Fact Bank

This document provides provincial, national, and global fall-specific data and sources. Use it when creating materials to inform or promote fall prevention in your community.

Find other tools, resources and ideas for activities at https://www.fallpreventionmonth.ca

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The information provided in this document is designed to provide helpful information on the subject discussed. Any information provided in this document is believed to be reliable when posted. However, we do not guarantee or warrant the quality, accuracy, completeness, timeliness, appropriateness or suitability of the information provided. This document is updated annually but we do not own the content referenced. We recommend you check the source for ongoing updates.

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Updated: September 2022

Global Data

Global Data	Source
• Falls are the second leading cause of unintentional injury deaths worldwide. • Each year an estimated 684 000 individuals die from falls globally of which over 80% are in low- and middle-income countries. • Adults older than 60 years of age suffer the greatest number of fatal falls. • 37.3 million falls that are severe enough to require medical attention occur each year. • Prevention strategies should emphasize education, training, creating safer environments, prioritizing fall-related research and establishing effective policies to reduce risk.	World Health Organization. (2021). Fact Sheet on Falls. www.who.int/news-room/fact-sheets/detail/falls

Additional sources of data:

James, S. L., Lucchesi, L. R., Bisignano, C., Castle, C. D., Dingels, Z. V., Fox, J. T., . . . Murray, C. J. (2020). The global burden of falls: Global, regional and national estimates of morbidity and mortality from the Global Burden of Disease Study 2017. Injury Prevention. doi:10.1136/injuryprev-2019-043286

Abstract

Background: Falls can lead to severe health loss including death. Past research has shown that falls are an important cause of death and disability worldwide. The Global Burden of Disease Study 2017 (GBD 2017) provides a comprehensive assessment of morbidity and mortality from falls.

Methods Estimates for mortality, years of life lost (YLLs), incidence, prevalence, years lived with disability (YLDs) and disability-adjusted life years (DALYs) were produced for 195 countries and territories from 1990 to 2017 for all ages using the GBD 2017 framework. Distributions of the bodily injury (eg, hip fracture) were estimated using hospital records.

Results Globally, the age-standardised incidence of falls was 2238 (1990–2532) per 100 000 in 2017, representing a decline of 3.7% (7.4 to 0.3) from 1990 to 2017. Age-standardised prevalence was 5186 (4622– 5849) per 100 000 in 2017, representing a decline of 6.5% (7.6 to 5.4) from 1990 to 2017. Age-standardised mortality rate was 9.2 (8.5–9.8) per 100 000 which equated to 695 771 (644 927–741 720) deaths in 2017. Globally, falls resulted in 16 688 088 (15 101 897–17 636 830) YLLs, 19 252 699 (13 725 429–26 140 433) YLDs and 35 940 787 (30 185 695–42 903 289) DALYs across all ages. The most common injury sustained by fall victims is fracture of patella, tibia or fibula, or ankle. Globally, age-specific YLD rates increased with age.

Conclusions: This study shows that the burden of falls is substantial. Investing in further research, fall prevention strategies and access to care is critical.
Link: https://injuryprevention.bmj.com/content/injuryprev/early/2020/01/14/injuryprev-2019-043286.full.pdf

Canada-Wide Data

Older Adults

Additional sources of data:

- Parachute. (2021). Potential Lost, Potential for Change: The Cost Of Injury In Canada 2021. https://www.parachute.ca/en/professional-resource/cost-of-injury-in-canada/the-human-cost-of-injury/

