Trajectories of Care: Representations of Empowered Mothering in Contemporary Bollywood

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Abstract

Recent cinematic representations in Bollywood have witnessed an ongoing shift of depicting mothers who are disrupting the dominant discourses of mothering practices prevalent in India. This changing discourse of motherhood and its representation has also brought to light the challenges that these mothers face while practicing these changes, and the strategies they adopt to overcome these challenges. While catering to the needs of a child with disability, the mother assumes the role of the nurse, the therapist, and the educator and their caregiving responsibilities are manifold as compared to mothering a child with normative needs. Uninterrupted care work, societal surveillance and prevalent stigma severely interfere with the mental, physical, and existential well-being of such mothers. Through a thematic analysis of *The Sky is Pink* (dir. Bose, 2019), and *Jalsa* (dir. Triveni, 2022), this article maps the trajectories of care and examines the alternative mothering strategies adopted by mothers of children with disabilities to take care of their children and themselves. A critical examination of these on-screen mothers provides an insight into the individual care needs of the caregiver and the care receiver.

Keywords: Children with Disabilities, Good/Bad Mother, Parental Burnout, Chronic Sorrow, Empowered Mothering

Introduction

The birth of a disabled child leads to several changes in the life of a family and the reconfiguration of family relationships. This, in turn, affects the physical as well as psychological well-being of the parents of children with chronic disabilities (Raina et al. 626). Parents of children with rare diseases also experience stress on account of their lack of knowledge of and competence in giving care to a child with such diseases. Besides, such parents also experience social isolation, and the emotional crisis resulting from the apprehension that the child may not grow in a normal way (Dellve et.al 392). Further, in such situations the care required by children with different disabilities may vary, but it has been established that the caregiving required by children with disability far exceeds the typical requirement of mothering a child with normative needs (Sheesley 447). As mothers, women are expected to perform the gendered role of caregiving at the expense of negating their own individual growth, and for mothers of children with disability this responsibility of caregiving increases exponentially. Being the primary caregiver of a child with disability, a mother is burdened with the role of being the guardian, nurse, and the therapist (Aneja and Vaidya 154). Thus, in the family, it is the mother who experiences greater emotional and psychological turmoil than other family members (Smith, et al 1184). This caregiving responsibility combined with existing gender roles compels women to take care of the household and other family members while coping with other difficulties (Parks and Pilisuk 501; Gray 631; Ersoy and Bulus 764). The special care associated with mothering the disabled involves acquiring specialized knowledge of the diseases and the needs, forming extensive collaboration and association with health professionals, and performing skilled health care delivery (Traustadottir 211; Hill and Zimmerman 43). As a result, maternal health is affected on account of the physical disability of the child (Frey et al 240); the mother also develops physical problems such as muscle disorders, back and neck hernia, and there can also be trouble in her marital relation, often leading to divorce and separation (Teckindal, 2015; Vadivelan et al. 1). Often these mothers have to leave their jobs to take up full time care responsibilities, leading to the loss of one’s social and economic support system (Leiter, et al. 379). Moreover, parental burnout and chronic sorrow are common in such mothers because of the anxiety, shame, guilt, and alienation resulting from the negative social perception and exclusion.

Mapping the Culture of Care

In our culture of care, mothers play an important role, adhering to the gendered notion of care whereby they are expected to externally direct their act of care. In her edited volume, *Patricia Hill Collins: Reconceiving Motherhood* Kaila Adia Story has discussed how motherhood can be a praxis, an institution and a lived experience. Story (1) argues that the dominant portrayal of what is and what it means to be a "mother", remains locked within a reductive and imaginary prism of white supremacy, heteronormativity, and sexism. The "good mother" is framed within these normalizing discourses that have historically positioned groups of mothers outside these norms as the "other", "failed", "deviant", invisible and unworthy of mothering (Rich 1976). While scholars in motherhood studies have paid attention to the racist and heteronormative ideological structures of motherhood, not enough attention has been paid to the experiences of mothers of disabled children. While the care work done by mothers in general is invisibilized and is associated with their gender roles, the additional care responsibilities and their impact on maternal health are further ignored (Francis, 2010; Khanlou et. al. 613). These mothers face mother blaming on account of the health complications of their children (Khanlou et al. 613) and are socially stigmatized as bad mothers (Francis, 2010). Initially, psychologists and psychiatrists studied the impact of the children's disability on maternal health quality (Ryde-Brandt 367; Joesch and Smith 159; Hoare et al. 218; Olsson and Hwang 328). Qualitative studies focussed on the familial struggle while caring for a child with disability, and did not highlight the impact on maternal health and wellbeing (Snell and Rosen 425; Ainbinder et al. 99; Sloper 85; Case 271; Knox 17; Murray 683; Dowling and Dolan 21). A significant amount of work has been done on the various forms of disability and the challenges encountered by families having such children with disabilities, such as Autism (Seltzer, et al 267), Down Syndrome (Hauser-Cram et al. 979), and developmental delay (Gowen, et al. 259). Only a few of these qualitative works focus on the maternal narratives (McDonnell 58; Read 2000; Kittay

557; Home 88; Tarrant, 2002; Malacrida, 2003; Redmond and Richardson 205; Todd and Jones 229; Ryan 65). While these works give voice to mothers of special children and provide an insight into their struggle with the lack of infrastructure and the need for attention from the government, very few of them have managed to highlight the experiences of mothers and the alternative mothering practices they adopt.

