



Illness, Environment, and Resistance: Examining *Daman* and *Bhulan The Maze* through Medical Humanities

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Abstract

This paper explores the critical role of regional Indian cinema in portraying the intertwined realities of health, environment, and social resistance in marginalized rural communities. Focusing on two films, *Daman* (2022) and *Bhulan The Maze* (2019), the study employs an interdisciplinary framework grounded in medical humanities and eco-cinema to examine how these films challenge dominant narratives around illness, development, and ecological degradation. *Daman* portrays the spread of malaria in Odisha's tribal regions as a result of social neglect, poor infrastructure, and environmental conditions. The film reveals tensions between indigenous healing practices and modern biomedicine, while exposing broader socio-political issues such as displacement and health inequities. Meanwhile, *Bhulan The Maze* addresses caste-based oppression alongside environmental exploitation in Chhattisgarh, portraying how marginalized communities struggle against judicial injustice and medical neglect. Both films illustrate resistance through localized narratives, emphasizing community resilience and activism against structural violence. By situating these cinematic works within the intersection of health, environment, and culture, this paper emphasizes the importance of recognizing regional cinema as a form of artistic activism. It foregrounds indigenous knowledge, critiques urban-rural disparities, and highlights the socio-political dimensions often elided in mainstream discourse. The analysis demonstrates that such films not only enrich medical humanities scholarship but also serve as vital platforms for amplifying marginalized voices and fostering environmental and social consciousness. Ultimately, the study advocates for greater academic attention to regional films as essential contributors to understanding the complex dynamics of health, ecology, and resistance in India's rural landscapes.

Keywords: Regional Cinema, Medical Humanities, Eco-cinema, Indigenous Knowledge, Social Resistance.

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Introduction:

Cinema is perceived to be the mirror of our society (Shah, 2020, p. 1) and films are most popular mass media (Dasgupta, 1996, p. 1) that act as an instrument of social change. Cinema is a powerful means to influence people's opinion, altering mindsets and drive actions to make a difference. Regional cinema reflects the heart and soul of a place, drawing its stories, themes, and culture from the everyday lives and experiences of the people who live there. It can be as unique as a particular region. Regional stories often offer a window into a place's soul, history, struggles, and way of life (Barman, 2024, p. c-859). In the Indian context, 'regional cinema' is used as a marker of difference from mainstream cinema; the plural, 'regional cinema' indicates the diversity of national cinema. In the context of Indian film, 'regional' cinema refers to movies made in languages other than Hindi, using language to highlight cultural and regional differences within the country (Radhakrishnan, 2021, p. 162). Regional Indian cinema plays a key role in showing the real-life struggles of marginalized communities, including issues like poor healthcare, environmental problems, and local resistance. While mainstream Hindi cinema has increasingly embraced environmental themes- as seen in films like *Sherni* (2021) and *Kadvi Hawa* (2017)- regional cinema offers hyper-localized insights into rural India's socio-ecological crises. With changing times and consumer segment, regional cinema is evolving and coming up with films like *Kantara* (2022), *Churuli* (2021), *Naadu* (2023), and *Kaadan* (2021) which have brought the failure of system in providing medical facilities, caste disparity, environmental degradation and concern, and grassroot resistance in marginalized communities into attention. With change in paradigm and rising global environmental concerns and medical crisis, low budget "green movies" are now produced and watched by target audience (Chu, 2017, p. 449).

The interdisciplinary field of medical humanities and Eco-cinema provides a crucial framework for understanding the subjective experiences of illness and healthcare inequities depicted in films. This approach challenges biomedical reductionism by valuing health and illness's cultural, social, and ecological dimensions. *Daman* (2022) by Vishal Mourya and Debi Prasad Lenka and *Bhulan The Maze* (2022) by Manoj Verma exemplify this shift by portraying illness not merely as a biological phenomenon but as a product of systemic neglect, cultural barriers, and environmental degradation. These films align with the "medical humanities" perspective, which advocates for creative practices to disrupt dominant medical paradigms and promote social justice. This paper views regional Indian cinema as both an artistic expression and a form of activism that critically explores the connections between health, environment, and resistance in rural India. This paper argues that regional Indian films like *Daman* and *Bhulan The Maze* illuminate the entanglement of health, environment, and resistance more convincingly than mainstream cinema.

