Racism and stressful events: narratives of black elders

Racismo e eventos produtores de estresse: narrativas de pessoas idosas negras

Racismo y eventos que producen estrés: narrativas de ancianos negros

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Abstract
The objective was to analyze the events considered stressful by black elders. Eleven self-declared black elderly people participated (9 women and 2 men), aged between 60 and 83 years. The methodological strategy used was the narrative interview and the analysis was performed according to the qualitative analysis method proposed by Schutze. The events experienced before old age involved conflict and violence in the marital relationship, illness, work, death and mourning, material restrictions, family and racial discrimination. In old age, themes of health and autonomy, descent, affectivity and social support, discrimination and material conditions permeated. It was observed that the experiences that occurred throughout life presented non-normative events marked by the social context of development of the black and female population. Old age events encompassed situations found in other studies with the elderly population in general and events related to racism in force since youth.

Keywords: elderly; blacks; racism; life-changing events; psychological stress

Resumo
O objetivo foi analisar os eventos considerados estressantes por pessoas idosas negras. Participaram 11 pessoas idosas autodeclaradas negras (9 mulheres e 2 homens), com idades entre 60 a 83 anos. A estratégia metodológica utilizada foi a Entrevista Narrativa e a análise foi realizada segundo método de análise qualitativa, proposto por Schutze. Os eventos vivenciados antes da velhice envolveram conflito e violência no relacionamento conjugal, adoecimento, trabalho, morte e luto, restrições materiais, família e discriminação racial. Na velhice, permearam os temas da saúde e autonomia, descendência, afetividade e suporte social, discriminação e as condições materiais. Observou-se que as vivências ocorridas ao longo da vida apresentaram eventos não normativos marcados pelo contexto social de desenvolvimento da população negra e feminina. Os eventos da velhice abarcaram situações encontradas em outros estudos com a população idosa em geral e eventos relacionados ao racismo vigentes desde a juventude.

Palavras-chave: idoso; negro; racismo; acontecimentos que mudam o curso de vida; estresse psicológico

Resumen
El objetivo fue analizar los eventos considerados estresantes por ancianos negros. Participaron once personas mayores, autodeclaradas negras (9 mujeres y 2 hombres), con edades comprendidas entre 60 y 83 años. La estrategia metodológica utilizada fue la entrevista narrativa y el análisis se realizó de acuerdo con el método de análisis cualitativo propuesto por Schutze. Los hechos vividos antes de la vejez involucraron conflicto y violencia en la relación conyugal, enfermedad, trabajo, muerte y duelo, restricciones
Elderly people are exposed to different types of stressful events, whether normative or idiosyncratic, and their effects on their daily lives that affect themselves or their loved ones (Umanath & Berntsen, 2018). Stressful life events are social, psychological and environmental events that cause a change in a person's life, create a risk to well-being, present high emotional salience, bring challenges and lead to coping strategies (Neri, 2022). These events can be normative when they present an expected time of occurrence according to a given sociocultural context and are linked to socialization and social expectations; or non-normative when they are not expected, they have a character of unpredictability and uncontrollability and, therefore, tend to be experienced as more stressful (Neri, 2022; Neri & Fortes-Burgos, 2013).

The stressful potential of events intensifies in old age because the possibilities of living with negative events, both expected and unexpected, due to the social and health changes associated with old age multiply (Lamoureux-Lamarche & Vasiliadis, 2017; Umanath & Berntsen, 2018). In addition, the situations that are experienced differ according to race, gender, social class, birth origin, among other intersectional aspects (Borim et al., 2016). Black old age presents structural impossibilities in its life course that limit the conditions of this population to experience the successful model of aging, since they constitute themselves as a minority group, demographically related to poverty, low education and other social inequities (Rabelo et al., 2018; Silva, 2022).

Data presented in the literature (Fortes-Burgos & Cupertino, 2009; Fortes-Burgos & Neri, 2011; Neri & Fortes-Burgos, 2013; Neri et al., 2013; Neri et al., 2019) showed that the death of close people, living with chronic diseases, the decreasing of functional capacity, as well as family and economic problems are common occurrences in Brazilian aging in general. These studies revealed what were the stressful events and their frequency or perceived intensity, but the experience and the context of the events experienced by elderly people from different racial groups did not gain prominence.

