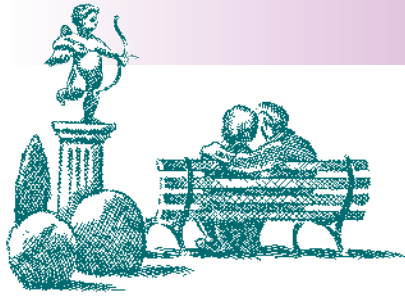
I resisted. Alice persisted. One day she presented me with a list of the changes she wanted to make—a phone in the bedroom, better lighting on the stairs, handrails down to the basement, and grab bars in the bathroom.

I guess I kind of sloughed it off. But that didn't deter Alice. Fact is, the changes she wanted to make were all changes to make the house safer—the phone in the bedroom in case of an emergency, better lighting on the stairs so we wouldn't slip, that sort of thing. Alice was doing what I hadn't found the courage to—admitting that we were getting older and that we should accommodate the change.

The modifications were easy. And not too expensive. A few dollars here, a few there. And I felt better when things were safer and more comfortable around the house. I even

made a few changes of my own, including better lighting in the studio where I do my artwork. Now I can see the mistakes I'm making! Another change for the better...





Episode Ten

Hey Bruno, your slip is showing!

I have never thought of myself as pushy, and “Velvet Bulldozer”—the nickname they gave me at work years ago—never made much sense to me. I’m pretty diplomatic but I’m not afraid to speak my mind when there’s something on it.

Spending more time with Bruno offered me a few opportunities to get to that point in a hurry. Bruno is funny, caring and creative but, frankly, he was a bit of a slob when I first met him, not to mention slightly distracted. I like to be comfortable in my environment, and being over at Bruno’s more forced me to think about just what makes me comfortable.

I got Bruno to improve the lighting and fix up the stairs. He even got the back deck repaired—all things that made the place look better and made it safer. But it never occurred to us then to make a simple improvement that could have saved us a great deal of anguish and upset.

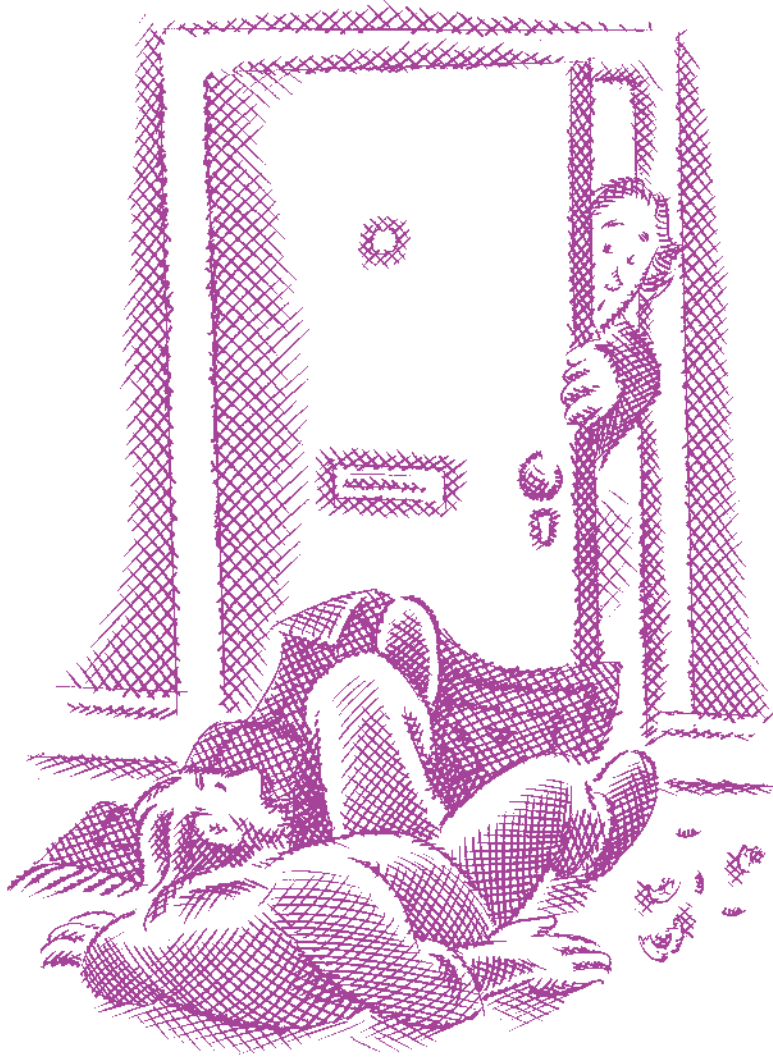
One night in June, Bruno and I were out on his back deck skywatching (there is a certain leisure to retirement). We heard the front doorbell ring and Bruno leapt up to answer it. He’s a pretty nimble thing at 75, and no one could ever accuse him of slowing down!

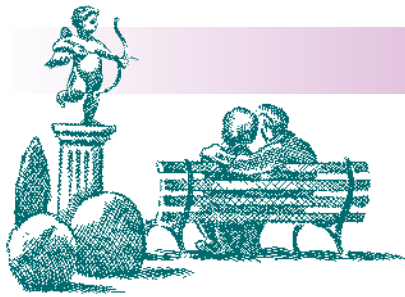
Just seconds after he disappeared from sight I heard a great crash and a yell. I ran in to see what had happened and saw Bruno, flat on his back in front of the door, the broken umbrella stand scattered all around him. Bruno’s daughter was trying to get in to help him but Bruno’s body had pinned the door shut.

The reason for the fall lay right beside him—a lovely Persian throw rug that probably had been in the hallway for decades. The bottom of it was worn smooth after years of use and the rug would take off across the floor whenever you so much as looked at it. And Bruno had hit it at the wrong angle.

I felt terrible. We should have known better. Rugs and mats are classic culprits in many falls at home and, since he wouldn't throw this one out, I decided to pick up a sheet of non-slip underlay at the hardware store.

We should have thought of it before because, when he stepped on that rug, Bruno didn't get the traction he needed. But, after spending the night in Emergency, traction was exactly what he got.





Episode Eleven

On bended knees

Pictures may be the best remembrance someone has of a wonderful period in one's life. Where those same pictures hang, however, can be the cause of irritation.

When I started spending more time over at Bruno's, he had pictures of his first wife all over his house. I'm certain she was a wonderful woman, but things between Bruno and me were getting pretty romantic, and I couldn't turn around without seeing his wife watching me from a wall somewhere. It felt weird. I confronted him about it and he agreed to store the pictures away. Or so I thought.

Two days later, I caught sight of him through the window of his backyard art studio. He was working away furiously, hammering picture hooks into the walls. It was an awkward moment. Privacy is privacy, but I wondered whether my new gentleman friend was creating some sort of shrine to his former spouse.

