Chapter 7
LIFE OF THE AGED IN SALT LAKE CITY

Introduction
In India the social institutions, like family, kinship, caste, religion, language and community, continue to determine the urban life. This is true notwithstanding the micro changes that modernization has inflicted on them. In the West as well, despite its identification with crude individualism, some recent studies point to the continuation of social and community values that constitute the foundation of collective life. This observation of the Western scholars gains special significance when the Indian scholars almost habitually look at the Indian situation in binary opposition to the West. This point has been dealt with in details in the conceptual framework in Chapter 1. It is therefore important to see how the individual (self or agency) and the collective (the group or the community) interplay and whether there is a universal commonness in the process. While examining the life of the elderly in an urban setting, Salt Lake, we have to look at it in relational terms in a particular cultural setting in terms of family, kinship, friendship, neighbourhood or community.

The spatial locale of Salt Lake
Salt Lake is a planned satellite township originally conceived by the second Chief Minister of West Bengal in the 1950s to ease the ever growing demographic pressure on old Calcutta. The swampy stretch of land on the eastern fringe of Calcutta was filled with sand for seven years and the city was born on 16 April 1962. By 1965 Sector I was complete and by 1969 Sector II and Sector III were ready for occupancy. Added to it were the industrial sectors – IV and V. The 12.52 sq. km. area initially had 12873 plots of land apart from 87 housing estates and blocks. The land area has almost doubled now with the inclusion of
The township is divided into blocks, each block having a central park and a community centre, wide roads, market complex, well-planned houses of the middle- and upper-middleclass people, mostly the government (both State and Central) officers, retired judges, administrative and police officers, bank officers, government employees, business persons, housing complex for the low income groups and so on. In the 1980s a large number of government departments had shifted to newly-constructed multi-storey buildings. There are a large number of government and private hospitals, branches of government and private universities, colleges, IT offices, rest house of many Indian states, central government offices, an international bus terminus and so on. The township is well connected with the other parts of the city; the national and international airport (at Dum Dum) is also close by. With all its facilities Salt Lake is a coveted place for the middle and upper-middleclass people. Apart from the facilities and locational advantage the township is a status symbol; the Bengalis, settled in Europe, America and Middle East prefer to buy flats/houses in Salt Lake. In the 1980s and 1990s the State government constructed many housing complexes with private collaboration under the supervision of West Bengal Housing Development Board and distributed flats to government employees of all categories. There was also an arrangement for distributing land to cooperative societies, formed by groups of people known to each other, who in turn constructed cooperative housing complexes.

**Life of the elderly**

The kind of life the elderly live could be measured in terms of economic status and material comfort at their disposal, the health status, the sense of security, the quality of family relations, the health of kinship and neighbourhood relations, the community and creative activities, the political activities and sensitivity towards the sufferings of others, and so on.
Much of family life of the elderly depends on the composition of the family and household, the values that the family members cherish, and their will to love, respect and care for each other and particularly the aged who constitute a special category, as they are usually dependent on the care and support of other members. The families being generally small and households being even smaller (we have already discussed this in Chapter 3) the nature of attachment is expected to be thick when all members share a common hearth and house. The number of children being one and at the most two, the middleclass parents take all possible care in rearing up their children, extend all love and protection just to see them doing well, which, in turn, becomes a point of pride and gratification (and a status indicator). When the younger members disperse because of marriage and career compulsion the parents miss them badly and the urge to care and love grows even denser; the elderly long for their dispersed children endlessly. The life of the elderly continues to rotate around their children and grandchildren; longing for the dispersed children never ends. They draw pride from the achievements of their children and grand-children and get sad and depressed when they are in trouble. They also spend a lot of time reflecting on their past life, recollecting good and bad experiences. The modern communication and transportation system keep them in touch. Generally speaking the downsizing of family because of fertility check has made the family members emotionally dependent on each other more than ever before. Yet there could be tension in the family relations which hurt the elderly the most as they did their best in upbringing their children and expect love, respect and care from the latter. But such instances are exceptions rather than the rule. On the whole the key to happy late life is the healthy relations among the family members. In Chapters 4 and 6 we have discussed household and family composition and family relations at length which give us some idea of the treatment of the elderly by the other members of the household and family.

There is no denying that divorce, extra-marital affairs, desertion, ill-treatment of the wife and the elderly are there as a part of urban middleclass life but they are still considered aberrations and are not approved by “conscience collective”
of the society. In our study we have seen only one case of divorce, although there were cases where the elderly complained not of ill-treatment but of neglect at the hand of their daughter-in-law and even son.

The study has explored the life of the elderly (as well as other members) outside the family as well. The elderly exercise their individual self, maintain relation with the kin outside the households, participate in informal group activities, in the activities of the neighbourhood community, involve themselves in corporate life like social service, non-governmental organizations, participate in mass organizations and political parties, engage in creative writing, performing arts and so on. The urban elderly in a place like Salt Lake are generally rich in terms of experience and control over “social and cultural capital” (to use the phrase of Pierre Bourdieu) and they have a choice to utilize these resources to serve the immediate community and the larger society and, at the same time, remain creative and socially meaningful in old-age.

Taking the total 54 respondents from Salt Lake together we have found that 51 (94.44%) have claimed that they maintain an affable relation with their relatives and extended kin who live in the city and outside. The quality and thickness of relations vary widely; with some they maintain very close relation while with some others they have cut all relations. The elderly generally maintain good contact with their larger kin over phone. They enquire about each others’ wellbeing, share information on important happenings in life, and come forward to each other’s help at times of crisis. They organize family programmes like marriage or birthdays together or at least actively participate in such programmes. During festivals like Durga Puja, Poila Baisakh they visit each other’s place, exchange occasional gifts. Most of the aged informed me that at the time of crisis they received help and support from their kinsmen.

The elderly generally maintain cordial relation with their neighbours. Out of 54 respondents, 48 (88.89%) have said that they maintain a very warm relation with their neighbours. It is not that the aged respondents visit their neighbors often, but whenever they meet them (in reality they often meet) in the market or in the street or in social and political programmes they exchange regards and wish
each other. On the occasion on Lakshmi Puja, Saraswati Puja, birthday or wedding anniversary they visit each other’s place. Besides whenever the aged respondents face any trouble related to their flat/building they seek help from their neighbors. The neighbors occasionally visit each other’s place for chatting. Many of the respondents have said that since the children have dispersed the roles that they should have played are now partially played by the neighbors and friends. This relation of togetherness fills in the vacuum in the life of the aged which has been created after the dispersal of the children or death of the spouses.

Each block in Salt Lake has a park and a community centre and a community hall. An elected block committee (election is fought on party line) secures the right to run the community centre for one year. The block management committee manages the assets, keeps accounts, and organizes community programmes like Durga Puja, Poila Baishakh, Saraswati Puja, and Rabindra Jayanti and cultural programmes on some other occasions, where the elderly members (both the committee members and non-members) play an important part. The elderly who are not part of the organizing committee also participate in the programmes with great enthusiasm. They celebrate the festival of colors (holi) together. The residents of a block can hire (at a rate periodically fixed by the community management committee) the facilities in the community centre for organizing family programmes like marriage, *sradh*, *annaprasan*, and so on.