For example, a Brazilian study (Fortes-Burgos & Cupertino, 2009) verified the experience of stressful events that are normative or common to aging, as well as non-normative ones experienced as crises, among elderly men and women, establishing a typology according to age group. It was possible to observe situations related to finitude (death or illness), problems that affect descendants, events related to care, specific events (typical of old age, such as retirement, or that mark a disturbance in what is considered to be the normal course of development, such as divorce and changes in the macrosocial environment) and events that affect psychological well-being (threat to sense of meaning, feelings of loneliness, mental health problems, and spiritual crisis). Men and women aged
60 to 69 emphasized specific events, those aged between 70 and 79 emphasized situations related to descendants, and elderly women and/or men aged 80 and over emphasized situations related to finitude and psychological well-being, and women, more than men, considered the events as more stressful.

A study on frailty in elderly Brazilians (Neri et al., 2013) evaluated the experience of stressful events of elderly people in two Brazilian cities with contrasting socioeconomic conditions. The most cited stressful events in both cities belonged to the categories of death and illness of ancestors and contemporaries, personal well-being and uncontrollable events that affected descendants and other loved ones. Elderly women in the city with the worst socioeconomic index reported a greater number of stressful events and socioeconomic variables were related to the amount and nature of stressful events experienced. As for the intensity of the event, the most stressful were institutionalization of the parents, illness of the parents, death of the spouse, death of the parents, death of a child and death of a grandchild.

The FIBRA Campinas study (Fortes-Burgos & Neri, 2011) showed that the most frequent stressful events experienced by elderly people were the death of a relative and/or friend, worsening of memory, decrease in activities they liked a lot, worsening of the state of general health and loss of purchasing power. Women cited more events that affect children or grandchildren, reported a greater number of stressful events and greater intensity in the experience of the situations experienced. The Fiber 80 + Study (Neri et al., 2019) showed that long-lived women reported a greater number of stressful life events during old age, the most frequent being the death of a loved one.

The cited studies did not consider race as a modulator of stressful events. It is necessary to think if the events considered expected for a certain group are also normative for others. Regarding the life trajectory of the black population, considering the structural systems of oppression that result in high rates of death, illness, poverty and inaccessibility to social spaces, it is essential to assess the situation that disadvantages the development of this group, assuming various forms of social exclusion (Almeida, 2019).

The intersectionality of gender, race and age group constitutes an intensifier of stress, due to the interrelation of these socially and historically discriminated categories, through which individuals will be more subject to potential stressors throughout their life trajectory (Meyer, 2015). In this way, it is from this perspective that it is relevant to verify, understand and discuss what are the stressful events of the black elderly population, based on their daily experiences, considering that the situations experienced do not constitute isolated facts in themselves, but are closely related to the political, economic, social and cultural system (Borim et al., 2016).

In addition to characterizing stressful events, embracing their meanings considering the different dimensions of social life, can broaden the understanding of the life trajectories of the black population, taking into account aspects ranging from childhood to old age. It makes it possible to overcome an individualistic perspective on the occurrence of these events, including the political, social and economic conjuncture in which black elderly people are inserted. Listening to the elderly black population is an act of recognition of their agency, it is to make their experiences and interpretations about the aging process visible, revealing experiences and finding common and idiosyncratic points. In this sense, the objective of this study was to verify which events were considered stressful by black elderly people and to analyze the meanings attributed to the events experienced.

Method
Type of Study

The research process was carried out from a qualitative approach and adopted an exploratory design. It focused on the narratives of black elders, so it did not seek to build typologies, but to understand social events from the particular perspectives of individuals. This study was approved by the Research Ethics Committee of the Universidade Federal da Bahia and all the ethical principles required under Brazilian legislation (Resolution n.º 466 of 12/12/2012 of the National Health Council), which deals with the risks and benefits for research involving human beings, were respected.