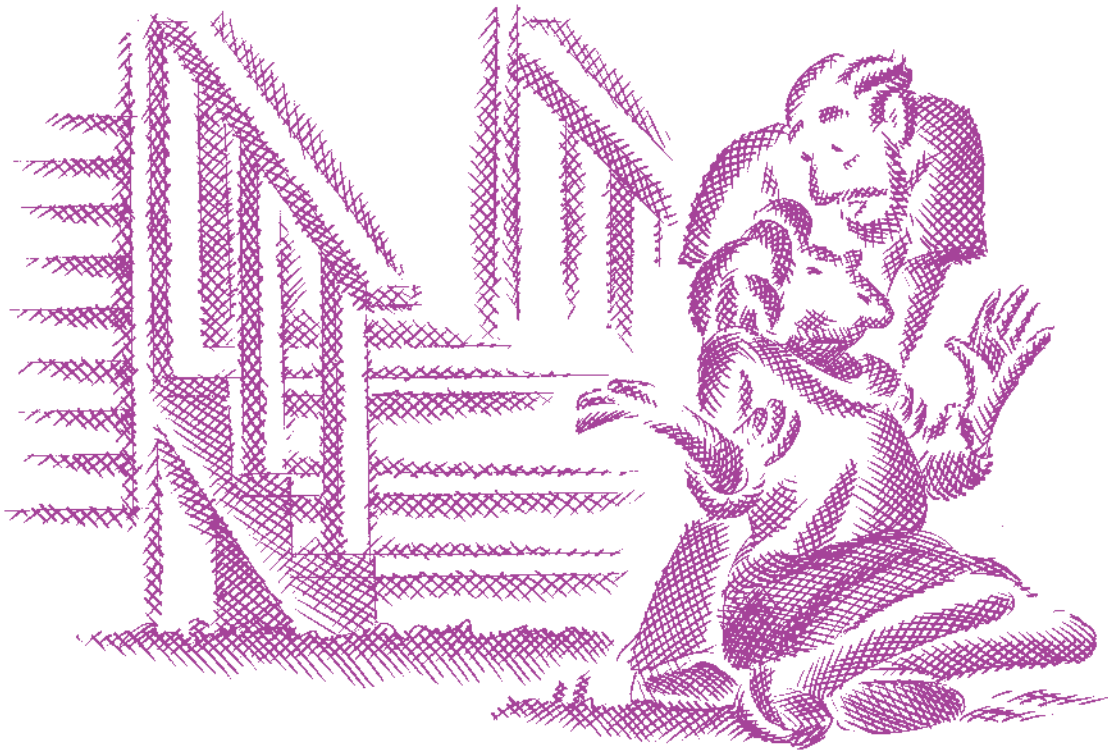
Two days later (the day before my 81st birthday), I came over and found that Bruno wasn't there. Yet the door to his workshop was wide open, banging in the wind. I headed across the yard and up the three steps to the studio to shut it for him. After all, he keeps valuable tools in there. Then, just as I was about to swing the door closed, I heard Bruno's voice in the house calling my name.

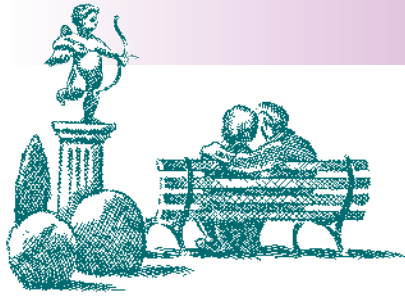
Perfectly innocent but feeling guilty, I closed the door quickly, spun on my heel and dashed down the stairs. At my age, I have learned how to manage stairs safely—hand on the rail, moving sideways one stair at a time—but there was no time for such caution now. I went into a headlong rush and, nothing to steady me, I plunged knees-first into the grass, which is precisely how Bruno found me.

Rushing up to me, he wrapped his arms around me as I sat there shaking and asked if I was all right. I said “Everything is okay. Everything is fine.” And indeed it was for, in my brief glimpse through the open studio door, I had seen exactly what Bruno was

up to—a clay sculpture, a perfect image of an older couple reading on a bench.

I had uncovered his secret—a beautiful birthday present for me. The only problem now was how to act surprised on my birthday!





Episode Twelve

You may approach the bench

I never knew how nosy Alice was until she started spending most of her days over at my place. We had agreed on a number of things around the house, including my taking down a few photos of my wife which she had found a little intimidating. That was fine with me.

I was getting pretty used to making changes with Alice around. In fact, Alice had helped me change my life for the better. It was because of Alice that I had admitted that getting older was something I had to face honestly. I had to recognize that I wasn't as young as I used to be and change the pace of my life to something more suited to my age.

The day I took down the pictures and stowed them in the basement, I kept up the momentum by rearranging all the tools in my studio. I nailed up 20 or 30 picture hooks and hung my tools where I could get at them easily.

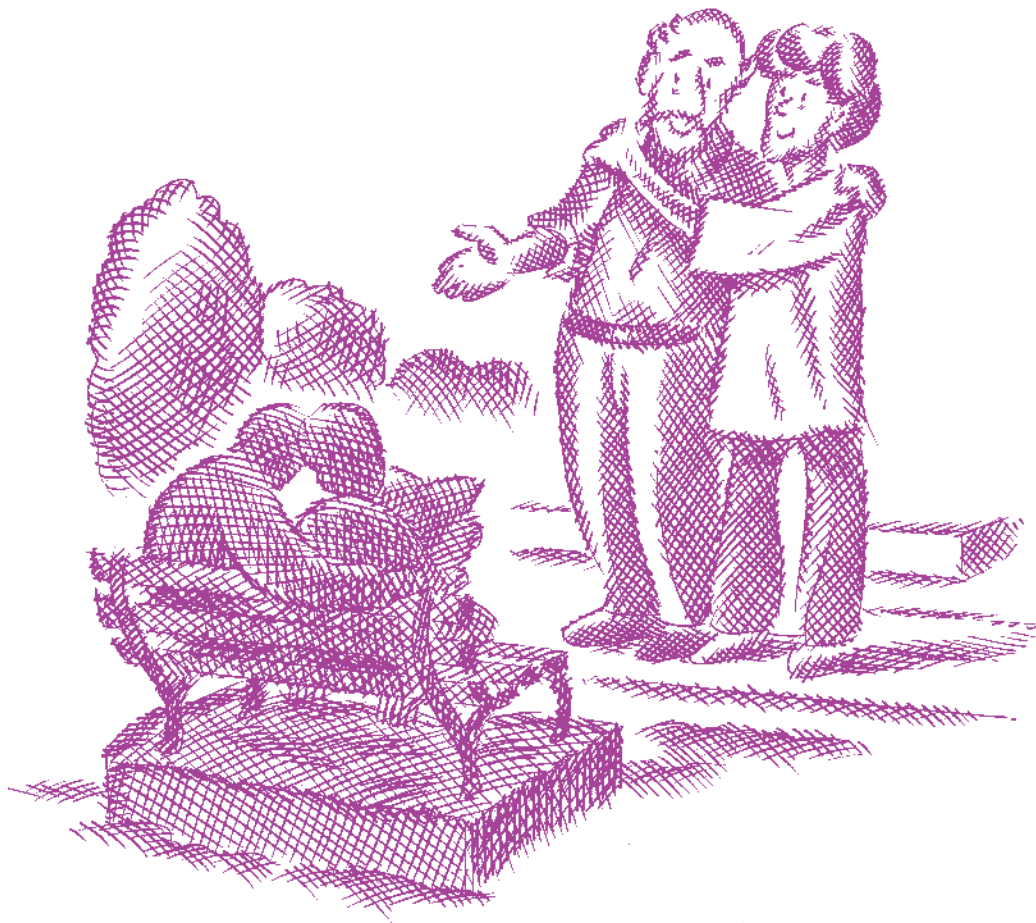
Now I didn't want Alice poking around the studio, for I had also been working for several weeks on a present for her birthday. It was going to be the best bronze I had ever done, and I wanted it to be a surprise. I guess she figured I was making something special and couldn't stand the suspense, 'cause one day I came home from the bronzing foundry to find her standing at the door of the studio. I don't know if she saw the clay model of the bronze I was working on, but it was in plain view and I can't see how she'd miss it.

