The Routledge Companion to Modernity, Space and Gender

The Routledge Companion to Modernity, Space and Gender reframes the discussion of modernity, space and gender by examining how “modernity” has been defined in various cultural contexts of the twentieth and twenty-first centuries, how this definition has been expressed spatially and architecturally, and what effect this has had on women in their everyday lives. In doing so, this volume presents theories and methods for understanding space and gender as they relate to the development of cities, urban space and individual building types (such as housing, work spaces or commercial spaces) in both the creation of and resistance to social transformations and modern global capitalism. The book contains a diverse range of case studies from the US, Europe, the UK, and Asian countries such as China and India, which bring together a multiplicity of approaches to a continuing and common issue and reinforces the need for alternatives to the existing theoretical canon.

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Introduction

This volume examines how modernity has been defined in various cultural contexts, how concepts of modernity have been interpreted spatially, and how this spatial interpretation has affected women in their everyday lives. These three models—modernity, space and gender—have been examined individually or in pairs, but never together, and certainly not as part of a multicultural and multidisciplinary cross section.

Most disciplines have a long history of defining “humans” as gender-neutral individuals, which generally means the male has been taken to represent the whole species. This is certainly true for disciplines that explore spatial constructs: analyses of spaces, along with their production, use and meaning, have traditionally described a user who is assumed to be male. In architecture, for example, theoretical treatises have historically either ignored the presence of women in the built environment, have limited their concerns to specific problems such as “safety” or have usurped distinctively female experiences as somehow being within the realm of male knowledge and expertise. One reason that this volume focuses exclusively on women’s experiences and perspectives is to allow an unmitigated focus on women’s interactions with the built environment, a perspective that is sorely missing in much conventional scholarship.

This volume starts with the premise that there is no gender-neutral perception. Gender, like race, ethnicity or class, helps define who we are; the mosaic of possible experiences based on these parameters enriches our understanding of spatial and social phenomena. Layering feminine experience into common readings of space and the cultural concepts they stand proxy for allows us a deeper perception of both modernity and the spaces it has created. This volume’s central aim is to help develop awareness for such a layer of perception, a mission that must continually be renewed in order to more fully appreciate the causes and effects of our modern world.

Defining Modernity

“Modernity” has many nuances of meaning, many of which are specific to various disciplines. When the term is used to describe political and social structures, it often assumes an economic system based on trade and capital, as well as a political system based on individual liberties. This definition has a long history, encompassing transformations in Europe after the medieval era and taking on new fervor in the nineteenth-century industrialization of Europe and North America as well as the colonization that sought necessary raw materials and other resources for the industrial campaign.

In English language usage, the term “modern” as an adjective had negative connotations at first, yet took on positive overtones starting in the nineteenth century, a trend that was accelerated in the twentieth century. Modernization, in the Western political and social context at least, has been fueled by a fear of being materially and economically left behind or, even worse, cannibalized for the benefit of others. Modernization is now seen as a desirable state of being, at least in a national context. Governments emphasize their modernity as a way of asserting their position in an international hierarchy.
Modernity is seen as using growth and change in a quest towards being competitive and up to date. Lack of modernity is considered backwardness and is seen as a stigma.7

Feminist writers have challenged the popular view of modernity as a fixed concept. Rita Felski, surveying definitions of modernity in scholarly texts, has found that “modernity” has been interpreted as stability, coherence and world mastery, as an experience of instability and discontinuity, as a culture of rupture, or as a rational autonomous subject with absolutist unitary conceptions of truth.8 She summarizes:

[I]t is possible to identify certain key factors which contribute to this bewildering diversity of definitions. For example, the different understandings of the modern across national cultures and traditions lead to potential difficulties of translation when texts circulate within a global intellectual economy.9

In these fractured perceptions of modernity, modernizing tendencies might be lauded by one group of individuals in a given society, while others feel harmed by the same efforts. In part, this can be ascribed to power imbalances in the decision-making process: modern societies, for example, require a cadre of technocratic elites in order to run the systems that control cities and nations; these elites retain power that is not readily measured.10

Several countries have at some point in their history pursued extensive, top-down modernization programs. The largest attempt to modernize a society through social disruption started with the Russian Revolution in the early twentieth century, a revolution that set off a series of economic and social experiments by communist regimes that represents a broad attempt at comprehensive social and technical reform. Emphasizing social revolution in addition to rapid industrialization, the Soviet Union over the course of 70 years continually sought a way to join the expression of both, with profound effects throughout all of Eastern Europe that continue to the present day, as can be seen in the chapters of Part 3 of this volume. By contrast, in Iran and Turkey, state-sponsored modernization attempts have led to multilayered forms of rebuttal, as the chapters in Part 4 of this volume discuss.

The Western, populist interpretation of modernity as up-to-dateness serves an agenda of competitive advantage, yet this advantage—expressed in terms of value hierarchies—can be highly problematic. As Felski points out, the agenda of advantage has the perhaps unintended side effect that “within the field of social and political theory [. . .] the equation of modernity with particular public and institutional structures governed by men has led to an almost total elision of the lives, concerns, and perspectives of women.”11 This elision has skewed popular understandings of women in cultural representation including areas as diverse as commodification and consumerism, the private/public distinction, female sexuality, the politics of avant-garde aesthetics and mass culture, the organizational power of historical narrative and the differentiation of political, religious and scientific vocabularies.12

Modernity Expressed Spatially

Modernity and urban space have been theoretically interlinked since at least the nineteenth century, while in architectural theory the concepts have been linked since the early twentieth century. The European modern movement of the 1920s presented an early, and for many radical, reflection on women’s role in society and how architectural expression intersected with this role, although most architectural projects and treatises were authored by men, which meant that a masculine view prevailed.13 In geography, another discipline that deals with spatial production and use, the role of women in society was approached much later. Gillian Rose, in the introduction to her 1993 book Feminism and Geography, notes that the discipline remained fairly hostile to women academics throughout the 1970s, and that the first systematic survey of geographical studies of women was only published in 1982. In the early 1990s, she continued, geography continued to be resistant to work that focused on
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women. This is certainly true for English-language texts, although one may assume that the situation is not much better in bodies of scholarly work written in other languages.

Modernity is a social phenomenon; expressed spatially it has often begun with material or technical innovations. In the early twentieth century, movements such as the Futurists combined a deterministic, and perhaps nihilistic, display of technology with views of what they saw as social progress. In 1914, almost a decade before Le Corbusier presented his ideas for modern high-rise cities, the Futurists’ architectural spokesperson, Antonio Sant’Elia, sketched bold visions of fortress-like power stations with smokestacks piercing the sky, vast transit hubs with gridded facades, and raging apartment blocks with external elevators.\textsuperscript{14} The built displays of technical prowess became a defining aspect of further movements in the early twentieth century, including the architectural avant-garde in Western Europe and the constructivists in Russia. Modernity in its built form was quickly associated with a world of high-rise office and apartment buildings; steel, glass and concrete as building materials; and technical infrastructure projects, especially those dealing with power grids or transportation.

Modernity in architecture has consistently highlighted new technologies, using formal expression to showcase them. In an urban sense, nations have expressed modernity as a sense of stability and mastery through rational structures—gridded and numbered streets, separation of urban functions, and circulation corridors designed for mechanized travel—or through prominent placement of technically ambitious structures, such as skyscrapers or buildings with large spans. It is this vision of modernity that we often find in the playbooks of rapidly developing nations, as the sections in this volume on modernization and traditional values, and a rapidly globalizing world point out. Yet modernity, based on technical novelty and up-to-dateness, also implies a destructive force, or, as Marshall Berman states, the quest of the modern has created a system in which the bourgeoisie lives to destroy and tear down things so that they can be built anew.\textsuperscript{15} Technical novelty and the state of the art have thus been linked with casting off the old in order to seek material newness in a hierarchical process that has come under critique for reasons such as environmental destruction or the erasure of place-specific culture.

In a world in which modernity is often considered synonymous with up-to-dateness, the concept, taken to its extreme, creates the problem of what might come next. A break with building traditions, often using new forms as a metaphor for a new social order, and constant renewal of existing structures requires a great deal of capital. In the socialist countries of the Soviet Union and Eastern Europe, this capital was provided by the state as part of a top-down program to demonstrate superiority to Western systems that relied on private capital. In the West and in countries that are rapidly developing economically, the constant quest for renewal and the system of capital such renewal is based on have led to great social stresses, especially for women. Even where the quest for modernity has turned to programs that seek social equality, for example in the Western European social welfare programs discussed in Part 1 or the socialist housing ideals discussed in Part 3, male dominance of the planning process has led to a dissonance between socially expressed theory and built reality.

