

## Medical Humanities in Indian Literature: A Study of Shashi Deshpande, Amitav Ghosh, and Rohinton Mistry

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### Abstract

Medical humanities is an interdisciplinary field that integrates literature, medicine, ethics, and social sciences to understand the human experience of illness and healing. This research paper examines how Indian English literature contributes to medical humanities through the works of Shashi Deshpande, Amitav Ghosh, and Rohinton Mistry. It explores themes of mental health, gender oppression, epidemics, environmental crises, disability, and poverty. Through close textual analysis, theoretical engagement, and comparative interpretation, the paper argues that illness is not merely biological but is shaped by social, cultural, political, and ecological forces. These authors collectively demonstrate that empathy, dignity, and justice are essential components of healing.

**Keywords:** Medical humanities, Indian literature, mental health, gender, epidemics, poverty, disability

### Hypothesis

This paper hypothesizes that Indian English literature redefines illness as a multidimensional experience shaped by structural inequalities, and that literary narratives function as critical tools in medical humanities by foregrounding empathy, ethics, and social justice over purely clinical interpretations.

## Introduction

Medical humanities has emerged as a significant field that bridges the gap between science and the humanities by focusing on the human side of medicine. While clinical medicine prioritizes diagnosis and treatment, medical humanities seeks to understand how illness is experienced within cultural, emotional, and ethical frameworks. Literature plays a crucial role in this field because it offers narrative depth, allowing readers to engage with suffering beyond clinical abstraction.

Scholars argue that illness narratives restore the patient's voice within medical discourse, emphasizing that storytelling is central to healing. In the Indian context, this becomes especially important because illness is shaped by caste hierarchies, patriarchal norms, and economic inequalities. Indian English literature captures these complexities and provides insight into how individuals negotiate suffering within oppressive structures.

This paper focuses on three major authors—Shashi Deshpande, Amitav Ghosh, and Rohinton Mistry—whose works engage deeply with medical humanities. Through detailed textual analysis, this paper demonstrates how these writers expand the meaning of illness beyond biology.

## Theoretical Framework: Literature and the Ethics of Care

Medical humanities is grounded in the idea that healthcare must incorporate empathy, ethics, and narrative understanding. Rita Charon's concept of narrative medicine emphasizes that doctors must develop the ability to interpret patients' stories. Similarly, Arthur Kleinman argues that illness is a lived experience rather than a purely biological condition. From a sociological perspective, illness is shaped by social determinants of health, including class, gender, and environment. In postcolonial contexts like India, historical exploitation and cultural hierarchies further complicate these determinants. Paul Farmer's concept of structural violence explains how social systems harm individuals by restricting access to healthcare and resources. Thus, literature

becomes a powerful medium for exploring how suffering is embedded in social realities. It enables readers to engage with ethical questions and emotional experiences often absent in medical discourse.

### **Shashi Deshpande: Mental Health, Gender, and Psychological Trauma**

Shashi Deshpande's novels provide a nuanced exploration of women's mental health within patriarchal society. Her work reveals how psychological suffering is often normalized and silenced.

#### ***The Dark Holds No Terrors***

In *The Dark Holds No Terrors*, Sarita's trauma stems from marital abuse and gender expectations. She reflects, "He had been the young man and I his bride. Now I was the lady doctor and he was my husband," highlighting the inversion of power that destabilizes her marriage. This shift challenges patriarchal norms and results in emotional violence.

Sarita's suffering can be interpreted through feminist theory as internalized oppression. Her inability to articulate her pain reflects a broader societal refusal to acknowledge women's mental health. Simone de Beauvoir's assertion that "one is not born, but rather becomes, a woman" underscores how gender roles are socially constructed and imposed.

Deshpande's narrative technique, particularly the use of interior monologue, allows readers to experience Sarita's psychological fragmentation. The fragmented narrative mirrors her mental state, reinforcing the idea that psychological illness is deeply subjective and complex.