Participants

The participants were 11 elderly people, self-declared black, selected in a Health Care Unit for Elderly Care in the city of Lauro de Freitas, BA. The number of participants was determined by the saturation criterion, whose suspension of inclusion of new participants occurred when the data obtained began to present, in the researcher's evaluation, a certain redundancy or repetition. The sociodemographic data of the participants are described in Table 1.

**Table 1**

*Sociodemographic data of the elderly participants*

<table>
<thead>
<tr>
<th>Codenames</th>
<th>Age</th>
<th>Sex</th>
<th>Marital Status</th>
<th>Scholarity</th>
<th>Who do you live with?</th>
<th>Family income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pitungueira</td>
<td>80</td>
<td>F</td>
<td>Divorced</td>
<td>Incomplete Elementary</td>
<td>Alone</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Cajueiro</td>
<td>60</td>
<td>M</td>
<td>Divorced</td>
<td>Incomplete Elementary</td>
<td>Two children</td>
<td>R$ 1,200</td>
</tr>
<tr>
<td>Jacarandá</td>
<td>74</td>
<td>M</td>
<td>Married</td>
<td>Technical Level</td>
<td>Wife and grandson</td>
<td>R$ 8,000</td>
</tr>
<tr>
<td>Macaúba</td>
<td>63</td>
<td>F</td>
<td>Single</td>
<td>Complete High School</td>
<td>Daughter and grandchildren</td>
<td>R$ 3,000</td>
</tr>
<tr>
<td>Jabuticabeira</td>
<td>75</td>
<td>F</td>
<td>Single</td>
<td>Incomplete Elementary</td>
<td>Alone</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Guabiroma</td>
<td>65</td>
<td>F</td>
<td>Widow</td>
<td>Incomplete Elementary</td>
<td>Children and grandchildren</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Sapucaia</td>
<td>60</td>
<td>F</td>
<td>Single</td>
<td>Incomplete Elementary</td>
<td>Alone</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Aroeira</td>
<td>61</td>
<td>F</td>
<td>Married</td>
<td>Incomplete Elementary</td>
<td>With spouse</td>
<td>Does not know</td>
</tr>
<tr>
<td>Pitombeira</td>
<td>83</td>
<td>F</td>
<td>Widow</td>
<td>Incomplete Elementary</td>
<td>Children, grandson and son-in-law</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Figueira</td>
<td>74</td>
<td>F</td>
<td>Divorced</td>
<td>Illiterate</td>
<td>Alone</td>
<td>1 minimum wage</td>
</tr>
<tr>
<td>Ipê</td>
<td>60</td>
<td>F</td>
<td>Divorced</td>
<td>Incomplete Elementary</td>
<td>Alone</td>
<td>No income</td>
</tr>
</tbody>
</table>
An active search was carried out for the elderly and this initial contact had the objective of informing about the research objectives and requesting their participation. The participants were chosen by convenience, respecting the following inclusion criteria: people aged 60 years or older; who declared themselves as black and accepted to participate in the research, after becoming aware of the process. Exclusion criteria were: having severe hearing or visual impairment, difficulty in verbal expression, difficulty in understanding or having a physical health condition that made it impossible to participate in the research.

**Instruments**

The data collection strategy used was the Narrative Interview. According to Creswell (2014), the narrative method emphasizes the experiences expressed in the stories lived and told by individuals, as well as allowing us to understand the uniqueness of the subject and his experience in the context in which he is inserted. Narrative interviews are characterized as unstructured tools, aiming at the depth of specific aspects, from which life stories related to the situational context emerge.

Initially, a pilot study was carried out with a black elderly woman, to verify if the guiding question of the narrative interview would be relevant to answer the problem and the objective proposed in the research. From this pilot, adjustments were made and, thus, the guiding question was changed to: “I would like you to tell me about your life story, highlighting the difficult and stressful situations you have already experienced”; “I would also like you to tell me about your current moment in life and the stressful situations you face today”.

As the elderly people narrated the facts and also after listening to the interviews, a timeline was constructed with the age and period in which each of the stressful events occurred, in order to have an overview of the life history of each participant from the narrated life events, as well as from the moment in which it was experienced. The developmental period in which they occurred (childhood, youth, adulthood or old age) was marked on the timeline. In successive meetings, each participant was presented with a timeline with the narrated life events and the following question was asked: “You told me that you went through a certain situation. Can you tell me in more detail how this situation was? (People involved, sequence of events, context...).

