# Managing Health and Bodies Beyond the Self

From "Care of the Self" to "Enterprise of the Self": Yansheng Practices of Chinese New Workers

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The workers of the high-tech information industries in contemporary China are always considered to be a group of disciplined and docile subjects under the supremacy of the global digital capitalism. However, engaging with Michel Foucault's concept of Bio-politics and deploying ethnographic method, this study attempts to display the process how the new workers of the high-tech information industry of Zhuhai come to be self-governing subjects by Yangsheng practices (nurturing life) and the complex negotiations between practitioners, commercial operations and the state of the process. It is found that the Yangsheng practices display great diversity in forms and effects among the new workers: Yangsheng, as a discourse, has been understood and utilized by them; it has been transferred into the approach to establish new identity and realize self-improvement. Yangsheng, as practice, comes to be the tool to help others with their well-being (care of the others) and maintain self-health (care of the self). Yangsheng, as industry, keep absorbing new workers to make them enterprising subjects for wealth and success in the socialist market economy.

### Tibetan Medicine —Humans, Non-humans and the Case of 'Identity'

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Within the framework of the modern nation-state, the relationship between 'body', 'disease', and the social status of doctors often mirror body politics and call forth nationalist imaginings. In many Asian postcolonial countries that face the problem of socio-economic transformations, 'traditional medical systems' form the realm that is highly state regulated, and thereby implied in the production of national sentiment, identity and citizenship. Such a situation occurs also among Tibetan communities living in India.

In its holistic approach Traditional Tibetan Medicine (sowa rigpa) takes into account different spheres, levels and dimensions of the individual's life. As in many other 'traditional medical systems', health is defined by sowa rigpa's practitioners not as 'the absence of a disease' but rather as the ability to maintain wider equilibrium within the body; and between the body and the outer world (and even the universe). According to 'Tibetan tradition', human life, health and frame of mind are affected not only by genetics, determinants of personality or environmental conditions but also by: the planetary configurations, the influence of ancestral spirits, karman from previous incarnations or energies emanated by different kinds of items. In my presentation I would like to show how medical discourse within Tibetan communities is combined with the political goals of preserving Tibetan culture and building 'united Tibetan identity' in exile.

# <u>Rhythm Therapy:</u> <u>Sleep Hygiene and the Temporal Management of Sleeplessness in Hong Kong</u>

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Sleep and the loss of it, although indispensable in our lives, are seldom the central foci of anthropological research. The analysis of sleepless experiences highlights the collectivized sleep/wake rhythm that regulates the temporality of our everyday life. My four months fieldwork at a sleep clinic in Hong Kong discovers that it is also very common for clinicians to manage sleeplessness by starting with the regulation of sleep/wake rhythm. This presentation will discuss this rhythm therapy in everyday negotiation, both inside and outside clinic.

Such rhythm therapy can be traced back to the idea of sleep hygiene in sleep medicine. Different from the common notion of 'hygiene' as avoidance of germs or pollutants, I will argue that sleep hygiene in fact promotes a clear differentiation between day/awake and night/asleep. To keep track with people's everyday sleep/wake rhythm, clinicians often adopt tools such as sleep log or sleep diary that visualizes the temporal pattern of sleep.

The discussion further extends to the controversial position of napping. In the rhythm therapy of sleeplessness clinicians discourage napping because it destabilizes the day/night category promoted by sleep hygiene. But on the other hand napping is increasingly welcomed by large corporations because it arguably enhances productivity. Opposite from the viewpoint of some theorists on temporality, sleep medicine does not always align with political economy and technology as a united force that governs sleep. Discussion of napping instead reveals the potential discrepancy between social institutions in the making of 'well-slept' subjects.

#### <u>"We are Peers First!":</u> Peer Educators' Double Marginalization in Drug Use Intervention in Yunnan, China

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Peer education is often regarded to be an effective and credible method in drug use interventions. Peer educators' drug use experience provide them culturally valued knowledge and allow them to be smoothly socialized into the intervention's objects, which is challenging for those without any drug use experience. Therefore, peer educators are supposed to play a crucial role in drug use intervention by contributing to both peers and non-user staff. However, my field research in a community rehabilitation center in Yunnan Province suggests that peer educators are suffering from a process that I call "double marginalization": they are not trusted in a culture of mistrust pervasive among local drug users, which is also a response to China's anti-drug policy. Also, they are considered lacking a "correct" attitude by non-user staff, by the standard of "normal" people's moral expectations and institutional ideology. Thus, peer educators are struggling among their multiple identities as a drug user, peer educator, staff, and "normal" people. Indeed, they are trapped in a situation of liminality: they believe full recovery can only be achieved after they quit this job and cut off all connection from their peers, but they also worry that they might finally have to go back to the past. Through examining the tensions they are suffering, this paper aims to explore how peer educators are valued/devalued by drug users, related institutions, and as well peer educator themselves, and why they are pushed in a marginalized direction in the local political, economic and cultural contexts.