Canadian Statistics (Older Adults – age 65+)	Source
• 5.8% of people aged 65+ reported having a fall injury in the past 12 months (2017-2018) • Fall related hospitalizations (FRHs) incidence rate stable at 15 FRHs per 1,000 older adults the past decade • Fall-related emergency department visits rates increased from 58 to 64 per 1,000 older adults in the past decade. • Mortality rates due to falls increased to 85 per 100,000 older adults in 2019.	Public Health Agency of Canada. (2022). Surveillance report on falls among older adults in Canada. https://www.canada.ca/en/public-health/services/publications/healthy-living/surveillance-report-falls-older-adults-canada.html
• In 2018, there were approximately 424,609 emergency department visits for fall-related injuries for individuals aged 65+. Of these, 132,112 of which were for individuals aged 85 and above. • In 2018, falls among adults aged 65+ resulted in 4,849 deaths, 94,529 hospitalizations and 28,310 disabilities. • Falls were the leading cause of injury deaths, and hospitalizations, emergency department visits and disability for individuals aged 65+ across all age groups. • Those aged 85 and older have the highest fall injury rate across all injury outcomes (deaths, hospitalizations, ED visits, disabilities).	Parachute. (2021). Potential Lost, Potential for Change: The Cost Of Injury In Canada 2021. https://www.parachute.ca/en/professional-resource/cost-of-injury-in-canada/the-human-cost-of-injury/
• Falls were the leading cause of hospitalization in every age group for unintentional injury-related hospitalizations. • Across the lifespan, the rate of hospitalization associated with falls increased sharply among those aged 65 years and over, jumping to 4 times and then 16 times as much as 45–64 year olds.	Public Health Agency of Canada. (2020). At-a-glance – Injury hospitalizations in Canada 2018/19. https://www.canada.ca/en/public-health/services/reports-publications/health-promotion-chronic-disease-

	prevention-canada-research-policy-practice/vol-40-no-9-2020/injury-hospitalizations-canada-2018-2019.html
• Falls are the leading cause of injury for older adults across Canada, accounting for over 81% of all injury-related hospitalizations. • 4 out of 5 injury hospitalizations involving seniors were because of a fall.	CIHI. (2019). Slips, trips and falls: Our newest data reveals causes of injury hospitalizations and ER visits in Canada. https://www.cihi.ca/en/slips-trips-and-falls-our-newest-data-reveals-causes-of-injury-hospitalizations-and-er-visits-in or download the Injury and Trauma Quick Stats 2020-21 (XLSX download)
• In 2019–20, Indigenous Australians were 1.4 times as likely as non-Indigenous Australians to be hospitalised due to a fall injury, after adjusting for differences in population age. The age-specific rate of falls hospitalisations was highest among the 65 and over life-stage age group for both Indigenous and non-Indigenous Australians.	Australian Institute of Health and Welfare (2022) Injuries from Falls. https://www.aihw.gov.au/reports/injury/falls

Young Children

Additional sources of data:

- Parachute. (2021). Potential Lost, Potential for Change: The Cost Of Injury In Canada 2021. https://www.parachute.ca/en/professional-resource/cost-of-injury-in-canada/the-human-cost-of-injury/
- Canadian Paediatric Society (2012). Child and youth injury prevention: A public health approach. https://cps.ca/en/documents/position/child-and-youth-injury-prevention

Canadian Statistics (Children)	Source
• Falls were the leading cause of hospitalization in every age group for unintentional injury-related hospitalizations.	Public Health Agency of Canada. (2020). At-a-glance – Injury hospitalizations in Canada 2018/19. https://www.canada.ca/en/public-health/services/reports-publications/health-promotion-chronic-disease-prevention-canada-research-policy-practice/vol-40-no-9-2020/injury-hospitalizations-canada-2018-2019.html
• While most falls in children don't cause serious injury, 5,861 children from birth to 14 years were admitted to a hospital as a result of a fall in 2018. • In 2018, falls among children from birth to 14 years resulted in 297,889 emergency department visits. • Falls are the leading cause of hospital admissions and emergency department visits from injury in those ages 0 to 14.	Parachute. (2021). Potential Lost, Potential for Change: The Cost of Iinjury in Canada 2021. www.parachute.ca/costofinjury
• More than 20,000 children are seen in emergency departments across Canada with injuries that occurred at home every year.	Parachute. (2021). Home safety. https://parachute.ca/en/injury-topic/home-safety/
• At almost 3.5 times the national average, injury accounts for 26% of deaths among First Nations, compared with 6% of deaths overall in Canada. • Hospitalization rates due to injury are also significantly higher (twice the rate) for children and youth living in areas with a high percentage of Indigenous residents compared to those living in areas with a low percentage of Indigenous residents.	Government of Canada. (2014). Developing injury indicators for First Nations and Inuit children and youth in Canada: a modified Delphi approach. https://www.canada.ca/en/public-health/services/reports-publications/health-promotion-chronic-disease-prevention-

	canada-research-policy-practice/vol-34-no-4-2014/developing-injury-indicators-first-nations-inuit-children-youth-canada-modified-delphi-approach.html

