

Vulnerability Studies: An Introduction

Prof. Pramod K Nayar

Department of English

University of Hyderabad

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Discussion On Vulnerability and Aging – I

Hello Arjun and Washington. This is our group discussion for the aging component of the NPTEL course on Vulnerability Studies. So, we will be talking in and around the question of aging in literary representations but also cultural frames of understanding aging. Arjun is a doctoral student in the Department of English, University of Hyderabad working on testimonial poetry and Washington just graduated out of the MA program. So welcome to both of you, Washington and Arjun.

Hi there. We will begin with Arjun's first point about aging that he has put together which is to do with how old age and aging actually rob individuals of their agency, their autonomy and it's marked by a progressive deterioration of the body and his example of course comes from William Shakespeare's *Lear* and so the question of the deteriorating body. Over to you Arjun as to what you would like to develop about this.

Hello. Hello Pramod sir. Hello Washington. Good morning. So, I was thinking about old age as something that rob individuals of their agency and autonomy. This is a marker of vulnerability that aggravates the already existing condition of vulnerability that is shared by all individuals. So, it is a marker of vulnerability but what is to be noted is that it does not apply equally all of us. It is also an intersectional marker. It definitely depends on other markers such as caste, class, race, creed, gender and all that. So, there is no sense of parity when it comes to the vulnerability of the individual but one thing that we can certainly see is that no matter what identity you belong to vulnerability is something that aggravates, old age is something that aggravates the vulnerability that already exists in our lives. So, the example that I was citing here, Pramod sir cited here of *King Lear* is very pertinent because once the sovereign is divested of the body politic or the right to rule the population, even he is vulnerable. He does not get to act with agency or autonomy in the play anymore. So, what does it mean that a sovereign who has the absolute right over his population, what happens to him when he is divested of his power just because he is old is rendered vulnerable. So, what happens because you have no absolute authority over your body, you cannot sustain yourself, your mental, your physical abilities are out on the decline. So, I always think *King Lear* as one of the most pertinent plays or cultural productions that deal with the vulnerability of old age.

That's interesting that you point to the sovereign also losing the sense of authority, the position of being the head of the state because age has rendered him a very different person so to speak. Washington would you like to say something about the point that Arjun has made?

Yes, as Arjun has pointed out vulnerability aggravates aging and it makes a person more vulnerable. I'd like to pick up on what Arjun has said about *King Lear* being the classic example of the age being the icon of vulnerability. In Lear his hamartia is not only his aging self, his hamartia also arises from him wondering the pathological dilemma. Who will take care of him when he is not able to take care of himself? The question that he poses upon his daughters initially that is who loves him the most? It's not only a question of love and affection but it's also a question of who will take care of him the most when he retreats from his monarchical authority. This is a question that is developed well into the play. As we see Lear zooms in and out of wondering whether his decision to rely upon his first two daughters is right or not as the care that he expected is not received by his daughters. So, yes, Lear is the icon of vulnerability in old age. Thank you.

Yes an interesting point because Arjun's second point is about a certain "pedagogy of mortification" the term and phrase that Kathleen Woodward uses and how society trains us as we grow older to recede into invisibility and helplessness. It's a point that overlaps with Washington's argument that the retirement age reminds them of their increasing vulnerability. So you both have roughly the same thing that in many ways there is a certain cultural training that is underway when as we grow older. So, Arjun first and then Washington because you have the same points here.

As Washington mentioned the insecurities that *King Lear* demonstrates in the beginning of the text and as the text progresses does not come from nowhere. He is trained or he has a cultural framework that tells him that all people are not desirable bodies in the population anymore. So, there is a language that exists that pushes all people or older individuals or older bodies into invisibility. So, this language tells them their usefulness as individuals in society. So, in some senses they lose the utilitarianism or utilitarian function in the society. One can even argue that the deaths of the individuals start way before the actual event of death because death also means invisibility in some sense. So, they are moved away from the discourse of visibility. They are rendered invisible by this language of mortification which trains them to go to the margins of the society which trains them to stay away from the mainstream of the society. And this is very well demonstrated in *King Lear*. We can see how people pushes him around. We can see how he goes from one place to another. We can see how they try to exclude him from decision making processes and such.

Over to you Washington.

Yes, we are more or less talking about retirement age. Retirement age is the political marker of aging. Every country has their different age bracket to when a person should retire but it's usually 60 to 65. It is also a marker of productivity or, as Arjun pointed out, of its utilitarian productivity. So, this puts a person into economic vulnerability as well. For instance, when a person has risked their retirement age, a person is set out from his work regardless of their real productivity. And quite often, bank schemes which are supposed to help the elderly doesn't favour them. Recently, I joined an elderly to have a credit card loan application and they demanded that bodily functions like continuous blinking or holding onto a smile which is quite tough to perform for an aging body. This more or less puts the already financially burden in a state of economic vulnerability. This I would like to bring upon the instance of two literary texts. One is Arthur Miller's *The Death of a Salesman*. In *The Death of a Salesman*, Willie Loman is fired from his company that he has worked years over and he relies on the generosity of his once neighbor and his current friend Charley reluctantly of course. And in another instance, Leslie Marmon Silko, a Native American writer, writes about these in a short story titled "Lullaby". There two elderly Native Americans have to drift in the cold winter relying upon tufts to have a night's sleep because the man of the couple has been fired from his job because he was too old to work for the white master. He was caught in a coat, got fired, on grounds that he was too old to work for him anymore. This is on top of Chato, the man, being able to work and also being able to speak in English and Spanish fluently. In the end, his skills doesn't set his reportability benchmark. His aging self sets the reportability benchmark. So, an aging body evokes pity and not productivity, which puts them in a set of economic and financial minority.