**Data Collection Procedures**

Before starting data collection, the researcher made three previous visits to the Elderly Health Unit, the first to learn about the dynamics of operation, and the other visits to strengthen the bond with its professionals, in order to fit more easily into the service. After this initial moment, elderly people who were waiting in the waiting room for medical care were invited to participate in the research. After identifying herself, the researcher presented the objective of the research, as well as verified the inclusion and exclusion criteria for participation, through observation and a brief conversation with each elderly person. Those who were eligible and wished to participate were invited to go to the room reserved for the interview, a space that limited interruptions and where privacy could be preserved. The interviews were audio recorded using a voice recorder. There were approximately two meetings to carry out the interviews, according to the need to complement the data.
Data Analysis Procedure

In the present research, the narrative interview analysis model proposed by Schutze (2011) was used, which suggests the following steps:

1. Transcription of narrated reports, separating the indexed from the non-indexed (the indexed ones refer to situations concrete and rational within the narrative, are of consensual order—who did it?, what?, when?, where?, why? —; while the non-indexed are those that go beyond the events and express values, judgments and a whole generalized form of “life wisdom”, characterizing itself as subjective).

2. In the following moment, using the indexed content, the events are ordered for each individual, which is called trajectories.

3. The next step is to investigate the non-indexed dimensions of the text, capturing the meanings attributed by individuals to the lived events.

4. Then, the individual trajectories are grouped and compared.

5. The last step is to compare and establish similarities between individual cases, thus allowing the identification of collective trajectories.

For the analysis of the material, it is recommended the joint interpretation of the relevant aspects for both the informants and the researcher, considering the personal, cultural and historical context of the research participant, in addition to suggesting the construction of a structure that allows seeing and understanding the sequence of events, facts, and how they are situated in the narratives (Schutze, 2011).

Results and Discussion

The reported stressful events were separated into “throughout life” (before old age) and “in old age” (current moment of life) in Table 2, organized around major themes that emerged from the narratives of the participants.
Table 2
Themes of stressful events reported by the elderly

<table>
<thead>
<tr>
<th>Events Occurred throughout Life</th>
<th>Events Occurred in old age</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Marital relationship</strong></td>
<td><strong>Health/Autonomy</strong></td>
</tr>
<tr>
<td>Violence (psychological, physical or by abandonment); raising children alone; betrayal; divorce; husband who abused alcohol.</td>
<td>Illness; chronic pain; polypharmacy; dependence on medication for anxiety; insomnia; constant medical consultations; loss of independence; personal objects used by family members.</td>
</tr>
<tr>
<td><strong>Illness</strong></td>
<td></td>
</tr>
<tr>
<td>Own; husband’s illness; physical illness of the mother; psychic illness of the mother; accident.</td>
<td><strong>Offspring</strong></td>
</tr>
<tr>
<td><strong>Work</strong></td>
<td></td>
</tr>
<tr>
<td>Difficulties/mistreatment at work; child labor; resignation.</td>
<td>Feeling alone; low social support from children; not having a spouse/partner; living alone; caregiver role; conflicting marital relationship; lack of instrumental support; non-recognition of the financial contribution.</td>
</tr>
<tr>
<td><strong>Death and mourning</strong></td>
<td></td>
</tr>
<tr>
<td>Death of children; death of other family members; breaking of bond (expulsion from the religious institution).</td>
<td><strong>Discrimination/racism</strong></td>
</tr>
<tr>
<td><strong>Material Restrictions</strong></td>
<td></td>
</tr>
<tr>
<td>Starving; financial needs; balancing study, work and childcare.</td>
<td>Financial needs; geographic isolation.</td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td></td>
</tr>
<tr>
<td>Mother's abandonment; unexpected pregnancy; low social support from children.</td>
<td><strong>Moving house</strong></td>
</tr>
<tr>
<td>Constant migration from home; adapting to a big city.</td>
<td><strong>Racial discrimination</strong></td>
</tr>
<tr>
<td>Personal offenses, subjective perceptions of discrimination, differentiated treatment in everyday situations based on skin color.</td>
<td></td>
</tr>
</tbody>
</table>

