

Chapter Title: Introduction

Book Title: Ageing with Smartphones in Urban Brazil

Book Subtitle: A work in progress

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Published by: UCL Press. (2022)

Stable URL: <https://www.jstor.org/stable/j.ctv2269jd4.7>

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# Introduction

## Summary of conclusions

It is not a surprise that in a country known as the cradle of outstanding football players, like Pelé, Neymar and Marta, the expression *pendurar as chuteiras* (to hang up one's boots) is synonymous with retirement. The metaphor is convenient for addressing the role retirement plays in the experience of ageing in Bento, the middle-class neighbourhood in São Paulo city where this ethnography took place. A wise football player could choose to *pendurar as chuteiras* and end her career while she is at her peak, leaving the field on a high note, or she could stay on the pitch and watch her performance decline with age. The younger players might not have her experience, but they could make up for this by being faster and stronger. Gradually, compared with the other players, the 'legend' comes to be seen as 'old'. And thus the experienced football player ends up being considered obsolete. A celebration might be held in her honour to mark her compulsory retirement or, in the worst scenario, people might just forget her. Whatever happens, the fact is that her occupation has defined who she has been for most of her life so far. It is not easy to decide when to leave the pitch, but a former player (like anyone who has retired) can follow other avenues to reinvent herself and age with purpose and dignity. The good news is that she still feels young inside. Moreover, she is finally free from the strict training routine and has proved her value through her past conquests. She can now start the second half of the game, which is life between retirement and death.

My main argument is that retirement is not the end of working life, at least not in Bento. Instead, I argue that research participants will enter new fields in which new and old rules sit alongside each other. On the one

hand, they still live in the same work-oriented community, where inactivity is a moral failure. On the other hand, they have to comply with health and ageing policies that require them to stay productive to avoid becoming a burden to the state or society. Retirement is still, therefore, a field of duties and moral expectations. However, it is also a space for freedoms and pleasures postponed to this stage of life. Smartphones can be a game-changer in this match. As we will see, they empower older people to stay active, productive and autonomous, while at the same time finding ways to meet their desires and pursue new occupations that can provide them with a sense of usefulness, dignity and purpose. Yet this balance is not easy to achieve, and it results in multiple and diverse experiences of ageing in Bento. We can only understand this complexity through a holistic approach, and by considering how research participants manage their bodies, time, finances, health, family, friends and reputations.

Their decisions will also be influenced by local values that associate work with character. This morality reflects the essence of the city of which Bento is a part. As we will see in [chapter 2](#), the identity of São Paulo was historically built on the glorification of workers who arrived from different parts of the world and from other parts of Brazil, motivated by the promise of prosperity through hard work. Thus, inactivity, extended to retirement, is not welcomed in Bento. Even so, a whole generation did retire, and at early ages. Some based their decision on rumours of a reform to the national pension system. Others were made redundant because of ageism in the labour market.<sup>1</sup> For both, retirement was not the end of their busy lives but a problem they had to solve, as they now have to find new forms of work to fit social expectations and local moralities. Some will pursue new occupations in order to balance free time, productivity, pleasure and purpose, while some are still worried about the financial losses of retirement. Others live in limbo, as they are 'old' but neither employed nor retired. However, research participants are more likely to keep silent about these negative aspects, as I argue in the final chapter. Rather than complaining, older people in Bento use their smartphones to endorse positive images of ageing. By doing so, they contribute to the normativity of old age as 'the best age', as a time to be independent, extremely social, busy, healthy and happy.

[Chapter 3](#) addresses how this normativity brings about an awareness of the importance of taking care of oneself and remaining active. On top of their daily activities, older people in Bento prioritise physical activities, and exercises to improve their memory, cognition and autonomy. As we will see, they are more likely to approach these activities as an obligation

once they are expected to remain independent and productive for reasons other than the ones posed by health policies focused on prevention. At the same time, however, these activities provide pleasure, promote socialisation and help them to prove that they are still active even after retirement. As well as exercising, any activity can be regarded as an opportunity to develop a busy schedule. A full diary allows research participants to say 'I'm busy. I don't have time,' while enjoying the status they had while they were working. Thus, managing their social life online can become an activity in itself. They start working as content curators, sharing on WhatsApp groups the opportunities for activities aimed at the third age in Bento, which their peers value highly. In addition, as content producers they work to produce evidence that they are healthy and busy. By giving visibility to their moments of activity, they cope with global and local demands, blurring the borders between obligation and self-realisation in the third age.

These borders are more rigid when research participants prioritise care for elderly parents, children and grandchildren over the time they spend having fun with friends. As discussed in [chapter 4](#), WhatsApp brings efficiency to their family interactions, helping them to manage expectations and conflicts between generations. It also brings the extended family into their daily communication. Once restricted to annual family events, this conversation has turned into a co-presence embedded in everyday life, which is facilitated by visual resources that keep the conversation flowing. A key finding reveals that frequency is more important than content within family WhatsApp groups, as the priority is to keep the connection (and bonds) active.

WhatsApp is responsible for expanding older people's sociability in Bento, including engagement with friends, and friends of friends, whom they meet at local activities aimed at the third age. WhatsApp creates a feedback mechanism. WhatsApp groups are the place in which they share opportunities for new encounters and activities that result in the creation of new WhatsApp groups to support the activity or group in question. WhatsApp is also the app that promotes digital inclusion among older people in Bento, who are likely to look to expert assistance or ask friends for help, as children don't have the time or patience to teach them. In [chapter 5](#), I address their learning process, how they overcome their low self-esteem, and how they try other apps like Uber and Google Maps in order to gain mobility in the city, which adds to their independence and socialisation even more. However, the key finding in this chapter is that research participants combine multiple apps and strategies to bypass their lack of digital skills and get things done.

In [chapter 6](#), I observe how this ‘smartness’ is applied to seeking medical help. In preference to bespoke apps, WhatsApp is where older people in Bento share health information and receive medical guidance. Although they search for information on Google and follow specialists on YouTube, they are more likely to trust medical authorities when they have a problem. Only a few doctors in Bento share their contact details with patients. However, even when research participants have them, they reserve them for genuine emergencies. Thus, they are more likely to rely on friends, and friends of friends, who work in healthcare for guidance on everyday health issues. This assistance, mediated through WhatsApp, is informal (being based on their personal connections) and professional (the connections are with qualified people) at the same time. This arrangement is not exclusive to health, and it results in a network of favours and solidarity based on friendship and reciprocity.

Beyond WhatsApp groups and social media, smartphones are a space for intimacy. In [chapter 7](#), I look at participants’ smartphones to meet them in that private space, where they consume pornography or try apps for casual sex. Although the representation of old age as ‘the best age’ is reinforced by dating websites and apps aimed at the third age in Brazil, older people in Bento complain that their ageing bodies are not at their best. Menopause and impotence bring new challenges to their sexuality, resulting in possible mismatches, as men are likely to search for younger women. Among married people, some have lost their admiration of and desire for their long-time partners, while others focus on partnership, accepting a decline in sexual life. This chapter explores possible happy endings that go beyond penetration (the matches and marriages observed were all heterosexual).

