



Focus

RETHINKING
AGEISM

SPRING 2023

A publication of the Yale SCHOOL OF PUBLIC HEALTH

STUDYING ALZHEIMER'S IN SOUTHERN CHILE

As a student of public health, José Aravena Castro (below, right) is interested in how cultural and societal influences affect our brains as we age. When his professor at the University of Chile introduced him to research by Yale Professor Becca Levy that found that memory loss is not inevitable, Aravena took note. Now a doctoral student at YSPH, he is studying issues related to Alzheimer's disease and memory loss among members of an indigenous community in Chile.

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SPRING 2023

RETHINKING AGEISM

Debunking stereotypes about aging and their negative effects on older adults and society

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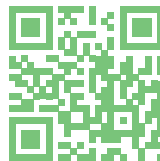
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DEAN'S MESSAGE

MELINDA PETTIGREW, PHD '99



This spring is an exciting time for the Yale School of Public Health (YSPH) community as we prepare to welcome Dr. Megan Ranney as the school's next Dean on July 1, 2023.

Dr. Ranney is deeply committed to elevating and including the voices of those for whom we work through community-driven collaborative approaches to public health challenges.

YSPH has long been a leader in aging research, amplifying the voice of the aged population. The term “ageism” was coined in 1969 as a “process of systematic stereotyping or discrimination against people because they are old.” Today, the culture has not sufficiently changed with 82 percent of older people in the U.S. encountering ageism regularly, as Professor Becca Levy has reported. The persistence of ageism has both individual and structural causes, many of which you will read about in this Spring 2023 issue of *Focus*.

Professor Levy's groundbreaking research reveals surprising insights about how the mind-body connection influences the aging process. For example, health problems that have been thought to be entirely due to aging are instead influenced by negative age beliefs. Positive age beliefs, on the other hand, can lead to better health and longer life.

You will also read about the work of several YSPH researchers who are dedicated to studying issues related to aging. Associate Professor Xi Chen, an affiliate of Yale's Alzheimer's Disease Research Center, discusses the importance of better understanding social determinants of dementia risk. Assistant Professor Chelsey Carter and Associate Professor Joan Monin will interview caregivers for persons of color who are suffering from amyotrophic lateral sclerosis (ALS). This work, funded by a new grant from

Congratulations to Professor Joan K. Monin, who has been accepted as a fellow of the American Psychosomatic Society.

the ALS Association, is important because ALS has historically been viewed and studied as a disease of older white men like Lou Gehrig, whose name has been synonymous with the disease. Dr. Monin, recently appointed as a Fellow of the American Psychosomatic Society, also led a separate study that showed that an early intervention targeted at spousal care partners not only increased their quality of life but also positively impacted their partners living with dementia. Professor Thomas Gill, director of the Yale Program on Aging, and of the Claude D. Pepper Older Americans Independence Center, defines the scope and scale of mortality after major geriatric surgery in the U.S.

Two Yale alumni, Phil Moriarty and Sam Waterston of the Class of '62, who continue to work into their 80s, joined Becca Levy for a panel discussion on “flunking retirement” during alumni weekend in 2022.

Moriarty and Waterston recently continued the discussion with us during a lively Q&A, featured in *Conversation*. And, as a special online feature profile, YSPH doctoral student José Aravena Castro conducts fieldwork studying memory loss among indigenous people in Chile.

Representing just a glimpse of the breadth of impactful research and practice achievements at YSPH, I hope that you find this *Focus* informative and inspiring.

Melinda Pettigrew, PhD '99
Interim Dean and Anna M. R. Lauder Professor of Epidemiology (Microbial Diseases)

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JOAN K. MONIN, PHD

ASSOCIATE PROFESSOR IN THE DEPARTMENT
OF SOCIAL AND BEHAVIORAL SCIENCES



Shining a Light on ALS

Amotrophic Lateral Sclerosis (ALS) once had baseball great Lou Gehrig as its namesake.