Spotlight on COVID-19 and Falls

Across the Lifespan

Canadian Statistics (All Ages)	Source
• Between March 1 and September 30, 2020, there were 95,000 fewer emergency department visits for accidental falls — a 24% decrease compared with the same period in 2019, consistent with the overall reduction in emergency department care. (pg. 4) • Compared with 2019, there were over 2,000 fewer hospitalizations for accidental falls in 2020. This represents a 4% decrease, much less than the overall decline in hospitalizations for any reason (14%). (pg. 4) • The largest decreases in both emergency department visits and hospitalizations were in April and May, which coincides with restrictions and interventions implemented across provinces and territories, such as school closures and stay-at-home orders. (pg. 5)	Canadian Institute for Health Information. (2021). Impact of COVID-19 on Accidental Falls in Canada. https://www.cihi.ca/en/impact-of-covid-19-on-accidental-falls-in-canada

Older Adults

Canadian Statistics (Older Adults 65+)	Source
• Emergency department visits for falls decreased by 19% and hospitalizations by 2% among older adults (65+). • During the pandemic, transfers from long-term care for falls decreased by 10%, and a similar decrease was observed in discharge back to long-term care at the end of the hospitalization. (pg 6) • Older age groups saw smaller decreases compared to younger age groups.	Canadian Institute for Health Information. (2021). Impact of COVID-19 on Accidental Falls in Canada. https://www.cihi.ca/en/impact-of-covid-19-on-accidental-falls-in-canada

Children and Youth

Canadian Statistics (0-19)	Source

• The greatest decrease in both emergency department visits and hospitalizations for falls was for those age 0 to 19. Emergency department visits for falls decreased by 33% and hospitalizations by 21% among this age group. (pg. 6)
• For children and youth, the large decrease in care for falls corresponded to the changes in where falls happened. (pg 7)
  ○ In particular, there was a notable reduction in ED visits for falls that took place in schools and public areas (73%), as well as in sport and athletics areas (65%). (pg 7)
  ○ Hospitalizations showed similar reductions, with the greatest decrease occurring for falls in sport and athletics areas (58%). (pg 7)
  ○ On the other hand, there was an increase in ED visits and hospitalizations for falls that occurred at home (5% and 6%, respectively), likely due to where and how people were spending their time during the pandemic.
	Canadian Institute for Health Information. (2021). Impact of COVID-19 on Accidental Falls in Canada.
	
	https://www.cihi.ca/en/impact-of-covid-19-on-accidental-falls-in-canada

Spotlight on the Cost of Falls

Older Adults

Canadian Statistics (Older Adults 65+)	Source
• Seniors falls cost $5.6 billion a year. • Seniors falls account for 54% of the total cost of falls ($10.3 billion) and 19% of the total cost of injury ($29.4 billion). • For falls among seniors, the highest total cost was for injuries to females aged 85+ ($1.6 billion). • Hospitalizations for fall-related injuries among seniors age 65+ cost $3.1 billion a year. • Injuries from falls on stairs for seniors age 65+ cost $485 million a year.	Parachute. (2021). The highest costs: Falls and transport. https://parachute.ca/en/professional-resource/cost-of-injury-in-canada/the-highest-costs-falls-and-transport/

Young Children

Canadian Statistics (Children)	Source
• Injuries from childhood falls cost the Canadian economy $996 million a year. • ED visits for childhood fall injuries cost $340 million and hospitalizations cost $49 million a year. • Falls account for 34% of the total cost of injuries among children. • Injuries among children for falls on the same level and in playgrounds have the highest costs ($178 million and $177 million), followed by falls from furniture ($125 million).	Parachute. (2021). The highest costs: Falls and transport. https://parachute.ca/en/professional-resource/cost-of-injury-in-canada/the-highest-costs-falls-and-transport/

