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## Growing Old in the Margins in Lima, Perú

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## Growing Old in the Margins in Lima, Perú

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“I no longer have any reason to hold on to life. I have lost everything, everybody. Every night I pray for God to take me.” As the beautiful summer afternoon faded, Mariela confided to me that she was not afraid of death. She was now feeling at ease with the idea that she would die alone, that somebody would find her in her silent bedroom after noticing her absence. I came across this realization several times while I was conducting dissertation fieldwork in La Merced shelter, a geriatric institution for the abandoned elderly located in an urban marginal zone of Lima, Peru. I traveled to Lima to study the processes of intimacy, abandonment, and care that the urban elderly poor experienced at this facility, with the purpose of understanding the subjective dimension of growing old in the midst of family abandonment, economic scarcity, and institutional neglect within the Peruvian context.

Peru’s population is aging rapidly under contexts of extreme poverty and deep social disparities. From the 1960s to 1980s, the country witnessed a rapid process of urban migration that relocated rural settlers from the Andes to the outskirts of Lima. With Lima’s rise in population (Lobo 1982; Matos Mar 1984), many migrants ended up working informally given that the formal job market was unable to keep pace with the demands of a rapidly increasing population. Throughout the 1980s and 1990s, social and political crises deepened due to hyperinflation, extreme political violence, and corruption. As in much of the rest of Latin America, this fragile socio-political order was intensified by the implementation of neoliberal policies aiming to limit state responsibility for social programs (Roberts 2012), trapping migrants and Lima’s urban poor in insolvency and with limited or no access to pension and social benefits to support them in their old age.

In Peru, the elderly comprises 10.4% of the total population (INEI 2018). There are approximately 1,100 elderly abandoned citizens—both by their families and the State—in the Peruvian capital (Ortiz 2013), many of whom live in homes for the aged. Currently, demographic transitions in Peru pose a challenge to its public institutions, while the State is slowly implementing governmental mechanisms in order to satisfy the urgent demands of the elderly’s population. Since 2002, the Peruvian government has launched multiple proposals aiming to protect the rights to age with dignity of the elderly women and men who have been neglected by the State and their families. However, even after the implementation of social welfare programs designed to improve the elderly’s living conditions, residents of these homes continue to lack the basic capital (Bourdieu 1986) to look after themselves— families, money, and health.

Located in an impoverished district of Lima, La Merced currently houses 335 elderly adults, who come from the most marginalized sectors of the city. These 335 residents comprise a significant 34% of the total population of abandoned elderly adults in Lima, making this shelter the largest institution in the country that helps men and women experiencing social risk in old age. The majority of people who live here do not have active kin ties, as many never married nor have a family of their own. Others still preserve family bonds but reside in the facility because their families cannot or do not want to look after them. The plethora of severed kin ties and poor institutional assistance make La Merced an emblematic zone of social abandonment (Biehl 2005). Moreover, representing the many social microcosms of Lima, La Merced is a prime example of what Goffman (1961) called a “total institution,” a place of residence where a large number of like-situated individuals, cut off from the wider society, conduct all their everyday activities. I conducted 22 months of ethnographic research at this geriatric institution. But as days passed and turned

into weeks and months, I became aware that to determine the significance of growing old in Lima under intensive socio-economic inequality and affective deprivation would not be the only challenge I would face as a researcher. A much bigger challenge would be an emotional one. As an anthropologist, how do I position myself in the face of these people's sense of being forgotten?

## Understanding Care: The Logics of a Contested Practice

I personally met Saturnino on a summer day. I had seen him before a few months ago, when I helped some members of the staff put him in bed, as he was a bed-ridden resident. On that first encounter, his glance struck me; his silent eyes were asking for something nobody was able to hear. The second time I met him, I had been requested by the staff to feed him, as hands were scarce. As spoonfuls of food came and went, I noticed that his wrists were tied to the bed with some kind of "scarves" or cloth ropes that restrained him from movement. (Today, I cannot recall what I thought as I discovered his hands tied under his bed sheets.) Later that day, I asked one of the nurse aides why Saturnino was tied in this way. She told me that it was a *security measure*; otherwise, he could fall from the bed, rip out his Foley catheter, or play with his feces. The woman finished her explanation with conviction: "It is for his own good. I have to take care of him."