Chelsey R. Carter, assistant professor at Yale School of Public Health (Social and Behavioral Sciences) found it difficult to identify people of color who suffered from ALS when she volunteered as an assistant caregiver in ALS patients' homes as a teenager.

Although ALS affects people from all backgrounds, Carter said systemic inequities, racism, and age discrimination, including of younger people who were not thought to be at risk of ALS, have contributed to a lack of resources for those in historically marginalized groups.

The ALS Association has awarded Carter and Joan K. Monin \$50,000 in funding to study ALS. Carter aims to combine her experience as a caregiver with her training in ethnography and community-based participatory research to interview caregivers from underrepresented backgrounds to get a more nuanced picture of the disease across race, age, and geography.

Monin, associate professor of public health (Social and Behavioral Sciences), said their research has wide implications for health care, not just for those with the disease.

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XI CHEN, PHD

ASSOCIATE PROFESSOR IN THE DEPARTMENT OF HEALTH POLICY AND MANAGEMENT
AND AFFILIATE OF YALE'S ALZHEIMER'S DISEASE RESEARCH CENTER



Living with Dementia Globally

Alzheimer's disease is the most common form of dementia in older adults. Dementia is particularly prevalent in Asia, where the population is aging faster than on any other continent. For example, almost a third of Japan's population is over 65 compared to the United States, where the figure is closer to 17%.

Xi Chen, associate professor (Health Policy and Management), recently served as guest editor of a special issue of the *China CDC Weekly* that presented key messages regarding Alzheimer's disease and related dementias. "First, it is never too early in the life course to begin dementia prevention," Chen said. He added that disparities in disease burden, underdiagnosis, and

inadequate and inequitable allocation of resources for dementia care are common in both developed and developing countries.

Home-based, community-based, and institutional care account for the largest share of overall social costs dementia patients incur and will continue to increase rapidly, he said.

"Worldwide, the number of people living with dementia is rapidly increasing and is projected to triple by 2050, rising particularly in low-income and middle-income countries where around two-thirds of people with dementia currently live," he said.

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THOMAS M. GILL, MD

HUMANA FOUNDATION PROFESSOR OF MEDICINE (GERIATRICS) AND PROFESSOR OF EPIDEMIOLOGY (CHRONIC DISEASES) AND OF INVESTIGATIVE MEDICINE

*Mortality After Geriatric Surgery*

In the first study of its kind, Yale researchers found differences in mortality among subgroups of older Americans within a year of having major surgery. These differences were particularly pronounced for geriatric-specific conditions such as frailty or dementia.

Overall, nearly 1 in 7 older Americans not living in a nursing home died in the year after major surgery, including more than 1 in 4 who were frail and nearly 1 in 3 who had probable dementia.

Thomas M. Gill, the lead author of the study, is director of the Yale Program on Aging, the Claude D. Pepper Older Americans Independence Center, and the Yale Center for Disability and Disabling Disorders.

Building on previous work, Gill and Robert Becher, assistant professor of surgery, received a grant from the National Institute of Minority Health and Health Disparities to identify sources of potential disparities in outcomes after major surgery, with the goal of developing strategies and interventions to improve outcomes after surgery among older adults in the U.S. Gill and Becher are interested in compiling evidence that will allow them to intervene on modifiable risk factors, such as physical frailty, cognitive impairment, or a lack of social support, so that they can improve postsurgical outcomes, especially among disadvantaged older persons.

→ [READ MORE ONLINE](#)

JOAN K. MONIN, PHD

ASSOCIATE PROFESSOR IN THE DEPARTMENT OF SOCIAL AND BEHAVIORAL SCIENCES

*Dementia Care Partners' Well-being*

Responding to dementia symptoms can be stressful, especially for spousal partners. Living with a partner with early-stage dementia means that spouses are often the first to witness changes in their partners and to provide daily support and assistance.

