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“There's a lot of blood, sweat and tears”: The price that India's first women doctors paid to break barriers

NAYANTARA NARAYANAN

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COURTESY KAVITHA RAO

In her new book, Lady Doctors: The Untold Stories of India's First Women in Medicine, the journalist and writer Kavitha Rao profiles six of the first women in India who defied social conventions in order to study medicine. All six women were born in the late nineteenth century. They are Anandibai Joshi, Kadambini Ganguly, Rukhmabai Raut, Haimabati Sen, Muthulakshmi Reddy and Mary Poonen Lukose.

Joshi was the first Indian woman to study medicine and study abroad but died young, before she could actually practise as a doctor. Ganguly persuaded the Calcutta Medical College to admit her, worked at a hospital and then had a private practice. Raut sought divorce from a man she was married to as a child, found a vitriolic enemy in the nationalist Bal Gangadhar Tilak, studied medicine in the United Kingdom and worked as a doctor in Mumbai and Surat. Sen was raised as a boy, married and widowed as a child. She was given the silver medal instead of the gold for coming first in her class (after the boys in her class protested), and went on to work as a hospital assistant and then a doctor. Reddy studied medicine at the Madras Medical College, became a surgeon, studied cancer and went on to found the Cancer Institute in Adyar. Poonen Lukose, who studied in London and was appointed surgeon general of the state of Travancore.

In this interview, Nayantara Narayanan, the health editor at The Caravan, spoke to Rao about the importance of telling these stories and how these women doctors navigated barriers, including those of gender, caste and class, after entering the field of medicine.

Nayantara Narayanan: In the book's introduction you say that we barely remember these women, if we haven't erased them entirely from public memory, and that this lapse of memory has consequences. What are those consequences? Is reinstating them in our collective memory the purpose of this book?

Kavitha Rao: Pan-India, there is very little memory of them, because so much of what was written about them, or what they wrote, was in regional languages like Marathi and Bangla and that is not accessible to everybody. Anandibai may have gotten more press than most because she was first [to go abroad and to medical school] and there were some movies made about her and some biographies written about her. But I think so many of the others have just been forgotten, or we know two lines about them.

Definitely the purpose of this book was to reinstate them in our memory because I feel that there is so much prejudice against women in science. I was also very greatly influenced by this book called *Inferior: How Science Got Women Wrong – and the New Research That's Rewriting the Story*, by Angela Saini. She talks about how women have not been treated well by science. Science itself decided that women could not be scientists because they do not have the brain or the aptitude for it. Even Charles Darwin went around saying that women's brains are smaller than men's, which was completely debunked, and that women are not capable of doing science. I think a lot of this still survives in India—people think that women have not gone into science or not gone into medicine because they do not have a scientific leaning or a scientific bent of mind, or because they are not tough enough or not determined enough, or that they are suited to caring professions like nursing.

These days, medicine has become a very good profession for women. It is respected and it is considered very decent. Like so many South Indians, nearly all the women in my family are doctors. I wanted to explore how, in a matter of 150 years, women doctors went from being called whores—like Kadambini Ganguly was—to being respected. We did not get there overnight. There was a long process. There was a lot of blood, sweat and tears and a lot of pain endured along the way by these women. They won medals and the medals were taken away, like in the case of Haimabati Sen and the Edinburgh Seven, who were the UK counterparts. [The Edinburgh Seven were the first women to enroll in a British university, in 1869, when they signed up to study medicine at the University of Edinburgh. They were eventually denied their degrees.] They were barred from medical colleges.

I have had conversations on Twitter where both men and women, but especially men, have said, “No, this can't be true. It can't be true that medical colleges barred women,” because they're just so used to medical colleges accepting women. But, as I say in the book, even until recently, Tokyo Medical University was basically altering (<https://www.bbc.com/news/world-asia-45108272>) women's grades so that men could come out ahead. So this is not something that only happened 150 years ago. The consequence of the lack of public memory is that it makes us think that only men did things. When they eventually were encouraged, women like Muthulakshmi Reddy, who started the Adyar Cancer Institute showed that is what they can do if given a chance.

Narayanan: How did you decide that these were the six women you were going to profile? Were there others you considered and maybe had to leave out?