Recent anthropological research has turned its attention to the role that processes of care play in the midst of moral and political neglect (Stevenson 2014; Aulino 2016). Furthermore, care has been addressed as a multidimensional concept, ranging from everyday practices (Twigg 2000), engagements with bio-politics and biomedicine (Livingston 2012), moral obligations with kin (Leinaweaver 2013), to an ethical practice of empathy and solidarity (Kleinman 2009). These multiple epistemologies of care were, in fact, present in my field site. The residents of La Merced shared with me that, often times, their notion of "being cared for" differed from what the nurse aide had told me. For many residents, the act of tying the most fragile elders with these cloth ropes to their beds and wheelchairs exemplified that in this institution, attentiveness was a "*delicadeza humana que no existe*" (a humane and tactful action that was deeply absent).

Providing care turned even more complicated as materiality and infrastructure were precarious at this setting. I had many conversations with staff members, who told me that lacking the proper resources made it even more difficult to offer quality care for their patients. Nurses could not cope with the large workload, which meant they had to accept the fact that they would *have* to tie up senile, psychiatric, and fragile residents instead of being by their side to prevent them from falling out of bed or ripping out their feeding tubes. I soon came to understand that, at this institution, care was seen as a practice of biopolitical control that had to guarantee the continuity of these people's bodies.

The staff worked under the imperative to rule out—through the use of improvised resources—residents' chances of hitting their heads, slipping on the floor, becoming aggressive and hurting themselves and others, and so on. Care, as understood by the institution, was a form of management and control of residents' corporality. In fact, in the name of "providing adequate care," not only residents' bodies but their lives as well were managed in the facility, as several men and women were forbidden to leave the institution given that they had come to La Merced through INABIF—a national social program that seeks to provide assistance to homeless older adults—and yet the terms of their stay were not clearly defined. This prevented them from leaving the facility if they wanted, for example, to spend the day out. Metaphorically yet inexorably, these individuals' subjectivities were also tied to the institution—not through their wrists, but through their restricted independence and autonomy. In the name of care, these men and women's lives and bodies were dismissed. *Care relations* were power relations that, oftentimes, threatened these people's rights and citizenship as the institution lacked clear-cut protocols detailing the

duties and responsibilities the staff had.

However, precarity of resources and infrastructure are much more complex issues and play a crucial role in understanding the type of care offered at La Merced shelter. What if, one day, the institution lacked diapers and pieces of cloth were used instead? Did encountering this situation necessarily mean a deficient type of care was being provided? What if, due to a shortage in the month's budget, getting the necessary supplies to prepare meals for those diagnosed with diabetes was impossible, thus leaving this group of people with no other choice than to eat the regular menu? Did this, by all means, imply that the institution was neglecting these people's needs? The intricacies of my field site revealed that care at this setting cannot be understood as an absolute concept encompassing necessarily attentiveness, connection, access to resources, and well-being. In an extremely unprivileged social world like La Merced, care is rather messy, enmeshed in contradictions, full of dissociation and violence, frustration, and neglect. Nevertheless, in such contexts of material deprivation, this kind of care is *much better than nothing*. Staff offered care to the limit of their capacity—which meant it was extremely imperfect and contingent upon the restricting political economic circumstances in which it was provided—while residents told me many times they came to the institution because it was the only way they could avoid dying like “street dogs.”