Motherhood studies is an emerging area in India and is yet to develop an understanding of the alternative mothering strategies adopted by mothers with disabled children to navigate the care trajectory. In their study on embodied motherhood, Aneja and Vaidya have suggested how women in India are often blessed by elders with "*putrati bhavo*" (may you bear sons) and attain respect and recognition for giving birth to valorous sons. Krishnaraj (xii) also indicates that motherhood's actual contribution is to maintain patriarchy through the triple instruments of control over reproduction, sexuality, and sexual division of labor. In this patriarchal pact, certain ideologies and conducts of motherhood are privileged and are preferred over others: "the preference for sons over daughters, and ability over disability; the desexualisation of the maternal body, its appropriation as a commodity, its being posited as a "lack" and an ongoing reluctance to grant it the position of subjectivity and agency" (Aneja and Vaidya 18). Gupta, Mehrotra, and Mehrotra's (41) study conducted in two Indian cities has highlighted a greater amount of stress among parents with children with disabilities. However, their study focused on parents in general and did not focus specifically on mothers. The study conducted by Banga and Ghosh (958) is an important contribution to the study of childhood disability and caregiver adaptation in India, and it also focuses on mothers in particular. However, the study limits itself to studying quantitatively the affiliate stigma common among mothers caring for children with Specific Learning Disability. Aneja and Vaidya's *Embodying Motherhood: Perspectives from Contemporary India* examines the experiences of mothers caring for a disabled child, as well as mothers who themselves are disabled. The study records the experiences of these mothers in challenging the dominant discourses and breaking stereotypes. However, while the study focuses mostly on the challenges these mothers have to face while practicing motherhood, not much attention has been given to the techniques that they can adopt to care for themselves.

Importantly, none of these studies on motherhood has examined the correlation between changing motherhood discourses in India and their cinematic representations. In India, cinema plays a pervasive role in shaping public discourses (Dwyker 381), hence it is important to examine the impact of cinematic representations of mothering the disabled with a view to developing a deeper understanding of the evolving culture of care. Post 2000, Bollywood has witnessed a surge in films that represent the lives and experiences of people with disabilities (Mohapatra 124). These movies include *Iqbal* (2005), *Guzaarish* (2010), *My Name is Khan* (2010), *Barfi!* (2012), *Kaabil* (2017) and others. However, only a handful of movies have depicted the experiences of families caring for disabled children. It started with *Black* (2005) which portrays the journey of a blind and deaf child. But *Taare Zameen Par* (2007) remains a landmark movie in Bollywood for its contribution in generating mass awareness about disability care. *Paa* (2009), *Margarita with a Straw* (2014), *The Sky is Pink* (2019), *Jalsa* (2022), and *Salaam Venky* (2022) are other movies which depict children with disabilities who are greatly dependent on their mothers for care. This phenomenon has also included a shift from the on-screen portrayal of homogenized mothers to the depiction of mothers who are rescripting the contours of mothering and caregiving through the strategic negotiation of the stereotypes in unique ways. This shift of Bollywood towards creating more spaces for women-centric films can also be attributed to the changing socio-cultural scenario (Anwer and Arora 2021; Karandikar, et al 149; Paunksnis and Paunksnis 149; Arora 145; Manzar and Aravind 1). Informed by these important shifts in the mothering practices being depicted through

Bollywood, the present study examines representations of sociological as well as psychological trauma that mothers experience while offering special care to their children with disabilities. Further, the study analyzes how these cinematic representations have gone beyond the dichotomy of good/bad mothers and have captured the alternative self-care practices adopted by these mothers. Finally, the study posits how these mothering practices can be seen as an important starting point in developing a deeper understanding of the individual care needs of the caregiver and the care receiver.

Materials and Methods

A purposive sampling technique has been used to select two movies – *The Sky is Pink* (2019) and *Jalsa* (2022) – for the purpose of analyzing the various alternative mothering practices adopted by the respective mothers. Both these movies also chart the trajectories of care adopted by these mothers of children with rare disabilities. Apart from these two movies, *Paa, Margarita with a Straw,* and *Salaam Venky* were also considered but could not be included for the analysis. While *Paa* digresses into the estranged relationship of the parents, *Margarita with a Straw* is more about a disabled adolescent's journey of exploring her sexuality and *Salaam Venky* focuses on the right to euthanasia. Through an inductive approach of Reflexive Thematic Analysis proposed by Braun and Clarke (589), the two movies selected have been analyzed to show the changing trends involving the culture of care in Bollywood bringing to the forefront the struggles and challenges faced by women while mothering a child with disability[1].

Navigating Social Perception of Being the Bad Mother

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[1] The movies being discussed in the article deals with cerebral palsy in two cases and SCID in one. Cerebral palsy involves motor and learning disability and SCID is a genetic disorder which leads to life-threatening problems with the immune-system. While the challenges faced by the mothers may differ in each of these cases, as it should in each individual, but each of them go through life-altering experiences.

The idea of an ideological mother has been prevalent both in Western countries and India. While in the West, the “good” mother is expected to be white, heterosexual, economically dependent and child-focussed, in India, good mothers are expected to be son-bearing and embody unstinting affection, manifested in an undying spirit of self-sacrifice for the family (Aneja and Vaidya 140). However, mothering practices go beyond these hegemonic definitions of mothering and motherhood. Molly Ladd-Taylor and Lauri Umansky in their edited volume, *'Bad' Mothers: The Politics of Blame in Twentieth-Century America (1998)*, elaborated about how historically, any problem of the child is caused by the mother; and how the mother negatively impacts the child by being too protective, not protective enough, or both. Initially, psychoanalytical approaches blamed mothers for behavioral “disorders” like autism in children. The “autistic withdrawal” in children was associated with cold and disengaged mothering (Kanner 217). Although the myth of the refrigerator mother has been debunked through advances in medical science and growing awareness (Feinstein 2010), mothers across cultures continue to be shamed and are blamed for the poor health of their children. Mothers themselves continue to feel guilty for having done something unwittingly to cause the disability in the child (Kandel and Merrick 741) It is to absolve themselves of the guilt which often is very deep rooted, that they take up the challenge of becoming more than mothers. The extended family, health and education professionals, and other people in the vicinity refer to the importance of mother’s love, and its all-encompassing capability to overcome all challenges, emphasizing the role of the mother in caring for the child and taking up their caring work. (Aneja and Vaidya 140). The study highlights how the scientific as well as cultural discourses simultaneously blame and glorify mothers of disabled children; they blame the mother for the pathological condition of the child, at the same time glorify her so that she is coerced into assuming roles beyond her regular roles of being the mother.

