“Ends of Life”: An Interview with Sarah Lamb

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Introduction

Sarah Lamb is Professor of Anthropology and Barbara Mandel Professor of Humanistic Social Sciences at Brandeis University and a 2019-2021 Andrew Carnegie Fellow. She specializes in aging, family, gender and personhood, with fieldwork experience in India and the US spanning two decades. Sarah’s work exemplifies the anthropology of aging at its best, illuminating existential concerns beyond older age, while offering insight into broader moral orders. For me (Iza Kavedžija), as the editor of this special issue on Ends of Life, it was particularly valuable to have the opportunity to speak to Sarah about questions of meaning in older age, and the ways in which people map out different endscapes in India and the US as they approach the ends of their lives. Our conversation touched upon issues of temporality and experiences of time at life’s horizons, as well as the current complex global public health situation.

Like so much during this pandemic-affected period, this photographic interview took place virtually and via email. Though geographically distant, we were able to exchange thoughts and images, allowing the interview to take the form of both a conversation and a photo essay. The relationship of the images to the text is dual: some of the questions I asked arose from the images Sarah selected after our initial conversations, while other photographs illustrated the points Sarah made in her responses.

"Ends of life"

Iza Kavedžija: Your most recent volume, Successful Aging as a Contemporary Obsession: Global Perspectives (2017), invites the reader to think critically about our visions of successful aging. What makes this idea of ‘aging successfully’ so compelling?

Sarah Lamb: This is a question I’ve been thinking a lot about. Successful aging envisions postponing or even eliminating the negatives of old age by medical intervention and individual effort. On the face of it, it’s a very appealing notion. Who wouldn’t want to be ‘successful’—healthy, active, fit, engaged, happy—as one ages? The ideology that health and aging are within one’s own personal control can feel very inspiring and comforting.
The successful aging movement is also partly motivated by the needs of governments, I’d say. As the logic goes, if older people—who make up an increasing share of almost every nation’s population—can stay fit, active, and productive, they will not become burdens to healthcare systems and economies. But what else is going on? I myself believe that the idea of successful aging is also connected to an extreme discomfort with oldness in North America. The prospect of being old—as in, you know, really old, different from your previous self, possibly frail, or needing care—is more shocking to a sense of self and more terrifying to many even than death. That’s why it’s impolite in US society to call someone ‘old,’ for instance, and embarrassing to need a cane or walker. This antipathy to oldness underlies the successful aging movement. You see bestselling books with titles like *Live Young Forever*, *How Not to Die*, *Own Your Health: Healthy to 100*, *Age in Reverse*, and *Younger Next Year: Live Strong, Fit, and Sexy until You’re 80 or Beyond*. I recall a line from one of these bestsellers: “Ailments and deteriorations are not a normal part of growing old. They are an outrage.” These texts resonate with broader cultural aspirations to eradicate the human conditions of frailty, dependence, vulnerability, and illness that might otherwise be viewed as a normal part of a long human life course.
IK: While some ideas of aging well focus on notions of ‘remaining the same’ person as in one’s earlier life, others place greater emphasis on change. In your work, you contrast the idea of an ‘ageless self’ with that of meaningful decline. What is it that imbues decline with meaning?

SL: That decline can be meaningful seems almost an oxymoron perhaps. But isn’t the fact that no person can live forever, or stay the same, what gives human life much of its meaning and urgency? The other day I came across a line I jotted down in a small notebook some years back: “Is not impermanence the very fragrance of our days?” The line is attributed to poet Rainer Maria Rilke from his book In Praise of Mortality. I often keep my eyes and ears alert for lines like these. I chose for the epigraph to Successful Aging as a Contemporary Obsession Japanese writer Haruki Murakami’s words: “One of the privileges given to those who’ve avoided dying young is the blessed right to grow old. The honor of physical decline is waiting, and you have to get used to that reality.”

How can physical decline be an honor? But I know that my own encounter with a serious form of cancer near ten years ago now was both terrifying for me and also gave me a beautiful, profound, heightened sense of joy in living. I now have a much greater admiration for the hoped-for fortune of living into old age, even if this means I must walk unsteadily to the end of the driveway to pick up the morning paper rather than run a marathon.

