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Embodied Slow Violence in *The Mysterious Ailment of Rupi Baskey*

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Abstract

Aims: *This study aims to explore Hansda Sowvendra Sekhar's *The Mysterious Ailment of Rupi Baskey* in relation to Jharkhand's regional political economy, a facet that has gotten relatively little attention in previous scholarship, which has mostly concentrated on gender and cultural representation. The research seeks to investigate how the narrative depicts bodily decline and social marginalisation in a society determined by long-term resource exploitation, worker out-migration, and uneven development.*

Methodology and Approaches: *The study uses close textual analysis, which is informed by Rob Nixon's concept of slow violence and the internal colonial framework. These methods are used to examine how gradual deterioration, social withdrawal, and the lack of obvious causation shape the novel's depiction of disease and everyday life.*

Outcome: *The analysis exhibits that Rupi Baskey's trajectory, from physical strength to extended illness and partial recovery, highlights the cumulative and often invisible effects of long-term work, economic precarity, limited healthcare access, and societal misrecognition.*

Conclusion and Suggestions: *The novel's ending implies a type of restricted acknowledgement that restores social continuity without changing the underlying conditions of vulnerability. By situating literary representation within the historical context of regional marginalisation, the study adds to ongoing discussions in Adivasi literary studies and emphasises the need for more research on embodiment as a mode of experiencing and articulating internal colonial conditions across resource frontiers.*

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The Mysterious Ailment of Rupi Baskey (2013) by Hansda Sowvendra Sekhar is a significant work of modern Adivasi literature because it provides a complex depiction of Santhal existence in what is now Jharkhand. The story, which is set in the village of Kadamdihi, charts the changing social and economic realities of rural life while also chronicling the slow physical fall of Rupi Baskey, who was formerly regarded as the strongest woman in her town. The narrative places sickness inside ordinary life, characterized by unrelenting labour, migration, strained relationships, and institutional absence; thereby connecting the intimate experience of the body to greater material realities.

Issues of representation, identity, and cultural marginality have typically been at the center of critical conversations on Adivasi literature. According to scholars, modern Adivasi writing challenges the romanticisation of tribal life while highlighting lived experiences of displacement, dispossession, and unequal development (Xaxa 323; Shah 41). The conflicts between traditional community institutions and the demands of modernisation and state-led development are frequently documented in literary texts within this paradigm. The importance of women's employment and their disproportionate vulnerability to social and economic precarity have also been emphasised by studies of gender in Adivasi contexts (Shah 78). Although these methods shed light on the gendered and cultural aspects of marginality, they frequently ignore the greater regional political economy that determines these conditions in favour of concentrating on the experience of the community.

This restriction is especially important when it comes to Jharkhand, an area in eastern India that has historically served as a resource frontier. The region, which is abundant in forest and mineral resources, has long provided labour and raw materials to industrial hubs in exchange for little infrastructure investment (Fernandes 45). Before becoming a separate state in 2000, the area was administratively part of Bihar, where labour out-migration, displacement, and extractive practices led to a long-lasting developmental imbalance. These circumstances align with what Michael Hechter refers to as internal colonialism, a system whereby peripheral areas are politically and developmentally marginalised within a national framework but economically integrated (Hechter 9). The

consequences of such structure may seem dispersed and gradual rather than abrupt at the lived experience level. This dimension can also be seen in Rob Nixon's concept of "slow violence," which refers to types of harm that accrue gradually and often go unnoticed right away (Nixon 2). Such cumulative conditions are reflected in the everyday situations portrayed in Sekhar's book, such as unrelenting labour, reliance on outside jobs, precarious access to healthcare, and the slow degradation of social support.

Methodologically, the study employs close textual analysis guided by internal colonialism frameworks and Rob Nixon's concept of slow violence. The study contends that the slow degeneration of Rupi Baskey's body serves as a narrative space for the cumulative impacts of unremitting labour, emotional retreat, and institutional neglect to become materially inscribed. Rather than treating the body as a symbolic substitute for the region, the analysis interprets Rupi's prolonged sickness as an embodied experience parallel to Jharkhand's socioeconomic conditions, which have a long history of extraction, labour out-migration, and developmental marginalisation. Through this lens, the novel reveals the slow and sometimes socially unnoticed types of suffering caused within an internal colonial setting. By highlighting embodiment, the study broadens existing readings of the novel beyond cultural and gendered interpretations, placing it within the political economics of regional marginalisation.