But what would be a happy ending from a broader perspective? [Chapter 8](#) tries to understand the purpose of life, which is replaced, in Bento, by the desire to live in the present with purpose. Some might retire. Yet they still live in a society in which work is seen as a virtue, providing integrity, dignity and citizenship. Consequently, research participants try to find ways to return to work and re-establish the professional credentials they lost, and achieve a sense of belonging. Entrepreneurship, self-development and volunteering are alternative forms of work chosen by them, with the advantage that these activities allow them to work for themselves, rather than others, which is a frequently expressed desire after retirement. Working for and on themselves enables them to meet their own needs and expand their possibilities in old age as a kind of activism, building a legacy for the next generations of older people in Bento.

However, before settling down in Bento, I propose a quick zoom out, so that you can understand the big picture that reveals Brazil as an ageing nation and São Paulo as a city historically associated with work. After this brief contextualisation, I introduce Bento and the methodology used in this project.

## Welcome to Brazil

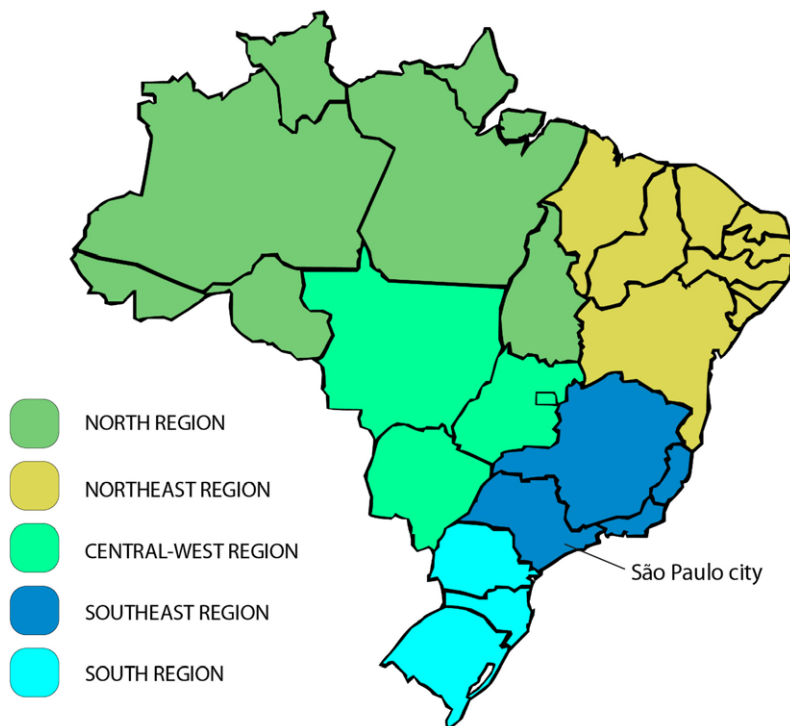
Brazil is a democratic federal republic of 26 states and a federal district. Located in South America, its official language is Portuguese, inherited from Portuguese colonisation. Brazil is the world's fifth-largest country by area<sup>2</sup> and the sixth most populous,<sup>3</sup> with a population of around 211,755,692 inhabitants in 2020.<sup>4</sup> To understand where this ethnography took place, we first must account for the *demographic changes* that have turned Brazil into an ageing nation. Following that, we should address its impacts on *inequality* and *diversity* as experienced in the country. According to the Instituto Brasileiro de Geografia e Estatística (IBGE; Brazilian institute of geography and statistics),<sup>5</sup> by 2060 25.5 per cent of Brazilians will be over 65, representing 58.2 million people. The ageing population brings new challenges to public resources and finances, especially regarding healthcare and pension systems.

As in other developing countries, ageing results in an epidemiological transition in which morbidity caused by infectious and transmissible diseases is replaced by or overlaps with non-transmissible chronic diseases related to the later stages of life.<sup>6</sup> In Brazil, this shift means that the already overstretched Sistema Único de Saúde (SUS; public health system),<sup>7</sup> which provides unlimited healthcare assistance to all Brazilian citizens<sup>8</sup> at no cost, becomes subject to even greater demand. As a consequence, health and ageing policies in the country start to focus on prevention and individual autonomy. The anthropologist Guita Grin Debert called this process the 're-privatisation of ageing', as the primary responsibility for older people is placed on the family and on older people themselves.<sup>9</sup> The role played by the state and society in ageing policies<sup>10</sup> was mainly redefined by the National Policy for the Elderly implemented in 1996,<sup>11</sup> by the Brazilian Statute for Elderly People<sup>12</sup> in 2003 and by the WHO's Active Ageing framework.<sup>13</sup> The latter was then incorporated into the National Health Policy for Elderly Persons in 2006.<sup>14</sup> As the WHO's guidelines suggest, states and societies should develop opportunities to 'keep, recover and promote the autonomy and independence of older people'.<sup>15</sup> Consequently, as I argue throughout this book, research

participants are not supposed to become a burden on any of these institutions, including their families.

The expectation surrounding the extension of autonomy into old age is expanded to financial autonomy, as older people are the age group targeted as responsible for the deficit experienced by the Instituto Nacional do Seguro Social (INSS; national institute for social security).<sup>16</sup> The dependency ratio in the country was 44 per cent in 2018 and is projected to be 51.5 per cent in 2039.<sup>17</sup> Considering only the proportion of old-age dependants (people aged 65 and over) per 100 persons of working age, 20–64, Brazil is predicted to have the fourth-highest old-age dependency ratio (OADR) in Latin America by 2030, behind Uruguay, Chile and Argentina. However, the Brazilian OADR is predicted to be the second in growth (compared with 2019), just behind Chile.<sup>18</sup> Since the 1980s, projections like these have frequently been discussed in the media,<sup>19</sup> helping to cast ageing as an economic problem and a burden to society. The need to balance the effect of the old-age dependency ratio on finances resulted in a reform to the Brazilian pension system in 2019. A new pension scheme was approved, establishing a minimum age for retirement (statutory retirement age). Before that, Brazilians could retire if they had contributed to the pension system for enough years. On the other hand, in 2018, older people provided 69.8 per cent of the income in Brazilian households that had at least one resident aged 60 or above (33.9 per cent of the households in the country). The state pension represented 56.3 per cent of older people's incomes.<sup>20</sup> These pensions can provide a certain stability during recessionary years.<sup>21</sup> However, they can also result in different experiences of ageing, depending on how many people rely on retired people and other factors such as house ownership or additional incomes. As we will see, retirement is just another arena for inequality in Brazil.