From the panorama of stressful events presented, it was observed that the elderly shared similarities in their experiences, which may be related to the social context in which they are inserted and the racial inequities that affect collectivities. There were also life situations that maintained idiosyncratic aspects, considering personal aspects, as well as the heterogeneity of old age. Before old age, the events reported included the marital relationship, especially among women, illness, work, death and mourning, material restrictions, family, moving house and racial discrimination. In old age, themes of health and autonomy, descent, affectivity and social support, discrimination and racism and material conditions permeated.

Stressful events were generally investigated, and although it was not specified that the person should speak out of racism or misogyny episodes, naturally they emerged. For example, if the events that occurred before old age were observed, they contemplated situations in which the gender marker was accentuated. The stressful events reported by the women involved situations of conflict and violence in the marital sphere, raising children alone, betrayals, abandonment, living with a spouse whose abusive use of alcohol harmed family relationships and poor working conditions. The burden in the care of
family members seemed to be more distressing than the illness of the caretaker, since the reports that dealt with this theme predominantly brought in their content the idea of loneliness in the exercise of this task and the illness arising from these circumstances. The two male participants mentioned divorce, racial prejudice, the death of a child and the process of adapting to the big city.

Considering the direct influence of socioeconomic, cultural, racial and gender aspects in the production of differences on the ways of aging, it is noted that this age segment clearly presents the portraits of the structural inequalities of society (Borim et al., 2016; Lin & Kelley-Moore, 2017). With regard to conjugal violence, this has been one of the major causes of morbidity in women, significantly affecting their health and causing losses in the area of personal, social, affective and economic development. Violence is a complex and universal phenomenon that involves social relationships of oppression, intimidation, terror and fear (Leite et al., 2019).

In Brazil, black women are the main victims of femicide and domestic violence (Carneiro, 2017; Instituto de Pesquisa Econômica Aplicada & Fórum Brasileiro de Segurança Pública, 2018). They are more exposed to the absence of a support network or family ties and to a structure of segregation anchored in capitalism and patriarchy, which gives a historical and political singularity to violence, which enhances the vulnerabilities of these women as they age (Carrijo & Martins, 2020).

Marital violence was a fact reported by 7 of the 9 elderly women, experienced before old age. Physical violence in the marital area was mentioned by Ipe (60 years old): “Gosh, I was beaten up so much, from beginning to end, that if I hadn't left, I wouldn't be here talking to you today”. A narrative about a conflicting marital relationship in old age was reported by an elderly woman, the only woman in the study with a current marital status.

The gender inequalities prevailing in society affect daily domestic and care work, in which women are positioned as the main responsible (Biroli, 2018). With regard to care activities, 6 elderly women mentioned raising children alone as a stressful event and 3 emphasized the difficulties arising from having to reconcile study, work and family care. The report by Guabiroba (65 years old) demonstrates this overload:

"After my husband died, I really had to play the role of a man, a father and everything... And then I raised my teenage children. I went to work at the hospital as a waitress at night, huh? And he sick at home. Then I worked at night, because the salary used to be R$ 130 reais and you couldn't help with the children, all teenagers, huh? It was bad. Then I went to work. I worked and hospitalized him, taking him out, hospitalizing him. And that was my life, a lot of toil, huh? Then, even with all that, my father died and my mother got sick; I had to bring my mother home, then there were ten people at home and I was working at the hospital. Ten people, can you believe it? It was a lot for me alone [pause and cry] (Guabiroba, 65 years old).

The time that women dedicate to housework and care is greater, whether they are heads of the family or not, or whether their partners are busy or not (Lima et al., 2021). Often, children of black women live with paternal absence, resulting from abandonment, incarceration or death, consequences of structural racism (Almeida, 2019). This data also converges with the literature, regarding the loneliness of black women, an individual, community and collective experience of neglect and rejection, which is established in affective relationships and in their families (Carrijo & Martins, 2020; Mizael et al., 2021).
A significant number of women struggle against a precarious structure, without public policies that satisfactorily address this reality. These indicators are relevant as such data show the still existing gender and racial inequalities (Gonzalez, 2020).