The tendency for nation-states to emphasize their modernity is not universal. Some countries, or dominant groups within them, react to the social changes that are often a secondary result of modernization by championing cultural traditions. Conservative groups in Iran or Turkey provide examples of such countercultures in ways that influence women’s lives dramatically. Yet even Western societies that otherwise champion modernism of all kinds have not reacted uniformly to modernism’s potential forces. David Gartman has analyzed why architecture’s High Modern movement originated in post–World War I Europe, and not in the US with its early embrace of Fordism and rationalized production. His analysis points to the multiple ways in which technical and social forces interact in the production of modernity.\textsuperscript{16} Considering the links between spatial, architectural and social modernization, it comes as no surprise that even progressive societies are often suspicious of women who are “too modern” in their claim to space, especially when such claims seem to go hand in hand with campaigns for women’s suffrage, sexual self-determination or advanced career opportunities. While modernity as a technical
process implies an economically competitive advantage, as a social process it often questions traditional systems of hierarchy that national decision-makers rely on to maintain their perceived advantages. Even in countries that consider themselves thoroughly “modern,” there is a complex relationship between the technical modernity that fosters material progress and economic dominance and the social modernity that purports to extend individual rights, in this case to women.

**Modernity Through a Gender Lens**

Despite the link between physical and social renewal, and despite venues and journals\(^{17}\) that showcase feminist research, the study of how technological and spatial modernity affects women's everyday lives has not become as mainstream as could be expected. Feminist scholars have analyzed architectural and spatial modernity in primarily two ways: through analyzing modern architecture and through examining the conceptionalization of space. In her article “The Split Wall: Domestic Voyeurism,” for example, Beatriz Colomina dissects symbolic power constructs of European high modernists in an analysis of how iconic villas built by Adolf Loos and Le Corbusier in the early twentieth century framed women and objectified them within the house.\(^{18}\) A further path of research has examined women’s involvement in the production of iconic modern architecture, and how such involvement has helped define the ensuing project. An excellent example is Alice T. Friedman’s book *Women and the Making of the Modern House*, which investigates how women clients influenced innovation in domestic architecture designed by renowned architects.\(^{19}\) Yet the modernism assumed in such texts is that of precedents representing specific aesthetic and social movements that have resonated throughout many parts of the world, but that remain rooted in the European avant-garde of the 1920s. It is thus important to differentiate between modernity and modernism; the former is more broadly focused than the latter, which is generally defined as a social and aesthetic movement. Although related, the conceptual underpinnings of each are quite distinct.

A second body of literature has looked at spatial production more generally. Often based in geography or philosophy, scholars have theorized spatial production, perception, and use in a variety of ways. While some texts have worked towards creating a mainstream feminist point of view,\(^{20}\) several dominant scholars have pursued a class-based viewpoint instead.\(^{21}\) Based on the political, economic and sociological theories of Karl Marx and Friedrich Engels (whose writings on the “woman question” made up but a fraction of their respective oeuvres), “gender-neutral” class inequality has often served to push aside gender-conscious critiques of spatial phenomena.\(^{22}\) The use of class as a lens for understanding social phenomena has thus contributed to a process by which the (white) male experience continues to be seen as representative of all human experience, while female experience remains marginalized, in a process that the philosopher Michèle Le Doeuff has termed masculinist.\(^{23}\)

Widely respected post-modern analyses of space, such as the writings of geographers David Harvey or Edward Soja, are not immune to this masculinist gaze. Harvey’s and Soja’s analyses of the social production of space are based on class, missing an opportunity to understand space as a gendered or otherwise fractured experience. Writers such as Doreen Massey, Gillian Rose and Rosalyn Deutsche have criticized this absence; Rose writes that

> both [Soja and Harvey] ignore feminist and post-colonial writers[...]. [G]eography was central to anti-colonial movements from the eighteenth century onwards, and [...] feminist projects too have been organized over geographical networks [...] and have struggled against the patriarchal spatial imagery of the public/private division[...]. However, Soja proceeds oblivious.\(^{24}\)

What effect has a male-dominated discourse on space, the built environment, and relevant social constructs had? How have such constructs shaped power relationships in the construction of social and spatial paradigms? To understand possible answers to these questions, it is useful to reflect, even
briefly, on how our understanding of space is shaped in the first place. The most famous protagonists of modern space, including Charles Baudelaire’s and Walter Benjamin’s famous flaneurs, were privileged, upper-class males who could own the city with their gaze. The flaneur leads to a more common conception: a gendered analysis of space that has produced a binary approach by which public space is ascribed to the male, while the private space of domesticity is the realm of females. Jane Rendell discusses the gender dichotomy of male public realm and female private realm, describing this approach as both patriarchal and capitalist: “[A]s an ideology, it does not describe the full range of lived experience of all urban dwellers. This is problematic for feminists because assumptions regarding sex, gender and space contained within this binary hierarchy are continually reproduced.”

In a process of deconstruction based on Jacques Derrida’s writings, feminist theorists have attempted to deconstruct the hierarchy implied in the public–private binary, either reversing it so that the less valued term is celebrated as the more positive, or by staging what Rendell calls an “intervention,” in which a new term is created that breaks open the binary logic.

A further binary exists where modernity has been contrasted with traditionalism. This dichotomy, too, has taken on implied aspects of gender, a result of theorists creating a hierarchy and accepting both modernity and the male experience associated with it as experientially superior. Marshall Berman, in his analysis of modernity, describes how Goethe’s Faust seduces and then dismisses a young village girl (emphasis mine) as evidence of a “modern . . . cultural hero,” a point that Rita Felski describes as “[w]oman [. . .] aligned with the dead weight of tradition and conservatism that the active, newly autonomous, and self-defining subject must seek to transcend.” This view, of the modern male impeded by tradition that is female, is a staple of modernist lore. Although the European high modernist architects of the 1920s admiringly presented the “new woman” as enjoying fast cars and the recreational time afforded through being bestowed with modern appliances and easy-care houses, such flouting of gender conventions was only short-lived. When Ernst May, the architect responsible for much of Frankfurt’s modern worker housing of the 1920s, returned to Germany in the 1950s gushing about new neighborhood units to be built as anchors and security for the “modern nomad,” it was clear that this restless nomad would be male.

The public–private binary, and with it male and female space, express among other things a power hierarchy. Modernity and its associated public space have been celebrated through the male gaze, and despite women’s presence in both public and private space, women’s perception of and interaction with public space remains within the realm of the “other” in a way that questions the very existence of such experience. (Why encouraging this fuller understanding of spatial experience seems to primarily fall to women is another question.) Feminist theorists have noted that the encounter of modernity in literature and art is described from a male vantage point, and that this has resulted in hierarchical gender binaries based on female “otherness.” The experience of modernity in space, both architectural and urban, follows similar patterns. Once more invoking the flaneur of Charles Baudelaire and later Walter Benjamin—the archetype of the modern, urban (European) male interacting with an urban space—these powerful images have clawed their way to the forefront and erased a more nuanced view; as the perspective of the flaneuse, where she is allowed to exist, remains invisible in mainstream chronicles.

A Widely Faceted View of Modernity, Space and Gender

This volume is divided into five parts that correspond roughly to political or socioeconomic systems found worldwide. The first includes states that have a strong tradition of modernization through social welfare programs; the second looks at countries where a market economy has driven approaches to modernity; the third examines the socialist experiment in modernity; the fourth examines tensions in countries where religion has imposed a traditionalist power structure that runs counter to a globalizing, westernized ideal of modernity; and the fifth examines countries that are pursuing modernization.
through rapid economic and social development. In exploring the various forms of modernity identified in these five sections, space and gender play fascinatingly different roles in the various cultural contexts presented.

In some cases, as in states with a strong social welfare tradition, modernity has been translated into social programs leading to better living standards for workers and the middle class. Maria Mesner, Irene Molina, and Kirsi Saarikangas and Liisa Horelli explore post–World War II, state-sponsored housing programs in Austria, Sweden, and Finland respectively, examining how housing choices created largely by a male cadre of planners both aided women and cemented their roles in a heteronormative society.

In chapters that explore aspects of technology and marketing within the context of highly capitalist or neoliberal economic systems, Ruth Schwartz Cowan and Kim England examine the industrial revolution in the household and the office respectively, and how technological changes affected the lives of the women who used those spaces. Alexandra Staub examines how images of modernity and traditionalism are used to market housing in the US; Marion Roberts reflects on the disconnect between legislated gender equality and contemporary city building in Great Britain; and Igea Santina Troiani explores the modernity of one of architecture’s few female stars of the twentieth century, Zaha Hadid.

