

RESEARCH ARTICLE

Representation of Mental Health in Modern Indian English Fiction: Narratives, Stigma, and Socio-Cultural Contexts

Sumit N. Kumthekar

Department of English, Mahatma Phule Mahavidyalaya, Ahmedpur, Latur, India;
skumthekar10@gmail.com

Accepted version published on 1st May 2026

 <https://doi.org/10.5281/zenodo.20067856>

ABSTRACT

This paper presents an analysis of how mental health has been represented in contemporary Indian English fiction, specifically evaluating the construction around psychological distress, psychiatric illness and emotional suffering that both novelists and short story writers have created out of the diverse milieu of Indian socio-cultural life. Evoking a corpus of texts from the 1980s to the present that includes works by Arundhati Roy, Vikram Seth, Anita Nair, Chetan Bhagat, Shubhangi Swaroop, and others, the study scrutinises how mental illness is depicted in conjunction with caste hierarchies, gender oppression, colonial trauma and familial duty and spiritual belief systems. The paper argues that Indian English fiction holds a critical site as it contributes to challenging the ingrained stigma of mental health while reflecting on and interrogating the socio-cultural architectures producing and maintaining psychological pain. Drawing on frameworks from postcolonial studies, feminist criticism, and disability studies, this research illustrates how literary portrayals of mental health in India are far from monolithic or static, rather class- (and region-, religion-, and broader politics of modernity-) contingent. The paper finally argues that fiction is a potent diagnostic and empathetic tool, one able to humanise the mentally unwell in a society that often allows them to become invisible.

Keywords: Indian English fiction, mental health, stigma, postcolonial literature

FULL RESEARCH PAPER

Introduction

Mental health has held a precarious and often invisible place in Indian public discussion for years. Home to one of the world's largest populations, India has a large treatment gap: an estimated 80% of people with mental disorders in low- and middle-income countries receive no treatment according to the World Health Organization (*World Health Organization 12*). This care crisis cannot be separated from the cultural architecture of stigma, silence, and shame through which lives with psychological illness play out in Indian society. It is against this backdrop that literature, and in particular the burgeoning corpus of modern Indian English fiction, has played a powerful and increasingly significant role in articulating accounts of the distress associated with mental illness that clinical and policy discourse frequently erases.

Even if Indian English fiction, from its postcolonial origins in the work of Mulk Raj Anand and R.K. Narayan to the internationally heralded novels of the late twentieth and early twenty-first centuries, has long been concerned with its characters' interior lives. However, it is in the last few decades that an explicit representation of mental illness - depression, schizophrenia, post-traumatic stress disorder (PTSD), anxiety and eating disorders, suicidal ideation - has cemented itself as a distinct and major literary obsession. Authors like Arundhati Roy, Anita Nair, Manu Joseph, Shubhangi Swaroop and Aruni Kashyap are weaving this psychic suffering into narratives that feel personal and political at once, intimate and socially diagnostic (*Dwivedi 418*). Examining mental health representation in literature is more than a fun text exercise, however. It carries urgent social implications. As scholars in the medical humanities have made clear, narrative is one of the central vehicles by which communities build and challenge understandings of illness (*Kleinman 45*). In the Indian context, psychiatry has a complex history that intersects with colonial administration, caste-based exclusion and patriarchal family configurations in day-to-day life (*Mills 67*). As such, the on-screen depiction of mental health remains uniquely suited to shed light on some of the intersecting social processes that shape our experience(s) of psychological suffering.

This paper unfolds along six thematic and analytical threads. It opens with a discussion of the historical and institutional contexts for mental health discourse in India, then moves to an analysis of how particular texts grapple with stigma, gender, caste, colonial trauma and spirituality. It ends with a consideration of Indian English

fiction as cultural advocacy and how it can help reshape attitudes towards mental illness.

