

Significance of eating out for elderly men living alone



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Abstract

This article aimed to analyze the significance of eating out for a group of elderly men, combining elements of the Health, Social and Human Sciences. The men lived alone and attended the Grupo Renascer Extension Program of the Universidade Federal do Estado do Rio de Janeiro. Through direct observation, informal and in-depth interviews and Discourse Analysis, the social role of eating out as a promoter of different types of interaction and social cohesion for this group was evaluated. It was found that retirement, widowhood and children leaving home were related to changes in the dietary practices of the group. As well as a lack of interest in preparing meals, there was a desire to find environments that were more conducive to new social relations. Eating out represents a sense of socialization, representing inclusion in the globalized world. Eating in food courts, especially when alone, was more attractive to the elderly men than spending time in the kitchen preparing a meal that would not be shared. Eating out or buying take-out food to eat at home led to new types of social relationships for this population.

Key words: Feeding; Elderly; Life Style.

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INTRODUCTION

Among the capital cities of Brazilian states, Rio de Janeiro has the greatest percentage of elderly individuals (12.8% of the total population). The number of elderly individuals who live alone is increasing. There has been an increase in the number of people living alone in recent decades in Brazil, including among the elderly population of Rio de Janeiro, which represents the second highest proportion of elderly individuals living alone in the country, after Porto Alegre.¹

Urban life in the city of Rio de Janeiro is considered propitious to social harmony among the elderly population. Goldenberg² stated that the culture of Rio de Janeiro is known for its obsession with youth and a good physical condition, in which a “young, slim, beautiful body, with no signs of aging” is given great importance and directly influences the eating habits of the elderly.

According to Bourdieu,³ the social position of the elderly individual internalizes tastes that are incorporated into daily practices. The consumption of certain foods and the use of certain types of products and services, such as gyms, represent a way for the elderly to become part of the globalized world, giving them a certain amount of *symbolic capital*. Using these products and services gives the individual prestige and makes them feel that they have some social value. Through this consumption, the individual creates (or confirms) their identity and becomes part of a certain group.

The group of elderly individuals assessed in the present study were witnesses to, or indeed participated in, many changes to society, including periods of political dictatorship, several national economic plans, different currencies and accelerated urbanization. These elderly individuals remembered such events, or in the words of Bourdieu,⁴ were socially informed, given that they were previously active in the job market and are now retired. They also recognized changes in sexual behavior, new models of marriage and family arrangements,

alterations in the roles of men and women, the professionalization of women in universities and their subsequent entry into the workforce. Thus, these individuals have a rich past of home experiences that differ from those in evidence today.

The present study deals with social agents that have experienced rapid changes in the urban society of Rio de Janeiro. Sennett⁵ highlighted that these changes have affected the working environment, beginning in the 1980s and continuing at an accelerated pace, which consequently affected interpersonal relationships. These transformations have been correlated with the job market, leisure time, family relationships, rapid industrialization and urbanization and changes in economic structure, all of which have been expressed in food consumption in a number of ways.

During this same period, large food industries attained a global scale and many foodstuffs were transformed into commodities. This favored the appropriation of imported, industrialized products and genres, as well as large fast food chains and restaurants. Many daily domestic activities have become redundant as a result of this industry. Although food reproduces local culture for certain elderly individuals, the daily consumption of industrialized food has become popular in both large urban centers and small rural towns. Even small local food stores now contain products produced by large industries that homogenize a range of food products.⁶

As well as the global spread of these products, globalization also favors the greater access to traditional meals and seasonal foodstuffs. The elderly population of today lives in this cultural mosaic, with multiple possibilities and ever more diversified meals, locations, times and gatherings.^{6,7}

In recent years, a considerable, and growing, percentage of individuals eat their meals outside their home. Although this is not recommended by nutrition professionals or health and nutrition policies, it is a habit that has become part of the

daily life of a large section of the middle classes, mainly due to the pace of modern life. The following factors have been associated with this increase in eating out: a lack of time to prepare food at home; greater convenience; more women in the job market; a decrease in the mean number of inhabitants per household and an increase in the availability of this type of service.⁸

Eating out has also become a habit among the elderly, although for this population group, the activity has significant differences when compared with other sections of the population. It is important to note that the significance of eating out among the elderly population has not been assessed in great detail in Brazilian scientific literature. There is an assumption of the greater quality of food made in the home without considering the social factors involved for elderly individuals who live alone.