In looking at socialism and post-socialism, Susan E. Reid examines tensions inherent in redefining modern Soviet domestic spaces in the Khrushchev era of the 1960s; Christine Hannemann explores the role that state-sponsored housing played for gender equality in the German Democratic Republic (GDR); Katja M. Guenther chronicles how socialist-era environments in the GDR have been used to create new, women-friendly spaces in a post-socialist era; Olga Tkach highlights the lives of women performing elderly care in contemporary post-Soviet Russia; and Nóra Séllei examines the tension-laden but lyrical life of a mother and daughter in today’s working-class Hungary.

In chapters that examine religious traditionalism and modernization, Rana Habibi discusses the symbolic “unveiling” of Tehran in the 1960s; Bülent Batuman examines two modern Turkish mosques whose interiors were designed by women; and Eda Acara explores how rural women in Turkey have become activists in order to counter industrial contamination of their water supply.

Modernity has frequently been exalted in countries that are undergoing rapid economic development as part of economic and social globalization. In more nuanced examinations of implications for women, Cindy Fan looks at how rural-urban migration in China affects family life; Penn Tsz Ting Ip examines young migrant women’s lives in Shanghai; Duanfang Lu traces the living and working conditions of factory workers in China; Madhavi Desai examines the bungalow as a modern housing form in India; Aparna Parikh looks at the lives of female call-center workers in Mumbai; and Shelly Pandey traces the lives of Afghan refugee women in today’s Delhi.

The diverse cultures presented in this volume are illuminated through methods of analysis culled from an equally diverse range of disciplines, including architecture, geography, history, literature, sociology and visual studies, among others. Presenting this volume as a network of sites and methods serves a deeper purpose: feminist thinking has done much to deconstruct both the male gaze and the male-defined hierarchical binaries that result through embracing the concept of fragmented realities and multiple perspectives of events and phenomena. This fragmented way of working lends itself well to a volume that explores multiple experiences of modernity in various national contexts, recognizing that this multiplicity must exist without hierarchy. In exploring different cultural contexts with cross-disciplinary methods, the contributors have been strengthened in uncovering women’s contributions to, experiences with, and reactions to modernity in their specific spatial contexts. As Rosalyn Deutsche states in support of the fragmented view as a means of gaining deeper understanding:

If representations are relationships, rather than embodiments of essential meanings, then the high ground of total knowledge can only be gained by a particular encounter with differences—the violent relegation of other subjectivities to positions of invisibility or, what amounts to the same thing, subordination.31
Introduction

This volume does not attempt to offer a comprehensive feminist theory of modernity and space. In keeping with feminist thinking, it does not attempt to be comprehensive at all. Instead, this volume offers a multicultural cross-section and a starting point towards a new, or renewed, discipline-spanning dialog about spatial production and use, a discussion that does not fall into the trap of springing from a heteronormative viewpoint. As cultures seek modernity in various ways, and as spaces are created to accommodate this modernity, the importance of understanding this process and its effects on women specifically should not be underestimated.

In offering a cross section of examples that center on aspects of spatial use and perception missing in the traditional canon, this volume provides a broadly based yet focused analysis that spans diverse social and cultural contexts. The selections can be read individually or as a comparative group, and it is my hope that they inspire further work, especially in areas of the world that this volume does not cover.

Notes

1. Texts often portray women’s safety in urban environments as a central concern, thus sidestepping the problem of violence in domestic environments.
2. See Agrest 2000 [1993].
5. Williams 1976, 156.
13. For example, in the classic anthology Programs and Manifestoes on 20th Century Architecture (Conrads 1971), none of the 68 texts is by a woman.
17. For example the journal Gender, Place and Culture presents feminist research in geography and related areas.
20. Among them, texts by Rosalyn Deutsche, Rita Felski, Doreen Massey (cf. Massey 1994), Linda McDowell (1999), Jane Rendell (especially Borden, Penner, and Rendell 1999), Gillian Rose, Daphne Spain (especially Spain 1993), Despina Stratigakos (2008), and many of the authors of this volume.
29. Quoted in Der Spiegel 19/1955, 37.

References

Introduction


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Kin-Related Elder Care in Russian Families: Challenges for Homemaking

Olga Tkach

Introduction

Scholars working in the social sciences have criticized visions of home as a static space of uniqueness, stability and security.¹ Their standpoint reflects the social history of the twentieth century, when the ideal of domesticity as being exceptionally comfortable and consistent across generations was called into question. Urbanization, with its mass migrations and dramatic social transformations, caused some of this change, as did revolutions and wars that uprooted millions of people from their homes. Old concepts of home were also swept away by state policies and ideologies of mass housing and domesticity. For instance, in the Bolshevik era and Soviet Russia, home ceased to be a private matter, a fortress of private property and comfort, of bourgeois capitalism, or of women segregated into their own domain.²

Studies of intergenerational and geographic mobility as well as feminist scholarship and research on marginalized social groups have significantly contributed to our understanding of the multisited house, unstable home and unpredictable domestic life. The first showed that houses, homes and related place identities change with family dynamics and the stage of one’s life cycle.³ The latter broke out of a cycle that romanticized the intimate private domain, exposing how it can provoke feelings of frustration, unfairness, alienation, humiliation and fear. These feelings, studies showed, come about because of an unequal division of domestic labor or a traumatizing experience of domestic violence and segregation.⁴ Both constructions of home are relevant and heuristic for the research of home-based kin—related elder care.

In the literature on care, aging and family, few studies have considered the accommodations made to private dwelling spaces as a result of such care.⁵ This chapter examines the junction of home and care through an analysis of interview data collected in three Russian cities: Kazan and Samara in the Volga region, and Arkhangelsk, located near the White Sea.⁶ In our interviews with people who had decided to live with their elderly relatives and provide them with care on a daily basis, we collected stories that are representative for Russia, where long-term care, sometimes spanning many years, remains a family responsibility and an issue almost completely hidden within the private sphere. Neither in the Soviet Union nor in current—day Russia have public institutions managed to solve the problem of elder care adequately. In recent years, the connection between elder care and
home settings has become even tighter, due to both a neoliberal weakening of the welfare state and the advancement of a conservative family discourse. Private citizens, especially women, perform unpaid caregiver work, which in hours can amount to a full-time job. Women must often combine these tasks with regular paid employment. Additionally, care work is improvised in homes that are not spatially and materially designed for infirm and dying people. Families must change the layout and materiality of the home and provide access to other sites of care, such as clinics and health care services. New boundaries, or rather frontiers, of privacy must appear within the home and between the home and the outside world; additionally, there are internal domestic boundaries related to an aging body.7

Our chapter explores how home-based kin-related elder care affects homemaking practices and the micro-geography of homes. After describing the empirical data, I turn to a conceptualization of contemporary care patterns and then map out the Russian example. I then analyze how homes change in terms of material culture, homemaking strategies and residents’ feelings as they are confronted with elder care. After that, I examine internal and external boundaries as well as conflicts that exist in several improvised “nursing homes,” where caregivers and care-receivers co-reside. Finally, I discuss the sociopolitical significance of home as a primary locus of kin-related elder care in contemporary Russia.

Research Data and Method

The overall sample used for this study comprises 23 in-depth focused interviews with the primary caregivers co-residing with their elderly, dependent parents, grandparents or in-laws.8 Our interviewees were both men and women ranging in age from 26 to 61. Highly educated, they worked in both the public and private sector in Kazan, Samara and Arkhangelsk. All of them remained employed in order to keep their income and outside activities as an escape from the totality of care work. The majority of our interviewees were married, although several were single or divorced. Most had children and some had grandchildren. The age of care receivers varied from 60 to 96 years old. Various somatic and mental disorders, as well as disabilities due to age, prevented them from living on their own.

In tracing the chronology and the daily routines of their care work, our interviewees carefully recounted their challenges and the transformations that their homes underwent because of co-residing with a dependent elderly relative. The views and activities of those who were cared for have been reconstructed from the narratives of their younger relatives. Our interview partners all lived in the same city or region as their parents, even before care became necessary. Out of 23 care stories, ten care receivers moved to their caregiver’s apartment; seven caregivers moved to live with care receivers; and in six cases, the different generations lived together prior to care becoming necessary. Elderly relatives relocated either from their own urban flats or from private houses in the nearby countryside, or sometimes from other relatives who refused to continue care work for different reasons. The majority of caregivers moved from flats that they owned; only in one case did a caregiving couple move from a rental apartment. After relocation, households included three to four generations and up to seven people. Our sample contained housing from one- to four-room flats (see Figures 12.1 and 12.2). The housing varied considerably in quality and scale, from centrally located two- or three-storied wooden apartment blocks lacking hot water, central heating, sewage systems, or individual bathrooms and kitchens (Figure 12.3) to more modern multistory blocks of flats, either built during the Soviet era or afterwards (Figure 12.4).
A 64-year-old caregiver and her 90-year-old father sit in the kitchen of a three-room apartment in Samara that he moved into several years ago.