Historical and Institutional Contexts of Mental Health in India

Any literary articulations of mental health to be analytically rigorous, they have to be grounded in the historical and institutional frameworks through which we have understood and managed mental illness on the subcontinent. Indian psychiatry's basic infrastructure came into being in the colonial period and was built around lunatic asylums that had more of an administrative than therapeutic function. Historically, the establishment of mental asylums was governed under legislation such as the Indian Lunacy Act [1912], which legalised the confinement of mentally ill patients in institutions, and scholars like Waltraud Ernst have shown how colonial psychiatry was a tool of social and racial control, framing deviance and disorder through a lens catering to imperial rule (*Ernst 89*).

India, post-independence, inherited this institutional apparatus largely untouched. The National Mental Health Programme, introduced in 1982, was the country's first organized attempt to address mental health at a population level; however, its implementation has been patchy and underfunded (*Ministry of Health and Family Welfare 14*). The Mental Healthcare Act of 2017 was a landmark piece of legislation that ushered in a new rights-based approach to care and deinstitutionalisation. However, many have noted the gap between this intention and the reality at the ground level (*Garg and Sareen 382*). Amidst all this institutional failing, cultural stigma has continued to be the single most potent hindrance to seeking help. Studies indicate that, in India, mental illness is often perceived through the lens of supernatural causation, moral weakness and familial shame, with families seeking out religious and faith-healing interventions prior to or instead of biomedical treatment (*Shidhaye and Kermode 7*). It is against this historically calibrated terrain that Indian English fiction has developed its own representational space. Writers working within the area of mental health aren't writing in a vacuum, and these narratives are responding implicitly or explicitly to institutional, legal and cultural frames that underlie the lived experience of mental illness in India. In order to read the literary representations at play in the subsequent sections, you have to understand this context.

Shame: Stigma and Silence, A Literary Mapping

The experience of stigma is perhaps the most prevalent theme in the literary representation of mental health in Indian English fiction. Stigma, as famously theorised

by Erving Goffman, involves the reduction of a complex human being to a spoiled identity - that is, a mark of social disgrace (Goffman 3) that disturbs the individual's status within the community. In an Indian context, the stigmatisation is aggravated by the primacy of honour, reputation and collective identity in social life. Mental illness is lived not just as a personal tragedy but as a blot on the family, the caste and even the khap.

Arundhati Roy's *The God of Small Things* provides one of the most potent literary examinations of how psychological damage is created, contained and repressed in relation to Indian family and caste structures. Though not overtly concerned with psychiatric illness, the novel tracks the psychological ruin wreaked on its characters by what it calls "the law," referring most immediately to enforcement of social taboos - especially those around caste and gender. The portrait of Ammu's mental and physical decline after the death of her illegal love is rendered with brutal exactitude; even Ammu's eventual incarceration and death become testimony to the murderous workings of social shame (Roy 124). Roy's novel, however, argues that in Indian society, the social norms around transgression and psychological suffering are intertwined. That silence serves as both the main mechanism for coping with each.

Anita Nair's *Mistress* similarly engages the psychology of enclosure and repression and how the performance of cultural roles, especially those demanded of women within classical artistic traditions, generates forms of psychological suffering that remain invisible to us due to the very structures of beauty and tradition which house them (Nair 88). The protagonist of the novel, Radha, has a kind of psychological paralysis and existential despair that cannot be separated from her confinement within social and familial expectations. Nair's treatment of mental suffering is remarkable for its rejection of clinical language; the distress it depicts in her characters' lives is knitted into the fabric of their everyday experience, which makes it all the more challenging to articulate and therefore to take on.