Spotlight on Traumatic Brain Injuries (TBI) and Falls

Older Adults

Canadian Statistics (Older Adults 65+)	Source
• There are more than 11,000 emergency department visits for fall-related concussions in Canada each year. • Falls are the leading cause of TBI among older adults in Canada.	Public Health Agency of Canada. (2020) Injury In Review 2020 Edition: Spotlight on Traumatic Brain Injuries Across the Life Course. Government of Canada. https://www.canada.ca/en/public-health/services/injury-prevention/canadian-hospitals-injury-reporting-prevention-program/injury-reports/2020-spotlight-traumatic-brain-injuries-life-course.html
• Each year in Canada between 20% to 30% of seniors fall, and fall-related injuries are the leading cause of injury-related hospitalizations among seniors. • Falls are also costly to the Canadian economy. In 2010, falls cost $8.7 billion in indirect and direct costs, totalling a third of the total $26.8 billion in injury costs. Between 2010 and 2035, it has been forecasted that a 20% reduction in falls among seniors aged 65 and older could save 4,400 lives and $10.8 billion.	Pg. 108
• The location of fall-related TBI was provided for 78.2% of cases. Among these cases with known location, almost two thirds (n = 1,209; 66.2%) of TBI were sustained while falling in a private home (the patient's own home or someone else's). • Among cases where a private home's room/area was also reported (n = 826), the stairs (25.7%), bedroom (14.8%) and bathroom (14.4%) were the three most common places where falls occurred (Table 14.1 from report pg. 110).	Pg. 110
• The second most common reported location where fall-related TBI were sustained was medical or	Pg. 111

residential institutional settings (hospital, other health centre, home for the elderly or other institutional home), which accounted for 13.4% (244/1,825) of cases with reported location. Among those where the room/area was also known (n = 88), the bathroom (33%), bedroom/dorm (29.5%), and hall/foyer (11.4%), were the three most common places for falls.	
• Nearly half (47%) of the sampled falls occurred on the same level (excluding involving ice or snow) from slipping/tripping/stumbling; colliding with another person; bumping against an object; from getting on/off the toilet; or from falling on the same level without further specification of what happened. Another 18.6% of falls happened on stairs/steps including ramps or inclines, while 8.6% involved furniture. Falls on the same level involving ice or snow accounted for 6.5% of the sampled fall-related TBI.	Pg. 112

Young Children

Canadian Statistics (Children)	**Source**
• Head injuries (all types) and Traumatic Brain Injury (TBI) were most common among young children aged 2 to 9 years of age, and overall falling to the ground was the most common cause of TBI.	Pg. 90
• Falls from or out of a stroller, stroller tip-overs and stroller run-aways were the three leading mechanisms of TBI associated with strollers among children 0 to 4 years.	Pg. 99
• Falls were the leading cause of stroller-related TBI.	Pg. 101
• Schools are the third most prevalent location of injury for Canadian adolescents after sports/athletic and home settings (ages 5 to 17 years).	Pg. 103
• The majority of school based TBI were unintentional in nature (94.5%) and resulted from cases of being struck against an object, a fall, or an unintentional impact with another person.	Pg. 105

• Falls are the most frequent reason for TBI hospitalizations and Emergency Department visits among children under 5 years of age.	Pg. 133

Ontario Data

Older Adults

Additional sources of data:

- Canadian Institute of Health Information

Ontario Statistics (Older Adults 65+)*	**Source**
Older Adults (population of adults 65-74 years old in 2019: 1,445,373) • In 2019, there were 3,832 emergency department visits for injuries due to falls among adults age 65-74-year-old per 100,000 population (age-specific rate). • In 2019, there were 532 hospitalization for injuries due to falls among adults age 65-74-year-old per 100,000 population (age-specific rate).	Public Health Ontario. (2021). Public Health Ontario Snapshots- Injuries. https://www.publichealthontario.ca/en/data-and-analysis/commonly-used-products/snapshots see FPM website on PHO Snapshots for user-guide https://www.fallpreventionmonth.ca/adults/additional-resources-adults/statistics-and-infographics/public-health-ontario-snapshots
• In 2017, there were approximately 135,000 emergency department visits for fall-related injuries for individuals aged 65-79, and nearly 149,000 emergency department visits for individuals aged 80 and above.	Parachute. (2018). Ontario Injury Data Report 2018. https://parachute.ca/wp-content/uploads/2019/06/OIDR_2018.pdf

