

# Senses, Sociality and Salons: Medicinal Hospitality in a Chinese Hair-Dresser's Salon

Tom McDonald

To cite this article: Tom McDonald (2016) Senses, Sociality and Salons: Medicinal Hospitality in a Chinese Hair-Dresser's Salon, *Ethnos*, 81:2, 189-213, DOI: [10.1080/00141844.2014.912247](https://doi.org/10.1080/00141844.2014.912247)

To link to this article: <https://doi.org/10.1080/00141844.2014.912247>



© 2014 The Author(s). Published by Taylor & Francis.



Published online: 16 May 2014.



Submit your article to this journal [↗](#)



Article views: 2166



View related articles [↗](#)



View Crossmark data [↗](#)



Citing articles: 1 View citing articles [↗](#)

# Senses, Sociality and Salons: Medicinal Hospitality in a Chinese Hair-Dresser's Salon

Tom McDonald

University College London, UK

**ABSTRACT** Recent calls for a revitalisation of the study of hospitality as central to anthropological theory have focussed on the material, affective, moral and cosmological aspects of hospitality. This paper argues that any such theory of hospitality should also afford consideration of how hosting practices can also be a form of medicinal experience, showing how in a Chinese hair salon these experiences ricochet into ideas of well-being by drawing on discourses and practices that are grounded in Traditional Chinese Medicine. This paper argues for an understanding of the dispersed and diffused nature of Chinese medicinal practices and concepts throughout society, while still taking into account the specificities and logics of the Chinese medical tradition. The concept of 'medicinal hospitality' helps to understand the social nature of these ostensibly medical treatments, and how they use the creation of distinct sensory experiences which are shared between groups of customers to generate social relations.

**KEYWORDS** Hospitality, senses, traditional Chinese medicine, anthropology, China, consumption

## Ginger Art Physiotherapy

'Wash with Ginger Art, wash to health'

Fresh ginger (*xianjiang*), orchid tuber (*tianma*), *Ganoderma lucidum* mushroom (*lingzhi*), *polygonatum multiflorum* (*shouwu*), privet fruit (*nüzhenzi*), soup for internal harmony (*neitiaotang*)

Enlivens blood circulation, exercises wind and drives on cold (*qufeng quhan*), removes fatigue and weariness, freshens up and awakens the brain, eases stress (*huanjie pilao*), nourishes and blackens the hair (*yangfa wufa*), treats headache and dizziness, [treats] cervical vertebrae illness (*jianzhou yan*).



**Figure 1.** Poster advertising Ginger Art Physiotherapy treatment on salon wall.

I was intrigued when I saw the above poster (original Chinese version shown in Figure 1) displayed on the wall of Masterpiece Cuts hair salon in Red Mountain Town, the administrative urban centre of a large mountainous county in the south-west of China.<sup>1</sup> I wondered whether a hair treatment could actually deliver any of the above claimed outcomes, and felt that the poster would have seemed less out-of-place had it instead been hung in one of the small Chinese medicine clinics that operated in the town. However, upon spending longer in Masterpiece Cuts, I quickly became aware of something all the more surprising: the majority of customers receiving this particular treatment were young- or middle-aged businessmen, who were ‘treating’ themselves and their male friends to a therapy. That ostensibly medicinal therapies should appear so overtly in a hair salon was perhaps conceivable, given the emphasis of both on the body, but that this should so openly coincide with hospitality practices aimed at fostering social relationships stood out as being of particular interest.

This article discusses what the surprising cohabitation of these phenomena may mean for anthropology. In so doing, I attempt to unite two relatively distinct discourses: one emphasising the importance of sense in medicinal treatment, and the other stressing the role of emotion and feeling in hospitable social relationships. This paper proposes that these treatments should be understood as a form of ‘medicinal hospitality’, and acts as an appeal to consider more

closely the way in which the sensual nature of hosting practices often embody specific notions or practices relating to the well-being of the guest, the host or frequently both. Furthermore, this paper argues that the conflation of medicine and hospitality is made possible by the dispersed nature of Chinese medicinal practices and ideals throughout society and beyond the immediately recognisable sites of the clinic, hospital or the vicinity of the barefoot doctor. As such, this paper calls for an acknowledgement of the widely diffused nature of Chinese medicine, to a similar extent as described by Foucault (1973) in his concept of the 'medical gaze', while at the same time exploring how this can be done without compromising the largely autonomous logics of Chinese medicine.