Two can play at this game. I never let on I had seen her and said nothing about her present, even the next day when the men from the foundry made their delivery early in the morning. At breakfast, I told her I had something special for her. She beamed. When I handed her a giftwrapped package she smiled a wide smile—at least until she opened it. It was a set of pasta utensils. Alice won't touch pasta. She's from P.E.I. and has a fierce loyalty to spuds. She fumed.

Pretending to be hurt, I turned and walked out onto our back deck. In time, Alice came out, but I'll never know if she came out to give me an apology or a scolding. Because the first thing she saw when she arrived outside was a bronze statue, almost three feet high, of Alice and me reading on a park

bench, just like when we had first met. Now that was a birthday to remember!

And we do, fondly, each time we catch a glimpse of that lovely couple reading in our backyard.







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THE SAFE LIVING GUIDE



A guide to home safety for seniors

Canada

THE SAFE LIVING GUIDE



A guide to home safety for seniors

***To promote and protect the health of Canadians through
leadership, partnership, innovation and action in public health.***

—Public Health Agency of Canada

The Safe Living Guide—A guide to home safety for seniors

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There's no place like home... but...

There's no place like home—and sometimes it seems like there's no place safer. For seniors, however, the home is where many injuries occur, and most of these are due to falls. Changes that are part of the normal aging process, such as declining vision, hearing, sense of touch or smell and bone density can increase the risk of injury. Injuries can also be more of a problem for seniors because, as the body ages, it takes longer to heal and recover from injury.

You might think that “accidents just happen” and that nothing can really be done to prevent them. Not so. By taking some simple measures, you can considerably reduce your chances of being injured at home. It's a matter of knowing what the potential hazards are, taking precautions and making adjustments. These changes can make a big difference!

This guide provides advice on how to prevent injuries by keeping your home, yourself and your environment as safe as you can. Checklists allow you to verify and increase the safety of your surroundings and lifestyle, and real-life stories offer testimony to the value of adapting.

As the old saying goes: “An ounce of prevention is worth a pound of cure.” Inspecting your home and taking action to prevent home injuries can help you to live comfortably and safely for many years to come. We hope you will find this guide to be a practical tool to help you along the way.



The facts:

Seniors and injury in Canada

Falls cause injuries and death

Falls account for more than half of all injuries among Canadians 65 years and over. One third of community-dwelling Canadian seniors experience one fall each year and half of those will fall more than once. The likelihood of dying from a fall-related injury increases with age; among seniors, 20% of deaths related to injury can be traced back to a fall.

Hospitalization

Falls account for 34% of all injury-related hospital admissions and 85% of seniors' injury-related hospitalizations, making this the leading cause of injury-related admissions for seniors. Forty percent of seniors' falls result in hip fractures and half of those who break their hips will never recover full functioning; women sustain 75–80% of all hip fractures and one in five older adults will die within 12 months of suffering a hip fracture.

Cost of injuries

Apart from personal suffering, loss of independence and lower quality of life, the costs of seniors' injuries to the health system are enormous—approximately \$2 billion annually is spent on direct health care costs. Seniors' falls are also responsible for 40% of admissions to nursing homes.

Where injuries occur

Nearly half of all injuries among seniors occur at home. The bathroom and stairs are particularly hazardous due to the risk of slipping, tripping and stumbling.

Fear of falling

Seniors who fall may limit their activities for fear of falling again. Yet by limiting activities, they are likely to lose strength and flexibility, and increase their risk of falling again. Maintaining physical activity is essential if you wish to prevent falls and injury.

The facts:

Aging brings changes

Aging affects each individual differently. Some seniors experience physical limitations that seriously affect their level of activity while others are able to remain quite active. The natural process of growing older, however, generally includes changes in abilities. If you're experiencing some of the problems associated with the changes described below, consult your health professional and make sure you undertake whatever changes or adaptations will help you cope and compensate.

Vision

Eyes take longer to adjust from dark to light and vice versa, and become more sensitive to glare from sunlight or unshielded light bulbs. There is a decline in depth perception that can make it hard to judge distances. Perceiving contrasts and colours can also be more difficult.

Touch, smell and hearing

Sensitivity to heat, pain and pressure decreases; this may make it more difficult to detect a liquid's temperature or changes in ground or floor surfaces. Sense of smell diminishes, making it harder to smell spoiled food, leaking gas and smoke. Hearing loss can result in difficulty hearing telephones, doorbells, smoke alarms, etc.; it can also result in a decrease in balance, which can make falling more likely.

Bone density

Bones naturally become less dense and weaker with age. Bone loss (osteoporosis) among seniors can be worsened by lack of exercise and nutritional deficiencies. Bone loss can lead to painful fractures, disfigurement, lowered self-esteem and a reduction or loss of mobility.

Balance and gait

Balance is a complex function involving eyes, inner ear, muscular strength and joint flexibility. Any one of these can change as a result of aging. A general decline in equilibrium can make it more difficult to maintain or recover balance, meaning that a slip or trip can become a fall. The speed of walking, the height to which the heels are lifted, and the length of a person's stride can change with age. These changes can make it more likely for someone to experience a fall.

Memory

In general, sharp brains tend to stay sharp. Cognitive processing and memory may take a bit longer, but this is a normal effect of aging. This is why it's important to make lists and keep phone numbers handy.



Most seniors develop effective coping mechanisms as they age. Being aware of the normal changes of aging allows you to plan for home and lifestyle adaptations that will help you retain your health, quality of life and independence.

Keeping your home safe

Injuries can result from seemingly innocent things around your home—many of which are easily fixed or adapted after you do some detective work to track them down. The following checklists will help you inspect your home for evidence of trouble that may be waiting to happen. Every NO answer is a clue that your home may not be as safe as it could be and that you should be making the needed changes as soon as you can. Your safety depends on it!