The Sky is Pink is the journey of a couple who bring up a disabled girl child, along with a son without any disability. Both parents are seen as equally invested in the care work. However, they have moments of marital discord on account of the caregiving responsibilities. While Niren (the father) and his family never explicitly blame Aditi (the mother) for the child's disability, there is tension between the couple, regarding who is genetically responsible for the disease of their daughters. Niren is quick to doubt her fidelity when a medical report suggests that their son may not be their child. They go through a process of "ideological crisis" as they overcome the instant shock of accepting the reality of their daughter, and begin to live with her reality (Kandel and Merrick 744). Both of them adopt different means of caring for the child, which also becomes a reason for their occasional discord. While Niren trusts the doctors blindly, Aditi decides to do her independent research and develop her own understanding of the disease and its possible treatment and side effects. They had lost a daughter previously, and the guilt of losing her is equally present among both, and each blames the other for the death. This form of blaming and feeling of guilt creates ambivalence among parents. It is on account of risk like this that they had planned on not having a child after Ishaan. So, when Aisha was diagnosed with SCID, both of them put in equal effort, trying to save her in their individual ways. They are next confronted with the "reality crisis" in terms of finding a bone marrow donor, finding financial support, and having the necessary knowledge; they put in equal effort to overcome the crisis (Kandel and Merrick 744). Niren donates his bone marrow and arranges for crowdfunding, as Aditi stays away from family in far-off London to cater to the health needs of the child. Niren and his family take care of their son, Ishaan, in India.

Separated from the family, Aditi becomes fiercely protective of Aisha and fastidiously monitors her health. She also records every moment with Aisha, not only to send to Niren, but also because she fears that she may lose her daughter. Single mother Maya in *Jalsa* acquires custody of Ayush after proving in court that her husband is incapable of raising a child with special needs. As a mother she is overprotective of the child; she co-mothers her child with her mother and with the help of an aide, Ruksana. Maya's overprotectiveness is on account of caring for Ayush without the support of her husband and overcoming the ideological and reality crisis by herself (Kandel and Merrick 744). Being a working mother, she installs a camera to interact with Ayush and monitor him from her office. We can also see her being fastidious about Ayush's health and rebuking her mother for her lapses. The camera monitoring Ayush reveals her deep-seated fear of becoming a bad mother by not practicing intensive mothering. She also tries to make up for her absence by employing a paid caregiver. Maya strategically navigates social perception by having a home in a high-rise building, which is a safe cocoon for Ayush far away from the prying eyes of the neighbors and equipped with modern technology to prevent any trespassing. This form of highly restrictive lifestyle which we can see in both films becomes normalised in the course of the film; the caregivers get used to the specialised needs of their children and reconstruct their lives according to them. This can be contrasted with the ableist norms of society and their child-rearing practices (Campbell 2009).

Maya has absolute maternal agency, while Aditi has to fight for it sometimes. However, we can see both of them are overprotective and caring for their child which directly or indirectly stems from their fear of negative evaluation by society in general, and their family in particular. Thus, it can be noted that such fastidious caregiving is a result of cultural construction which expects the mother to be overprotective of the child and cater to the needs of the child. It also constructs in the mother a need to always be present for the child, thereby hindering the process of the child developing its own independent identity. Subsequently, the child is considered incapable of leading a 'normal' life of its own.

Experiencing Parental Burnout and Chronic Sorrow

Parents are at risk of developing parental burnout when they “lack the resources needed to handle stressors related to parenting” (Mikolajczak, Gross, and Roskam 1319). It is a state of intense exhaustion, where a parent finds him/herself becoming emotionally detached from their children, and doubts their competency of being a good parent (Roskam, Raes, and Mikolajczak 163). Parental burnout is caused as a result of prolonged response to chronic and overwhelming parental stress (Mikolajczak and Roskam 886). Parental burnout can lead to escape ideation, child neglect, and parental violence, and can have implications worse than job burnout (Mikolajczak, Gross, and Roskam 1319). However, one of the most common causes of developing parental burnout is having one or more children with special needs which interferes with the healthy functioning of the family (Lindahl Noberg, 130). Parents are required to provide continuous and systematic childcare support to their children. They may experience loss of energy, physical fatigue, mental breakdown, anxiety about the future of the child, and breakdown of relationships with their partner and other family members and friends, leading to isolation and loneliness. While parental burnout is a common phenomenon and affects both parents, mothers are more vulnerable to it. Mothers of children with developmental disorders experience endless sorrow, regret, and a sense of guilt caused by their child’s disability. This situation may very often lead to a loss of their personal autonomy (Sadziak, Wilinski, and Wieczorek 77). The endless sorrow caused by such mothers is called chronic sorrow (Olshansky 190). Chronic sorrow is a psychological response in parents with disabled children. Chronic sorrow is different from grief and depression and it could be permanent, periodic, or progressive (Burke et al. 231; Eakes, Burke, and Hainsworth 179). Chronic sorrow stems from the realization that the child has a lifelong disability or illness, or their inability to meet developmental milestones when there are relapses in the disease or recurrent hospitalization, or they become more dependent on medical support, and they long for a desired child (Bowes et al. 992; Gordon 115; Hewetson and Singh 322; Patrick-Ott and Ladd 73). Like parental burnout, it is mothers who are more prone to developing chronic sorrow (Mallow and Bechtel 31; Hobdell 82). Their chronic sorrow may take the form of emptiness, guilt, and self-blaming (Fraley 114; Hummel and Eastman, 1991), fear (Fraley 114; Hobdell and Deatrick 57), sadness (Hobdell 82), and depression (Hobdell and Deatrick 57). However, while parental burnout is a result of the care work undertaken for the child and often creates emotional distancing from the child, chronic sorrow is a psychological state on account of the child's incapacity to live a healthy life and a concern for the child's future.

Aisha's disability and ill health take a toll on her parents' relationship. Aditi develops parental burnout when she has to single-handedly care for Aisha in London, and she has marital discord with Niren. Even when he shifts to London, their life does not become any easier. Both of them have to work in shifts so as to support the family while caring for their children. This too has a negative impact on their relationship – they rarely get to spend time with each other. Parents often experience marital strife if they have children with disability or chronic illnesses (Mauldon 349). This can also be noted in Maya who is a divorcee and shares her parenting responsibility with her mother and cannot trust her partner. Aditi is also burnt out when Aisha develops pulmonary fibrosis later in life. Aditi monitors Aisha's condition sleeplessly for nights and has to be hospitalized following a mental breakdown. Maya on the other hand develops burnout very early on; the mental stress of bringing up a disabled child without a spouse takes a toll, and she has an accident. While driving back after a long day at work, she runs over a girl, on account of a lapse in her attention. Maya further spirals down as she is bogged down by her guilt and anxiety about Ayush's future. She feels devastated because she feels solely responsible for Ayush's secure future. The absence of her husband and the burden of taking care of Ayush single-handedly weighs heavily on her (Mauldon 349). Although she has Ruksana and her mother by her side, the lack of any other institutional support is evident. Maya prefers to keep Ayush at home and there is no creche at her workplace, and she also does not receive any other institutional support. Both Maya and Aditi prefer to keep their children in isolated spaces because of the nature of the disability/illness of their respective children. Most importantly, creches and special facilities are generally built keeping in minds children, and are often not able to cater to the needs of young adults like Ayush and Aisha. Sometimes, parents are not fully able to trust an outsider apart from the doctors and other times the services provided are extremely costly and cannot be accessed by all. Although, both Maya and Aditi work hard to provide extremely privileged lives for their children, in most cases such lifestyles are unaffordable and inaccessible (Zuurmond et al. 1126).