The country is one of the most unequal in the world when it comes to income distribution. In 2019,<sup>22</sup> half of the Brazilian population received 15.6 per cent of the total income. The 10 per cent of the population with the lowest incomes received 0.8 per cent of the total income. At the opposite end of the spectrum, the 10 per cent of the population with the highest incomes received 42.9 per cent of the total income. These inequalities should also be considered within the frame of the macro-regions of Brazil. For example, in the same year, the *per capita* household income in the Southeast and the South was almost twice that in the North and the Northeast.<sup>23</sup> This imbalance means Brazil can be a very different country, depending on where one lives and ages. And it is not just about income. Even considering basic infrastructure, we can see the contrast between the country's best and worst conditions. The population living in households



**Figure 1.1** Map of Brazil showing regions and states. Brazil Map © Pixabay. Graphic © Marília Duque.

that has a public water supply is 92.1 per cent in the Southeast and 58.3 per cent in the North. In comparison, the proportion that has sanitary sewers is 88.3 per cent and 26.1 per cent respectively.<sup>24</sup> Those numbers highlight that this book is not about Brazil but about São Paulo, a city in the Southeast of Brazil that is the capital of the federal state (also called São Paulo) with the highest gross domestic product (GDP) in the country (figure 1.1).<sup>25</sup>

Inequality in Brazil is a consequence of multiple historical processes<sup>26</sup> that also brought about its cultural diversity. Besides being colonised by the Portuguese, over the course of more than three centuries, Brazil received 4.9 million enslaved Africans.<sup>27</sup> It was the main destination for slaves in the New World.<sup>28</sup> The end of slavery in Brazil, in 1888, was followed by the arrival of immigrants who came to work on the coffee plantations and later in industry. By the 1890s, 3.8 million immigrants were living in Brazil. Portuguese, Spanish, Italian and Japanese were the ones in the most significant numbers.<sup>29</sup> By 1930, the country had received immigrants from more than 60 countries.<sup>30</sup> Their destinations influenced the multiple and



diverse cultural backgrounds observed across Brazil. São Paulo received a massive number of these immigrants. Between 1872 and 1914, for example, the city population rose from 23,000 to 400,000.<sup>31</sup> As we will see in the next section, this fast growth resulted in a plurality of cultures in the city and the consolidation of São Paulo as a work-oriented society.

But first, to understand what this plurality means and its consequences for the experience of ageing addressed in this book, the reader should consider two things. The first is the image that many foreigners hold of the country as a tropical paradise where festive Brazilians celebrate Carnival or enjoy life on picture-perfect beaches.<sup>32</sup> This imaginary is not representative of São Paulo. The second is the idea that work is experienced as a kind of punishment in Brazil, something the anthropologist DaMatta<sup>33</sup> attributed to the Roman Catholic foundation of the country in opposition to the Calvinist tradition that would have transformed work into salvation. In addition, he argues, there is no glorification of the figure of the Brazilian worker, and no belief that it is possible to prosper or achieve dignity through honest work. It is true that DaMatta's work was done before Protestantism became widespread in the country. As a Pew Study shows,<sup>34</sup> one in five Brazilians is a former Catholic, while 54 per cent of current Protestants say they were raised Catholic. Even so, São Paulo never fitted DaMatta's description. Instead, the city was historically built as a place where people succeed and where work can show character and provide citizenship. That is the image that Brazilians share when they think about São Paulo<sup>35</sup> and it is also the imaginary that bonds research participants together.

## A citizen of São Paulo

The identity of São Paulo as a place for work was built on the figure of the *Bandeirantes*, the romanticised heroic conquerors responsible for expanding Brazilian territories in colonial times.<sup>36</sup> At first, the local elite linked to the coffee culture used this imaginary to distinguish them as real *paulistas* (born in São Paulo) and highlight their ancestral vocation to entrepreneurship and hard work. Later, the *Bandeirantes* were replaced by the *Bandeirantes'* spirit, or *espírito das Bandeiras* ('spirit of the flags'). This shift was an effort to unify the multiple waves of migrants living in the city and ideologically consolidate the old and new *paulistas* as the labour force that would lead Brazil to industrialisation, development and progress.<sup>37</sup> Some of these 'new *paulistas*' were, as mentioned earlier, immigrants. However, in 1941, a new internal flow started, now

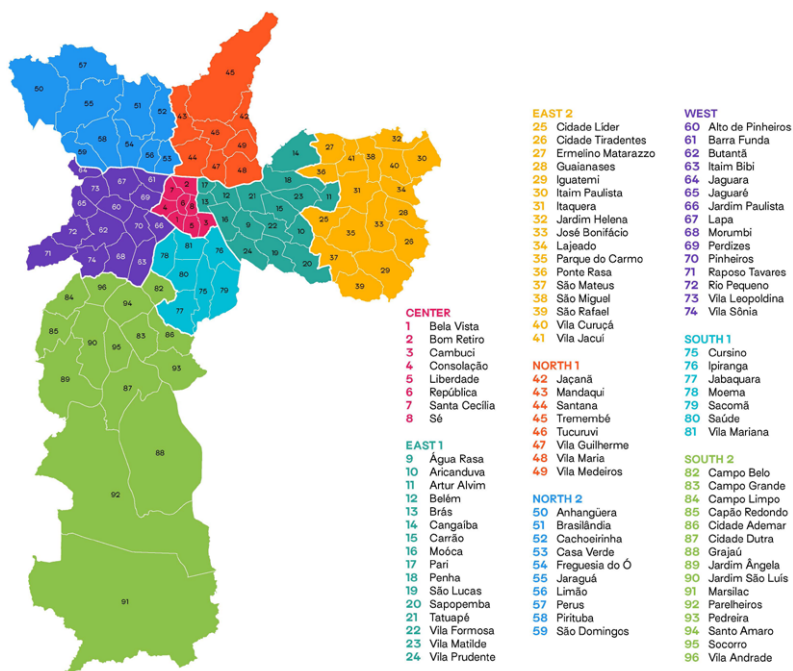


**Figure 1.2** The ‘Monumento às Bandeiras’ (monument to the flags) celebrates the 400th anniversary of São Paulo. One of the icons of the city, the monument is a tribute to the workers of São Paulo. © Marflia Duque.

comprised of Brazilians who moved to the city to pursue the same opportunities for work and prosperity as the foreigners before them. During the 1960s, 128,000 Brazilians arrived in São Paulo per year.<sup>38</sup>

The 400th anniversary of the city, in 1954, can be seen as a mark of the unification of São Paulo as a work-oriented society. The ‘Monumento às Bandeiras’ (monument to the flags; see [figure 1.2](#)) embodies the old and new *paulistas* as the dauntless workers who made São Paulo the economic power of the country.<sup>39</sup> At this time, São Paulo had already become the biggest city in Brazil, responsible for 30 per cent of the industrial production in the country. The exaltation of work and workers was also expressed in advertisements and articles published in the local newspapers to honour the city’s anniversary. As Moura<sup>40</sup> noted, work was the element that bonded people while they fully experienced the status of being a citizen of São Paulo.

Nowadays, with a population of just over 12 million, São Paulo is the most populous city in Brazil<sup>41</sup> and the fourth-largest urban agglomeration in the world, behind Tokyo, New Delhi and Shanghai.<sup>42</sup> São Paulo is a hub for business and one of the largest centres of innovation in Latin America. The city is planning to become a smart city<sup>43</sup> as well as an age-friendly city.<sup>44</sup> It has already been designated a pet-friendly<sup>45</sup> city and a gay-friendly<sup>46</sup> city, and has the status of being the cultural capital of Latin America. The



**Figure 1.3** Map of the 96 districts in São Paulo city. © Rede Nossa São Paulo. Mapa da Desigualdade 2020.

number of museums in the city rivals Milan's, for example.<sup>47</sup> However, São Paulo is not a golden land for everybody. The inequalities observed in Brazil are reproduced in the 96 districts of the city (figure 1.3).

