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The Psychology of Domesticity: A Case Study on the Mental Health of Women in Colonial Bengali Joint Families through Haimabati Sen's Memoir

***Debaleena Basu** ****Triyasha Das**
Research Scholars, Department of History, Visva-Bharati, Santiniketan, West Bengal, India

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Abstract

In Colonial Bengal the joint family functioned as a trans-generational institution that regulated gender norms, sexuality and labour. This paper reads Dr. Haimabati Sen's autobiographical work Because I am a Woman as a testimony to the psychic costs of life within the Bengali joint family. While existing scholarship focuses mostly on Haimabati's remarkable medical career, her early conjugal life, experiences as a child bride, and the emotional consequences of patriarchal familial norms remain criminally unexplored, especially from the lens of psychoanalytic historiography. We focus on her child marriage, abusive conjugal life, widowhood and the misery that followed in the form of domestic and social ostracism. Situating Sen's memoir within the broader socio-political climate of 19th century Bengal we apply key Freudian concepts like, repression, anxiety as a failure of ego and the role of internalized authority (superego) to trace how Haimabati and countless women of her times experienced chronic emotional distress produced by domestic chaos. The study argues for a methodological reorientation that recognizes women's voice and mental health as an integral part of social history.

Keywords: *Psychology, Women, Domesticity, Joint Family, Colonial Bengal, Patriarchy*

Introduction

The joint family structure in 19th century Bengal functioned mostly as a hierarchical institution deeply entrenched in patriarchy which regulated every aspect of a woman's life including her emotional well being. In the ancient times, family formed a significant collective entity of the social structure. The elder members of the family had direct control over the emotions and behavior of the subordinates. The life of housewives in the upper-class families was truly encompassed by duties and responsibilities towards their family members (Jeannine, 1994). In the tradition social structure, there were large number of members including husband, wife and their children, brothers and sister-in-laws, father –in-laws, mother –in-laws and their servants.

Focusing on Michel Foucault's arguments in forming a strong bond between knowledge, hegemony and power, Edward Said, Gauri Vishwanathan, Bernard Cohn highlighted that knowledge creation was the utmost duty of Christian missionaries. It is genuinely believed that total control of the domestic space depended mainly on two factors: age and experience. Power and knowledge constituted a very big factor in the joint family structure. The domestic structure was ideologically formulated by the senior members of the family.

Rajat Kanta Ray's anthropological works show, the "social organization of the body" within the Bengali families in colonial India was deeply shaped by the gender and domestic norms that restricted women's physical as well as mental autonomy (Ray, 1995). Within the inner chambers of the household, there was an internalized

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authority of kinship elders operating like a powerful superego. In most cases, these elders were busy monitoring women's desires, conduct, body language and most importantly their self-worth according to patriarchal standards. In the 19th century, the entire lives of women used to be encompassed by caste, ancestry and family. Ancestry formed a significant factor and forms a strong connection with the *gotra*. Marriage was genuinely fixed on the basis of *gotra*. Before marriage, both boys and girls received different form of education. The education system in the early colonial period was based on religion. Hindus received their education formal education from the Pathsalas and tols. Muslim men received their education from *maktabs* (Chaudhury, 1999). Scope for female education was limited. The Baptists Missionaries took the initiative to set up schools for girls. Mrs. Hannah Marshman, wife of Joshua Marshman set up boarding schools for girls (Dutta, 1988). The young girls were given only formal training. They received the formal education only after the establishment of female Juvenile society of Calcutta. Miss Mary Ann Cooke took up the responsibility to set up seventeen schools in Calcutta (Dutta, 1988). These schools did not receive proper support from the masses.

Review of Literature

Difficulties in domesticity often deal with mental and physical exploitations. Rajat Kanta Roy, in his book *Mind, Body and Society: Life and Mentality in Colonial Bengal*, emphasized different levels of psychological problems that were common in the private sphere. It addresses the experiences of the young married girls.

Michel Foucault, in his book *Power and Knowledge: Selected Interviews and Writings* (1972-1977) claimed that the value of power in the social structure. This power creates a space for domination and subordination. The dominant members of the family exercise control over the subordinate ones.

Kaka Sudhir, in his book *The Inner World: A Psychoanalytic Study of Childhood and Society in India*, claims that family forms an important segment of the social structure. It helps the children to develop their identities. This book also focuses on certain difficulties that were common in Indian households

Auboyer Jeannine, in his book *Daily Life in Ancient India from 200Bc to Ad700* gave emphasis on the responsibilities of the students and adults. It also focuses on the caste system and superstitions which were prevalent in the society.

Geraldine Forbes and Tapan Raychaudhury in their book *The Memoirs of Dr. Haimabati Sen: From Child Widow to Doctors* focus on the problems encountered by woman in the nineteenth century. This book depicted her struggles in the social and medical world.

Research Objectives

1. To trace the difficulties that created psychological problems in the joint family structure in colonial Bengal.
2. To focus on the traumatized lives of women in the nineteenth and twentieth centuries.
3. To develop a strong connection between Freudian concepts and emotional distress developed in the domestic conflict.