Experiences considered stressful and unfavorable, in which the intersection between gender and race also appears on the scene, were situations of poor working conditions and mistreatment. There was a portrait of mothers who raise their children alone, dividing themselves between domestic and care work and work outside the home performing these same activities in a paid way (Rabelo et al., 2018). Faced with the low level of education and professional qualification imposed on the black population, domestic work is one of the possible occupation alternatives for women (Almeida, 2019).

In the structural logic of racism, this occupation is a historical and slavery legacy, in which they must be exploited, poorly paid, without the right to a private life and without the right to complain. Transgenerationally, this would be their social function, from their childhood (Gonzalez, 2020; Groisman et al., 2021; Santos, 2021; Silva et al., 2017).

Historically, child and female black labor was widely appropriated and exploited, a sickening fact for this group. (Alberto et al., 2011; Santos, 2021). Of the nine elderly women interviewed, eight were domestic workers, washerwomen and/or caregivers, among whom five cited vexing situations in terms of working conditions, experienced in childhood and/or adulthood/old age. It is important to note that many of these elderly women were in a working condition similar to slavery, something recurrent in Brazil among domestic workers (Gonzalez, 2020; Mendes & Oliveira Júnior, 2019; Peron, 2016). Situations like this were experienced since childhood, as can be seen in the narrative of Jabuticabeira (75 years old):

There was a farmer from the countryside, with whom I went to live, he mistreated me a lot [pause and cry]. Sorry I cry, honey. So yes, my food, the one I ate was roasted tripe on the grill, ox tripe. His daughter used to mistreat me too [...] I was about 7 years old, around, I remember that, can you believe it? Then when she arrived from the city, spent days there, already dismounting from the horse, she was already beating me. They got me up at night and made me go to the pig sty to collect jackfruit. Because she arrived and didn't find the jackfruit bowls, so I got up in the dark with a lamp [...] and then I stayed among the pigs, picking jackfruit berries. She would beat me, put me on such a huge bench. Then I slept on that bench, because I peed on the bed. I remember that I was 7 or 8 years old, the bank was full of bedbugs, and I suffered a lot at the hands of this family. I suffered too much. There was a sidewalk like this, look, she used to make me chop those grasses, full of ants, with her little knives, in the hot sun, like a slave to them.

All these aspects show the stressful nature of the experiences of black women, whose impacts are perpetuated in old age. Black women have always needed to work autonomously, in conditions of precariousness and informality in order to survive. Therefore, black women did not have the option to choose whether they wanted to work or not, nor where they wanted to work. The work place was already destined for them, especially in service areas, in farming and agriculture (Gonzalez, 2020). In Brazil (Instituto Brasileiro de Geografia e Estatística, 2020), more than 65 % of domestic workers are black women, earning 15 % less than non-black women, heads of households and with an average working week of 52 hours.
Events that affect the descendants also presented themselves as stress producers. Most of the participants reported experiences that refer to death and grief (5 mentioned the death of children and 3 mentioned the death of family members) as a stressful factor. In situations involving descendants, the lack of control over such a situation can be even greater, which leads the elderly to evaluate such situations with a high degree of overload. Serious health problems or the death of close people are events about which individuals have little to do objectively, and are usually lived intensely with negative emotions, feelings of frustration and helplessness (Meyer, 2015).

Losing children and/or grandchildren are considered non-normative events. However, this experience is frequent for the black population, a phenomenon described in the literature as black genocide or necropolitics (Almeida, 2019; Gomes & Laborne, 2018; Mbembe, 2018). The emotional mobilization of the participants when they mentioned this event as being difficult to deal with can be observed in the narratives: “I buried my son. That's sad. My son. A mother feeling this is painful, huh?” (Pitombeira, 83 years old). “The pain of losing a child, a no, two children, is .... (silences and cries), in short, only those who pass by know how it is” (Macaúba, 63 years old). Macaúba had his son murdered at the age of 15: “he was in... as they say, huh? In the wrong place, at the wrong time”. Three years later, her eldest son was also murdered. This succession of losses, added to the death of 12 siblings and that of her son-in-law due to chronic diseases, had a great impact on the elderly woman who reported “my life was only a loss”.