But care often is lacking for the caregivers themselves. Studies have shown that spousal care partners have a greater risk of death, functional disability, and cognitive decline compared to other family care partners. And even when help arrives, it's often too late to be effective.

Joan K. Monin was the lead author of a study that may have found an answer: research that suggests that a promising early intervention targeted at spousal care partners not

only increases their quality of life but also may positively impact their partners living with dementia, according to an article about the study, "Mental Strategy Helps Dementia Care Partners' Well-being."

The intervention, known as the Wish Outcome Obstacle Plan (WOOP) strategy, which has been used in health contexts from back pain to relationship dysfunctions, has been shown to be highly effective in over 20 years of research. Its steps include identifying a feasible wish, finding a desirable outcome, recognizing the internal and controllable obstacle, and coming up with a concrete plan to overcome the obstacle.

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BECCA LEVY, PHD

PROFESSOR OF PUBLIC HEALTH (SOCIAL AND BEHAVIORAL SCIENCES) AND OF PSYCHOLOGY



BECCA LEVY & THE FIGHT AGAINST AGEISM

How a Yale professor and a leading expert on the psychology of aging is changing the way society sees old people, and how old people see themselves.

By Jane E. Dee

It's Valentine's Day, and Becca Levy has just made a quick stop at the store only to find the line stretching out the door.

"Apologies. I am running a few minutes late. Parking my car. Ok to start in 5ish minutes?" she emails. A few minutes later, Levy logs onto Zoom for our late-afternoon interview and spends the next hour patiently answering my questions.

The conversation allowed me to catch up with Levy to discuss her scientific discoveries about how positive and negative age beliefs influence how we age. Her recent book, *Breaking the Age Code*, brought her published academic research to a mainstream audience. A professor of social and behavioral sciences at Yale School of Public Health and of psychology at Yale University, Levy's groundbreaking

“...neuroplasticity, the brain’s ability to stay flexible and sprout new neural connections, which was long thought of as a hallmark of young brains, actually continues throughout the aging process. This suggests that the all too commonly accepted stereotype that the brain inevitably deteriorates as we get older is false.”

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82%

THE NUMBER OF OLDER AMERICANS THAT
REPORT ENCOUNTERING AGEISM REGULARLY

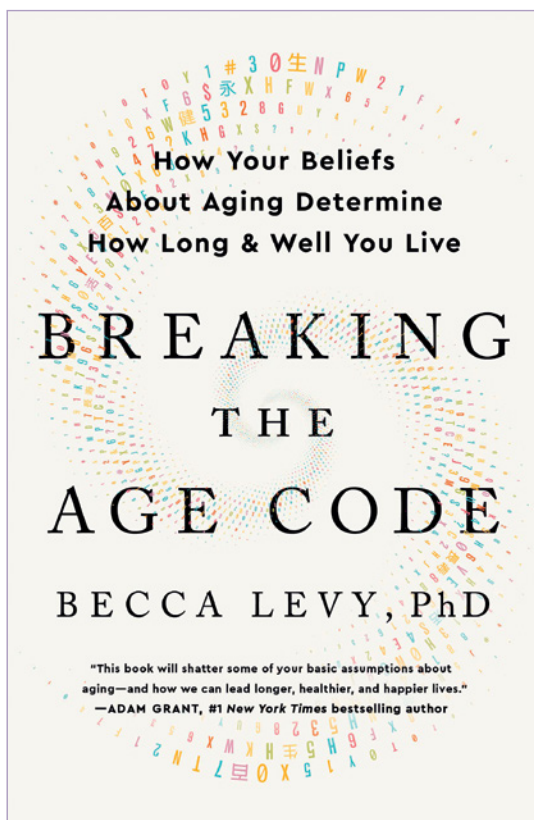
research reveals surprising insight about how the mind-body connection influences the aging process. Levy's research also has shown how the stigmatization of older people, which increased during the COVID-19 pandemic, is internalized, and activated across our life spans. Exposure to harmful stereotypes about older people comes from a wide range of societal sources, such as traditional and social media. We absorb these stereotypes without fully realizing it.

