There is significantly less chance that older veterans will experience posttraumatic stress disorder, anxiety, and thoughts of suicide when they resist negative age stereotypes, a new nationally representative study by the Yale School of Public Health has found.
Researchers surveyed 2,031 American veterans aged 55 and older and found that among older veterans with more positive attitudes toward aging, 2% had posttraumatic stress disorder (compared to 19% of those with more negative attitudes toward aging); 5% had suicidal thoughts (compared to 30% of those with more negative attitudes toward aging); and 4% had anxiety (compared with 35% of those with more negative attitudes toward aging).

“These results suggest that reducing the negative age stereotypes that are present in media, marketing, and everyday conversations could have mental health benefits,” said lead author Becca R. Levy (https://publichealth.yale.edu/people/becca_levy.profile), associate professor and director of the Social and Behavioral Sciences Division.

There are more than 9 million older veterans in the United States. This group is at greater risk of suicide than younger veterans and has higher rates of other psychiatric conditions. Levy said that a possible explanation for this vulnerability is that she has found negative age stereotypes can generate stress in older individuals, and others have found that stress can contribute to the onset of later-life psychiatric conditions.

The study by Levy and her coauthors appears online and is published in the journal Social Science & Medicine. It is believed to be the first study to show an association between age stereotypes and these psychiatric conditions.

Although the study focused on veterans, the findings may be generalizable to older people who have not served in the military, said the researchers. The association between resisting negative age stereotypes and lower rates of psychiatric conditions was found in veterans who had not experienced combat, as well as those who had.

The study was co-authored by Corey E. Pilver at the Yale School of Public Health and Veterans Affairs Boston Healthcare System and Robert H. Pietrzak at the Yale School of Medicine.

The research was supported by the National Institute on Aging, National Institute of Mental Health, and United States Department of Veterans Affairs National Center for Posttraumatic Stress Disorder.
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