• Falls was the single highest contributor of emergency room visits and causes of injury across all age groups. (N=800,003).
• Older adults over the age of 80 (N=132,070) experienced most fall-related injuries resulting in emergency room visits.
• Across the different age groups, falls in seniors over 80 were the single highest contributor of hospitalizations
• In the five-year period between 2008-2012:
  ○ Falls contributed to the highest number of deaths across all age groups.
  ○ Older adults over 80 years of age contributed to most deaths (total for all causes).
	Parachute. (2018). Ontario Injury Data Report 2018.
	https://parachute.ca/wp-content/uploads/2019/06/OIDR_2018.pdf

○ Falls in older adults over 80 was the single highest cause of death across the different age groups.	

Young Children

Additional sources of data:

- Ontario Injury Data Report
- Canadian Institute of Health Information

Ontario Statistics (Children/Youth)*	**Source**
Children/Youth (population of children 0-19 years old in 2019: 3,109,744) ○ In 2019, there were 4,178 emergency department visits for injuries due to falls among children age 0-19-year-old per 100,000 population (age-specific rate). ○ In 2019, there were 104 hospitalization for injuries due to falls among children age 0-19-year-old per 100,000 population (age-specific rate).	Public Health Ontario. (2021). Public Health Ontario Snapshots- Injuries. https://www.publichealthontario.ca/en/data-and-analysis/commonly-used-products/snapshots

* The Ontario data found in this document may not be the most current data. More recent data is available through the Public Health Ontario Snapshot.

Quebec Data

Across the Lifespan

Additional sources of data:

- Canadian Institute of Health Information- an in depth look at the Quebec Health Care System

Quebec Statistics (All Ages)	Source
• In Quebec, falls are responsible for 3,854 deaths between 2015 and 2017, which corresponds to an average of 1,285 per year. • In Quebec, falls are responsible for 74,158 hospitalizations for the years 2017 to 2019, an average of 24,719 hospitalizations per year. They represent the main cause of hospitalizations related to unintentional trauma.	Institut National de santé publique du Québec. (2021). Répertoire des initiatives en prévention des chutes chez les aînés vivant à domicile dans le contexte de la pandémie de Covid-19. https://www.inspq.qc.ca/sites/default/files/publications/3108-intiatives-prevention-chutes-aines-domicile-covid-19.pdf (Only available in French)

Older Adults

Additional sources of data:

- Canadian Institute of Health Information- an in depth look at the Quebec Health Care System

Quebec Statistics (Older Adults 85+)	Source
• Death and hospitalization rates per 100,000 people are particularly high among older adults aged 85 and over, both among women and men.	Institut National de santé publique du Québec. (2021). Répertoire des initiatives en prévention des chutes chez les aînés vivant à domicile dans le contexte de la pandémie de Covid-19. https://www.inspq.qc.ca/sites/default/files/publications/3108-intiatives-prevention-chutes-aines-domicile-covid-19.pdf

Atlantic Canada Data

Older Adults

Note: Atlantic Canada includes, NS, PEI, NB, NL

Additional sources of data:

- New Brunswick Trauma Program
- Canadian Institute of Health Information:
  - an in depth look at the New Brunswick Health Care System
  - an in depth look at the Newfoundland and Labrador Health Care System
  - an in depth look at the Nova Scotia Health Care System
  - an in depth look at the Prince Edward Island Health Care System

Atlantic Canada Statistics (Older Adults 65+)	Source
• During 2007–2008, the age-standardized fall-related hospitalization rate for older adults was 12 per 1,000 for Newfoundland and Labrador, 13 per 1,000 for Nova Scotia and 16 per 1,000 for Prince Edward Island and New Brunswick. • During 2007-2008 in Atlantic Canada, 43% of fall-related hospitalizations among older adults involved a hip fracture. • During 2007–2008 in Atlantic Canada, approximately 60% of older adults with fall-related hospitalizations fell at home.	CIHI. (2008). Discharge Abstract Database, 2007–2008. https://secure.cihi.ca/free_products/falls_among_seniors_atlantic_canada_aib_en.pdf

Young Children

Additional sources of data:

- Child Safety Link
- 2019, Child Safety Link. Preventing serious injuries in children and youth in Atlantic Canada: A guide for decision makers.