São Paulo provides very different experiences depending on which district one lives in. Among them, the number of households in *favelas* varies from 0 to 69.5 per cent.<sup>48</sup> The waiting time for a primary care consultation in the SUS can be from 5 to 43 days,<sup>49</sup> while proximity to public transport<sup>50</sup> is available to 0 to 88 per cent of the population in the districts with the worst and best rates. Contrasts like these are also observed in access to sports, culture and leisure.<sup>51</sup> Inequalities also impact the quality of life in old age. In 2018, there were 1.73 million people aged 60 or over in São Paulo, that is, 14.7 per cent of the population. In 2030, this age group will comprise 20 per cent. The inequalities between districts and between ageing experiences in the city can be illustrated by income and age at death. At the extremes, the income of older people can vary by a multiple of 20 and the age at death varies by 23.2 years.<sup>52</sup> The following section will focus on Bento, the site where this ethnography took place, which is one of the most privileged districts in which to age in São Paulo.

## Age-friendly Bento

Bento is the fictional name given to a neighbourhood in an upper-middle-class district in São Paulo city. In 2019, the proportion of residents aged 60 and over in the district was 25.1 per cent, and the number of people aged 60 and over for every 100 people younger than 15 years old was 195.2 (both higher than the average in São Paulo).<sup>53</sup> The district has the second-best indices of income, life expectancy and education according to São Paulo's Human Development Index.<sup>54</sup> As for São Paulo as a whole, work and migration define Bento's identity. Historically, the area developed around the municipal slaughterhouse built in the area in 1887.<sup>55</sup> The area became the destination for many Italian and Japanese immigrants, who came to work also in industry and commerce, both of which were flourishing at the time.<sup>56</sup> The development of the Medical School of São Paulo,<sup>57</sup> founded in 1933, is another milestone that helps us understand Bento's particularities. Nowadays, the Medical School occupies many houses in the neighbourhood, which has turned the area into a hub for health services across both public and private sectors. Consequently, the concentration of hospitals and clinics, including low-cost clinics, results in a distinct flow of people to the area, who come and go every day for medical purposes.

Living in Bento means combining all the facilities of a big city like São Paulo with the atmosphere of a small neighbourhood. Single houses are now side by side with some apartment buildings (see [figure 1.4](#)). There are plenty of trees and birds, and local amenities such as grocery shops (see [figure 1.5](#)) whose owners know the history of the families in the area and why there are so many abandoned properties nearby. One of these owners explains that these properties were inherited by children living abroad or too busy to manage their parents' house sales.

Even so, the neighbourhood is going through a gentrification process, with organic bakeries and fancy restaurants opening gradually. Two big grocery shops opened in 2018 and 2019 (see [figure 1.6](#)), but the old ones are still there, as is the traditional supermarket. The latter is more like a convenience store on three floors, selling everything from food to clothes. On one of the higher floors, there is a restaurant where older people can have a good and affordable lunch after doing their morning activities. Despite its central location, the price also matters, as most of the research participants make adjustments in their finances after retirement. Thus, even within an upper-middle-class district, they are likely to perceive Bento as a middle-class neighbourhood. Shopping locally is also part of



**Figure 1.4** Houses and buildings juxtaposed in Bento. © Marília Duque.

their routine. As old customers, they are greeted by name in the traditional grocery shops and supermarkets. It is common to see them carrying their bags on the streets and, if they bump into a neighbour or a colleague from one of the activities and courses that they regularly go to, they will probably stop for a chat. Although it doesn't stop them from walking a lot, research participants periodically complain about the local pavements. Just recently, these were redesigned and now include access for those with disabilities. However, this was not a coincidence.



**Figure 1.5** The oldest grocery shop in Bento, where the owner may recount the histories of the neighbourhood. © Marilia Duque.

Bento has also been chosen for the roll-out of a pilot project that aims to implement age-friendly neighbourhoods in São Paulo (see [figure 1.7](#)).<sup>58</sup> The project was developed in partnership with the Medical School, which also maintains an Ageing Studies Sector in Bento, where residents older than 60 can access an outpatient service. The unit also offers activities and courses focused on prevention, and contributes to ongoing studies of ageing. A consequence of its proximity to the Medical School is that many students and doctors live in the area. A local paper noticed this



**Figure 1.6** A modern grocery shop in Bento. © Marília Duque.



**Figure 1.7** An outdoor gym in a public square in Bento. © Marília Duque.

particularity. ‘Who doesn’t have a neighbour dressed in a white coat?’ was a question raised in one article.<sup>59</sup>

The region is well served by public transport, including two underground railway lines and a bus station, handy for research participants, who are more likely to use public transport after retirement. The availability of public transport also increases the flow of people from many areas of São Paulo to receive medical treatment during the week, as mentioned above (see figures 1.8 and 1.9). Most hospitals and clinics are concentrated in two streets, where it is common to see many people going up and down, carrying envelopes containing their medical tests and images. Most of them arrive there via the oldest underground station or the bus station, which are directly connected to a shopping centre (see figures 1.10 and 1.11). Together with the giant Catholic church on the other side of the street, this centre can be considered the heart of my fieldsite (see figure 1.12).

The area offers many courses aimed at the third age. In addition, there are plenty of museums, parks and institutes providing a vast portfolio of activities aligned with the Active Ageing framework. Even public hospitals in the area offer special programmes for this purpose. One of them, created in 2002, offers exercise, choir, dance classes, and English, French and Spanish language courses, among other activities. Because of that, Bento



**Figure 1.8** Entrance to one of the public hospitals in Bento.  
© Marília Duque.

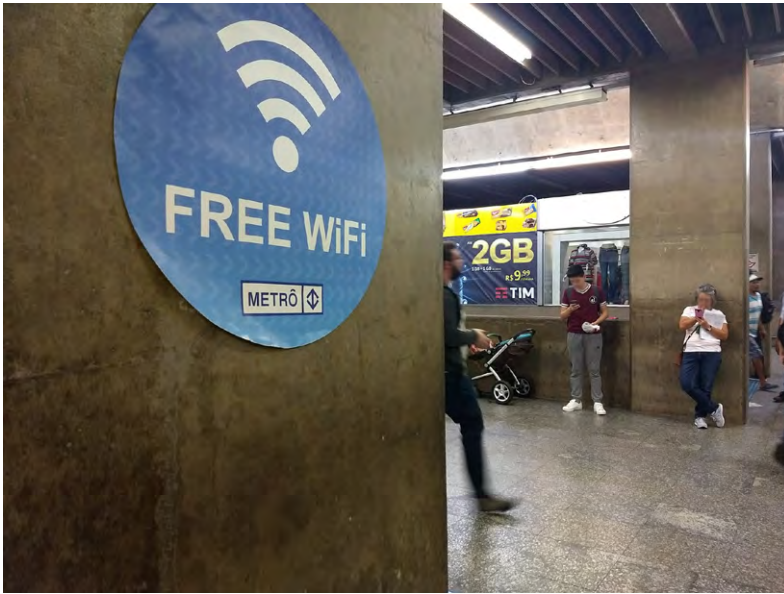




**Figure 1.9** The waiting room of one of the public hospitals in Bento. © Marília Duque.



**Figure 1.10** Entrance to the shopping centre. The stairs lead to the underground railway and the bus station. © Marília Duque.