Other aspects of the life of the elderly in Salt Lake could be grasped looking at their larger group activities, like peer group, and participation in mass organizations, creative activities like group theatre, writing and political activities.

Most of the elderly have health concerns, minor, moderate or serious. Family members, neighbours and larger kin (beyond immediate family) come forward at the time of health crisis, like serious illness that requires hospitalization. But in everyday life the elderly live with a well-worked out self care system. This reflects in regular visit to doctor, periodic health check-up, morning and evening walk, disciplined food habit, restriction on movements, taking of medicine on time and so on. In some cases they become bed-ridden and that requires a different kind
of arrangement, including hiring of services of the professional care givers. Daily routine of the elderly, which depends much on the family locale and health condition, also reflects the nature and quality of their life.

In this section we will explore how all these work in the life of the elderly in Salt Lake through the following case studies.

(1) Mrs. B Banerjee (70) has been living in her apartment at CK 92, Salt Lake, since 1998. It’s a 1500 sq. ft. flat with three bedrooms, a drawing room, a kitchen and two washrooms. She lives here with her son, daughter-in-law and grand-daughter. Her husband died when her son was eight year old.

Mrs. Banerjee was a school teacher and she gets monthly pension. She also draws interest from her savings in bank. With her own money she can buy gifts for the family members and relatives and particularly for her grand-daughter. Every month she contributes decent amount of money to the family expenditure.

Mrs. Banerjee’s son, an MBA, works as public relations officer in a multinational company in Sector V, Salt Lake. As human resource manager he has to spend a lot of time in the office. But he does not forget to take care of her mother. He spends the weekends with the family. He is very caring; whenever Mrs. Banerjee falls sick he takes her to the doctor. When busy with his office work he tells his wife to take her to the doctor.

Mrs. Banerjee’s daughter-in-law takes good care of her; she cooks food and does all the household chores. They have a maid who comes everyday for cleaning, washing and dusting. But Mrs. Banerjee and her daughter-in-law together cook the meals. All family members take supper together. Sometimes, when she feels low and depressed her son and especially her daughter-in-law can read her face and do their best to make her feel good. She also draws pride of the fact that her daughter-in-law is a trained Rabindrasangeet singer. Her son married in 2006 and in 2007 her granddaughter was born. Now she is six year old and goes to school. Her grand-daughter has become the new centre of attraction in her life. Mrs. Banerjee spends all her time with her grand-daughter.
Mrs. Banerjee wakes up early in the morning as her grand-daughter has to leave for school at 6 a.m. After she leaves for school she again sleeps for a while and then at around 7:30 a.m. she wakes up and makes tea for all the members. When her son and daughter-in-law wake up they all have tea together. After that she and her daughter-in-law go to the kitchen to prepare food. At around 10:30 a.m. her grand-daughter comes back from school. Then her daughter-in-law takes her for bath. In the meanwhile she serves her son food. After her son leaves for office she spends time with her grand-daughter. The little girl loves playing “teacher” and Mrs. Banerjee has to play her student. Her grand-daughter then takes her class imitating one of her school teachers.

Around 1 p.m. Mrs. Banerjee takes her bath and offers puja. After having lunch her grand-daughter sleeps for a while and at that time Mrs. Banerjee reads newspaper and takes some rest. In the evening she again plays with her grand-daughter and then takes her evening tea. When her grand-daughter does her homework she watches television (Bengali serials) for some time. When her son returns around 7:30 p.m. she makes some snacks for him as her daughter-in-law helps her granddaughter in her homework. At around 10 at night all of them take dinner together.

Mrs. Banerjee does not have time to feel lonely or get bored. She is busy doing household chores along with her daughter-in-law. She misses her husband very much. She feels that had he been alive he would have been so happy to be a part of this family, particularly in the company of their grand-daughter.

Mrs. Banerjee doesn't have any serious ailment but suffers from high blood pressure and takes medicine for that. She also has high uric acid which gives her occasional trouble. She does regular exercise to keep the problem under check. She doesn't go out for walk; she does some free-hand exercise at home in the morning.

Mrs. Banerjee maintains good relation with all her relatives, including her in-laws. When her husband died she got all kinds of support from them. She feels really happy to have such in-laws. Now she can't visit them on regular basis.
because of her age and health as well as the distance but she maintains contacts over telephone.

Mrs. Banerjee’s neighbours know her well and are helpful. At times of need they have always extended their help. She doesn’t visit their houses as she loves staying home and spending time with family members. She however visits her relatives and neighbours when invited on social occasions.

(2) Mrs. A. Roy (68) has been living in her own flat at DL- 221, Salt Lake with her husband (73) since 2000. It is 1100 sq. ft. flat consisting of three bed rooms, a drawing room and a kitchen. Her only daughter lives in Muscat with her family. Mrs. Roy had a physically challenged son who died in 2011 at the age of 37.

Mrs. Roy and her husband were employees of AG Bengal; both are retired now. Mrs. Roy and her husband together get a monthly pension of Rs.50,000. She watches television, uses cell phone; has music system, refrigerator, washing machine, and microwave. She has high blood pressure and suffers from chronic pain in her legs.

Mrs. Roy’s daughter visits her parents once a year from Muscat. Every alternate day they converse over telephone. They sometimes do video chat on Skype. Mrs. Roy is very happy about the fact that despite being in Muscat her daughter and son-in-law take all possible care of them.

As she has two maids Mrs. Roy doesn’t have much to do in home-making; she enjoys enough leisure time. Mrs. and Mr. Roy have health insurance policy, which largely takes care of hospital charges. Physically they are in good shape and can take care of the daily activities; they can manage without taking much help from the relatives and neighbours.

Mrs. and Mr. Roy maintain a very warm relation with their neighbours in Nonamati Housing Cooperative, who are helpful and nice human beings. When their son died everyone came to their place and extended their support. Mrs. Roy loves to chat with people but because of her knee pain she doesn’t go to her neighbours’ houses. It’s not that all the neighbours visit each other regularly but they keep information about everyone and when somebody is in crisis others
always show their support and solidarity. In 2012, one of their neighbours’ sons committed suicide. When they got to know about the incident they rushed to the house and stood by the family. That time Mrs. Roy had severe knee pain; in spite of that she visited the bereaved family several times. Durga Puja in the community hall is a community affair as all the members take part with great enthusiasm. All the community members take lunch and dinner together during the puja days. They take part in the cultural programmes that are organized during the puja days.

Mrs. Roy loves to travel. She has a group consisting of five aged women; the senior most in the group is 82 while the junior-most is 58. Last year they all went to Ranchi. This year they are planning a trip to the Dooars in Jalpaiguri district but because of her knee operation early this year, she is not sure about her participation. Together the members of the group meet occasionally and have fun together.

Mrs. Roy is a member of Coordination Committee, the trade union of the government employees affiliated to CPI (M), of which her husband is a leader. Her attachment is only moral and ideological; she has stopped taking part in the activities of the organization since she has developed knee problem. Sometimes she and her husband host informal meetings of the members of the trade union in their house; she takes part in discussions.