Green Cinema in India

"Eco cinema," also commonly referred to as "green cinema," is a term coined by Pat Brereton to define the ability of film to increase public engagement with environmental protection. Eco cinema provides a visual representation of the relationship between humans and their environment, aiming to communicate environmental and ecological concepts to general audiences (Willoquet-Maricondi, 2010, p. 14; Parham, 2018, p. 7). Cinema has leveraged eco-cinematic approaches to effectively promote environmental protection, raise conservation awareness, and highlight the diverse aspects of the natural world (Mehta, 2025, p. 12). Despite the ongoing promotion of environmental causes by green cinema in India, an evolving phenomenon is the employment of prevalent media forms, particularly cinema produced regionally, as an efficacious means for developing ecological understanding and stimulating behavioural change. These green cinemas, often rooted in regional culture, are gaining recognition for their ability to weave compelling narratives that resonate with the audience while highlighting environmental issues (Satapathy & Bhattacharya, 2024, p. 297). The "eco-

cinema” movement in Indian films tackles themes such as sustainability efforts and ecophobia (Biswas, 2021, p. 46), climate change (Sharma & Choubey, 2020, p. 2), and environmental activism through narrative storytelling. Across the globe in the twenty-first century, the cinematic portrayal and representation of environmental crises have begun to assume a position of increasing significance. Popularly referred to as “green cinemas”, these films undertake an attempt to portray the various types of anthropocentric upheavals that are wreaking havoc on the natural world by causing severe ecological issues. Concurrently, these cinematic representations are also effectively fostering a critical discourse on issues of ecological justice, particularly as the interconnectedness between humanity and nature progressively diminishes: “the job of an eco-cinema is to provide new kinds of cinema experience that demonstrate an alternative to conventional media-spectatorship and to help to nurture a more environmentally progressive mindset” (Macdonald, 2013, p. 20). In India, there has been a change in the subjects of Hindi cinema (Singh 54). Mainstream films like *Kedarnath* (2018), *Tumbbad* (2018), and *Jal* (2013) make the audience unearth the reality of the susceptibility and instability and the dynamic of human survival as well as ecological exploitation (Dave, 2023, p. 144). Expanding on this, she posits that Nila Madhab Panda’s *Kaun Kitney Paani Mein* (2015) serves as an exploration of water scarcity, whereas Irada (2017) offers a critique of industrial contamination impacting rural populations. These films reflect growing consciousness around ecological justice but often struggle commercially due to audience preference for escapist narratives. (Bhattacharya, 2022, p. 2-3)

Environmental Determinants of Malaria

Assessing how future climate change, especially shifts in temperature and rainfall, will impact the spread of vector-borne diseases like malaria is crucial because these changes can increase health risks by affecting how often malaria occurs. Numerous studies shown that the climate change is likely to expand the distribution of various vector-borne diseases such as malaria and dengue in higher altitudes and higher latitudes region across globe (Alonso, 2011, p. 3; Caminade, 2014, p. 3288). The film *Daman* situates malaria outbreaks in Odisha’s tribal regions like Malkangiri within the broader context of ecological and infrastructural neglect, portraying stagnant water from monsoon rains, and poor sanitation as key catalysts for disease transmission. Odisha contributes about 43.06% of total malaria deaths of the country (Dhangadamajhi et al., 2015, p. 290; NVBDCP, 2009, p. 1). Endemicity of malaria over Odisha, with highest malaria burden is seen over some of high elevated regions of central and south Odisha regions, dominated by hilly areas and forest areas including the districts Malkangiri, Koraput, Kalahandi, Rayagada etc. (Dhangadamajhi et al., 2015, p. 290; Pradhan et al., 2016, p. 10). The film critiques the urban-rural healthcare divide, highlighting the failure of medical supplies and lack of electricity in rural clinics, which forces villagers to rely on traditional healers. This aligns with findings that 60% of healthcare infrastructure in India is concentrated in urban areas, leaving rural populations underserved (Health access in rural India).