An understanding of the medicinal aspects of hospitality as it occurs in Masterpiece Cuts also offers a particularly novel contribution to Candea and da Col's (2012: S1) recent call for a revitalisation of the study of hospitality as an area for exploration in anthropological theory. This paper will show that the practices within a hair salon in Red Mountain Town speak strongly to many of the themes that Candea and da Col highlighted as connecting with hospitality such as materiality, morality, affect and cosmology. But this case is particularly significant in that many of these appear within a strong medical discourse, rendering practices directed towards well-being as also commensurate with hospitality.

### **Histories of Hospitality and Health**

A connection between medicine and hosting is likely not unique to Chinese culture. In European society it is possible to trace the emergence of the 'hospital' and 'hospitality' from the Latin origin *hospes*, suggesting that since the middle ages at least, Western medicine has been charged with effectively transforming the status of the ill person into the position of one to be hosted. Indeed, the English language is sprinkled with a lexicon of terms that are found in both medicine and hospitality practices: 'to care for', 'to treat' and 'to aid' being prime examples.

This is not to say that medicalisation is always viewed as being entirely benevolent. Foucault (1973) proposed the concept of the 'medical gaze' in order to describe the development of a discursive practice emerging in teaching hospitals in eighteenth-century France. He argued that 'medical gaze' emerged from the turn towards dissection as a means of making visible illnesses that were formerly 'hidden' inside the body. Foucault describes the medical gaze as a discourse and practices that objectify the body, and as such are dehumanising in nature. Foucault claims this objectification a necessary step because 'if one wishes to know

the illness from which he is suffering, one must subtract the individual' (Foucault 1973: 14). Thus, Foucault's medical gaze emerges as a hegemonic structure, derived from the understanding that the physician possessed the ability to 'see' the truth, divining patients' ailments through the powers of meticulous observation. Foucault argued that the mythical nature of the clinic gave the medical profession its authority 'with powers similar to those exercised by the clergy over men's souls' (1973: 31), highlighting the political characteristics of governing a war against disease. In this sense, there appear to be certain structural parallels with the authority and power that is vested within the host in formal Chinese hospitality situations (Pharoah 2005), and this tension between kindness and authority expressed through the control of bodies will be returned to later in the paper. One of the key characteristics of the medical gaze as described by Foucault was that it was diffused and situated in various sites. The medical gaze was not limited only to institutions, but was collective in nature, and encompassed the gestures and mechanisms in society that isolated, identified and treated disease. This became particularly clear in relation to disease epidemics, where Foucault (1973: 25) described the existence of 'a multiple gaze' working through clinics, but also police forces and even citizens themselves.

The distributed nature of the Foucault's 'medicinal gaze' is useful for considering how notions of Traditional Chinese Medicine appear diffused throughout Chinese culture, and particularly, the ability of medical ideologies and practices to coalesce in unexpected sites such as the Masterpiece Cuts salon. Nonetheless, there are limitations to Foucault's concepts when applied to Chinese medicine, owing to the different logics and origins of Chinese and Western traditions. Hsu (2005) traces the foundations of the Chinese tradition, arguing that while dissection and visual inspection of corpses was fundamental to the birth of anatomy in Europe, the 'tactile exploration' of living bodies in the second- and third-century China helped to foster a form of 'tactile perception'. Hsu claims that the tactile exploration of the extremities, vessels/pulses and internal viscera led to the development of vocabularies describing the tactile qualities of pain, touch in pulse diagnostics and the flesh, respectively. Likewise, Farquhar (1991: 370–371) suggests that 'all medical analysis requires some form of objectification through abstracting a structural state from the ongoing experience of illness', however she claims that focusing inquiry on the nature of objects involved in Traditional Chinese Medicine can help one to reach an understanding of the Chinese body without having to bend entirely to Foucault's notions of the 'medical gaze'.

Rather than using Foucault's concept to ignore the specificity of the Chinese medical tradition, I wish to argue that the appropriation of specific medical ideas within hospitality practices takes on a particularly significant turn within the Chinese context, exemplified by how the evidence in this paper corresponds with a range of writings that already exist regarding Chinese perspectives on pleasure and the body in relation to Chinese medicine (Farquhar 2002; Farquhar & Zhang 2005; Zhang 2007). Taken as a whole, these accounts emphasise the role of pleasurable bodily experiences as beneficial in both the prevention and the treatment of illness. I posit that since traditional Chinese medicinal ideologies so heavily stress enjoyment and sensuality, they become particularly apt for use within hospitality practices.