Maya’s frequent outbursts before her mother are a result of the burnout that collects within her which she is not able to voice out. In a poignant scene, she angrily blames Ayush for making her life difficult. It might apparently seem inappropriate but she is burnt out and anxious about his future in her absence. Such blaming of the child is common among parents who fail to process the disappointment of giving birth to a disabled child, who would not be able to fulfill their hopes and ambitions. While Maya is overprotective of Ayush, she is also frustrated with him and disappointed with herself for having failed. Ayush’s slow development also affects Maya’s career and ambitions (Kandel and Merrick 743-744). In the case of the birth of a child with a disability, parents are not able to mourn the symbolic loss of a normative child (that was not born), while simultaneously trying to care for a child that exists and thereby demands additional care. Since there is no actual separation between the parents and the child, they do not get an opportunity to conclude the bereavement process, and they seem to be in a state of ambivalence (Hobdell 82).

This ambivalence and inability to accept reality results in chronic sorrow. On realizing Aisha's death is near, Aditi decides to offer her all such experiences that she may miss out on after her death – of letting her date her crush, gifting her a pet, taking her for adventurous sports, and publishing her book. Gradually, she begins mourning Aisha even before her death – when she realizes that it is their last Christmas with her. She oscillates between denial and acceptance (Mallow and Bechtel 31). After Aisha's death, she completely isolates herself, even withdrawing from her husband, which leads to a brief separation. It is difficult for her to cope with the loss, even when she has been preparing for it for years. For Aditi, the chronic grief is not only about losing Aisha, but also about losing her identity as Aisha's caregiver. The chronic sorrow in *Jalsa* is not only present in the form of Maya's ambivalence. We also see it in the anguish and grief of Ruksana, whose child Alia becomes disabled, as a result of the accident. For her to accept that her daughter would not be able to lead a normal life anymore brings her sorrow and great distress (Burke 231). She goes through her social media posts and realizes how much of her she has not known; she blames herself for not being with her the night of the accident. She also tries to punish the boy with whom she thinks Alia spent the night, and finally when she realizes it is Maya who drove over Aisha, her chronic sorrow drives her to seek revenge by almost killing Ayush. In the last scene, both Maya and Ruksana are seen negotiating their grief as they sit silently by the shore of a receding sea, while their boys lie together on an abandoned boat singing aloud the song of life.

Practicing Empowered Mothering through Self-Care

Studies suggest that parents seem to follow the Kubler-Ross (1969) grief elaboration theory of going through denial, anger, bargaining, depression, and acceptance while coping with their child's disability (Calandra et al. 269). The crisis builds up over a period of time and gradually they gather the courage to overcome the grief. Acceptance is an important part of this coping process. Some of the most common coping techniques adopted by such mothers include-seeking social support, careful planning and problem-solving, escape avoidance, and positive reappraisal (Paster, Brandwein, and Walsh 1337). However, in India seeking social support is difficult and comes with affiliate and family stigma; these are common among caregivers, especially mothers (Banga and Ghosh 958). Here, practicing empowered mothering can be an effective tool of self-care. Empowered mothering comes from the idea that both mothers and children benefit when the mother lives her life and practices mothering from a position of agency, authority, authenticity, and autonomy (O’Reilly 30). Empowered mothers do not regard childcare as the sole responsibility of the biological mother, nor do they regard round-the-clock mothering as necessary for children. Empowered mothering comes with maternal agency, referring to having the power to control one’s life. It does not burden the mother with the pressure of practicing intensive mothering around the clock. Rather it is expected that their partner, friends, and family would also participate in the process of caring. The key purpose of empowered mothering is also to confer mothers the “agency, authority, authenticity, autonomy, and advocacy-activism that are denied to them in patriarchal motherhood” (O’Reilly 30).

Practicing empowered mothering with a disabled child is difficult because the child requires special care, depending on the level of disability. Very often because of the stereotype and shame associated with disability, parents are not able to seek assistance from friends and extended family. Also, people need to have basic training, literacy, understanding and skills to offer special care, many parents do not have the financial capability to afford such trained caregivers. However, they gradually reach a state of “constructive adaptation to the fact of having a child with disability” (Sadziak, Wilinski, Wieczorek 77). The scope for mothers with disabled children to practice empowered mothering is very small, and only a privileged few could delegate their tasks to caregivers or other family members. Most of the mothers give up on their career, or cut down their work to take care of their child, because of the lack of "adequate childcare services and educational provisions" (Kingston 116) However, some mothers are able to develop "informal careers", where their caregiving skills become a means of their employment where they take up therapy and special education as a profession, turning adversity into opportunity (Aneja and Vaidya 157), and others believe that their child's disability has made them better persons – more patient, accepting, kind, and helpful toward other people.