Figure 12.2  One of three rooms in a Samara apartment. It is used as a caregiver’s bedroom and is also occupied by her children when they visit.


Figure 12.3  A three-story wooden barrack in downtown Arkangelsk, built in the 1930s. The house has no central heating, hot water, sewage lines, private bathrooms or kitchens. The residents occupy one or two rooms rather than flats.

Source: © Olga Tkach, 2017; commentary by Natalia Kukarenko.
Ideas and practices related to elder care are largely driven by local cultural practices and attitudes towards aging. Culturally and structurally grounded patterns of elder care shape welfare policies and the development of social institutions, as well as public opinion regarding intergenerational bonds, the elderly, and primary loci of care. In the late 1980s to mid-1990s, Arlie Russell Hochschild developed the concept of four gendered cultural models of care that reflect the “care deficit” in both private and public life and the public discourse. 9 Although these models were drawn decades ago from the research of American families, they still remain internationally appropriate for (post)modern societies. The first is the traditional model represented by the image of the homemaker mother providing unpaid care. The second is the postmodern model, represented by the working mother who “does it all,” with no additional help from any quarter (or at best, a man doing little at home) and no adaptation in her work schedule. The third is the cold-modern model represented by impersonal institutional care in year-round ten-hour day care and old-age homes. The fourth is the warm-modern model, in which institutions provide some care of the young and elderly, while women and men join equally in providing the remaining care needed. It is modern because public institutions become part of the solution, and warm because we do not relinquish all care to them. 10 The models differ by the degree of modernization, and among them the fourth model seems the most institutionally advanced and gender balanced. Hochschild also points out that various developed nations respond differently to
similar care deficits they face, and adopt either pure or synthetic models, or are in transit from one model to another.\textsuperscript{11}

Following the idea of national cultural politics of care or care cultures, and focusing particularly on elder care, current European research distinguishes two cultures and types of care localization. The Southern European model, also called the Mediterranean familist or residential care model, relies mainly upon unpaid female labor in a private domestic setting. It presumes the co-residence of several generations and is based on the solidarity and resources of an extended family.\textsuperscript{12} This model also prevails in post-socialist contexts, where familist care compensates for underdeveloped social security, public health and pension systems. In post-socialist contexts, intergenerational care provides for the wellbeing, health and leisure of the elderly.\textsuperscript{13} Researchers comparing Western capitalist and post-socialist patterns of elder care have found that in countries with harsher living conditions, multigenerational co-residence remains prevalent.\textsuperscript{14} In Hochschild's terms, this model reflects both traditional and postmodern and in part warm-modern models. In contrast to the familist model, the Northern European model of elder care, similar to Hochschild's cold-modern model, is provided primarily by professionals working in institutional settings, such as nursing homes.\textsuperscript{15} In addition to Scandinavia, where this model has been studied and described, this form of care exists in many Western countries, where family solidarity remains strong but is much less likely to involve co-residency.\textsuperscript{16} In these alternative models, the main responsibility for care or its delegation to institutions belongs to (extended) families, rather than just women.

The dichotomy of familial and institutional care has become less pronounced, as a rollback of the European welfare state has led to professionals or volunteers as well as migrant nurses providing care to elderly people residing in their own homes. Various policy options exist, such as providing a diverse stock of housing and “staying put” programs, which help older people keep their homes, maintain their social networks, live in safe housing, and obtain needed care.\textsuperscript{17} Depending on the particular case, various programs that allow the elderly to age in place can be seen as either a cold- or warm-modern form of elder care, as they do not rely solely on traditional support structures, such as extended families. A further global trend is the commercialization of care, including elder care.\textsuperscript{18} Researchers still distinguish between states that institutionalize social welfare, where formal and informal markets predominate as social service providers, and those where communities of volunteers, such as families, friends and neighbors provide care, usually in the spaces of the home. The different approaches have led to intense debates over whether states, markets or families provide the best care in terms of affordability, efficiency and care ethics.\textsuperscript{19} Regardless of what type of care is considered mainstream in a particular society, home care retains its sociopolitical significance either by replacing an underdeveloped public sector, or by humanizing or “warming up” cold care provided by modern institutions.

The Culture of Familial Co-residence and (Elder) Care in Russia

Like many post-socialist countries, Russia tends towards traditional or postmodern models of care, similar to the familist care culture of southern Europe. Like many nations worldwide, Russia is aging: the percentage of retired citizens in the overall population is growing (see Table 12.1), and life expectancy rates, while still lower than those of most wealthy countries, have also been increasing. Not surprisingly, the incidence rate (number of new cases per population at risk in a given time period) among elderly citizens is higher than that of other age groups.\textsuperscript{20} Some 80% of citizens older than retirement age (55 years for women and 60 years for men) have multiple chronic pathologies, with patients over 60 having an average of four to five different chronic diseases, including a wide range of somatic and mental disorders, such as dementia.\textsuperscript{21}

The Russian state admits that systemic approaches are necessary to solve these issues. In 2016, the government approved the “Strategy of Actions in the Interests of the Citizens of the Older Generation in the Russian Federation until 2025” (hereafter “Strategy”) to further an elder policy that had been
<table>
<thead>
<tr>
<th>Year</th>
<th>General population, in thousands</th>
<th>Population over retirement age</th>
<th>Percentage of the population over retirement age in the general population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>142,747.5</td>
<td>30,160.8</td>
<td>21.1</td>
</tr>
<tr>
<td>2009</td>
<td>142,737.2</td>
<td>30,540.9</td>
<td>21.4</td>
</tr>
<tr>
<td>2010</td>
<td>142,833.5</td>
<td>31,186.1</td>
<td>21.8</td>
</tr>
<tr>
<td>2011</td>
<td>142,865.4</td>
<td>31,808.9</td>
<td>22.3</td>
</tr>
<tr>
<td>2012</td>
<td>143,056.4</td>
<td>32,433.5</td>
<td>22.7</td>
</tr>
<tr>
<td>2013</td>
<td>143,347.1</td>
<td>33,099.6</td>
<td>23.1</td>
</tr>
<tr>
<td>2014</td>
<td>143,666.9</td>
<td>33,788.6</td>
<td>23.5</td>
</tr>
<tr>
<td>2015¹</td>
<td>146,267.3</td>
<td>35,163.4</td>
<td>24.0</td>
</tr>
<tr>
<td>2016</td>
<td>146,544.7</td>
<td>35,986.3</td>
<td>24.6</td>
</tr>
<tr>
<td>2017²</td>
<td>146,804.4</td>
<td>36,685.1</td>
<td>25.0</td>
</tr>
</tbody>
</table>

¹ As of 2015, figures include the Crimean Republic and the city of Sevastopol.
² Preliminary data.
³ Defined as males over 60 years old and females over 55 years old. In order to make this range more precise, elder policy distinguishes three age cohorts of elder citizens: (1) 60–64 years old—socially and economically active, often employed; (2) 65–80 years old—less active, many of them needing health care and social services; (3) above 80 years old—citizens having serious health issues and requiring help and care. See Strategiiia 2016, 2.

under development since the mid-1990s. The Strategy combines elements of both welfare and neoliberal policies. It acknowledges elderly citizens as facing health issues, loneliness and a lack of mobility, making them subjects of social care. The Strategy also assumes state responsibility for “increasing elderly citizens’ quality of life.” According to official statistics, 87.6% of citizens over 65 need care offered by public institutions. Although municipal social workers provide care both in institutions and in clients’ homes, they are able to provide services for only a fraction of eligible patients. Not only are services rare, but their quality remains unsatisfactory, as Table 12.2 makes clear.