Atlantic Canada Statistics (Children)	Source
• Falls are the leading cause of injury hospitalizations for Atlantic Canadian children and youth (not including sport-related or playground falls). • Among children 0-14 years, the most common body region injured due to a fall was the upper extremity with 46% followed by head injuries with 25% and lower	Child Safety Link. (2016). Atlantic Canada child & youth unintentional injury hospitalizations:

extremity injuries with 18%. Other body regions accounted for the remaining 11%.	10 years in review [2004-2013] Revised 2018 https://childsafetylink.ca/sites/default/files/inline-files/Atlantic-Hospitalization-Report-2018_en-Revised-March-2018%20%281%29.pdf

Alberta Data

Across the Lifespan

Additional sources of data:

- Finding Balance Alberta
- Injury Prevention Centre

Alberta Statistics (All Ages)	Source
• In 2017, falls accounted for 30% of all injury emergency department visits with 154,336 visits. • In 2017, falls accounted for 52% of all injury hospital admissions with 17,546 admissions. • In 2017, falls were the leading cause of permanent partial disability (50%) and permanent total disability (48%). • In 2017, falls accounted for 32% of the total injury costs. • Of these costs, falls accounted for 41% of the direct costs.	Injury Prevention Centre. (2020). Economic Cost of Injuries in Alberta. https://injurypreventioncentre.ca/downloads/reports/Cost%20of%20Injury%20Alberta%20May%202021%20VERSION%2014.pdf
• The average length of stay in hospital due to a fall is 3 weeks. • There was an average of 92 fall-related emergency department visits each day and 25 fall-related hospital admissions each day. • There were about 9,000 fall-related hospital admissions in 2017. • Falls cost Albertans over $290 million every year in hospital admissions and emergency department visits.	Finding Balance Alberta. (2019). Fall Facts. https://findingbalancealberta.ca/wp-content/uploads/2019-FB-Data-Infographic.pdf

Older Adults

Additional sources of data:

- Finding Balance Alberta
- Injury Prevention Centre

Alberta Statistics (Older Adults 65+)	Source
• Males 65+ accounted for 41% of all fall-related hospital admissions whereas females 65+ accounted for 59% of all fall-related hospital admissions.	Injury Prevention Centre. (2020). Economic Cost of Injuries in Alberta.

• Males 65+ had the highest number of fall-related hospital admissions with 3,497 and the highest rate with 1,434.8 admissions per 100,000 population • Females 65+ years had the highest number of fall-related hospital admissions with 7,102 and the highest rate with 2,521.6 admissions per 100,000 population. • Females 65+ had the highest rate of fall-related emergency department visits with 7,531.2 visits per 100,000 population. • Males 65+ accounted for 11% of fall-related costs but only accounted for 6% of Alberta's population. • Females 65+ accounted for 37% of fall-related costs but only accounted for 7% of Alberta's population.	https://injurypreventioncentre.ca/downloads/reports/Cost%20of%20Injury%20Alberta%20May%202021%20VERSION%2014.pdf
• Falls are the leading cause of injuries amongst older adults.	Finding Balance Alberta. (2021). Fall Facts. https://findingbalancealberta.ca/wp-content/uploads/2021_FB_Data_Infographic.pdf
• Between 2008 and 2017 the linear trends for fall-related emergency department visits of seniors (65+ yrs) increased in each zone. The province experienced a significant average increase of 1.5% each year. • The Edmonton Zone also experienced the largest increase, with a statistically significant average increase of 2.6% each year. • Between 2008 and 2017 the linear death rate trend for fall-related deaths of seniors (65+ yrs) for the province experienced an average increase of 2.0% each year. • The North zone had a significant increase of 14.3% each year.	Seniors Falls, Alberta: Injury Prevention Centre, 2020. https://injurypreventioncentre.ca/downloads/reports/Seniors%20Falls%20by%20zone%20April%208%202020.pdf
• Over 20% of injury-related visits to the emergency department among Métis members in Alberta were due to unintentional falls in 2013. • Unintentional falls were the main cause of injury-related visits to the Emergency Department among Métis people through most age groups, with a higher age specific incidence rate observed in adults aged 70 years or older. • Métis females had higher injury-related visits for unintentional falls than Métis males. • Unintentional falls were the main cause of injury-related hospital admissions in Métis Nation of Alberta (39% of all injury-related hospital admissions),	Sachez-Ramirez et al. (2013). Injuries Among Members of the Métis Nation of Alberta, 2013. https://albertametis.com/app/uploads/2018/03/Health-Report_Injuries-Report-final.pdf Infographic summary of report at: https://albertametis.com/app/