Yeah, and in response to what Washington has said, Arjun has also made the point about they being surplus to the society because they are not economically productive. But Washington, you also have a point in your notes that the excess is also to do with they no longer are able to engage in productive relationships. Would you like to dwell upon that to which Arjun can then respond?

Yes, of course. Aging makes it quite difficult for the elderly people to commit themselves to new relationships. I'll bring in some literary examples. To begin with, ST Coleridge in his poem, "Youth and Age" he writes and I quote, "O! the joys, that came down shower-like, Of Friendship, Love, and Liberty, Ere I was old!". Does he equate friendship, liberty, youth and exuberance with young and all with a weak, the meek and the aged? New friendships. Amongst all, amongst all the people are usually depicted in literary texts where they can enjoy a relaxed mobility. So, either a person comes to their houses or it usually happens in old age homes. Yes, I would further continue this. I would bring upon one, two instances again, two later is again. It is just not friendship that interested their personal romantic relationship also hindered by their aging self. This usually happens with old couples. In Milan Kundera's *Let the Old Dead Make Room for the New*

Dead, the woman in the story is not willing to have physical intimacy with the men in the story, both of them are untitled and unnamed because she is afraid because she's afraid to betray her dead husband. As well as she's afraid of her deteriorating self. And in another instance in Isaac Bashevis Singer's, *Old Love* two financially sufficient couple plans to marry, plans to marry hastily. But the woman, Ethel Brokeles, turn futile and commit suicide because as she writes in her letter that she must go where her husband is. Thus, not only when they are financially insufficient, even when they are financially sufficient or when there is nothing to bother them, their aging self hinders them to develop social relationships. So, in a way, old age homes become not only a place to get pathological care but also a place to have social relationships with them.

That's interesting because you are speaking about alternative spaces for the old as well as perhaps a new set of relationships that might evolve although everything else is deteriorating. Also, the link between literary texts that you have forged Kundera and Singer and Coleridge is very, very useful and very pertinent. Arjun, do you have any quick response to Washington's points here?

The point about, Washington's point about the impossibility of making meaningful relationships is very relevant. So, there is this individual choice of somebody engaging in meaningful relationships but at the same time these relationships are always guided by mechanisms that are set up in society. So, imagine when you want to live in a society there are certain mechanisms that allow you to, what do you say, that enhances the quality of your life, that flourishes your life. So, what happens, the point that Washington was making when you have to avail credit cards, life insurance. So, you are constantly told that you are the excess in the society, that you have to prove that your society, your body is deteriorated to this extent and not further because you will not be available to avail certain schemes or services by the government if you are more than this or by corporate organizations if you are of a certain degree. So, what happens here is more than the individual choice here, even the mechanism as such sometimes work against the individuals that are old. So, in that way they find it difficult. So, you find these conflicting forces that exist in the society. You would always find seats that are reserved for older individuals in metros, in trains, in flights and all that. But then when it comes to healthcare, at the same time you would find that it is difficult to access healthcare for older individuals. So, the decision that was made during the pandemic, whether we should let an older person live on or a younger person live on. So, it always indicates to the desirability of body as such. Same thing that happened in Fukushima. When they wanted to clear out the nuclear waste, it was the older bodies that volunteered to do it. So, it sends out a message that the body does not produce anything anymore. So, it can be ghettoized. So, I think that it is a space, what you said about all-day jobs, it is a space where people can go and make meaningful relationship. At the same time, in some sense, if you think about it, it is a dark turn of thought, but you have to think that they are

ghettoized from the mainstream of the society, where they go there and they do not engage in the society. They do not understand it or the society does not understand it in the same way. So, in a sense, there is some sense of what you can call it benign ghettoization happening there. So, these people who are excesses in the society can go there, can reside there and start making meaningful relationship without disrupting the cause of the economy, the cause of society as it is running right now.

But there is also the point that there's a greater securitization of these people. What you spoke about, Arjun, as ghettoization and Washington spoke about in terms of their credit line or insurance, whether they should be insured or not. And the example from the pandemic was very pertinent because there was a question whether the old and the elderly should be even given attention in terms of hospitalization and several of the countries said "perhaps, we should focus on the younger", which means that basically what both of you are getting at is that there's a dual move. You have to care for them, but make sure they don't disrupt. So, you keep them, but they're economically not viable. On the other "economic vulnerability". They're economically vulnerable, but because of them, the social orders economic vulnerability also increases. For example, we periodically see the debate on pension plans. All of us are aware of the fact that subsidies are being taken away and the governments around the world are asking how much should we go on investing in the retired persons because they are no longer productive. So, there is this awkward oscillation, shall we say, between caring for them and seeing the care itself as a burden. Washington would like to respond to that.