**Figure 1.11** An underground station in Bento. © Marília Duque.



**Figure 1.12** The main street in Bento, with the silhouette of the Catholic church at the end. © Marília Duque.

has become a hub for healthy ageing, attracting older people from other areas of São Paulo. Throughout this book, I show how these activities become crucial to the experience of ageing, as they provide opportunities for older people to exercise, learn and socialise. Those who participate in these activities become connected on WhatsApp groups created to support the activities, which expand their networks in both number and diversity, creating a powerful resource for information, solidarity and care.

Bento celebrates diversity when it comes to religion.<sup>60</sup> Despite the three huge Catholic churches located in the area, different Christian denominations, such as Adventists, Baptists and Evangelicals, are well represented. For example, within 500 metres of each other, it is possible to find a Baptist church, a Catholic church, a Church of World Messianity centre (see [chapter 6](#)), and one Kardecist-Umbanda (an Afro-Brazilian religion) centre ([figure 1.13](#)). There is no conflict, as people are likely to combine elements of these different religions depending on the kind of guidance they want. As [chapter 8](#) shows, research participants seek spiritual advice, but sometimes they are just looking for opportunities to socialise and to feel busy and valuable again.

Religious institutions help to expand the portfolio of activities aimed at the third age in Bento. I started my fieldwork by taking part in some of them, as explained in the next section, on methodology. By doing that, I got to know research participants' routines and eventually followed them to their homes and the intimacy of their smartphones to understand how they experience ageing. Through topics such as retirement, everyday life, family, friends, health and sexuality, this book argues that ageing in Bento is a matter of balancing freedoms, pleasure and obligations while coping with new and old social expectations. On the one hand, research participants are still living in São Paulo, where unproductivity is unacceptable. On the other hand, this cultural background adds a special meaning to retirement and to the policies on ageing that expect them to remain active. As we will see, research participants live the paradoxes of the third age with great help from their smartphones, which can be used as allies and alibis in their pursuit of a meaningful life.

## Empathy as methodology

Considering empathy to be the primary ethnography method,<sup>61</sup> I tried to be where older people were, doing the things they do. Thus, I engaged in some activities aimed at the third age in Bento from February 2018 to June 2019. This long commitment allowed me to observe and take part



**Figure 1.13** Items used in an Umbanda ritual are placed in the square that lies in front of one of the Catholic churches in Bento, showcasing the neighbourhood's religious diversity. © Marília Duque.

in their everyday lives, sharing their joys, sorrows and frustrations, and the strategies they adopt to deal with their ageing bodies, young spirits, obligations, needs and desires. From the beginning of my fieldwork, I volunteered as an instructor to teach them how to use WhatsApp. WhatsApp is why research participants are motivated to adopt smartphones, as the platform now mediates Brazilians' communication

with family and friends.<sup>62</sup> The course took place in the most prominent Catholic church in Bento as part of a portfolio of over 50 courses aimed at the third age. These courses are taught by volunteers, most of them retired. I worked with four different classes; a few students attended the course more than once. The classes were for beginners. But, in one term, I conducted two classes, one for beginners, the other for former students who wanted to learn how to use apps other than WhatsApp. Classes always took place on Tuesday mornings. Technological resources were scarce in the church. The WhatsApp classes took place in a room generally used for adult literacy classes,<sup>63</sup> with individual desks and a large blackboard (figure 1.14). While the blackboard was a limitation (a multimedia screen would have allowed me to project the screen of a smartphone, for example), it was an element familiar to older people, along with their notebooks and pens. Most of them had decided to seek assistance because their children didn't have the time or patience to help them. My experience as an instructor allowed me to map their learning processes and how they experienced the stigma surrounding older people and technology adoption.

However, and more importantly, this experience revealed how far these students could go and how their smartphones impacted their lives as they became more confident. In Bento, as will become clear throughout this book, WhatsApp plays a crucial role in health and sociability, resulting in a support network that goes beyond blood ties. WhatsApp groups are also where research participants share helpful information with their peers, including health tips and the opportunities for activities that are the basis of the Active Ageing framework adopted in São Paulo. Usually, one WhatsApp group is created to support each activity. That was also the case with my students, who quickly appropriated the spaces to share their own topics of interest (a behaviour observed among older people in Bento in general). As it was for research participants, WhatsApp was a powerful tool for me to expand my connections and sociability during my fieldwork. For example, at this church, I was included in the WhatsApp group for instructors, and in three others. One was created to manage sales of second-hand items; one focused on organising cultural programmes during the weekends. The last one aimed to plan a fashion show for a charity event (figure 1.15).

A second programme complemented my observation of how older people adopt smartphones. This time I volunteered as a teaching assistant. The classes took place in a hospital that holds a preventive health programme aimed at the third age. These classes were always on Thursday afternoons. Among the physical and other activities, the



**Figure 1.14** Teaching WhatsApp in the Catholic church hall. Photograph by one of the students in the class.



**Figure 1.15** Backstage at the fashion show with the models in the background. © Marília Duque.

smartphone classes most promoted older people's digital inclusion. For many of these students, as for 65 per cent of Brazilians aged 60 and over, the smartphone was their exclusive means of access to the internet.<sup>64</sup> Chapter 5 addresses this learning process and how older people in Bento engage in WhatsApp groups.

As part of my activities, I attended a gym that has a programme exclusively designed for seniors. These classes take place in the afternoons. However, this programme was not popular among research

participants (the programme is for the ‘real old’, as they argued later). Instead, they attend the gym classes open to everyone, especially in the mornings, including dance, yoga, Pilates and weight-training classes. For 12 months, I attended the yoga classes on Tuesday and Thursday mornings and the Pilates classes on Wednesday and Friday mornings, and tried the Zumba twice (see figure 1.16). I also followed the gym unofficial Facebook group. Updated by a gym-goer in her sixties, this group was far more effective than the official communication channels provided by the gym. The gym was the place where most of the gender-related issues emerged. After ‘the work was done’, women allowed themselves to spend time talking and engaging in extracurricular activities such as birthday parties and themed classes. On the other hand, men remained in the gym strictly for exercising, mainly because they still felt guilty about being seen as unproductive during working hours.

Even with different routines, men and women in Bento commit to keeping their bodies in good health. But they are also concerned about their minds. Because an eventual decline in mental faculties is one of their great fears, some take part in courses where they can learn new things,



**Figure 1.16** At the gym. © Marília Duque.



while others play memory games on their smartphones to 'exercise the brain'. Some will dedicate themselves to mindfulness and meditation practices to manage stress, avoid psychosomatic illness and keep their minds in the present. Focusing too much on the past is associated with depression, and focusing too much on the future with anxiety. The unit dedicated to studying ageing at the local Medical School offers meditation classes once a week on Tuesday afternoons. The activities are coordinated by a doctor and validated by positive results achieved by the same practice at a public hospital on the outskirts of São Paulo. The study found that practising meditation led to an improvement in vitality, posture and immunity. The meditation classes are among the initiatives conducted in this unit to stimulate cognitive and physical activity. I was accepted in the meditation group and added to the WhatsApp group they use. Many participants had been referred to the meditation classes by doctors to help them deal with retirement and the free time most of them were experiencing for the first time in their life.