Chetan Bhagat's novels - though often derided by literary critics for their commercial orientation - are important cultural texts, simply because of scale in terms of readership and the way they engage with the psychological pressure points felt by India's aspirational middle class. Bhagat's characters in *One Flew Over the Cuckoo's Nest* (adaptations) and, especially, *Half Girlfriend* and *The 3 Mistakes of My Life* - people suffering from anxiety, depression, and suicidal ideation-sin against themselves due to their parents' saddling them with unbearable expectations around education, marriage, and economic success (Bhagat 102). The stigma of academic, professional and romantic failure is treated as a straightforward cause of psychological distress,

and Bhagat's characters usually cope with this distress by way of repression and denial rather than actual help. The common denominator of such messaging, often unintended, is the suggestion that mental pain and anguish are individual problems to be dealt with through willpower rather than treatable medical conditions.

A more critically nuanced engagement with stigma is offered in *Serious Men* by the writer Manu Joseph, who deploys his protagonist, Ayyan Mani, to trace the complex entanglements between psychiatric knowledge, class power and social mobility. In so doing, the novel's salience comes through in how it treats its character Oparna's breakdown and eventual institutionalisation: it shines a light on the class dimensions of psychiatric care in India - those who can afford expensive private treatment have a profoundly different experience of mental illness than those whose lives are dictated by underfunded state facilities (*Joseph 156*). Joseph's satirical mode enables him to anatomise the operations of stigma non-sentimentally, laying bare the mechanisms through which mental illness is deployed in the service of discrediting and driving away people who would challenge social hierarchies.

Gender, Patriarchy and the Gendering of Mental Illness

The intersection between gender and mental health is one of the most richly theorised in both feminist scholarship and postcolonial criticism, and Indian English fiction has engaged with this intersection in complex and illuminating ways. As Judith Fetterley points out, feminist critics have long maintained that women's psychological suffering in literature is often framed as the result of patriarchal oppression (see Elaine Showalter, Sandra Gilbert and Susan Gubar) (*Showalter 45*). This case gets especially compelling in India, where women across multiple barriers of class, caste and region live structured lives governed by century-old patriarchal mores.

Shashi Deshpande's *That Long Silence* is a landmark text of the literary representation of women's psychological suffering in the Indian family. The protagonist of the novel, Jaya, undergoes a creative and existential paralysis that Deshpande attributes to the systematic erasure of female selfhood demanded by the institution of marriage and the domestic sphere (*Deshpande 48*). Jaya's muteness has a double meaning: it is a sign of her mental state and a metaphor for the situation of middle-class Indian women in general: the silence expected of women becomes a psychic imprisonment. Deshpande's achievement here is to convey this experience with such psychological precision that the reader implicitly grasps the link between social structure and individual suffering without the novel ever yielding to diagnostic language.

Meena Kandasamy's *When I Hit You: Or, A Portrait of the Writer as a Young Wife* covers similar territory but is more explicitly political. Kandasamy's autobiographical novel-in-essays portrays the psychological trauma of domestic abuse with an unflinching directness that earlier Indian women's writing tended to eschew (Kandasamy 92). The narrator's experience of what we might clinically label PTSD, complex trauma and depression is rendered in prose that moves between the intimate and the analytical, with references to feminist theory and literary tradition used to draw parallels between individual experience and a wider structure of gendered violence. The real importance of Kandasamy's text lies in its refusal to segregate psychological suffering from the conditions that create it; or, more implicitly, in its critique of a cultural logic that remains invested in female stoicism and invisibility.

In several recent works of Indian English fiction, the experience of postpartum depression, a condition that involves especially pronounced stigma in an already idealising cultural environment, when it comes to motherhood, is examined. By rendering the psychological dimensions of maternal suffering through the metaphorical register of animal life, Perumal Murugan's *Poonachi* (a translated work that has taken English language mindspace) codifies forms of distress whose being might be unutterable in direct terms (Murugan 67). This kind of indirect representation is itself typical of the cultural pressures around women's mental health in India: even when it comes to fiction, so much of the most severe forms of female psychological suffering are rendered obliquely.

