The Context: Journal of English Studies
Volume 12, Issue 6, September 2025
ISSN: 2349-4948
www.thecontext.in

Article

Narrating the Self, Constructing Modernity: Female Subjectivity in the Life Writing of Mary Poonen Lukose

Anulekshmi U.G.

Assistant Professor, Department of English, University College, Thiruvananthapuram, India;
anulekshmi.ug@gmail.com

Accepted version published on 5th September 2025

DOI https://doi.org/10.5281/zenodo.17059881

Abstract: Life writing has been a vibrant area of critical analysis since the 1980s, with the biographies of famous personalities garnering public attention for the candid exposure of their private selves, transcending the public/private divide that characterized much of the writings focusing on individual selves with the onset of modernity. Their documentary value in the micro annals of history began to be acknowledged as a result of the broad awareness that life stories of people do not happen in a vacuum but are socially situated and marked by cultural specificities. This article analyzes *Trailblazer: The Legendary Life and Times of Mary Poonen Lukose, Surgeon General of Travancore* (2019), a collection of unfinished memoirs and the reminiscences of Dr.Mary Poonen Lukose (1886-1976) against the backdrop of the notion of the medical subjectivity that was evolving in the late nineteenth-century Kerala. Life writing as a genre is brought under scrutiny with a view to unfolding the cultural frameworks offered by this category of literature in the articulation of modern female subjectivity.

Keywords: Life Writing; Female Subjectivity; Medical History; Kerala; Mary Poonen Lukose

ISSN 2349-4948

Introduction

Life writing has been a vibrant area of critical analysis since the 1980s, with the biographies of famous personalities garnering public attention for the direct exposure of their private selves. The genre transcends the public/private divide that has characterised much of the writings since the onset of modernity. Their documentary value in the micro annals of history is now recognized due to the broad awareness that people's life stories do not happen in a vacuum but are socially situated and marked by cultural specificities. This article analyses *Trailblazer: The Legendary Life and Times of Mary Poonen Lukose, Surgeon General of Travancore* (2019), a collection of unfinished memoirs and the reminiscences of Dr Mary Poonen Lukose (1886-1976). The book is read against the backdrop of the evolving notion of medical subjectivity in late nineteenth-century Kerala. Life Writing as a genre is scrutinised to reveal the cultural frameworks offered by this category of literature in articulating modern female subjectivity.

In his influential critique of autobiography as a genre, Paul de Man once observed that it is not a genre or a mode but a "figure of reading or understanding that occurs, to some degree, in all texts" (921). Much of the critical vigor and cultural force involved in documenting the self through various representational tropes under different categories of literature or the arts has been instrumental in broadening the scope of literature known as life-writing. Being the unofficial documentation of the times, they narrate what constitutes the personal, which inevitably embraces the social. Life writings are situated within the disciplinary interstices of literature and history as retold by the people who live it.

The transition from autobiography studies to life writing is attributed to the rise of feminist and postcolonial consciousness, which gave critical attention to the voices of the 'previously silenced', such as women, indigenous people, and people of colour. Hence, critics prefer the term life writing over auto/biography based on its inclusive nature. Marlene Kadar, in her seminal study *Essays on Life Writing: From Genre to Critical Practice* (1992), has observed that life writing as a genre has always presupposed an androcentric nature in terms of the conceptual tools it has employed (22). The strategies used for the narrativization of the self and the interpretative strategies employed by the earliest literary critics support her claim. In her book Women's *Life Writing; Finding Voice/Building Communities,* Linda S. Coleman observes that the same gendered norms that marginalised female experiences severely restricted our knowledge of people and cultures and consequently, "women's private lives were silenced by a historical and critical bias against the private genres they most often employed (diaries, daybooks and journals) and their explicit public voices (memoirs, confessions, autobiographies) too were often discouraged, silenced or denied" (2)

In the Indian context, the idea of life narratives as a different genre with its focus on the depiction of the life of one individual was unfamiliar until the emergence of a colonial modern outlook in the late nineteenth century through intense expressions of a dynamic self can be seen in the works that emerged as part of the *Bhakti* movement from the fifteenth to the seventeenth century. On a closer analysis, it can be understood

ISSN 2349-4948

that the extreme form of individualism which characterised post-Enlightenment Europe has never been part of the Indian philosophical tradition.