The remainder of this paper will show how Ginger Art Physiotherapy treatments are presented as being a Traditional Chinese Medicine experience. The paper then turns to explain how the enjoyable nature of this service is heightened by a rigid sexual division of labour and space in the salon. The paper then details how these two elements combine to make this salon a suitable suite in which to undertake hospitality practices. As such, this paper attempts to not simply view these treatments as acting on the body, or to understand them as pure phenomenological experience, but rather to acknowledge what Hsu (2008) describes as 'the "mutuality" between social relations and the material world' and the role by which experience not only creates specific cultural understandings of social interactions, but how these notions in turn create experiences in-and-of themselves (2005: 79–80). This is significant in the case of Masterpiece Cuts, where Chinese medical ideologies permeate the material culture of the salon through a dispersed array of objects and processes that lie waiting to be enacted within routinised hospitality practices that are generative of social relationships and also reaffirm the validity of the medical principles that created this material culture in the first instance.

### **Ginger Art Physiotherapy: Making Medicinal Claims**

The Masterpiece Cuts hair salon occupies an enviable position within Red Mountain Town. It sits on a sunny tree-lined street not far from the county government headquarters, nestled between the county's agricultural bureau and a small but well-stocked supermarket. The location of the salon reflected their main clientele: the town's well-to-do business people, officials, their family members and friends. Red Mountain Town embodied several of the most pressing contradictions of contemporary Chinese society. The mountainous district had rich copper reserves, and the mining industry that relied on

them had created a small, phenomenally wealthy and powerful population. Nonetheless, the province as a whole is one of China's least developed, and life remains difficult for many who live in the countryside immediately surrounding the town. The upmarket Masterpiece Cuts salon (and another couple of salons similar in size and location) formed an important contrast to the dozens of smaller hair salons tucked away in winding alleyways and busy markets that commanded lower rents, and in which the majority of the town's population would get their hair cut for a fraction of the price.

While Masterpiece Cuts distanced itself from other no-frills salons in the town, the business was keen to associate itself with broader provincial and national networks of commerce, labour and knowledge. Masterpiece Cuts was part of a franchise operation, headquartered in the south-eastern city of Guangzhou. There were several branches of the salon 140 km away from Red Mountain Town in the provincial capital, however beyond the level of basic products, services and branding this branch of Masterpiece Cuts seemed to retain considerable autonomy in its day-to-day operations. Although the manager of the store was a local woman, several of the male senior hair stylists were migrants from Guangdong, and most of the younger, less experienced staff had migrated from the countryside surrounding the town, or from other rural areas within the province. In short, the operations of Masterpiece Cuts were buoyed by a serendipitous configuration of wealthy businesspeople and powerful officials, inexpensive regional tertiary labour, and burgeoning local commerce that was in need of expressive forms of hospitality and consumption.

The main way in which hospitality occurred in Masterpiece Cuts was through the Ginger Art Physiotherapy hair-washing treatment. The hour-long treatment costs 48 RMB (approximately \$8), which was relatively expensive compared to between 5 and 10 RMB for a budget, no-frills hair wash in many of the town's other salons. The treatment was heavily promoted by colour posters and extendable display banners placed throughout the salon, the content of which extolled the various restorative health benefits of the service. Whilst in the town's other downmarket salons, hair washing typically formed a cursory stage in preparing the hair for cutting or treatment; in Masterpiece Cuts half of the workforce (all of whom were female, to be discussed later) was dedicated to it, and hair-washing services formed over 50% of the business' profits.