The portrayal of ecological determinants in *Daman* also reflects broader socio-economic challenges. Research by Patrika, a daily newspaper, on Chhattisgarh’s Bastar district demonstrates that structural poverty and lack of medical facilities double the risk of malaria infection, which is manifested through kuccha houses, lack of toilets, and unsafe water sources. Similarly, Odisha’s tribal regions face persistent barriers to malaria elimination due to their remote locations and inadequate vector control measures. Despite initiatives like the Durgama Anchalare Malaria Nirakarana (DAMaN) (Malaria Eradication in Cut-off Regions), a health scheme by the ODISHA government to eliminate malaria in selected adivasi pockets, hard-to-reach hilly areas remain highly vulnerable due to their dense forest cover and poor health infrastructure. The film is promoted as “based on true events,” which follows the story of Siddharth, a young doctor working in the remote villages of Malkangiri. While battling dangerous mosquitoes, he also faces challenges with the Adivasi community, who prefer traditional healing methods due to limited access to government healthcare. The doctor,

portrayed as a sharp, fair-skinned, upper-caste urban man, is depicted as a hero, whereas the Adivasi people are shown as ignorant, superstitious, confused victims, and sometimes as troublesome antagonists (Behera, 2022, p. 2/25). Sidhdharth, an MBBS graduate who is deputed for two years of compulsory community service at a primary centre (HPC) in Malkangiri, experienced trouble in the tribal village where mosquitoes gave him a sleepless night. The next day, when he was leaving the village, a villager came begging to save his daughter from an unknown disease and Dr. Sidhdharth discovered the spread of Malaria disease in that region and people were adapting local remedies of Dishari. Odisha's unique geography-comprising dense forests and hilly terrains- creates favourable conditions for malaria transmission, particularly in tribal-dominated regions. Studies have shown that malaria-endemic areas like Malkangiri district are marked by misconceptions about the disease, such as beliefs in witchcraft or contaminated food as causes, which further hinder effective prevention and treatment efforts. Additionally, tribal populations in these regions face disproportionate health burdens due to multidimensional poverty and limited access to healthcare services. For example, over 45% of the population in high-malaria districts lives under multidimensional poverty, while forest cover exceeding 40% has been strongly correlated with higher malaria prevalence (Nath, 2022, p. 62). Siddharth manages to persuade the government to roll out a rapid, large-scale awareness and monitoring campaign to prevent malaria. As part of this campaign, they make sure that people in Adivasi communities use insecticide-treated mosquito nets. A parallel can be drawn here with the Covid-19 pandemic. When it was reported in 2019 in late December in China, International health organizations, public health departments didn't pay attention to its consequences. And as soon as it captured the whole world, suddenly the world panicked and responded incompletely, without any plan of action. This resonates with what Camus (1947) says- "there have been as many plagues as wars in history; yet always plagues and wars take people equally by surprise." (p. 37)