"Most of us like to consider ourselves as capable of thinking fairly accurately about other people," Levy writes in her book. "But the truth is, we are social beings who carry around unconscious social beliefs that are so deeply rooted in our minds that we don't usually realize they've got their hooks in us."

POSITIVE AGE BELIEFS

Levy's research shows how health problems that have been thought to be entirely due to aging, such as memory loss, hearing decline, and cardiovascular events, are instead influenced by negative age beliefs. Positive age beliefs, on the other hand, lead to better health and even longer life — 7.5 years on average, in fact.

While a Harvard graduate student, she received a National Science Foundation Fellowship to study why the Japanese have the longest life span in the world. Soon after she arrived in that country, she noticed that in Japan old age is treated as a time to enjoy rather than to fear and she started to wonder how culture impacts aging. She described in her book how the Japanese don't make a lot of fuss about menopause, treating it as a valued phase of life, unlike in the U.S. where it is sometimes treated like a midlife affliction. As a result, older Japanese women are less likely to experience hot flashes and other symptoms of menopause than women of the same age in the U.S.



"For better or for worse, those mental images that are the product of our cultural diets, whether it's the shows we watch, the things we read, or the jokes we laugh at, become scripts we end up acting out," Levy wrote.

One of her most remarkable discoveries is that positive age beliefs act as a buffer against developing dementia, including in people who carry the Alzheimer's gene *APOE e4*. For a new study, Levy hypothesized that older people with positive age beliefs would be more likely to recover from mild cognitive impairment compared to those with negative age beliefs. She based this hypothesis on her previous studies that found positive age beliefs were shown to reduce the stress caused by cognitive challenges, increase self-confidence about cognition, and improve cognitive performance.

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DID YOU KNOW?

The fact that so many people are getting to experience old age, and doing so in better health, is one of society's greatest achievements.

“

...structural and implicit bias, or ageism, exists toward older job applicants. A study found that when resumes are otherwise identical, employers tend to offer the job to younger applicants.

This hiring pattern occurs again and again, despite abundant research showing that older workers are usually more reliable and skilled than younger workers. Similarly, when doctors are given identical case studies of patients with the same symptoms and likelihood of recovery, these doctors tend to be far less likely to recommend treatments for the older patients compared to the younger patients.

”

25%

OF OUR HEALTH IS DUE TO GENES. THAT MEANS THREE-QUARTERS OF OUR HEALTH IS DETERMINED BY ENVIRONMENTAL FACTORS, MANY OF WHICH WE CAN CONTROL, INCLUDING AGE BELIEFS.

PHIL MORIARTY BA '62 & SAM WATERSTON BA '62



Flunking Retirement

By Jane E. Dee

Two Yale alumni, Phil Moriarty and Sam Waterston of the Class of '62, who continue to work into their 80s, joined Becca Levy for a panel discussion on “flunking retirement” during alumni weekend in 2022. Moriarty and Waterston recently continued the discussion with us during a lively Q&A, featured here. Moriarty is CEO at Moriarty/Fox, Inc., and Waterston is an Academy Award-nominated actor. We caught up with Moriarty and Waterston on Zoom to discuss issues around aging and working.

SAM: Well, I don't know what it would be like to not be working. Very fortunately, somebody's been willing to employ me right along. And so my experience today is very much like my experience 10 years ago or 20: one never knows in my business whether there's going to be another job after this one. And that's true now, and it was true before. Really, the surprise to me is that I thought that people would lose interest in employing me a long time ago. And I just think I'm very fortunate that they haven't.

PHIL: I've not not worked, including working as a student at Yale. So I've been working for a long time, too, and I would say that it is addictive, and as long as the phone rings and people want whatever services I'm offering, I'll keep going until I find I can't.