The actual Ginger Art Physiotherapy treatment itself started with the customer selecting the female assistant from whom they would like to receive the treatment. They would then be led to one of three 'wash and protect' treatment

areas (see [Figure 2](#)). These were dimly lit areas, with a row of beds containing a sink fitted to the end of each bed. A plastic sheet would be placed over the back of the customer's shirt, followed by a towel. The customer would then lie on their back, with their head projected off the end of the bed and raised over the sink, facing up towards the assistant who was delivering the treatment. First, their hair would be shampooed, rinsed and conditioned using hair products, which the posters implied contained the Chinese herbal ingredients. Concurrent to this, lotion was also used to massage the temple of the head and the upper neck area. In this process individuals were constantly asked if both the water temperature and the pressure applied by the hands were appropriate. Next, while remaining lying on one's back, the assistant would massage the lower neck, shoulders and back of the patient using a massage gel. A heat pad would then be applied to the neck for a few minutes. During this time the customer would be left in the treatment area on their own. Eventually they would be helped off the bed and led out to the main haircut area of the salon, where their hair would be briefly blow-dried and styled by a male stylist. Clients would then be offered a seat and a ginger flavoured drink that had been brewed in the store.

The various posters placed on the salon walls, such as the one quoted at the beginning of this paper ([Figure 1](#)), described at length the medicinal compounds used within the treatments, alongside the perceived benefits. The shampoo and conditioner that was used during the therapy contained small amounts of the herbal ingredients listed on the poster, including ginger, from which Ginger Art Physiotherapy took its name. The allusions towards the health benefits of the treatment were not solely limited to the ingredients in the hair lotions and the physical techniques of the therapy itself. The salon also placed a number of 'healthy' foodstuffs on display around the store, the most prominent of which was a selection of potted ginger plants (see [Figure 2](#)).

Based on the Chinese *materia medica* canon, ginger is identified as a particularly efficacious Chinese herb. It is said to have a warming thermal nature (Kastner 2004: 122), strengthening the body's centre burner, its ability to transform phlegm, and freeing the exterior from excess wind-cold (Kastner 2004: 122; Liu & Tseng 2005: 602). Orchid tuber is similarly cited as extinguishing wind,<sup>2</sup> in addition to calming the liver (Liu & Tseng 2005: 684). Lingzhi mushrooms are also warming, and act to nourish the heart and calm the spirit (Liu & Tseng 2005: 679). *Polygonatum multiflorum* (*shouwu*) is a black bitter-sweet ingredient that remedies premature greying of the hair<sup>3</sup> (Liu & Tseng 2005: 286), and the efficacy of this herb was widely known amongst customers at the salon.





**Figure 2.** Floor plan of Masterpiece Cuts hair salon.

Privet fruit was likewise said to reduce the premature greying of the hair (Liu & Tseng 2005: 668). The ‘soup for internal harmony’ is an encompassing term that describes this herbal tonic containing multiple ingredients that are usually thought to be beneficial to the female body.<sup>4</sup>

Though customers and employees at Masterpiece Cuts were not typically able to describe exactly how each of these ingredients were perceived to be efficacious to the detail of the *materia medica* cited above, most still expressed a belief that the general effect of such ingredients on the body would be to enliven blood circulation (*huoxue*). It should also be noted that the warming characteristics of these ingredients was common knowledge amongst most customers at the salon. The employees at Masterpiece Cuts explained that the efficacious herbs within the shampoo could be ‘absorbed’ (*xi jinqu*) into the body via both the hair and the scalp.

Ginger Art Physiotherapy’s claims to affect the body lay not only in terms of the active ingredients contained in the hair products used in the salon. The

Ginger Art Physiotherapy treatment all took place in one of the three ‘wash and protect areas’ (*xihu qu*) in the salon, further gesturing towards the implied preventative benefits of the treatment. At the end of the treatment, patients were offered a warm drink that had been brewed in the store using a large tea urn filled with Coca-Cola, ginger, goji berries and other foodstuffs said to boost vitality. Ginger, especially known for its properties of increasing internal fire, was by far the strongest flavour in this sweet, throat-warming elixir. It is of note that during the 1980s, the Coca-Cola company carried out initial taste-tests in preparation of the launch of the drink for the mainland Chinese market. They found that local consumers at first thought the black sweet drink to be a form of Chinese herbal medicine (Haley & Haley 2006: 48; Tian & Dong 2010: 14). Despite Coca-Cola’s medical ‘roots’ as a Western curative tonic (Prendergast 1993), in the Chinese context it is the distinct taste of the beverage that appears to have rendered it amenable to being thought of in medical terms. The occurrence of the unique brew in the salon further highlights the role that brands and global products can have within the medical milieu outlined above. Furthermore, this example demonstrates the creativity of the salon staff and customers in enacting their own understandings and practices of well-being using the material resources available to them. Miller’s (2002) ethnographic account of Coca-Cola’s appropriation in Trinidad is helpful in making sense of this. He argues that Trinidadians view the drink as being fundamentally Trinidadian, rather than an American or global brand. In so doing Miller attempts to create a more nuanced understanding of how capitalism operates locally, challenging the tendency to understand Coca-Cola as merely a meta-symbol for capitalism. In Masterpiece Cuts, the Coca-Cola tonic makes possible a convergence of traditional Chinese medical ideals and global commercial brands.