As a newly neoliberal state, the Russian government has signaled that it considers the elderly to be an economic burden, stressing that a patient over 70 years old costs seven times more to treat than one who is 16–64 years old. So-called optimization measures have reduced the number of specialized institutions, available spots in them and social workers. In a trend towards reducing or commercializing social welfare, the Russian state has attempted to encourage non-governmental organizations (NGOs), socially responsible businesses or families and private citizens to fill the ensuing gap. The latter are seen as having the primary responsibility for elders’ care, which has resulted in a conservative discourse about the traditional family model and the need to strengthen family values. As the Strategy states:

In Russia, the family has traditionally been the main institution of intergenerational care. The support of an elderly person by family members, and the contribution of elderly people in caring for younger generations, are of great social importance.

Russian policies exalt that “large multigenerational families have always been the main type of family in traditional Russian culture, where close relationships between several generations of relatives exist.” Propagating relatives’ support of the elderly, the state uses an ideology of intergenerational bonding to revive family members’ natural interest in and perceived responsibility for care work.

In their narratives, most of our interviewees echoed such state propaganda clichés. When asked to imagine alternatives to home-based care, they defined the private realm as the only possible care domain, and family as a main source of elder care. They rated people who take elderly parents to a nursing home as uncaring and ungrateful sons and daughters. Our interview partners described institutionalized care as a violent withdrawal of elderly people from the family, using terms such as “to send out,” “to give away,” “to forsake” and “to abandon.” Similarly, in a 2013 national survey, 53%
of respondents who had visited public nursing homes for the elderly claimed that the living conditions in such homes were bad, while 57% considered the relocation of aging people to such homes as abnormal and unacceptable for people with children or close relatives. Half of the respondents who considered relocation as unacceptable were convinced that children must take care of their parents. In the national sample, 94% of the respondents claimed that they have never had relatives living in nursing homes (although social stigmatization may have prevented respondents from admitting the contrary). In a national survey conducted in July 2016, 17% of the respondents aged 40–54 and 22% of the respondents over 55 were reluctant to move out of their parents’ home because their elderly relatives “need constant custody and care.”

On the one hand, such representations reveal people’s agency in solving family issues. On the other hand, I would interpret such perceptions as a defense mechanism for families who find themselves standing face to face with the necessity of home-based care with almost no public support. Although the Soviet Union had an extensive welfare system on paper, social services were either scarce or did not meet citizens’ needs, so that families had to rely on intergeneration bonds in order to compensate for the lack of services. Our interviewees recounted that they would not have survived or been able to maintain a work-life balance without the solidarity of their family circle:

When I grew up and got married, we lived with [my mother] for three years. We got along very well. We ran the household together, and she helped us with our child. [. . .] It was a very hard time. I was writing my thesis and we were short on money. And she helped us, she took our child to school, helped her with homework. Overall, she helped us a lot.

(Firuza, 50, takes care of her mother, 73 in Kazan)

Another interviewee recounted:

[My parents] took care of their granddaughter a lot. Dad picked her up from school; mom cooked for us. It was a tremendous help.

(Irina, 55, takes care of her mother, 81, and father, 83, in Samara)

During the economic crisis of the 1990s, older relatives supported many young Russian families. It is still an option for many. Our research has found that one reason people continue work after formally retiring is to support their children and grandchildren by paying for their education, mortgages, or other expensive purchases. Often, grandparents lived with their children to care for their grandchildren. Although the Soviet Union had policies in place to provide each family with an apartment, flats were often occupied by several generations due to a de facto lack of housing. Co-residence continues to be the norm for many families today. A national survey conducted in July 2016 found that younger generations prefer the advantages of living with their parents. Respondents aged 18–25 in particular mentioned motives such as, “I would not be able to manage domestic chores” (43%), “I need constant support and advice from my parents” (29%) and, “Living alone means extra costs that can be avoided” (37%). Intergenerational residential attachment does not necessarily mean strong family bonds and affection towards other family members, but rather a flexible and reliable solidarity that can be mobilized on demand. Still, within such cultures, kin-related, home-based elder care is regarded as a fair and anticipated payback for the older generation’s childcare.

In contemporary Russia, a number of cultural, economic and political factors come together in the discourse and practice surrounding the perceived family responsibility for elderly care. A large number of people who are now in their fifties and sixties have assumed care for their aging and infirm parents, considering it as a “normal thing,” something that becomes inscribed into their biographical scripts uncontested. They face a certain dilemma. On the one hand, even if it causes them hardships, they opt
Preparations for Generational Co-residence

The turning point where middle-aged family members decide to provide home-based care is the elderly relative’s inevitable dependency, that is, the irreversible decline of their energy and health, and loss of their mental and/or physical activity and autonomy. In some cases, decline can be slow, accompanied by constant and visible changes of somatic or mental health, worsening of eyesight and/or hearing, and of the ability to move around. In other cases, a drastic and unexpected event such as a sudden fall, stroke or massive heart attack, or loss of a spouse leading to heavy depression and other diseases, can result in a need for care. In both cases, elderly people may lose the ability to maintain their household, use appliances, pursue well-loved hobbies or maintain proper hygiene. Constant supervision in the form of co-residence is then clearly needed.

An elderly person with set habits, a difficult nature and constant demands is not welcome for many relatives. The elderly person thus moves in with those relatives who are able to live with him or her. Care, understood as commitment, sacrifice or compromise, becomes a final argument for those who have great confidence in their nuclear family members, such as spouses and adult children. In this respect, a nuclear family, or rather married couple, is one of the most solid bases for kin-related, home-based elder care. Lena from Kazan tells how she, together with her husband and sons, came to the decision to take her peevish mother in to live with them:

[My mother] has a very difficult nature. She is an irreconcilable person, especially with regard to my brother’s family. [...] My mother is a person who does not need anyone. Moving in with that kind of person is contentious, of course. She was always plotting against my husband, turning my husband against me and the children against us, etc. It’s an unpleasant situation. We talked to her, and she agreed to live with us. I also spoke with my husband, since this is my mother. He agreed [to the move]. And I also told our children that we would take grandma in. So, she’s been living with us for over four years.

(Lena, 51, takes care of her mother, 71, in Kazan)

Sometimes, housing conditions do not allow an extended family to live together, so members of a nuclear family must temporarily split up in order to provide elder care. Alexander (57 years old) from Samara had to leave his wife and move in with his 89-year old mother, who had suffered a stroke. He decided that it was better not to take his wife to live in a small flat in a wooden house with no hot water and no private bathroom, especially as his wife needed time and energy to look after her own elderly mother, who lived on her own.

When possible, moving in with an elderly relative begins with a family project of redistributing, joining, exchanging or enlarging real estate and living space. Our sample consists of representatives of the lower-middle classes, for whom the purchase of a new flat was seen as problematic. An extended family, however, often owned several smaller apartments, which belonged to or were shared by various relatives. This modest family accruement of real estate could be traded up or down when an emergency or significant life changes necessitated it. In the following case, real estate was distributed in favor of the youngest generation of a family:

When our older daughter told us she wanted to start her own family, [all the relatives] decided that we would pool our flats and [trade them in for] a three-room flat and a studio apartment. We would give [our daughter] a studio apartment, while moving in with [my husband’s] parents to take care of them.

(Tatiana, 49, takes care of her mother-in-law, 85, and father-in-law, 88, in Samara)
Another option was to trade in several smaller flats for a larger one:

When [my mother] moved in, we felt our flat was too small for all of us [. . . ] We sold her flat, bought a new one, and moved out from the one the institute had provided [in the Soviet era]. We live together now; we have a three-room flat. She lives in one room. Our daughter lives in another. The room where my husband and I live is also used as a living and dining room. It's OK with us.

(Firuza, 50, takes care of her mother, 73, in Kazan)

If selling flats and buying new ones is not possible, family members arrange for caregivers to co-reside with an elderly person in whatever flat is available. This means that elder care is sometimes provided in an apartment that is owned by a family member who does not live there. Andrei (28 years old) from Arkhangelsk and his partner moved to Andrei’s 60-year-old father, who is partially paralyzed on the right side of the body. He lives on the outskirts of the city in a three-room flat owned by Andrei’s mother and younger brother. Because both Andrei’s mother and brother were not able to perform the care work, Andrei and his partner had to move from their rental flat in the central city to his father’s flat.

The question of housing in the context of elder care can obviously be solved in many ways. The most widespread solution is that the middle generation co-resides with dependent parents, while their children, who themselves are often married with children, live separately. When an extended family makes a temporary or final decision about who moves in with whom, the home must be adjusted to the new care tasks. The following sections consider the materiality and domesticity, as well as the feelings of the inhabitants towards this new home, by examining the ensuing boundaries and conflicts.