#### ***That Long Silence***

In *That Long Silence*, Jaya's silence becomes symbolic of suppressed identity. She confesses, "I had relinquished them... all those stories... because I had been scared," revealing how fear governs her choices. Jaya's silence is not merely personal but systemic. It reflects what

critics describe as the “culture of silence” imposed on women in patriarchal societies. Sarala Parker observes that Jaya’s journey represents a gradual awakening to selfhood, suggesting that healing begins with self-recognition.

The novel critiques marriage as an institution that perpetuates emotional repression. Jaya’s transformation at the end signifies the possibility of reclaiming agency. Deshpande’s works demonstrate that mental illness cannot be separated from social context. Emotional suffering arises from structural inequalities, including gender roles and cultural expectations. Her narratives challenge the biomedical model by emphasizing psychological and social dimensions of illness.

### **Amitav Ghosh: Epidemics, Knowledge, and Medical Ethics**

Amitav Ghosh examines how disease intersects with power, history, and environment. His work critiques the assumption that science is neutral.

#### ***The Calcutta Chromosome***

In *The Calcutta Chromosome*, Ghosh reinterprets the history of malaria research. The novel suggests that scientific discoveries are shaped by hidden networks of power. Knowledge, as implied in the text, is controlled and manipulated. Postcolonial theory helps explain this dynamic. Colonial medicine often treated indigenous populations as subjects of experimentation rather than beneficiaries of care. Ghosh exposes this exploitation, raising ethical questions about scientific progress.

#### ***The Hungry Tide***

In *The Hungry Tide*, illness is linked to environmental instability. The Sundarbans is portrayed as a space of constant transformation, where human life is vulnerable to ecological forces. Environmental critics interpret the novel as an exploration of slow violence, where climate change and displacement gradually affect health. Disease is thus not individual but collective and ecological.

Ghosh expands medical humanities by incorporating environmental and ethical dimensions. His work demonstrates that health is influenced by geography, climate, and political history. By questioning scientific authority, he encourages a more critical understanding of medicine.

### **Rohinton Mistry: Poverty, Disability, and Structural Violence**

Rohinton Mistry's *A Fine Balance* presents suffering as a consequence of systemic inequality. The novel illustrates how political and economic structures shape health outcomes.

#### ***A Fine Balance***

The characters in the novel experience various forms of suffering, including physical illness, disability, and poverty. Survival itself becomes a struggle, reflecting the fragility of life under oppressive conditions. Mistry's depiction aligns with Paul Farmer's concept of structural violence, where social systems harm individuals by limiting access to resources. Disability is not only physical but also social, shaped by exclusion and marginalization.

Mistry's realism forces readers to confront the harsh realities of inequality. His work challenges individualistic notions of health and highlights the need for systemic change.

### **Comparative Analysis**

The works of Deshpande, Ghosh, and Mistry collectively broaden the scope of medical humanities.

- Deshpande focuses on psychological trauma and gender oppression.
- Ghosh examines epidemics, environment, and ethics.
- Mistry explores poverty, disability, and social suffering.

Despite their differences, all three authors emphasize that illness is shaped by context. Their works suggest that healing requires not only medical intervention but also social transformation.

### **Discussion: Literature as a Tool for Healing**

Literature fosters empathy by allowing readers to inhabit the experiences of others. Martha Nussbaum argues that narrative imagination is essential for ethical understanding.

These texts challenge the reductionist view of medicine and encourage a holistic approach that includes emotional and social dimensions. They also highlight the importance of listening, which is central to both literature and medical practice.

### Conclusion

Medical humanities provides a broader understanding of health by integrating scientific and humanistic perspectives. The works of Shashi Deshpande, Amitav Ghosh, and Rohinton Mistry demonstrate that illness is a complex human experience shaped by social, cultural, and political factors. Their writings emphasize that true healing requires empathy, justice, and recognition of human dignity. Indian literature thus makes a vital contribution to medical humanities by illuminating the deeper dimensions of suffering and care.

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