In India, the conceptualisation of society or collectivity predominated over the individual (Dirks 57). This would not mean that Indians lacked selfhood until the encounter with the British. The norms and structure of conceptualizing selfhood in India differed radically from those in the West. Even the *Bhakti* poetic tradition in India denotes a particular depiction of the self in communion with a perceived supreme spirit.

In Malayalam, the emergence and popularisation of life writing as a genre in the modern sense of the term occurred in conjunction with the evolution of a new modern subjective interiority in the late nineteenth century. The edict of 1817 by Rani Gouri Parvathi Bayi stated that "the state shall defray the entire cost of education of people", for she wanted to make sure that the people of Travancore could read and write (2811). The conceptualization of such a new subjecthood was indicative of a shift in perception regarding what constituted an ideal subject, based on novel credentials such as education. In his book *Writing in the First Person: Literature, History and Autobiography in Modern Kerala*, Udayakumar has noted that "practices of personal narration in the late nineteenth and early twentieth century indicate an essential point where ideas of personhood, agency and capacity for experience converge in modern Kerala (3). The autonomy of wielding the written word became accessible to the public. They became means for expressing their impressions of the world around them, and experience hitherto unimaginable to them.

Dr. Naduvattom Gopalakrishnan's Athmakatha Sahityam Malayalathil (1985) is one of the earliest academic attempts to examine the history and nature of life writings in Malayalam. He has classified the predominant forms of life writings in Malayalam into four categories: memoirs and reminiscences, letters, completed autobiographies, and diaries. He observes that Malayalam is rich in memoirs and reminiscence, but letters and diaries are limited (9). The life writings of women, in the form of letters and diaries, were derided as pastimes rather than being viewed as recordings of their private selves in dialogue with the society of their times. They were considered unworthy of publication until the emergence of a postmodern consciousness in history, which counted micro-narratives as powerful as macro-narratives.

The life writings of Dr Mary Poonen Lukose need to be read in this particular social context. With the rise in female education, the debates over women's rights formed an important axis within the nationalist reformist agenda. The role of women in the literary arena also initiated radical discourses during the period. A section of women preferred to campaign for their rights within the framework of modern domesticity by stressing the importance of female education to bring out the best in contemporary mothers. The idea of an educated, informed woman developed, who must be the dutiful manager of the modern home, bringing order and harmony, governed their self-reimagining. There was another section that demanded freedom

from all structures and institutions, including the family, that restricted the unrestrained growth of female selfhood in society.

Mary Poonen Lukose's ascension to the official ladder of Travancore's medical service gave momentum to the feminist voice in the state. The Travancore royal family appointed her as the first woman Surgeon General, favouring her over strong contenders such as Dr Raman Thampi and Dr W.A.Noble (Nair 67). Dr. Mary Poonen Lukose was born in 1886 as the only daughter of Dr. T.E. Poonen and Mary (Koruthu) in the famous Therthanath family from Kottayam, which had produced some of the eminent personalities in Travancore. Her father had been a Senior Surgeon and the first native Durbar Physician during the reign of Sree Mulam Thirunal of Travancore.

Trailblazer: The Legendary Life and Times of Mary Poonen Lukose, Surgeon General of Travancore (2019), published by Manorama Books, is a collection of her unfinished memoir and the reminiscences of her children, grandchildren, and other relatives about her personality as reflected in their lives. Her unfinished memoir titled *My 86 Years from 1886: A Random Look Backwards"* documents her experiences as a unique female achiever of the Travancore of her times. The work remained unpublished and almost perished all these years until her daughter-in-law, Aley Lukose, took the initiative to bring it out into the public domain. The idea of writing an autobiography occurred to her after being interviewed by a lady executive of All India Radio, Trivandrum, and the popular demand for such an undertaking that followed after the programme was aired. She says she thought about the 'predictable good that might come out of it and decided to give the idea a trial (17).