A significant event in Mrs. Roy’s life is the reunion day. All her university-life friends meet at a selected place on a particular day. Some of her friends are now IAS, IPS officers; some are school, college or university teachers. Her friend Mr. N. Dasgupta, who was a high ranking officer of West Bengal Government, takes a lead role in organizing the get-together. Sometimes the get-together is organized at his residence in Salt Lake. All day long they chat, sing, make fun and have delicious lunch together. She feels happy about the fact that although they left the university long back they are still in touch and they enjoy each other’s company.

Mrs. Roy’s husband goes to the Coordination Committee office and does some organizational activities every day. He listens to the problems the members
of the trade union and advises them about the way outs; he also writes petitions for them and makes arrangement to send them to higher authorities for consideration. The members of the coordination committee try to sort out the problems through dialogue with the higher authorities.

Mrs. Roy wakes up early in the morning but she doesn't leave the bed. Her husband prepares the morning tea. After making tea he calls her up. She then reads newspapers. Around 9 in the morning Mrs. Roy and her husband have coffee together. That time Mrs. Roy and Mr. Roy take breakfast together. Then her maid comes to cook. This maid also shoulders the responsibility of buying the vegetables and fish. As the maid starts preparing food Mrs. Roy helps her in the kitchen. The cook also comes in the evening and makes roti and a sabji.

Around 11 a.m. a lady comes for her physiotherapy. After doing exercise for an hour she takes bath. Then she does puja. Around 1:30 p.m. Mrs. and Mr. Roy have their lunch together. The lady who comes for Mrs. Roy’s physiotherapy stays with her the whole afternoon to take care of her. She waters the plants placed at her balcony, chats with her, brings the washed clothes from the terrace, and does shopping from the local market. She also prepares the evening tea and makes snacks. In the evening Mrs. Roy offers puja for a while. Then she makes tea for herself. While having tea she watches television programmes. Mr. Roy returns home around 8 p.m. They together have another round of tea. Her husband then watches television and Mrs. Roy reads story book. Around 10 p.m. they have their dinner. Her daughter comes on Skype at around 11 at night. After talking to her daughter they go to bed around 11:30 p.m. Mrs. Roy doesn't have any restriction on food. However on health consideration they prefer to take less oily and less spicy food. They eat a lot of vegetables and fish of many kinds.

Mrs. Roy defines her relationship with Mr. Roy as one of partnership and mutual respect. She does not have any memory of domestic violence in the hands of the in-laws; she couldn't recall any incident of being insulted by her husband.

Asked on loneliness Mrs. Roy said that throughout her life she was surrounded by so many people. Now at this age as her son is no more and
daughter is away her husband is her best friend and companion. When her husband stays at home she doesn’t feel lonely but when he goes out for his work she feels really lonely. She has always loved to chat with people to meet new people and interact with them. But at this age the kind of loneliness that she is encountering is really painful. She misses her daughter very much and would have loved to have her close by. But, she can’t be so selfish to ask her daughter and her family to shift to India just because she is feeling lonely.

Earlier, Mrs. Roy used to cry seeing her son in convulsion and other kinds of sufferings he had to take because of his handicaps. She defines his death as *mukti* (freedom) from all his pain and sufferings. He is in peace now. Sometimes she sits in front of her son’s photo and chats with him in silence. She tries to find her son in the photos of the old albums and feels very nostalgic. When her husband stays outside she tries to keep herself busy reading newspaper, story books, watching television and chatting with her maid; sometimes she calls her relatives and chats with them. She really feels that people who feel lonely should engage themselves in activities, like reading and writing or in social work.

(3) Mrs. K. Moitra (68) has been living with her sister in her own flat at A6/2 Karunamoyee Abasan, Salt Lake, for the past two and a half years. It is 600 sq ft. flat with two bed rooms, and a drawing room. Her only son, a CA, works with World Bank in Australia. Her husband died in 2006. Mrs. Moitra is a graduate and so was her husband, who was a state government employee. Mrs. Moitra has always been a housewife. Mrs. Moitra draws her husband’s pension at the rate of Rs. 20000 a month. She uses modern gadgets like cell phone, fridge, music system, micro woven, washing machine, and air conditioner. She has high blood sugar but physically active.

Her son came from Australia for the marriage in 2000. After marriage he took his wife to Australia where they live with their children, a son and a daughter. Her daughter-in-law also does a job in Australia. They come once every year to India. They keep contact over telephone and email. Both her son and daughter-in-law care for her. When Mr. Moitra died in 2006 her son had rushed to Kolkata, did all
the works singlehandedly and he stayed with her for about a month. Then he
took her to Australia, where she had stayed with her son and daughter-in-law for
four months.

Mrs. Moitra likes to do her own work herself. Her husband’s pension is good
enough for her to live decent life. However, her son keeps sending her money.
Mr. Moitra was very ill in 2000. He was a COPD patient and had to go for medical
checkups thrice a month. He had to take a plenty of medicines. The expenditure
on his treatment was huge; Rs. 60000 to Rs. 70000 every month, which was
borne by her son.

Mrs. Moitra came here two and a half years ago so she doesn’t know her
neighbours well. She knows only a few of her neighbours and tries to maintain
good relation with them. Earlier she was living at Falguni (another block of Salt
Lake) and had very warm relation with all her neighbours. When her husband fell
seriously ill in 2000 the neighbours at Falguni took him to hospital and informed
their son about his father’s illness. Even now she maintains a very warm relation
with all of them.

Mrs. Moitra’s wakes up early in the morning. Having a cup of tea she reads
newspaper for some time. When her sister wakes up a little later she makes
another round of tea. Usually Mrs. Moitra cooks food herself; her sister helps her
in the kitchen. Around 10:30 a.m. she and her sister have their breakfast. By
12:30 she completes her cooking and takes bath. After that she does puja for
some time. Around 2 p.m. she takes her lunch with her sister. After having lunch
Mrs. Moitra usually goes to the party [she is an active worker of the Communist
Party of India (Marxist)] office for meeting or for some other organizational work.
When she stays home she watches television with her sister. Then in the evening
she and her sister sit at the balcony and have tea together. They watch some
television programmes in the evening. Around 10 p.m. they have dinner together.
By 11 p.m. she goes to bed.

Mrs. Moitra has high blood pressure and blood sugar and therefore takes
care about her food. She uses very little oil, salt and sugar in the food. She loves
to travel. Every year she tries to visit some place in India with her sister. This
year they are planning to go to Rajasthan. Her elder sister remains ill all the time and therefore Mrs. Moitra does most of the household works. Twice a week she goes to the market. Mrs. Moitra takes most of the decision in the family and her sister gives her approval.

Some of Mrs. Moitra’s relatives live in Kolkata and she maintains good contact with all of them. Her elder brother-in-law (boro vashur) died few years back. She maintains a very good relation with her widow sister-in-law and keeps contact over telephone. She also has a good rapport with her mejo vashur and his family. Mrs. Moitra’s elder brother died a few years back and she maintains a very friendly relation with her elder brother’s wife. Quite often she visits her. Her elder sister has died as well. Her elder sister stays with her in this flat. In the time of crisis, particularly when her husband died and her sister had angioplasty, she got support from her close relatives.