While such mothers who have taken up caring as a profession, or any other informal career, have not been depicted on screen, the disabled children in both the movies – Aisha and Ayush – are seen to be reaching out to certain audiences to share their journey with disability and we see their mothers encouraging and inspiring them. Aisha's story is inspired by a real-life motivational speaker and the author of *My Little Epiphanies*; the movie is meant to be a sequel to the book. For Aisha, her mother, an uncompromising feminist, makes life-changing decisions. She believes, "Life gives a googly or a yorker, she would deliver a sixer with her attitude" (*The Sky is Pink* 42:25). We do see Aditi having the last words when it comes to having the child or not, not going with Aisha's last operation. Aditi arrives at her decisions based on her research and informed understanding. She had understood with her first child that the biggest hurdle while mothering a child with a disability was not having enough knowledge about the child's condition, so she left no stone unturned when Aisha was diagnosed with SCID. For Aditi, this knowledge was a form of empowerment, which helped her take special care of Aisha over the years, and create with her the most beautiful memories. Although Aisha practices intensive mothering by being always present for her Aisha and fulfilling all her needs and desires, she never hid crucial information regarding Aisha's health. This honesty and courage made Aditi a strong and powerful mother, who possessed agency, authority, and authenticity as a mother. Most importantly, as a mother she understands when it is time for her to let go of Aisha. The last operation would give a few more days to Aisha, but it would take away her dignified existence. This acceptance of her reality was her real empowerment as a mother. It is also noteworthy that the roles of Aditi and Maya being played by heroines like Priyanka Chopra and Vidya Balan, is a major way of portraying the empowerment that they bring to their character. With their skilled acting not only do they exhibit the strength in their characters but they also embrace the vulnerability that comes with it. Additionally, Balan has been playing the roles of empowered mothers in several other films and has been consistently working towards choosing roles that have humanised women and their experiences (Pramanik and Mishra 289).

On the contrary, Maya does not perform intensive mothering. She fails on several levels, but at the same time, she also seems to be more humane and falters when she is bogged down by stress. Maya commands authority at the office where she holds power over others, like a matriarch. It is at her work that we find her enjoying herself. She also has a commanding presence at her home, where her mother, Ayush, and Ruksana, all are afraid of her temper; however here she is mostly frustrated and controlling. She loses control only after the accident; she knows ethically what she does is wrong, but she also knows she has to flee from the site, as it would jeopardize Ayush’s life if she is arrested. When she comes to know it is Ruksana’s daughter whom she hit with her car, she supports her financially and does everything in her power to help her access top class medical facilities. Finally, when she musters enough courage, she makes a confession. However, for her, the real act of courage is to face Ruksana and surrender before her. For Ruksana, it is an act of empowerment to accept her daughter’s acquired disability and not seek revenge. It takes them every ounce of courage to understand what the other is going through, and Ruksana being less privileged than Maya, has a more difficult battle before her, to care for a daughter with disability, with fewer financial resources and far less knowledge of medical and technical discourse. However, this incident makes both of them better human beings – more accepting, kind, and patient towards themselves and others.

Conclusion

Bollywood is yet to tell us Ruksana’s side of the story – the journey of a mother caring for a disabled child with very little formal education, and not financially privileged to afford the care of a child with disability. Nor has Bollywood shown us a disabled mother on screen, who herself requires care and therefore, is often considered incompetent to care for her child. On account of this, the article has a limited scope of research and has to restrict itself to the available sample. However, as seen in this article, Bollywood has been successful in representing the trials and tribulations of mothers offering special care and has dismantled the homogenized representation of mothers on screen. This has opened up avenues for acceptance of such mothers in real life where their struggles will not only find recognition but might also find a forum to advocate and address their demands and interests. These mothers not only require the support and understanding of their family and friends, but they also require adequate institutional support from the government, in the form of creche, special schools, and more affordable and accessible special care services. Representation of more such mothers from the margins on screen, will not only reflect the positive changes in the society but also accelerate such changes in the society.

Works Cited

Ainbinder, Judith G., et al. "A Qualitative Study of Parent to Parent Support for Parents of Children with Special Needs." *Journal of Pediatric Psychology*, vol. 23, no. 2, 1998, pp. 99-109. https://doi.org/10.1093/jpepsy/23.2.99

Aneja, Anu, and Shubhangi Vaidya. *Embodying motherhood: Perspectives from contemporary India*. SAGE Publications India, 2016.

Arora, Anupama. "Nobody puts Rani in a corner: Making of the new Indian woman in Queen (2014)." South Asian Popular Culture, vol. 17, no. 2, 2019, pp. 145-157. https://doi.org/10.1080/14746689.2019.1613783

Anwer, Megha, and Anupama Arora, editors. *Bollywood's new woman: Liberalization, liberation, and contested bodies*. Rutgers University Press, 2021.

Banga, Gazal, and Subharati Ghosh. "The Impact of Affiliate Stigma on the Psychological Well-being of Mothers of Children with Specific Learning Disabilities in India: The Mediating Role of Subjective Burden." *Journal of Applied Research in Intellectual Disabilities*, vol, 30, no. 5, 2017, pp. 958-969.

Barfi!. Directed by Anurag Basu, performances by Priyanka Chopra, Ranbir Kapoor. Ishana Movies and UTV Motion Pictures, 2012.

Black. Directed by Sanjay Leela Bhansali, performances by Rani Mukherjee and Amitabh Bachchan. Applause Entertainment and SLB Films, 2005.

Bowes, Susan, et al. "Chronic Sorrow in Parents of Children with Type 1 Diabetes." *Journal of Advanced Nursing*, vol. 65, no. 5, 2009, pp. 992-1000. https://doi.org/10.1111/j.1365-2648.2009.04963.x

Braun, Virginia. and Victoria Clarke. "Reflecting on Reflexive Thematic Analysis." *Qualitative Research in Sport, Exercise and Health*, vol. 11, no. 4, 2019, pp. 589-597. https://doi.org/10.1080/2159676X.2019.1628806.

Burke, Mary L., et al. "Current Knowledge and Research on Chronic Sorrow: A Foundation for Inquiry." *Death Studies*, vol. 16, no. 3, 1992, pp. 231-245. https://doi.org/10.1080/07481189208252572.

Calandra, C., et al,. "Grief Elaboration in Families with Handicapped Member." *Annali Dell'istituto Superiore di Sanitam*, vol. 28, no. 2, 1992, pp. 269-271.

Campbell, Fiona. Contours of ableism: The production of disability and abledness. Springer, 2009.

Case, Stephen. "Refocusing on the Parent: What are the Social Issues of Concern for Parents of Disabled Children?." *Disability and Society*, vol 15, no. 2, 2000, pp. 271-292. https://doi.org/10.1080/09687590025676.