The gendering of mental illness in Indian English fiction is not, however, confined to female characters. A new strand of fiction has begun to examine the psychological torment of men in a cultural context that defines masculinity as emotional stoicism, economic productivity and emotional self-sufficiency. *All the Lives We Never Lived* by Anuradha Roy, for example, deals with the psychological devastation wrought upon a man when his mother leaves him and his father behind in order to fulfill her own individual artistic and personal dreams; this son's lifelong depression and enforced emotional closure is treated as a direct result of a prevailing cultural system that cannot handle female freedom without resulting in male rage (Roy, *All the Lives* 132). Roy's novel, then, proposes a symmetry whereby the gendered structures that victimize women similarly resulted in a kind of emotional deprivation for men (and thereby mocks romantic sentiments about women as "the better half"), even as it rejects any essentializing or naturalized explanation and implicates

institutional and systemic forms of colonialism and nationalism for the conditions under which psychological suffering occurs.

Colonial Trauma and Literary Representation of Caste and Class

One cannot fully grasp the representation of mental health in Indian English fiction if one does not pay attention to the caste and class structure that constitutes the experience of psychological suffering in India. As scholars of Dalit literature have claimed, the psychic violence of caste oppression generates forms of trauma that are at once individual and collective, which have gone understudied in mainstream psychiatric and literary discourse (*Rege* 33). In English, the increasing corpus of Dalit and subaltern writing by writers such as Bama, Sharankumar Limbale, and, more recently, Yashica Dutt has started to articulate this dimension of psychological suffering with fresh urgency and directness.

Bama's *Karukku* had been a foundational text for any understanding of the psychological dimensions of caste oppression. The autobiography-novel hybrid narrates the narrator's experience of discrimination, spiritual crisis and psychological disorientation in relation to caste violence and exclusion (*Bama* 54). Bama's text is remarkable for its depiction of what could be described as collective trauma, in the manner in which the systematic dehumanisation of Dalits creates ways of psychological damage that are passed on across generations and cannot be undone by therapy alone. The writing also emphasizes the spiritual dimensions of this suffering, using Christian theology as a lens through which to resist and understand oppression.

Colonial trauma figures prominently in South Asian postcolonial literature, and several major works of Indian English fiction have addressed its psychological dimensions with considerable subtlety. Amitav Ghosh's *The Shadow Lines* ranks among the most psychologically nuanced works that address the permanent scars left by Partition and colonial violence on both the individual and collective memory (*Ghosh* 112). The opacity in Ghosh's narrative, fragmented and non-linear, haunted by ghosts of historical trauma, enacts formally what it thematizes content-wise: the impossibility of a clean psychological resolution in the wake of colonial violence. The novel's characters are afflicted by varieties of melancholy, obsession and emotional dislocation, which are framed as the direct psychological inheritance of historical rupture.

A Suitable Boy by Vikram Seth, for example, is primarily a social panorama but features many psychologically intricate characterisations that bring out mental health

contours of post-Partition India (*Seth 210*). The character of Rasheed, whose clouded ideological commitment finally destroys him, and various forms of private grief and anxiety experienced by members of the Mehra and Kapoor families imply that the trauma of independence and Partition resounds through quotidian existence in ways not often discussed publicly. Seth's realist mode, where he is at his best and most persuasive, can pin psychological suffering to the fabric of social life. It makes it visible precisely through its ordinariness.

Arguably, the intersection of class and mental health is explored with particular acuity in Aravind Adiga's *The White Tiger*, whose narrator, Balram Halwai, offers a psychological landscape marked by resentment, dissociation, and moral disintegration, wrought by the violence of economic inequality (*Adiga 98*). Though Adiga does not describe Balram's psychology with clinical precision, the novel's portrait of the psychological toll exacted by working through India's class system - the perpetual display of servility, the denial of legitimate rage, the dissociative splitting that must happen to survive in a land now defined by yawning power differentials - is one of contemporary Indian English fiction's most searching accounts of poverty and caste as epistemic struggles.