Life after retirement and the challenges of spending this free time with purpose were what brought together a group that discusses work alternatives for the third age. Its members met every Monday morning (figure 1.17). At the beginning of every meeting, they recap the purpose of the group: 'An empathetic and collaborative approach for the reintegration of older people into the labour market, seeking fair remuneration and physical, mental, spiritual and financial health.' This purpose backs up the main argument of this book, namely that, for research participants, remaining in work is a condition of staying healthy in old age. I attended the group's meetings for eight months (from November 2018 to June 2019). The group also invited me to talk about design thinking and prototyping because of my background in advertising. Although members distinguish between themselves and 'the others', meaning younger people, the group recognise the importance of intergenerational dialogue and collaboration. Thus, they adopted me as their 'mascot' and included me in all their social activities and online platforms. They have a WhatsApp group, a WhatsApp Broadcast list and a Facebook group (where the meetings were live-streamed before they migrated to Zoom because of the Covid-19 pandemic). I had access to all of these.

At another Catholic church in Bento, in 2018 and 2019 I volunteered to help to organise the annual festival dedicated to the church's patron saint. The week-long event takes place in the square in front of the church, where the community comes to eat and have fun together (see figures 1.18 and 1.19). All the money raised is donated to the church. Most of these activities are coordinated through WhatsApp groups by volunteers.



**Figure 1.17** At a meeting of the group that discusses alternative forms of work for older people in Bento. © Marília Duque.

The busiest day is the day of the patronal feast, when people bring flowers to share with other worshippers. This church was also where I attended Mass, usually on Sundays, during the morning or in the afternoon. One of the priests is recovering from cancer. Many of his sermons addressed the ageing body, frailties, dependence and dignity, all concepts vital to an understanding of the experience of ageing in Bento.

Combining these activities, I ended up having the same busy schedule as research participants. Like them, I divided my time between activities associated with self-care, learning and volunteering. By doing these things, they can feel, and be seen as, busy, and so to be making amends for having so much free time after retirement. As argued above, in Bento work produces proof of character, shapes identity and provides a sense of belonging for the citizens of São Paulo. In addition, these activities show that they are coping with active ageing while working to maintain their autonomy and avoid being a burden to others.



**Figure 1.18** People worshipping inside the church at the festival of the patron saint. © Marília Duque.

However, there is a methodological problem in this. My participation in the activities described so far could not represent the local experience of ageing. What about those who do not take part in the Active Ageing agenda in Bento? Thanks to the long-term ethnography, I could build strong bonds with community members in such a way that our relationship was extended to their homes, their families and their friends. These connections allowed me to access the outsiders and observe that although they share the same concern about ageing well, some are not yet turning

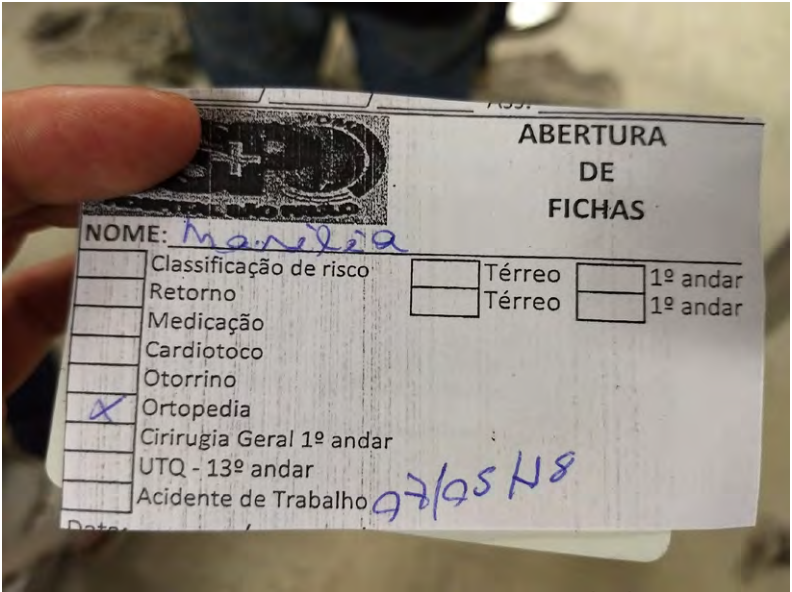


**Figure 1.19** The party outside the church. The roses symbolise the miracle performed by the church's patron saint. © Marília Duque.

this concern into healthy habits, at least not in terms of active ageing. In addition, because older people from other regions of São Paulo come to Bento to attend the same activities as I did, I was able to meet those who don't share the financial stability most of Bento's residents enjoy. For example, 'limbo' was the expression used by those who are neither retired nor employed. In a sense, because of that mobility, Bento became a kind of fieldwork with dynamic borders, as WhatsApp allowed me to connect with some research participants while they were at their homes in other districts of São Paulo, facing different challenges and constraints. These connections are still active, and so are the WhatsApp groups I followed during my fieldwork, even with in-person activities suspended because of the Covid-19 pandemic. Incidentally, these ongoing connections enable me to make comments on what might have changed since then.

While the Active Ageing agenda focuses on prevention, I was also interested in how research participants manage health issues. Their tactics are likely to combine different approaches, even if they seem to be inconsistent. Instead, as Laplantine<sup>65</sup> argues, people can combine knowledge from the fields of traditional medicine, alternative medicine, spirituality and popular healing, including magical and religious treatments. That was the case among research participants. Thus, to reproduce their approaches, I tried different health practices available in

Bento. A pain in my shoulder led me to the casualty department of a local hospital managed by the SUS (figure 1.20) and to Dr Consulta, a clinic that offers low-cost consultations and medical tests, both services used by research participants. I also had an appointment with the spiritual healer Dr Spanish at the Umbanda Centre (Umbanda means ‘the art of healing’, and is a syncretic Afro-Brazilian religion that blends elements from indigenous culture, Catholicism and Kardecism). He referred me for six sessions of chromotherapy and three ‘disobsession’ sessions (spiritual therapy to release oneself from the influence of spirits). In addition to this, I received vital energy applied through a practitioner holding their hands over my body at the Church of World Messianity more than twice. This energy aims to bring balance to the spirit, and it is also applied for healing. Finally, I attended the Bible study meetings of the International Church of Christ of São Paulo. These meetings allowed me to observe the relationship between faith and healing. Lastly, to understand how older people in Bento use WhatsApp to seek medical guidance, I followed doctors and nurses in their daily practices. They showed me how they use WhatsApp for communicating with patients, and highlighted the pros and cons of using the platform. Chapter 6 addresses this discussion and the perspective of these different actors.