Dellve, Lotta, et al. "Stress and Well-being Among Parents of Children with Rare Diseases: A Prospective Intervention Study." *Journal of Advanced Nursing*, vol. 53, no. 4, 2006, pp. 392-402. https://doi.org/10.1111/j.1365-2648.2006.03736.x.

Dowling, Monica, and Linda Dolan. "Families with Children with Disabilities-Inequalities and the Social Model." *Disability and Society*, vol.16, no. 1, 2001, pp. 21-35. https://doi.org/10.1080/713662027

Dwyer, Rachel. "Bollywood's India: Hindi Cinema as a Guide to Modern India." *Asian Affairs*, vol. 41, no. 3, 2010, pp. 381-398. https://doi.org/10.1080/03068374.2010.508231.

Eakes, Georgene G., Mary L. Burke, and Margaret A. Hainsworth. "Middle-Range Theory of Chronic Sorrow." *Image: The Journal of Nursing Scholarship*, vol. 30, no. 2, 1998, pp. 179-184. https://doi.org/10.1111/j.1547-5069.1998.tb01276.x.

Ersoy, Ali Fuat, and Sıdıka Bulus. "Burnout in Mothers with Disabled Children: A Qualitative Study." *Turkish Journal of Social Research*, vol. 23, no. 3, 2019, pp. 764-781.

Feinstein, Adam. *A History of Autism: Conversations with the Pioneers*. John Wiley & Sons, 2011.

Fraley, Ardella M. "Chronic Sorrow in Parents of Premature Children." *Children's Health Care*, vol. 15, no. 2, 1986, pp. 114-118. https://doi.org/10.1207/s15326888chc1502_10.

Francis, Ara. “Mothering Children with isabilities*”. Encyclopedia of Motherhood.* Edited by Andrea O’Reilly. Sage Publications, 2010.

Frey, Karin S., Mark T. Greenberg, and Rebecca R. Fewell. "Stress and Coping Among Parents of Handicapped Children: A Multidimensional Approach." *American Journal on Mental Retardation*, vol. 94, no. 3, 1989, pp. 240-249

Gérain, Pierre. and Emmanuelle Zech. "Does Informal Caregiving Lead to Parental Burnout? Comparing Parents Having (or not) Children with Mental and Physical Issues." *Frontiers in Psychology* vol. 9, 2018, p. 884. https://doi.org/10.3389/fpsyg.2018.00884.

Gordon, Jessica. "An Evidence-Based Approach for Supporting Parents Experiencing Chronic Sorrow." *Pediatric Nursing*, vol. 35, no. 2, 2009, pp. 115-9. https://www.proquest.com/openview/8b269dd528d6b0f42cdd7a35f9d5fb21/1?pq-origsite=gscholarandcbl=47659.

Gowen, Jean W., et al. "Feelings of Depression and Parenting Competence of Mothers of Handicapped and Nonhandicapped Infants: A Longitudinal Study." *American Journal on Mental Retardation*, vol. 94, no. 3, 1989, pp. 259-271.

Gray, D. E. (2003). Gender and Coping: The Parents of Children with High Functioning Autism. *Social Science and Medicine*, vol. 56, no.3, pp. 631–642. https:// doi. org/ 10. 1016/ S0277- 9536(02) 00059-X.

Guzaarish. Directed by Sanjay Leela Bhansali, performances by Hrithik Roshan and Aishwarya Rai Bachchan. UTV Motion Pictures and SLB Films, 2010.

Gupta, Vidya Bhushan, Priyanka Mehrotra, and Naveen Mehrotra. "Parental Stress in Raising a Child with Disabilities in India." *Disability, CBR & Inclusive Development,* vol. 23, no. 2, 2012, pp. 41-52.

Hallstein, Lynn O'Brien, Andrea O'Reilly, and Melinda Vandenbeld Giles, editors. *The Routledge Companion to Motherhood*. Routledge, 2019.

Hauser-Cram, et al. "Family Influences on Adaptive Development in Young Children with Down Syndrome." *Child Development,* vol. 70, no. 4, 1999, pp. 979-989. https://doi.org/10.1111/1467-8624.00071.

Hewetson, Ronelle, and Shajila Singh. "The Lived Experience of Mothers of Children with Chronic Feeding and/or Swallowing Difficulties." *Dysphagia,* vol. 24, 2009, pp. 322-332. https://doi.org/10.1007/s00455-009-9210-7.

Hill, Shirley A., and Mary K. Zimmerman. "Valiant Girls and Vulnerable Boys: The Impact of Gender and Race on Mothers' Caregiving for Chronically Ill Children." *Journal of Marriage and the Family,* vol. 57, no. 1, 1995, pp. 43-53. https://doi.org/10.2307/353815.

Hobdell, Elizabeth F., and Janet A. Deatrick. "Chronic Sorrow: A Content Analysis of Parental Differences." *Journal of Genetic Counseling,* vol. 5, 1996, pp. 57-68. https://doi.org/10.1007/BF01408531.

Hobdell, Elizabeth. "Chronic Sorrow and Depression in Parents of Children with Neural Tube Defects." *Journal of Neuroscience Nursing,* vol. 36, no. 2, 2004, pp. 82-88.

Hoare, P., et al. "A Community Survey of Children with Severe Intellectual Disability and Their Families: Psychological Adjustment, Carer Distress and the Effect of Respite Care." *Journal of Intellectual Disability Research,* vol. 42, no. 3, 1998, pp. 218-227. https://doi.org/10.1046/j.1365-2788.1998.00134.x.

Home, Alice. "Challenging Hidden Oppression: Mothers Caring for Children with Disabilities." *Critical Social Work,* vol. 3, no. 1, 2002, pp. 88-103.

Hummel, P. A., and D. L. Eastman. "Do parents of preterm infants suffer chronic sorrow?" *Neonatal network: NN,* vol. 10, no. 4, 1991, pp. 59-65.

Iqbal. Directed by Nagesh Kukunoor, performances by Shreyas Talpade and Naseeruddin Shah. Subhash Ghai, 2005.

Joesch, Jutta M., and Ken R. Smith. "Children's Health and their Mothers' Risk of Divorce or Separation." *Social Biology,* vol. 44, no. 3-4, 1997, pp. 159-169. https://doi.org/10.1080/19485565.1997.9988944

Kaabil. Directed by Sanjay Gupta, performances by Hrithik Roshan. Filmkraft Productions Pvt. Ltd, 2017.