Elder Care and Homemaking: Materiality, Practicality, Sensuality

In most cases, an elderly person experiences relocation as something painful, as it requires shifting from an independent owner or dweller to a dependent family member or guest. A loss of things left in the former apartment as well as social networks that cannot be moved might lead to frustration and loneliness. Raisa recalls that her mother was able to accept the fact of relocation only after getting back a shawl that she had forgotten in her former flat:

[My mother] calls herself a migrant, because she had to move out of her flat and leave her “nest” behind. [. . . ] She left things that she had acquired over the course of years. She moved into a new place, and felt like a stranger. And she identifies us with this disaster that happened to her. [. . . ] I acted with the best of intentions, but she didn’t feel well. We did not take the goods that [she had] acquired over the course of years. It was bad for her. We did not take her fluffy shawl. She reminded me about it for two years, until I went [to her old place] and got it for her. [. . . ] So, you know, it’s physiologically difficult for her. Everything [in the new place] is not hers.

(Raisa, 61, takes care of her mother, 96, in Samara)

Although Raisa was a good caregiver, her mother still felt like an newcomer for whom relocation led to an identity crisis. To her, the old shawl was a familiar item that signified her own home, a feeling of comfort and an ability to manage life.38

Even if some old items cannot be kept or taken from the former apartment, in most cases the dependent elderly person might require new things or special equipment such as wheelchairs, crutches, portable toilets or other paraphernalia. Able-bodied relatives not only purchase new goods but also
make special devices they cannot buy, or adapt things that are at hand. Zinaida recalls how she made use of an air mattress:

I was sitting and thinking, “Oh, my God, how am I supposed to bathe mom?” [. . .] Then I had an idea. Now I recommend it to all my friends who have the same problem. I have an air mattress. We used to take it on vacations. I inflated it, and put it in the bathtub as a seat. And then I carefully placed [my mother] onto it. It meant she was able to sit comfortably.

(Zinaida, 53, took care of her mother for seven years in Kazan)

Our research shows that multigenerational co-residence has a positive influence on the daily life of the elderly, in particular as the home becomes more predictable, safer and better adjusted to their needs. Yet elderly relatives who have memory lapses or who are inattentive or physically weak make the everyday life of the whole family unpredictable and even dangerous, as the elderly relative’s actions can result in fires, floods or burglaries. Caregivers must increase precautionary measures such as hiding sharp kitchenware, or locking up access to gas appliances, water faucets, the kitchen or even the front door when they go to work. Younger relatives adapt the apartment, widening doorways or removing thresholds, to facilitate movement around the apartment and make their elderly relatives more comfortable.39

The domestic life of a caregiving family is dominated by the constant care work that the middle generation (most commonly a married couple) performs. The division of labor for the caregiving couple is quite traditional and corresponds to overall trends in Russian families: women perform routine housekeeping tasks, such as cleaning and cooking, as well a range of physical care work, such as spoon-feeding, bathing, shaving or required medical care. Men warm up prepared meals, take out the garbage, do the shopping and drive when needed.40 To a certain extent, all members of the household are involved in elder care and share all responsibilities. Elderly people with deteriorating health often spill or drop things, forget to close doors or turn off appliances, and generally make a mess that has to be cleaned up. Relatives have to help the elderly with everyday tasks and bodily functions. If a building is not equipped with an elevator, and an apartment does not have hot water or heat, both housekeeping and care work become tremendously difficult. The family operates as a team, and for many, care work becomes a family bonding experience. Nonetheless, women—the daughters or daughters-in-law—manage the care process. The woman constantly monitors the situation, gives calls to other family members to check if everything is being done properly and on time, and coordinates schedules:41

Everyone does everything, depending on the situation. For example, when I work, my daughter calls me and asks, “Did grandma eat anything?” My husband also calls and asks, “Is grandma fed?” My son-in-law comes home at lunchtime, and also asks, “Did anyone give a food to grandma?” or “Did she use the toilet?” Thus, everyone knows what to do next. This is how it usually goes.

(Lena, 51, takes care of her mother, 71, in Kazan)

Caregivers must constantly be on the alert, monitor the elderly person’s health and maintain his or her diet and treatment schedule. In fact, the elderly person’s feeding and medication regimen determines the schedule for the rest of the household, as relatives spend most of their time at home devoted to elder care. Zaituna from Kazan describes her normal day as follows:

We get up at 6 am, check [mother’s] blood pressure, then we give her blood pressure medication, and then have breakfast. After breakfast she goes to bed again and watches TV . . . she can switch it on herself . . . I go to work. I have lunch at noon. I run home and give her lunch, check her blood pressure again, she takes her medication again if needed, and then I go to work. I get back at 7.30 p.m., we have dinner . . . Sometimes, when her blood pressure changes rapidly, I ask
neighbors to help. I leave the key with a neighbor who lives on the second floor. This is how my normal day goes.

(Zaituna, 50, takes care of her mother, 80, in Kazan)

The main caregivers must balance the totality and unpredictability of home-based care with their professional lives. Usually, they must scale back their career aspirations and, if possible, arrange for a more flexible work schedule.

When a dependent elderly relative moves in, it also adds new sensual experiences to the domestic environment. The tempo gets slower or faster, and noise levels increase or decrease. At night, elderly residents might wander about, watch TV with the volume on high or ask for help. Not everyone is able to adjust their biorhythms to provide night care:

My son is scared to stay overnight with his grandma. She’s been known to get up, turn on the gas, and forget about it. I used to wake up immediately. He is young; he does not wake up. Once, she turned on the gas but he did not hear it. That’s why he’s scared. He says, “I will not sleep at all, then.” This is very annoying. But I wake up right away. She gets up—I wake up.

(Alexander, 57, takes care of his mother, 89, in Samara)

Another common problem is illustrated by Tatiana’s father-in-law, who suffers from senile dementia accompanied with hyperexcitability. Tatiana and her husband consciously rejected an extensive medication regimen in order to allow her father-in-law a more normal life. She explains what the entire family experiences every night:

[My father-in-law] walks 24 hours a day. He passes by our room shuffling, he turns on the light everywhere, he flips switches. He goes to the toilet and back, flips again, and then turns the water on for 10 minutes straight. This is just Nazi torture, when you toss and turn the whole night listening to running water. Then he leaves [the bathroom], and in two minutes he forgets he was there. His operational memory doesn’t work at all. He doesn’t even make it back to his room before starting to follow same procedure again. This endless walking happens day and night.

(Tatiana, 49, takes care of her father-in-law, 88, and mother-in-law, 85, in Samara)

New bodily experiences divide those who are able to tolerate unpleasant sights and smells, as well as family members’ annoying habits, from those (mainly grandchildren) who cannot overcome the feeling of irritation and disgust. Caregivers try their best to conceal unpleasant smells with cleaning products. Yet boundaries related to the aging body do not seem to be the primary source of conflict. The next section considers other internal and external boundaries and conflicts that make up the micro-geography of home.

External Boundaries and Internal Conflicts of the “Caring Home”

Even if an apartment is fully equipped for care and the elderly person surrounded by loving and responsible relatives, the middle-aged relatives cannot perform their tasks without the assistance of qualified healthcare. Almost all interviewees and their (grand)parents reported negative experiences with public healthcare and related services, resulting in a tendency to perceive these external spaces as a type of “counter-home.” Underdeveloped urban infrastructure and public transportation and a lack
of medical staff, as well as outdated or poor equipment in public clinics and hospitals, create many issues for a terminally ill person and his or her relatives:

The hospital is very uncomfortable, because it has high thresholds and steep stairs. When we climbed up with [my mother], everybody looked at us with sympathy and even supported us verbally, because they saw that it was very difficult for her. So this is why I can't take her anywhere.

(Lena, 51, takes care of her mother, 71, in Kazan)

When elderly parents have to stay in the hospital for any length of time, caring relatives accompany them, sometimes for weeks, to act as informal nurses. Relatives must endure unfavorable conditions, as well as the staff’s hostile attitudes. They persist, believing that their presence might mean better service and security for their parents. Nevertheless, the most urgent issue that our interviewees identified was that doctors and nurses demonstrate a careless and irresponsible attitude towards older patients. Elderly people are often diagnosed as suffering from “old age,” for which treatment is pointless. Caregivers vie for doctors’ attention with bribes, or attempt to find a private clinic. Another way to compensate medical doctors’ disregard is to transform the home into an amateur clinic or hospice, which unlike public and private hospitals feels engaged, safe and secure. Gradually, caregivers learn to be experts in particular illnesses and provide necessary medical procedures. They feel proud and empowered when, against the prognoses of medical doctors, they are able to get their relatives back on track and prove that the family’s warm and loving attention is much more effective than any hospital.

