

## “Doctor Miss Jamini Sen:” A Journey from Privacy to Publication and Critical Appraisal

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Women’s introduction to ‘modern’ Western education, as part of social reformation in general, started in India in the nineteenth century. In colonial Bengal, the early period of women’s education opened up a limited number of professional avenues for enlightened middle-class women: one could be a writer, a teacher, or a ‘lady doctor’. The identity of a ‘lady doctor’ was fraught with a complex admixture of both ‘empowerment’ and ‘vulnerability’. The traditional Bengali-Indian society would hardly accept women as medical practitioners, the British authorities would treat them with discrimination, and male doctors would try to harass them both professionally and personally, yet their service would be required for the purpose of addressing the health problems of women—especially gynaecological problems of so many native women, suffering without proper treatment and health-related awareness. The life of a lesser-known woman doctor, facing all these challenges and demands during her personal and professional journey in the context of colonial Bengal, would be worth studying for several reasons: a general academic interest in tracing the early history of women medics in colonial Bengal, the need to address the phenomenon of ‘women as doctors’ from a feminist perspective and to attempt at a critical reappraisal of the achievement of a ‘lady doctor’, considered against the intersectional background of patriarchal colonial authority.

Dr. Jamini Sen was a remarkable figure among the early women doctors in colonial Bengal. During her lifetime, her innermost pangs, desires and needs were hardly revealed even to her closest relations, and her personal documents, memoirs and diaries were strictly kept away from publication, as prescribed in her will. It was only after her death that her elder sister, the poet Kamini Roy, published a short biography of hers, entitled “Daktar Kumari Jamini Sen” (“Doctor Miss Jamini Sen”) in *Bangalaksmi* in the Bengali year 1339 (1932), from Baishakh (April-May) to Shraavan (July-August). Later, this was published in *Kamini Rayer Agranthita Gadyasangraha*, compiled and brought to light by the School of Women’s Studies, Jadavpur University. Kamini quoted at length from Jamini’s notes and papers, that were so far concealed. Her memoirs were written both in English and Bengali, and Kamini translated the portions that were originally in English into Bengali. It is a regret that though some amount of Jamini’s Bengali writing has been available to us through her sister, her original English writings are difficult to get, so I had no other option than to retranslate them while citing those portions for my doctoral dissertation entitled *Representation of Medics in British and Bengali Literatures (the 1850s-the 1950s): A Comparative Study* (2017). The relevant issues of the periodical are at present available at the Bangiya Sahitya Parishad Library, the Jatiya Siksha Parishad archive and the Gurusaday Datta Folk Art Society in parts — which, taken together, make a whole. In Chitra Deb’s book, *Mahila Daktar: Bhin Graher Basinda*, we also find a brief life sketch of Jamini Sen, mostly based on Kamini Roy’s memoir already mentioned, but she has not mentioned the source. In all probability, she also found the text in the old issues of *Bangalaksmi*.

Born in 1871, Jamini Sen was the second daughter of Chandicharan, and Bamasundari Sen. Chandicharan was a Brahmo and a supporter of female education, but he was against the idea of a medical career for a woman. He wished that his daughters would rather go for literature and teaching. This underscores how a kind of ‘soft patriarchy’ shaped the biased and double standard nature of ‘enlightenment’: even for an educated and liberal Brahmo gentleman, it was difficult to think that studying medicine for his daughter would be no less respectable than studying literature. The elder daughter, Kamini, wished to study medicine but stepped back with a sigh; she did not have the strength of mind to pursue her dream against her father’s will. Jamini was different and more confident about choosing her own way. With the help of her sister, Jamini was finally able to convince their father. This can

be read as a resistance against patriarchy, although not in a radical way, but with dignified and rational persuasion.