followed by motor vehicle traffic accidents (11%) and suicide and self-inflicted injuries (9%). • Incidence of unintentional falls was significantly higher in rural areas than in urban areas.	uploads/2022/05/Injuries-Inforgraphic.pdf Also article in Can J Public Health in 2019. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6964421/

Young Children

Alberta Statistics (Children)	**Source**
• Males between 0 and 4 years of age had the highest rate of fall-related emergency department visits with 6,799 visits per 100,000 population. • Females between 0 and 4 years of age had a fall-related emergency department visits rate of 5,481 visits per 100,000 population.	Injury Prevention Centre. (2020). Economic Cost of Injuries in Alberta. https://injurypreventioncentre.ca/downloads/reports/Cost%20of%20Injury%20Alberta%20May%202021%20VERSION%2014.pdf

Manitoba Data

Across the Lifespan

Manitoba Statistics (All Ages)	Source
Injury Mortality, 2018-2019: • There were 559 deaths due to injury for Manitoba residents, representing a rate of 0.41 deaths per 1,000 population. • Falls were the number one cause of injury-related deaths (30.2 per cent or 169 deaths). • The age-and sex-adjusted death rate in Northern Health Region was significantly higher than for Manitoba overall.	Manitoba Health, Seniors and Active Living. *Annual Statistics*, 2018-2019. Winnipeg, MB. Retrieved on August 16, 2022: Annual Statistics 2018-2019 (gov.mb.ca)
Injury-related hospitalizations: Falls were the leading cause of injury-related hospitalizations in Manitoba with 6,261 in-patient hospitalizations from 2020-2021 (CIHI), all ages combined. Unintentional falls, breakdown by cause: • Other/unspecified (3,162 hospitalizations) • Slipping, tripping and stumbling (1,695 hospitalizations) • Fall from one level to another (627 hospitalizations) • Fall on/from stairs and steps (524 hospitalizations) • Fall on/from ladder or scaffolding (165 hospitalizations) • Fall from, out of or through building or structure (88 hospitalizations)	Canadian Institute for Health Information. *Injury and Trauma Emergency Department and Hospitalization Statistics, 2020–2021*. Ottawa, ON: CIHI; 2022. Retrieved on August 16, 2022: injury-trauma-emergency-dept-hospitalizations-2020-2021-data-tables-en.xlsx (live.com)
• Falls accounted for 52.8% of hospitalizations related to injuries in the Winnipeg Health Region in 2016/17, and 49.6% in the province of Manitoba.	Winnipeg Regional Health Authority. (2019). Winnipeg Health Region Community Health Assessment 2019. https://wrha.mb.ca/files/cha - 2019-full-report.pdf

*Additional data source will be added in 2023:

- Government of Manitoba, Manitoba Health and Seniors Care, Information Management & Analytics, Resources and Performances, Manitoba Health, Seniors and Active Living,

Epidemiology and Surveillance. (2021). Epidemiology of Injury Hospitalizations and Deaths in Manitoba: 2010/11 – 2020/21 Fiscal Years.

