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**Reframing vulnerability, reframing connectivity.
Italian older adults' narratives of the pandemic and its
aftermath in a longitudinal perspective**

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Abstract

Ageing offers a critical lens for examining crisis, vulnerability, and digital transformation. The Covid-19 pandemic reshaped discourses on ageing, presenting both challenges and opportunities. We contribute to the debate by analysing the pandemic and post-pandemic narratives of older adults, based on longitudinal research conducted in Northern Italy with individuals over 65. The study shows how participants faced contradictory social norms and discourses, e.g., balancing independence with the need for protection or remaining active while avoiding unnecessary risks. Findings highlight the complex interplay between narratives of vulnerability, agency, and evolving social roles in the context of digital practices. The conclusion challenges traditional deficit-based views of ageing, advocating for a more nuanced perspective that recognises the diversity of older adults' experiences. This approach emphasises the need to redefine ageing, moving beyond polarised notions of withdrawal or perpetual adaptation and engagement, to recognise the diversity of later-life experiences.

Keywords: ageing, vulnerability, ICTs, Covid-19, longitudinal

1. Introduction¹

Many scholars assert that Covid-19 reified the dominant social order in many contexts. Even after the end of Covid-19 containment policies, digital acceleration reshaped many aspects of everyday life, such as remote working, digital education, and digital services, generating both enthusiasm for the new opportunities brought by digital tools and criticism and pockets of resistance toward digital imposition from above, especially among population groups, such as older people, that are still only partially digitised (Colombo *et al.*, 2023). Studies have documented how the pandemic has increased social inequalities in different countries (Bailey, Moon, 2021; Manderson *et al.*, 2021; Turchi, Melton Fant, 2022); moreover, the Covid-19 digital push represented a social challenge as it increased the vulnerabilities of many social groups (Litchfield *et al.*, 2021). However, we still need in-depth studies to understand how the pandemic and its aftermath influenced subjective practices and representations over the longer term. Within this context, ageing is an interesting window for critical social studies on crisis, vulnerability, and digital transformations. Indeed, older adults were often the target of public and medical campaigns against the risk of contagion, which indiscriminately framed them as vulnerable and incapable of adapting to physical isolation and containment measures to prevent infection of Sars-CoV-2 (Ayalon *et al.*, 2021; Diodati, 2021; Previtali *et al.*, 2021; Skoss *et al.*, 2024).

During the Covid-19 digital acceleration, many discourses on digital literacy addressed older individuals (Carlo, Nanetti, 2024). This is especially true for Italy, as one of the «super-aged societies»: here, political and public discourses often adopted a neoliberal and individualistic framework on old age, which was also observed during the pandemic (Cappellato, Mercuri, 2021). Drawing on longitudinal qualitative research, we contribute to this debate by discussing older adults' narratives of everyday life during the isolation and post-pandemic reopening in Italy. Specifically, we show how older adults deal with contradictory social norms and discourses while adapting to lockdown policies, digital transformations, and the legacies of the pandemic in the return to social life.

2. The representations of age and (contested) vulnerability during the lockdown

In the contemporary era, dominant gerontological discourses reproduced by medical power, political, and profit organisations invite older individuals to postpone the loss of independence and autonomy. In the 1980s, the idea of active and successful older age came about as a response to disengagement theory, which assumed that the «freedom» of old age lies in disengagement from personal relationships and social roles (Cumming *et al.*, 1960). In the context of population ageing, later theorists stressed that political programs and social initiatives could instead enable older individuals, especially in their 60s and 70s, to participate in society (Walker, 2002; Boudiny, 2013).

While international and national institutions insisted on the need to develop policy

¹ This paper is the result of a collective work between all co-authors. If it were necessary to attribute the authorship, all authors have written the Introduction and Conclusions; Melis has written section 2.1 of the theoretical framework, section 3 of Data and methods, and section 4.1 and 4.1.a of the Findings; Diodati has written section 2 of the theoretical framework and 4.1.b of the Findings; Nanetti has written section 4.3 of the Findings; Carlo has written section 4.2 of the Findings. We thank all the participants for collaborating in our study. This research was funded by Fondazione Cariplo, grant number: 2021-0897; Project title: ACTIVE ageing in changing societies. Older people's social and digital resources in pandemic and post-pandemic Italy (ACTIVE-IT).

programs to age «actively» (Zaidi, Howse, 2017), individualistic and normative models of postponing age decline have since dominated political and academic reflections (Walker, 2002; Boudiny, 2013; Cappellato, Mercuri, 2021). Many studies in the sociological and anthropological fields criticise active and successful ageing for overlooking the oldest individuals, those in the worst health conditions (Danelly, 2014), and structural inequalities (Boudiny, 2013). The activist paradigm also contributes to undervaluing frailty and interdependence, despite their key role in specific cultural contexts and in alternative theories about old age (*ibid.*; Leibing, 2017; Cappellato, Mercuri, 2021; Pickard, 2024). From this critical perspective, age can be viewed as a domain of biopower, where ageing bodies are subjected to disciplinary practices and their subjectivities are shaped by neoliberal discourses of risk (Kaufman, 1994). Several authors documented contradictory narratives on the portrayal of old age in media and public discourses during the Covid-19 pandemic: despite differences in terms of age, socio-economic status, and personal conditions, older adults seemed to be depicted as a homogeneous group, vulnerable and suffering from social isolation or the inability to adapt to pandemic containment measures (Ayalon *et al.*, 2021; Diodati, 2021; Previtali *et al.*, 2021; Skoss *et al.*, 2024). Research also documented how Covid-19 amplified pre-existing structural inequalities related to old age as well as the limits of dominant active ageing perspectives (Cappellato, Mercuri, 2021). In Italy, close communities were entrusted with the responsibility to protect older people from the virus, initially considered dangerous only for them (Diodati, 2021). In several countries, public discourses depicted older adults, especially the oldest old, as a burden for society who adopted selfish behaviours, such as crowding supermarkets or meeting friends (*ibid.*; Skoss *et al.*, 2024). Lockdown policies also affected many public care services, worsening the physical and mental health of many individuals with pre-existing medical conditions (e.g., individuals with dementia, their families, and home care workers), and increasing their social isolation. Nevertheless, stereotypical representations of age as a burden tend to ignore the role of health conditions, socio-economic inequalities, and neoliberal cuts to public healthcare, especially among vulnerable social groups (Scaglioni, 2022). At the same time, parallel discourses emerged, counteracting negative stereotypes and insisting on older adults' capacity to adapt to containment measures (Skoss *et al.*, 2024) and actively reshape their everyday routines (Melis *et al.*, 2021b). Some studies even highlighted how older adults themselves tend to resist their depiction as vulnerable and marginal subjects (Lamb, 2020).