Jamini entered Calcutta Medical College in the 1890-91 academic year and kept herself aloof from any of her male colleagues, lest it tarnished her reputation in any manner. As Kamini Roy writes, "Her dignity was such that her male colleagues were hesitant of coming to her [...] even to discuss necessary matters" (Roy 2005 64). Jamini passed in 1896 (Kamini gives the year as 1897) and tried to practice in Calcutta, but she found that "people do not call lady doctors in general; if only the male family physician is not available, a lady doctor recommended by him can be called. There is also injustice regarding fees" (Roy 2005 64). Patriarchal domination was evident everywhere, and it was unbearable for the self-reliant Jamini to depend on male doctors to get a 'case'. So, she shifted to Solapur and then to the newly founded Women's Hospital in Nepal in 1899. From this time onwards, her life was also one of constant movement, trying to find a 'home' in the hospitals and among the patients she worked for, but never having peace of mind and satisfaction. In Nepal, alongside her hospital duties, she privately treated the Royal family. As a lady doctor, she had easy access to the 'antarmahal' of Maharaja Chandra Samser Jung, and the royal ladies would try to get intimate with 'Daktarin Miss Sen', but she would never expose what she heard from one to another. Kamini Roy, as an educated Brahmo lady and a poet, keeps decency and propriety in her language while describing Jamini's experience in the royal antarmahal. In the colonial vision, the Oriental *zenana* was seen as a place of darkness, dirt, disease, and scandals, and it was 'notorious', especially among aristocratic and royal families. In this light, one may read Jamini's dignified silence and speech control as a hidden archive, powerful in its impenetrability rather than its potential for disclosure. Due to her illness, she resigned from her job and returned to Calcutta in 1909.

Soon, she felt the necessity of updating herself on the new developments in medical science. Her patriotism was strong, and being an introverted and reserved person, she did not feel comfortable at all going to Europe and living among unknown people if it was not for better and higher education and applying that to the health care of her country's women. As she writes:

Nowadays, so many ladies are going to England, but even six months before my journey to England, I had never thought of going there. It was difficult for me to converse with unknown people in my own native land, so it was beyond my imagination to live alone among foreigners. After the completion of my studies, I got engaged in professional work. There had been no time to think about anything else except my family and my job. Three years back, I had to come back to Calcutta due to my illness, leaving my job. After recovery, I found a scope to think about other things. I felt that I had become rather antiquated; medical science was gradually improving, but I had not been able to keep up with the times. Now, it is my duty to reclaim the time wasted. In our country, the scarcity of female doctors is a major problem. Since my student life, there has been much development in Operative Surgery and Gynecology. If I really wish to be of help to my native sisters, I need to learn about the modern developments in medical science, and for that, I need to stay and study at the specialised hospitals in Britain. My sense of duty was pushing me towards England, but my own nature was dissuading me from that venture. I found a way to come to a solution. The Dufferin Fund generally did not grant applications from Indians, in most cases, British or Phiringhee applicants used to get this scholarship. I thought I should apply for it. If it is granted, then it would be decided that I should go.

The application for fellowship was sent. In due course, I received a reply that my application had been granted. On 8 March 1911, I left Calcutta by Bombay Mail.

During the journey on the ship, Dr P. K. Roy and P. K. Sen, whom I already knew, were my fellow passengers. (Sen, qtd. In Roy, *Agrantha Gadyarachana* 64)

The clarity of her thought and the nobility of her motto are remarkably evident from her own writings, where she speaks her mind without any reserve, nor with any thought of getting her memoirs published. Whatever she writes here, bears the truth-value of what she exactly felt and thought. The way she mentions that Indians at that time were usually not allowed to receive the grant, only “British and Phiringhee applicants” were favoured, brings out the real situation of colonial and racial bias she had to struggle with. Being an Indian female doctor, living in colonial times, the success she achieved finally was of no small significance. Her act of sending the application was a kind of ‘polite challenge’ to the British authorities— her sincerity of purpose and quality as a doctor became her ‘weapon’ to prove that an Indian woman has every right to apply through the proper channel and be granted the scholarship for a foreign visit, for the purpose of higher studies. It was a kind of intellectual battle with the biased British authorities—a battle won by her own merit.