Being perfectly aware of the material constraints of the social world that surrounded them, what kind of care were these men and women expecting? Was there an ideal of the type of care they wanted to be provided with? Actually, I found there was. As my informal conversations with many residents showed me, a group of them felt completely forgotten and abandoned, as if the social world had turned its back on them. For them, there was a deep yearning of *cariño*—affection, in English. But, *authentic* affection. Most of them—understandably—condemned the fact that when cameras visited the institution, staff and institutional members spent the day hugging and kissing residents—especially those most vulnerable—so these images could circulate on social media. In fact, when important visitors came to the institution, residents were “suggested” or “advised” by staff to let visitors know that in La Merced, they were treated “con mucho cariño” (in a very loving way). Cameras, later, make sure to capture this circulation of affection. As I witnessed many of these interactions, I could not help but think that care at my field site was politicized. There was a clear mandate of what dimensions of social life in the shelter should be visible, such as nurses staring fixedly at and smiling at residents in wheelchairs, groups of older adults dancing to the latest hits, and people playing with balloons while being entertained, and what should not be visible, such as bed-ridden resident's stunted feet, dilapidated rooms, and senile men and women tired of monotony and being disoriented. If elders strongly rejected *cariño* under these premises, what were they really looking for? How did they want to be taken care of? What did *cariño* mean for them? The answer to this enquiry came from Andrés, an 80-year-old man, whose lucidity and wisdom I admired since our initial conversations. “We want affection,” he told me once. He stated,

We sure do. But for true affection to take place it is imperative that the staff first respects us. We want affection, but we also want more. We want *respeto*. We want to be taken care of with respect. They don't have to love us; we are strangers to them. But they have to respect us because we are persons with rights and dignity. And once you respect somebody, maybe there is a chance that affection can flourish. If you respect somebody and you feel affection for them then you feed your patients with patience, you call them by their name and not by the number of their room, you take care of their wounds with attentiveness, and you provide them with the medication they need if you have access to it.

It became clear to me, that at this site, people were eager for a comprehensive kind of care. Care encompassed not only an engagement with biomedicine, but also an urge to satisfy material, emotional, and citizenship needs. To be cared for was these people's right and not a mere act of benevolence and

compassion that the institution had towards them. To be cared for was to be visible to others, to stop living in the margins, and to regain a voice even in the wake of insufficiency of resources.

### “Todavía podemos”: Possibility and the Remaining of the Self

As my fieldwork progressed in La Merced, I could not help but ask myself how socially abandoned these people were, by whom and, ultimately, what it meant for them to live on the margins. Throughout those 22 months of conversations and observations, I witnessed many occasions in which people were invisible, muted and neglected—although generalizations cannot be made about my field site and a few times people were treated with some level of consideration. During the first months of my work, I witnessed and heard the stories of many individuals who felt banished from the social world. However, as days turned into weeks and weeks into months, I encountered that, in the face of poor institutional assistance and family loss, some elderly women and men continued to defy the contingencies to which their everyday lives were subjected. Did they still hold chances to be heard? What sustained their everyday lives while being aware they were growing old and dying surrounded by absence? Could they rework their circumstances and feel they could still take refuge in life?

In August, I started participating in the cooking workshops occupational therapy offered to the residents. One winter afternoon, I decided to join them in the preparation of *causa de papa*, a typical Peruvian dish. It was three o'clock and people started gathering at the door of the facility. Once inside, the others and I were given different responsibilities: mash the potatoes, cut the avocados, peel the eggs, or squeeze the lemons. As I was working silently in my corner of the room, I noticed that the facility was in a great level of material deterioration. Peeled walls painted in hospital green, broken tables, improvised chairs, and wrecked floors were part of the dilapidated scenario in which we were trying to pursue, in a way, a kind of miracle. We did not have basic cooking supplies such as, sharp knives, an electronic mixer, scissors, or a strong potato press, and so we were left with no other choice but to improvise with our hands and with what we had at that very moment. I was a bit skeptical we would succeed in cooking the dish successfully.

However, I was mistaken. We did not only prepare the *causa de papa* together, but the dish turned out to be delicious. As the evening was coming to an end, Señora Juana expressed with wisdom what the task had been about, “Es lindo ver que todavía podemos”: it is rewarding to see that we still can. For me, witnessing how these people created and carved out their present in the midst of precarity and in the absence of basic material resources was revealing and comforting. The world in which these people's everyday lives were taking place had been reinvented as they succeeded in making their will tangible—through laughs, with complicity, and by being a community. Their goal was not extraordinary but rather quotidian: to cook together, to have a nice time, and to share the meal. As I recall the experience today, I am still amazed by the fact that these individuals recreated their restricting circumstances, and in that process, they also re-signified their own social world. That day, as we were cooking, possibility opened, just as the sun paved the way later that windy winter afternoon.

