



Sustaining Selves through Fractured Experiences: Trauma, Inner Conflict, and Paths to Recovery in Contemporary Indian Fiction

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Abstract: Sustaining both ourselves and our planet is no longer simply an issue of ecology but also of psychology of self-dignity and resilient selfhood. This paper examines three novels as examples of fractured selfhood, Jerry Pinto's *Em and the Big Hoom*, Arundhati Roy's *The God of Small Things*, and Anita Desai's *Fasting, Feasting* created through the effects of family dynamics, gendered repression, socio-cultural constraint, mental illness and trauma. Using a comparative method based on qualitative methodologies employing close reading techniques, Cathy Caruth's trauma theory and Rita Charon's narrative medicine is applied to demonstrate how literary narratives create space for recognition, empathetic understanding and care for individuals experiencing psychological suffering. While Roy demonstrates the lasting psychological impact of childhood trauma and societal transgressions, Pinto explores how families can provide care, vulnerability and resilience when caring for someone with mental illness. Desai illustrates how patriarchal societies can quietly undermine the psychological well-being of its members through the suppression of their agency. When read together, these novels challenge models of psychopathology by demonstrating that mental health is linked to relationships, culture and ethics. Therefore, this paper suggests that sustainable selfhood will require dignified selfhood, agency, compassionate care, social recognition and environments which facilitate psychological flourishing. Consequently, literature becomes a critical humanities' discipline contributing to new ways of imagining sustainability through the lens of human well-being.



Keywords: Health Humanities; Trauma; Mental Well-being; Resilience; Sustainable Selfhood

Introduction

Contemporary definitions of sustainability now include not just the ecological environment but also the psychological, social and ethical aspects needed to support humans living with dignity. In Health Humanities, literature is a site of knowledge production where people's experiences of trauma, mental health issues, vulnerability and recovery become culturally legible. Literature allows for the experience of suffering to be recognized outside of strictly biomedically defined experiences of illness. This provides space for attention, representation, empathy and moral responsiveness towards peoples' experiences of being ill (Charon 131-54). Trauma, in particular often resists easy understanding and may reappear in memories, repetitions, silences and fragmented identities. Therefore, literary representation has a special significance as a means of expressing psychological harm (Caruth 1-10).

Arundhati Roy's *The God of Small Things*, Jerry Pinto's *Em & The Big Hoom* and Anita Desai's *Fasting, Feasting* provide different ways of representing vulnerable mental wellbeing but are all connected. Roy depicts children's traumatic experiences against the backdrop of caste, family violence and societal restrictions; Pinto portrays mental illness in the complex web of caregiving and family resilience and Desai illustrates the psychological wear caused by patriarchal control over individuals who have been denied agency. Together these texts indicate that individuals' psychological distress can never exist apart from their relationships or social and environmental contexts. Through comparative close readings of each text this study will analyse how broken-down selves manage distress and find ways to provide care and find resilience.

Literature Review and Theoretical Framework

A growing body of research is now recognizing in scholarship about contemporary Indian fiction, the relationship of psychological distress to both the cultural and socio-political environment and to family environments. As such, there has been a large amount of academic critique surrounding Arundhati Roy's *"God of Small Things,"* which has specifically focused on

the theme of trauma resulting from violence, childhood vulnerability, forbidden desire, and fractured memory. Herrick demonstrates how Roy's narrative engages with the possible ways to recover from traumatic injuries and in doing so creates a way to address forms of psychic suffering as part of a larger historical context rather than simply being viewed as a form of individualized pathology (Herrick). Bahri also sees the novel's use of experimental style as a reflection of post-colonial trauma and provides insight into how disruptions in time and memory provide a way to represent experiences that are difficult to place within a linear structure (Bahri).