The aim of the present study was to gain an understanding of the significance and feelings associated with the eating habits of the elderly, based on their symbolic and subjective dimensions, as well as how the individuals felt about these practices, which promote different types of interaction and social cohesion in this population.

Therefore, the aim of the present study was to analyze the significance of eating out for the elderly based on elements of the Social Sciences, Health and Human Sciences.

METHODOLOGY

The present study was performed with elderly men who lived alone and attended the Health Extension Program for Quality of Life among the Elderly (*Grupo Renascer*), of the Gaffrée and Guinle University Hospital of the *Universidade Federal do Estado do Rio de Janeiro* – HUGG/UNIRIO, in the neighborhood of Tijuca, Rio de Janeiro-RJ.

Thus, the aim was to use an ethnographic qualitative approach to interpret the significance

and feelings associated with eating out. This was done through discourse analysis, which was sensitive to the invisible elements that are not always expressed in words, but rather in how the words are spoken.⁹ Beliefs and values expressed through gestures and expressions were also *in loco*. These expressions are not always only found in words. They may be complementary to the discourse.

After training and guidance, direct observations were conducted, together with informal and in-depth interviews with the elderly individuals, between July and December of 2012. These interviews took place in waiting rooms prior to participation in activities developed by the program. When requested, a private area was used. Discourse analysis was used to interpret these data.⁹ Based on a cultural mosaic, eating out was analyzed in terms of a social phenomenon for social agents (the elderly) and the feelings and significance that they associated with the activity.

This methodology provided a rigorous and detailed analysis of the social phenomenon of “eating out” for these men. The rigor is conditioned by the theoretic foundations used, based on Bourdieu’s³ concepts of cultural, symbolic and social capital. These concepts function as analysis tools, modulating observations in a view of society and specific rules for a social context, following a social capitalization structure. These tools are sensitive to social distinction and prestige in the practical sense. The rigor also involves the perception that more capitalized individuals possess a greater ability to compete.

Since the study sought to use male, elderly individuals who lived alone (single person household), five men with this profile, aged between 65 and 88 years, were interviewed. According to the IBGE demographic census of 2000, the category “single person household” represents 17.9% of all households and 33.1% of these were elderly males who lived alone. The neighborhood of Tijuca, where the present study was carried out, contained the second largest elderly population in Rio de Janeiro and

also contained the second largest number of responsible elderly individuals per household.¹

In the present study, it was important that the individual was responsible for the upkeep of their household, as this placed them in a privileged position in terms of income (even if a relatively low income), social level and in relation to the nuclear family, as well as allowing a decrease in the stress associated with retirement, and ensuring the position of provider and the possibility of going out with grandchildren and friends. In addition, the elderly individual who lives alone, *a priori*, is responsible for decisions related to their diet, including the decision of where to eat.

The present study respected the guidelines and regulatory standards for research involving humans (Resolution 196/1996/CNS) and received approval from the Ethics Committee of the Pedro Ernesto University Hospital in the *Universidade do Estado do Rio de Janeiro* (HUPE/UERJ) under protocol number CAAE: 03734913.4.0000.5259. All of the elderly individuals who agreed to participate signed a free and informed statement of consent.

RESULTS AND DISCUSSION

About the population and the study area

Analyzing context drives the direction of the analysis, given that it selects the numerous elements that will delineate the field of research. Using this methodology involves a formal geographical scope and a health program. The Interdisciplinary Program for the Promotion of Health and the Quality of Life of the Elderly (*Grupo Renascer*) is an extension course registered with the Dean of Extension and Culture in the *Universidade Federal do Estado do Rio de Janeiro* (UNIRIO). The group is made up of elderly individuals who are patients of the HUGG, as well as their family members, former employees and guests of over 60 years of age who are interested in participating in the activities of the

course. Graduate and post-graduate students from UNIRIO and other partner universities also attend the meetings.

Grupo Renascer was created in October 1995 by technical and administrative professionals of the HUGG who had noted the need to offer differentiated treatment to elderly patients in the hospital, due to the growth of this age group in the general population and their particular needs. Currently, this group involves a wide range of professionals, professors and students.