British Columbia Data

Across the lifespan

Additional sources of data:

- British Columbia Injury Research and Prevention Unit
- Finding Balance BC

British Columbia Statistics (All Ages)	Source
• Falls are the leading cause of injury hospitalization in British Columbia for all ages, 2019-20. • As the top cause of injury for children ages 0-14 in 2019-20, 785 children were hospitalized at an average of hospitalization rate of 213 per 100,000 population. • BC Children's Hospital Injury-Related ER Visits for ages 0-17 show 95% injured are not admitted to hospital. • Falls were the primary cause of hospitalizations for adults 65+ with 15, 241 adults hospitilized at an average hospitalization rate of 1,785 per 100,000 population.	BC Injury Research & Prevention Unit (BCIRPU) Discharge Abstract Database, BC Ministry of Health, 2021. https://injuryresearch.bc.ca/wp-content/uploads/2021/10/Leading-Causes-of-Injury-Hospitalization-by-age-group-2019_20.pdf https://www.injuryresearch.bc.ca/idot/data-visualizations/bcch-injury-related-er-visits/

Older Adults

British Columbia Statistics (Older Adults 65+)	Source
• One in three British Columbians over the age of 65 will fall once every year. • Falls are the main reason why older adults lose their independence.	Government of British Columbia – Seniors' Fall Prevention. (n.d.) https://www2.gov.bc.ca/gov/content/health/managing-your-health/injury-prevention/seniors-fall-prevention

• In 2019-20 fiscal year, falls were the primary contributing cause for 15,241 acute hospitalizations among residents ages 65+.	Injury Data Online Tool (iDOT). (2020). BC injury research and prevention unit. https://data.injuryresearch.bc.ca/DataTools/hospitalization.aspx User Manual: https://www.injuryresearch.bc.ca/wp-content/uploads/2021/01/how-to-use-IDOT-Jan_12_2021.pdf
• In 2010, direct and indirect costs for fall-related injuries among those aged 65 and older was $485 million.	Rajabali F, Ibrahimova A, Barnett B, Pike I. (2015). Economic Burden of Injury in British Columbia. https://open.library.ubc.ca/media/download/pdf/52383/1.0397291/5
• Injury risks are consistently higher among the Indigenous populations than among the total populations of health service delivery areas in British Columbia.	George et al. (2013). The RISC research project: injury in First Nations communities in British Columbia, Canada. https://doi.org/10.3402/ijch.v72i0.21182

Northwest Territories Data

Across the lifespan

Additional sources of data:

- 2015, Influences on Quality of Life of Older Adults in the NWT

Northwest Territories Statistics (All Ages)	Source
• Various social determinants of Inuit health increase the likelihood of falls including but not limited to personal health status and conditions (e.g. poor balance and stability), personal health practices and coping skills (e.g. use of improper footwear), physical environments (e.g. housing conditions), social support networks (e.g. overcaring), and access to health services.	Frigault, J. Giles, A. (2018). Understanding Fall-Risk Factors for Inuvialuit Elders in Inuvik Northwest Territories, Canada. https://journalhosting.ucalgary.ca/index.php/arctic/article/view/67856/51716
• Fall-related death rates among those 60 to 69 years old were 6.5 times higher than the overall territorial rate. For people 70 and older, the rate was 17 times higher. • The crude rate for deaths due to falls during the 2000-2009 period was almost three times higher than the rate during the 1990-1999 period. • Unintentional falls were the leading cause of injury-related hospital admissions of all ages, at 1.6 times the rate of the next category of injury. Falls represented 28% of all injury admissions. • Falls were the most common cause for injury admission among those 0-14 years and those 45 years and older. • Falls were the leading cause of injury-related hospital admissions among all ethnic groups except for the Inuit. • Males accounted for 67% of all fall-related deaths, although the crude rates between males and females were not significantly different. • Falls within the same level (not from a height) accounted for a quarter of all fall-related deaths. However, unspecified falls where no location was documented accounted for the most deaths at 38%. • Between 2000 and 2009, the fall-related admission rates among Dene and Inuit were 38% and 31% higher than the territorial rate, respectively. Dene represented the majority of fall-related admissions at 46%. Rates among the Métis and non-aboriginal people were 31% and 34% lower than the territorial rate, respectively.	NWT Health and Social Services. (2015). Injury in the Northwest Territories, 2000-2009. https://www.hss.gov.nt.ca/sites/hss/files/injury-nwt-2000-2009.pdf