Jharkhand has historically been marginalised due to a structural pattern of extraction coupled with inadequate regional investments, rather than just unequal development. Although the region has been included into national economic circuits due to its mineral wealth, industrial growth, and labour mobility, this integration has mostly taken the form of outward flows of labour, resources and value, instead of local consolidation (Fernandes 45; Shah 41). In addition to economic inequality, such a state results in a brittle social structure characterised by a reliance on outside work and insufficient institutional support. In this way, the region's underdevelopment is the result of a specific method of integration into the national economy rather than a lack of development.

This type of inclusion is theorised through the framework of internal colonialism. Internal colonialism refers to a relationship where dominant centers systematically position outlying regions as providers of labour and raw commodities, as opposed to exterior domination (Hechter 9). In these situations, political marginalisation and developmental neglect coexist with economic integration. This approach is important because it shifts the explanation of regional backwardness from administrative failure or cultural deficiencies to structural asymmetry. When viewed in this light, the state's ongoing disparity shows its unequal inclusion in national development rather than its isolation from it.

Although the structural logic of marginalisation is identified by internal colonialism, its impacts are rarely felt as an abrupt crisis. Rather, they manifest through what Rob Nixon refers to as "slow violence"—damages that build up over time and are hard to notice in daily life (Nixon 2). This temporal experience of structural harm is made up of attritional employment, deteriorating health, precarious livelihoods, and the normalisation of shortage. Rarely do these processes result in dramatic occurrences; instead, over time, they show up as tiredness, depletion, and impaired capacity. This temporal perspective is essential for understanding Rupi Baskey's physical deterioration, as disease manifests as a tangible manifestation of long-term, socially invisible stress rather than as a singular ailment.

Rupi Baskey is introduced in *The Mysterious Ailment of Rupi Baskey* in terms of strength and endurance, her reputation being inextricably linked to her ability to perform physical labour. She is recognised as "the strongest woman in Kadamdihi," capable of working longer and harder than others without complaining (Sekhar 5). This strength is depicted not as a symbolic characteristic, but as an actual resource that keeps the household going in a subsistence economy. Her capacity to work in the fields, manage household obligations, and care for children allows the family to remain stable. In this situation, physical vitality serves as a sort of economic stability, and the body becomes indispensable for daily life. Rupi's labor's intensity and continuity are emphasised throughout the story. She works alongside men in agriculture, moving paddy, lugging

weights, and putting in long hours under challenging circumstances. She is still in charge of daycare management, fuel and water collection, cooking, and cleaning. Rupi "worked from before sunrise until late into the night, resting only when the day's tasks were done," according to the novel, highlighting this continuous cycle of physical expenditure (Sekhar 18). The importance of women's labour to household subsistence, where productive, domestic, and reproductive activity remain structurally interwoven, is reflected in this portrayal, which is consistent with research on rural and Adivasi economies (Shah 78).

This ability to work consistently is essential to Rupi's social identity in the community. She is appreciated for her enthusiasm and dependability, and her worth in the home is determined more by her utility than by her own well-being. Her burden is not greatly lessened by pregnancy or childbirth either; rather, reproductive labour is integrated into the same economy of physical endurance. The story describes how, shortly after giving birth in the middle of the field during work, she resumed her fieldwork without any complaints (Sekhar 24). Physical strength becomes a type of functional capital under this situation, and the stronger the body, the more important it is to family survival tactics. However, the text provides scant evidence of the structural or institutional support that could keep this creative body going. Nutritional supplies are scarce, healthcare facilities are still far away, and everyday work demands leave little time for rest. Crucially, though, no specific cause is mentioned in the story for Rupi's subsequent illness. Rather, her physical deterioration results from a life moulded by constant physical exertion and few chances for recuperation. Even though the book chronicles a lengthy history of prolonged bodily expenditure, the ailment remains "mysterious" due to the lack of a definitive diagnosis. In this way, rather than portraying disease as the outcome of a particular incident, the story places it within a larger temporal context.