Checklists:

Outside

	Yes	No
• Do all your entrances have an outdoor light?	<input type="checkbox"/>	<input type="checkbox"/>
• Do your outdoor stairs, pathways or decks have railings and provide good traction (i.e. textured surfaces)?	<input type="checkbox"/>	<input type="checkbox"/>
• Are the front steps and walkways around your house in good repair and free of clutter, snow or leaves?	<input type="checkbox"/>	<input type="checkbox"/>
• Do the doorways to your balcony or deck have a low sill or threshold?	<input type="checkbox"/>	<input type="checkbox"/>
• Can you reach your mailbox safely and easily?	<input type="checkbox"/>	<input type="checkbox"/>
• Is the number of your house clearly visible from the street and well lit at night?	<input type="checkbox"/>	<input type="checkbox"/>



If you live in a rural area and don't have a visible house number, make sure your name is on your mailbox and keep a clear description of directions to your home (main roads, landmarks, etc.) by each phone in your house.

Inside

	Yes	No
• Are all rooms and hallways in your home well lit?	<input type="checkbox"/>	<input type="checkbox"/>
• Are all throw rugs and scatter mats secured in place to keep them from slipping?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you removed scatter mats from the top of the stairs and high traffic areas?	<input type="checkbox"/>	<input type="checkbox"/>
• Are your high traffic areas clear of obstacles?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you always watch that your pets are not underfoot?	<input type="checkbox"/>	<input type="checkbox"/>
• If you use floor wax, do you use the non-skid kind?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a first aid kit and know where it is?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a list of emergency numbers near all phones?	<input type="checkbox"/>	<input type="checkbox"/>



Install a seat at the entrance of your home to remove or put on your shoes and boots.

Avoid throw rugs and scatter mats. They're dangerous!

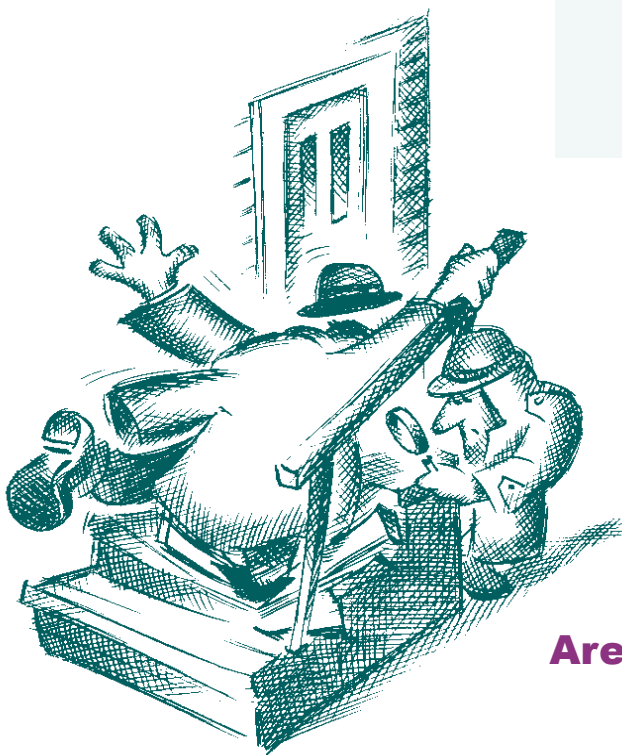
Stairs

	Yes	No
• Are your stairways well lit and do you have light switches at the top and bottom of the stairs?	<input type="checkbox"/>	<input type="checkbox"/>
• Are your stairs in good repair and free of clutter?	<input type="checkbox"/>	<input type="checkbox"/>
• Do the steps of your stairs have a non-skid surface?	<input type="checkbox"/>	<input type="checkbox"/>
• Are there solid handrails on both sides of the stairway?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you remove your reading glasses when using the stairs?	<input type="checkbox"/>	<input type="checkbox"/>



To help avoid taking a misstep, you can paint wooden or concrete steps with a strip of contrasting colour on the edge of each step or on the top and bottom steps.

Don't rush going up or down stairs. Rushing is a major cause of falls.



Are your stairs in good repair?

Fire and hazardous materials

	Yes	No
• Do you have a smoke detector on every floor of your home?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you test your smoke detector every six months?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you developed an escape route in case of fire and a fire safety plan?	<input type="checkbox"/>	<input type="checkbox"/>
• Are you registered on your apartment building's fire safety plan?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a carbon monoxide detector in your home?	<input type="checkbox"/>	<input type="checkbox"/>
• Are flammable and hazardous materials clearly labelled and properly stored?	<input type="checkbox"/>	<input type="checkbox"/>
• If you use a space heater, is it placed well away from flammable substances and materials?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you use appropriate power bars to prevent overloading electrical outlets?	<input type="checkbox"/>	<input type="checkbox"/>
• If you live in an older home, have you or an electrician inspected your wiring, fuse box, electrical cords and appliances for safety?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a fire extinguisher and know how to use it?	<input type="checkbox"/>	<input type="checkbox"/>



To remember to test your smoke detector twice a year, make a habit of testing it when you turn your clocks forward in the spring and back in the fall.

Bathroom

	Yes	No
• Do you test the water temperature before you get into the bathtub or shower?	<input type="checkbox"/>	<input type="checkbox"/>
• Is your hot water temperature set to the recommended 49°C (120°F)?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have non-slip surfaces in the tub or shower?	<input type="checkbox"/>	<input type="checkbox"/>
• Do bath mats next to the tub or shower have rubberized backing or are they secured in place to keep them from slipping?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a night light in the bathroom?	<input type="checkbox"/>	<input type="checkbox"/>
• Does your bathroom door lock have an emergency release?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have grab bars that have been properly placed and well anchored to the wall in the bathtub or shower?	<input type="checkbox"/>	<input type="checkbox"/>
• If you have any trouble getting on and off the toilet, do you have a raised toilet seat and a grab bar that is well anchored?	<input type="checkbox"/>	<input type="checkbox"/>
• If it's difficult for you to take a shower standing up, have you considered a bath seat?	<input type="checkbox"/>	<input type="checkbox"/>

Do you need a raised toilet seat?



Some tile and bath cleaning products actually increase slipperiness. Be careful when using such products.



Kitchen

	Yes	No
• Are your pots and pans, canned goods and staple foods stored in an easy-to-reach location—between knee and shoulder heights?	<input type="checkbox"/>	<input type="checkbox"/>
• Are heavy items stored in the lower cupboards and light items in the higher cupboards?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a stable step stool (with a safety rail) for reaching high places?	<input type="checkbox"/>	<input type="checkbox"/>
• Are the “off” and “on” positions on the stove dials clearly marked?	<input type="checkbox"/>	<input type="checkbox"/>
• Are your oven mitts within easy reach when you are cooking?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you make sure never to cook while wearing loose-fitting clothing or sleepwear?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a fire extinguisher in the kitchen, mounted on the wall away from the stove?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you regularly check that your fire extinguisher is in good operating order?	<input type="checkbox"/>	<input type="checkbox"/>



Use heat-resistant oven mitts rather than potholders; they provide a better grip on hot containers and give you better protection against splatters and steam. If you do experience a burn, immerse in cool water (not ice or butter!).