It is necessary to examine the book's structure to understand how the layers of Mary's self are revealed through the subsequent narration. As the book begins, there is a brief description of the medical history of Travancore, which is followed by Mary Poonen Lukose's autobiographical narrative. The next chapter contains recollections of her family members. As the direct documentation of one of the decisive historical junctures in Kerala's history, the book becomes a valuable addition to the knowledge about the late nineteenth-century cultural milieu of Kerala and the changing role of women within it. Mary Poonen Lukose was a woman not on the cultural fringes of the times. She was an active participant in the unfolding history. After receiving her education at a convent school in Quilon, where she was born, she came to Trivandrum at the age of seven. She joined the 'Holy Angels ' Convent School and passed the Matriculation examination of Madras University from there with distinction.

Mary Poonen Lukose had to overcome many prejudices before achieving her dream of becoming a doctor. She hailed from the native state of Travancore. Travancore was one of the 675 native states that existed in India by the nineteenth century. The native states, such as Travancore, had a unique political status compared to the other states that existed during the time. The native states had political authority in the form of hereditary rulers, known as princes, although the British indirectly exercised control over these states. Like the other princely states of the time, Travancore entered into a military alliance with the East India Company, forced by threats from other Indian states like Mysore, and in 1795 and 1805, the Raja of Travancore recognised the British

paramount power, promising to pay a substantial annual subsidy in exchange for continued protection (Ramusack 2). The English had close relations with the Raja during the last quarter of the eighteenth century. British Residents were expected to act as political agents of the British government in the princely states.

In 1810, Colonel Munro was appointed as the British Resident, and Her Highness Lakshmi Bai acceded to the throne of Travancore. During this period, under the aegis of Colonel Munro, the Travancore state witnessed the institutionalisation of colonial governmentality in the true sense. Several administrative reforms, modeled after the system prevailing in British India, were introduced during her reign from 1810 to 1815.

In 1811, Colonel Munro, till then the British Resident for Travancore and Cochin, assumed the Dewanship of the state and, in the exercise of the *Melkoima* rights (the right of superior authority or overlordship) of the Maharajah, took over the management of the *Devaswoms*, properties attached to the temples. The state also entered the field of education, and as per Munro's direction, establishing a vernacular school in each village became mandatory (Menon 710). As a result of these interventions, by the second half of the nineteenth century, Travancore witnessed 'unprecedented agency forming transitions', paving the way for the emergence of new classes in Travancore (Chandramohan 21).

Travancore had always been ahead of other states in terms of progress achieved in social indices, such as health and education. Mary Poonen Lukose has noted in her autobiography *Trailblazer* how "Travancore was even in those days fairly well up, in comparison with other parts of India, in matters of education, civic sense, public health, hygiene and other concomitants of civilised life" (52). By the late nineteenth century, Travancore had achieved commendable progress in education. *The Travancore Manual, for instance, compares the literacy rate among Travancoreans with that of* other States and Provinces to show how Travancore occupies the first rank in respect of the total population of literates. "While Travancore returns one literate for every eight persons," he says, "Baroda returns one for every 12 persons and the Bombay Presidency one for every 14 persons only; in the Madras Presidency, the return is lower still, only 6'3 per cent of the population being able to read and write. In respect of female education, too. Travancore holds the same position; even Bombay, the leading Province in point of education, returns only 1.1 per cent" (Aiya 33).

There were vernacular schools called *Asan pallikoodams*, which were the native centres of learning. In his census report in 1897, Nagaim Aiya mentions the existence of 1300 such schools in Travancore with 50,000 people in "The master was called the *Asan* and the village boys and girls were taught there a few simple lessons in Malayalam and the *Asan* belonged to either *Ambalavasi* or *Sudra* or sometimes even *Iluva* castes" (453). These native educational institutions were all the result of private enterprise, and the teachers depended upon the pupils for their maintenance. The parents or guardians of the pupils provided financial support for their day-to-day needs in the form of cash or in-kind assistance.