Kandel, Isack, and Joav Merrick. "The Birth of a Child with Disability: Coping by Parents and Siblings." *The Scientific World Journal*, vol. 3, 2003, pp. 741-750. https://doi.org/10.1100/tsw.2003.63.

Kanner, Leo. "Autistic Disturbances of Affective Contact." *Nervous Child*, vol. 2, no. 3, 1943, pp. 217-250.

Karandikar, et al. "She Did it Her Way: An Analysis of Female Rebellion in Contemporary Bollywood Movies." *South Asian Popular Culture*, vol. 19, no. 2, 2021, pp. 149-163. https://doi.org/10.1080/14746689.2021.1940548.

Khanlou, Nazilla, et al. "Mothering Children with Developmental Disabilities: A Critical Perspective on Health Promotion." *Health Care for Women International*, vol. 38, no. 6, 2017, pp. 613-634. https:// doi. org/ 10. 1080/ 07399 332. 2017. 12968 41

Kittay, Eva Feder. "When Caring is Just and Justice is Caring: Justice and Mental Retardation." *Public Culture*, vol. 13, no. 3, 2001, pp. 557-579.

Knox, Marie. "Family Control: The Views of Families who Have a Child with an Intellectual Disability." *Journal of Applied Research in Intellectual Disabilities*, vol. 13, no. 1, 2000, pp. 17-28.. https://doi.org/10.1046/j.1468-3148.2000.00001.x

Kubler-Ross, Elizabeth. *On Death and Dying*. Macmillan, 1969.

Leiter, Valerie, et al. "The Consequences of Caring: Effects of Mothering a Child with Special Needs." *Journal of Family Issues*, vol. 25, no. 3, 2004, pp. 379-403. https://doi.org/10.1177/0192513X03257415

Lindahl Norberg, Annika. "Burnout in Mothers and Fathers of Children Surviving Brain Tumour." *Journal of Clinical Psychology in Medical Settings*, vol. 14, 2007, pp. 130-137. https://doi.org/10.1007/s10880-007-9063-x.

Malacrida, Claudia. *Cold Comfort: Mothers, Professionals, and Attention Deficit Disorder*. University of Toronto Press, 2003.

Mallow, Gail E., and Gregory A. Bechtel. "Chronic Sorrow: The Experience of Parents with Children who are Developmentally Disabled." *Journal of Psychosocial Nursing and Mental Health Services*, vol. 37, no. 7, 1999, pp. 31-35. https://doi.org/10.3928/0279-3695-19990701-21.

Manzar, Benazir, and Aju Aravind. "(Re) Thinking Women in Cinema: The Changing Narrative Structure in Bollywood." *South Asian Popular Culture*, vol. 17, no. 1, 2019, pp. 1-13. https://doi.org/10.1080/14746689.2018.1585601

Mauldon, Jane. "Children's risks of experiencing divorce and remarriage: Do disabled children destabilize marriages?." Population studies 46.2 (1992): 349-362. https://doi.org/10.1080/0032472031000146276

McDonnell, Jane Taylor. "Mothering An Autistic Child: Reclaiming the Voice of the Mother." *Narrating mothers: Theorizing Maternal Subjectivities*, pp. 58-77, University of Tennessee Press, 1991.

Mikolajczak, Moïra, and Isabelle Roskam. "A Theoretical and Clinical Framework for Parental Burnout: The Balance Between Risks and Resources (BR2)." *Frontiers in Psychology*, vol. 9, 2018, p. 886.

Mikolajczak, Moïra, James J. Gross, and Isabelle Roskam. "Parental burnout: What is it, and why does it matter?." *Clinical Psychological Science*, vol. 7, no. 6, 2019, pp. 1319-1329. https://doi.org/10.1177/2167702619858430.

Mohapatra, Atanu. "Portrayal of Disability in Hindi Cinema: A Study of Emerging Trends of Differently-abled." *Asian Journal of Multidimensional Research (AJMR)*, vol, 1, no. 7, 2012, pp. 124-132. https://doi.org/10.3389/fpsyg.2018.00886.

Murray, Pippa. "Disabled children, parents and professionals: partnership on whose terms?." *Disability and Society* 15, no. 4 (2000): 683-698. https://doi.org/10.1080/09687590050058251

My Name is Khan. Directed by Karan Johar, performances by Shahrukh Khan and Kajol. Fox Star Studios, Fox Searchlight Pictures, Dharma Productions, and Red Chillies Entertainment, 2010.

Olshansky, Simon. "Chronic Sorrow: A Response to Having a Mentally Defective Child." *Social Casework*, vol. 43, no. 4, 1962, pp. 190-193. https://doi.org/10.1177/104438946204300404.

Olsson, Malin B., and Philip C. Hwang. "Influence of Macrostructure of Society on the Life Situation of Families with a Child with Intellectual Disability: Sweden as an Example." *Journal of Intellectual Disability Research*, vol. 47, no. 4-5, 2003, pp. 328-341. https://doi.org/10.1046/j.1365-2788.2003.00494.x

O'Reilly, Andrea, editor. *Feminist Mothering*. State University of New York Press, 2008.

Paa. Directed by Balki, R, performances by Amitabh Bachchan and Vidya Balan. MAD Entertainment Ltd., Amitabh Bachchan Corporation, and Reliance Big Pictures, 2009.

Parks, Susan Hillier, and Marc Pilisuk. "Caregiver burden: Gender and the psychological costs of caregiving." *American journal of Orthopsychiatry* 61, no. 4 (1991): 501-509. https://doi.org/10.1037/h0079290.

Paster, Angela, David Brandwein, and Joanne Walsh. "A Comparison of Coping Strategies Used by Parents of Children with Disabilities and Parents of Children Without Disabilities." *Research in Developmental Disabilities*, vol. 30, no. 6, 2009, pp. 1337-1342. https://doi.org/10.1016/j.ridd.2009.05.010

Paunksnis, Runa Chakraborty, and Šarūnas Paunksnis. "Masculine Anxiety and 'New Indian Woman' In the Films of Anurag Kashyap." *South Asian Popular Culture*, vol. 18, no. 2, 2020, pp. 149-162. https://doi.org/10.1080/14746689.2020.1773656

Patrick-Ott, Amy, and Linda D. Ladd. "The Blending of Boss's Concept of Ambiguous Loss and Olshansky's Concept of Chronic Sorrow: A Case Study of a Family with a Child who has Significant Disabilities." *Journal of Creativity in Mental Health*, vol. 5, no. 1, 2010, pp. 73-86. https://doi.org/10.1080/15401381003627327.