Coca-Cola was not the only branded product present within the salon. The types of shampoo and hair products used in Ginger Art Physiotherapy were domestic Chinese brands, with salespeople from the provincial capital regularly visiting the salon in order to promote hair-washing products to the manager, distributing the samples and explaining the benefits of the products. Masterpiece Cuts itself was part of a larger national franchise. The head office in Guangzhou provided standardised publicity materials (see Figure 1) and was involved in running occasional training for salon staff in the provincial capital, part of which included teaching the techniques and medical ideals governing Ginger Art Physiotherapy.

The presence of these brands in the salon is significant as it demonstrates the elision of commerce, medicine and (as will be discussed later) hospitality. It

ought to be noted that for medicinal experience to be commercial in nature is broadly in keeping with delivery of healthcare in most Chinese hospitals (both private and public), which operate on a fee-for-service basis. These brands allude to a diffused system of which the salon associated itself to, not of the distributed clinics and teaching hospitals described by Foucault, which were the significant locales from which the medical gaze emerged. Instead, brands made visible the links between the treatments delivered in the salon and broader institutional arrangements of national and international companies and brands.

By now, it ought to be clear that Ginger Art Physiotherapy acted on the body through multiple pathways. These pathways included powerful massage which stimulated blood flow, and was said by staff to 'dredge the energy channels'; the application of hair products incorporating what are commonly known to be efficacious medicinal herbs and their absorption into the body via the skin and hair; and also, by oral ingestion of a warming tonic. In this way, Ginger Art Physiotherapy appears to parallel established Chinese medicinal treatments in terms of the multiple techniques, materials and approaches they each take to preventing and treating illness.

Once again, Foucault's description of the 'medical gaze' is useful. Although the 'medical gaze' originated in anatomy, Foucault traces how the gaze diffused through society to act on the body in different ways, from visual examination of living patients, experimentation, clinics, hospitals, regimes of epidemic containment. Farquhar (1991: 370–371) suggests that a better understanding of 'Chinese bodiliness' can be reached by studying the various nature of 'bodily objects' in traditional Chinese medicine, highlighting not only visceral systems, *qi*, blood, circulation systems, but also more abstract entities such as syndromes and prescriptions. Such an understanding starts to move towards a similarly encompassing view on the distributed nature of medicine that would allow for the inclusion of apparently disparate elements found in the salon, such as shampoos with various herbal elements, Coca-Cola tonics and techniques of bodily manipulation.

That is not to say that people were entirely 'docile bodies' (Foucault 1979) on which these objects and practices came to act. Assertions that these treatments were medical and contributed to well-being were not simply believed outright by those that came into contact with them, but were interpreted, judged and, to varying degrees, reproduced by salon employees, customers and their guests alike. Part of the ambiguity surrounding whether these treatments were actually capable of healing in a medical sense is perhaps what partially allows for these

Ginger Art Physiotherapy treatments to be a form of hospitality. The young woman supervising the female assistants in the salon seemed confident that the treatments had a positive effect on people's health, telling me that she and her team had undergone 'professional training' (*zhuanye peixun*), although conceding that the treatment could not compare with a Traditional Chinese Medicine doctor when it came to serious illness. Conversely, a male hairdresser, when asked whether these treatments could really do everything the posters claimed, replied under his breath, so as not to be heard by his female colleagues, that the therapy was 'cheating people' (*pian ren*). One male customer told me that he suffered from frequent migraines, and claimed receiving the treatment helped alleviate the symptoms. Another customer explained that the therapy would eliminate toxins from the body. But there were also plenty of people who expressed doubt as to whether the treatment could achieve the claimed outcomes. I posit that asking whether or not the treatment 'actually works', at least in a Western medical view of delivering a testable outcome to an observed condition may be missing the point. As Farquhar (1991: 382) points out, logics of Chinese medicine focus on discerning an 'illness *process*' and working to adjust it, rather than pinpointing a 'functional defect' with the body. The logic of such processes allows for Ginger Art Physiotherapy treatments to be understood as effectual without necessarily producing definitive result, as each treatment both draws from, and builds upon, a history of action that is accepted as being efficacious by the salon's customers and staff alike.

