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Older Adults with a History of Psychiatric Conditions Experience More Cognitive Decline than Older Adults Without this History

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Having psychiatric conditions (such as bipolar disorder, schizophrenia, and major depressive disorder) throughout one’s life can lead to faster rates of cognitive decline as one ages. Our [recent study](#) explored associations between psychiatric history (i.e., psychiatric, emotional, or nervous problems) and cognitive functioning among U.S. White, Black, and Hispanic men and women ages 65 and older for the years 1995 to 2014. We found that a history of psychiatric problems was related to lower cognitive functioning and a faster rate of cognitive decline for all groups. In addition, Black and Hispanic men and women with psychiatric conditions had lower cognition scores and steeper rates of cognitive decline than comparable White men and women. These findings suggest Black and Hispanic older adults with a history of psychiatric conditions may be at an elevated risk of needing informal and formal support, including long-term care, due to declines in cognitive functioning.

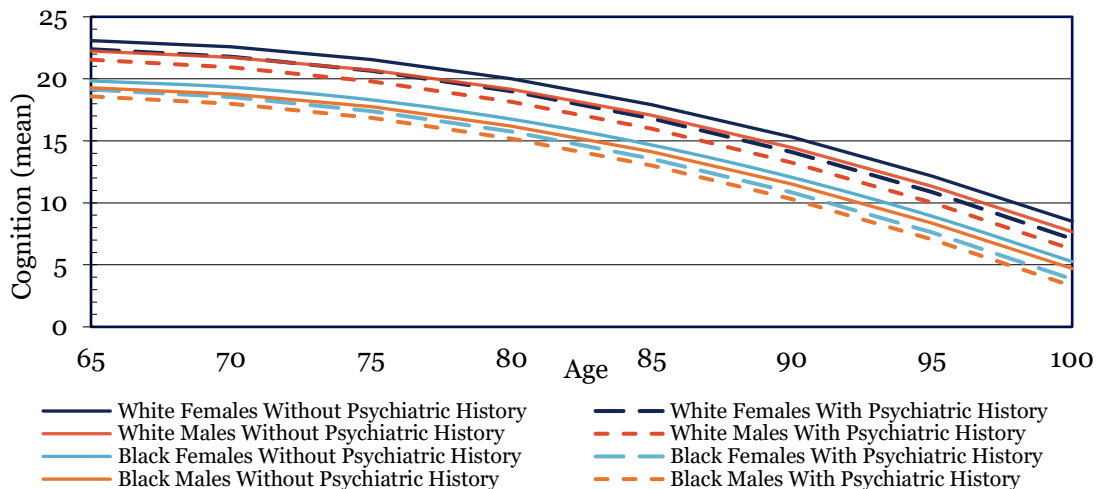


Figure 1. Predicted Cognition Scores by Age and Sex, Black Non-Hispanics, Compared to White Females

Data Source: Health and Retirement Study, 1995-2014. Results for Hispanic men and women were similar to those for Black men and women. See full results [here](#).

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