Q: In *Breaking the Age Code*, Professor Levy discusses the importance of positive models of aging: “The more we become aware of and absorb positive models of aging, the more our conscious or unconscious negative age beliefs, that we have assimilated from the ageism around us, break down,” she wrote in her book. Who are your role models?

PHIL: Well, certainly my dad, who lived to be just shy of 99. [Moriarty's father, also Phil Moriarty, was Yale's swimming and diving coach for 37 years, from 1939–1976, and coach of the United States diving team at the Rome Olympics in 1960.] He led a healthy life, an active life, but what surprised his family when he retired from Yale was that he just stopped, and then he started writing poetry. He published 10 volumes of poetry and whatever little bit of money came in from that he donated to Yale, and it was an interesting part of his life. So he retired from work-work, but kept very engaged.

SAM: Well, there are a lot of people in show business who go on working, so I suppose you could think of them as role models, but I didn't take them as role models, in fact, I didn't consciously imitate anybody in my career. My sister, who retired from teaching at 60 or 65, whatever the legal limit was, has been living in retirement ever since. She's four years older than I am, and happy as a clam. So find the path that suites you. That surely suited her and continues to suit her and like Phil's father, she's been incredibly busy as a “retired person.”

Q: How did you meet? Were you friends at Yale, or have you gotten to know each other at Yale reunions?

PHIL: We really have come to know each other through reunions and then more recently through my contact with Dick Wolf, who is somebody that Sam has worked for and continues to work for. [Dick Wolf is executive producer of *Law & Order*.]

SAM: That raises an interesting issue. It matters who you are working for in your advanced years,

DID YOU KNOW?

Participants with the most positive views of aging were living, on average, 7.5 years longer than those with the most negative views.

just as much as it matters, in the same way, when you're younger. Dick Wolf is a wonderful employer. He doesn't casually dismiss people, and I'm not the only one to have been the beneficiary of that. I started out as the assistant district attorney on the show, which is a position that Hugh Dancy is now playing, and at a certain point, Dick Wolf said, "You know, you're not going to be able to do this forever. Would you care to take over as the district attorney?" This is not your usual show business story.

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90%

THE PERCENTAGE OF CENTENARIANS WHO WERE FUNCTIONALLY INDEPENDENT IN THEIR 90S...PEOPLE WHO LIVE LONG LIVES CAN TEACH US HOW TO LIVE HEALTHY LIVES.

Opposite: Ruth (Migdal) Taber with Yale Department of Public Health Chair Ira V. Hiscock on graduation day, 1954.

RUTH TABER MPH '54



Navigating Ageism in Later Life

Throughout the world, people are living longer and ageism is on the rise. The term "ageism" was coined in 1969 by Robert Butler, founding director of the National Institute on Aging. Its simplest definition is a prejudice against older people. Some think this "ism" is a relative newcomer to society's list of prejudices, but the concept of ignoring, disparaging, or treating elders poorly goes back to ancient times.

Should we care about ageist attitudes? Unless you have dreams of immortality, everyone – barring disease, accidents, and natural disasters – will eventually be old, and our attitudes (positive and negative) matter. Yale Professor Becca Levy recently wrote a book about age beliefs, *Breaking the Age Code*; her numerous scientific studies attest to the power of attitudes (including age beliefs) to extend our life span.

When I received my degree from Yale School of Public Health in 1954, I looked forward to my role as health educator with the New York City Department of Health. I was going to spread the word about "healthy eating, preventing disease and accidents," and, generally, anything to improve the lives of my city's residents. Aging was certainly not on the agenda. You reached age 60? Good job!



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“OLDER PEOPLE ARE
HEALTHIER AND MORE
VIGOROUS THAN EVER
BEFORE, AND DISABILITY
AND DISEASE RATES ARE
GOING DOWN.”

—BECCA LEVY, PHD
BREAKING THE AGE CODE