Yes, sir. Since you talk about the state of care, whether it is of responsibility, a moral responsibility or a burden. I think it is very pertinent to talk about the pathological state of the aging body as well. The elderly body is recognized as more vulnerable to diseases. We can take example from the recent past. We were just talking about the COVID period. During COVID period, people aged 65 and above were recognized as having higher risk of getting COVID-19. So, when the vaccine started flourishing and given out to the public, they were among the first to be sanctioned. And there are two ways of taking care of an elderly, of an old, sick person. First is the familial care. There I think the question of a burden or a moral responsibility arises. The familial care is member of the family has to assign themselves a routine schedule to take care of the sick person. This complicates the question of loyalty and labor. When loyalty turns into labor, the question of burden arises. And this question of burden also arises when there is no sign of progress from the cared person. For instance, I would like to bring upon a movie by Edward Yang. In his movie, *Yi Yi*, a 2000 movie, *Yi Yi* the family takes care of a comatose woman. But when they see no progress at all, they desert the elderly woman and they continue their own lives. So, this is also one angle. Another angle is the financial angle. Taking care of a sick person usually takes a lot of financial dent on the care family. So, there is always a scuttle amongst the family members regarding the financial responsibility, which kind of

puts the care person as more of a parasite than a patient living in the family.

I like the point of the slide between the patient and the parasites that you are putting here, putting out here, Washington. I like that. And it also connects to the point that Arjun has made that there are institutional structures in which care is undertaken in order to prohibit further vulnerabilities upon the agent. But it's also economically a very pricey thing. So, you should be able to afford those institutional mechanisms, and which is where the point that Washington made comes in very relevant, where if the family is taking care, then it's one kind and it's loyalty and love. But when there is no obvious improvement, then what happens? But this also brings us back to the question of the vulnerability of the caregivers to a condition where it's more or less status quo. And the fact that there is a network, an institution, or even the institution of the family that enables us to mitigate the responsibilities, as Washington said, you parcel up the work. This is an endless process. So, what does the institutional apparatus of say the family do when it comes to extended and protracted vulnerabilities? Arjun, would you like to respond to Washington at this point?

The politics of caregiving is very complicated because it does not happen in very simpler terms. Think about responding to somebody who is terminally ill, somebody who always needs care. There is a certain sense of fatigue that would set in after a point in time. So, the response fatigue that a person who does not have autonomy induces in caregivers is always something that we have to think about. So, because it in some ways incapacitated the person who is giving care, which as you mentioned, is the vulnerability of the caregiver also. There is a parallel that I always draw on when we talk about caregiving because there is the child who needs care, the infant who needs care, but the response and infant incites from its caregiver is not the same as the response and older person incites. The infant is always given a charity in the sense always there is a positive connotation associated with caregiving when it comes to children, infants, maybe because their bodies have further to contribute to the society as opposed to the older persons here. And that is something which is very disconcerting because the nature of the care almost remains the same. And here I think you can actually think of the concept of the mirror stage that Lacan talks about. The child always sees his abilities coterminous with the ability of the mother and it is something that gives it a sense of self that is larger than his own. But when it comes to the older person, the assisted care, the assistance he gets always diminishes his autonomy. It takes away the sense of self from the older individuals. So, this is something which is interesting. The nature of the care might be of varying degrees and varying natures when it is pertinent to do these two classes of population. Both of them need assistance, but something is legitimized and something is not. And it is very disconcerting.

That's very interesting. But I also want to draw attention to a lovely point Washington has made in his notes where he points out that people in, say, a family care situation recognize the fact that they have inherited the same damaged genetic materials which at some point will make the caregiver also a patient of that same condition. In such a circumstance, the points about loyalty and love remain. But this also and this is what I call the vulnerability of the caregiver. There is a very strong sense of the fact that "one day this is me. One day this will happen to me". So, Washington, would you like to dwell a little bit upon that?

Yes, sir. I think this is where the varying natures of care arises. With a child, there is no confirmation that the child will inherit the genetic disease. But with the elderly person, the care person deals with the knowledge that he has inherited the disease that he is caring for. The elderly is the confirmation of the genetic disorder. So, there I think creates the varying natures of care. And with caring, with caring, this terminally ill with genetic disorders, just always a sense of distrust and betrayal. In one sense, the care person is not only not only giving away his life, but he is giving away his life to the person that will, they will ultimately take away his life.

So, does it reconfigure the structure of the family as you have said?

Yes, it does. The family is reconfigured by the genetic disorder or the genetic disease that the person carries. So, from a cohesive unit, it has become to one that is self-deteriorating and yes, it does reconfigure the structure of a family. The family is structured by the genetic disease or the genetic disorder that the person carries. From a cohesive unit, the family turns into a self-destructive one. And this person or the family is aware of the genetic disorder and is constantly tormented by the disease.