Are your oven mitts in a handy location?



Bedroom

- Is there a light switch near the entrance to your bedroom?
- Do you have a lamp or a light switch near your bed?
- Do you keep night lights or other sources of light on in case you get up in the middle of the night?
- Is there a clear path from your bed to the bathroom?
- Do you have a phone and a list of emergency phone numbers near your bed?

Yes **No**

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Make sure your bed is not too high or low, so that it is easy to get in and out of it.

You can purchase short bed rails to steady yourself when getting out of bed.



Is there a clear path from your bed to the bathroom?

Garage/Basement/Workroom

	Yes	No
• Are your workroom and laundry room well lit?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a telephone in the basement and a list of emergency phone numbers?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you keep floors and benches clean to reduce fire and tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>
• Are all your tools and service equipment in good condition? Are the safety locks on?	<input type="checkbox"/>	<input type="checkbox"/>
• Is your work area well ventilated, summer and winter?	<input type="checkbox"/>	<input type="checkbox"/>
• Are heavy items on lower shelves or in bottom cupboards?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you use a ladder or a stable step stool (with a safety rail) for reaching high places?	<input type="checkbox"/>	<input type="checkbox"/>
• Are all chemicals, such as bleach, cleaners and paint thinners, clearly identified?	<input type="checkbox"/>	<input type="checkbox"/>
• Are flammable materials stored as indicated by the directions on the label and away from sources of heat and flame?	<input type="checkbox"/>	<input type="checkbox"/>
• If you have a gas barbecue, is your propane tank stored outside of the house?	<input type="checkbox"/>	<input type="checkbox"/>



TIP When you use a ladder, never stand or sit on the top three rungs. Maintain your balance by keeping your body centred between the rails, not reaching to the sides and not pushing or pulling on anything.

Childproofing

(a must, for doting grandparents)

	Yes	No
• Have you removed items from your lower surfaces to prevent breakage, injury and spills?	<input type="checkbox"/>	<input type="checkbox"/>
• Child-resistant caps are not childproof. Are all medications and pill boxes stored out of the reach of children?	<input type="checkbox"/>	<input type="checkbox"/>
• Are household products and chemicals, such as cleaning products, paint, paint thinners and alcohol, stored and locked in a cupboard that is out of the reach of children?	<input type="checkbox"/>	<input type="checkbox"/>
• Are cosmetic products, such as nail polish remover, creams, mouthwash and perfumes, out of the reach of children?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you stored small objects out of the sight and reach of younger children to prevent choking?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you stored lighters, matches and candles out of the sight and reach of children?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you installed safety catches on your cupboards and medicine cabinet doors?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you purchased safety gates for stairs or unsafe rooms?	<input type="checkbox"/>	<input type="checkbox"/>
• Is there a safety latch on your stove and dishwasher?	<input type="checkbox"/>	<input type="checkbox"/>
• Are extension, telephone and venetian blind cords out of children's way?	<input type="checkbox"/>	<input type="checkbox"/>
• Are your garage and workshop locked with deadbolts installed high on the doors?	<input type="checkbox"/>	<input type="checkbox"/>



If you have a pool, or if there's one in the building where you live, exercise extreme vigilance. Make sure the pool is absolutely off-limits to children by installing safety devices on house doors leading to the pool and a very high latch on the pool fence gates. Never leave any child without supervision.



Eileen's story

When Eileen Shannon was taking care of her ailing mother-in-law, she decided to get grab bars installed in the bathroom. She also got a bath seat. She was pretty familiar with safety devices and she knew her mother-in-law needed the support in the bathroom. Now, several years later, Eileen is surprised to find herself using those same grab bars. Although Eileen is fairly healthy, she did have two unexpected bouts of illness. "I thought, I'm 69, I won't need those things. But when you get ill, and you come back from the hospital and you're weak, you're mighty glad to have that bar on the bathtub wall."

Eileen's house has other safety features that she installed and finds handy, such as improved lighting, night lights, and lever taps that are easy to turn. As she lives in a large house and her home is the place where everyone gathers for family get-togethers, she has also childproofed the rooms. When she looks ahead to the future, she sees herself remaining in this house safely for a long time to come.



Keeping yourself healthy and active

What does home safety have to do with fitness and food? Plenty! Spending time and energy on your health can provide a big pay-off. You'll not only feel better, you'll be considerably reducing your chances of having a fall or other injury.

Benefits of healthy eating

The foods you eat build and maintain your body. With age, your body continues to need essential nutrients to function correctly. Food deficiencies in seniors can cause or increase the risk of bone loss, heart disease, diabetes, arthritis, etc.—all of which increase your risk of falling. *Eating Well with Canada's Food Guide* provides general guidelines on the foods you need to maintain or improve your health. This *Guide* is available on Health Canada's Web site (www.hc-sc.gc.ca) or through 1 800 O-Canada (see page 36).

Healthy eating promotes a healthy heart, strong bones and good resistance to infection and injury. Eating poorly, skipping meals or not eating enough can cause weakness and dizziness, and increase your risk of a fall. That's also why it's so important to eat regular, well-balanced meals every day.

Checklist:

Nutrition

	Yes	No
• Have you checked out <i>Eating Well with Canada's Food Guide</i> to understand your basic nutritional needs?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you eat a variety of foods from each food group every day?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you eat a variety of fruits and vegetables?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you often choose whole grain and enriched products?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you often choose lower-fat foods and milk products?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you select leaner meats, poultry and fish, as well as dried peas, beans and lentils?	<input type="checkbox"/>	<input type="checkbox"/>
• Skipping meals can cause weakness and dizziness. Do you eat at regular times?	<input type="checkbox"/>	<input type="checkbox"/>

Benefits of active living

Remaining physically active also reduces your risk of falling by giving you more flexible joints, stronger bones and muscles, better heart and lung function, more energy, less fatigue, better sleep and less anxiety and depression. Being active includes everyday activities, such as walking, climbing stairs, gardening and shopping, as well as exercise classes and recreational activities like swimming, golfing and Tai Chi. Whatever your current physical condition, you can engage in some form of physical activity with the help of your doctor.

The Public Health Agency of Canada's *Physical Activity Tips for Older Adults* explain why physical activity is important for seniors and offer easy ways to increase your level of activity. These *Tips* are available online.

Checklist:

Physical activity

	Yes	No
• Have you checked out the <i>Physical Activity Tips for Older Adults</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you had a check-up recently and talked to your doctor about increasing your physical activity?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you make sure you have regular and appropriate physical activity that stimulates your muscles and heart?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you choose physical activity whenever you can (walk instead of taking the car, use the stairs instead of the elevator)?	<input type="checkbox"/>	<input type="checkbox"/>

There's no time like the present. Even when physical activity starts in later life, it can lead to significant improvements in your health and quality of life. Choose activities that will build your endurance, increase your flexibility and improve your strength and balance. Remember to check with your doctor first and to start slowly.