The description of Ginger Art Physiotherapy has thus far mainly concentrated on the symbolic and practical nature of the therapy, which has tended to underline the medicinal characteristics of the treatments. Although the medical efficacy of the treatment may have been doubted by some, the highly sensuous nature of these experiences appeared to be indisputable. Customers receiving the therapy are expected to be subjected to an array of smells, tastes, temperatures, postures and physical pressures throughout the course of the treatment. The following section will consider how this sensuousness (which we will later show lends the practice to being used in hospitality situations) is increased through the way in which gender both acts and navigates through the practices and spatiality of the salon.

### **Configuring Comfort: Gendering Haircare and Medicinal Morals**

Masterpiece Cuts had a sizeable staff, with between 10 and 15 employees working at any one time. These staff largely comprised young men and

women under 25 years of age (with the exception of three of the older male senior stylists and the female managing director). In Masterpiece Cuts, there was a clear differentiation in the division of labour between the employees, which was also reflected in a corresponding spatial differentiation of the salon (see [Figure 2](#)). This differentiation was far less clear in other lower budget salons that concentrated on merely 'doing hair' which were typically staffed by just one or two employees, who would undertake all the tasks that would have been shared between the specialised workforce of Masterpiece Cuts.

The employees in Masterpiece Cuts clearly split into three separate teams: 'washing' (*xifa*), 'cutting' (*jianfa*) and 'treating' (*tangran*). The staff who were members of the washing team in Masterpiece Cuts were also referred to as 'assistants' (*zhuli*). The members of the washing team were uniformly female; whilst the staff involved with cutting, also called 'hairdressers' (*lifashi*), were all male. The gender differentiation amongst the smaller two-person 'treating' team, who provided hair colouring, straightening and perming treatments remained more ambiguous, with a mixed-gender workforce.

The division of labour in Masterpiece Cuts was emphasised to customers in a number of ways, most obviously through uniforms worn by the staff. The regulation uniform of the female washing and treating staff was a black close-fitting polo shirt with orange hems, and the salon logo emblazoned on its front. All of the females matched this with their own dark blue or black denim jeans. By contrast, the five males who worked in the cutting team wore a uniform consisting of white sleeved shirts, and again, in all but one case, jeans of their own choosing. As opposed to the standard uniform for the women, the males purchased and wore their own shirts and were allowed to display some variance in the styles of their tops, such as slightly different cuts or patterned collars and cuffs.<sup>5</sup> The fact that the female team wore black, rather than white may come as a surprise given the tendency for white uniforms to be emblematic of health care both in China and worldwide (and as noted by Moerman (2002: 69) serves more to denote status as a hospital physician or nurse, rather than serving any functional purpose). The salon staff explained to me that the combination of black and white between the two team's staff uniforms will 'always be in fashion' (*yongyuan hui liuxing*). Even though, when taken together, these uniforms may have constituted a stylish montage, one cannot help but notice that they also served to make the division between female assistants and male hairdressers explicit.

This division of labour, one male stylist explained to me, was supposed to put the customer at ease. He explained that the presence of female assistants to

wash customer's hair would make them 'feel comfortable (*shufu*), if it was men [washing their hair] they would feel uncomfortable'. This staff member went on to elaborate that, in the provincial capital, some salons did have male assistants who provided treatments similar to Ginger Art Physiotherapy, but that he believed Red Mountain Town people were 'too conservative' (*tai baoshou*) to tolerate such an offering.<sup>6</sup>

The gender differentiation of the salon was also somewhat mirrored in terms of the customers who received Ginger Art Physiotherapy, however this was less pronounced than in the case of the workforce. Both male and female customers chose to receive the treatments, although a greater proportion of men tended to receive Ginger Art Physiotherapy treatments at Masterpiece Cuts than did women.<sup>7</sup> Of significance was that customers had the opportunity to select which of the female assistants would wash their hair, a process referred to by salon staff as 'singling out' (*dandiao*), a process that seemed to particularly appeal to male customers and had certain parallels with how hostesses are selected by men in karaoke parlours (Zheng 2009: 110).