Pramanik, Pratyusha, and Ajit K. Mishra. "Matricentric Leadership: Vidya Balan and the Emergence of Alternative Leadership Style in Popular Hindi Cinema." Media Watch 14.3 (2023): 278-295. https://doi.org/10.1177/09760911231180975.

Raina, Parminder, et al. "The Health and Well-being of Caregivers of Children with Cerebral Palsy." *Pediatrics*, vol. 115, no. 6, 2005, pp. e626-e636. https://doi.org/10.1542/peds.2004-1689.

Read, Janet. *Disability, the Family, and Society: Listening to Mothers*. Open University Press, 2000.

Redmond, Bairbre, and Victoria Richardson. "Just Getting on With it: Exploring the Service Needs of Mothers who Care for Young Children with Severe/Profound and Life-Threatening Intellectual Disability." *Journal of Applied Research in Intellectual Disabilities*, vol. 16, no. 3, 2003, pp. 205-218. https://doi.org/10.1046/j.1468-3148.2003.00165.x

Rich, Adrienne. *Of Woman Born: Motherhood as Experience and Institution.* W. W. Norton and Company, 1976.

Roskam, Isabelle, Marie-Emilie Raes, and Moïra Mikolajczak. "Exhausted Parents: Development and Preliminary Validation of the Parental Burnout Inventory." *Frontiers in Psychology*, vol. 8, 2017, p. 163. https://doi.org/10.3389/fpsyg.2017.00163.

Ryan, Sara. "'Busy Behaviour' in the 'Land of the Golden M': Going Out with Learning Disabled Children in Public Places." *Journal of Applied Research in Intellectual Disabilities*, vol. 18, no. 1, 2005, pp. 65-74. https://doi.org/10.1111/j.1468-3148.2004.00225.x

Ryde-Brandt, Brita. "Defence Strategies and Anxiety in Mothers of Disabled Children." *European Journal of Personality*, vol. 5, no. 5, 1991, pp. 367-377. https://doi.org/10.1002/per.2410050504

Sadziak, Aleksandra, Wojciech Wilinski, and Marta Wieczorek. "Parental Burnout as a Health Determinant in Mothers Raising Disabled Children." *Baltic Journal of Health and Physical Activity*, vol. 11, no. 3, 2019, p. 77-89

Salaam Venky. Directed by Revathi, performances by Shrikant Murthy and Kajol. Blive Productions and RTake Studios, 2022.

Seltzer, Marsha Mailick, et al. "Families of Adolescents and Adults with Autism: Uncharted Territory." In *International Review of Research in Mental Retardation*, vol. 23, pp. 267-294. Academic Press, 2000.

Sheesley, Deborah F. “Burnout and the Academic Teaching Librarian: An Examination of the Problem and Suggested Solutions.” *The Journal of Academic Librarianship*, vol. 27, no. 6, 2001, pp. 447-451. https://doi.org/10.1016/S0099-1333(01)00264-6.

Sloper, Patricia. "Models of Service Support for Parents of Disabled Children. What Do We Know? What Do We Need to Know?." *Child: Care, Health and Development*, vol. 25, no. 2, 1999, pp. 85-99. https://doi.org/10.1046/j.1365-2214.1999.25220120.x

Snell, Susan A., and Karen H. Rosen. "Parents of Special Needs Children Mastering the Job of Parenting." *Contemporary Family Therapy*, vol. 19, 1997, pp. 425-442. https://doi.org/10.1023/A:1026124428774

Smith, Timothy B., et al. "Depressive Symptomatology and Interaction Behaviors of Mothers Having a Child with Disabilities." *Psychological Reports*, vol. 73, no. 3, 1993, pp. 1184-1186. https://doi.org/10.2466/pr0.1993.73.3f.1184.

Story, Kaila Adia. *Patrica Hill Collins; Reconceiving Motherhood*. Demeter Press, 2014.

Taare Zameen Par. Directed by Aamir Khan, performances by Darsheel Safary and Aamir Khan. Aamir Khan Productions, 2007

Tarrant, Susan Kaye. *Maternal Metamorphosis: Experiences of Fourteen Women Parenting Children with High Functioning Autism in North Central Victoria*. La Trobe University Press, 2002.

Tekindal, M. *The Feminist Groupwork Experiences of Women with Disabled Children: A Mixed Method Research*.(Unpublished doctoral dissertation). Hacettepe University, *Social Sciences Institute*, 2015.

Todd, Stuart, and Stephanie Jones. "‘Mum's the Word!': Maternal Accounts of Dealings with the Professional World." *Journal of Applied Research in Intellectual Disabilities*, vol. 16, no. 3, 2003, pp. 229-244. https://doi.org/10.1046/j.1468-3148.2003.00163.x

Traustadottir, Rannveig. "Mothers who Care: Gender, Disability, and Family Life." *Journal of Family Issues*, vol. 12, no. 2, 1991, pp. 211-228. https://doi.org/10.1177/019251391012002005

Jalsa. Directed by Suresh Triveni, performances by Vidya Balan, Shefali Shah, Surya Kashibhatla. T-Series and Abundantia Entertainment, 2022.

UNESCO. *N for Nose: State of the Education Report for India 2019: Children with Disabilities*. UNESCO, 2019. https://www.unesco.org/en/articles/n-nose-state-education-report-india-2019-children-disabilities.

Vadivelan, K., et al. "Burden of Caregivers of Children with Cerebral Palsy: An Intersectional Analysis of Gender, Poverty, Stigma, and Public Policy." *BMC Public Health*, vol. 20, 2020, pp. 1-8. https:// doi. org/ 10. 1186/ s12889- 020- 08808-0

Zuurmond, Maria, et al. "Barriers and facilitators to accessing health services: A qualitative study amongst people with disabilities in Cameroon and India." International journal of environmental research and public health 16.7 (2019): 1126. https://doi.org/10.3390/ijerph16071126.