Eleanor's story

In Eleanor Mills' opinion, "it's absolutely never too late" to start exercising. When she was 68 years old, Eleanor was almost bedridden and "barely able to teeter across a room." When she was 81 years old, however, she was leading five-kilometre walks in cities across the country.

Eleanor had advanced osteoporosis, a disease in which the bones become so thin and brittle that they break easily. In time, several of her vertebrae collapsed, and three years later she suffered further fractures. "With the pain and agony and the lack of activity—because I could hardly do anything at all—I went down to 46% bone density. I really began to feel like a china cup walking around because it really is about half the strength you should have."

Eleanor knew that one of the best ways to improve her condition was to be active. She started challenging herself to walk a little bit each day. "I was in terribly bad shape," she says. "I only kept going because I knew that if you keep still, you lose more bone than ever. It goes much faster." Through exercise, good nutrition and medical treatment, Eleanor eventually increased her bone density by 20%.

A turning point came when Eleanor first tried a walker. "I simply flew along, and I said to myself, 'Gee, I could walk to Vancouver with this.'" It was Eleanor's idea to form what was called the "Boney Express," a series of walks to raise money for, and awareness of, osteoporosis.



Eleanor admits that when she first used the walker, she felt a little strange and wondered what people would think. “There are many people who have resisted getting a walker because it sort of labelled them as unable. And I did feel a little odd pushing around what seemed like an empty chair because my walker has a seat. But that is so much offset by the value of the walker that I very soon got over it. I think we should welcome all the aids we can find, and we must be proud that we can do so much more when we use them.”

One of Eleanor’s goals is to try walking for the whole day. As she puts it, “I just want to see how far I can go.”



Keeping track of your medicine

Seniors may be more prone to illness due to the weakening of the body's natural defences. It's not surprising, therefore, that many require a greater number of drugs to treat their health problems. Because seniors also tend to have more than one health problem, they may receive multiple prescriptions or they may combine prescription drugs with over-the-counter products or with natural remedies. Given that the aging body is more sensitive to the effects of many medications, the combinations can cancel the benefits of any or all medications and produce adverse reactions, such as memory loss, sleepiness, agitation and confusion. These effects have been associated with falls and other injuries.

Checklist:

Medication safety

	Yes	No
• Have you talked to your health care professional about alternatives to medication? (Medication may not always be the best solution.)	<input type="checkbox"/>	<input type="checkbox"/>
• Have you told all your doctors and your pharmacist about all of the medicine you're taking (prescription, over-the-counter or herbal) as well as your use of alcohol and/or tobacco?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you read the instructions on each of your medication containers to check for side effects or possible ill effects of combining one medication with another?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you take your medication exactly as prescribed or know of any alternative instructions should you forget to take it?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you have a list of what medications you are currently taking, and is your family aware of it?	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
• If you have medication allergies, do you wear a bracelet or necklace to show this?	<input type="checkbox"/>	<input type="checkbox"/>
• If you react to a medicine or experience side effects, do you report it to your doctor or pharmacist?	<input type="checkbox"/>	<input type="checkbox"/>
• Do you use only one pharmacy for all your prescription needs?	<input type="checkbox"/>	<input type="checkbox"/>
• Have you gone through your medicine cabinet and discarded any medicines that are past the “Best before” date?	<input type="checkbox"/>	<input type="checkbox"/>
• Whenever you get a new medicine, do you ask for and obtain all the information on its use and side effects?	<input type="checkbox"/>	<input type="checkbox"/>



Don't mix drugs and alcohol. Alcohol can react with many common medications, including tranquillizers, sleeping pills, cold or allergy medicines, high blood pressure pills and pain medication.

To inform your doctor or pharmacist about all the medications you take, put all your medications, including herbal remedies, over-the-counter and non-prescription medicines in a bag and take it to your next doctor's appointment or pharmacy visit.

If your medication causes dizziness or sleepiness, adjust your activities so you aren't at risk of falling.

Margaret's story

Margaret Deschamps believes in being on top of the medications she's taking. One of her friends suffered from an accidental overdose of medication because she'd gone to two different doctors and was prescribed two different drugs with similar ingredients. Margaret has always been careful about her medicine, and this made her even more so.

"I make sure I know everything there is to know about my medication's side effects and bad combinations. I've found out that there's one pill I take that can't be combined with grapefruit! It's really important to ask the questions. There's no reason to be afraid: you ask, and you get an answer. When you go to the drugstore, they can write everything down for you [about your medication], the side effects and all. They'll even check if you're taking medication from another doctor."

As Margaret explains, "You can often have several doctors: a general practitioner, a heart specialist, a rheumatologist, etc. And one doesn't always know what the other ones are giving you. But if you go to the same drugstore and you're prescribed something that, along with your other medication, could cause an adverse reaction or an overdose, they can let you know. They can contact the doctors, if necessary. This is a marvelous service that many drugstores offer now."



Keeping safe with safety aids

Many of the products on the market today can make your life easier, more enjoyable and safer. Many are not very expensive, and some would make nice gifts. These products can be found in hardware stores, pharmacies, medical supply stores, mail-order catalogues and other specialty stores. Also look in the Yellow Pages under “Senior Citizens’ Services and Centres,” “Hospital Equipment and Supplies,” “Medical Equipment and Supplies” and “Orthopedic Appliances.”

Useful aids

For walking

Canes can be a handy aid for walking, and these days they come in some fashionable styles too. It’s very important to make sure your cane is the right height and the rubber tips are checked every once in a while to ensure they are still in good shape. Wrist straps can be attached to your cane to prevent dropping. A clip can be put on the cane so that it will hang on the edge of a table or walker.

Cane spikes fit over the end of your cane for extra grip on an icy day. Spikes with four or five prongs are best. Many spike attachments flip up or down as needed. The spikes should be flipped up or taken off your cane when you enter a store or shopping mall, as the spike can slip on floor surfaces.

Safety soles are anti-skid detachable soles with studded treads that make walking safer in the wintertime.

The safest design is a full sole that runs the entire length of the shoe. These have to be removed when you are walking indoors, such as in a shopping mall, since they will slip on floor surfaces.



Walkers—If walking for 20 minutes without help is a problem for you, an inside or an outside walker could be worth having. With a walker, you can go further, longer and, with some models, you can even have a seat when you want to take a rest. Many models also come with a basket for carrying packages. Special tote bags, trays, and cane and oxygen holders that attach to the walker can also be purchased.

Appropriate footwear—Comfortable shoes that provide good support can help to prevent falls. Lower heels are easier on your feet and back and are more stable for walking. Elastic laces are available to make laced shoes easier to get on and off. Beware: easy-on shoes or slippers without fitting around the heel (i.e. backless) can be dangerous; shoes with smooth, slippery soles can cause you to fall; and composition soles, such as crepe soles, can stick to carpets and cause you to trip.

Bathroom aids

Ensure that you have **non-slip surfaces** in the tub or shower. There are products available, i.e. anti-slip liquids, that can be applied directly to the tub itself to create a non-slip surface.

Bath mats on the floor beside the tub should have rubberized or non-skid backing.