Though physical attraction was an important factor in influencing a customer's selection of assistant, there might be perceived benefits other than just gratification. One senior male hairdresser at another hair salon explained of Masterpiece Cuts services that naturally, if customers were to have an attractive assistant wash their hair and give them a massage then their 'mood would be good' (*xinqing hao*). The transformative effect that receiving the treatment from such an assistant might have on one's mood also finds parallels in Zhang's (2007) description of the use of Chinese medicine to transform emotions. In Zhang's comprehensive ethnography of Traditional Chinese Medicine practices in a Beijing hospital, she details the way in which different types of emotions are understood to be linked to the five organs (*zang*) of the viscera, and in turn the five phases (*wuxing*). Zhang shows how doctors prescribe herbal medicines in order to treat underlying emotional disorders by attempting to restore the appropriate balance of emotions in the body.

The idea that the Ginger Art Physiotherapy treatment offered at Masterpiece Cuts should be both 'enjoyable' while at the same time being medicinal reflected a belief that the physiology of the body and one's temperament were mutually constitutive, and speaks to a range of recent research stressing the emotional characteristics of Chinese medicine. In arguing that there is a conjoint between enjoyment and Chinese medicine in the salon, it is appropriate to draw upon Farquhar's (2002: 27–28) description of the connection between

'sensuous experience' and 'healing', which she holds to be central to Traditional Chinese Medicine:

These bitter-tasting but fragrant medicines are techniques for producing or maintaining pleasant, comfortable, gratifying or interesting feelings in place of those that are painful, irritating or dull. (Farquhar 2002: 27)

Farquhar proposes that this focus on experiential pleasure encourages one to think of Chinese medical services in terms of fulfilling *wants* rather than *needs*. If the same logic can be applied to the salon, then the fact that any treatment might be especially pleasurable to its recipient should also make it beneficial to their health. Furthermore, Farquhar's description is useful in further highlighting the limits of how the 'medical gaze' can be applied to China. While the 'medicinal gaze' acts upon bodies, Farquhar instead describes Chinese bodies as 'seeking out' particular forms of experience and feelings. This is far more commensurate with what occurs in Masterpiece Cuts, and is a description that allows room for an understanding of the role of recipients of treatments in creating and sustaining the diffused medical system they are part of.

The gendered division of labour in Masterpiece Cuts mirrored a regimented division of space. These spaces were the 'rinse area' (*chongshui qu*) and three 'wash and protect' areas (*xihu qu*) (see Figure 2), which were the domains of the female assistants. The male hairdressers worked mostly in the haircut area (*jianfa qu*), which was itself further divided between the various price bands attached to different levels of hair stylists. Finally, there was also an 'iron and dying' area (*tangran qu*) where various hair treatments (i.e. perming, conditioning, dying) took place. In the same way that uniforms made the gendered differentiation of the workforce explicit, printed signs, raised areas and platforms in the salon also made the existence of these spatial divisions clear to the customer.

An interesting feature of this arrangement was the way in which certain areas, and therefore people and treatments, were made visible through the double doors that opened permanently onto the busy pedestrian street, whilst certain activities were hidden away from view within the salon's interior. Ginger Art Physiotherapy took place in one of the three wash and protect areas. The wash and protect areas were all darkened rooms, within the very interior of the shop, sited away from the view of the street. Within each area, the treatment beds were positioned in a row, with a further partition wall between every two to three beds. This meant that customers receiving Ginger Art Physiotherapy

treatments were not only obscured from the view of passers-by, but from customers receiving haircuts in the salon, and sometimes also from other customers receiving the same treatment.

The partitioning of wash and protect areas into smaller groups of beds meant that whenever a party of customers arrived together they were, wherever possible, allocated adjacent washing beds in the same portioned area, so that they were able to converse with each other whilst they received their treatment, and that their joint consumption was obscured from the view of the rest of the salon, and from other groups of customers who may also come to receive the treatment. Red Mountain Town's business community was a small one, and in addition to strong and close ties between many persons, there existed a fair share of animosity and competition between others. People were constantly worried about encountering groups of people they disliked on a night out.