Material restrictions are also highlighted as triggers of intense psychic suffering (Neri et al., 2013), mainly because this aspect influenced other areas of life such as difficulties in caring for children, poor nutrition, difficulty in acquiring basic supplies the survival. And the unequal experiences emerged from the participants' narratives according to financial conditions, the awareness of a life history marked by poverty and the low possibility of social mobility. Almeida (2019) emphasizes that race is a determining factor of economic inequality, and that social rights and policies to combat poverty, for the most part, do not take this factor into account.

Events that occurred in old age, especially, covered situations already present in gerontological studies, such as illness itself, especially due to the loss of the total independence they once had (Neri et al, 2019; Umanath & Berntsen, 2018). Of the seven elderly women who mentioned experiencing some illness situation, five indicated comorbidities (two or more diseases). The health problems cited were high blood pressure, fibromyalgia, breast lumps, heart problems, myoma, herniated disc, Repetitive Strain Injury, gastric problems, diabetes and femur fracture. The perception of the impacts of the sum of morbidities in their lives was observed in statements such as that of Ipê (60 years old):

Ah, my daughter, there are so many things, fibromyalgia, hernia, foot spurs, spine, arthrosis, everything you can imagine. But as God is powerful, he's still accepting me to walk. Little crutches here, little crutches there, but I'm walking [...] That's why I tell you that I consider myself old since I was forty-six years old [...] Because here, look, I have to control my movements, my exits, because it's a pain that doesn't stop... Hail! [...] I still manage to move around and I ask God every day not to leave me in bed. If I'm going to stay in bed, take me. Because I know that if it's hard now, much more will be standing on top of a bed. It's going to get more complicated and I know I won't resist.
Racial issues were observed throughout the events, such as constant visits to the doctor as a stressful event, linked to the self-perception of poor care, and the repercussions of exploitation at work during the life course in early functional decline. About being discriminated against in medical care, Jabuticabeira (75 years old) reported: “I know there is prejudice, but we have to know how to deal with it, raise our heads…”. The two male participants did not cite health problems.

The health and/or illness process is related to a set of socioeconomic and cultural factors that influence physical, psychological, individual and collective integrity. In this sense, the conditions of social inclusion, in addition to housing conditions, income, health, and geographic location are elements that determine access to health goods and services (Lin & Kelley-Moore, 2017). Social exclusion, prejudice and discrimination also affect health conditions. Reporting multiple sources of everyday discrimination was a statistically significant predictor of all-cause mortality risk among older black people, and this association remained significant after adjusting for behavioral, economic, and health characteristics (Cobb et al., 2022). These aspects will inevitably impact the old age of elderly black people, who will feel the impacts in relation to life expectancy, morbidity and mortality, mental health, in addition to other areas (Rabelo et al., 2018; Silva, 2022).

Geographic isolation and the feeling of loneliness, enhanced by low social support, were also mentioned, corroborating studies with the elderly population (Neri & Fortes-Burgos, 2013). As observed in Aroeira's speech: “I feel very alone, you know? My children are living their lives, but each one has to move on, right? I spend my day like this, at home, doing things at home”. In this context, it is important to emphasize the loneliness of the black woman, as a marker aspect of relationships or the lack of them during her life trajectory (Gonzalez, 2020). Pitangueira lived on a farm alone, “only me and God”, as the surviving children did not provide the support she needed. She emphasized that she should not be alone on medical advice, since her health condition limited her from performing intense activities “but we alone, what do we do?”

Most participants felt alone in old age, a fact not only linked to the lack of a sexual and affective partner, but associated, above all, with a set of factors that involve low family support, especially of children; absence of instrumental support; non-recognition of the important role played by elderly women who contribute financially to support the household. If the life trajectories of these black women who have reached old age are observed, loneliness was already present in situations experienced since childhood. For example, the family abandonment that made many of these women constantly migrate from home, the unexpected pregnancy in adolescence, and the materialization of the absence of support at the time of the death of a spouse.