Research Questions

1. What are the main causes that gave birth to the emotional distress in the joint family structure?
2. How does the joint family structure regulate gender roles in the colonised society?
3. What social and more importantly emotional factors compelled Haimabati to find the courage to move beyond the patriarchal domestic sphere and achieve success in her medical career?
4. And finally, how can we read Haimabati's life in order to understand the lived social realities of women and their subsequent impact on their mental health in similar environments?

Methodology

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This study was based on qualitative research that involves collection of information from autobiographies and psychological texts. It was quite fruitful to collect data from numerous periodicals and newspapers. It was challenging to make an in-depth analysis of an autobiography.

Historical Background

In the beginning, female education was not at all encouraged by the orthodox families of Calcutta. Some of the reformers like Kalikrishna Mitra took the initiative to set up first girl school in Barasat. After this, John Elliot Drinkwater Bethune set up new institution only for girls (Chaudhuri, 1999). They were forced to draw *alponas*, learn mantras and other homely activities. From the very childhood, the sole concern of the guardians of the young girls was to prepare her for marriage. Marriage was the ultimate destiny for the girl child. Her duty was to become a good wife and a caring mother in her in-laws family. She had to be perfect companion of her husband and was supposed him in every aspect of her life.

Figure 3.13 Source: Basantak Volume II from Hitesranjan Sanyal Archive, Kolkata.

In this picture, there were three female character were conversing about family. It was mentioned that elder one was ten years old and the other one did not have any idea of marriage. She questions her mother *amar kobe hobe biye*. Marriage in the 19th century was considered as a sin for young girls. In front of them was a house which was considered as a new home. In this new home, young girls were supposed to get accustomed to new culture, new social roles and responsibilities. As the senior members of the house had lot of expectations from her daughter-in-laws. In this house, no one took care of the mental and physical health of the women.

In the Joint family structure, there was constant struggle for power between the female members of the house. It was indeed very difficult to understand the domestic politics. The newly-married girls had to fulfill all the duties towards her mother-in-laws, aunt-in-laws and two sister-in-laws (Ray, 1995). The female members of the house were to spread rumours regarding the newly married young girls. All these type of tragedies were quite popular in the joint family structure. This gave birth to constant pressure within the family on the issue of control of power in the domestic space.

Figure 1: Bangasree

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One picture that published in *Bangashree* revealed the responsibilities of the newly married girls. She was seen combing her hair as well as feeding her own child. This means she had no space for herself. Her life was constantly inside the dark room. She did not have proper food. The young girls had to shoulder all the responsibilities but they did not have any power in the joint family structure. The family and social norms did not allow her to face the real world. She did not have the right to speak for herself. There was no scope for transformation. Due to all these responsibilities, she was unable to create her identity, lowering her self-esteem. The monotonous life forced her to lead an isolated life.

After marriage, her husband's family became her own family. From the psychological point of view, she can never share her problems with her biological mother. She did not have right to converse with all the male members of the family. She was forced to remain in that particular boundary which was made by the senior members of the family. By abusing her abilities, mother-in-laws created huge pressure on the newly married girls. This inner conflict in the "homo Hierarchies" created stress and acute anxiety in the mind of the young girls (Kakar, 1978). The newly married girls suffer from the identical crisis and had no right to question the senior members of the family. The inner contradictions created psycho-sexual problems between young men and women. The acute anxiety affected their conjugal relationships.

Understanding the unique voice of Haimabati

Haimabati Sen's autobiography *Because I am a Woman* serves as an excellent psychological document that records the mental health consequences of residing in one of those joint families in colonial Bengal. Her open, honest and raw representation of the domestic marginalization of the brides in joint families gives us a perfect entry point to the psycholoanalytic study of Bengali women in 19th century, an area criminally unexplored.

While existing scholarships explored Sen's exceptional journey as one the first lady doctors coming out of colonial India, her memoir also offers fresh and rare insights into the psychological realm. The emotional suffering, anxiety and shame caused by low self-esteem and social ostracism experienced by these women on a large scale need to be historically addressed.

Haimabati Sen's memoir starts with an experience that would go on to define her entire emotional journey as a child. It was her marriage at a tender age of 9 to a 45 year old widower serving as a deputy magistrate in the colonial bureaucracy. As, Indrani Sen notes, the marriage was conducted in violation of the minimum legal age of ten fixed 1860, revealing the ease with which patriarchal norms bypassed reformist legislation (Sen, 2012). Haimabati remembers her conjugal life with horror, as it was marked by fear, sexual subjugation and silence, exactly how childhood sexual trauma response works. Her recollection, "I would lie silently stiff like a piece of wood" signals not just fear but also what psychology defines as psychic dissociation, a defence mechanism through which the ego tries to survive overwhelming threat. The repeated attempts at sexual intercourse, her exposure of prostitution so early in her life, and the night she witnessed her husband engaging in "unnatural sexual activity" with a prostitute produced lasting shock and revulsion. Looking back decades later, she writes, "I cannot put into words the sense of revulsion I felt" (Sen, 2000). This remark suggests the persistence of repressed trauma that is hard to articulate for any individual.