James Ferguson's concept of "anti-politics" provides a useful framework for analyzing *Daman's* depoliticized portrayal of development. According to Ferguson, framing development challenges as purely technical or administrative issues obscures the political dynamics that shape them. Consequently, overlooking the temporal and political contexts inherent in developmental interventions- such as malaria eradication efforts in Malkangiri-constitutes a fundamental misinterpretation of the nature, processes, and purposes of development (Behera, 2022). Why Adivasis inhabit the so-called cut-off region with a high risk of malaria and the historical dynamics behind their current state of health impoverishment have been eluded in the film. The film *Daman* highlights the ecological factors that exacerbate malaria outbreaks in Malkangiri, a region historically neglected by state-led development initiatives. The construction of the Balimela hydroelectric dam in the 1960s submerged vast stretches of habitable and agricultural land, displacing Adivasi settlements and creating inaccessible "cut-off regions" (Mourya & Lenka, 2023, 0:1:56) These areas, surrounded by stagnant backwaters, have become breeding grounds for malaria-carrying mosquitoes. Recent studies have flagged dam backwaters in tropical regions as significant contributors to malaria transmission, with high chances of community outbreaks. In Malkangiri, the syndemic nature of malaria is evident as it interacts with other health conditions such as anemia, upper respiratory tract infections, and diarrhea, further worsening public health outcomes. Additionally, the film critiques how spatial segregation caused by the dam has compounded health inequities. The displaced Adivasi communities lack access to basic healthcare infrastructure due to their geographical isolation. This aligns with findings that malaria prevalence is not only driven by ecological factors but also reinforced by socio-political conditions such as forced displacement and structural poverty. The absence of state welfare provisions in these regions has left Adivasis reliant on traditional medicine men (Disharis), whose ethnomedical practices are often demonized by modern biomedicine. By weaving these ecological and social determinants into its narrative, *Daman* underscores the critical need for addressing both environmental and infrastructural barriers to malaria prevention in marginalized communities.

Resistance Against Structural Violence:

The protagonist, Dr. Siddhartha, confronts systemic apathy and cultural barriers. A pivotal scene shows her dismantling a shrine built near a malaria-prone pond, symbolizing the clash between scientific pragmatism and superstition. His struggle mirrors real-world challenges faced by ASHA workers, who combat vaccine hesitancy in tribal areas. The film's climax- a community-led sanitation drive- echoes the "cine medicine" ethos of mobilizing collective action through storytelling. the doctor had to stay back when a villager comes begging to save his daughter from an unknown fever and it is when Dr Siddharth discovers the dire situation of malaria in the region and the people adopting local remedies of Dishari. Disharis are the local medicine men who practice ethnomedicine as well as magico-religious methods to treat the illnesses. The popularity of these indigenous medical systems like ayurveda, siddha and disharis relied on the local consumptions and cheap availability. On the other hand, the label of Western medicine as "white man's medicine" (Arnold, 1993, p.4) for the assimilation of western medicine amongst the Adivasi. Representation of Adivasi people as obnoxious liabilities of the state is repetitively foregrounded in the film to project the doctor as their Messiah. The film's demonical portrayal of Disharis reaffirms the epistemic hubris of modern biomedicine against the ethnomedical healing systems of Adivasi communities. This recognizes their significant role in reducing cultural apprehensions toward the modern medical system and their dedicated efforts in founding the clinic within the community. Building on this narrative tension, the film draws the tension between indeginious medicine and western medicine, which "lived in constant fear of deadly diseases" (Mukhopadhyay, 2020, p. 6). Dr. Siddhartha's perseverance and eventual success in convincing the villagers to participate in health initiatives align with such real-world efforts, emphasizing the crucial role of awareness campaigns and localized engagement. As the earlier Covid-19 pandemic initially unfurled, there was a global anticipation of widespread panic and upheaval across various facets of society, prompting heightened concern among writers and observers regarding the collective reactions and responses of people to these unprecedented circumstances. In his book *Culture of Fear* (2002), Frank Furedi, a professor of sociology, elucidates his core objective by stating: "I was mainly concerned with the way that society encouraged a panic-like reaction in relation to health, the environment, technology, new products and personal security" (p. 14), highlighting his keen interest in examining how society promotes heightened anxiety responses across various aspects of life.