Dr Jamini Sen received the grant, and she started for Europe in 1911. From Dublin, she got the LM degree, and from Glasgow University, she passed the fellowship examination and was awarded the Fellowship of the Royal Faculty of Surgeons and Physicians. According to Kamini Roy, Jamini was not only the first Indian woman to be awarded this fellowship but also ahead of European lady doctors in this regard. The next year, she went to Berlin to gain further experience in the treatment and surgery processes. The sudden death of her adopted daughter caused her to return from Berlin. This girl was a strong bond for an unmarried ‘mother’ like Jamini, and her death was a severe blow which almost shattered her, made her doubt God’s Grace, and finally led her through a traumatic phase to a spiritual and philosophical understanding of life. To illustrate this, Kamini Roy quotes at length from Jamini’s own memoir, which, being too personal, may not reflect any historical concern or even facts about her medical career but will provide an insight into her heart. Jamini wrote this portion of her memoir on her return sea voyage. By that time, she was exhausted from lamenting her loss and God’s injustice in her lonely life. Moreover, the sea — the archetypal symbol of the ebb and tide of mortal life, had a soothing effect on her soul.

During the sea journey, one night, Jamini had a dream: a Divine Presence seemed to be consoling her:

“Listen, my child”, said that glorious divine personality, “no good work goes futile. [...] You are given tenderness, affection and sympathy: dedicate these to the noblest cause [...] The soul is immortal, she (the dead child) will live in your memory. For her sake, try to bring happiness to other children, so that she, though ‘dead’ for this world, will remain in your heart as an inspiration for your noble work. (Roy, *Bangalaksmi* 509-10).

This dream experience inspired her to merge the idea of ‘home’ and ‘family’ with her professional responsibilities as a doctor and caregiver. She took under her care many destitute children whose mothers died in her hospital and who were not claimed by other guardians. She built a house named ‘Vishramkutir’ in Puri, where she provided a ‘home’ for these children and bore the expenses of their education, often staying with them on leave.

Coming back from Berlin, Jamini joined the Women’s Medical Service (WMS), and in 1914, she was transferred to Agra. The whole tenure of her service is a story of displacement. She was transferred so many times from one place to another without proper reason or justice, only to serve the interest of the colonial authorities. This will reveal the helpless situation of the native lady doctors, though some of them, like Jamini, are equally or even more qualified than the British medical women in service. Due to some misconduct on their part or unpleasant occurrence, three British lady doctors were transferred from Agra to Simla in the summer, and

Jamini was sent in their stead. Six months later, when Jamini got settled there, the 'problem' regarding the white ladies was solved. They came back to Agra, and Jamini was transferred to Shimla that winter. In Shimla, she found that no arrangements had been made for her living. She got two unused and locked rooms in the hospital cleaned and worthy of habitation and devoted herself to developing the hospital's infrastructure. This incident is enough to show how women doctors in British India had to face double challenges—from patriarchy in general, and from the colonial authorities in this case, in particular. The concept of 'universal sisterhood' among women—an ideology so enthusiastically promoted by some Western feminists, was actually not so 'grand', after all.

The British officials of WMS used all kinds of discriminatory strategies against native female doctors, especially when they would not be too submissive and dependent, seeking favours with folded hands. However, Dr Sen's reserved yet dignified personality would not urge her to protest openly, she would rather prove her resilience and indomitable qualities by transforming the negative situation into a positive one, solely by hard work and selfless dedication. Her dedication to work was such that she often sought to bring together the idea of a temporary home within the physical space of the hospital. Wherever she was transferred, she was especially careful of creating a healthy architecture around her professional identity, building new blocks, indoor and outdoor wards, and saving money for buying necessary furniture like operation tables — as if the hospital space was her own 'home'. The detailed account of these matters in her memoir may be seen as a different kind of architectural construction of an 'archive' in which she invested her sincerity and dedication.