ISSN 2349-4948

There were specific remarkable changes in the cultural fabric of Travancore by the late nineteenth century. The period saw the culmination of regional modernity in Travancore. The coinage of regional modernity, a conceptual framework popularised by K.Sivaramakrishnan and Arun Agarwal in their work *Regional Modernities: The Cultural Politics of Development in India*, attempts to move away "from the tyranny of the global or the local, or even worse glocal" in the evaluation of modernity. The term refers to "the multiple modernities that were and are being produced" (13). Scholars like David Washbrook have also warned against how "an inherent ethnocentrism perhaps, makes it difficult to suppose that non-Western cultures could have generated their own 'intimations' of modernity – ideas of individuality, secularism, rationalism – independent of a subordinate relationship to the West" ("Intimations of 143). The focus of regional modernity is on socio-cultural developments of a particular region that engender a new discursive framework in the articulation of the self and society.

In the discourses of regional modernity in Travancore, gender became a crucial criterion for analysis when assessing societal progress in government reports and among the native intelligentsia. Women were encouraged to pursue an education, just like their male counterparts. However, women were not supposed to receive formal education in specific disciplines, such as the arts and needlework. In her work *Engendering Individuals: The Language of Re-forming in Early Twentieth Century Malayalam*, J. Devika has drawn attention to L.A. Ravi Varma Thampuran's article titled "A System of Education Useful to Society", which differentiated between *Grihasthadharmam* (householder's duty) for boys and *Grihnidharmam* (housewife's duty) for girls that appeared in the magazine *Swadeshabhimani.* On elaborating on *Grihnidharmam,* he says: "Instead of mathematics, subjects like music, painting, embroidery, and other crafts be made available to the pupils" (qt in Devika 84)

Mary Poonen Lukose received her education in Travancore within this context. Upon passing the F.A. (First Arts) examination, she joined the Maharajah's College, Trivandrum (now University College) to pursue a B.A., becoming the first woman to gain admission to the college. She was the first woman to earn a B.A. degree in Travancore (Nair 9). She writes, "despite my ardent desire to take science subjects for the course, I had to be content with arts subjects as the then Principal of the College (Dr Mitchell) was not in favour of women students going in for science subjects" (21). Hence, Mary was forced to choose History and Economics as her subjects. However, Mr R.S.Lepper, the head of the History and Economics Department where she enrolled as a student, was sympathetic to her cause and gave her the idea to seek admission to Trinity College, Dublin. Although he advised her to pursue training for the teaching profession, she had always wanted to take up medicine, like her father. She passed B.A. The degree examination of Madras University in 1909 marked the first time a woman from Travancore took a university degree. After that, Mary went to Dublin, where she obtained a Diploma of Licentiate in Midwifery in 1915.

The book *Trailblazer: The Legendary Life and Times of Mary Poonen Lukose, Surgeon General of Travancore, portrays Mary's isolated existence as a lonely woman in a foreign land,*

her homesickness, and the companionship that emerged later with the people there. Her brief stint in London and her experience as a doctor at the famous Rotunda Hospital in Dublin, Ireland, equipped her to face the most adverse circumstances she could encounter in the future. Following the death of her father in 1916, which had a profound impact on her life, she returned to Travancore.

Mary joined as Surgeon in Charge of the Women and Children's hospital in Trivandrum on the recommendation of Mrs Scharlib, a member of the Dufferin Committee for the selection of lady doctors and nurses for service in hospitals in the Commonwealth. Mr Krishnan Nair, the then Dewan of Travancore, was planning to appoint an English lady in the place. However, he had to give in, and Mary was selected for the post with her support from the Travancore royal family. Professor Rajasekharan Nair, in his book *Evolution of Modern Medicine in Kerala,* has described how, despite having the patronage of the Maharajah Sri Moolam Thirunal, who had paternal affection towards her, she could not get the job of an obstetrician at Thycaud Hospital in the first attempt. He says, "Though she had better qualifications than her predecessor, she was a 'native', and the British administrators turned down her application" (65).