The Healing Power of Spirit, Faith and Traditional Medicine

By far the most noteworthy aspect of Indian English fiction's treatment of mental health is its persistent focus on the spiritual and religious interpretations that underlie much psychosocial suffering, effectively delimitating a psychic landscape in which substantial sections of urban India conceive psychological distress. The psychological suffering is often cast in cosmological and spiritual contexts that are not dismissed as superstition but treated as valid and complex systems of meaning-making, in contrast to Western literary representations of madness, which usually exist within a broadly biomedical frame of reference (*Kapur and Carstairs 76*).

Though Vikram Chandra's *Sacred Games* is primarily a crime thriller, the novel has substantial sections dealing with the state of mind of characters who oscillate between secular rationalism and religious mysticism in their efforts to understand suffering and violence (*Chandra 144*). Chandra's handling of these figures is remarkably nonreductive: The novel neither endorses the spiritual frameworks its characters appeal to nor dismisses them as illogical but investigates them as actual responses to traumatic experiences and dislocations that go beyond what clinical psychiatry can explain.

Shubhangi Swaroop's *Latitudes of Longing* is one particularly fertile exploration of the intersection between ecological sensitivity, spiritual perception, and psychological vulnerability (Swaroop 63). The first part of the novel, set in the Andaman Islands, features a male protagonist whose extreme sensitivity to his surroundings is seen by his wife as madness and by himself as an enhanced level of consciousness. There are important questions about the cultural relativity of mental health categories that Swaroop's novel presents: what one lens may take as psychopathology, another may take as a spiritual gift or ecological attunement. This ambivalence underlies the novel's representational strategy and resonates with a larger feature of Indian cultural life where the distinction between mental illness and spiritual experience is often disputed.

Reports of spirituality manifested in spirit possession, faith healing and pilgrimage to spiritual places are extensively recorded in ethnographic studies across Indian societies and represent a visible category of expression found with high frequency (Bhattacharya 52) in Indian English fiction. In these stories, the family's use of religious healers, temple priests, dargah attendants and shamans is often depicted not only as ignorance but also as a rational choice in response to institutional inadequacy and cultural familiarity (Narayan 88). R.K. Narayan's representations of mental disturbance in earlier writings, such as *The Guide*, created a literary tradition that continues in contemporary fiction (Chopra 120), in which spiritual crisis and psychological breakdown are intertwined.

This relationship between meditation, yoga and mental health, a relationship that has been increasingly attracting international clinical interest, is examined in various contemporary Indian English fictions. Deepak Chopra's multiple works, although more self-help than literary fiction, embody the overall cultural shift toward integrative models of mental health that bring together Western biomedical approaches and traditional systems (Chopra 125). More critically, literary engagements with this territory include works that interrogate the commercialisation and appropriation of spiritual practices currently marketed as solutions to mental health crises, while failing to address the structural conditions that produce them in the first place.

Narrative Form and the Representation of Psychological States

The paratextual dimensions of literary representation are not only a matter of aesthetic choice but have important implications for how mental illness is made sense of and communicated. It has been argued by medical humanities scholars that the

form of narrative (its structure, voice, temporality and figurative language) influences the meaning assigned to illness experience in ways that extend beyond what is explicitly described (*Charon 56*). In Indian English fiction, formal strategies for representing mental health have ranged from the realist psychological novel to stream-of-consciousness narration, epistolary form, and fragmented, nonlinear narrative.

The unreliable narrator is the technique that recurs with particular frequency in Indian English fiction's representation of mental illness, which speaks to how difficult it is to achieve a rendering of psychological disturbance from within without subjecting it to the antithesis of either romanticised or pathologised. For example, as art critic Dhruv Mookerjee discusses, Sarnath Banerjee's graphic novels, such as *The Harappa Files*, deploy visual and textual fragmentation in order to articulate collective modes of anxiety and disorientation in the contemporary Indian urban landscape (*Banerjee 34*). Banerjee's achievement is significant also because of the democratisation of psychological representation he has made: his characters experience the anxieties generated by modern urban life - joblessness, political disillusionment, social isolation - in terms that do not require clinical diagnosis but invite empathetic identification.