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Rao: Anandibai was a no-brainer. There has been quite a lot written about her, but I still feel that she needed to be profiled because she was the first. At that time, it was a big deal. I next had to write about Kadambini Ganguly because she has, in some ways, been completely forgotten. She was the first woman to practise in India. There is a lot of controversy about whether she or Rukhmabai was the first and, as I say in the book, I really do not think it matters who was the first. I feel like they all have incredible achievements.

Kadambini was the first to actually practise. Very little is known about her because she led a very discreet life and she lived between the lifetimes of two very interesting women—Anandibai and Rukhmabai. She had a whole battle with the Calcutta Medical University to let her in, and she fought against the whole colonial set-up at the time. Rukhmabai, to my mind, was the most fascinating and had the biggest challenges. She had her caste against her, she had to run away to escape a child marriage, she had to divorce her husband. She became this cause célèbre and a symbol of a bad girl who had left her husband.

Haimabati Sen is almost as fascinating as Rukhmabai because nobody knows about her. She wrote a memoir that was translated from Bangla into English very recently—just about in the last five or six years. Nobody has read it, nobody paid any attention to it. Her manuscript was hidden somewhere. Her memoir is so unvarnished and she has no problems criticising her husband, brutally criticising the system where Bengali widows were just thrown out of their houses and their money was taken away. She has no problems being really open about that. She had no support, apart from her father, who died quite early on. And then she still

managed to work as a VLMS [Vernacular Licentiate in Medicine and Surgery, a non-physician clinician] in rural West Bengal. My husband is from rural West Bengal and he was born in one of the hospitals that Haimabati worked at. I really wanted to include Muthulakshmi Lakshmi Reddy and Mary Poonen Lukose because they were institution builders. They had more privileges than most but they actually brought women into public life.

I did have to leave out some fascinating women. There was this woman called Motibai Kapadia, at around the time of Rukhmabai. There was a woman called Anna Jagannathan who graduated from Madras Medical College. There was Jerusha Jhirad who was from Bombay, who I do mention in the last chapter. The problem is with these women, I could hardly find any material at all. There were just one or two lines, and that's not enough. So I had to leave them out. I feel sorry about that.

Narayanan: I would guess that Haimabati having a memoir is extremely uncommon and lucky for a book like this. How difficult was it to access research on these six women?



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Rao: It was incredibly difficult and I felt like giving up many times. You are right—many of them did not write memoirs, did not write letters. Kadambini did not write a word, as far as I know. Maybe somebody will

now come out and say she wrote something, which will be a good addition. Most relatives of these women are gone or are so many generations behind that they do not remember anything. They know that she existed in that she was very cool but they do not know anything beyond that.

Indian libraries are very bad for this [kind of research]. For instance, Haimabati's memoir was published by Roli Books in 2011, but it's out of print and they did not respond to any queries from me. So eventually I emailed one of the translators of the memoir, Tapan Roychowdhury, who had passed away. His partner in the United States, Geraldine Forbes, very kindly sent me a copy of it. Then there was another book on Rukhmabai by Mohini Varde, which was in Marathi. I hired someone to translate it, and halfway through, the translator said, "I can't translate this because it is a very antiquated form of Marathi." Then I realised that there was an English translation which was out of print. I put a post on my Facebook and a Canadian friend of mine found it in the University of British Columbia and sent me a PDF. The pandemic also affected [my research] badly. I had meant to go to Delhi to do some research, and obviously everything was closed.

I started this project three years ago and halfway through I moved to London. I was thrilled because of the better libraries here, but the minute I landed, the libraries all closed because of the pandemic. I want to stress that this is a very archival book, by which we mean that there were very few real-life sources that I could talk to about this book because either they were all dead, or they did not know anything or they could not remember much.

Narayanan: All these women had fascinating lives, ambitions and careers. Which stories spoke to you the most?

Rao: It is a bit hard to choose between Rukhmabai and Haimabati. Rukhmabai had the most challenging journey. While she did have support from many liberals, when Tilak and [the Marathi newspaper]

Kesari are ranting against you and carrying editorials against you, I cannot imagine it would have been very easy. There were people saying, “You are a bad Hindu woman, you have destroyed our cultural tradition.” It is hard even for women in 2021 to stand up against this. Imagine in the 1880s. So Rukhmabai spoke to me the most, but Haimabati is not far behind. There is so much stuff from her memoir that I could not put in. [There is] this litany of anger and frustration and [it is] all very justified, because women of her kind at that time were just completely ignored.