While critical works on Jerry Pinto's "Em and the Big Hoom" have focused on issues of mental illness, caregiving, and family vulnerability; Singh and Mujral focus on the complexities of maternal mental illness and motherhood and demonstrate how psychiatric suffering can intersect with both family expectations and societal expectations (Singh and Mujral 533-540). Nag and Chattopadhyay then look at the institutional responses to illness, and especially the disciplinary aspects of medical surveillance (Nag and Chattopadhyay 182-191). Therefore, Pinto's narrative complicates the distinction between illness and resilience by viewing caregiving as an emotionally taxing but relational approach to endure.

In contrast, scholarship concerning Anita Desai's "Fasting, Feasting", focuses on the regulatory nature of patriarchy and limited opportunities for female agency. Volna shows that women's options are limited by their role as mothers and daughters due to gendered expectations placed upon them (Volna); Jackson illustrates how both resistance and complicity operate simultaneously in a patriarchal Indian society (Jackson 157-171). Both studies show that psychological distress is constructed through structural mechanisms and therefore cannot be seen solely as internal.

This study focuses on prior critiques in order to develop a new trajectory for analysis using Cathy Caruth's trauma theory and Rita Charon's narrative medicine. Caruth defines trauma as an event that overwhelms one who is experiencing it and prevents full integration or assimilation; after the initial event occurs, its effects continue to manifest themselves through repetition, memories, and belated representations (Caruth 1-10). Furthermore, Charon's Narrative Medicine builds on this perspective by emphasizing engaged listening to patients' stories of



illness as a method of acknowledging suffering and developing compassionate responsiveness (Charon 131-54). Together, these two theories provide the foundation for a Health Humanities reading of literature that goes beyond categorizing illnesses into diagnostic categories to understanding the cultural significance of suffering.

Through comparative analyses of trauma, caregiving, repression, and resilience, this dissertation analyses how literary representations of psychological suffering relate to long-term wellness and argues that true psychological flourishing requires recognition, relational care, dignity, agency and socially supportive conditions for reconstructing fractured selves.

Trauma, Silence, and Fractured Selfhood in *The God of Small Things*

Contemporary Indian Fiction Scholarship is increasingly exploring the connection between the socio-cultural and political environment & the familial environment and psychological distress. As such, there has been a great deal of academic criticism regarding Arundhati Roy's "The God of Small Things", which has been centred around themes of trauma caused by violence, childhood vulnerability, unrequited love & disrupted memory. For instance, Herrick describes how Roy's narrative examines ways to heal from traumatic wounds and in doing so, presents a means of addressing types of psychic suffering as part of a collective (historical) process instead of strictly a product of individualized pathology (Herrick). Similarly, Bahri views Roy's experimentation with style as a representation of post-colonial trauma and offers insights into how disruptions to time & memory create spaces to articulate experiences that are difficult to locate within a structured linear progression (Bahri).

Whereas scholarly research on Jerry Pinto's "Em & The Big Hoom" has concentrated on mental health, caregiving and vulnerabilities within families; Singh and Mujral have examined the complex dynamics of maternal mental illness and motherhood and illustrated how psychiatric suffering intersects with both family expectation and societal expectation (Singh and Mujral, 533-540). Further, Nag and Chattopadhyay explore the institutional response to illness and particularly the disciplinary components of medical surveillance (Nag and Chattopadhyay, 182-191). Hence, Pinto's narrative blurs the line between what constitutes illness vs. resilience by



illustrating caregiving as a relationship-based and psychologically exhausting endeavor to survive.

By contrast, much of the scholarship surrounding Anita Desai's "Fasting, Feasting" examines the regulatory functions of patriarchy and the limited avenues available for feminine agency. Volna illustrates that women's choices are limited by their roles as mothers and daughters as they are bound by societal expectations based on gender (Volna); Jackson illustrates how both resistance and complicity exist contemporaneously in a patriarchal Indian society (Jackson 157-171). Furthermore, each study illustrate that psychological suffering is created by structural mechanisms and cannot solely be seen as something internal.