The use of Information and Communication Technologies (ICTs) was often encouraged as a tool to remain socially connected and active during Covid-19. Long before the pandemic, gerontechnologists had been promoting ICTs' diffusion among older adults with the same aims. Drawing on qualitative and ethnographic studies documenting how discourses on older adults' digitalisation are shaped by cultural narratives of active ageing (Bonifacio, 2021), it becomes even more crucial to disentangle the pandemic narrative that active ageing must necessarily come through an in-depth use of digital media.

2.1 (Active) ageing and digitalisation in the pandemic

In Italy, pre-pandemic studies report a small uptake of older digital users (Gaia *et al.*, 2021), a trend that mirrors socio-economic stratification, wherein ICTs' risk becoming a further source of potential social exclusion among the older population (Van Dijk, 2005). Only a small subgroup are frequent users (Carlo, 2017; Caliandro *et al.*, 2021). In this debate, two main discourses emerge. The first perspective focuses on the positive impact of online engagement on their well-being (Hutto *et al.*, 2015; Chang *et al.*, 2018; Gaia *et al.*, 2021): several scholars document the role played by ICTs in coping with forced isolation (Krendl, Perry, 2021). This perspective has the limitation of relying on a deterministic perspective on older users, which frames ageing as a universal process, reproducing cultural models of ageing as a burden. In other words, old-age dis-connection is once again a

«problem to be solved» (Harley, Fitzpatrick, 2011) by gradually increasing digital uptake to maintain old-age engagement, despite their condition of physical disengagement.

The second perspective focuses instead on cultural and social contexts and ICTs' «domestication» and appropriation by digital users (Silverstone, Hirsch, 1992; Haddon, 2011), namely, the practices of adoption into everyday life and subjective use patterns. These studies stress the heterogeneity of older adults and their digital practices, highlighting intra-categorical differences (Hargittai, Dobransky, 2017). Covid-19 expedited digital uptake: mobility limitations accelerated the digitisation of everyday activities, including communication, entertainment, and utility services (European Commission, 2023). In Italy, studies on this topic showed that older individuals with fewer digital skills struggled to adapt to this rapid digital transformation (Colombo *et al.*, 2023). We build upon previous empirical and theoretical reflections to further understand how digital acceleration and pandemic legacies shape discourses on ageing. We sustain that, in their experiences of lockdown and digital transformation, older adults have had to manage contradictory social dispositions and normative dis-courses: from being independent and seeking the protection of others, such as close kin, to keeping themselves active but paying attention to avoiding unnecessary harm.

3. Data and methods

We analyse data from the longitudinal qualitative research project ILQA-19 (Longitudinal Study on Older People's Quality of Life during the Covid-19 Pandemic). Since 2020, ILQA-19 has been conducted in a peripheral semi-rural area in Northern Italy. The research started in 2020 during the rise of the pandemic, focusing on a unique case study: a heterogeneous cluster of ten villages², in the Lombardy region, that was identified because it experienced the first lockdown in Europe after the initial outbreak in China. The aim was to investigate how older adults' everyday life changed in the first community that faced a sudden, enforced lockdown – without any reference points to counterbalance bewilderment and the loss of ontological security (Giddens, 1991) – and how their lives evolved in a post-pandemic digital society. For ethical reasons, the research started only after the pandemic had spread to the broader national scenario, and the emergency in the first area had decreased.

The research has been conducted fully remotely in four waves (2020, 2021, 2022, and 2023, from now on W1, W2, W3, and W4) through narrative video interviews. Participants since W1 are a purposive sample of forty men and women, aged between sixty-five and eighty years old (with a mean age of seventy), recruited remotely. Starting from 2023, a refreshment sample was added due to drop-out. Participants vary in terms of family composition, gender, and economic status, in the attempt to maximise the group heterogeneity despite the circum-stances. Overall, they are retired and active individuals who report adequate living conditions and are often involved in grandparenting and volunteering (see also Melis *et al.*, 2021b; Carlo, Nanetti, 2024; Carlo, Diodati, 2026), in line with the regional long-standing tradition of third-age and Catholic volunteering (Muehlbach, 2012): most of them possess a secondary education qualification, none reported being below the poverty threshold or encountering serious eco-nomic issues, and none showed signs of significant

² The case study is composed of ten small to medium villages located in the Lodi province, in Lombardy: in 2020, 900 residents in the smallest municipality and 15000 residents in the largest. It is a densely populated area, close to the metropolitan area of Milan in one of the richest regions in Italy. The area is characterised by semi-rurality, with numerous single-family and semi-detached houses and several agricultural fields where it is possible to walk. Concerning older persons, in 2020 in this area the ageing index and older adults' dependency ratio were, respectively, 159,4 (national mean 131,7) and 33,9 (national mean 27,9) (DemoIstat, own elaboration).