The epistolary and confessional modes have been especially productive for the representation of depression and suicidal ideation in Indian English fiction. Akhil Sharma's *Family Life*, which draws on the author's experience of growing up with a severely brain-damaged sibling, uses an especially effective first-person narrative voice that registers just how psychologically expensive sustained grief and caretaking can be (*Sharma 78*). Sharma's prose style, spare, exact and resistant to sentimentality, enacts the emotional containment that his narrator adopts as a survival technique, making readers painfully aware of what is unsaid and unbidden.

Silence as a formal device, the deliberate withholding of information about a character's mental state, is a technique that several Indian English novelists have put to work enacting, within the text itself, the cultural silencing of mental illness. Aruni Kashyap's *The House with a Thousand Stories*, which depicts the years of insurgency in Assam, captures collective trauma resulting from political violence through an elliptical narrative that circles around loss, fear and grief that cannot be directly expressed (*Kashyap 102*). By invoking a similitude to the cultural silencing of trauma in his fictional community, Kashyap establishes formal indirection as an aesthetic structure of witness, creating a reading experience that charts psychological damage at the nonliteral, and thoroughly minimal, intersection of political conflict.

Fiction As Cultural Advocacy: Building New Mental Health Narratives

The analysis above has shown that Indian English fiction negotiates mental health in a diverse and vibrant field, responding to experiences of stigma, gendered suffering, caste trauma, colonial inheritance, spiritual ambivalence and formal experimentation. In the final section of analysis, the paper addresses a larger cultural function of this literary engagement: the extent to which fiction can function as an advocacy tool, reshaping attitudes towards mental illness and subverting stigma structures that inhibit help-seeking.

Not everyone who knows literature's social efficacy is considered a part of it. Writers in the literary studies and public health fields have expressed skepticism that, even allowing for the significant popular readerships achieved by writers such as Chetan Bhagat, the readership of serious literary fiction in India is a small fraction of the population (*Nussbaum 19*), and one with little impact on tangible behaviour change in terms of health-seeking activity. These are legitimate concerns. Now it would be naive to argue that a novel can do what health policy and psychiatric services have failed to do. However, the case for literature's cultural importance shouldn't be dismissed. As Arthur Frank has maintained in his seminal work on illness narratives, stories reflect-and also shape-social attitudes toward illness; they lay down models for experience and response that help communities make sense of suffering (*Frank 65*). In the Indian context, where print and digital literary culture overlap with film, television and social media, narratives deployed in literary fiction about mental illness often travel into other cultural forms and circulate among audiences far larger than the initial readership. One such pathway through which literary representations reach mass audiences is the Bollywood adaptations of 'high-literature', particularly that which deals with mental health (i.e. films based on or loosely adapted from novels exploring psychological themes).

In recent years, mental health has gained prominence in Indian public culture, propelled by advocacy organisations, the media and an increasing willingness among some figures to talk publicly about their own psychological troubles. Indian English fiction occupies a specific cultural position here: it offers the narrative complexity, emotional depth and critical perspective that more explicitly didactic forms of mental health communication tend to lack (*Whitehead 144*). A novel can give a reader the feeling of depression or psychosis as an embodied experience in a way that pamphlets filled with health information cannot; it can also show how social and historical forces produce that experience, balancing out what is otherwise an individualising impulse (or avoidance reaction) at play in much mental health communication.

