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The HOME FAST BRAZIL self-report version: translation and transcultural adaptation into Brazilian Portuguese

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Abstract

Objective: To translate and cross-culturally adapt the Home Falls and Accidents Screening Tool Self-report into Brazilian Portuguese and to correlate with the history of falls.

Methods: The translation and transcultural adaptation process followed international parameters. The Home Falls and Accidents Screening Tool Brazil Self-report, the Mini-Mental State Examination and the history of falls were applied to 10 elderly in the pre-test and to 41 in the final. Demographic and anthropometric data were also evaluated. Spearman correlation coefficient was performed.

Results: The participants considered the questionnaire easy to understand and did not report any doubts to answer the final version. There was significant correlation between: Home Falls and Accidents Screening Tool Brazil Self-report score and number of falls ($\rho = 0.31$, $p = 0.02$) and the lighting and bathroom domains with presence of falls at home ($\rho = 0.44$, $p = 0.00$ and $\rho = 0.33$, $p = 0.02$, respectively). The questionnaire indicated fall's risk scoring, $10(\pm 2)$.

Conclusion: The Home Falls and Accidents Screening Tool Brazil Self-report showed to be comprehensible and feasible tool for self-assessment of domiciliary falls risk in Brazilian older people. The scores indicated fall's risk and were associated with the history of falls.

Keywords: Aged, Accidental falls, Environmental hazards, Housing

Introduction

One of the main health risks for people aged over 65 is falling which can lead to injuries of joints, muscles, fractures and traumatic brain injuries [1, 2]. The aetiology of falling is multifactorial, including intrinsic factors such as strength, gait, balance, cognitive, psychological and extrinsic factors related to social and environmental conditions [2, 3]. The risk of falls increases according to the number of factors and the age [3]. To target falls prevention, screening tools are needed to be able to identify older people at risk of falling.

Indoor falls are generally associated with worse health conditions and involve not only environmental hazards but also intrinsic factors, such as behaviour, functionality, balance and perception of the older in face to the risks [2, 4]. Authors [5] reported these risks by pointing out that extrinsic factors such as stairs, mats, and loose flooring were more present in the residences of older people prone to falls in comparison to the homes of those were not. In addition, a study in the city of São Paulo showed that out of 29% of older people who fell in the previous 12 months, 59% fell indoors [4].

Early screening has been recommended for falls risk detection. However, easy-to-administer and cost-effective assessment tools are necessary for self-screening [1, 6]. Despite the existence of falls risk

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