Therefore, this study will expand upon previous criticisms to create a new avenue for analysis through the lenses of Cathy Caruth's Trauma Theory and Rita Charon's Narrative Medicine. Caruth defines trauma as an experience that overpowers someone experiencing it and hinders full incorporation or assimilation into everyday life; after the original trauma occurs, its impacts continue to appear through repetition, memories & belated expressions (Caruth 1-10). Thus, Caruth's definition allows us to explain why many of the selected narratives exhibit fragmented temporalities, silences and psychically disjointed experiences.

Additionally, Narrative Medicine further expands on this view point by highlighting engaged listening to patients' stories of illness as a methodology for acknowledging suffering & fostering responsive compassion towards others (Charon 131-54). These two theoretical frameworks provide the base for a Health Humanities interpretation of literature that moves past classifying illnesses according to diagnostic labels to recognize the cultural importance of suffering.

Mental Illness, Caregiving, and Resilience in *Em and the Big Hoom*

Em and the Big Hoom (2016) is a novel written by Jerry Pinto that is a deep, personal look into mental health issues; however, instead of looking at the psychological struggles of someone who has been diagnosed with a mental illness as solely being caused by their clinical pathology, Pinto looks at the impact of their mental illness on them and others. We see Em hospitalized numerous times for suicide attempts and experiencing extreme mood swings. As we



hear about Em's experiences and how they affected her relationships with other people, we begin to understand that mental health issues are not just experienced by the person who has the illness; it affects everyone around them. Research about this book shows us how maternal mental illnesses affect motherhood, household responsibilities and societal expectations of mothers, thus creating unrealistic ideas of what a "good" mother should be (Singh and Mujral 533-540).

The way Pinto writes about caregiving is important because he rejects the idea that families love each other unconditionally. Rather than portraying a family as loving and supportive, Pinto portrays a family that loves each other, yet still feels exhausted, uncertain, fearful and responsible when caring for someone with a mental illness. In fact, their responses to Em's unpredictable condition show us how easily caring for someone with a mental illness can turn into a struggle to find balance in order to sustain oneself while taking care of the person they love. Additionally, research about the novel highlights how medical intervention serves two purposes: it provides necessary assistance and it disciplines the mentally ill body; however, this raises questions regarding an individual's right to autonomy and what constitutes "normal" behaviour under the supervision of a doctor (Nag and Chattopadhyay 182-191). Therefore, the recovery portrayed in the story exists in a state of tension between clinical intervention and relational care.

However, Em and the Big Hoom is more than just a story of immense psychological pain. The fragmented memories told through the narrator's stories along with humorous moments and reminiscences of their lives together portray telling as a means of coping with incomprehensible suffering. This type of narrative restorative work is supported by Charon's assertion that engaged attention to illness stories promotes recognition of suffering as experientially complex rather than simply reduced to biomedical categories (Charon 131-54). Thusly, care takes on an ethical quality based upon listening, acknowledgement and sustained relational presence.

Therefore, resilience in Pinto's novel does not mean complete recovery or that individuals involved no longer feel vulnerable. Rather, resilience refers to the ability of the family to continue living amidst uncertainty, maintaining affection for each member and constructing

meaningfulness despite recurring episodes of psychological disintegration. Ultimately, Pinto redefines sustainable wellness as relational rather than individualistic.

Gendered Repression and Psychological Well-being in *Fasting, Feasting*

Anita Desai's "Fasting, Feasting" represents psychological wellness through the lens of patriarchal domesticity, gendered obligations and suppressed autonomy creating a gradual decline in one's sense of self. While many stories about trauma are derived from single catastrophic events, Desai illustrates the effects of trauma as cumulative and daily in nature. Uma lives under the totalizing control of Mama Papa who regulate all aspects of her life including education, travel, socialization and goals. As such, her emotional starvation is not due to lack of self-worth, but due to the societal construct of feminine submission and sacrifice as virtues. Scholars have identified the domestic sphere in "Fasting, Feasting" as a place where men dictate what types of options women have available to them for autonomy and realizing their own identities (Volna) .

