

Ability to cope well with adversity in older age linked to lower death risk

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The ability to cope well with, and adapt to, challenging life circumstances and events in older age is linked to a lower risk of death, suggests a large nationally representative study, published in the open



access journal BMJ Mental Health.

The findings underscore the importance of efforts to bolster mental resilience, conclude the researchers.

The available evidence suggests that mental resilience is a dynamic and active process influenced by various factors, including sex, hormones, and the genes regulating the body's stress response. This capacity is believed to evolve and vary across different periods of the life cycle, say the researchers.

In <u>older age</u>, good coping skills can help offset the negative impact of long term conditions and subsequent disability. And while the ability to bounce back physically after illness and trauma is associated with slower aging and the risk of <u>death</u>, it's not clear if mental resilience might have similar effects, they explain.

To explore this further, the researchers mined the US Health and Retirement Study (HRS), a long term nationally representative study of US adults aged at least 50. This study began in 1992 and includes information on the economic, health, marital and family status of participants who are monitored every two years.

The researchers drew on two waves (2006–08) of HRS data, when questions on mental resilience were collected for the first time, and included a total of 10,569 participants with complete data in the final analysis. Their average age was 66; 59% of them were women.

Mental resilience was assessed using a validated scale encompassing qualities, such as perseverance, calmness, a sense of purpose, self-reliance and the recognition that certain experiences have to be faced alone. The average score of the entire sample was 9.18 (range 0–12).



Participants were followed up until death or the end of May 2021, whichever came first. During an average tracking period of 12 years, 3,489 people died.

An almost linear association emerged between mental resilience score and death from any cause: the higher the score, the lower was the risk of death, with this association stronger in women than in men.

Resilience scores were divided into quartiles (25%) and linked to 10-year survival probabilities. These were 61% for those in the bottom quartile (1), rising to 72% and 79% for the middle quartiles (2 and 3), and 84% for those in the top quartile (4).

Survival analysis showed that those in the highest quartile were 53% less likely to die in the next 10 years than those in the lowest.

This association remained statistically significant after adjusting for marital status, sex, race, and weight (BMI), but fell to 46% after factoring in ill health (diabetes, cancer, and cardiovascular disease) and to 38% after factoring in an unhealthy lifestyle.

In all, the risk of death was 20% lower (2nd quartile), 27% lower (3rd), and 38% lower (4th) in those with higher mental resilience scores than it was in those with the lowest scores (1st quartile), once potentially influential factors had been accounted for.

This is an observational study, and as such, no firm conclusions can be drawn about causality. And the researchers acknowledge that the potential influence of genetic and hormonal factors and childhood adversity weren't considered. The analysis also relied on baseline data, overlooking potentially influential changes during the monitoring period.

"Various factors, including but not limited to, meaning in life, positive



<u>emotions</u>, self-rated <u>health</u> and satisfaction with <u>social support</u>, have been identified as potential influences on psychological resilience," they explain.

"Triggering these positive emotions may enhance the protective effects of psychological resilience and mitigate the negative impact of accumulated adversity on <u>mental health</u> in adults."

They conclude, "The findings underscore the potential effectiveness of interventions aimed at promoting psychological <u>resilience</u> in order to mitigate mortality risks."

More information: Association between psychological resilience and all cause mortality in the Health and Retirement Study, *BMJ Mental Health* (2024). DOI: 10.1136/bmjment-2024-301064

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