Narayanan: What did your research show on how caste specifically played a role in helping some women and being a hindrance to the others?

Rao: A lot of the material on caste is sort of not stated out loud. Even the women who wrote memoirs or letters did not talk much about their caste. Even Rukhmabai never mentioned her caste, except to say that because she was from the Suthar caste, she had to find a groom within the caste and none of the grooms were well-educated enough for her. As far as I know, she never actually said in her letters that caste stood in her way. I also spoke to her great-great-great-granddaughter Mohini Varde, who had written her biography in Marathi and actually met Rukhmabai when she was very, very old. She told me that she did not feel caste played any role.

But reading between the lines, I do not think that Tilak and *Kesari* and all the conservatives would have ranted so much against Rukhmabai if she had been from a higher caste. The treatment they gave Anandibai was quite different from the treatment they gave Rukhmabai. Anandibai stayed with her husband and that also played a part. She was a good Indian wife. Nevertheless, the sort of vituperation that was reserved for Rukhmabai was caste prejudice. In the book, I talk about [the lawyer and writer] Cornelia Sorabji’s treatment of Rukhmabai. She also was very undecided about her and later she changed her mind. But initially she

was like, “Oh, this woman is getting above herself,” and I find it hard to believe that caste did not play a part.

Muthulakshmi came from the Devadasi caste but she was very quiet about it. I spoke to Dr V Shanta [who was the chairperson of the Cancer Institute (WIA) in Chennai, founded by Muthulakshmi] and she said Muthulakshmi never mentioned this devadasi side of her life. Why did she not do that? Because obviously she would have gotten a lot of blowback and vituperation. Initially, when Muthulakshmi tried to get admission into Maharaja’s College [in the former princely state of Pudukottai], there was an actual letter saying they did not want to take a woman from the devadasi caste. Eventually she prevailed, probably because she had privilege from her father's side. [Muthulakshmi’s father was Brahmin. He was ostracised for marrying her mother, who was a Devadasi. He was also the headmaster of the college.] If both sides were devadasi, they would never have heard of it. I am sure that played a part in her later focus on eliminating the devadasi system.



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Anandibai had an immense amount of caste privilege. Kadambini [did] also, and then she was adopted by the Brahmo [Samaj]. Haimabati was from the Kayasth caste, which is also upper caste. Of course, for her, because all the men in her family died or took advantage of her, it did not help her as much. The opposition to her was because she was a woman,

not because of caste. Mary was Syrian Christian and they were virtually like upper-caste Brahmins. And she did good things with that privilege. But the [members of the community] were given a fantastic education because they had close ties with the British.

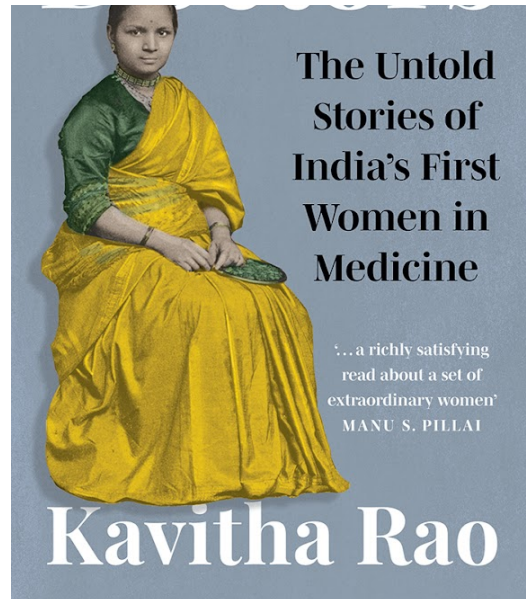
Narayanan: There are other external factors that possibly allowed these women to realise, at least in part, their ambition—women’s suffrage movements in other countries, nationalism, self-reliance and the idea of independence in India. How did this shape their different careers?

Rao: I think the person who was most shaped by nationalism and Gandhism was Muthulakshmi Reddy. She left medicine because Gandhi asked her to. Most of her latter life was shaped by Gandhism, and that was for good and bad. She had very Victorian values, but then, everybody at the time had those values. Gandhi wanted to bring more women into the movement. So she was shaped by that. Kadambini also was shaped by that in the latter part of her life.