**Figure 1.20** My referral at the public hospital at Bento, where I was sent to the orthopaedic unit. © Marília Duque.

During my fieldwork, I conducted in-depth interviews with people aged 50 to 76 who owned a smartphone. I interviewed participants who lived or worked in Bento, or used services aimed at the third age that were available there. They referred me to family and friends, who participated in further interviews according to the same eligibility criteria. These in-depth interviews created a space for dialogue in which I could access the meanings attributed by participants to their own experience of ageing, from a present and a place of belonging, which is physical but also historical, shaped by culture and within a community.<sup>66</sup> These encounters were an opportunity to observe how interviewees adjust their narratives<sup>67</sup> to comply with the habits they believe they are expected to adopt in order to age well. However, these were safe environments, in which participants could talk about the indulgences and extravagances they enjoy when they are alone. In these moments of privacy, they feel safe from moral judgements that may frame their pleasures as inappropriate or unhealthy. In addition to this, during interviews they could relax, as they were away from the classificatory look that defines who is old and who is not, once the relationship with the other person imposes the awareness of age itself.<sup>68</sup> As ethnography has shown, this look can result in a kind of self-surveillance as an effort to hide the natural decline of ageing from others. By doing this, older people can avoid the stigma of age (of being incapable or dependent) or even exclusion from social groups.<sup>69</sup> In addition, research participants are likely to hide any frailty from their children. On the one hand, they don't want to burden their children, whose time should be dedicated exclusively to working. On the other, they don't want to risk being put under their children's control. These concerns turned the private context of the interview into a space in which research participants could 'lower their guard' and express themselves freely about the difficulties and challenges of ageing.

The interviews addressed the three main topics of this research. There were three sets of questions, regarding ageing, health and smartphones. At the end of the last session, I asked participants to unlock their smartphones and show all the installed apps. I then asked how they use each app and who had installed it. Together, these sessions were designed to take from 90 to 120 minutes. However, many of my interviews lasted for more than three hours. This long duration was no burden to the participants interviewed. Indeed, many of them explicitly complained about the lack of opportunities to be listened to as they got older. Some explained that they had started to see a psychologist for precisely this reason – to have a guaranteed amount of time when they would be able to talk and be listened to. I chose not to interrupt their narratives, which

often strayed far away from the questions I had asked them. In a sense, they talked about what they wanted, which revealed much more than I could have anticipated. However, although the participants were glad they had had time to speak, they became tired during the last part of the interview, when I asked them to show me their apps. They were surprised when they realised how many apps they had installed on their smartphones. They got excited when describing the apps they used but bored when it came to talking about those they didn't use or recognise. This behaviour became one of the critical findings of the research. As we will see in [chapter 5](#), research participants are not focused on apps. What matters to them is how apps can be appropriated and combined to meet everyday needs. My observation of their smartphones also provided a timeline representing present, past and future interests. With regard to the future, interviewees often installed an app to signify an intention, for example that they mean to eat better. As we will see in [chapter 6](#), many of these apps are related to adjustments older people intend to make in order to age well, including improvements in their diets and strategies to postpone dependence upon others.

A total of 38 participants were interviewed, 22 women and 16 men, between 50 and 76 years old. Among them were five couples (all in heterosexual relationships). Taking into consideration the waves of migration considered earlier in this chapter, it was not surprising that research participants were not interested in defining themselves according to the ethnic categories used in Brazil.<sup>70</sup> They were more likely to present themselves as a mix of their family ancestry, highlighting their African, Asian and European descent. Throughout this book, when I give quantitative data, the total number of participants interviewed may vary depending on the topic addressed: some opted out of answering specific questions while others used a question as a starting point to discuss another topic or issue. This practice corroborates my previous argument, that older people miss having opportunities to talk openly about the challenges of ageing in Bento.

The concluding chapter, [chapter 9](#), develops this idea by arguing that the 'silence' surrounding ageing, as denounced by Simone de Beauvoir,<sup>71</sup> has changed. In Brazil, São Paulo and Bento, ageing is discussed everywhere as a social and economic problem, as [chapter 2](#) will explore. However, older people's perspectives remain silenced. As they are supposed to be healthy, independent and productive, there is no room for frailties and decline, which are likely to be framed as moral failures<sup>72</sup> by discourses on healthy and successful ageing. That is the most significant commitment of this writing. Having walked in older people's shoes for 16

months, I hope to give visibility to the experience of ageing as lived by them, by considering what they do, what they say they do, and what they keep silent about. To understand the reasons for this silence, we must address how ageing actively is constructed as morality and what it means in the cultural context of work-oriented Bento. The following are the final questions this book aims to answer. Is Active Ageing a healthy policy for older people in Bento? Does it make them happy? As we will see, culture shapes happiness and, for research participants, this means finding new forms of work in order to remain busy and useful after retirement. By doing this, they can achieve dignity and purpose in life while remaining citizens of São Paulo. But what does this 'work' look like? How will they find it? This is a work in progress.

## Ethical protocols

All of the research, including the in-depth interviews, followed the ethics protocols regarding privacy and data processing adopted in Brazil (certificate CAAE 90142318.2.0000.5511). From the beginning of the fieldwork, research participants were informed of the reasons for my presence, and I made myself available for further explanation about the nature of the research. The invitation to participate in the in-depth interviews required participants to fill in and accept the conditions set out in the Informed Consent Form (ICF). The form acknowledges that digital spaces will be observed for the study as well as the interviews. That was relevant, as the face-to-face interactions usually migrated to social networks such as Facebook and WhatsApp but also to Instagram, Facebook Messenger and, less often, LinkedIn. By making them aware that my observation would be expanded to social networks, I adhered to the principle that all consent must be contextualised and restricted to the spheres for which participants have given specific consent.<sup>73</sup>

The ICF was read out to the participant interviewed by the researcher, who provided them with a copy of the document. The researcher emphasised that there was no payment for participation and participants were informed that, at any moment, they could decide to pull out of the research. To do so, they should communicate this directly to the researcher so that the data held could be destroyed. The researcher also explained that the interview, which was audio-recorded, would be transcribed and that the data that identified the participant would be changed to protect their anonymity and privacy. Because of this, all research participants quoted in this book have had their names changed.



The transcriptions were saved on a protected device. In [chapter 2](#), I address the reasons older people in Bento share information they consider helpful to their peers, and their criteria for selection. As we will see, research participants base their judgement not only on the piece of information itself but on the reputation of, and the emotional connection they have with, those who shared the information with them in the first place. The same thing happened when I tried to follow ethical protocols during the interviews. Because some participants had known me for a long time or because they had been referred to me by relatives and friends who could vouch for me, they felt embarrassed about going through the ICF, and most tended to say, 'It's okay, I trust you.' The same behaviour will be addressed when we discuss trust and fake news dissemination among older people in Bento.