I also recall that medical anthropologist Arthur Kleinman reflected eloquently about how caring for his ailing wife, who was suffering from dementia, made him more present and taught him what it means to be fully human. He was also very sad and angry at times, as he realized that his wife’s disease would not go away. But he felt that by engaging more fully with the humanness of another through caregiving, his own humanness deepened. So, I’d like to use the critical, exploratory lens of anthropology to help myself and others better accept the normal human conditions of transience, decline, dependence, and need for care.

We all have to die; and we all will get old if we’re fortunate to live long enough. Why not try to accept and learn from the changes of age rather than deny them and shroud them in stigma? I’d like us to come to a point in my US society where not all situations of dependence, debility, and oldness in later life will be viewed and experienced as “outrages” or failures in living well. I welcome anthropology’s potential to evoke and enable differently viable modes of living.

IK: As people approach the end of their lives, their temporal horizons change. How would you describe shifting experiences of time among your interlocutors in India? In what ways were these experiences similar to or different from those of your interlocutors in the US?

SL: One thing I’ve noticed among my older interlocutors in India is that it’s super common to express a readiness to die, and a sense that one’s time in this life with this body is coming to near its end. One can’t expect, and doesn’t wish to expect, and is not supposed to expect, that they will keep on living and living. So, if I’m taking leave from an older person and say something like, “I’ll see you next year when I return,” a common reply goes, “Who knows if I’ll still be here then or not? I may not live that long,” or, “If I’m here when you return, fine; and if I’ve gone to the cremation ground by then, you won’t see me!” (Figure 3). These remarks are generally uttered cheerfully by people in around their 60s, 70s, and 80s and in good health.
Figure 3: Uma-di, 77, elder-home resident, Kolkata: “If I’m here when you return, fine; and if I’ve gone to the cremation ground by then, you won’t see me!” Courtesy: Sarah Lamb

Such ready-to-die statements became more vividly apparent to me after I began doing real fieldwork in the United States, because in the US, my older interlocutors, especially among the more elite, commonly express aspiring to live well into their 90s or 100 or beyond, and they do not often bring up the topic of death on their own. If I ask about it, people often dismiss the subject, saying something like, “I'll cross that bridge when I come to it,” or, “I really don’t think about death much. I prefer to live in the present.” My friend and interlocutor Purnima Banerjee of Kolkata, India, in her early 70s, would often speak about her readiness for death (and I would jot down her statements in my notebooks). She would say, “I am not afraid of death, because it is inevitable. Because I am born, I know I have to die,” and, “We have to accept decay. I have accepted,” and, “When clothes are worn out, you just take them off and wear new ones. The body is also like that” (Figure 4).

Figure 4. Purnima-di, early 70s, Kolkata: “When clothes are worn out, you just take them off and wear new ones. The body is also like that.” Courtesy: Sarah Lamb
It’s relevant that I do fieldwork mostly among Hindus in India, Hindu Bengalis. Hinduism is the majority religion in India, with about 80 percent of the population identifying as Hindu, 13 percent as Muslim, and the rest as Christian, Sikh, Buddhist, Jain, and others. Even those I know who do not see themselves as particularly “religious” tend to accept in a kind of taken-for-granted way that the soul lives on after death and is reincarnated. This perspective has a big impact on a person’s sense of temporality—the temporal horizon of the self is very extended, even if this one body and life will not, cannot, last forever. Purnima expressed:

The body will die, but the soul will not die. Wherever I go, I will go somewhere else. Those dear ones who have died, why should I cry for them? There is no use crying for a departed soul. God is a giver and a taker. Today is mine; tomorrow I will go, and the day will be someone else’s. I should not be sorry for that.

Another interlocutor, Mahamaya, commented when I asked what happens after death: “I can’t know the future—I don’t know if my next life will be good or bad.” But she hoped she would have the opportunity to become much more educated in her next life. “Of course, rebirth happens,” she replied to my silly follow-up question.

In the United States, I am finding that one reason the decline of the body and temporariness of life may be so hard for many to accept is that most people I speak with express little certainty that anything happens after death. This may be because I have been conducting my US fieldwork in the quite secular and cosmopolitan milieus of Boston and San Francisco. However, even many of my interlocutors who see themselves as religious express doubts about an afterlife. When a student research assistant and I asked an observant Catholic woman in her 80s if she believed in life after death, she paused, and replied, “I try.” The feeling of finite time left for oneself seems to motivate many older Americans to partake in the successful aging movement, in the sense of striving to make the very most of whatever time one has left to live, and to take all measures necessary—through medical intervention, diet, exercise, etc.—to preserve one’s one-and-only body.