Jamini hated to be a sycophant to the white authorities, and this created problems for her. Despite her popularity and good work at the hospital, she was again transferred to Shikarpur in 1916. The period of her service in Shikarpur is significant because it is at this time that Jamini tried to make some regular entries in her personal 'archive'. She described in detail what improvements were made in the hospital at that time, which her sister later found in her file marked "Not to be opened." She recorded her work in order to judge herself and make further decisions concerning whether to stay there for the sake of her patients or ask for a transfer because the weather in Shikarpur was not suitable for her own health. This record, made available through her sister, speaks volumes about the service of such dedicated native medical women, whose work, for the most part, went unnoticed by the conventional colonial archive. Jamini wrote on 6 February 1917:

The hospital has grown unexpectedly popular. Ladies from gentle families are coming to stay in paid cabins. In 1915, there were 213 indoor patients; in 1916 the number was 478. The most remarkable improvement is to be noted in the maternity ward [...] where death at the time of childbirth due to septic has been a major problem in women's health. In a short time, I have been able to bring consciousness among them. I have served them and gained their trust. If I stay on, I will be able to help them further. Moreover, there is a problem everywhere because of the British authority's interference. Shikarpur is safe and free in this regard. (Roy, *Bangalakshmi* 545-46)

Due to a conflict with the authorities over her familial duties, Jamini resigned from the WMS and went to Europe for a second time in 1921. She received a diploma in Public Health from Cambridge and a certificate from the London School of Tropical Medicine. Upon her return in 1924, she accepted the charge of 'Buldeodas Maternity Home' founded by the Calcutta Corporation. She worked hard to make this institution really a 'home' for would-be mothers — a well-disciplined place of care, health and comfort. She trained some nurses and wrote a manual called *Prasuti-tatva* (*Thesis on Maternity-care*).

Besides her unpublished memoir, Jamini Sen wrote very little. However, once she delivered a lecture at a meeting of 'Mahila Parishad' (Women's Council) in Calcutta, which

was later published in a Bengali periodical called *Suprabhat* in 1320 B.S, i.e., 1914. Her focus was on greater humanitarian concerns like philanthropy and society in general, and Bengali women's empowerment in particular, which was remarkable for her cordial yet deeply insightful, poetic approach. Some portions of this essay are provided below in translation:

Some days before, a friend of mine was lamenting about the indifference of Bengali women in every matter. Women's education has been introduced here for a considerable period of time, but the number of educated women has not increased much. He mentioned Jhalwar, a native state of India, where a school for women's education was established 4/5 years back, and by this time, the number of students had increased to 300.

Through this council, we can learn so many things and discuss so many matters, but we have no enthusiasm for that. We should engage ourselves in positive works, even if we do not wish to. At first, it may not appear pleasing, but our sympathies with each other will strengthen us. Should I convince you that if we get engaged with such a committee or association in this way, we can benefit ourselves? For example, we can think of the 'Free Masons'. The relationship between the Indians and Europeans is not good; but I have seen that when some Indians become 'Free Masons', the Europeans do not misbehave with them. The Almighty made us dependent on each other so that we can live in harmony. Human beings cannot live alone. Perhaps all of you are happy with your own families, and so you have never felt the necessity of thinking of anything beyond that limited circle. However, you are part of the greater family in the world of God. All people are not happy in the world. So many people are overpowered by disease, pain, and suffering — these are making life intolerable. Do come out from your cocoon of happiness and peace. Try to do something to alleviate the sorrows of this world, along with some others like you. How much good can you do for the world through this association — who can say? Unity and sympathy are really important.

In this context, an incident comes to my mind. During my stay in Berlin, I lodged in a 'Damen Hospiz' or ladies' hostel. Ladies from several European countries used to come and stay there. Most of them were fluent in German, except for one American lady and me. They used to converse in German and did not know English. This American lady was not more than 26/27 years of age, and she was staying there for one year to study music and instruments. She could understand German but could not speak well, but for me, even understanding the language was difficult. So, English became the medium of attachment between us. After her daily practice of musical lessons for 10/11 hours, she would not have much time, but whenever she could find time, she would come to my room and talk to me.