The narrative details Mary's career as a doctor in Travancore. She points out that people's aversion to seeking recourse to hospitals for treatment of diseases, maternity, and childbirth (52). A major stakeholder in the development of medical modernity was Travancore's medical missions. Miss. Thompson, a medical missionary sent by the London Missionary Society, took the initiative in opening a maternity ward in Neyyoor Mission Hospital in 1838. According to the Travancore Manual, a lying-in-hospital was established at the newly opened Civil Hospital in 1865. The number of patients seeking the services of these institutions was low. The people belonging to the higher caste kept themselves away from the colonial medical institutions for women. Mary Poonen Lukose notes: "The only women who resorted to hospital treatment in times of illness and for confinement and delivery were usually those in the lower strata of society, like fisher folk and Harijans. Even in their case, the sick and the women in labour were invariably carried to hospitals at the last stage in a hopeless condition after they were 'treated' by quacks" (52). There was a prejudice existing in the minds of the people against hospitals, which were seen as being meant for the uncared-for.

Coupled with this was the tradition that existed in most Indian families, which required that the first baby be born in its mother's home (53). The tribulations she faced as the first Lady Surgeon General of Travancore are depicted in the book to supplement the general history of allopathic medicine's trajectory in the Travancore of those times. She writes, "It is true, hospital conditions in those days were not ideal...Even the maternity ward and the operation theatre were lit with kerosene lamps. The one in the operating theatre was large, ornate, and beautiful to look at. However, it so hung above the operation table and over the head of the doctor doing surgery that it was the shadow and not the direct rays of light that fell on the object" (51).

Mary managed to establish herself as an able gynaecologist in Travancore over time. Throughout her long career, she had to overcome numerous obstacles, both as a doctor and an administrator. The unhygienic delivery practices of *Thais* or local

ISSN 2349-4948

midwives were a severe issue of the times. Local people did not prefer hospitals for delivery, and they sought the help of these local midwives due to their cultural prejudices. Professor Rajasekharan Nair has described how, as an able administrator, she managed to evolve a system by which "children of some of Thai's (midwives) were taken up in the hospital for proper training in childbirth and neonatal care. Many hereditary Thais found this system attractive as they continued to get the same privileges as before" (66). Mary set an example by choosing to have her first delivery at Thyckad Hospital, which was intended to instill confidence in the local population regarding the efficacy of modern allopathic hospitals. Another significant difficulty Mary faced was the hospital's absence of up-to-date medical and surgical instruments. The lack of enough qualified staff nurses also affected the functioning of the hospitals. By the late nineteenth and early twentieth centuries, medicine had begun to gain acceptability as a respectable profession for women. The vernacular journals of the period featured articles encouraging women to pursue a career in the medical profession. For instance, the vernacular print journal *Sarada* carried an article titled *Sthreekalum Vaidyavum* (Women and Medicine). It said:

> It is essential to consider whether the women possess the qualities anticipated in a *vaidyan*. To obtain the desired result in the matter of healing and thereby render capable service to the people, a *vaidyan* should possess a sharp intellect, the ability for deep reflection, power of observation, comprehension, and above all, kindness, sympathy towards the afflicted, tolerance, patience, and universal love towards every human being. It can be said without any room for doubt that many of these qualities are inherently present in women (16).

The gradual feminisation of the profession paved the way for more women to enrol in medical studies. In fact, examining women's role in medicine, women had been at the receiving end in this domain for ages. The concept of a female doctor had been unthinkable to the public until the mid-nineteenth century. Women with knowledge of medicine must have existed, but they were not in public visibility. The feminist medical scholar Neelam Kumar has identified three barriers that have contributed to the lack of visibility of women in the field of medicine (xiv-xvi). The first barrier, she says, that had kept women away from the area was the structural barrier, such as the restrictions in place in the field of women's education and the resultant lack of existing and developing medical knowledge systems. The second was the normative barriers, which stressed "the domesticity of women" and their "suitability for feminine occupations". The third and final barrier is related to the perceived cognitive differences between genders, which intriguingly "rationalises the lower confidence of women" in challenging situations (xiv).