Bath seats allow you to take a shower sitting down. If you have trouble standing, or if you find it difficult to lower yourself into the tub, a bath seat will help you. Some models are specially designed to make it easier to get in and out of the tub.

Grab bars and poles can be installed by the bathtub or shower and beside the toilet to provide more stability and help prevent slips and falls. Grab bars must be anchored firmly into the studs in the wall. Towel racks or soap dishes should never be used for support! Floor-to-ceiling poles, securely installed, can also help to steady you while getting out of bed or while dressing.



Hand-held shower heads can make showering easier, especially if you're using a bath seat. The shower head can also be installed with two or three mounting positions, allowing it to be used by standing or seated bathers. This type of shower head is inexpensive, widely available and relatively easy to install.

Raised toilet seats (by 10 to 15 cm) can make getting on and off the toilet easier. There are many designs available—some adjustable, some portable and some with safety/hand rails.

Kitchen aids

An **automatic shut-off** is featured on many appliances, such as kettles, irons, electric frying pans, toaster ovens. The switch turns the appliance off once it has been idle for a few minutes' time, eliminating the potential risk of fire.

Large-handle utensils give you a better grip. So do L-shaped knives and heavy cutlery. Find out what's available for cooking and eating safely.

Pot stabilizers consist of a wire frame that keeps pots from spinning while you're stirring the contents. Since this item holds the pot handle in place, it can also prevent the cook or any children from accidentally knocking the pot off the stove. **Pot watchers** are small ceramic disks that are inserted in the pot to prevent boiling over. These can be purchased in most kitchen gadget stores.

Stepladders can keep you from harm. Don't risk your safety reaching for an item on your top shelves. Get someone to reach for you or use a short stepladder with a grab bar.

Reachers are very useful for those who have trouble bending or reaching high places. Many have suction cups, grips or magnets on the ends to ensure a firm grip on the object to be reached.



Vision aids

There are a number of technologies available to help you with vision loss, from sunglasses to large playing cards, and from large pad touch-tone phones to magnifying glasses. Vision rehabilitation clinics and a wide range of assistive devices are available across the country in eye care centres and through the Canadian National Institute for the Blind (CNIB).



Hearing aids

Most people report significant benefits from hearing aids—in family relationships, mental health and other areas that affect the quality of their lives. Devices, such as a hearing aid, a telephone handset with built-in volume control, and a flashing light to signal when your doorbell or telephone rings, can help to compensate for loss of hearing. Keep in mind that choosing a hearing aid is a very individual process and the right device for you depends on your preferences and the nature of your hearing problem. Ask your family doctor about regular hearing testing, and if required, consult a qualified hearing health professional for the trial and purchase of a hearing aid.

Memory aids

There are a number of ways to compensate for memory loss, such as writing down information, using pictures on containers and cupboards to label contents and putting your medications in pill organizers. Some technologies are also available, such as talking clocks and vibrating watches. Important factors in stabilizing memory with age are physical activity, a healthy diet and social activities.

Other aids

Cordless and cellular telephones can be safer because the receiver can be separated from the telephone's base, eliminating the need to run telephone cords across a room or across frequently travelled areas. You can keep the phone close at hand and don't have to run to answer it; you can sit in your favourite chair while you talk.

Medication organizers (dosettes) are compartment boxes designed to help you keep track of medications. They're available in drugstores.

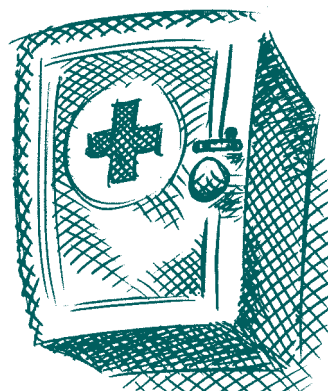
Wire/cord clips enable you to tack down electrical and telephone cords along the walls so they don't run across the floors, where they're more likely to cause you to trip. You can find these clips at most hardware stores.

Emergency response systems are communication devices that will get help for you in case of an emergency. A variety of businesses and some non-profit organizations are involved in this kind of service. The company will install the device in your home for a minimal price and then charge a monthly fee to monitor the unit. You wear a wristwatch or pendant-type of device with a call button, which you press in case of an emergency. To find out more about these devices, look in the Yellow Pages under "Medical Alarms."

First aid kits can be a godsend when there's an emergency. Make up your own first aid kit or purchase one from a reputable provider. Take note of where you keep it.

Asking for help

One of your best aids is your own voice. Don't hesitate to ask for help when you need it. Most people are delighted to be of assistance, and asking for help may well respond to your neighbours' and friends' need to be useful and to enjoy your company! All kinds of community and health services are available, for example, Meals on Wheels. Asking for help is also a way to keep safe by making your environment aware of your presence and your needs.



For more information on assistive devices, read *Go for it! A guide to choosing and using assistive devices*. To obtain this publication, see page 36.

Peter's story

Peter is a 75-year-old veteran who was severely paralyzed in a car accident. A keen volunteer, he had enjoyed working with students at his local library. After his accident, he underwent therapy but worried that he would not regain his autonomy or remain a useful member of society. His health and spirits sagged.

The therapy paid off and he was eventually able to sit and use an electric chair. From then on, Peter began to reclaim his life. "My objective was to become useful again. At first, I was very wary of trying new gadgets and aids. I felt it made me look vulnerable."

With time, Peter learned to navigate his wheelchair with art. He also learned to use the computer to write because of his weak right hand and acquired many of the bathroom and kitchen aids that facilitate his daily activities. He started to use Meals on Wheels and has become great friends with the senior who makes the deliveries.

He returned to his volunteer work when at his request, the library gladly had the three-step entrance made level and provided facilities for him to use the washroom. He now enjoys his students again and feels very much part of the community.

"I don't care who sees me using aids anymore, I just want to stay safe. And I try to get all the help I can. It feels good knowing that my neighbours know me!"



Keeping safe through adapting your home

If you're thinking of renovating, why not consider adding a few additional safety features to your home to help make it a comfortable and safer place for years to come? Should you decide to move, the increased safety and accessibility could also be selling features. Word of mouth is often the best way to find reliable tradespeople to do renovations. Ask friends and acquaintances for information, and be sure to get price quotes from at least two potential contractors. The following suggestions will give you some ideas for your renovation planning.

Useful changes

Lighting and switches

It's important to have plenty of well-positioned and well-diffused lighting. If you're having electrical work done, consider adding lighting in high traffic areas, in stairways, in closets and over the bathroom sink and kitchen work areas. Install switches at the top and bottom of your stairs. Consider installing all switches lower on the walls if someone in your household uses a wheelchair. Rocker switches are easier to use. Dimmer switches allow you to leave certain lights on low, for example, between the bedroom and bathroom.

Electrical outlets

Adding more electrical outlets will help prevent overloading or having to run electrical cords across areas where they may be in the way. Extension cords should never be used on a permanent basis since this presents a fire hazard. Power bars can help prevent short circuits and fires.