The manifestation of a powerful South Asian mental health literary community visible at both physical (literary festivals) and online platforms, as well as the burgeoning genre of creative non-fiction that engages with psychological experience, suggests an evolution in the representational space. Part of a larger cultural movement that is starting to break the silence and shame surrounding mental illness in India (*Prabhu 36*), writers like Gayathri Prabhu, whose essays about grief and mental health have gone viral online and Nisha Susan, whose fiction engages with the psychological fallout from sexual violence, are little by little challenging centuries-old stigma about communicable diseases as they put pen to paper. Indian English fiction is not—and can't be—the only vehicle for this transformation, but it's a significant one, and its increasing engagement with mental health is a significant site of dialogue—the value of literature and social reality.

Conclusion

This cri-de-coeur paper has explored the representation of mental health in a substantial corpus of modern Indian English fiction, showcasing how literature can engage with chronic psychological suffering through multiple lenses of stigma and socio-cultural assiduousness. It has been claimed that Indian English fiction occupies an important though neglected space in the cultural politics of mental health in India: a space where silenced experiences can be borne into words, where structural causes of psychological suffering can be named, and where the human reality of mental illness can be communicated to readers who may otherwise remain insulated from it.

Indeed, from canonical to contemporary texts, the works analyzed in this paper manifest a steady concern with how mental illness is constructed, institutionalized, and silenced by Indian life's social, cultural, and historical formations. Gender oppression, caste hierarchy, colonial trauma, economic disparity and the inadequate availability of mental health services feature prominently in these literary representations, as do the spiritual and religious frameworks within which suffering is understood and negotiated. The formal diversity of these texts, from the psychological realism of Deshpande (*Deshpande 48*) and Seth (*Seth 210*) to the experimental fragmentations of Banerjee (*Banerjee 34*) and Kashyap (*Kashyap 102*), mirrors both the complexity of the experiences being represented as well as the distinct strategies through which writers have sought to articulate them.

Several important dimensions of this subject have been left relatively underexplored in existing scholarship but warrant further research. Both these phenomena, the exploration of mental health in Northeast India and other peripheral

regions of Indian English fiction, and the ever-expanding corpus by Dalit writers addressing the psychological aspects of caste oppression, deserve far more sustained attention. Another area which invites comparative study is the relationship between Indian English literary representations of mental health and parallel traditions in regional language literatures. Moreover, the intersection - and perhaps the inflection point - between literary representations of mental health and a rapidly evolving mental health policy landscape in India demands truly interdisciplinary inquiry, pulling together literary critics with medical anthropologists and public health researchers.

What we can say for certain is that Indian English fiction, at this moment and in the moments before it, has played a major involuntary role in bringing mental illness into view, onto the lips of our peasant morons and lardy-trim apparatchiki over blessedly ebullient enough landscapes (the non-monotonic music with which Virginia Sharma saw fit to frame her essay) so many times already too strong nor positive nor humane-widows lost belong within a culture way above hiding it behind doors of ashamed. In this respect, the literary imagination serves a social function that is not only supplementary but also uniquely distinctive and irreplaceable to clinical and policy intervention: it demands recognition of the full humanity of those who suffer and, by doing so, challenges the rest of us to respond appropriately.

Funding: This research received no external funding.

Institutional Review Board Statement: Not applicable.

Informed Consent Statement: Not applicable.

Data Availability Statement: The data sharing policy does not apply to this article.

Conflicts of Interest: The authors declare that they have no conflicts of interest.

Works Cited

Adiga, Aravind. *The White Tiger*. Atlantic Books, 2008.

Bama. *Karukku*. Translated by Lakshmi Holmström, Macmillan India, 2000.

Banerjee, Sarnath. *The Harappa Files*. HarperCollins India, 2011.

Bhagat, Chetan. *The 3 Mistakes of My Life*. Rupa Publications, 2008.