The cultural restrictions that had adversely affected women's entry into the field of medicine become evident when historical records from the mid-nineteenth century are analyzed. James Barry (1789-1865), the first qualified woman doctor from Britain, had to lead the life of a man till her death before the public eye, for the existing cultural norms of the day could not tolerate the idea of a woman doctor ("The 'Male' Military Surgeon"). Elizabeth Garret Anderson (1836-1917), the first recognised woman

physician from Britain, also faced immense hardships before securing the title of a doctor. The lack of female doctors also meant denial of medical access to women, for the segregating gender norms of the day created inhibitions among female patients to seek treatment from male doctors. By the mid-nineteenth century, visible policy changes occurred in the recruitment of female doctors. Feminist postcolonial scholars have drawn attention to a curious fact that comes to the fore while analysing the cultural stimuli that made the increasing accommodation of women possible in medicine during the mid-nineteenth century (see Antoinette Burton, Maneesha Lal, etc.). The colonial political narratives of the nineteenth century, which depicted the impoverished condition of women in the colonies, provided female doctors in Britain with a solid justification for arguing their relevance in the medical field. The English medical women demanded structural changes in medical and educational institutions in Britain to accommodate female doctors, fulfilling the humanitarian responsibility that rested with the Empire to provide medical care to women in India.

The '*zenana*', the separate female quarters in the Hindu and Muslim households in India, could be accessed only by female doctors, as male doctors were strictly prevented from seeing or touching the native women of these communities. Sophia Jex-Blake (1840-1912), one of the first female doctors in Britain, in her book titled "Medical Women", for instance, argued: "It is...of course in India and other parts of the East that the necessity for medical women is most apparent...Over a thousand English medical women were urgently needed in India in 1880, and by 1887, there were only fifty-four women, all told, on the British Register. Is it possible to have stronger evidence of the pressing need for increased facilities and national aid for the medical education of women?" (701). The medical needs of the colonies, therefore, acted as a trigger in facilitating the training of women in the medical profession in Britain as well as in the colonies. The propagation of colonial medicine in the colonies necessitated attracting native women to the colonial medical institutions.

The Lady Dufferin Fund was established to train women in the field of medicine for service in the colonies, thereby creating a new medical workforce comprising women. The story behind the creation of such a fund traces its origin to the personal request of the Maharani of Punna in 1875 to Miss Beilby, a medical missionary, to impress upon Queen Victoria the desperate need for Western medicine for Indian women (Forbes 5). However, the downside of this initiative was that women from the colonies who were trained under the programme were always placed in subordinate service as 'hospital assistants' (Burton 27). Even Mary Poonen Lukose's first appointment in Travancore medical service as an obstetrician was made possible only through the intervention of Mrs Scharlib, a member of the Dufferin Fund. As the first native female doctor of Travancore, Mary Poonen Lukose confronted many oppositions and prejudices. She was an efficient doctor and an able administrator. The Travancore Royal family conferred the title '*Vaidyashastakusala*' on her for the remarkable service she rendered in the field of Travancore medical service (Nair 9).

In *Trailblazer,* Mary Poonen Lukose's account stops in the middle of her career description. Her daughter-in-law takes charge of the narrative from there onward. Aley

ISSN 2349-4948

Lukose narrates Dr. Mary's career progress, her appointment as the Durbar Physician by Rani Sethu Lakshmi Bayi, and her elevation to the post of the first lady legislator in Travancore. She also describes Mary's marriage with Mr K.K. Lukose, who was one year younger than her, the impact of his premature death on her, and her death due to a stroke on her ninetieth birthday. The book also carries beautiful family photographs interspersed with narratives of her grandchildren.