This temporal pattern is consistent with Rob Nixon's "slow violence,". Early depictions of Rupi's existence are characterised by repetition rather than crisis: seasons of labour, childbirth, and household duties that progressively mould the body through continued use. According to studies in Jharkhand, women in particular frequently engage in more manual labour at the family level

because of economic instability and a lack of local opportunities (Fernandes 45). Under such circumstances, even when the long-term effects of structural marginalisation are not acknowledged, the pressures are absorbed through physical exertion. Understanding the significance of Rupi's latter situation thus depends on the narrative's consistent focus on this extended period of productivity. Her strength has been accumulated over years of consistent effort, but it is also vulnerable because it is reliant on constant physical effort rather than institutional assistance. As the body gradually deteriorates, the shift seems abrupt and incomprehensible, yet it is accompanied by a lengthy history of use. The novel positions the body as a place of persistent productivity within a precarious socioeconomic setting by emphasising employment as the organising principle of Rupi's early life. This sets the stage for a deterioration that occurs gradually rather than abruptly.

In *The Mysterious Ailment of Rupi Baskey*, Rupi's disease develops gradually as opposed to during any clear crisis. What starts out as sporadic exhaustion gradually progresses to chronic weakness, physical discomfort, and an increasing incapacity to carry out daily duties. According to the story, she was "tired all the time," even after doing little labour, and she was worn out by things that used to seem easy (Sekhar 41). There is no obvious medical reason for this decline. Treatment provides little long-term comfort, and consultations in town hospitals and visits to traditional healers result in doubt rather than a diagnosis. In this perspective, illness is defined more by duration; a continuous loss of body capability that defies professional definition, than by observable symptoms. The significance of Rupi's ailment is socially negotiated in the lack of medical assurance. As her condition continues, theories start to spread both inside the family and outside of it. Suspicion gradually shifts to Gurubari, whose growing closeness to Sido is retroactively linked to Rupi's deterioration. According to the text, "people started to say that something was being done to her," turning inexplicable debility into a matter of intent and animosity amongst people (Sekhar 56). Thus, the vocabulary of competition, jealousy, and hidden injury makes socially understandable what is medically uncertain.

Crucially, the story refutes Gurubari's accountability. Rumour, coincidence, and fear, not proof, are what fuel suspicion. Her presence offers a concrete explanation for a circumstance for which there is no obvious cause. In an effort to re-establish a sense of causal order, ritual and spiritual interventions start to complement, and occasionally even replace biomedical treatment as ambiguity grows. The shift from physical discomfort to paranormal suspicion highlights how hard it is to maintain ambiguity in day-to-day existence. Individual figures are used to provide an explanation when structural or dispersed causes are not obvious. Rupi's role in the home has changed subtly but significantly as a result of her physical deterioration. Daily rituals gradually reorganise around her lessened capacity as her inability to work diminishes her centrality. Her former tasks are now handled by others, and she is receiving less and less emotional attention. When she realises that "things went on without her," the story depicts her increasing loneliness (Sekhar 68). This retreat, which reflects the slow pace of her sickness, happens through gradual changes in expectations and care rather than through outright rejection. Thus, a parallel process of social marginalisation is brought about by bodily debility.

The novel's depiction of disease revolves around the persistence of ambiguity. Ritual activities merely provide momentary reassurance, medical treatment is unable to explain, and suspicion never turns into certainty. The illness is still "mysterious," defined more by its protracted existence in daily life than by its cause. The significance of disease is found in the progressive loss of physical ability and social belonging over time, as this indeterminacy draws attention away from single causation and toward cumulative experience. Moreover, incremental degradation is rarely perceived as structural at the societal level. This dynamic is clarified by Johan Galtung's idea of structural violence, which holds that harm caused by social structures frequently lacks a visible perpetrator and is instead explained by quick, individualised explanations (Galtung 171). Long-term factors such as financial instability, brittle access to healthcare, and the mounting needs of subsistence living are not included in the explanation for Rupi's situation. Rather, interpersonal suspicion is the result of sorrow. Thus, the story depicts not only physical decline but also an interpretive crisis: only through Gurubari's

persona does the accumulation of stress become socially understandable. The community obscures the larger factors influencing Rupi's decline by shifting accountability onto personal choice. These processes take place in daily situations characterised by unstable healthcare access, little institutional support, and economic uncertainty, conditions that are indicative of Jharkhand's broader history of regional marginalisation. The novel reveals the common ways in which gradual structural damage is experienced but goes unnoticed by bringing to light both physical fatigue and its social misrecognition.