Doors

If you plan to work on or replace a door, check the height of the door sill or threshold. It should be no more than 1/2" (13 mm) high. It may be a good idea to reduce or remove the door sill because uneven surfaces can lead to a trip or a fall. You may also want to widen doorways to accommodate wheelchairs or replace doorknobs with lever handles, which are easier to use. Also, consider the advantages of sliding or swinging doors, and doors that open outward.

Stairs

The backs of stairs should be closed in. There should be firmly anchored handrails on both sides of the stairway, which extend beyond the top and bottom steps and are mounted far enough out from the wall to allow for a solid grip. In addition, the stairway should be well lit and the steps should have a non-skid surface.

Flooring

If you're replacing flooring, use non-glare, slip-resistant flooring material. A hard floor surface or tight pile carpeting is best. Consider using the same floor surface over different areas in order to eliminate uneven surfaces.

Shelving

For efficiency and convenience in your kitchen, consider adding lower level shelves, for example, between the counter top and cupboard level. Lower cupboards, sliding shelves and lazy susans in cupboard corners put kitchen items within easier reach. You may also wish to install lower shelves in your pantry and closets.

Taps, shower heads, grab bars

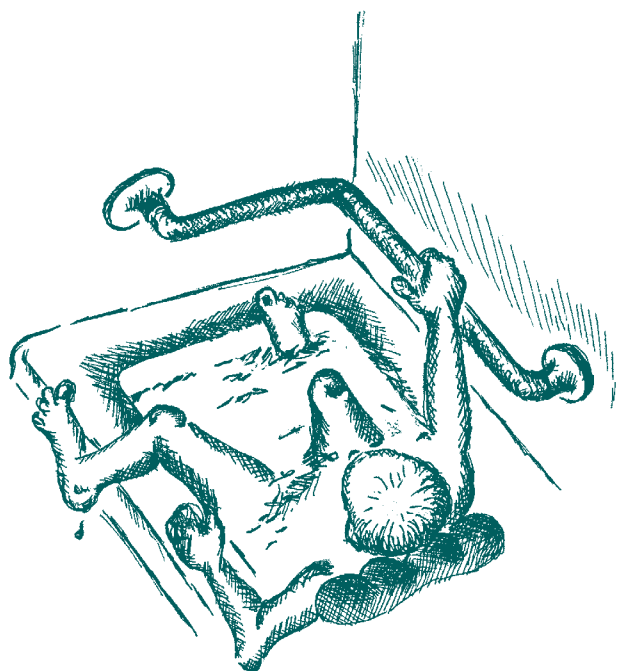
If you plan to replace your kitchen or bathroom taps, lever-type or control-arm-type faucet handles are easier to use. When you add grab bars, make sure to install them solidly on the wall studs. A hand-held shower head is easier to use when using a bath seat.

Locks and latches

Door locks in bathrooms must have an emergency release. Locks and latches should have large, easily manipulated knobs or levers. The market now has models that offer both safety and security, such as push-button or card-access locks.

Workroom

Windows and overhead lights are a must. Additional lighting should also be available over benches and stationary tools. Adequate ventilation systems are needed to vent smoke, fumes and exhaust gases. Open windows and doors may provide enough ventilation in the summer but not in the winter. The wiring must be of adequate capacity to handle lighting, heating and power tool requirements.



Stan's story

Seven years ago, when the Krzaniaks decided to have some renovations done to their home, they were thinking ahead to the future: they had a small laundry room built on the back of their three-bedroom bungalow. “When everything is on one floor, it’s like living in a condominium, really,” says Stan.

The Krzaniaks also added other safety features to the house. “We installed rails on both sides of the stairs to the basement. We have a total of six telephones in the house—if a telephone rings, you never have to run! We have smoke detectors and lots of lights. One thing we might add later on is rails along the hall, or wherever we’ve got an open wall. That’s a small thing to do.”

Stan recently suffered a heart attack. He now participates in mall walking to help recuperate. He has also started hiring people to do many of the outdoor chores he used to do himself—like shoveling snow and digging the garden. The Krzaniaks are fortunate to have the savings to spend this way. In Stan’s opinion, it’s money well spent. “I think you have to balance the benefits against the expense. If you look at the number of people who’ve fallen down with heart attacks while shoveling snow—why, it probably pays to get someone to do it.”

The Krzaniaks feel that the precautions they’re taking around the house are their way of promoting their independence for a long time to come.



You CAN prevent falls!

Falls are by far the leading cause of seniors' injuries and injury-related hospitalization in Canada. They cause pain and, for many, lead to a move from home to a care establishment. They often cost seniors their independence and quality of life. They also represent huge costs to our health system. Yet most falls incurred by seniors are preventable.

Whether you live in a house, a condo or an apartment, living safely at home requires adapting your environment, your behaviour and your lifestyle to the normal changes that age brings.

You need to make sure **your home** is safe. This may involve installing brighter lighting, moving your furniture around, uncluttering your floors, rethinking the arrangement of your storage shelves, putting in night lights or getting a good fire extinguisher.

You need to keep **yourself healthy** and active. Whatever your physical condition, it's never too late to eat well and to be more active. Consult your health professional if you're in doubt about a new diet or a new exercise program. Not only will this benefit your overall health and increase your resistance to disease, it will also help you maintain the balance and strength you need to ward off falls and serious injury at home and elsewhere.

You need to recognize that **assistive devices** and gadgets are a smart way to make your everyday life easier, independent and safe. Find out which are available and use them!

Every change you make to adapt your home and to stay healthy will help keep you from falls and injury. We hope that this guide has provided you with many suggestions that will allow you to remain safely in your own home for many years to come.

*Public Health Agency of Canada
Division of Aging and Seniors*

For more information...

To help seniors maintain and enhance their health, safety and well-being, many Canadian organizations offer information, products and services on everything from medication safety and injury prevention to home adaptation and assistive devices. A few of these organizations are listed below:

Active Living Coalition for Older Adults

Canada Mortgage and Housing Corporation

Canada Safety Council

Canadian Association of Occupational Therapists

Canadian Home Care Association

Canadian National Institute for the Blind

Canadian Physiotherapy Association

Canadian Red Cross

Consumer Product Safety Bureau

Institute for Positive Health for Seniors

Kino-Québec

Meals on Wheels

Rx&D - Canada's Research-Based Pharmaceutical Companies

Seniors Canada Online

Smartrisk

Division of Aging and Seniors (DAS) Public Health Agency of Canada

Address Locator: 1908A1

Ottawa, Ontario K1A 0K9

Tel: 613-952-7606

Fax: 613-957-9938

TDD/TTY: 1-800-267-1245

E-mail: seniors-aines@phac-aspc.gc.ca

Web site: www.publichealth.gc.ca/seniors

Other DAS publications

- *Go for it!—A guide to choosing and using assistive devices*
- *Bruno and Alice—A love story in twelve parts about seniors and safety*
- *12 steps to stair safety at home*
- *Stay safe! (poster)*
- *You CAN prevent falls!*
- *If you fall or witness a fall, do you know what to do?*
- *What to do after a fall... (poster)*

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