For another perspective on time and aging, I love Ursula Le Guin’s essay, “In Your Spare Time,” written at age 80 and appearing in the collection of essays published after her death, No Time to Spare (2017). Le Guin is responding to a questionnaire she received from Harvard for the sixtieth reunion of the Harvard graduating class of 1951. Harvard asks, “What do you do in your spare time?” and tells respondents to check all activities that apply; the list begins: Golf. Le Guin wonders, what’s the meaning of spare time in your 80s? If the opposite of spare time is occupied time, then at age 80, all her time is occupied—occupied by living—perhaps even more than before, given how little time is left. She describes her many daily activities, including at her age, “mere bodily maintenance, which is tiresome,” and writing, thinking, reading, cooking, talking with her husband, meeting friends, walking when she can walk, Vipassana meditation, and lying down for an afternoon rest with her slightly crazy cat. She closes the essay: “None of this is spare time. I can’t spare it. What is Harvard thinking of? I am going to be eighty-one next week. I have no time to spare.”

IK: You recently undertook a period of fieldwork in India. What insights or perspectives is this new project bringing to the fore?

SL: My aim this past January 2020 was to explore new trends in ways of aging in and around Kolkata. Recently, my fieldwork in India had focused on never-married single women, so this January I was eager to get back to the topic of aging. One question for me was how and if globalizing healthy-active-
successful aging ideologies were being taken up in India, shaped and inflected by local cultural and political contexts. So, I was indeed struck by all the talk of “active” and “healthy” aging around me in India, evident in everyday conversations, news media, the health sections of women’s magazines, and new groups like Healthy Aging India. Kolkata’s parks in the early mornings and late afternoons were filled with older people walking, some also meditating, practicing yoga, and congregating on benches with their mostly gender-segregated peers, sporting white sneakers or Nikes and Adidas running shoes, as signs of their active lifestyles. Several women told me proudly how they were able to take control of their health and prediabetes by walking two kilometers daily around their apartment complex’s inner courtyard, or by taking a brisk morning walk around the whole village each dawn. Several emphasized, using the English term “active” even when speaking in Bengali, that good health in old age depends on staying “active,” or that if you don’t stay “active,” your health will not be good. At the same time, when I would tell Kolkatans about my interest in older people and exercise, or that I had heard of a neighbourhood gym catering to seniors, several laughed and said, “I don’t think working out for seniors is a very Bengali idea.”

Figure 5: The idea of the gym is really taking off in India, as part of a global trend emphasizing personal responsibility for keeping the body fit. Courtesy: Anindita Dutt

I was also struck this past January by the changing connotations of the old age home. When Lawrence Cohen and I first wrote about the emergence of elder homes in India in the late 1990s, we noted the prevailing sense that institutional care for the aged represented “bad families,” and a throwing away of Indian culture and of elders themselves (Cohen 1998, Lamb 2000). Ten years later when I conducted the research for Aging and the Indian Diaspora, old age homes still tended to entail stigma for both the elder and their family (Lamb 2009). But now, in 2020, I noticed how many were speaking of the old age home positively as an aspirational desire. True, I had been hanging out with a lot of never-married single women with no children to provide more conventional family care. But I was nonetheless struck by how even many older people with children were speaking positively of old age homes as sites of care, comfort, security, and even prestige. One group of women at a pleasant elder home on the southern outskirts of Kolkata exclaimed: “We came here wilfully! There is a long waiting list to get in! We were lucky to get a seat!” (Figure 6). Other people would tell me yearningly, “I wish I could secure a place in an old-age home for my retirement, but where would I get that kind of money?”
Of note is that ordinary ideas about old age in India highlight that older persons are deserving recipients of care, and that they will need care—just as people in the US imagine that children will need care and are deserving of it. The ideal of the successful older person caring for themselves independently, as Elana Buch describes in *Inequalities of Aging: Paradoxes of Independence in American Home Care* (2018), does not hold the same kind of appeal in India as it does in the United States. In the Indian context, the old-age-home is taking on the resonance as an aspirational site of secure care, for older people who are appropriate and natural care recipients.