"Cure, Well Almost," the last chapter of *The Mysterious Ailment of Rupi Baskey*, describes a change in Rupi's health that seems to hold out the possibility of recovery. Her health is improving after a protracted illness and social disengagement. She eventually regains some of her physical strength and starts to take part in a few home activities once more. The story points to a careful return to daily life characterised by little, gradual adjustments rather than a stunning recovery. Rupi is said to be improved but not completely recovered; her capacity to work is still limited, and her strength does not return to its previous level (Sekhar 142). In this way, recovery is not transformative but rather piecemeal. This phase is significant because it maintains the prior pattern of progressive change. Her improvement comes from small changes rather than a drastic cure, just as her downfall happened gradually rather than all at once. The lost body is not the one that comes back. Physical ability and social standing have changed as a result of years of infirmity, and these effects are difficult to undo. As a result, the story defies the resolution that comes with healing. It portrays healing as a negotiated adaptation to diminished strength rather than re-establishing balance.

Rupi's role in the house is likewise reshaped by this changed physical state. Even if she starts to participate in daily activities again, she still lacks the centrality that came with being the main worker. The duties that had changed while she was ill are still divided, and the routines of the home continue to function with less reliance on her work. According to the book, her presence is once again recognised, but the previous sense of necessity does not reappear. Therefore, recognition rather than prior authority or capability is restored. The fact that there is still confusion about the ailment itself adds to the ending's

ambiguity. The reasons behind her decline are not addressed, and no conclusive explanation is found. The circumstances that led to her illness, economic instability, restricted access to long-term healthcare, and the pressures of subsistence living remain the same. The individual body makes progress, but the larger environment that influenced her vulnerability doesn't change. In this way, rehabilitation seems more like adaptation to ongoing limitations than it does like resolution.

From the standpoint of slow violence, this result illustrates how systemic harm is not always visible, and the story's ending points to a similar trend: the current crisis passes, but the longer history of stress that moulded the body is still physically visible. This temporal remnant of previous depletion is embodied in Rupi's weakened but functional state. In Rupi's instance, the crisis subsides on a personal level, but the environment characterised by subsistence labour needs, unstable healthcare access, and economic insecurity does not improve. This normalization, where structural misery is assimilated into daily life after acute disruption passes, is made clearer by Arthur Kleinman's concept of social suffering (Kleinman et al.). Although it survives, the body is diminished and yet has the effects of the cumulative stress. Therefore, the novel's ending points to a larger trend where acknowledgement does not equate to change. Even while the underlying conditions of vulnerability continue to exist, limited development becomes adequate to restore social continuity. The narrative's conclusion, which depicts a body that is functional but irreversibly changed, mirrors the temporal logic of marginal contexts where recuperation takes place inside structural constraints rather than outside of them, relief is only partial, and institutional response is inadequate. In this way, Rupi's "almost" cure signifies the persistence of gradual structural deterioration in a region moulded by lengthy histories of economic and developmental marginalisation rather than a resolution.

This paper studied Rupi Baskey's *Mysterious Ailment* using the frameworks of internal colonialism, slow violence, and embodiment to better understand how structural marginalisation manifests itself in lived experiences. Placing the novel within the historical context of Jharkhand's uneven development and regional neglect, the study contends that Rupi's bodily trajectory; from

exceptional productivity to gradual debility, reflects the cumulative pressures of a socioeconomic environment shaped by long-term structural imbalance. The research has demonstrated through textual analysis that the narrative emphasises time, uncertainty, and progressive decline rather than sole causality. When viewed through the lens of slow violence, this slow decline illustrates how harm is caused by routine labour, unstable economic conditions, and a lack of institutional support. However, the community's propensity to interpret Rupi's illness in terms of suspicion, witchcraft, and animosity toward others illustrates how widespread structural misery can be socially misunderstood. In this way, the novel highlights the discrepancy between the cultural interpretation of suffering and its actual experience. This pattern is further supported by the "almost" recovery in the last part. The circumstances that created susceptibility do not change once the current crisis passes, and the body returns to normal life in a diminished state. The novel finally proposes a more expansive logic in which acknowledgement does not result in structural change when viewed against the backdrop of internal colonial relations. Thus, Rupi's modified but functional body represents the resilience of gradual structural deterioration in settings influenced by ongoing regional marginalisation.

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