cognitive decline. They live in semi-rural areas, with numerous single-family and semi-detached houses and several agricultural fields where it is possible to walk. During lockdown, most participants had access to adequate space at home and often outdoors to walk across without meeting others; none of them lost close family members but nearly everyone suffered the loss of acquaintances and friends. While they generally seem to share local ideals and values about communitarian engagement and engagement in third age, their interpretations of active ageing may differ and are not always related to the use of digital technologies, particularly ICTs (Carlo, Diodati, 2026). They show basic, although heterogeneous digital competences, as all of them own at least a smartphone with WhatsApp. However, not everyone is digitally confident – e.g., some of them made their first video call in the research context (see Melis *et al.*, 2021a).

The researcher’s mediation has been important in many cases, e.g., when enacting strategies to avoid age discrimination in remote interviews in the attempt to maximise participation despite their digital skills (see Melis *et al.*, 2021a; Garavaglia *et al.*, 2023). The interviews explore older adults’ everyday life and well-being throughout the pandemic, focusing on social and digital re-sources, changes occurring in family and social commitments, the role of the institutions – e.g., when enforcing lockdown measures or promoting digitalisation – and participants’ representations of their ageing processes, imaginaries, and worries. After W1, longitudinal follow-ups observed changes in participants, everyday life, social engagement and digital resources; moreover, each year a specific *ad hoc* module was added – namely, in-depth questions about specific topics related to ageing and the increasing digitisation of society (see Tab. 1).

TAB. 1. *ILQA-19 research overview*

Wave	Years	Topic	Longitudinal panel	Total interviews
1	2020	Covid-19 and every-day life, social and digital practices	40	40
2	2021	Representations of old age	31	31
3	2022	Digital public identity (SPID)	19	40
4	2023	Ageing in place	18	40

The methodological implications of this study have already been discussed in previous work (see Melis *et al.*, 2021a; Melis *et al.*, 2022; Garavaglia *et al.*, 2023). We also documented participants’ digital practices during the first lock-down (Melis *et al.*, 2021b), patterns of adoption and resistance to the implementation of digital public services in the post-pandemic context (Carlo, Nanetti, 2024), along with their practices of strategic non-use (Carlo, Diodati, 2026). Drawing on this work, in this article we aim to provide a five-year longitudinal overview, addressing the negotiation between subjective and social representations of old age; specifically, we explore how these attitudes, along with digital practices, played a role in participants’ experiences of pandemic dispositions and post-pandemic legacies. Specifically, we address the following research questions:

- 1) How did older adults represent the forced isolation?
- 2) How did the role of ICTs evolve in older adults’ everyday life?
- 3) How did media and individual representations of ageing shape older adults’ narratives?

The data consist of the eighteen participants interviewed continuously from W1 (2020) to W4 (2023), for a total of seventy-two interviews (see Annex 1 for participants demographics). Each author of this paper has conducted interviews in at least one wave. All the interviews were recorded, fully transcribed and anonymise³. To perform longitudinal data analysis, we used NVivo 15. First, we revised each wave to identify recurrent themes and analytic dimensions (Charmaz, 2003). A preliminary codebook was elaborated collectively and re-fined after a first phase of coding through intersubjective consensus (see Tab. 2). Secondly, each author performed a trajectory data analysis of four to five participants to identify changes in representations and practices through Waves 1 to 4. Lastly, we merged our projects to perform a thematic analysis, each author focusing on the analysis of a specific theme across the cases.

TAB. 2. *Codebook*

Code / Section	Description
1) Pandemic and Everyday Life	
1.1)	pandemic experiences and evolution of daily routines
1.2)	social interactions and mutual support
1.3)	institutional measures and policy programs
2) Digital technologies	
2.1)	ICT domestication and digital practices
2.2)	domains of ICT use
3) Ageing	
3.1)	representations of old age
3.2)	older adults’ role in society
3.3)	representations of the future

³ Datasets are archived in DASSI – Data Archive for Social Sciences in Italy (see Sala *et al.*, 2025; 2026; Carlo, Sala *et al.*, 2026; Carlo, Diodati *et al.*, 2026).

4. Findings

4.1. Reframing daily routines: Risks and ethical responsibilities

This section explores participants' narratives of risk and lockdown practices. From the arrival of the army onwards, the pandemic news was initially felt as a disruption in both personal and communal life. The pandemic phase (2020-2021) marks a period of widespread protective measures that primarily framed older adults as «at-risk subjects». In this regard, in some cases participants shared the perception of risk and vulnerability in the face of contagion, aligning with institutional policies; in other cases, they experienced the forced lockdown as an unnecessary constraint on their independence and social participation.

The post-pandemic phase (2022-2024) offers a crucial counterpoint for understanding how older adults navigate or challenge the identification of at-risk subjects. In analysing their experiences during the pandemic, we discuss the ambivalence produced by the so-called «social connectivity paradox» (Smith *et al.*, 2020), namely the interaction of two contrasting social dispositions: on the one hand, the social construction of old age as a homogeneous category of vulnerable, at-risk subjects, as happened during the initial stages of the pandemic, prioritised the measures aimed at limiting contagion while overlooking the effects of the lockdown on older adults; on the other hand, the «epidemics» of social isolation had long been discussed for their implications for older adults' well-being before Covid-19 outbreak. Here, we aim to discuss how the «social connectivity paradox» is also linked to internalised ambivalent discourses about active ageing. As we will document, participants negotiate ambivalent and conflating discourses in their narratives: the pressure to protect themselves, as vulnerable subjects, and to maintain social participation, as active subjects.

