

The Impact of Ageism on the Mental Health of Older Adults

Approved by the Board of Trustees, December 2024

Approved by the Assembly, November 2024

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Issue:

Ageism against older adults is prevalent in our society at the individual, societal, and institutional levels. Due to ageist attitudes and beliefs by society, including healthcare professionals, older adults are often seen as a burden to the healthcare system and face significant barriers in accessing and receiving appropriate standards of healthcare, including mental healthcare. Self-ageist attitudes and negative ageist experiences in older adults are associated with adverse mental health outcomes of loneliness, depression, psychological distress, and biomarkers related to Alzheimer’s disease. Mental health professionals often have ageist beliefs. These beliefs include but are not limited to a belief that depression and memory problems are a normal part of aging in older adults and a belief that psychotherapy is less beneficial in older adults. As a result, psychiatric symptoms in older adults are often misdiagnosed and mismanaged with increasing reliance on psychotropic medications instead of considering non-pharmacological interventions. Due to its impact on mental health and well-being, ageism against older adults should be opposed and addressed to improve mental health outcomes and healthy aging of our rising older adult population.

APA Position:

Ageism against older adults has adverse outcomes on their physical and mental health. Mental health professionals must be cognizant of their age-based biases, stereotypes, and discrimination, and their detrimental effects on the mental health of older adults. Public education, improving professional training in mental healthcare of older adults, and policies and laws that decrease barriers to mental healthcare are necessary to address inequities in the mental healthcare of older adults.

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