Dr. Siddhartha's journey reflects the common struggles of healthcare workers in rural India and echoes real-life stories of doctors and health workers who encounter resistance while carrying out vaccination and sanitation programs. For example, the Swachh Bharat Abhiyan, a nationwide campaign for improving sanitation, encountered significant cultural resistance in several rural areas where open defecation was deeply ingrained as a social norm. Similarly, vaccine hesitancy, particularly during the COVID-19 pandemic, posed a major public health challenge, as misinformation and lack of trust in medical institutions led to refusals of vaccination drives in tribal belts. The idea that no single individual should be left alone should be the foundation of our social, cultural, economic and political order. In a more recent work "Epidemic and Society: From the Black Death to the present (2019)" Frank M. Snowden, a Professor Emeritus of History and the History of Medicine at Yale, examines the ways in which disease outbreaks have shaped politics, crushed revolutions, and entrenched racial and economic discrimination.

The intersection of caste, environmental degradation, and health inequalities remains a critical issue in India, particularly for marginalized communities. National award winner movie *Bhulan The Maze* (2019), based on Sanjeev Bakshi's novel *Bhulan Kanda*, presents a microcosm of rural Chhattisgarh, where caste hierarchies dictate access to resources, health facilities, and even justice. The film metaphorically and literally portrays the "bhulankaanda," a plant believed to cause disorientation, as a symbol of the socio-political maze that Dalit and tribal communities must navigate and how caste oppression, ecological concerns, and health

disparities converge in the film's narrative to reflect larger societal structures.

Caste and Structural Oppression in *Bhulan The Maze*:

Bhulan The Maze tackles regional issues, giving voice to the marginalized, questioning judiciary system, and challenging societal norms. Caste discrimination is a central theme in the film, dictating the fate of its marginalized protagonist Bhakhla. Narrative of *Bhulan The Maze* is set in a Chhattisgarhi village which is a brilliant portrayal of the eternal clash of the marginalized community and the system. The cinematography captures the real image of a Chhattisgarhi village and the life of common Chhattisgarhi men. The judiciary, law enforcement, and societal structures are depicted as mechanisms that uphold caste-based oppression rather than dismantling it. Bhakhla, an innocent Chhattisgarhi man, finds himself entangled in a legal battle that mirrors the struggles faced by oppressed communities in real life. Bhakhla, an individual known for initiating his utterances with the habitual interjection "Haw," encountered a communicative impediment during a legal proceeding. This linguistic idiosyncrasy posed a challenge for the public prosecutor, who reportedly experienced difficulty in comprehending Bhakhla's discourse due to the unfamiliar and repetitive phatic expression. The Bhulan Kaanda plant, with its reputed capacity to induce amnesia and disorientation, functions as a powerful allegory for the potential of legal and bureaucratic systems to inadvertently "tread on" their foundational principles (Verma, 2022). Just as the Bhulankanda obscures clarity and memory, these systems, in their complex procedures and hierarchical structures, risk obscuring their core purpose: to serve and deliver justice to the common men. When Mukhiya tells his wife that "the law is created not for ordinary people but by those who are wealthy and educated" (Verma, 2022, 1:15:45). This phenomenon suggests a systemic "forgetting"- a detachment from the fundamental essence of ensuring equitable outcomes for marginalised community. The very mechanisms designed to uphold fairness can, paradoxically, become instruments of obfuscation, leaving the intended beneficiaries feeling lost and voiceless, much like one affected by the Bhulan Kaanda's effects. we can clearly see, the failure of judiciary system to understand the system of village and to provide justice, in the closing statement of Lawyer Tripathi:

In our country, who make the law? We, the educated people, while sitting in the closed AC rooms. For whom do we make the law? For educated people like us. It's so ironic that the law we make for ourselves is imposed on these tribal people, and they've to abide by it because they've no other option, and then we decide the punishment for them, and at times we decide such a punishment which doesn't feel like punishment to them. Bhakla escaped from the "haw" but there are thousands of innocent men like Bhakla in prison. These people are tribal people who have come from such a forest where there is a plant named bhulan kanda, if a man touches it, he forgets the path and doesn't come to his senses until someone shakes him and wakes him up. Our judiciary too has stepped on bhulan kanda (Verma, 2022, 2:06:15).