Both of these interests of mine—in globally circulating healthy-active-successful-aging ideologies, and in new connotations of the retirement home—came together one evening when an older couple I had long known told me about a posh new retirement community “for active seniors” they had joined, Aumorto. The name Aumorto literally means “immortality,” and the institution had chosen “Young Forever” as its English subtitle or motto. Using our smartphones to look up their website, I read: “Aumorto is for those who choose to remain young, … people who may be retired but are far from tired.” The couple told me excitedly that the place even has a gym! And a swimming pool! They had bought into an apartment there, and presently divided their time between their ancestral home in Kolkata and the retirement community, where all meals are provided and a schedule of daily activities posted. When the couple invited me to go with them to spend a night at the place in one of its guest suites, I jumped at the opportunity.

Mr. Benoy Das drove us to the retirement community himself, with his wife Piyali sitting next to him up front, and me in the backseat sheltering two large boxes of Bengali sweets the couple was bringing to share with their fellow residents. As we left the urban sprawl of Kolkata and wove through the narrow roads of suburban villages with bustling roadside markets, Mr. Das grew increasingly excited. “See all the vegetables! Oh ho! Cauliflower, eggplants, carrots, beets! Oh! See all the fruit! Look at those guavas! Fresh and perfect—ready to eat! All from local trees! Look, there are trees in every direction!”
As we drove along, Benoy and Piyali told me more about Aumorto, emphasizing that it’s absolutely not an “old age home” (or briddhabas: abode for elders).

“If anyone calls it an old age home, we are very much opposed! Instead, what do they call it in your country? A ‘retirement’ – A retirement what?”
“A retirement home,” I replied, or “community.”
“Yes! Yes! Retirement home. That’s good. Because, you see, it’s better not to use the term ‘old’ (briddha), because we don’t think of ourselves as old! What do you think my age is?” he asked with a big smile.
“I don’t know,” I hesitated.
“Guess then!” Mr. Das urged.
“OK. 64?” I knew it must be more.
Mr. Das emitted an exclaim of delight: “Good! Very good!”
He took his hands off the steering wheel for a moment to clap.
“I’m actually 78! And I drive a car! I go out and mix with my friends! I still do some work! [He had taken two business calls already on the journey]. I’m very ‘active’! [He used the English term]. You see, I’m not old!”

As we approached Aumorto about an hour from Kolkata, turning off the main road to wind through fallow winter rice fields and past small mud-and-thatch village homes, Benoy pointed ahead, “Look! You can see our home now!” I spotted a large gated compound arising amidst the fields. Mr. Das pointed to the logo, “Young Forever.” “See! It is not an ‘old age home.’ We are young forever! Now, see all the flowers! Wonderful! See the roses!” The several multi-storied pristine white apartment buildings were surrounded by lush green lawns, decorative pools, and abundant flowers in bloom.

Figure 7: The Aumorto (Immortality) “Young Forever” retirement home, about 40 kilometers from Kolkata. Courtesy: Sarah Lamb
The staff greeted our car warmly, calling Mr. and Mrs. Das by their names, and taking our small bags to deposit in our rooms. As we entered the landscaped grounds around 5 pm, the various residents were coming out from their apartments, the ladies dressed up in fine saris and jewelry with intricately embroidered shawls. There was going to be a Baul folk music performance that evening, out on the lawn. I could keep on going, describing the scenes, and my lovely, pristine, pure-white guest suite with two bathrooms, a kitchenette, sitting and bed rooms, a large-screen tv, and a welcoming balcony overlooking the countryside. I enjoyed meals and conversations with the residents. One topic that kept coming up was the fact that the place had so many modern amenities, even a gym! But when I asked a small group over dinner if any of them go to the gym, they laughed, and said, “No! No!”

So, the next morning, I decided I should walk around to go see the gym for myself. I asked a few people where it was, but no one could say. I walked up and down the halls, and found the library, meditation room, art gallery, and infirmary, but no gym. My host Piyali said she thought maybe it was up on the roof level. But then a staff member corrected her, “No, it’s downstairs, on the third floor.” A lady resident standing nearby volunteered, “I’ll go with you. I haven’t seen it yet either.” The staff member went off to get the key, and we waited awhile in the hall. Finally, the staff returned and escorted us to the gym, which he unlocked. There was no sign outside to alert anyone to the room’s contents. The gym housed two small rooms with a filtered water dispenser and five pieces of new-looking equipment—two treadmills, two stationary bikes, and a rowing machine.