One day, hearing continuous knocking at my door, I gave permission from inside, and that American lady came in. Her entire face was bright with enthusiasm and pleasure. Smiling, I asked, "What good news have brought you here? Has some eminent musician offered you a job?" She said, "No, today, while travelling by tram, I have been acquainted with a young man from America."

I asked, "Is it the cause of so much pleasure? Moreover, why are you saying that you have been acquainted with him? Didn't you know him before? If not, how have you understood that he is your countryman? And even if he is your countryman, it is not possible to know about his nature at first sight, so I don't think it proper to talk to a stranger." Without getting annoyed with me, she rather burst out laughing. Then she told me that the college where she studied has an association; selected distinguished persons can be its members, and all members take a vow to do good to the world. This association has a distinctive badge worn by its members. That unknown youth was wearing that badge, and seeing that, the lady went forward to talk to him with full

confidence. She believed that no member of that association would ever violate its high ideals in his/her words or actions.

Seeing her absolute confidence, I was both surprised and pleased. I thought if that youth could hear her words, his positive energy would have been doubled.

You can also make this council one like King Arthur's Round Table:

"A glorious company, the flower of *women*  
To serve as model for a mighty world,  
And be the fair beginning of a time.

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To break the *frivolities* and uphold the good  
To ride abroad redressing human wrongs  
To speak no slander, no, nor listen to it,  
To honour her own words as if her God's.

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And teach high thought and amiable words  
And courtliness and the desire of fame  
And love of truth, and all that makes a man."

This means that a council should be formed to pick up all the flowers for women. Let this council become a model for the world and usher in the beginning of a new time. Let there be no slander in their tongue; let their ears be deaf to such words. Let there be no difference between their words and deeds. They should honour their own words as if they are the words of the Almighty.

Let them be examples of virtue, honour, truth and other good qualities that make a proper human being. (Sen, qtd. In Roy, *Agranthita Gadyarachana* 114)

Dr. Jamini Sen's own life was the epitome of these noble ideals. Overwork and stress affected her health. She took leave and went to Puri for a change, but even there, she was invited to be associated with the local hospital. She tried to fulfil her responsibilities until she was too ill and brought back to Calcutta, where she passed away in 1932.

The memoirs and portions of writings by Dr. Jamini Sen, translated and discussed here, can be called 'archival' in their thematic negotiation of spaces — between private sites recorded in memory and their constant correspondence with the public life of a female doctor writing about her own experiences and feelings. The talk delivered at an assembly of 'Women's Council' clearly reflects her tendency towards a 'liberal' mode of feminism that seeks to combine the cause of women's empowerment with the general values of doing good to a collective community — that is, humanity at large. From the perspective of feminist historiography, some points can be deliberately upheld regarding the life study of Dr Sen that she remarkably maintained her dignity and strong character during her student life under the co-education system and that she never tolerated the idea of being subservient to some male colleagues to get their patronising recommendation for a case. Her struggle against patriarchy was rather subtle and intellectual. Her moves in her career and decisions, which are a testimony to her strong and self-dependent character, should be read as symbolic stances against patriarchy — which may not necessarily be a male figure or institution but a symbol of authority and power. Her decision to study medicine against the will of her own father does not mean a collapse in the relationship between a father and a daughter, for Jamini remained otherwise devoted to her family, and her father seemed to have accepted her choice in due course. This choice is better to be understood as a symbolic resistance. Likewise, her conflicts with the colonial authorities and the higher officers are significant because the resistance came

from a native woman of colour, who represents a subject seen as 'triple bound' by the structures of power in a colonial state.

This article revives selected writings of Dr. Jamini Sen through translation, combined with a brief contextual study of her life and times. Jamini's relentless resistance against patriarchal authority, as well as colonial racism, reinforces her intellectual prowess as a female doctor. This is a testimony to the women's struggle, which defies the process of hegemonic control. Jamini Sen's medical thinking paved the way for advanced maternal care. She fought against the social prejudices which denied equal opportunity to women in the field of medical education. As a woman thinker in the history of medicine, she carved her own space to put forward the intellectual legacy of women medics in colonial Bengal.

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