My fieldwork is full of experiences of people maneuvering and enduring their lives' circumstances, of people striving for possibility: Andrés crafting bijouterie necklaces in order to sell them, so he can provide himself with money to buy the supplies for personal hygiene La Merced cannot afford to give him, Señor Juan struggling to get batteries for his 1980s radio so he can listen to the huaynos of his beloved Cajamarca as he cannot return to his hometown, Clara's persistence in sewing her clothes, although she is losing her sight quickly due to limited access to health care in the past. And let us not forget about Filomena's determination—even after being diagnosed with dementia—to clean her mouth as food left-

overs stain her face in a facility where personnel are scarce due to budget cutbacks. All of these acts—vital acts—are subtle ways to remain in the here and now. They are affirmations of the self, processes that, if I am correct, allow these women and men to bear the unbearable—time, death, loneliness, loss, and illness. In small acts like these—maybe trivial at first sight—lies the persistent desire and the powerful will to continue, throughout time and space, being oneself and to find meaning in later life. In places like La Merced, I believe people need to hold on to something in the face of an institutional and systematic oblivion that often renders them as invisible, frail, and as ex-humans. The examples of Clara, Filomena, and many others are a clear metaphor for how people on the margins are resisting political-economic arrangements that limit them in their quest for well-being, health, or quality of life.

Many of these subtle but vital acts are beyond language. Many of these subtle but vital acts do not need language. Decrepit bodies, existences commonly thought of as “absent” or “lost” communicate their persistence in the world at this zone of social abandonment, even if this is not intentional. I keep thinking about the fragile corporality of some of these older adults’ bodies, their toes devoured by aggressive nail fungi; numb feet dreadfully tangled with one another; and consumed, cadaverous bodies that, at some point, resemble mummies that obstinately hold on to life. One cannot help to think of these individuals as dead alive, absent, disoriented, and with no possibility of word. Bones and flesh. This is what I first thought when I encountered residents in these conditions. Although, as I said, bodies in these circumstances continue to hold on to life. As the days went by, I assisted Jimena, the physical therapist, in massaging and stretching the limbs of women and men who quietly lied on their beds in a fetal position. Smoothly, she started every session by stretching arms and legs. The exercise was repetitive, often with no response. At some point, however, the dynamics of the interaction changed, and these bodies started to respond to the stimuli. Jimena stretched, touched, and mobilized their bodies. People groaned, opened their eyes abruptly, and tightened their muscles as a strong rejection to the pain they were experiencing. Words were absent but the message was clear: refusal to be touched. Anchoring in the present by expressing pain and discomfort happened not through language, but through the body—no words, just gestures.

On many occasions, I asked myself if persons commonly thought of as “disconnected” from reality were actually “present” or not. With time, I realized that I will never be certain under the language-centered parameters and the ideals of economic productivity we live in. Without spoken language, it is a real challenge to access these people’s subjectivities, thoughts, and feelings. If one does not contribute to capital, it is difficult (or really easy) to determine this person’s worth as a social being. As old people under these circumstances often times appear to be “gone,” what is needed, I believe, is to start thinking in different ways of *being in the world* that are not only circumscribed to words, to being “aware,” and to generating economic growth. Our possibilities of being acknowledged by others cannot rest, fundamentally, on how articulated we think, speak, or sound; on how rooted we are in time and space; and on how much we contribute to capital. Recent anthropological studies have shown that aging is a multidimensional phenomenon, rather than a stable experience (Kaufman 1986; Lock 1993). Can we venture to rethink what *being in the world and being fully human* means in the same fashion? If we try to, what possibilities would we find to better map people’s subjectivities?

## A Note on Positionality: Emotional Challenges of Feeling Fieldwork

Fieldwork for me has been an ambivalent experience, which has given me the opportunity to be touched by the lives of others. My field site has been a place where I have found myself immersed in the suffering and pain of the people that I have come to study. Because of this, I have felt sad and helpless more than once. How do you position yourself in front of the constraining life circumstances of those you work with? How are you able to grasp what really matters to them and, above all, why they should matter to us?