Urban tribal communities face significant challenges in achieving social, political, and economic integration due to persistent biases and prejudices that impede their access to housing, employment, healthcare, education, and other essential resources. The entire village rallied in concern for Ganjha, who was afflicted with Tuberculosis, with a shared intention to provide essential support. Professor Priya Sharon Thomas explains that the absence of formal education, recorded history, and cultural awareness has caused indigenous traditions to be misunderstood and merged with others in the name of development, pushing them to the margins of society and weakening their cultural identity (p. 265).

Cultural and Environmental Degradation

The film also critiques the environmental exploitation that disproportionately affects lower-caste and tribal communities. *Bhulan The Maze* highlights how natural resource depletion and

government-induced land dispossession marginalize indigenous populations, visually portraying the resulting confusion and conflict among villagers. The Kotwar (village servant appointed under Section 230 of the Chhattisgarh Land Revenue Code) states, “That is what is written on the official map; the government has misplaced the mountain, pond, and fields on the map” (Verma, 2022, 0:27:48). The land dispersion issue served as the catalyst for a conflict between Bhakla and Birju, culminating in Birju’s accidental death and the subsequent repercussions faced by Bhakla and the whole village.

Urbanization creates a tough situation for people living in villages, as many of them don’t want to leave their homes and the culture they cherish. They have strong connections to their traditions, way of life, and the close-knit community that shapes who they are. Moving to cities can make them lose touch with those cultural practices and relationships, putting them in a difficult position between wanting to embrace new opportunities and holding on to their roots. It is characterised by the fast expansion of cities and the migration of people from rural to urban areas. Nevertheless, there is a paradox underlying this general trend- a complicated interaction between development and displacement, progress and obstacles. This paradox takes on special poignancy when one considers how it affects tribal communities, whose distinct realities frequently collide with the forces of urbanisation. This song effectively expresses a meaningful concern for the roots of villagers:

Nanda jahi ka re nanda jahi ka re nanda jahi ka

Kamra au khumri arai turari nanda jahi ka

(will it come to an end?, the blanket, the cap of cowboy and the way to drive the bullock cart)

Rachrach machmach gedi machaiyaan, gaanv gali ma padki nachaiyaan

Maandar ke thap ma raas rachaye, panthi ke dhun la gaaye bajaye
gaanv ke leela, chaur ke chila, mela madai ma dhelwa jhulaiya,

Nanda jahi kaa

(the rituals of walking on bamboo, the game of catching bird, dancing on the beats of drums, singing and dancing on Panthi beat, the drama playing of villagers, and the recipe of Chila and the fair of Madai, will come to an end?) (Verma, 2022, 0:20:33).

Ganjha, a skilled metalworker, is currently unemployed due to a decline in demand for handcrafted items from rural areas. This trend endangers traditional craftsmanship and the cultural heritage tied to these skills. The reduced interest in locally made products affects artisans like Ganjha and threatens the rich cultural practices of tribal craftsmanship. Professor Priya Sharon Thomas observes that the arrival of colonial modernity altered tribal life, disrupting traditional systems and introducing new ones, which caused cultural confusion and an identity crisis among the tribes of the region (p. 266). Cities frequently represent modernity and progress, but they also pose a threat to the survival of traditional ways of life, which creates a paradoxical tension between urbanisation and cultural preservation. Urbanisation puts tribal communities at risk of losing their language, cultural identity, and land. Professor Priya Sharon Thomas states that globalization and its neoliberal policies have weakened indigenous cultures by trying to make everything uniform and standardized (p. 265). Rapid urbanisation can result in cultural homogenization as regional traditions and values give way to universal standards. For tribal communities, urbanisation brings about profound cultural transformations that radically alter their identities, traditions, languages, and social structures. The migration of tribal populations to urban areas for economic reasons presents a challenge to their traditional way of life as they come across a complex milieu of diverse cultures, values, and lifestyles.