Close to 400 elderly individuals are registered and participate in the following activities, among others: memory training; theatre (staging); choral groups; debates about current affairs; fall prevention; cultural tours; speeches about health, culture and innovation. These activities are organized and defined in focus groups that involve the participation of the elderly.

The general objective of the program is to create awareness and methodologies to promote the overall health of the elderly individual and to improve the quality of life of this section of the population. These individuals are disposed to follow public policies regarding healthy eating habits, which are a regular component of these programs. Weekly meetings are held to develop the different activities on offer. Once a week, the majority of the group meet to take part in educational activities addressing themes related to the idea of aging. This is done through speeches and debates that involve the participation of the elderly, as well as students and other professionals.

Concerning the profile of the elderly single men assessed in the present study, their income ranged from two to five minimum salaries and came from retirement funds. One of the participants stated that he had no income and relied on help (money, clothes and food) from neighbors and a religious institution. However, this same individual was still working on an informal basis. All of the participants had completed primary and secondary education.

The professions reported by the elderly participants of the present study were the following: goldsmith; painter; port security; watchman and electronic technician. All of the men were widowers, separated or divorced. They lived in the West and Central zones of Rio de Janeiro (Estácio and Catumbi) and in greater Tijuca, (neighborhoods of Andaraí and Vila Isabel), not far from where the program takes place.

The Greater Tijuca region has one of the largest elderly populations in Rio de Janeiro.¹ Two other universities in the area also offer activities for the elderly: the *Universidade Aberta da Terceira Idade* (UnATI), which is part of the *Universidade do Estado do Rio de Janeiro* (UERJ), created in 1993 and; more recently, in 2010, the UnATI of the *Universidade Veiga Almeida*.

In the field, it became clear that many of the participants of the *Grupo Renascer* also attended the other groups and participated in the activities offered in the squares of the area, such as the Gym for the Elderly (*Academia da Terceira Idade - ATI*) project, which is coordinated by the Special Secretary for Healthy Aging and Quality of Life (SESQV).

This area also contains a wide range of restaurants, shopping malls, hostels, clubs, bakeries and bars, as well as many food stalls in the streets and squares. A short stroll around the area confirms the high number of elderly individuals who regularly frequent these environments, usually in groups. This characteristic of the area increases the amount of places where one can eat out and has a direct influence on the significance the elderly give to their eating habits.

Eating habits, health and masculinity

Food expresses the social relationships within a group. Meals are classified as healthy based on the standards disseminated by the health program, including hints for those who wish to prepare and serve food, as well as tips on healthy

behavior and eating habits. Poulain & Proença¹⁰ have stated that the act of eating is governed by rules that are imposed by society, telling us how to prepare food, create dishes, seat people at the table and share food, as well as when and where we should eat, among other things.

The men in the present study stated that the kitchen is typically a place for women and they respect it as a place for socializing and female exchanges. These men believe that certain culinary activities are considered to be typically feminine and showed little interest in participating in the cooking workshops or nutrition courses offered in the program. They did not have much to say about food preparation as they mostly ate out. Thus, food preparation is not relevant in their discussions, unlike young males nowadays, many of whom take an interest in cooking.

The participants of the present study did not have that interest. In their eyes, cooking does not represent youth or demonstrate virility, both of which motivate their actions. They did not care that many young men of today learn how to cook as this is not relevant to their family and relationships. It was simply not the way things were done in their day. Gastronomy in the male household is a more recent phenomenon and involves another social group.

Based on the values recognized by their social group, a man selects the natural resources available and transforms them using culinary preparations to satisfy their needs.¹¹ According to Carvalho et al.,¹² cooking is an expression of a social life and follows rules ingrained in society. Even the act of eating out, which was the preference among the elderly individuals studied herein, has a culinary value.

Today, the culinary system is much less stigmatized in terms of gender, with a greater participation of men in culinary activities, whether as a hobby or a profession (chef). However, the participants of the present study live in a universe where there are limits placed

between men and women, and the man must be dominant. In the words of Bourdieu,¹³ in order to differentiate the male's tasks and places in the household, the kitchen assumes a feminine character, although specialized cooking is a male activity.