She sometimes feels lonely. But she has accepted this fact of her life since she cannot change this. She misses her son and grand children very much and waits for the whole year for them to come. Whenever she feels lonely she watches television or chats with her sister. Her son has decided to settle in Australia permanently. She doesn’t feel bad about that because she knows that it would be foolish on his part to let this opportunity go.

When her husband was alive she was politically more active; their house was open to the party comrades. Now she is associated with Akhil Bharatiya Ganatantrik Mahila Samity (the women’s front of the party) and works for the party; she is active in meetings, rallies, and many other organizational works. She spends most of her time with the comrades and party members.

Mrs. Moitro always felt at home in the midst of her in-laws. She has a caring son, who is well-established and is happy with his family. She is getting old and is aware that with growing age various ailments will cripple her. She is aware that she can’t do much about it. She does not want to live in fear thinking too much about her health. Now the only thing that worries her is her son’s health and wellbeing.
(4) Mrs. G Banerjee (78) lives alone in her own flat at EE- 121/5, Salt Lake. She has been living in this flat since 2001. It is a 1200 sq. ft. apartment consisting of two bed rooms and a drawing room. Mrs. Banerjee’s only daughter was married in 1989.

Mrs. Banerjee taught in Women’s College Hastings House until her retirement. Her husband was a state government employee posted in Writers' Building, the state government secretariat. Mrs. Banerjee gets a monthly pension of Rs.27000. She watches television and uses other modern gadgets. She reads a lot of books. She also spends a lot of time in writing. She has high blood pressure and blood sugar.

Her daughter teaches in a Govt. School in Kolkata and lives nearby with her husband and son. Her’s is a morning school. Earlier when her grandson was small Mrs. Banerjee had to look after him during his mother’s school hours. Now her grandson has grown up; he is going to U.S.A. for doing Ph. D.

Although Mrs. Banerjee stays alone in her flat her daughter and son-in-law, who live close by, take all possible care of her. Her daughter visits her twice or thrice in a week. She sends her driver who shops daily vegetables and grocery for Mrs. Banerjee. Besides she calls Mrs. Banerjee several times a day. Whenever she feels sick her daughter rushes in and stays with her. After Mr. Banerjee’s death her daughter asked Mrs. Banerjee to stay with them. But Mrs. Banerjee didn’t want to leave her flat where she lives in freedom.

Mrs. Banerjee maintains good contact with all her relatives. In flat culture people don’t really go to each other’s place. But her neighbours keep enquiring about her health. She has a very good rapport with Justice Chatterjee’s wife who stays in the ground floor. She also has very good relation with a doctor’s wife who, stays beside her. They don’t visit each other regularly but everyone in the building is very concerned about each other. When her husband passed away she got enormous help and support from all her neighbors.

Mrs. Banerjee maintains a strong bond with her relatives particularly with those of her own family, all her brothers and sisters, who are scattered in the city. Her relatives visit her occasionally and maintain contact over phone. She also
calls them frequently. On social occasions she meets her relatives. Last month, she attended a function on the occasion of her younger brother’s grandson’s *upanayana*; met all her siblings and other members of her family of orientation. She also has contact with her-in-laws. Her sisters-in-law visit her occasionally. When her husband died they all came and stood by her. For many years Mrs. Banerjee’s ailing mother, a widow, lived with her and she took good care of her.

After her husband’s death Mrs. Banerjee feels very lonely at times. Earlier she used to spend a lot of time chatting with her husband. Her husband used to study a lot. She also loved reading books but now due to some problem in her eyes she can’t read for long. He was fond of Rabindranath Tagore. He used to read out poems from *Sanchaita* to Mrs. Banerjee.

Getting up around 6:30 in the morning she makes tea for herself. While having tea she reads the newspaper. After taking bath she reads old magazines or books for a while. Around 10:30 a.m. her domestic help comes. Mrs. Banerjee supervises her work. Around 12:30 p.m. she takes her lunch and rests for some time. In the evening she sits in the balcony with a cup of tea, playing music. She then watches television for an hour or so. Around 9:30 p.m. she takes dinner and by 10.30 she goes to bed. She has hired a lady cook who comes in the morning and in the evening to prepare lunch and dinner. Sometimes her daughter comes and spends the night with her. In order to cope up with the loneliness she listens to music, watches television or reads books but these are no replacement of the warmth of human touch. She doesn’t feel scared in staying in this flat alone. The security of this building is very tight and Justice Indrajit Chatterjee stays in the ground floor and she has very good relation with them. Whenever she feels any problem she immediately calls him to find a solution.

Mrs. A Goswami (65) has been living in her own apartment at DL 12/2 Salt Lake since 2000. It is 1100 sq. ft. flat which has three bedrooms and a drawing room. She lives here with her elder daughter, son-in-law and granddaughter.

Mrs. Goswami is a graduate and so was her husband. Her elder daughter is a doctorate and her younger daughter, who is no more, was M.A., B. Ed. Mrs.
Goswami used to work in Marriage Registration Office and her husband was an advocate attached to Calcutta High Court. Her younger daughter used to teach in a school and her elder daughter teaches in a college. Her elder son-in-law, now retired, used to work in the income tax office. Mrs. Goswami draws a monthly pension of Rs. 20000. She has high blood pressure and had an appendix operation. She also has some problems with her spinal cord that gives her trouble.

Mrs. Goswami’s younger daughter married a person of her choice in 2002. Her husband was an interior decorator and had his own business. Her in-laws, specially her mother-in-law, used to treat her badly, subjecting her to various kinds of physical and mental torture. Unable to bear the humiliation she committed suicide in 2003. Mrs. Goswami’s elder daughter married in 1989; she used to live in a rented house in Phool Bagan with her husband and daughter. After her younger daughter’s death her elder daughter, son-in-law and granddaughter have shifted to Mrs. Goswami’s house at Salt Lake. They share a common hearth. Mr. Goswami died about 15 years back. Mrs. Goswammi’s parental family and her in-laws stood by her in the periods of crises.

Mrs. Goswami’s elder daughter was married when she was doing graduation. Three years later her daughter was born. Mrs. Goswami had to take care of her baby granddaughter since her daughter was doing M.A. After completing M. Phil. she got a teaching job in a college at Ramrajatala. Nine years back she shifted to Manindra Chandra College, where she works now.

After the death of her husband and younger daughter Mrs. Goswami was left lonely in her present flat. In order to take care of her Mrs. Goswami’s elder daughter shifted to this house along with her family. Mrs. Goswami is still recovering from the shock of her younger daughter’s death. Once in every ten minutes during the interview she was talking about her deceased younger daughter. Her elder daughter is very sensitive and caring. She loves to eat and while returning from college every day she brings some snacks. She also buys gifts for her mother often. Her son-in-law also respects her a lot. He goes to the market and helps her in various household works. Whenever she feels sick her
daughter and son-in-law take her to the doctor. Her daughter takes care of every little needs of Mrs. Goswami. As Mrs. Goswami was a doctor’s daughter and her elder sisters were also doctors, she knows many reputed doctors of the town. Mrs. Goswami’s granddaughter, who is also her best friend, is now studying law.