The experience of racial discrimination was emphasized as a stressful event, before and during old age. The self-perception of discrimination, either by skin color or by age group, was experienced in public services or in interpersonal relationships of friendship or work. An elderly man mentioned a situation in which a person for whom he was providing service, went out and left valuables on the table, which generated surprise: “Gosh! First time this has happened to me! He went, got the material on the street and came back just fine [...] who's going to go out and leave the cell phone there on the table for a person like me?” (Cajueiro, 63 years old). Jacarandá (74 years old) reported: “That of the black people in Brazil, he needs to do and give it 3 times more [...] it's not easy for people of color in the big city, foreigners, it's not easy”.

Other situations related to racism were narrated showing the intersectionality between age, gender and race. Jabuticabeira (75 years old) quoted: “Who cares about the elderly and black and poor, on top of that? People really reject it, especially if you are not educated…”. Macaúba (63 years old) pointed out: “I think it is more difficult today as a
black woman, not only because of color, but because we are very charged and undervalued”. Elderly Figueira (74 years old) reported: “I think it's because I am everything: poor, black, old. Then they think our work is inferior”.

The data indicated the diversity in the experience of stressful events for older black adults. The black population is part of the most subordinated segments, and therefore more exposed to marginalization, traumatic events, abuse and psychological suffering (Lin & Kelley-Moore, 2017; Silva, 2022). The daily exclusion of opportunities and the discrepancy in the possibilities of ascension between the white and non-white population, thus interfere with life trajectories and physical and mental health (Gonzalez, 2020). In view of the aforementioned events, it is observed that the experiences that occurred throughout life presented unexpected events, such as the death of descendants, child labor and situations of violation of rights, marked by the social context of development of the black and feminine population. While the events of old age encompassed situations found in other studies with the elderly population in general, such as health problems, but with the crossing of racial and gender inequalities. Events that continued in the lives of the elderly women were also observed, such as illness, conflicting marital relationships, financial needs and situations of discrimination. The analysis of these events cannot be performed out of the sociopolitical context that directly influences the individual and collective experiences of the black elderly population.

Considering the intersectional aspects of race, gender and age group, it is observed that the intertwining of these categories deprives this group that historically experiences situations of inequities that are reflected in the educational, relational, labor and health areas, significantly impacting the subjectivity of this population. Naturalizing their condition, they often do not find other possible paths as a way of living. This fact is reinforced by the political and social structure itself that marginalizes minority groups, and is therefore highly stressful and sickening for this population (Almeida, 2019; Cobb et al., 2022). In the case of black women, the unequal life trajectory begins in childhood, and during the course of life it is potentiated, greatly influencing their old age.

Some limitations of this study are highlighted. The number of meetings per participant and the low adherence of elderly men was limiting, so that a greater amount would allow greater depth of detail. This study advances by contemplating race, expanding the understanding of the social, physical and psychological repercussions of structural racism on the aging of the black population. The aspects discussed here also aim to generate reflection on the importance of reviewing practices and behaviors that perpetuate racial violence, through omissions, restrictions and actions that foster racism. It is suggested that future studies be carried out considering race/ethnicity, in addition to other intersectional aspects such as sexual orientation, religion and region of residence. As well as carrying out comparative studies, between older men and women, between white and black people with different socioeconomic conditions, factors that will certainly lead to an expanded understanding of the heterogeneity of old age.

**Final Considerations**

Inevitably, the qualitative analysis of the interviews highlighted the condition of elderly black women. This problematization resulted from the fact that they are the majority of the interviewees, but above all, because they have experienced the performance of racism interspersed with patriarchal logic since the beginning of their lives. The results showed that the events experienced throughout life (before old age) involved non-normative events, such as situations related to domestic violence, the death of descendants, the raising of children without support, the history of abandonment, the
terrible conditions labor conditions, abuse and exploitation from childhood, material restrictions and racial discrimination. In old age, the themes of health and autonomy, descent, affectivity and social support permeated and they were marked by the social context of racial and gender inequalities. The stressful life events common to the old age stage included situations found in other studies with the elderly population in general and events that continued in force since youth, such as illness, conflicting marital relationships, financial needs and situations of discrimination.

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**References**


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