

Confronting Chronicity
Illness Experiences and the Healthcare System around Type-2
Diabetes and Obesity Management in India

AVILASHA GHOSH

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Abstract

This thesis provides a situated understanding of chronic illness experiences and healthcare interventions by focusing on the public discourse that connects Type-2 diabetes and obesity in contemporary India. Based on an ethnographic study conducted between July 2021 to January 2023, the thesis examines how diabetes mellitus and obesity intersect with people's daily lives, health-seeking behaviours, care practices, and social relations across the inequalities of class, gender, region, and income. Additionally, the thesis provides an in-depth account of what chronic living entails for diagnosed persons and their families in the metropolitan cities of Delhi and Kolkata. Anchoring on the idea of 'chronic care,' I examine the various ways in which the prevailing healthcare infrastructure and policies, inequitable access to medical information and institutionalized care services, social suffering, and fragmented notions of chronic illness impact people's care practices and health-seeking behaviours around Type-2 diabetes and obesity management. The arguments in the thesis draw from a multi-sited fieldwork in local private clinics, public and corporate hospitals, and patients' homes in the high- and low-income settlements of Delhi and Kolkata, as well as in-depth qualitative interviews with diagnosed patients, informal caregivers, and healthcare professionals. The chapters address the social, economic, and personal challenges that persons suffering from chronic metabolic disorders confront with regard to institutionalized and non-institutionalized care in the everyday and highlights the existing tensions and gaps in the Indian healthcare system around chronic illness management. I further challenge the binary of the 'chronic' and the 'crisis' by postulating chronicity itself as a crisis of adequate care and healthcare provisions that disparately impacts people's illness, therapeutic decisions, access to care, and day-to-day life. In doing so, the thesis substantially contributes to existing debates on chronicity and care in medical anthropology, global health, and sociology of health and medicine.