Mrs. Goswami’s had a plot of land which she sold out three years ago. The money has been kept on fixed deposit in a nationalized bank. She put some money on monthly income scheme (MIS). The interest she gets is good enough to meet her requirements. After her husband’s death she faced difficulties in arranging payments for this flat; her husband had taken huge amount of loan from the bank. Her daughters and her parental family helped her financially to clear the loan. Now her son-in-law and her elder daughter, share the major burden of the family expenditure.

Mrs. Goswami wakes up around 6:30 in the morning. Then she makes tea for all the family members. Her son-in-law goes to the market while Mrs. Goswami and her daughter prepare breakfast. She spends a lot of her time in the kitchen. Her son-in-law, daughter and granddaughter leave for work/study within 10 in the morning. After finishing her work in the kitchen she takes her breakfast. She takes bath around 1 p.m. and offers puja. Having lunch around 2 p.m. she takes rest for a while. In the evening when everybody is back they all take snacks with tea. In the evening she watches television especially Bengali serials. At around 10:30 p.m. they all have dinner. She and her daughter clean up everything before going to bed around 11 p.m.

Mrs. Goswami has high blood pressure and she puts very less amount of salt in the food. Otherwise she doesn’t have any restriction on food. She has a domestic help who comes for cleaning and dusting. Earlier there was a girl who used to come for cooking. But she left after working for one year. Since then Mrs. Goswami has taken charge of the kitchen. Her daughter helps in cooking and does make some special dishes on holidays.

Mrs. Goswami’s daughter plays the dominant part in decision making in the family. However, she consults her husband and Mrs. Goswami before finalizing a major decision.
Mrs. Goswami maintains good relation with all her relatives. Earlier her elder sisters and brothers, who live in different parts of the city, used to visit her often. Now they have all grown old and cannot visit her that often but keep contact over telephone. She tries to visit her paternal house at Shyambazar (in North Kolkata) twice in a month. She also maintains very good relations with her in-laws. Her sisters-in-law visit her occasionally. Her brothers-in-law call her sometimes. At times of crises, especially when her husband died or daughter died, she got enormous help and support from all her relatives. After her daughter's death she lived in her parental home for many months. That time her sisters used to come to Shyambazar to be with her.

Mrs. Goswami maintains a very cordial relation with her neighbours, who stand by her at times of need. Her younger daughter was a very good student and Mr. J Dutta, a neighbour, encouraged her younger daughter to study further. A friend of her husband, Mr. S Dasgupta, who stays in the second floor, treats her like his own sister. The families in this housing cooperative live like a large kin-group. Mrs. Goswami doesn't visit them regularly nor do they come to see her, but they keep on enquiring about each other. On the occasion of durga puja, poila baishakh, pochishe baishakh, dol purnima they all organize cultural programmes, participate in the programmes, and also have dinner together on some special occasions. Every year they go out for a picnic.

Mrs. Goswami has a very strong bond with her grand-daughter. After her younger daughter's death her bond with her granddaughter has become stronger. They share almost everything in their life with each other. There are many things which her granddaughter hesitates to tell her mother but shares with her. They share the same bed, talk for long hours, until they fall asleep. Mrs. Goswami pampers her a lot. Her granddaughter says jokingly that when she gets married she will take Mrs. Goswami along with her to her in-law's place.

Mrs. Goswami misses her husband a lot. When he was alive their life was very simple and easy. After his death she had to take up the responsibilities which her husband used to shoulder. When he was alive he used to take Mrs. Goswami and their daughters to Autram Ghat or to a restaurant on Saturdays or
Sundays. They used to visit their friends on weekends. Sometimes their friends used to come to their place. Those were the wonderful days of her life, which are gone forever. After her husband’s death she took a job in the office of the marriage registrar in order to keep her busy. For that job she had to travel to so many places in Kolkata.

She keeps her busy with her household chores but in the afternoon when she completes all her work she sometimes feels lonely. Earlier when she used to stay alone at home she tended to think only about her younger daughter and those days were very painful; an empty feeling used to engulf her. Now when she stays alone in the house and feels lonely she either watches television or reads something. When her daughter and granddaughter stay at home she feels alright.

The biggest regret of her life is that she couldn’t save her younger daughter’s life. Even being a mother she couldn’t grasp the gravity of pain and sufferings her daughter was going through. She feels ‘I have failed in my role of a mother. The role of mother is to protect her children, but I could not save my daughter’. Now she worries about her elder daughter, particularly about her health. She believes in astrology and her elder daughter’s astrological predictions are not so good.

(6) Mr. R. K. Chanda (68) lives in his flat at C 12/7 Karunamoyee Abasan with his wife, unmarried elder son, younger son his wife and son. It is 700 sq. ft. flat which has two bed rooms and a drawing room. The family shifted to this flat in 1981.

Mr. Chanda is a graduate and was an employee with Indian Railways. His wife is school final pass and a home-maker. His elder son is a B.Com. and the younger son has a degree in fine arts. His elder son works as a special educator in Sharba Shiksha Mission and his younger son teaches in an art school. Mr. Chanda gets a monthly pension of Rs. 30000. He has heart disease and manages with a pacemaker.

Mr. Chanda retired from service in 2005. The younger son married in 2011 and his elder son wants to remain unmarried. Both his sons care for their parents; all the family members are bound by a deep sense of love and care. On
Sundays all spend time at home and take lunch and dinner together. They also watch any good movies on television. Mr. Chanda is healthy and active enough and he doesn’t really need his son’s help or care. He loves to do all his works by himself and cares for his wife. A couple of years back when he had to take a pacemaker his sons took all possible care. His daughter-in-law is also very caring and supportive.

Mr. Chanda is associated with many cultural activities. He is the general secretary of a public library in the block. He, along with other members of the library, organizes cultural programmes on the occasions of Rabindra Jayanti, Poila Boishakh, Najrul Jayanti, Bhasha Dibosh and so on. He feels sad about the fact that earlier they used to have a lot of members but now the number has gone down. Now the young generation, according to him, is losing the reading habit fast. Mr. Chanda takes interest in politics and also a member of CPI (M). He goes to attend party meetings, rallies and public meetings. He also collects donations for party programmes and takes a lead role in organizing party programmes.

Earlier he used to hold the post of president of the block committee but now because of health problem he has left the post. But he maintains very good relation with all his neighbours. He most chats with his friends and neighbours either in the library or in the market place. He has some friends with whom he loves spending time. Together they go to the market, have tea and also chat for some time and then returns home. Even when there is nothing to buy the friends would meet at the market place for the morning adda. The friends care for one another and come forward with help at times of crisis. When he was detected with heart problems he received enormous help from his family, friends and neighbours.