How do you do research, observe, analyze, and interpret reality in contexts where people feel loneliness as a heavy burden and even death is seen as a deeply desired outcome? After 22 months of deep ethnographic fieldwork, I do not hold the answer to these questions. I have learned, however, that being with people—even in silence—and that listening to what they urge to say is, probably for now, my best contribution. I believe that relying on emotion and not only on rationality is pivotal when trying to navigate the complicated social worlds others inhabit.

Today, as I move closer to the end of my field stay, I am more aware of what it means to be moved by others. Fieldwork is not only about gathering information about cultural practices or about understanding the meaning of these particular practices (although this is certainly core to our discipline). Fieldwork, I believe, is also about being able to *feel* the other; to empathize with people who are, sometimes, radically different from us. In other words, to be able to put yourself in the shoes of somebody who inhabits the world differently than you do. This entails great challenges. Throughout my fieldwork, I have grown attached to different women and men from this institution. I have had the opportunity to be close to them when they have been forced to face deep family crises, loss of autonomy, serious illness, everyday suffering, and even death. It has been overwhelming, it has been difficult, and it has been heartbreaking. Frequently, feeling my fieldwork has been emotionally draining and painful. The unfathomable need of many older adults for human affection and touch, some days, felt like a hardship that weighed heavily on me. Ultimately, is there anything I can do for them to contribute to their emotional and material well-being? As an anthropologist, am I expected to do something? What about as a human being? I have realized that I cannot fight a system that pervasively perpetuates inequality and marginality by myself. The limited quality of life that these people experience is a result of unequal political economic arrangements that constrain their agency, autonomy, and their rights and freedom. I have found that I can listen to people's troubles and concerns, but I cannot change the system that perpetuates their malaise. People have told me that they are not afraid of death. Their ultimate fear, however, is to die in the conditions under which most residents pass away in this institution: alone, abandoned, and in pain and discomfort. I have sat many afternoons with residents listening to how dying in these circumstances troubles them. But at the end of the day, both of us know that their reality is not going to change anytime soon. Despite their reluctance to die under these circumstances, of how much this enrages them, and they resist it, they know—and I know—this is the way things will happen. Doing fieldwork in these circumstances is debilitating and frustrating. This has been one of the biggest emotional challenges that I have endured in my fieldwork.

But, as I said, fieldwork has been an ambivalent experience. Although I have felt on many occasions powerless in front of people's everyday struggles, the relationships I have forged during these months have given me the strength to carry out my work despite encountering limiting situations. As a Peruvian, as an anthropologist, and as a human being, my fieldwork has had a transformative effect on me. It has been a decisive encounter with my nation's social reality outside of my middle class enclave. In the face of these individuals' inevitable destinies, I have received their life stories as generous and openhearted gifts. I have witnessed how these older adults, despite circumscribed to constraining life circumstances, hold on to their lives by striving to remain human and worthy of engagement even when being divested of everything that society considers makes us count as valuable, productive, and rational individuals: memory, autonomy, independence, economic possibility, social networks, family and affection, etc. The day is approaching when I will leave the field and return to my own comfortable life in an anthropology graduate program in one of the most affluent countries of the globe. The people I have met will stay in La Merced. They will age there and will eventually die there. I will probably not be close when they navigate these transitions and this is something that still troubles me.

Despite the fact that my path and theirs will branch off, I am certain that the care, preoccupation, gratitude, and affection that flourished between us will endure in me through distance and time. And this

gratitude, this affection is now shaping as the main motivation that encourages me to actively and politically engage in ways and procedures that can improve their quality of life. The personal stories of endurance and resilience kindly shared with me speak of determined, courageous women and men who, against all odds at 69, 65, 83, even 92 years old, continue to move on, to persist in the world, and to maneuver eventualities. I have learned this from them. And I know I will need time to make sense of it. The challenge now is to make justice of those words, of those conversations, of those ways of being in the world to the best of my ability, never forgetting that I can merely get close to their experience dimly, posing only the option of a narrow interpretation. Maybe to do them justice and to unravel their pain, their joy, and their everyday, I have to embrace the position of a vulnerable witness. Feeling and understanding: complementary movements in the processes of untwining the life-worlds of others and acknowledging the significance of these people's lives without romanticizing their vulnerability.

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