I asked the staff, “Does anyone use the gym?”
“Yes,” he sounded a bit doubtful. “Well, if guests come.”
“Oh, OK. Does anyone who lives here use it?” I persisted.
“Well,” the staff replied. “Yes, they could.”
Again, he sounded doubtful. “Well, if they find the time,” he added.

I smiled and jotted down his replies in my notebook. Doesn’t everyone living there have an abundance of time? I wondered. I then persuaded my lady resident companion to get on one of the treadmills for a photo, reassuring her that we would not need to actually turn the machine on. She slipped off her sandals out of respect for the machine, and mounted for a pose. She said happily that she would send...
the photo to her son. We walked out, and the staff re-locked the door. I should add that the ‘swimming pool’ I had heard of was not yet filled with water, and was shaped more like a lily pond than a medium for working out.

Figure 9: Posing on the treadmill. Courtesy: Sarah Lamb

So, I shared a longer story here than you likely expected. My visit to Aumorto brought to the fore for me a few things. One, I saw the allure of the posh new retirement community idea for elite Bengalis, who can imagine retiring in luxurious surroundings in the fresh countryside of their ancestral origins, yet surrounded by modern amenities, entertained by friendly peers, and cared for by attentive staff. Two, I witnessed many symbols of active and youthful aging as aspirations: Residents praised the fact that their place has a gym, and Mr. Das especially was delighted by the “young forever” motto of Aumorto (Immortality), while he himself cultivated a distinct persona of being not old. Third, I witnessed a sense of purposeful exercise for seniors, beyond walking, as more of a symbol – of modernity? of prestige? – than an actual practice.

When I left India at the end of January, just as the global pandemic was taking off, but before I was paying any attention to it, I had expected to return soon for more fieldwork. Now those plans, like so many others, are on hold.

IK: The ongoing situation surrounding COVID-19 and public health responses to the pandemic variously affect different age groups. Media reports have emphasized the vulnerability and isolation of older people in the US. At the same time, older people may have other memories of large-scale, life-changing events, which may afford them a different perspective on the current times. What were your impressions of the various responses of older people in India and the US to the pandemic and its challenges?

SL: When the COVID-19 pandemic hit, I had to adjust to virtual fieldwork. I’ve engaged in informal communication with friends and interlocutors in India, via WhatsApp, email, Google Meet, and Zoom. But my main research these past few months has focused on older Americans. So far, I’ve been spending time virtually with 20 primary interlocutors ranging from ages 67 to 93. None are living in institutions, and they all describe themselves as economically comfortable or privileged (although some were raised
They are of various race-ethnicities, including white and Black, and live mostly in Massachusetts and New York.

Figure 10: Zoom fieldwork in pandemic times

We are all inundated by news of the heavy toll the novel coronavirus is taking upon vulnerable older people. But in my conversations with older Americans, what has struck me most is a strong sense of resilience. Common themes in the interview conversations are that the pandemic is less hard on older people than on many younger folks, and that many older people are able to maintain social connections, meaningful activity, and a sense of control over their own health, even amidst lockdown.

“Even though I’m 93 and have lived a very long time, I have never experienced anything like this!” exclaimed Walt over Zoom with a huge smile on March 27, 2020, twelve days into the “lockdown” of his state of Massachusetts. But when I ask older people, “Is the pandemic harder on the older or younger generations?” I’m struck that most reply that it’s harder on younger people. Sure, in terms of physical health, older people are at higher risk of developing serious complications from the disease. But because they have already retired and fashioned the large contours of their lives (marriages, careers, education …), many imagine that, compared to the young, the quarantine is less disruptive to their daily routines, incomes, and aspirations.