Anandibai was a chameleon in many ways. She was so influenced by her husband that she supported child marriage. That was a tightrope she had to walk. She could not come out and say what she really felt. [If she had lived longer], she might have come to a different sort of realisation. Rukhmabai, when she went to the London School of Medicine, was meeting women like Bertrand Russell’s wife. She was influenced by all that. Until the end of her life she did not marry and she lived singly and she led a very independent life. Haimabati, I feel, was not that influenced because she seems to have been totally motivated by supporting her family. If you read her memoir, it is so down to earth and that is why I love it so much. Her concerns were very domestic to the end of her life. I do not mean that as an insult because she helped so many poor children. It is just that her life had shrunk to her house and keeping her family going because her husband was so completely useless. Mary Poonen Lukose’s memoir unfortunately stops just at the time when it gets so

interesting—she stopped her memoir when she returned from the UK to India, probably because she was too busy.

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Narayanan: You describe much of the misogyny these women experienced—from jeering in medical schools, and Haimabati being denied a gold medal only because she was a woman, to being expected to treat only women’s illnesses. In 2011, a [paper](https://timesofindia.indiatimes.com/india/more-women-study-medicine-but-few-practise/articleshow/50525799.cms) (<https://timesofindia.indiatimes.com/india/more-women-study-medicine-but-few-practise/articleshow/50525799.cms>) on human resources for health in India found that more women than men enter medical schools but that there was a severe shortage of female doctors across the country. (Some of the findings include reasons that medicine continues to be male-dominated, such as women finding it difficult to juggle families and careers). And there is a lot of [writing](https://www.tribuneindia.com/news/archive/features/sexist-stereotypes-doctors-ignore-womens-pain-276382) (<https://www.tribuneindia.com/news/archive/features/sexist-stereotypes-doctors-ignore-womens-pain-276382>) on persistent gender-bias in treatment as well. It has been 150 years since these

women broke through in medicine. What do you make of the sexism that still persists in the field?

Rao: I think there is still definitely a lot of sexism. Women may not be jeered at in medical schools anymore. But I think the problem in medicine, I suppose, is the problem that affects women all over India in almost every profession. At the entry level, we have women in science, much more than other countries. In the UK, where I am now, there are hardly any women going to engineering. But the problem is they all drop out. Why? Because they all have to take care of children, mother-in-law, father-in-law and a whole extended family. So they all drop off somewhere along the way because there are just too many caregiving responsibilities and not enough structure to support them, like creches.

There are a lot of doctors in my family who have given up. My sister-in-law is a doctor in the heart of rural West Bengal. The only way she has been able to carry her career is because my mother-in-law lives with her and has taken care of her children from the day they were born. There is no childcare, no support in any way and it is always women who are the first to give up where the men continue working. I also think that women are sort of shepherded into gynaecology, and women's issues. As a result, you have this male model of medicine where women's issues are not taken seriously. For instance, nobody ever talks about menopause in India. All the emphasis is on childbirth because that is supposed to be your focus in life as a woman. Even with this COVID-19 vaccine, there have been concerns of its effect on periods, but in India, nobody's keeping any data. In Western countries, it is being more carefully chronicled so that it can be investigated.

Narayanan: A crater in Venus has been named after Anandibai but, as you say in the book, not a single road or school. Another crater has been named after Jerusha Jhirad, who is not one of the primary characters in your book but acquired some fame as a pioneer of maternal health in India. We have been good at erasing women in

science from our public memory but also very good at naming craters on the moon or other planets after them. What do you think of this?

Rao: Many craters on the moon are named after people in science. Apparently, even in that, women are behind. There are quite a few, more than sixteen hundred, and the ones named after women are only about 30 or 40. The reason is because women entered science only fairly recently. Some person must have been given the task of finding women to name craters after and there are precious few Indian women in science. This is how Jerusha Jhirad's name made it to a crater on Venus.

Narayanan: Are there any books you would recommend related to women and science?

Rao: *Inferior and Superior* by Angela Saini; *The Immortal Life of Henrietta Lacks* by Rebecca Skloot; *Lab Girl* by Hope Jahren; *Bad Blood* by John Carreyrou; *The Radium Girls* by Kate Moore; *Hidden Figures* by Margot Lee Shetterly; and *The Signature of All Things* by Elizabeth Gilbert

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