4.1.1. Lockdown and early re-opening (2020 and 2021)

In 2020, Antonia is living alone. Since the death of her husband, she has filled her days by dedicating herself to volunteering, playing an important role in a local organisation devoted to promoting active ageing and combating loneliness in old age. She is concerned about her «old ones», who «are scared, scared! They are even in therapy with a psychologist!» because «they are lonely people who perhaps have children who don't even look after them». The lockdown deprived her of her social purpose, leaving her feeling useless because of the sudden social void:

I'm a very active person, and I hope I will return to leading an active life. It's like the world has fallen to pieces... [...] And the day goes by... but it goes by without anything to offer. Sometimes I say, I don't know... even at my age that, I mean... I feel a sense of emptiness, of nothingness. I feel worthless... sometimes I say, «in this world here, I'm useless!». (F, 70-74, W1)

In 2021, Italy was divided into critical areas, each with specific restriction policies; the government had launched two vaccine campaigns. Antonia reported feeling slightly better as she started to engage again in volunteering, «probably because I was less scared than last year». However, her positive attitude was also accompanied by pandemic fatigue:

Indeed, when I go out and they start talking about [Covid-19]... I change the subject and don't want to hear about it, at least outside. And that's it, that's all; the only difference is that. I'm tired of always hearing the same things, so tired. (F, 75-79, W2)

Annamaria shares some similarities with Antonia: she is a widow living alone, with

a close relationship with her son and daughters based on reciprocal care. She describes in a favourable light the strict recommendations she receives from family members not to put herself at risk. In contrast with Antonia, who stresses the loss of autonomy and her active life, Annamaria emphasises instead the affection and care that her sons and daughters showed her. This care, she says, helped reduce the bewilderment caused by the lockdown:

I rediscovered so many things: well, myself, affective values... and not superficial things, I mean, that helped too, let's say. And fortunately, I have... friends, acquaintances, and so on who feel the same way as I do, and so the thing is... I mean, it waned little by little. We got over it little by little. This is what I can say. I was encouraged not to go into the city, even now, let alone. Because «Mom, you have a certain age», «Mom, be careful» and so... Then there are friends who are a little bit younger than me who tell me «It's good that you don't do weird and crazy things». (F, 65-69, W1)

The interviews outlined above document the narrative construction of «at-risk» older adults, wherein compliance with pandemic restrictions shape a homogeneous ageing subject. Others, however, are far more critical toward containment measures and shed light on their complex life experiences, e.g., as people with serious health conditions or as caregivers who suffered greatly from the re-organisation of public healthcare services. In 2020, Giovanna lives with her husband, a seventy-four-year-old man with several health conditions that force him to stay at home. She spends the lockdown worrying about her husband's health, feeling abandoned by institutions and the National Health Service. While telling us about a time when he thought he had caught the virus, she felt the full burden of her husband's health on her shoulders:

I call the emergency number myself: six hours! First, a nurse – or whoever it was – answers and tells me, «You will be contacted». I ask her, «Could I get a swab test? My husband is immunocompromised. A high-risk patient». And she tells me: «You must not leave the house, neither one of you. We will get back to you tomorrow». We never heard from them again! And then I thought: «When our turn comes, they will make a choice». We were left alone by everyone! By doctors, by hospitals... Public healthcare in Lombardy has been destroyed! (F, 65-69, W1)

In this last fragment, discourses about risk and vulnerability are substituted by a reflection based on lived experiences that stresses long-term shortcomings of the regional healthcare system.

4.1.2. Post-pandemic period 2023-2024

Since 2022, as restrictions in Italy were progressively lifted, participants observed an overall abandonment of precautionary measures, which were no longer mandatory. In 2022, Annamaria and Giovanna perceived this as a care-less attitude towards the community, especially towards the older generations:

Everyone is free to do as they please, for heaven's sake, but we spent a year and a half at home, and staying at home for that long isn't exactly great [...] Ignoring those rules means disrespecting others more than anything else. (F, 65-69, W3)

We've already forgotten. We're idiots! And who cares? Just look at how many sick people there are now! We've got people... some testing positive, some less so... There's no obligation anymore, so of course, everyone just does whatever they want. (F, 70-74, W3)

Many participants met the resumption of social activities with a sort of fatalistic attitude. However, some used to report that while some were coming back to social life, others still suffered from the pandemic aftermath and did not find it easy to re-engage with local cultural initiatives. Lucia lives alone and sometimes participates in local charity activities, both in person and online as she sometimes experiences mobility issues. In her perspective, withdrawal from communitarian social life appears either as a sign of pandemic fatigue or even as a sign of aging:

Well, some people went on with their lives, throwing themselves into travel, relationships, going out – maybe going for pizza once or twice a month. Others, however, perhaps because they have just aged... I don't know... They have withdrawn. And I can't seem to get them to participate more, even though I try... (F, 75-79, W4)

Salvatore devoted himself to volunteering for many years despite his health condition, when the pandemic public debates led him to start identifying himself as an at-risk subject and limit his social activities. In 2024, he reported managing to participate to some extent in volunteering activities. In this sense, narratives about risk and vulnerability appeared side by side with the value placed on social participation and communitarian life:

Look, personally, I always have a bit of fear, and many people reproach me. But what can I do? Lock myself up at home? I fall into the category of vulnerable individuals. But what should I do? Shut myself in and never go out again? No. (M, 70-74, W4)

In this analysis, we aimed to focus on the social context to address the impact that the lockdown and the gradual restart produced on subjective experiences and reflexive accounts about old age. In the pandemic phase, public discourses framed older adults as intrinsically vulnerable, overlooking the complex reciprocity of kin and care relationships within communities, wherein they also represent sources of care (Swift, Chasteen, 2021; Mandache, Ivan, 2024). In this regard, pre-existing conditions of frailty and marginalisation and systemic factors (e.g., the structural dismantling of public health and care services) exacerbated the impact of Covid-19 and lockdown on specific older groups.

