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## COVID ageism as a public mental health concern

Whenever older people (aged 65 years or older) are mentioned in relation to COVID-19, it is nearly always as a risk group. The frequent portrayal of older people as vulnerable during the pandemic is, at the very least, an abridged version of the truth.<sup>1</sup> Older chronological age is indeed a risk factor for COVID infection, disease severity, and mortality. However, older people are not just a homogenous group of defenceless people in need of protection.

COVID ageism is likely to negatively affect the mental health of older adults. Many older people might fear not only the disease itself but also worry that, if infected, they might not receive adequate treatment because the medical community prioritises caring for younger people. Social isolation among older adults has long been a public health concern that will be exacerbated by warnings for all older people, regardless of health status, to isolate themselves.<sup>2</sup> Restrictions designed to shield the vulnerable might cause some older people to feel like a burden on society. Together, a thwarted sense of belonging and perceived burdensomeness are risk factors for suicidality.<sup>3</sup> Furthermore, in view of the nonchalance with which COVID-related deaths of older adults have been occasionally treated by politicians and governmental bodies, and in public discourse, older adults might minimise the importance of their mental health complaints. Therefore, there is an even greater risk that their symptoms will go undetected during the pandemic.

Over the past decades, many studies have shown that people's representations of old age turn into self-fulfilling prophecies, affecting their health, wellbeing, and even their longevity via physiological,

psychological, and behavioural mechanisms.<sup>4</sup> As a result of COVID ageism, not only older people but also younger people are at risk of internalising the representation that being older means being vulnerable, and thus experience worse trajectories of physical and particularly mental health with time. According to a 2020 meta-analysis regarding ageism,<sup>5</sup> 42 (96%) of 44 studies found evidence that being exposed to or internalising negative representations of old age influences psychiatric conditions in older adults. Furthermore, older people might internalise that other people (and not themselves) know what is best for their wellbeing. Such paternalism could negatively affect their sense of autonomy and control.

Research into COVID ageism and its short-term and long-term mental health consequences on an individual and population level is urgently needed, as well as the moderating and mediating factors that predict and explain how a particular person or group reacts to COVID ageism. Studies could, for example, capitalise on the infrastructure of ongoing longitudinal studies. Ultimately, research into COVID ageism could contribute to a differentiated discourse on ageing that encourages people to cope productively with the present crisis.

We declare no competing interests. E-MK and CEB are members of the scientific network Images of Aging: Via a Dynamic Life-span Model to New Perspectives for Research and Practice, funded by the German Research Foundation.

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