This helplessness was quite common among brides in abusive marriages among almost all colonial Bengali households, leading to severe psychological distress in women. Tanika Sarkar in her "Intimate Violence in Colonial Bengal" (Sarkar, 2020) discusses how the death of a 10-year old girl, Phulmonee in 1889 due to marital rape sparked a nation-wide debate among two groups of men, one was reform-minded and the other with traditionalists leading to legislative changes. But she also highlights how intimate violence was so embedded in the social norms of Bengal that it was almost impossible wiping it out by just passing another act. The cultural nationalists in Bengal defended the traditional norms, even after Phulmonee's death, insisting that sexual relations even in child marriage were sacrosanct and culturally approved. They resisted what they saw as a direct attack on the sacredness of

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"Hindu conjugality". This whole discourse hardly ever prioritized women's actual consent or agency, neither bodily nor emotionally.

When we look at Haimabati's recollections from the perspective of Sigmund Freud's concept of anxiety as a signal of ego failure, we realize how the child Haimabati's ego was unequipped to process sexual aggression sanctioned by marriage. In these scenarios repression becomes more of a psychic necessity rather than choice (Freud, 1957).

For Haimabati, widowhood arrived really fast. At the age of 10, she was a "virgin child widow" living in a joint family which is a whole new life in terms of the changes that usually took place in a woman's wife at that time, except these changes brought more and more mental distress. Haimabati was relentlessly accused by her mother-in-law and other members of her family of having "eaten up" her husband. She was subjected to ritualized deprivation, dietary restrictions, prohibitions on makeovers and most importantly social isolation, like all Bengali widows at that time. She remembers developing "a deep feeling of shame" without understanding its source.

This shame however, was not innate. It was socially produced and internalized psychically. Widowhood in Hindu society marked women to be inauspicious and morally suspect. As Rajat Kanta Ray argues, the intense regulation of a widow's body, clothing, food and mobility was all just a way of keeping her sexuality under strict control. Haimbati's statement, "My parents had finished their duties towards me, no one was responsible any longer for this child widow" reveals how deep sense of abandonment gave rise of worthlessness and internalized self-perception.

The regulations diminished a little as Haimabati's mother-in-law relaxed certain restrictions and even allowing her to study. This relative kindness underscores how women's well being depended on the temperament of individual guardians rather than any structural protection. Security was fragile and women like Haimabati retreating into corners, avoiding movement, speaking less reflects symptoms now associated with depressive withdrawal. Haimabati's subsequent experiences, moving back and forth between her natal family and in-laws, losing inheritance and being cheated by male relatives makes one understand the structural vulnerability of widows within joint families. Deprived of economic independence and legal recourse, these women ended up being exploited financially, emotionally and even sexually at the hands of the male relatives.

Modern mental health research on Indian women consistently argues how financial insecurity and lack of social and familial support often lead to depression among individuals. One of the most striking features of Haimabati's tone is that she gradually accepted suffering to be moral duty of a widow. Widowhood demanded not only deprivation but also visible austerity which was socially praised. This moralization of suffering reveals the operation of a powerful superego shaped by religious doctrine and patriarchal values. Freud conceptualized the superego as the internalized authority. In the case of Haimabati and most women of her times it manifested as self-surveillance, guilt and the repression of desire. Even abuse is accepted, it rarely meets with anger or resiatence as the blame is turned inward. This pattern reflects broader condition among women in joint families where endurance was seen as a virtue and was rewarded.

Conclusion

Reading Haimabati Sen's memoir through the lens of mental healthy allows one to recover emotional experiences often absent from official archives. Women's psychic was long dismissed as subjective or ahistorical. However, they offer critical insight into how power operated within everyday domesticity. By treating mental health as an archive, this study argues for a methodological reorientation in the social history of Bengal, so that we can make space for the invisible emotional costs borne by women who never found voice or recognition.

Haimabati's memoir serves as more than a chronological account of a medical pioneer. It gives a profound map of the colonial domestic interior and reminds us that these interiors were spaces where the superego functioned not merely as an abstract psychological construct but a tangible social force exerted through patriarchal

an trans-generational family structure. This study uncovers a "shadow history" of the colonial Bengali domesticity. The chronic emotional distress that Haimabati describes, her recurring anxiety, and repression serve as crucial correctives to the nationalist discourse, the one that focuses entirely on the "Renaissance" narratives that often romanticized the "antahpur" (the inner quarters) as a sanctuary of pure Indian traditions. The "domestic chaos" examined here suggests the joint families acted as total institutions, designed to fracture the female psyche. The ongoing "unhappiness" that Haimabati mentioned time and again in her memoir was not unique to her. Almost all women, at all levels of the society were experiencing a similar fate. Therefore, we must understand that the "unhappiness" was a lived social reality, this was a response to a structure designed to ensure that women's labor was rigorous, relentless, yet silent. By integrating the psychoanalytic with the historical, we do not just recover a voice. We recover a specific form of female subjectivity that was systematically targeted for erasure, proving that the most resilient frontier of colonial resistance, was, and remains, the human mind.

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