Mr. Chanda maintains a very warm relation with all his relatives. His younger sister-in-law stays nearby and she visits them almost every week. His elder sister stays in Asansole, his elder sister-in-law lives in Durgapur, his brother-in-law lives in Dhanbad, all places are outside Kolkata. He cannot visit all of them frequently because of the distance and also because of his age. He doesn’t also
visit his relatives who live in Kolkata; although he keeps contact with them over telephone.

Mr. Chanda and his sons play equal part in decision making in the family. On issues relating to individual life the members take their own decisions but consult each other. The sons inform their parents when they take decisions about their career and life.

Mr. Chanda doesn’t depend economically on his sons as he has his pension. However, his sons contribute to family fund to meet the family expenses. Whenever a member needs money the other members come forward with support.

Mr. Chanda wakes up around 4:15 in the morning. Around 4:30 he goes out for morning walk with his friends. Returning home he puts his party’s newspaper Ganashakti on a display board in their locality and also reads that paper thoroughly. Around 7 a.m. he goes to the market and by 8 a.m. he takes breakfast. He then goes to the bank or some other places when he has family related works or organizational activity. On return, he plays with his grandson for some time. Between 1 to 2 p.m. he takes bath and lunch with his wife and daughter-in-law. After that he takes rest for at least an hour. In the evening he goes to the library where he works until 9 p.m.; around 9:30 p.m. he takes dinner and around 10:30 p.m. he goes to bed. As he has heart-related problems he avoids oily and spicy food, egg and red meat. He loves fish and consumes a lot of fruits. He is very particular about his medicines. There is a domestic help who comes for cleaning, dusting and washing. She also helps his wife and daughter-in-law in the kitchen. He, along with his wife, travels to various places within India; his sons also join them sometimes. This year Mr. Chanda and his wife along with his elder brother and elder sister had a visit to Pondicherry.

Mr. Chanda doesn’t feel lonely at all as his sons stay with him. Besides he has to do so many works all day long that he doesn’t get time to feel lonely. In his spare time he loves playing with his grandson.

Mr. Chanda is happy with whatever he has got in life. He has got enormous respect at his workplace and has also got a loving and supportive family. He
would be happier if his elder son marries and settles down in life. He doesn’t worry much about his health or his wife’s health or about his sons; everyone is healthy and active.

Mr. Chanda is happy that his children still live with him. But if they want to set up separate households he will not oppose that because that is bound to happen sooner or later. Some from his known circle have sent their children abroad for studies, many of whom have not returned. They might be sending money but they do not find time to visit their parents, to chat with them or to listen to their problems. ‘The new generation is becoming insensitive’, Mr. Chanda said.

(7) Mr. D. N. Sen (79) has been living in his own house at DL-144 Salt Lake since 1987. In his 1200 sq. ft. two-storey house he lives in the ground floor with his wife. His younger daughter, son-in-law and his granddaughter stay in the first floor. In the ground floor they have three bedrooms and a drawing room. Mr. Sen’s elder daughter stays in Denver, U.S.A. with her husband and two daughters.

Mr. Sen is a graduate. His wife passed intermediate examination. Mr. Sen has changed his job several times; first he was in Indian Navy, then served in the ministry of commerce in Delhi and finally in merchant navy. His wife has always been a housewife. He uses modern gadgets like cell phone, music system, camera, computer, washing machine etc. He has savings, fixed deposits, and medical insurance policy. Mr. Sen has diabetes and high blood pressure. He had three surgeries on his eyes. Despite all this he is physically active. He goes for walk both in the morning and evening. He maintains a strict routine in life.

Mr. Sen married 1966 when he was in Delhi serving in the ministry of commerce. That time his wife was doing a job in Food Corporation of India in Kolkata. Since she wanted to live with her husband on a permanent basis she left her job and shifted to Delhi. Mr. Sen’s daughters were born in Delhi; the elder daughter in 1970 and the younger one in 1972. The family had shifted to the present house in Salt Lake in 1989. The elder daughter studied in Presidency College and did her Masters from Calcutta University with first class. After her
marriage in 1998 she along with her husband went to Denver U.S.A. Her husband is an engineer and works with a US-based company.

After completing B. Com. Mr. Sen’s younger daughter got a job in Post and Telegraph department in 1995. In 1999 she was married. She along with her husband and daughter stay with Mr. and Mrs. Sen. Both his daughter and son-in-law take good care of them. His daughter has to go to office from Monday to Saturday. When she returns from office she chats with them, makes coffee for Mr. Sen and also helps her mother in the household work. Their son-in-law also helps them in household chores; he goes to the market, pays electric and telephone bills, and he contributes to the common family fund. On Sundays their daughter and son-in-law take them out for shopping or dinner. Mr. Sen and his wife take care of their granddaughter as their daughter is on a job.

Despite staying in the U.S.A. Mr. Sen’s elder daughter is closely connected to the family. She calls her parents every alternate day. Since retirement in 1999 Mr. Sen has stopped buying anything for himself; his daughters buy all his clothes and all other necessary items for him and his wife. He is highly satisfied with the way his daughters take care of them. Whenever he feels sick his younger daughter and son in law take him to their family doctor. They also buy medicine for him. His elder daughter keeps sending gifts to them. She comes to Kolkata once a year with her family and stays at least for a month. Two years back she came and took Mr. Sen and his wife to America. Mr. Sen feels that daughters are in general much more caring and concerned about their parents.

In 2004 Mr. Sen was elected as the general secretary of the DL Block Committee. Last year he was elected as the President. He enjoys working for the betterment of the community and the residents of this block love and respect him a lot.

Mr. Sen has a strong bonding with his relatives. His mejo bhai (second younger brother) and shejo bhai (third younger brother) live in Salt Lake and his mother lives with his shejo bhai. They have a very good relation and they visit each other often. When Mr. Sen used to work in Merchant Navy he used to take his wife for a long voyage. That time his mejo bhai and his wife and shejo bhai
took care of his daughters. During Durga Puja or any other occasion they have a family get together. In the time of crisis they all help each other.

Mr. Sen maintains a very good relation with all his neighbours. As he is the president of the block committee he has to shoulder a lot of responsibilities. The general secretary does not do any work so he has to look after general secretary’s work as well. People come up to him with their own problems knowing well that Mr. Sen would help them. People sometimes take the advantage of his good nature but that doesn’t deter him from helping others.

Getting up at around 4:30 in the morning, Mr. Sen makes tea for him, and does household works like sweeping the rooms, dusting or arranging the flowers in the garden. Then he takes another round of tea and goes to the market. On return he takes his breakfast and leaves for the community centre to do some community work. Sometimes he takes part in *adda* with some of his friends. Around 1 p.m. he returns home and takes his bath. Around 2 p.m. he takes his lunch. He then takes rest for some time. After evening walk he again goes to the community centre to meet other committee members. Sometimes he, along with his wife, visits his relatives’ place. If he stays home he plays with his granddaughter and sometimes spends time with her in the community park. Returning home he watches news for some time. When his daughter and son in law return from office he chats with them. Sometimes his elder daughter calls them from the US; all the members participate in chatting. Around 10 p.m. he takes dinner with other members and by 10:30 he goes to sleep. He does not have any restriction on food. There is a domestic help who comes for cleaning and dusting. She also helps her wife in the kitchen.