Bourdieu¹³ reported that the division between genders seems to be natural, almost inevitable, and is present in objects such as houses, where certain parts, such as the kitchen, are associated with one gender (women). This division is incorporated into the social world as a manner of thinking and acting, while also being socially reconstructed, due to the fact that it has already acquired a recognition of the legitimacy of the group studied, as can be seen in these comments:

This task (cooking) is not for women when you have to do it to survive, but it is when you have a woman to cook for you. (I.1)

According to Contreras & Gracia,⁶ the female responsibility of daily cooking is related to what is considered to be a "natural" (authors' emphasis) attribution of domestic tasks to women, who naturally accept them as part of their responsibility to care for the household. The typical family model in most cultures is based on a male provider and a female who takes charge of food management. Cooking as a female activity is symbolic in the home, affecting the woman's place and her relationship with the man.¹⁴ So what is this relationship with food like for elderly individuals who live alone?

Many of the participants in the present study experienced a cultural imposition that forced them to prepare their own food, despite the fact that they considered the kitchen as a place for women. However, as providers of nuclear families, even when living alone, many of them do not know how to do even the most basic things in the kitchen.¹⁵ One must, however, be careful with generalizations. Many women also do not accept the responsibility for feeding

their nuclear family. However, these women are usually from a wealthier social class.

I eat in a self-service restaurant. I always worked. I had my family so I didn't need to learn how to cook or do anything like that. You get so comfortable. Sometimes I made coffee, porridge. Nowadays, the most I do is make a vitamin drink, I even have my breakfast in the bakery. So you relax, you lose interest in it and then you don't do it anymore. You say I'll do it tomorrow but you don't. So you relax and you don't do anything ever again (eyes fill with tears). (I.2)

The emotion of the moment made this man remember meals with his children, which never happen anymore. The absence of somebody to share meals with at home made him lose interest in preparing meals and choose to eat out instead.

Separating is very difficult. I say to the man, I worked, I arrived home and I said here, take this (money). Saturdays and Sundays, if I was at home, I would take the newspaper, go to the bakery and buy bread. I would go with the kid next door and I used to give him the funnies section. I took my paper and put my feet up. Then she (the partner) would ask me are you going to have breakfast now? Everything was easy. Once you separate, it's not like that. If you buy a paper, you have to choose when to read it because you have lots of things to do. Put some beans on the oven, make coffee. I do everything myself. I don't have the money to buy ready-made meals. (I.1)

Domestic space, especially the kitchen, can be adapted through a process of resignification, becoming a place to make meals. Another point of interest from the interviews is that once the women were no longer around, due to death, separation or divorce, this resignification started to involve new standards for eating practices, which were also associated with questions of sociability, social cohesion, distinction, prestige and the reinforcement of the individuals concept of masculinity/virility. These factors, as well as aging and health, are significant to the elderly population in greater Tijuca.

Eating involves tastes and tasks that go beyond physiological and nutritional domains. They also derive from subjective perceptions and social, cultural and historical constructions.¹⁶ Eating habits also reveal the cultural and social history of this group, in terms of the choice, preparation and consumption of food. Preparing and consuming a meal affects one's eating habits, with many feelings and meanings involved,¹⁷ and reveals a historical trajectory in the life of the individual in question.

Santos & Ribeiro¹⁸ highlighted that food is a way of expressing oneself and being creative in all human societies, and is something that is established throughout the course of an individual's life. They also stated that for the elderly, several factors are correlated with eating habits, including biological, psychological and social aspects, such as retirement, widowhood and the departure of children from the family home.

These changes often lead to a lack of interest in preparing meals, changes in the location where a person eats and even the ingestion of food,¹⁸ which make these elderly men who live alone reflect on how and where to have their meals.

Resignifying eating out

As previously highlighted, the field research confirmed that the participants often ate out:

In the beginning I made everything, but nowadays I eat in a restaurant. At night I make a bit of soup that lasts for the full week. Sometimes I reheat it. I eat a sandwich and have a beer every day. Sometimes I go to a different restaurant and other times, I eat at my daughter's house. At the moment, I am not eating there because my son-in-law is there and I don't want to talk to him. (I.3)

This change in the location of having meals among the elderly individuals studied was not only the result of a reinvention in their eating

habits after the loss of their partner. There is also a question of commensality, as can be seen in the following comment:

At least in the restaurant, I don't eat alone, there are lots of people there. I sit at a table alone but there are lots of people around me eating and that's how we go through life. (I.3)

Instead of eating alone at home, the elderly individual can have company, even indirectly, in the place they choose to eat.