Many also describe a resilience that comes with age and accrued life experiences, giving them strength and insight to brave the pandemic. Shirley, age 69, reflected, “Older people tend to be a lot more flexible and creative. The more experiences you have, the more ways you have to look at life.” Harry, age 73, told of how this pandemic brings to mind his Vietnam War experiences, where he first developed resiliency. To my anthropology students on our group Zoom chat, he recalled:

I was dealing with something really scary when I was your age, 19 years old in Vietnam, and there was no guarantee I was going to come back. … I wasn’t the fastest. I wasn’t the strongest. I was scared! You know, I was a kid from the Southside of Chicago and suddenly at 19, I’m confronting this craziness and confronting my mortality. So, now
you may be confronting your mortality. … But what you learn from this experience … can help prepare you for your future.

Pointing to his six other older friends on the group chat, he said, “We all, you know, we’ve overcome a lot. … I guess the message about aging is that resiliency is really important.”

My older US interlocutors also report being motivated now, more than ever during the pandemic, to take daily walks, engage in virtual exercise classes, and interact online and outdoors with family and friends. Many are proud and buoyed by their regimens of healthy diets and supplements. Walt at 93 exercises avidly every day (“It’s almost an addiction!”), and quickly adapted to holding the music appreciation class he teaches through his temple over Zoom. When I asked Gayle, 84, how she was doing with the pandemic, she replied, “I’m fine! I have a deck. I can have one or two people over for lunch 7 days a week. If it’s cold, we either drink more wine or bundle up!” Ken, age 75, remarked, laughing: “Zoom has become even more popular than toilet paper!”

In India, a common theme among those I am in conversation with about the pandemic is the humdrum and taxing travails of quarantined life without domestic staff, and how performing all one’s own household work is especially hard for older people – who should at this life stage be the deserving recipients of household labor rather than its main providers. I must note that my conversations since the pandemic began are restricted to people from the middle and higher classes, those with technology to communicate easily abroad. After Shrestha and I reassured each other that our health is still fine, Shrestha, age 70, commented via WhatsApp in early April: “No domestic help. Ajay [my husband] and I are cooking, mopping, cleaning.” Medha, age 60, fearful about the safety of my father and stepmother in the US (“they are elderly people”), sent a WhatsApp message to check in, and then commented on the terrible plight of the poor laborers in her country under lockdown, and the trying domestic situation for older people: “Everybody has to do every household work himself. Even the lonely elderly sick people have to do everything.”

These discourses lead me to consider the ways old people are figuring into public imaginaries of the pandemic. Although we hear some talk of the naturalness and even social-economic benefit of “culling the herd,” so to speak, by allowing greater numbers of elderly persons to die, we hear even more proclamations of the value and belovedness of older people: If not to protect ourselves, we should each be practicing social distancing and wearing masks in order to safeguard vulnerable others, namely the cherished elderly among us. So, for instance, the college youth who was first criticized for partying over spring break on the beaches of Florida (“If I get corona, I get corona”), later performed over Instagram and on CNN a big apology saying that he hadn’t intended to harm others, and that he has “elderly people who I adore more than anything in the world and other family members who are at risk.”

Anthropologists are well situated to scrutinize the varying ways such public discourse on the value of older people plays out in different contexts. An India Today story on “How to Protect Elderly People from Covid-19” mobilizes a common Indian paradigm of intergenerational reciprocity and indebtedness to motivate care and vigilance, namely that elders are deserving of love and care now, because of how much they sacrificed for you and gave to you in the past:

If this [all these protective measures – social distancing, wearing masks, sanitizing doorknobs, etc.] appears a difficult task to do, close your eyes and think how much you love your elderly. If this is not enough, close your eyes again and think what all they sacrificed during their youth while you were an infant, a toddler and a vulnerable teenager. This is your payback time.
IK: COVID-19 is an event par excellence: it is one of those events that truly mark a juncture in history, and which brings a range of social and existential issues to the fore. The peculiar situation that some older people find themselves in pertains directly to the question of the ‘ends of life’: one’s experience of time as one moves towards the horizon, and questions around what matters or gives life meaning are both thrown into relief. Did some of your conversations touch upon themes of meaning and time?

SL: Yes, the COVID-19 pandemic has brought existential issues to the fore for many older people. Although I’ve found over the years that many Americans prefer not to talk much about their own approaching mortality, more are now bringing up the topic on their own. All people over age 65 are hearing constantly about their vulnerability to the disease. My interlocutors have reported how the virus has motivated them to make sure their affairs are fully in order, and to communicate any special directives, including pet care, should they suddenly drop dead. Jack, age 71, recounted to me and several friends over Zoom, “I used to think I was invincible and invulnerable. … This event has awoken me to my vulnerability.” He told of how he and his granddaughter Sophia met outside in the driveway after Sophia’s mother cautioned the girl again not to touch her grandfather. Sophia asked, “Grandpa, are you going to die?”