Most of our interviewees rejected outside help. Unfamiliar paid helpers were often rejected by the elderly relatives themselves:

A friend of mine has a mother with diabetes. She has already lost both legs and eyes. She abuses all the nurses my friend hires. Nobody wants to work with her. They pay 10000–11000 rubles [per month], but nobody wants to stay, even for that money.

(Zaituna, 50, takes care of her mother, 80, in Kazan)

The cared-for desperately try to keep their lives private and home boundaries closed, for they feel embarrassed about their dependent status, weaknesses and disabilities. Caregivers themselves also distrust both public social workers and private nurses. For this reason, and because they consider services to be of low quality, they do not hire nurses. Other relatives rarely provide a significant amount of service, as they live in other housing, other cities or even abroad. They can only contribute financially, or take over for the primary caregivers occasionally if the elderly relative agrees.

The “soft” variant of involving outsiders is to rely on neighbors and friends who live nearby. These are usually female pensioners who, over decades, have become part of a territorial urban micro-community. Such communities are common in apartment buildings that were built in the 1960s to 1980s and that have housed the same families for generations (Figure 12.4). Able-bodied relatives can easily leave their keys with trusted neighbors, who provide free or inexpensive help either regularly or on occasion. Because our interviewees were all employed and thus absent from home during the day, cooperation with the neighbors meant someone could call an ambulance, bring medicine or food, pop in once in a while to check on things, or take the elderly person for a walk or to sit on the bench by the front door (Figure 12.5).

After their morning routine, elderly people stay at home alone, unless relatives or neighbors stop by during the day. Elderly people generally stay in bed, watch television (news and series are popular), read newspapers and books, sit by the window or on the balcony, make phone calls, knit, take care of pets and houseplants, play solitaire, write poems, play musical instruments and sing songs. Despite this range of activities, the elderly suffer from loneliness. Their social isolation can be quite dramatic, as Russian cities lack infrastructure for people with special needs. Doorways, corridors and stairs are
narrow, and ramps and elevators rare. Under such conditions, even taking an elderly family member for a walk every day becomes challenging:

When the weather is beautiful and warm, especially in the summer, I take [grandmother] for a walk in a wheelchair. We live on the ground floor, and the building has no accommodations for the disabled. First, I take out the wheelchair, and then my mother and I walk grandma out together. One person would not be able to do it, for the front stoop is very high. That is why we have to walk her out together.

(Stepan, 29, takes care of his grandmother, 86, in Arkhangelsk)

Although Russians prefer not living on the ground floor, in buildings without an elevator the caregivers said they were happy to live there, to make it easier to exit the house and go for a walk.

When family members arrive back from work, they do not always have enough time or energy to make up for the lack of communication during the day. The care stories show that the instrumental aspects of caregiving, such as washing, cleaning and feeding, prevail over the communicative or emotional aspects of care work. Still, families try their best to improve their elderly relatives’ environment and try to find extra time to keep them company. Primary caregivers might organize a family reunion, encourage other family members to visit elderly relatives or ask grandchildren to call their grandparents. An elderly relative has to attract attention through numerous demands, inquiries and

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*Figure 12.5* A bench by one of the entrances to a nine-story block of flats in Samara. The bench is a favorite resting spot for elderly people living in the house or the surrounding neighborhood.

whims that cannot be ignored. By compelling their family members to constantly be on the move, the elderly compensate for their dependent position and social isolation, become more involved in family life and demonstrate their authority.

Caregivers reported that their social life also decreased. Because caring for an elderly person involved maintaining silence and calmness at home, having guests over was rare:

Guests don’t come over any more. We had a bunch of friends we’ve known since school. Since [mother] moved in, we’ve lost our freedom. If someone comes over, she appears in the corridor and stands there. She has poor eyesight, and tries to recognize who it is. It’s not comfortable for a person to be scanned like that. So people come to have fun, and she tries to join us—an elderly woman, grey hair, with a teacup. You know, it’s disturbing.

(Raisa, 61, takes care of her mother, 96, in Samara)

Home becomes confining, limiting or excluding mobility and any chance to relax. The caregivers have to reduce the frequency of business trips, doctors’ appointments, vacations, leisure time and dating. They see their lives, bodies and time as belonging to the relatives they care for:

Certainly, I’m not free. I can’t go anywhere at night. I have a schedule: work, home. [. . .] I can’t do what I like to do, because I spend all my time at home, cooking, helping [my mother], and performing everyday medical procedures for her. This is what I do, day after day, with no weekends.

(Liubov, 56, takes care of her mother, 80, in Arkhangelsk)

The emotional and physical pressures on able-bodied family members cause them to experience psychological burnout and physical exhaustion to the point of declining health. Observing a parent’s process of aging and dying on an everyday basis can be psychologically difficult. Our interviewees admitted that they were often not able to interact with their parents on equal terms. As parents’ personalities and communication skills underwent dramatic changes, they lost their ability to clearly articulate their thoughts:

Only recently, [my mother] was able to hear, but now she is practically deaf. So, you know, I can’t speak with her tenderly, because I have to repeat everything five times, and by the fifth time I have to yell, of course. Yelling is by default not kind. If I ask her, “Did you take your pill?” I repeat it five times. So care has become a source of irritation.

(Raisa, 61, takes care of her mother, 96, in Samara)

Under such circumstances, many caregivers are not able to negotiate control over their own spaces and everyday lives. The narratives reveal that the uncontested ideology of kin-related, home-based elder care runs counter to a reality in which amateur “nursing homes” are beset by frustrations and conflicts. Suppressing one’s irritation becomes a crucial aspect of emotional work. In this context, the outside world is imagined as a space of desire, relaxation and emancipation, in contrast to the home environment that is characterized by self-discipline, self-control, exhaustion and unwanted attachment. Only caregivers who have enough resources, either material (e.g., a dacha [summer house]) or social (relatives’ support), can afford to leave home and let out their negative emotions:

Honestly, mom pisses me off. I can hardly hold back. Sometimes, I feel so irritated. I try to leave home, because if I answer rudely, then I won’t forgive myself. [. . .] I lose my temper, and my nerves are shot. When I come home after a 24-hour shift, and she asks me to do something with her, then I . . . feel guilty. [. . .] I think if you’re tired, it’s better to go out, to walk, go somewhere
if you have someone to replace you. I have a person like that. Regardless, I control my temper, and go for a walk.

(Olga, 47, takes care of her mother, 81, and father, 83, in Kazan)

Internal conflicts give some caregivers cause to reflect on the ideology of intergenerational reciprocity and openly criticize it as a hypocritical pitfall. One has to take care of one’s parents, even if one harbors no warm feelings towards them. This ideology is seen as a relict of a premodern, extended rural family. To critics, it has seemingly lost its significance in today’s urbanized societies. Our interviewees believe that the chafing and interdependent relationships between relatives still exist in Russia today because of the lack of adequate housing, coupled with the lack of privacy that generations of Soviet citizens came to see as normal. Raisa from Samara likened her situation to a kommunalka (apartment shared by several families) to describe the dwelling genealogies that have evolved in Russian cities:

We have lived in kommunalkas our whole lives. First, our parents lived with their parents, then we lived with ours, and then our [grown] children lived with us. That is why phrases like, “I brought you up, and you owe me,” are still widespread. I think this is wrong. We want to live in dignity and independently of each other. I cannot live my own life now. I want to go in a certain direction, but someone says, “Come here.” This attitude needs to change; it is our future. So far this issue could not be resolved in our country because of our mentality and our politics. [. . .] Overall, I think we need nursing homes where people can live, not nursing homes like we have here in Russia. [We need] decent, adequate ones where an elderly person can have his or her own room and communicate with others. [. . .] They have to have good meals, a nurse who can measure blood pressure and give necessary medication.

(Raisa, 61, takes care of her mother, 96, in Samara)

Interestingly, Raisa equates sharing an apartment with one’s parents as similar to living in a kommunalka, where unrelated strangers compete for an apartment’s shared spaces such as hallways, kitchens and bathrooms. Raisa uses the term to refer to the lack of privacy due to overcrowded flats, stifling intergenerational bonds and a tendency toward mutual control. Her reference also points to a certain hopelessness, as people feel trapped in their living situation due to cultural inertia, leading to feelings that one is doomed to live like this forever. Raisa calls for modernization, defining it as residential separation and the emancipation of generations from each other, as well as the development of public services. Still, she does not assume that such modernization could ever take place in Russian society, due to existing socioeconomic, cultural and political paradigms.