Questions related to cleaning difficulties and the effort involved to prepare a meal were also highlighted. The participants indicated that it was more practical to go out and eat in a restaurant:

You know why I eat in a restaurant? In my house the kitchen and cooking area are closed in. The smell of fat doesn't escape, it gets trapped in there. For a long time, I had to clean the walls as they were covered in fat. After a while, I just made soup as there is less smoke and fat involved. So I have lunch in the street. Well, not in the street, in the restaurant. (I.3)

Note that the participants were critical of the salubrity of the environment, from a hygiene and sanitation point of view. Nevertheless, several nutritionists still believe that it would be better for them to make their own food at home. According to nutritional recommendations and health policies, there is an imposition to eat at home and not in the street. Nutritionists reuse this idea without recognizing that the elderly individual may be very worried about hygiene and their independence, which is linked to the prediction, planning and organization of their lives.

Collaço⁸ stated that due to the greater access to restaurants and industrialized products that can be purchased and consumed easily, the central role of cooking has decreased in our lives. When we cook, we do so in the most basic manner possible, using semi-ready products to simplify arduous tasks:

Nowadays, almost everything is ready. You go to the supermarket and everything is sliced, yam, meat. You put it in a pan, put some oil, seasoning, tomato, onion, garlic and you cook it. (I.4)

Eating out is characteristic of a globalized world, where most people don't have time to prepare the food they eat, particularly in large urban centers. This was also evident among the men who participated in the present study. Due to the many activities developed by the program, they did not have time to prepare their own meals or to go home to make them between activities. There are many daily healthcare activities.

For the elderly, restaurants also become a place to socialize and to be a part of this globalized world, particularly when they are located in food courts. According to Collaço,⁸ food courts are a recent development in urban centers, becoming more common from around the middle of the 1980s. They have contributed greatly to the transformation of our eating habits, creating new relationships between consumers and the act of eating.

According to the same author, eating in food courts, particularly when alone, can be positive from the point of view of commensality. Eating out can also be more attractive when compared with the idea of spending time in the kitchen to prepare a meal for one. These points confer with the comments analyzed.

Thus, food courts attract clients who could prepare their meals at home but do not want to waste time cooking for one. This is especially true in the case of older people who live alone and would like to get involved in other activities. Furthermore, nowadays one can eat home-style cooking, reproducing elements of the domestic environment, in restaurants and shopping malls.

This transformation of eating out, which satisfies many different tastes and styles, together

with the large quantity of restaurants and food options in Tijuca, appeal to the feelings of these men, who think in terms of social cohesion and male prestige, considering an invitation to be a gallant act. It is more important to be able to go out to buy food or to eat out than it is to prepare a meal to be eaten alone at home. The following comment reinforces this idea of social cohesion:

I always found some friends there. I also go (pause) to SESC a lot on the weekends. There are people there from other groups and we meet up, share a pizza, meet couples and bring our girlfriends. Others bring their wives. We talk and life goes on without (pause) harming anybody. (I.2)

According to Collaço,¹⁹ in this age group, eating pizza with friends is associated with a nocturnal plan and produces a feeling of social inclusion, based on the idea of having a plan/activity/meeting to get involved in.

The habit of eating out has transformed the eating possibilities for these elderly men. Despite the lower quality of the food, they experience a feeling of autonomy and control over their own life.

It is important to highlight a limitation of the present study. The results presented herein are associated with a specific group in a specific study sample and should not be generalized for other groups.

CONCLUSION

The results of the present study showed that the urban context of the Tijuca area affected the eating habits of the elderly population, as it contains a wide variety of formal (restaurants, bars, snack bars, cafés, shopping centers, food courts) and informal eating environments (street stalls, public squares), offering many options in terms of food, style, socialization and purchasing food to eat in the home.

A young, slim body, without signs of aging, is highly valued in urban areas of Rio de Janeiro. By eating out in a younger environment, these men behave in a manner that is more common among the young population (going to malls, food courts, sharing pizza with friends). They experience a certain rejuvenation through this independent decision-making, which provides them with prestige and social distinction.