Mr. Sen doesn’t feel lonely as he has kept him busy both in family and outside. Mr. Sen enjoys full authority in the family as he takes most of the decisions. His younger daughter, and son in law who stay with him, usually accept his decisions. His son in law speaks only when he has a different opinion on a particular issue.

Mr. Sen doesn’t have any regret in life. His only worry is his as well as his wife’s health. Sometimes he feels very bad for his elder daughter. She was a
brilliant student and she really wanted to do her research. But they forced them to get married. She is very happy with her married life.

(8) Mr. N. R. Sen (77) has been living with his wife in his own flat at BJ 399, Salt Lake since 1996. It is 1200 sq. ft. flat which has a huge drawing room, three bedrooms and two bathrooms. Mr. and Mrs. Sen have two daughters; the elder one was married in 1989 and the younger one in 1992; both live with their in-laws.

Both Mr. and Mrs. Sen are graduates. His elder daughter studied up to high school level and his younger daughter is a graduate. Mr. Sen used to work in a clerical position in the Income Tax Department. His wife is a homemaker and so are his daughters. Mr. Sen draws a monthly pension of Rs.30,000. He uses cell phone and has television, washing machine, music system, computer, fridge, and micro woven in his house. He has high blood pressure, and had an operation in his pancreas.

Mr. Sen married in 1967; it was an arranged marriage. His elder daughter was born in 1969 and the younger one in 1972. His wife is very caring and supportive; she takes care of all the household activities. The elder daughter was married early after completion of higher secondary examination in 1989. The younger daughter, who did graduation from Scottish Church College, was married in 1992. Now his elder daughter lives in Bangur and his younger daughter in Paikpara. The government quarters where he used to live has now been transferred to his younger daughter, where she lives with her husband and son.

Mr. Sen was upset when her elder daughter discontinued her studies but suppressed his frustration. Now his daughters are happy with their families. They understand their role in their own families and, at the same time, take care of their aging parents. Both her daughters call them regularly and the elder daughter comes once or sometimes twice a week. Her son is studying in college. His younger daughter's son is still in school and she has to look after his studies. She doesn't get time to visit Mr. and Mrs. Sen often but is in regular touch over phone.
In 2012 Mr. Sen had an operation in a hospital in Delhi. At that time his elder daughter and her husband went with him. The younger daughter took care of her mother. Mr. Sen and his wife are active and they do all their works by themselves. Whenever any of them falls sick their daughters immediately come and stay with them until he/she recovers. His elder daughter brings some cooked food for her parents whenever she visits them. His younger daughter keeps enquiring whether they have taken their medicine, whether they are having right kind of food, and so on. His sons-in-law are also supportive and caring.

Mr. Sen and his wife are the only two persons who live in the house, but they do not feel lonely. Mr. Sen loves spending time with his friends and neighbours; he goes for adda with his friends thrice a day. Besides he does some household works every day. He is happy with the way he lives his retired life. When he is home he keeps him busy doing something; watching television, reading books, newspapers. When he was in service he had to handle loads of tiring work every day; after retirement life has become tension-free and enjoyable.

Mr. Sen is not dependent on his daughters economically. Rather, he sometimes helps his daughters in their needs. He has savings, provident fund, and health insurance policy and thus he doesn’t have to depend on others.

He maintains good relation with his neighbours. Every day he goes to the community centre and joins the adda sessions with his friends. He finds the adda sessions very refreshing. Mostly the retired persons from the neighbourhood take part in adda where they share their health related and family problems, and exchange valuable information and suggestions to counter those problems. Sometimes they discuss contemporary social issues, sports, and politics. The elderly friends get to see each other in the community centre and they do not need to visit each other’s house. They visit each other’s place on social occasions and in crisis.

Mr. Sen has some relatives in and around Kolkata but he does not maintain much contact with them. As he is getting old he doesn’t enjoy travelling by bus or train to go to his relatives’ places. But on occasions like Durga Puja or Poila Boishakh Mr. Sen organizes family get together where he can meet some of his
kin. Because of his health problem he doesn’t even go to his daughters’ places. Only during Durga Puja or on some important family occasions he and his wife visit them.

Both Mr. Sen and his wife play important part in decision making. He discusses with his wife in taking most decisions. Mr. Sen extends help to his wife in doing household chores. He goes to the market, helps her wife in the kitchen, and pays the electricity and telephone bills.

Mr. Sen wakes up around 7:30 in the morning. He reads newspaper while taking tea. Having breakfast by 9 a.m. he takes bath. Around 11:30 he goes to the community centre of their block where other neighbours also come for the *adda* session. Around 1:30 p.m. he returns home. He watches television, especially news, for half an hour. Around 2 p.m. he takes lunch with his wife. Post-lunch, he takes rest for an hour. After having evening tea he sometimes goes to the market for buying grocery items. In the evening he watches television programmes for about two hours. Then he goes for another round of *adda*. Around 10 p.m. he returns home. He takes his dinner with his wife and reads some literary books before going to bed. Mr. Sen loves *adda* sessions because here he gets to interact with many renowned and knowledgeable people, and those who have similar political inclinations. There is a maid in their house who comes for cleaning and dusting.

(9) Mr. A. Saha Roy (68) lives in his own 1100 sq. ft. flat consisting of three bedrooms and a drawing room at F-42/6 Karunamoyee Abasan with his wife. His son, an MBA, is also a part of the family but recently he has moved to Delhi having got a job there.

Mr. Saha Roy is a graduate and so is his wife. Both Mr. Saha Roy and his wife used to work with Steel Authority of India. Mr. and Mrs. Roy together draw a monthly pension of Rs. 50,000. They have some savings and draw interest on monthly basis. His son also shares financial responsibility. He has high blood pressure and breathing problem.
Mr. Saha Roy took active part in left students’ movement when he was studying in Vidyasagar College. He did not continue his studies after graduation as he got a job in Steel Authority in 1970. He retired in 2005 after working there for 35 years.

Mr. Saha Roy married in 1980. His wife also was an employee of the Steel Authority. They shifted to this flat from their parental house at Gorpa in 1980. Their son was born in this flat. As both Mr. Saha Roy and his wife had to attend office they used to leave their son at his maternal uncle’s place. Their son did B. Com. and studied MBA from KIIT, Bhubaneshwar. He worked for Aircel for several years before moving to Delhi. Mr. Saha Roy’s daughter-in-law has also left her job to join her husband in Delhi.

Mr. Saha Roy was sad when his son left for Gurgaon with his new job. But he could not stop him because it offered much higher salary and better facilities, compared to what he was getting from his earlier job in Kolkata. Mr. Saha Roy’s daughter-in-law used to work in a private company and her office was very far. So she decided to leave her job. Mr. Saha Roy’s son and his daughter-in-law are away yet, they take good care of him and his wife.