Based on Italian data, Barbara Da Roit has shown that ideas of intergenerational solidarity are stronger in economically deprived social milieus, while wealthier social groups move to transform conservative care patterns. Russian scholars have also observed the separation and spatial emancipation of upper-class and upper-middle-class families who can afford to purchase their own flats and hire domestic workers without having to rely on elder relatives’ help. With less wealthy families, however, generational emancipation would require better social infrastructure. Our interviewee Raisa points to this very issue in contemporary Russian society. There is a high demand for decent social support networks and a separation between domestic spheres and nursing homes. Such separation would allow apartments to be limited to nuclear families while permitting alternatives to home-based care and the ideology of intergenerational reciprocity, yet such alternatives have not been realized. In Hochschild’s terms, Raisa’s statement reflects a desire to make Russian care culture a bit colder than the traditional or postmodern one, as private citizens do not have energy or institutional resources to warm it up.
Conclusion

This chapter analyzed family narratives in which a small urban apartment becomes a site of elder care. Russian families have kept a kin-related pattern of care similar to the Southern European familist version, a postmodern care culture where private citizens have to balance work and family life with almost no public support. In the Russian context, this pattern is due to the lack of social welfare and professional nursing assistance, the marginalized status of elderly patients in the health care system, and a continued ideology of intergenerational reciprocity among people born in the 1950s and 1960s. Even during Soviet times, elder care was almost entirely family-based by choice. Both the authorities and society were unwilling to invest in the development of professional nursing services; consequently people relied on traditional structures by default.49 Current-day Russia has become a neoliberal state under the cloak of a social welfare system, and remains wed to conservative family policies that promote strong intergenerational bonds. This leaves families no choice but to take responsibility for their terminally ill or infirm relatives. Yet, as Hochschild notes, “the private realm to which conservatives turn for a solution to the care deficit has many problems itself.”50 Able-bodied relatives must adapt their private dwelling space to be used as an improvised nursing home. Families, predominantly working women, manage the private sphere as caregivers, domestic workers, amateur medical doctors and psychologists in order to compensate for deficiencies in or the lack of public care. To a certain extent they are successful, although they pay a high price in terms of privacy, comfort, and health. 

The processes of aging, dying, and death interrupt daily routines and call into question the home as a space of safety, relaxation, and freedom. Residential elder care can lead to the physical and social isolation of family members from the external world. It also results in the home being split into two spheres that remain firmly interrelated: that of the caregivers and that of the care receivers. The boundary and conflicts between them can be described in terms of dirt/cleanliness, demolishing/renewing, complexity/simplicity, someone’s belongings/one’s own belongings, and so forth.51 Despite the caregivers’ best efforts, such discrepancies cannot be resolved. Instead, they evoke the feeling that their efforts are futile, due to a lack of resources and skills for providing effective elder care.

Clearly, private homes where unpaid residential elder care is provided have enormous public and political significance. They replace public institutions of care almost completely, therefore compensating for deficits in the availability of elder care. The lack of options, along with cultural biases, means that the demand for modern elder care cannot be satisfied. What would the modernization of elder care in Russia look like, considering that such care has been a family matter for centuries? Feeling exhausted by residential care work, our research participants understand the modernization of elder care as drifting to a cold-modern rather than a warm-modern model. For many, taking an elderly parent to a nursing home, even one of excellent quality, continues to raise the ethical dilemma of taking a loved relative away from the family. I would argue that they do not consider the warm-modern model an option because for various reasons their worldview does not allow a partnership between private citizens/families and (in the broadest sense) public institutions in caring for the elderly. Under current structural conditions, public and private elder care seem mutually exclusive to them. Thus, caregivers prefer to keep care culture warm in private, while still lamenting about less modernized institutional care. A lack of substantial government and business initiatives in the realm of elder care, as well as an unequal division of elder care work within families, will most likely impede changes in the current situation as well as Russia’s transition to a warm-modern society.

Notes

1. Since about the 1980s, the most prominent contribution to this criticism has been made in the areas of migration research and studies of transnationalism. For the most recent overview see Boccagni 2017.
2. Reid 2009, 469. In the 1920s, the struggle for novyi byt (a new daily routine) presumed not only women's emancipation through active participation in mass production, but also the opening up of domesticity to the gaze of the Soviet collective.
6. In January 2017, Kazan had 1,231,878 inhabitants, making it Russia’s sixth largest city. Samara had 1,169,719 inhabitants and Arkhangelsk 352,128, making them Russia’s ninth and 54th largest cities respectively. This chapter is based on a sample that was a part of an interregional research project called “Gender Arrangement of Private Life in Three Russian Regions,” carried out by the Gender Program of the European University at St. Petersburg, Russia in 2008–10, and funded by the Ford Foundation, Grant No. 080–1405, and Novartis International AG. The first version of this text was published in Russian as Tkach, Olga. 2015. “‘Zabotlivyi dom’: uhod za pozhilymi rodstvennikami i problemy sovmestnogo prozhivaniia.” Sotsiologicheskie Issledovaniia 10: 94–102.
8. All names have been changed.
9. In private life, the care deficit is most palpable in families where working mothers, married and single, lack sufficient help from partners or kin. In public life, the care deficit can be seen in government funding cuts for services to poor mothers, the disabled, mentally ill, and the elderly (Hochschild 1995, 332).
14. For example, in Lithuania and Russia, more than 60% of women aged over 85 live in an extended family; see Gaymu 2003, 216.
18. Kremer 2011, 134; see also Folbre and Nelson 2000, 134; and Dyck, Kontos, Angus, and McKeever 2005. This is also true for southern European countries, where despite slow development of social infrastructure, relatives refuse to take full responsibility for elder care work, citing their right to privacy and a career. See Da Roit 2007, 253, 256–7.
19. Harmonious co-existence of various sources of care, including family, and private and public institutions, is the closest to the warm-modern model described in Hochschild 1995. For a fuller discussion about hybrid and multi-sited elder care, see Smith 2005, 1–2; Fine 2005, 249; Da Roit 2007, 254; Martin–Matthews 2007, 230; Lawson 2007, 6; and Thomas 1993, 652.
29. FOMnibus 2013.
30. Levada Centre 2016.
31. See Rotkirch, Tkach, and Zdravomyslova 2012.
33. Centre for Independent Social Research “Working Pensioners in the Russian City: Forming of Occupation Niches and Possibilities of Labour Market (Case of St. Petersburg)” funded by the Institute for Public Planning, Moscow, Russia, Grant No.179/K (02/2012–09/2012), which analyzed 30 in-depth biographical interviews with working pensioners in various market segments (unpublished report).
34. See Reid 2009, 469. In 1986, Mikhail Gorbachev made the last Soviet housing pledge, launching the national program “Housing 2000,” which promised that by 2000 every Soviet family would be living in a separate apartment or house.
35. Levada Centre 2016.
37. For instance, in the case of someone’s marriage, childbirth, divorce, graduation or illness. See Bertaux–Wiame and Thompson 1997; Shpakovskaya 2009. In the Soviet era, the majority of citizens lived in state-owned apartments (Reid 2009, 475). In 1991, Boris Yeltsin signed into law “On the Privatization of Housing in RSFSR,” which granted residents ownership rights to their flats. By 2010, 75% of all housing falling under the

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new law had become privatized, although this percentage varies across regions (see Information Agency of Russia. 2016. http://tass.ru/info/3426534). The majority of our interview partners and their relatives owned their flats.

38. In other cases, if children or grandchildren moved in with an elderly relative, he or she desperately resisted any renovations or decluttering. Soviet citizens’ lifelong attachment to goods has been extensively studied (cf. Gerasimova and Tchouikina 2004; Gurova 2004; Orlova 2004).

39. See Gaymu 2003, 214, 225 for how multigenerational co-residence can considerably alter the elderly person’s living conditions, especially when faced with economic crises and poverty. Moving to live with their children, parents benefit from the improved socioeconomic position of the younger generation.

40. An exception is sons helping their fathers to bathe.

41. Women also manage the domestic sphere when it comes to childcare and domestic work; see Tkach 2009; Zdravomyslova 2009; Rotkirch, Tkach, and Zdravomyslova 2012.


44. See Folbre and Nelson 2000, 129.

45. For research of Russian dacha see Lovell 2003; Caldwell 2011.

46. For a discussion see Boym 1995; Gerasimova 2002; Reid 2009; Utekhin 2015.

47. Da Roit 2007, 261–2.

48. See Gladarev and Tsinman 2009; Shpakovskaya 2009; Rotkirch, Tkach, and Zdravomyslova 2012.

49. See Lawson 2007, 3.


References