In our study, ideals of active ageing, of intergenerational care, and of older persons' social status all appear to shape ethical responsibilities towards the containment measures. In pandemic and post-pandemic contexts, we discuss participants' identification as at-risk subjects in relation to overarching narratives on active ageing, especially third-age volunteering (Muehlbach, 2012), which is often enacted by middle class older adults (Lamb, 2020). At the same time, these discourses are far from being accepted and enacted in a coherent way and appear to be shaped by contrasting dispositions towards connection/disconnection (Smith *et al.*, 2020). Participants appeared to attempt to protect themselves while also preserving their «successful» ageing strategies. Further-more, as documented, discourses about risk and vulnerability are usually resisted through overlooking differences in terms of social background and structural factors.

4.2 Reframing digital practices: use and non-use of ICTs

With regard to ICT use and its centrality in the everyday lives of older people, we compare the two time phases: the first (W1-W2), where protective measures for older people severely limited social contacts, public services were «access-ible» almost exclusively digitally, and the most extensive vaccination campaigns, whose procedures were primarily based on digital tools; and the second phase (W3- W4), when offline relations were more possible, and various public places (supermarkets, offices, schools) progressively returned to normal, removing access restrictions and offering more and more in-person services.

Our main interest is to understand how, over time, older adults adapted to the sudden process of digitisation in the first phase and to what extent they continued to engage with technology in the second, where ICTs stopped being the only means of accessing to social relations and services.

4.2.1 The Covid emergency was not for all an accelerator of digital skills

Findings indicate that participants followed heterogeneous trajectories of technology adoption and use. Over time, those who already had digital skills saw the pandemic as an opportunity to use ICTs, especially in the emergency phase (W1-W2). Conversely, those with limited digital skills generally found less opportunities for ICT adoption or to enhance their competencies, although with some exceptions (see Melis *et al.*, 2021b).

Despite her strong activism in her town associations, Gianna reports low digital skills that are limited to the few useful things she needs to manage the association's bureaucracy:

This period of closure has not helped me to use it more. I asked my son for help – because I needed it more since I couldn't go to certain places – and some other people, but I didn't instinctively say «well, since there is this need, let's try to learn». (F, 70-74, W2)

Often, pre-pandemic difficulties with ICTs remained an obstacle to full digitisation and further increased the sense of inadequacy towards technologies and a rapidly changing world. Among others, Gianna stresses the increased dependence on family members needed to perform digital tasks, especially in the early phase (W1-W2) of rapid digitalisation:

It's not that having more time made me learn to use the computer. I would even put the computer away and take it out during these video calls. And that's it... it made me lazy, but also psychologically, really. It felt like... «but I have so much time, I'll do it tomorrow, I'll do it tomorrow» and I became very lazy... no, I didn't learn to use new things. (F, 65-69, W1)

In many cases, participants who were strangers to the world of technology remained on the digital fringe even during the emergency. Those with few digital skills could still rely on family and close networks, framing such help within a non-individualistic cultural tradition based on intergenerational reciprocity. On the other hand, however, some lament the loss of their independence due to the recent digitisation of services. According to Giovanna, as with several interviewees, digitisation risks making older people, even the most alert and active ones, more insecure, less autonomous, and more afraid of making mistakes, even if basic digital skills are present:

Artificial intelligence arrives. What do you want them to do? What do you think? The situation is only getting worse. [...] Everything will advance at my expense because I'll be at a point where I'll have to give up because I won't be able to keep up with it! This signifies the end of my journey. (F, 65-69, W2)

In these cases, dependence on the support of children and the younger generation is seen as an impoverishment of one's autonomy and as a form of control that limits personal fulfilment. Others, although coming from a past of computer use, have found the turbulent and rapid digitisation of services during the emergency too rapid and radical a change, leading these older people over these four years of research to abandon technology, together with the perception of ageing. The longitudinal analysis reveals how, over time, some older people abandoned ICTs and, freed from the constraints of waves 1-2, saw a reduction in ICT use in waves 3-4.

4.2.2 The ICTs as a (necessary) evil

Among those participants who increased their ICT use, some experienced these years as a moment in which they were «forced» to use digital technologies more. W1 and W2 marked for them a moment of hyper-digitalisation, forced but necessary: although more convenient and faster, technologies were largely perceived as difficult to understand and use.

Often, participants seem to feel an individual responsibility to «have to» use such services, also to demonstrate (to themselves and others) that they are still «active». In this sense, they seem to reproduce the individualistic and neoliberal model of active ageing: in an accelerated and performative world, it is older adults' responsibility to keep running and stay fit. Others have come to view digital use positively over time. If it was initially seen as an imposition (especially during W1 and W2), the advantages or beneficial effects have emerged over the years. For example, Gea - both active in various cultural activities in her municipality, and digitally confident - during the lockdown reconnected with people she had not seen for many years; these connections, in W3 and W4, became in-person meetings:

They friended me [*on Facebook*] and we made our own little WhatsApp group. We exchange greetings or we go here and meet for pizza. We've actually met physically, periodically we meet and we're very good together; but it all started from a Facebook experience. Practically without social media we wouldn't have had the chance to build a friendship, which is now a real friendship. (F, 70-74, W4)

Overall, our participants appear critical of the digitisation process. If social expectations about active ageing are largely internalised (ageing well means ageing «actively»), the positive role of ICTs in the ageing process is greatly underestimated.