Uma's limited access to education exemplifies how limiting opportunities to grow and develop emotionally and intellectually limits one's ability to realize autonomous self-identification. In contrast, her male counterpart, Arun receives the opportunity for education that is reserved for those of his sex. Jackson outlines the difficulties of resisting or complying with patriarchal systems through familial intimacy and social repetition (Jackson 157–71), thus illustrating how Uma's compliance with these norms hides an internal conflict between her socially constructed feminine role and a need to identify herself.

The same can be said about food and body disciplines that serve as metaphors for the differential accessibility to desires, agency and emotional sustenance. Food-related disciplines illustrate how seemingly ordinary domestic routines are encoded with structural meanings of power (George and Vijayaraghavan). Uma's deprivation is material, affective and existential: she is constantly surrounded by family members yet continually denied validation.

Through the lens of health humanities, Desai provides a representation of forms of psychological distress that do not fit into a clinically identifiable category. Uma's unrequited aspiration for self-expression, diminished capacity to act on behalf of her own interests, feelings



of isolation and emotional depletion provide evidence that psychological well-being can be negatively impacted by social constraints without resulting in acute symptoms. The way in which Desai presents repression as a progressive diminution of personhood, expands health humanities beyond overt illness and provides examples of how sustaining oneself requires societal conditions that allow for autonomy, dignity, recognition and the ability to define oneself.

Comparative Discussion: From Fracture to Sustainable Selfhood

The God of Small Things, Em and the Big Hoom and Fasting, Feasting represent suffering as a psychological condition resulting from relationships among families, genders, castes, memories and institutions. Though they each portray very different kinds of distress, together their stories illustrate the inadequacies of defining health as merely biological. Trauma is delayed and recurs in Estha and Rahel's fractured psychologies (Caruth 1-10) ; Em's disease affects the entire family in terms of an unstable economy of caregiving; and Uma's psychological damage develops incrementally with loss of autonomy under her patriarchal household (Volná).

However, Roy articulates and narratively describes "resilience" in different ways than do Pinto and Desai. Roy represents how long lasting trauma can endure in silent memory, despite social oppression. Pinto illustrates the way in which relational endurance creates provisional support during ongoing psychological crises by means of humour, caregiving, storytelling and familial connection. Desai complicates this representation of resilience by describing the dangers associated with idealizing endurance. That is, since agency and self determination are structurally denied, it does not follow that Uma's accommodation to limitation constitutes thriving.

From a Health Humanities theoretical viewpoint, this distinction is critical. These portrayals of suffering help render illnesses and vulnerabilities visible and ethically perceivable beyond clinical abstraction (Charon 131-154). Therefore, sustainable selfhood arises not through being fully psychologically restored or completely without injury or loss; rather, it arises through having an identity that is dignified and supported by relational care and social recognition.



Conclusion

In comparing *The God of Small Things* by Arundhati Roy, *Em and the Big Hoom* by Jerry Pinto and *Fasting, Feasting* by Anita Desai, we can see that psychological wellness is shaped, at least to a degree, by the environment in which one's sense of self develops including family, culture, gender and institution. While each author employs different narrative styles to illustrate mental pain and suffering, together they show us how trauma, sickness, oppression and emotional lack are all capable of splitting the ability of an individual to develop their own agency, belonging and realization of self. Through their writing they therefore reject reduced notions of resilience as simply being able to endure.

As such, through the lens of health humanities literature, the authors position psychological pain as both person, relationship-based and culturally and sociologically situated. Selfhood can be viable long-term only if there exist social structures that allow for recognition, compassionate treatment, emotional expression, autonomy and ethical connection. As such, literature is particularly significant because it makes invisible suffering visible, while developing empathic understanding and interpretation of complex psychological vulnerabilities.

The three books ultimately widen definitions of sustainable living from either environmental or development based paradigms into the realm of human relationships. Each book asserts that truly sustainable communities will have protected not just future generations' physical environments and resources, but the psychological integrity of its members; creating a fair environment where broken-down selves can regain control over their lives, create meaning again and pursue lasting well-being with dignity.

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