Health Apartheid: Marginalized Communities and Medical Neglect

Health disparities are another critical issue portrayed in *Bhulan The Maze*. The absence of medical infrastructure in rural areas, coupled with the discriminatory attitudes of healthcare providers, leads to systemic neglect of lower-caste and tribal communities. The film depicts scenes of medical negligence and bureaucratic apathy, emphasizing how caste determines life and death in India’s rural healthcare system. Ganjha, a central character in *Bhulan The Maze*,

suffers from tuberculosis (TB), a condition exacerbated by his limited access to healthcare. The entire village is worried about his medical care; however, the absence of adequate healthcare facilities prolongs his suffering until he ultimately ends up in prison, where he finally gets the treatment. Ganjiha cheerfully states that “There is a hospital inside the prison, and doctors visit regularly to provide free medical check-ups” (Verma, 2022, 46:45). It clearly illustrates the absence of healthcare in the villages and the inequality faced by the community. His illness serves as a powerful commentary on the systemic neglect present in society, underscoring the connections between health crises, economic disadvantage, and insufficient medical resources. Through Ganjiha’s suffering, the text foregrounds the vulnerabilities of marginalized communities, illustrating how environmental, economic, and political factors shape health outcomes and contribute to medical disenfranchisement.

Resistance and Social Change

Resistance in films is different in narration due to the unique characteristics of the medium. The camera angle, costume, sound and light can undergo semiotic analysis to understand the variant forms of resistance. Despite its grim portrayal of systemic oppression, *Bhulan The Maze* also highlights acts of resistance. At first, let’s look into the films that showed the view of police station where Daroga is laughing and scolding Kotwar. Ann Kaplan in *Looking for the Other: Feminism, Film, and the Imperial Gaze* (1997) comes up with a term ‘imperial gaze’ (p. 79). The bearer of the gaze imposes power and acts as an active component whereas the inferior subject is viewed as passive and without a view of his own. Bhakla’s journey symbolizes not just an individual struggle but a collective movement toward justice and recognition.

The film thus calls for policy reforms, environmental sustainability, and equitable healthcare to break the cycle of oppression. Priyanka Ghosh (2022) notes that many indigenous people have lost their lands, seen their cultures disrupted, and their communities broken apart, turning from self-sufficient owners of resources into insecure wage earners in cities with uncertain futures (p. 245). Their vulnerability to exploitation, violence, and abuse is increased by language barriers, cultural differences, and a lack of representation that further obstructs their ability to assert their rights and voice their concerns in urban spaces.

Conclusion

The analysis of *Daman* and *Bhulan The Maze* through the lens of medical humanities reveals the intricate connections between illness, environment, and resistance in indigenous and marginalized communities. Both films highlight how disease is not merely a biological phenomenon but is deeply intertwined with socio-political structures, ecological degradation, and cultural beliefs. *Daman* portrays the struggle against environmental destruction and its impact on public health, while *Bhulan The Maze* foregrounds indigenous knowledge systems and their resistance against medical and environmental colonialism.

By situating these narratives within the framework of medical humanities, this study emphasizes the importance of literature in expanding our understanding of health beyond clinical perspectives. The films challenge dominant medical discourses by centering local healing traditions, community resilience, and the broader socio-environmental determinants of disease. They also criticize the effects of industrialization and environmental exploitation, showing how systemic oppression worsens both ecological and health problems. In bridging literature, medicine, and environmental studies, this paper underscores the necessity of interdisciplinary approaches in examining health narratives. It also calls for greater attention to regional films that offer alternative perspectives on illness and resistance. Ultimately, the study of *Daman* and *Bhulan The Maze* not only enriches the discourse of medical humanities but also amplifies the voices of communities often marginalized in global discussions on health and sustainability.

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Bio-note

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