Biological, psychological and social factors, such as retirement, widowhood and the departure of children from the family home, are correlated with the changes in eating habits among elderly men who live alone. The interviews and observations revealed that there was a general disinterest in preparing meals and

an interest in seeking out environments that are more propitious for the development of new social relationships. Both eating out and buying food to bring home have resulted in new types of relationships in this population.

The act of eating involves different scenarios that do not always confer with the guidance of public policies related to eating in the home. Rigorous qualitative analysis is essential in order to substantiate freer practices, and thus, to understand the eating habits of a group, noting what they eat, how they eat, why they eat, who they eat with and what they base these decisions on. The answers to these questions could subjectively contribute to a freer adaptation of alienating and restrictive nutritional guidance.

REFERENCES

1. Instituto Brasileiro de Geografia e Estatística. Perfil dos idosos responsáveis pelos domicílios no Brasil 2000. Rio de Janeiro: IBGE; 2002.
2. Goldenberg M. Corpo, envelhecimento e felicidade. Rio de Janeiro: Civilização Brasileira; 2011.
3. Bourdieu P. A distinção: crítica social do julgamento. São Paulo: Edusp; 2007.
4. Bourdieu P. Meditações Pascalianas. Rio de Janeiro: Bertrand Brasil; 2001.
5. Sennett R. A corrosão do caráter: consequências pessoais do trabalho no novo capitalismo. Rio de Janeiro: Record; 2004.
6. Contreras JH. Patrimônio e globalização: o caso das culturas alimentares. In: Canesqui AM, Garcia RWD, organizadoras. Antropologia e nutrição: um diálogo possível. Rio de Janeiro: Fiocruz; 2005. p.129-45.
7. Contreras J, Gracia M. Alimentação, sociedade e cultura. Rio de Janeiro: Fiocruz; 2011.
8. Collaço JHL. Restaurantes de comida rápida, os fast-foods, em praças de alimentação de shopping centers: transformações no comer. *Estud Hist* 2004;1(33):116-35.
9. Orlandi EP. Análise do discurso: princípios e procedimentos. 10ª ed. São Paulo: Pontes; 2012.
10. Poulain JP, Proença RPC. Reflexões metodológicas para o estudo das práticas alimentares. *Rev Nutr* 2003;16(4):365-86.
11. Jomori MM, Proença RPC, Calvo MCM. Determinantes de escolha alimentar. *Rev Nutr [Internet]* 2008 [acesso em 19 abr 2012];21(1):63-73. Disponível em: http://www.scielo.br/scielo.php?pid=S1415-52732008000100007&script=sci_arttext
12. Carvalho MCVS, Luz MT, Prado SD. Comer, alimentar e nutrir: categorias analíticas instrumentais no campo da pesquisa científica. *Ciênc Saúde Coletiva [Internet]* 2011 [acesso em 23 mar 2012];16(1):155-63. Disponível em: http://www.scielo.br/scielo.php?pid=S1413-81232011000100019&script=sci_arttext
13. Bourdieu P. A dominação masculina. 2ª ed. Rio de Janeiro: Bertrand Brasil; 2002.
14. Canesqui AM, Garcia RWD. Antropologia e nutrição: um diálogo possível. Rio de Janeiro: FIOCRUZ; 2005. Uma introdução à reflexão sobre a abordagem sociocultural da alimentação; p. 9-19.

15. Canesqui AM. Antropologia e alimentação. *Rev Saúde Pública* 1988;22(3):207-16.
16. França MCCC, Siviero J, Guterres LS. Da banha de porco ao leite desnatado: um estudo antropológico sobre percursos e práticas alimentares entre idosos de um grupo de terceira idade. *Estud Interdiscip Envelhec* 2010;15(1):11-31.
17. Diez Garcia RW. Reflexos da globalização na cultura alimentar: considerações sobre as mudanças na alimentação urbana. *Rev Nutr* 2003;16(4):483-92.
18. Santos GD, Ribeiro SML. Aspectos afetivos relacionados ao comportamento alimentar dos idosos frequentadores de um centro de convivência. *Rev Bras Geriatr Gerontol* 2011;14(2):313-22.
19. Collaço JHL. Restaurantes: classificações e diálogos entre lógicas no cenário da capital paulista. In: Menasche R, Alvarez M, Collaço J, organizadores. *Dimensões socioculturais da alimentação: diálogos latinoamericanos*. Porto Alegre: Ed. UFRGS; 2012. p. 245-60.

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