Peter, age 73, highlighted how the pandemic has amplified his sense of the time limit on his lifespan:

Each day that passes is one day less than I can play baseball with [my grandson] Elliott. That personal sense of our mortality and the limitation of one’s days – it’s not crippling; I need to press on – but that shadow is taking a clearer outline now. Even if you feel great – I feel terrific now – you also know, there’s a time limit on that. And every day we spend inside is a day missed.

Cynthia similarly invoked her intensified sense of moving quickly now toward the limits of her timespan: “OK, so we just turned 70. Say we have ten more years to live. If we spend two of them locked down, that’s 20% of our remaining lifespan.” She disagreed with others in my study that the pandemic is even harder for younger than older generations, because missing one or two years of regular life will only be a fraction of remaining time for a 25-year-old. The young have years of future ahead, while the old are seeing now their approach to the ends of life.

IK: This brings me to the last question, which underpins the contributions to this special issue: what form does hope take, as older people approach the ends of their lives? How is hope experienced, and kept alive, while traversing endscapes - the shifting and uncertain terrain of life’s end?

SL: Hope always has to do with the future, right? – a feeling of aspiration for a certain future thing to happen or not happen. I often ask older interlocutors, “What more wishes or hopes do you have in life?” – aiming to get at their sense of what the future holds, and what really matters, as one approaches life’s end. Some in India reply that there is not much future left – for them, in this life, as individuals – so what more wishes would they have? Subhagi, a Bengali day laborer at about age 60, cheerfully replied when I posed the question of her future wishes and desires, “What more will happen in the future? It’s already all happened!” She laughed. “Now when I die, they [all the younger ones in her family] will be the ones to see what happens. How many more days will I live? My age (bayes) has already come!” A few continents away, in the U.S., Walt at age 93 expressed a similar sense of limited need for future hopes: “I don’t think as much about hopes for the future at my age. When you’re younger, you think, ‘Next year, I’ll do this. Or maybe the year after. Or in two years, or five years.’ Well, we don’t think like that anymore. It’s too iffy. I increasingly think about today – what I want to do today.” Such replies are
not despairing, but rather articulate ways that the future in old age belongs more to others than oneself. And this is OK.

Yet one hope that looms large for older people across the world is the hope for good health. In India, despite the perceived normalcy of human transience and decline, many older people still talk of wishing to die “while their hands and feet are still working,” before they become completely bedridden or hooked up to hospital machines. In the US, my older interlocutors talk of hoping to die quickly of a heart attack rather than by stroke or dementia, and some divulge plans with friends to secure life-ending medications if the need arises. The key motive here is to avoid the spectre of becoming a “burden” on their children (anathema to most Americans) and of “losing who you are” – an identity intimately tied to an enduring, fit bodily and cognitive self. Such hopes for long-lasting good health connect back to the successful aging movement we began by discussing.

Amidst the pandemic, hope is taking on an intensified and uncertain quality for many older people, who hope both to stay safe and not succumb to COVID-19, and to be able to return to ordinary social interactions in a time frame relevant for them, before the ends of life. This past March 2020, two Kolkata women in their middle and older ages emerged from the shelter of their homes to participate in the celebratory spring festival of Holi (Figure 11). During Holi, people come outside carrying powdered and liquid colors to throw and smear on the clothes and faces of neighbors, friends, and relatives. Anindita, on the left, sent me the photo to help with my virtual fieldwork. With the pandemic on the rise, although before India’s official lockdown had begun, many in India approached Holi with more caution. But my friend Anindita found other older neighbors celebrating at the local school. “Indians overall have a c’est la vie attitude,” Anindita commented, and many old people “feel depressed bolstered indoors.” Let’s live today and paint each other with colors now.

Figure 11: Pandemic days: playing with colors during Holi, March 2020, Kolkata. Courtesy: Anindita Dutt

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Notes

10. Many urban Bengalis envision their ancestral roots in village life, the “real” Bengal, and schoolchildren across India are often asked to write essays about “my village.”

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