## Notes

- 1 Ageism is discrimination based on age. As Lamb (2019, p. 7) explains, it is not restricted to individuals and it entails a 'pervasive aversion to and embarrassment about the condition of old age in general'.
- 2 Agência IBGE Notícias 2018.
- 3 [PopulationPyramid.net](#) 2019.
- 4 Agência IBGE Notícias 2018.
- 5 Agência IBGE Notícias 2018.
- 6 Batista et al. 2011.
- 7 Souza et al. 2016.
- 8 71.5 per cent of Brazilians rely on the public health system (Tajra 2020).
- 9 Debert 2012.
- 10 Brazil was a member of the first and second UN World Assemblies on Ageing. The first Assembly met in 1982, and resulted in the Vienna International Plan of Action on Ageing. The instrument provided recommendations for the development of policies and programmes on ageing, addressing health and nutrition, the protection of elderly consumers, housing and environment, family, social welfare, income security, and employment and education (United Nations 2021). The second Assembly met in 2002, and resulted in the Madrid International Plan of Action on Ageing. The instrument highlighted three themes: 'older persons and development; advancing health and well-being into old age; and ensuring enabling and supportive environments' (United Nations 2021).
- 11 One of the main contributions of the Política Nacional do Idoso (National Policy for the Elderly; PNI) was to create mechanisms to allow civil society to participate in the elaboration of public policies addressing old age (Dias & Pais-Ribeiro 2018).
- 12 In 2003, the Statute for Elderly People established that the family, society and the state all share legal and social responsibility for older people (Brasil, Ministério da Saúde 2013). However, as Küchemann (2012) observes, state participation in elderly care is perfunctory compared with that of the family, which remains the primary provider for older people, including of their nourishment, living conditions and routine care.
- 13 In 2002, the World Health Organization launched the Active Ageing framework. The policy proposed that states and societies provide the environment and opportunities to allow every person to live a 'long and healthy life'. The document also emphasised the concept of autonomy, highlighting that older people should engage with these opportunities to prevent, correct and postpone frailties. In other words, they need to become responsible for their ageing by maintaining their health and, consequently, their participation in society (World Health Organization 2002).

- 14 The National Health Policy for Elderly Persons focuses on the promotion of Active Ageing, addressing disease prevention and the maintenance of functional capacities in old age, which will allow older people to remain in their communities with autonomy (Dias & Pais-Ribeiro 2018).
- 15 Batista et al. 2011.
- 16 The Brazilian Federal Constitution introduced social security in 1988. Social security comprises an integrated set of initiatives by public authorities and society to ensure citizens' rights to health, assistance and social security in Brazil. Created in 1990, the INSS is responsible for the recognition and operationalisation of the rights established by the Regime Geral de Previdência Social (RGPS; the general social security regime) (Instituto Nacional do Seguro Social 2017). Since then, and especially given the worrying projections regarding the ageing of Brazil's population, social security has been framed as an economic problem (FecomercioSP 2016).
- 17 The dependency ratio is the proportion of dependants (those under 15 or over 64) per 100 persons of working age (from 15 to 64 years old) (Agência IBGE Notícias 2018).
- 18 United Nations, Department of Economic and Social Affairs 2019, pp. 36–7.
- 19 Correa 2009.
- 20 The ethnography that resulted in this book was conducted before the Covid-19 pandemic. However, this scenario should consider the effects of the pandemic in Brazil. Indeed, this data was used by a study (Camarano 2020) that aimed to answer the question 'What would happen if, because of limited resources, young people were the ones selected to receive care?' The question's relevance is demonstrated by the fact that 73.8 per cent of deaths caused by Covid-19 up to 1 July 2020 in Brazil were among people aged 60 or above. Exploring the high dependency of households on older people's incomes, the study made a projection considering households in which older people's incomes represented at least 50 per cent of total family income (20.6 per cent of Brazilian households) and households in which an older person's income is the only one in the family (18.1 per cent of Brazilian households). In the first category, the death of an older person would reduce by 75 per cent these households' income per capita, which would affect 11.6 million people. In the second category, the death of an older person would leave 5 million people with no income.
- 21 In 2018, the year this ethnography started in São Paulo, Brazil's gross domestic product (GDP) had grown by only 1.1 per cent compared with the year before. In January 2019, the unemployment rate was 12 per cent (International Monetary Fund 2019). That impacted the healthcare system, as 3 million people abandoned their private health insurance plans, migrating to the public health system (SUS) (Exame Invest 2018).
- 22 IBGE 2020b.
- 23 Agência IBGE 2020.
- 24 Agência IBGE 2020.
- 25 IBGE 2021.
- 26 For example, the consequences of slavery and immigration (mainly White European and Asian) in the country are expressed in the income distribution on the country. In 2019, for example, White Brazilians earned an average of 73.4 per cent more than Blacks and Browns did (IBGE 2020b, p. 33).
- 27 Rossi 2018.
- 28 Brazilian Report 2020.
- 29 Arquivo Público do Estado de São Paulo 2009.
- 30 Wejsa & Lesser 2018.
- 31 Hall 1969.
- 32 Goldenberg 2010.
- 33 DaMatta 1986.
- 34 Pew Research Center 2014.
- 35 Queiroz 1992, p. 78.
- 36 The city was founded in 1554. São Paulo was the port from which the colonial expeditions called the 'Bandeiras' departed. Their members, known as 'Bandeirantes', were responsible for expanding the Brazilian territories into the southern and south-west parts of the continent. But that was a consequence of their main goals: to capture indigenous people (to work as slaves) and search for minerals (such as gold) (IBGE 2017a).
- 37 Queiroz 1992; Moura 1994; Marins 1999; Tassara & Rabinovich 2007.
- 38 In the same decade, the city population increased by 56.6 per cent (Governo do Estado de São Paulo 2021).
- 39 Marins 1999.

- 40 Moura 1994.
- 41 IBGE 2017b.
- 42 United Nations, Department of Economic and Social Affairs 2018.
- 43 Câmara Municipal de São Paulo 2019.
- 44 Cidade de São Paulo Direitos Humanos e Cidadania 2019.
- 45 G1 2015.
- 46 Cidade de São Paulo 2021.
- 47 Statista Research Department 2021a.
- 48 Percentages in Jardim Paulista and Jardim São Luís districts respectively (Rede Nossa Cidade 2020).
- 49 Days in Cambuci and Água Rasa districts respectively (Rede Nossa São Paulo 2020).
- 50 Percentage of the population living 1,000 metres or less from public transport in the Pedreira and República districts respectively (Rede Nossa São Paulo 2020).
- 51 Rede Nossa São Paulo 2020.
- 52 Prefeitura de São Paulo Desenvolvimento Urbano 2019.
- 53 Secretaria Municipal de Direitos Humanos e Cidadania, Coordenadoria de Políticas para Pessoa Idosa 2019.
- 54 Gonçalves & Maeda 2017.
- 55 *Folha de S. Paulo* 2008.
- 56 Cidade de São Paulo Subprefeitura Vila Mariana 2019.
- 57 Escola Paulista de Medicina 2019.
- 58 This project follows the WHO's protocol *Global Age-Friendly Cities: A guide* (World Health Organization 2007).
- 59 Freitas 2017.
- 60 Nogueira 2016.
- 61 Miller et al. 2016.
- 62 According to a Mobile Time Opinion Box (2021) survey, WhatsApp is installed on 98 per cent of smartphones in Brazil.
- 63 In 2019, 18 per cent of Brazilians aged 60 or over were illiterate (IBGE 2020a).
- 64 [Cetic.br](http://Cetic.br) 2020.
- 65 Laplantine 2010.
- 66 Moré 2015.
- 67 As Amossy (2011) argues, in an interaction, subjects adjust their performance to take into account the image they craft for themselves, the image they make of the other and the image they believe the other makes of them.
- 68 Caradec 2014; Featherstone & Hepworth 1991.
- 69 Degnen 2007.
- 70 The ethnic categories officially used in Brazil are Indigenous, Yellow, Black, Brown and White (Petrucci & Saboia 2013).
- 71 Beauvoir 1972.
- 72 Lamb 2019.
- 73 Nissenbaum 2011.