Digital technology is therefore not considered a factor that promotes healthy ageing *per se*. There is no dispute about the convenience or efficiency introduced by technologies, but there is a fear that innovation, as was the case during the Covid-19 emergency, does not consider the specific experiences of old age. Despite this 'critical' approach to digital media, the impossibility of a U-turn (the digital is, from a societal point of view, an inescapable destiny) and the idea that the digital is essential clearly emerge across the board.

Gea feels confident when using technology, has strong digital skills but nevertheless is worried about not keeping up with the fast innovations in the digital world:

I go to the pharmacy, and with the code on my phone I have the medicines. [...] I hope they keep the electronic prescription because it should last until December. It's really convenient, all you have to do is send a little message with the medicines you need and within an hour you have the electronic prescription by email. (F, 65-69, W3)

4.2.3 The emergency as an opportunity to critique ICTs (and

institutions)

The Covid-19 emergency and its aftermath have considerably increased the demand for both information and healthcare services. From an informational and organisational standpoint, ICTs have been considered fundamental, but the strong criticisms regarding the inefficient management of both informational flows and the handling of bookings/service delivery have overlapped with the general criticisms of the efficiency of digital services. Regarding digital public services, participants' critiques often extend to the healthcare system. ICTs are perceived as an element that enhances the efficiency of healthcare services but, nevertheless, diminishes their accessibility; for example, ICTs reduce the possibility of being truly supervised by medical professionals, even once in-person check-ups became more accessible.

For example, Eugenio is a retired worker with extensive digital skills cultivated since the 1990s, which increased significantly during the pandemic, but he is highly critical of the digital transformation of public health. In this excerpt, he seems to link ICTs to a decrease in the care received from medical professionals:

[Since everything went digital] nobody receives you. Same with paediatricians: my children haven't been visited for years because the paediatrician is messed up and doesn't receive patients any more, everything online, everything by phone. But that's dying! (M, 70-74, W3)

More generally, the critical attitude towards ICTs is often linked to a growing pessimism regarding post-pandemic social transformations. Many participants said that the hostility and negativity observed on social media were both a cause and a result of the post-pandemic rise in individualisation and frustration. They felt that online conversations kept getting worse, with more polarised and aggressive exchanges. Because of this growing conflict and division, some people chose to leave social media, seeing it as a place that had become too toxic. This is the case of Giovanna, who decided to leave Facebook also because of the hate speech she perceived in pandemic-related discussions. Particularly for those most in need of reassurance and information about Covid-19, treatments and prevention, social media was the main place where they felt attacked, without having the opportunity to have their say:

We were free and happy with little, because we had nothing. Now they have this hatred, this nastiness. For me it's social media, this anger, this way of being seen. [...] I don't post on social media because then I get my ass kicked, that's it... (F, 70-74, W3)

Social networks and online information seem to have contributed to increasing confusion in society, which our participants perceived as having worsened in the post-pandemic phase. From a longitudinal perspective, over time, more pessimism than optimism emerges regarding the information system in general and the ability to discuss certain topics calmly, both face-to-face and online.

4.3 Reframing ageing

Ageing identities take shape through practices of connectivity, as both social and digital ties operate as arenas wherein older adults sustain roles, claim recognition, and negotiate distance from the stigmatised label of «being old». Interviews show how participants connect broader representations of old age to everyday routines and mediated interactions, revealing that «staying connected» is not merely instrumental but deeply identity-relevant: it signals autonomy, competence, and participation. A prevailing theme across interviews concerns

social interactions as a core dimension through which ageing is made meaningful. Older adults are described, and often describe themselves, as essential actors within family and community life: they mobilise practical and emotional support, and intergenerational contributions, in line with research emphasising the relational foundations of ageing (Settersten, Angel, 2011; Bramanti, Nannetti, 2022) and the growing focus on intergenerational assistance (Bengtson, Oyama, 2010; Bramanti *et al.*, 2021). At the same time, some participants perceive a decrease in the public and moral authority of older generations. These accounts often take the form of nostalgic comparisons with earlier periods, in which participants recall tighter-knit communities and more stable intergenerational ties, thereby echoing broader social anxieties about social change and shifting family dynamics (Fernández-Ballesteros *et al.*, 2020).

Gea embodies both the challenges and opportunities of ageing, balancing the memory of a meaningful professional past with the search for a new equilibrium in post-work life:

When I was young, I thought seventy years old meant being old. Now I say, «I don't feel old». [...] I can't picture a future as an older person because I don't feel it. Then, well, what happens will happen. You can't predict it, and there's nothing you can do. Something could hit you out of nowhere. But for now, I don't feel old. I'll do what I want and what I can while I can». (F, 70-74, W4)

Many respondents draw comparisons with previous generations to evaluate both their own condition and the broader social meaning of old age. A recurring narrative contrasts the material hardships of the past with the perceived strength of social ties, described as more robust and enduring intergenerational relationships. This cultural imagination is particularly salient among interlocutors from rural contexts, who recall earlier lifeworlds marked by demanding work, poorer living conditions, and fewer institutional resources, yet also by denser networks of mutual support. Ageing today is thus framed as a balance between increased material well-being and the recognition of a potential erosion of meaningful social relationships. Giorgio's experience of ageing is characterised by continuity and adaptation, as he seeks to reconcile past experiences with the present:

Nowadays, people age better. In the past, at fifty, you were old. I'm [65-69], and I don't feel... Well, it's quite a lot, yes, but I was born in the countryside, where everyone was a farmer. When they retired at fifty-three, fifty-four, or fifty-five, within two years, they were gone. They were bent out of shape for many reasons: work, poor nutrition, lack of heating. All those conditions... at sixty, it was rare to make it that far. (M, 65-69, W4)

In defining old age, many participants described later life not only in terms of limitations, but also as a phase that allows for greater investment of time in supporting others, within the family and in the broader community. As illustrated by Alessio, who attaches great importance to older adults' role in

the community, this contribution includes helping adult children and grand-children as well as participating in volunteer work and social or cultural initiatives:

Older people play an important role [...] both in family life and in the social sphere. Many are volunteers – many, indeed a lot [emphasis]. They care for grandchildren, help their children, and so on. This is undeniable. (M, 70-74, W2)

While acknowledging age-related changes and constraints, these interlocutors appear to reframe such transformations through role reconfiguration, acquiring new forms of social usefulness and recognition. They frequently emphasise their function within family networks, narrating grandparenthood as a cornerstone of the family unit, providing emotional and material support.

Overall, participants describe ageing as an ambivalent process, oscillating between activity and frailty, continuity and decline, material well-being and nostalgia for lost social ties. Social representations appear stratified: while some participants refuse association with old age – experienced as a stigmatised category – others appear more willing to acknowledge the frailty and dependence associated with this life phase. Across these positions, however, social and family networks remain decisive in attributing meaning and value to later life.

But how did the pandemic influence participants' perceptions of ageing? Across the interviews, Covid-19 emerges less as a single «turning point» with uniform effects; instead, it reorganised the meaning of later life along different narratives. In our longitudinal material (W1–W4), perceptions of ageing evolve through phases in which vulnerability, adaptation, and engagement intersect, with outcomes shaped by the extent to which individuals could mobilise social ties, maintain everyday routines, and access practical resources.

In the early emergency phase (W1), older age was made salient through experiences of marginalisation and forced withdrawal. Participants describe a contraction of social life that affected not only well-being, but also the micro-practices through which social membership is sustained. As one interviewee notes, isolation intensified inward retreat and suspicion:

We withdrew into ourselves... Even distrust toward others increased. (M, 70-74, W1)

Daily routines that ordinarily provide low-threshold opportunities for interaction were disrupted, limiting informal sociability and reinforcing a sense of social closure:

For an older person, going to the store is also an opportunity to chat with people... This was lost (F, 65-69, W1)

In the adaptation phase (W2), interviews reveal the emergence of coping strategies aimed at re-establishing continuity under constrained conditions. This included an increased familiarity with digital tools, which some participants framed as a pragmatic adjustment to maintain contact and autonomy:

They became familiar with smartphones. [...] You now see many older adults using them. (M, 70-74, W2)

At the same time, the crisis did not suspend intergenerational responsibilities. Rather, several accounts underscore how older adults continued to sustain family functioning through care and material support, reinforcing a relational definition of later life anchored in

usefulness and reciprocity:

Many older adults support their families, not only by caring for grandchildren but also through financial assistance. (F, 65-69, W2)

A similar dynamic is visible at the community level, where participants describe the reorganisation of voluntary associations – often driven by older members – as a form of collective adaptation to new needs:

Volunteer associations recommitted to addressing the demands of the pan-demic. (M, 70-74, W2)

From the post-emergency phase (W3), however, the interviews point to a bifurcation. For some, the prolonged disruption translated into persistent anxieties and reduced participation, suggesting that pandemic legacies influenced participants' confidence, routines, and willingness to re-enter public life:

Those who were already old have aged even more... Some no longer go out or participate. (M, 65-69, W3)

For others, the same period is narrated through a renewed recognition of older adults' social value, particularly within family and community spheres, indicating that the pandemic could also strengthen claims to legitimacy and relevance in later life. In the longer-term phase (W4), participants often articulate a more reflexive stance: engagement and «keeping busy» appear as practices through which the stigma of ageing is managed and existential uncertainty contained. Social participation is described not merely as activity, but as a strategy to preserve identity continuity and limit the intrusive salience of ageing as decline:

The important thing is to grow old. I stay busy... and the busier I am, the less I think about it. (M, 65-69, W4)

At this stage, some accounts also shift from individual adjustment to a more explicitly political register, linking the lessons of the pandemic to the need for inclusion-oriented measures that recognise unequal capacities to participate:

Older adults remain the driving force behind many activities, but more inclusive policies are needed. (M, 70-74, W4)

The pandemic profoundly shaped representations of ageing, particularly in its initial stages, when institutional and public discourses foregrounded the vulnerabilities associated with later life. Yet, during the transition out of the health emergency, the interviews point to a dual pathway: for some, a resurgence of social participation; for others, a gradual decline in social connections and a more hesitant return to pre-pandemic routines.

Some people suffered more and are struggling to re-engage, while others are still hesitant to return to how things were before. (M, 70-74, W3)

Taken together, these accounts support an interpretation of the pandemic as an «accelerator» of differentiation in later-life trajectories, not because it created entirely new forms of ageing, but because it amplified pre-existing differences in the capacity to sustain participation and social recognition. Where routines, supportive ties, and accessible

resources could be maintained or reactivated, the pandemic period is narrated through continuity, adaptation, and even the renewed legitimacy of older adults' contributions. Where such supports were weaker, the same period is remembered through prolonged withdrawal, anxiety, and an intensified experience of ageing as vulnerability.