Dr. Mary Poonen Lukose's life writings have relevance within the general history of the evolution of modern medicine in Travancore. They also aid in charting the evolution of modern femininity in Travancore. She lived in an age when these arenas witnessed radical changes, and her narratives bear testimony to these events. Her life writings document an important phase in the state's cultural history. The institutionalisation of European medicine threw the material female body out into the regulatory framework of the modern nation-state. The native population trusted their traditional medical knowledge systems, which addressed issues related to pregnancy and childcare. In Travancore, elaborate regimes addressed pregnancy, childcare, and other gynaecological issues. It was, therefore, a heavy task for modern allopathic medicine to manage an entry into the native households of Travancore as far as the medical problems related to women were concerned. Mary Poonen Lukose belonged to the Syrian Christian community of Travancore, one of the most influential groups of the time. It is no coincidence that the first lady doctor of Travancore came from the Syrian Christian community. Caste and community organisation had always been at the centre of the reformist projects in Kerala.

Mary Poonen Lukose was a woman who dedicated her life to a cause. She used to travel extensively throughout Travancore, inspecting hospitals and addressing schoolchildren and the public on public health matters (Nair 67). She was also a member of the Indian Medical Association and the Indian Obstetrical Association. She also helmed the Trivandrum branch of the Y.W.C.A. (Young Women's Christian Association) for nearly fifty years. Her life writings document a female narrative self, vying eagerly with the restrictions placed on her personal growth, making use of the avenues for self-exploration facilitated by the cultural conditions of modernity in late nineteenth-century Travancore.

Funding: This research received no external funding.

Institutional Review Board Statement: Not applicable.

Informed Consent Statement: Not applicable.

Data Availability Statement: The data sharing policy does not apply to this article.

Conflicts of Interest: The authors declare that they have no conflicts of interest.

ISSN 2349-4948

Works cited

Burton, Antoinette. "Contesting the Zenana: The Mission to Make 'Lady Doctors of India' 1874-85". *Women and Science in India: A Reader,* edited by Neelam Kumar, Oxford University Press, 2009, pp.21–54.

Chandramohan, P. *Developmental Modernity in Kerala; Narayana Guru, S.N.D.P. Yogam and Social Reform.* Tulika Books, 2016.

Coleman, Linda S. *Life Writing: Finding Voice/Building Communities.* Bowling State Green University Popular Press, 1997.

De Man, Paul. "Autobiography as De-Facement". *Comparative literature*, vol.94, no. 5, 1979, pp. 919–930. *J.S.T.O.R., https://www.jstor.org/stable/2906560*

Devika J. *Engendering Individuals: The Language of Re-forming in Early Twentieth Century Malayalam.* Orient Longman, 2007.

Forbes, Geraldine. "No 'Science' for Lady Doctors: The Education and Medical Practice of Vernacular Women Doctors in Nineteenth Century Bengal". *Women and Science in India: A Reader,* edited by Neelam Kumar, Oxford University Press, 2009, pp.3–20.

Gopalakrishnan, Dr. Naduvattom. *Athmakatha Sahityam Malayalathil.* State Institute of Languages, 1987.

Kadar, Marlene. *Essays on Life Writing: From Genre to Critical Practice.* Toronto University Press, 1992.

Kumar, Udaya. *Writing in the First Person: Literature, History, and Autobiography in Modern Kerala.* Permanent Black, 2016.

Nair, Rajasekharan. *Evolution of Modern Medicine in Kerala.* T.B.S. Publishers' Distributors,2001.

Ramusack, Barbara. *The New Cambridge History of India: The Indian Princes and Their State*. Cambridge University Press, 2003.

Sivaramakrishnan K and Arun Agarwal. *Regional Modernities: The Cultural Politics of Development in India.* Stanford University Press, 2003.

Trailblazer: The Legendary Life and Times of Mary Poonen Lukose, Surgeon General of Travancore. Manorama Books, 2019.