Mr. Saha Roy’s son calls them every night and speaks with Mr. and Mrs. Saha Roy. He is very close to his mother so whenever he calls them he chats more with his mother than Mr. Saha Roy. First few days after going to Gurgaon he used to call them thrice a day. But now because of work pressure he calls only at night. Mrs. Saha Roy had an eye surgery, when her son was about to leave for Delhi, but the latter stayed back and joined his new job a week later, after her recovery. Their daughter-in-law who was working in Kolkata that time also took leave from her office to take care of her ailing mother-in-law.

Mr. Saha Roy and his wife have warm relation with all their relatives. Mr. Saha Roy’s parents died many years ago, his brothers live in Kankurgachi. He regularly calls his siblings. Once a week he goes to Kankurgachi to meet his brothers. His spouse has a sister who works in a school and stays in Madhyamgram. She also visits them often. During durga puja or poila boishakh they organize family get together.
Mr. Saha Roy maintains good relation with his neighbours. He does not visit them regularly but when he meets someone on the road or in the market he chats with him/her for a while. Sometimes his neighbours come to his house; he gives them a warm welcome and chats with them over tea and biscuits.

Mr. Saha Roy is associated with the Communist Party of India (CPI). He is an active supporter of the party; he goes for meetings, attends protest rallies which are periodically organized by the party. He is also a member of the retired employees' association. He has to go to the association office at Dalhousie at least twice a week to look after its works. He, along with other members, works over there till 6 in the evening. The retired members facing problem regarding reimbursement of medical bill or any other problem come to them and they try to help them by writing application and pursuing the matter with the concerned authorities.

Both Mr. Saha Roy and his wife take decisions on family matters together, although Mr. Saha Roy has the dominant role. Earlier when their son was in Kolkata he used to convey his opinion regarding mundane family related issues but Mr. Saha Roy shares everything with his son and asks for his counsel on important matters.

Mr. Saha Roy wakes up around 7 in the morning. After having morning tea he goes to the market. There he meets some known people, with whom he chats for a while. After returning home he takes his breakfast with roti and sabji on most days. He reads the newspaper, sometimes goes to the bank or post office. After returning home he takes bath. He reads some books and listens to music in his transistor, which is his trusted companion. He keeps the transistor on for most parts of the day. Around 2 p.m. he watches news on television while having lunch. Then he takes rest for some time. On Wednesdays and Fridays he goes to the Retired Employees' Association office. In the evening he sometimes goes for a walk. He visits his brother at Kankurgachi occasionally. If he stays home he watches some television programmes. Around 10 at night he takes dinner and goes to bed. They have two maids; one comes for cleaning, washing and dusting and the other for cooking. Since the cook on hire is irregular Mrs. Saha Roy has
to do cooking quite often. Mr. Saha Roy has high blood pressure and also has spasm in lung for which he takes regular medicine. He does have some restrictions on food.

Mr. Saha Roy is happy that his son has a good job and has got a nice person as his life partner. The only thing that worries him is his health.

**Summary of the findings**

Living is Salt Lake is a status symbol for the middle and upper-middle class in Kolkata. Over the years there has been a concentration of educated upper-caste government and semi-government employees (the *bhadroloks*) in Salt Lake; many have come after retirement. They represent the progressive, modernist cultural tradition that crystallized in the colonial and post-colonial urban India, a legacy of Bengal Renaissance and Left political movement in Bengal. The elderly live with economic self-reliance as they live on their pension and interest on savings. They have their children well settled in life, with good education and employment, mostly dispersed to different cities in India and abroad. They have access to modern gadgets of communication and entertainment, with television and cell phone occupying the centre stage.

Life of the elderly largely centers on the family and family members, the care and support system in the family. Unlike the elderly living in old-age homes, who are either unmarried or have lost their spouses, the elderly in Salt Lake largely live with their spouses and other family members. In other words, they live in the midst of a strong family care system. This is the most important point of difference in the life of those who live in old-age homes and those who live in their own house in amidst family members. The downsizing of family and dispersal of some members have cemented the bond between those who continue to live in a household. In some cases the married daughters live with their parents or live close by in order to be able to take good care of their parents. The children who have dispersed cannot take close care but they remain in close touch and rush back home in times of crisis. They make periodic trips back home and take their parents to the country of their work. The family
support system is supplemented by the services of the hired care givers or the maids, who constitute an indispensable part of families in Salt Lake.

In a few cases there have been incidents of untimely death of children or husband. The living elderly find it very difficult to overcome the shock years after the incident. A few have complained that they suffer from loneliness and long for the children who live away. Dispersal of the members of the family of orientation and the family of procreation has become an integral part of the family life and the elderly have accepted this. Dispersal does not, in any way, mean the end of relations. Most of the elderly rationalize such spatial movements in the name of achievement and success and they draw pride from this.

With aging ailments and health worries have become a part of the life of the elderly; all informants have minor or serious ailments; many have undergone surgery and spent days in hospital. The elderly manage such crisis with saved money and health insurance. They face such crisis by making adjustments in life, like restrictions of food and movement and taking the help of the family members and care givers. The children extend financial and other kinds of support to see through the crisis. The larger kin and neighbours come forward with their support in the form of service.

My observations do not support the stereotypical idea that kinship relations break down in urban areas. Most of my informants maintain thick or thin relations with their siblings, their families and the members of the families of the in-laws. They meet occasionally, keep in touch over cell phone, attend the social occasions, and come forward to each other’s help in times of crisis.

Contrary to popular belief, the elderly members value their relations with the neighbours highly and take active part in the activities of the block community. Community centre is the centre of a host of social and cultural activities. Important community functions are organized by the block community and the residents of the block take part with great enthusiasm. Some of the elderly not only participate in such programmes but they, with all social and cultural capital under their command, provide leadership in organizing the community programmes. The community centre, the park and the market place are the
places where the elderly meet for *adda* every day. The members exchange information and extend their help when somebody is in crisis.

Some of the elderly, the men more than women, continue to work for trade unions, mass organization like Ganatantrik Mahila Samity, and political parties. These elderly have been into Left politics for many years, some have acted as the local level leaders; they draw inspiration from their political ideology to continue to work for the organization. There are many among the informants, besides the nine case studies, I have presented in this Chapter, who are active in politics in their old-age. They try to do something of value in this old age in order to remain meaningful and avoid being insignificant.

The decision making by and large remains a male prerogative although some informants consult the other members, the spouse and grown up children. The women members do not complain about it. The women, with some exceptions, confine their activities within the four walls while the male members take a greater part in outdoor activities. The women manage the kitchen with the help of maids and also hire the maids for doing domestic chores. The women, even the Left political activists believe in religion; offering *puja* is a part of their daily life. One can get some hints of changing gender relations as I have seen a good number of elderly men play their part in kitchen and in domestic chores.

On the whole the words like family, kinship, community and neighbourhood, care, support, empathy, the traditional values have not become redundant in understanding the life of the elderly in a middleclass urban set-up like Salt Lake. After all, peoples’ craving for a good life never ends; they fear death and remain concerned thinking what will happen to their near and dear ones when they are gone. The observations of the present study could very well provide a counterpoint of urban life in the West, at least the way the mainstream sociologists (Durkheim, Weber, Simmel, Wirth and many others) have perceived it.