

SHAKTI

Background

The narrator of this story is Gita, a 40-year-old woman of Gujarati descent. Her mother, Mrs Balani, a devout Hindu, is also a part of the story, as Gita recounts her father's descent into illness. Mr Balani had diabetes, then a stroke and was diagnosed with dementia. He is unable to speak and cannot walk without help.

The word 'shakti' is derived from Sanskrit and means power. In Hinduism shakti can be a divine feminine energy/power.

It happened so slowly, my dad's illness. First there was the diabetes, then the stroke. After the stroke he started to forget words and faces and he was becoming more aggressive, particularly with my mum. He was trying to cover up what was happening, hiding the bills and the letters. By the time we found out it was too late and the business was ruined, their home was repossessed. They tried living with my brother for a while, but it didn't work out. Mum felt that they were in the way and the grandchildren didn't like her telling them what to do. Even when they were rehoused, things were never the same. Our house used to be full at the weekends with family and friends visiting, asking my dad for advice and help. And then when he became ill they just faded away, because it wasn't fun being at our house anymore.

What's that Mum? She's asking me to tell you that it wasn't so bad and that people are coming back. She's so forgiving, aren't you mum?

Back then my dad was the dominant one. The reason why she didn't go out of the house that much was because she didn't have a choice. "You do as I say" and that was it for all of us really. We were all scared of him and his belt, if you know what I mean. And now that he is ill, it has been a huge change for mum, absolutely completely, because I have never seen her even speak up for herself before, or express an opinion. That's why I'm the way I am I think, because I refused to be like her when I was growing up. I used to think, "I'm not going to be like you. I'm going to be outspoken and ambitious" because I wasn't allowed to study as well. At 18, I got married because that's the norm in our family. We didn't know any different. So you just do it.

Now with Dad and the way he is, she has more freedom. I think that is her biggest worry, thinking, "I don't care what he's like, as long as he is here". She dreads what will happen if something happens to him and she loses her independence and has to go and live with somebody.

Tutor Guide

In this story cultural beliefs and practices, financial insecurity and changes in family relationships as a result of Mr Balani's illness are all potential sources of social pain. Matters to draw attention to in a discussion are:

- the economic insecurity of losing the family business and home as a result of illness
- the 'fading away' of social networks and Mr Balani's loss of status within these networks
- Mrs Balani feeling 'in the way' and not welcome when the couple went to live with their son, suggesting possible shifts in cultural practices and changing expectations about extended family relationships
- Gita's sense of loss and anger for her own potential and how this becomes an identification against her mother's passivity
- the suggestion of Mr Balani's violence towards the children

Gender

A central theme to discuss and explore in this story are the relationships between cultural, gender and generational differences and how these affect relationships and needs for care and support within the family.

Activity

Questions to use as discussion points:

- How might illness re-arrange family roles and relationships of power in ways that might also be beneficial to some family members?
- What gains and losses are there for the women when Mr Balani becomes incapacitated?
- How might these complexities within the family affect the care and support that is given to Mr and Mrs Balani and to Gita?
- In what ways can ambivalent feelings about an illness affect experiences of loss and bereavement?

An important point to draw out from the case story is the different meanings and consequences of an illness within the same household. This recognition should help participants to be alert to the limitations of thinking about 'the family' as a cohesive unit with similar needs and shared experiences of social pain.