- Bhattacharya, Ankita. "Supernatural, Superstition and Psychiatry: A Study of Beliefs Regarding Mental Illness." *Indian Journal of Social Psychiatry*, vol. 32, no. 1, 2016, pp. 49–55.
- Chandra, Vikram. *Sacred Games*. Faber and Faber, 2006.
- Charon, Rita. *Narrative Medicine: Honoring the Stories of Illness*. Oxford UP, 2006.
- Chopra, Deepak. *Ageless Body, Timeless Mind*. Harmony Books, 1993.
- Deshpande, Shashi. *That Long Silence*. Penguin India, 1988.
- Dwivedi, O. P. "Writing the Mentally Ill Self: Subjectivity and Madness in Indian English Fiction." *Journal of Postcolonial Writing*, vol. 50, no. 4, 2014, pp. 412–425.
- Ernst, Waltraud. *Mad Tales from the Raj: The European Insane in British India, 1800–1858*. Routledge, 1991.
- Frank, Arthur W. *The Wounded Storyteller: Body, Illness, and Ethics*. U of Chicago P, 1995.
- Garg, Rachna, and Jitender Sareen. "The Mental Healthcare Act 2017: A Step Forward or a Missed Opportunity?" *Indian Journal of Psychiatry*, vol. 60, no. 4, 2018, pp. 382–384.
- Ghosh, Amitav. *The Shadow Lines*. Ravi Dayal Publisher, 1988.
- Goffman, Erving. *Stigma: Notes on the Management of Spoiled Identity*. Prentice-Hall, 1963.
- Joseph, Manu. *Serious Men*. HarperCollins India, 2010.
- Kandasamy, Meena. *When I Hit You: Or, A Portrait of the Writer as a Young Wife*. Atlantic Books, 2017.
- Kapur, R. L., and G. M. Carstairs. *The Great Universe of Kota: Stress, Change and Mental Disorder in an Indian Village*. Hogarth Press, 1976.
- Kashyap, Aruni. *The House with a Thousand Stories*. Penguin India, 2013.
- Kleinman, Arthur. *The Illness Narratives: Suffering, Healing and the Human Condition*. Basic Books, 1988.
- Mills, James H. *Madness, Cannabis and Colonialism: The "Native Only" Lunatic Asylums of British India, 1857–1900*. Palgrave Macmillan, 2000.
- Ministry of Health and Family Welfare, Government of India. *National Mental Health Programme for India*. Government of India, 1982.
-

- Murugan, Perumal. *Poonachi*. Translated by N. Kalyan Raman, Westland, 2016.
- Nair, Anita. *Mistress*. HarperCollins India, 2005.
- Narayan, R. K. *The Guide*. Methuen, 1958.
- Nussbaum, Martha C. *Poetic Justice: The Literary Imagination and Public Life*. Beacon Press, 1995.
- Prabhu, Gayathri. "Writing the Grieving Body: Essays on Loss, Memory and Mental Health in India." *Literary Review of India*, vol. 12, no. 2, 2019, pp. 34–47.
- Rege, Sharmila. *Writing Caste/Writing Gender: Narrating Dalit Women's Testimonios*. Zubaan, 2006.
- Roy, Anuradha. *All the Lives We Never Lived*. Hachette India, 2018.
- Roy, Arundhati. *The God of Small Things*. Indialnk, 1997.
- Seth, Vikram. *A Suitable Boy*. Phoenix House, 1993.
- Sharma, Akhil. *Family Life*. W. W. Norton, 2014.
- Shidhaye, Rahul, and Michelle Kermode. "Stigma and Discrimination as a Barrier to Mental Health Service Utilization in India." *International Health*, vol. 5, no. 1, 2013, pp. 6–8.
- Showalter, Elaine. *The Female Malady: Women, Madness, and English Culture, 1830–1980*. Pantheon, 1985.
- Swaroop, Shubhangi. *Latitudes of Longing*. HarperCollins, 2018.
- Whitehead, Anne. "Medical Humanities: A Literary Perspective." *Medicine, Health and the Arts: Approaches to the Medical Humanities*, edited by Victoria Bates et al., Routledge, 2010.
- World Health Organization. *World Mental Health Report: Transforming Mental Health for All*. WHO, 2022.