5. Conclusion

The transformations induced by the pandemic in social relationships, digital practices, and the representation of ageing highlight a reconfiguration of later-life experiences. The pandemic and its consequences generated a social context characterised by increasing polarisation, wherein subjective practices have either adhered to or challenged such dispositions. In light of this process, the overall aim of this contribution has been to address older adults' narratives of everyday life during the pandemic and its aftermath from a longitudinal perspective. In doing so, we examined Waves 1-4 of ILQA-19 from three different analytical perspectives: older adults' representations of everyday life, such as the enforced lockdown and its evolution, throughout the different pandemic phases; older adults' digital resources in their daily routines; and the impact of collective and internalised representations of ageing on participants' narratives across the different waves. Findings from our three research questions are profoundly intertwined: the longitudinal analysis of ageing in the context of the pandemic reveals indeed a complex interplay between narratives of vulnerability, agency, and evolving social roles and digital practices.

First, the analysis reveals how the health crisis has exacerbated pre-existing inequalities while simultaneously generating new trajectories of inclusion and exclusion. Social marginalisation was particularly evident during the early phases, when forced and social isolation dominated. On the one hand, the pandemic has strengthened intergenerational ties and community solidarity, demonstrating the capacity of many older adults to maintain active roles within the family and society. On the other hand, although a vast literature advocates for a shift from viewing older adults as passive subjects in need of protection to active social agents (Phillipson, 2003; Grenier, Phillipson, 2020), restrictive measures reinforced the rhetoric of vulnerability and contributed to processes of marginalisation, especially among participants with limited social and digital resources. Many reported heightened feelings of loneliness, disruptions in daily routines, and a loss of social interactions due to the restrictions, all crucial for their well-being.

However, stereotypical representation seemed to be paradoxical because, at the same time, older adults were invited to maintain active and socially connected (Smith *et al.*, 2020). In that respect, when analysing everyday practices throughout the pandemic, our findings identify different overarching narratives related to old age and/or vulnerability: compliance with restrictions seems to be related to the internalisation of old age as a vulnerable social category; conversely, participants' accounts that endorsed more strongly active ageing principles also reported suffering more from isolation and reclaiming community engagement when restrictions gradually disappeared. As the pandemic evolved, a dual trajectory emerged: some individuals re-engaged with society with renewed social participation, while others faced lasting difficulties reintegrating due to fear, psychological distress, or the loss of key social ties. Although participants' accounts echo different dominant narratives on ageing, these findings also contribute to challenging traditional deficit-based perspectives, blurring polarised understandings of later life as withdrawal or as prolonged adaptation and engagement.

Second, the study also highlights the agency of older adults in navigating the crisis. The accelerated adoption of ICTs has been a valuable resource for participants with social and digital resources, facilitating continued interactions and access to essential services, while for others it has heightened exclusion and increased dependence on family members. However, the complex interplay of cultural models plays a key role: practices of use

and non-use, more than a lack of digital literacy and autonomy, often highlight instead participants' agency or relational and intergenerational patterns of care that challenge dominant discourses. Thus, participants' experiences confirm that the active ageing paradigm – rooted in autonomy and continuous participation – cannot be applied uniformly and necessitates a critical rethinking that accounts for cultural contexts and the plurality of later-life conditions.

Third, in terms of social representations, the pandemic also challenged the persistence of a dichotomous narrative on ageing: on one side, the figure of the frail and dependent older adult, positioned as a passive recipient of institutional protection; on the other, active ageing subjects, capable of adapting to the transformations imposed by the health emergency. While the pandemic has indeed amplified pre-existing social representations and conditions, this dichotomous representation fails to capture the complexity of the lived experiences that oscillate between the two.

This study has some limitations, as it focuses on a specific category of older adults who, despite restrictions, overall were socially active and maintained a certain degree of engagement throughout the crisis. These characteristics may have eased their ability to navigate the challenges posed by the pandemic, especially in comparison with the experiences of more isolated or socially disadvantaged older adults. However, the study's most innovative contribution lies in its longitudinal design, which uniquely captures the evolution of behaviours, habits, and perspectives among older individuals over time, from the onset of the pandemic to the post-pandemic period. By tracing these shifts, this research offers a rare insight into the dynamic and evolving nature of ageing in times of crisis, providing a critical foundation for rethinking policies and social interventions in ageing societies. Covid-19 has thus underscored the need for a redefinition of discourses and policy practices, moving beyond normative and one-dimensional approaches. Future intervention strategies must acknowledge both the active societal roles of older adults and the necessity of support networks that respond to the diverse trajectories of ageing, ensuring a balance between participation, protection, and the recognition of vulnerability as a structural element of later life.

ANNEX I. *ILQA-19 Participants' Demographics*

Pseudonym	Age	Gender	Education	Household Members	Civil Status	Children
Antonia	70-74	F	Primary	1	widowed	2
Piero	70-74	M	Primary	1	single	0
Salvatore	65-69	M	Secondary	2	married	3
Sandro	65-69	M	Secondary	2	cohabiting	2
Linda	65-69	F	Secondary	1	single	0
Anna	70-74	F	Tertiary	1	widowed	0
Lucia	70-74	F	Secondary	2	widowed	2
Gianfranco	65-69	M	Secondary	2	married	2
Iva	65-69	F	Secondary	2	married	1
Annamaria	65-69	F	Secondary	2	widowed	2
Alessio	70-74	M	Tertiary	2	married	2
Gea	65-69	F	Secondary	1	widowed	2
Giorgio	65-69	M	Secondary	2	married	1
Serafino	70-74	M	Secondary	2	married	1
Eugenio	70-74	M	Secondary	2	married	2
Gianna	65-69	F	Primary	2	widowed	2
Giovanna	65-69	F	Secondary	2	married	2
Gino	70-74	M	Secondary	2	married	2

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