Most of the customers who come to receive hair washing are males, with one employee estimating that the split is around 60% males to 40% females. From my own observations, the assistants were at their busiest in the evening after dinner, when businessmen, typically aged between 30 and 50 years of age, often arrived in groups of two or three to receive Ginger Art Physiotherapy. Indeed, one might speculate that this imperative to consume together had given rise to the architectural form of the wash and protect areas. By contrast, well-to-do women of the town tended to more typically come in to receive hair-washing treatments during the afternoon. The male staff of Masterpiece Cuts were uninvolved with the washing process, and only very rarely entered the wash and protect areas when they had an urgent need to speak to one of the assistants as she delivered a treatment.

The siting of the wash and protect areas in the salon's innermost spaces suggests a desirability for elements of massage and head washing to be obscured from public view. Perhaps this arises from the possible discomfort of individuals in being observed by others whilst receiving these treatments. Another potential explanation could be a cultural association between females, the interior and acts of cleaning or washing. Bray (1997: 129) traces a preoccupation with female interiority reaching back to imperial China, where weaving practices forced women to spend most of their time at home. Nonetheless, there were still important occasions in the salon when female assistants were predominantly on view. Often one member of the washing team stood by the door (particularly in the evenings) and acted as the 'greeter' (*yingbin*), welcoming customers entering the salon. Furthermore, during lax periods, both male and



female employees could frequently be found 'hanging out' in the area in front of the entrance to the salon (a practice not uncommon to other small-business premises in China).

In summary, the spatiality and habituated practices within the hair salon for delivering Ginger Art Physiotherapy employed gender to increase the perceived sensuousness of the experience, and with it amplify its apparent medical efficacy. However such attempts to use gender to increase the perceived sensuousness of salon experience necessarily infringed upon and challenged established ideals of morality. The staff of a small basic salon in another part of the town had a clear idea of the distinction between their salon and Masterpiece Cuts. One of the assistants started by remarking that both Classical Hair and Masterpiece Cuts were 'normal' (*zhengchang*) salons. They went on to explain that there were two types of hair salons, 'normal' and 'not normal' (*bu zhengchang*), elaborating that a 'not normal' salon would offer a number of 'special services' (*tezhong fuxwu*), a phrase which was a euphemism for sex services. While both of these salons were reputable businesses, the staff member explained that what differentiated their own salon from Masterpiece Cuts was that their competitors offered 'enjoyment' (*xiangshou*), whilst they defined their own service as merely 'doing hair' (*zuo toufa*). The fact that Masterpiece Cuts treatments are supposed to be pleasurable is a key to understanding its medicinal nature, but such pleasures were also jugged against, challenged and sometimes transgressed moral boundaries.

The connection between hair, hair salons and sex in China appears to be particularly ambiguous and tense. It is probable that this largely emerges from the frequent use of hair salons as a front for selling sex services throughout China, but especially in Yunnan (Hyde 2001: 155–156; Zhang 2006: 148). Even though Masterpiece Cuts only offered legitimate services, I would argue that in common with Bax's (2007) ethnographic observations of Shanghai hair salons, Red Mountain Town's salons were distinctly sensual and sexual spaces. However, whilst Bax argued that male hairdressers used the legitimised opportunity for bodily contact with females that their workplace presented in order to pursue women, this chapter instead emphasises how receiving these treatments, ideally from someone who is attractive might potentially increase the level of pleasure, and thus the perceived health benefits of the treatments. A further key contributing factor in making these salons into sexual spaces was the prohibition of romantic relationships between male and female staff members, which at least gave the appearance to customers that the salon staff were unattached. During the period of fieldwork two staff members started

dating each other, and when the manager discovered this the male chose to resign from his job in the salon in order to continue dating his girlfriend.

Such a relationship was perhaps most clearly manifest by the female assistants' own extravagant and ever-changing haircuts, which embodied the relationship that existed between sexual attractiveness and hair. During the lax periods in the morning, the male hairdressers would style the assistants' hair and provide them with dyeing treatments for free, or at very little cost. Here, parallels exist with Zheng's (2009: 188–189) account of hair preferences among karaoke bar hostesses in Dalian. Zheng explained that hostesses, many of whom also offered sexual services to customers, spent especially large amounts of money and time on their own hairdressing and hair styling, with two main objectives. The first objective was to disassociate themselves from the countryside; while the second aimed to increase their attractiveness to male customers, to the extent that they might change their hair almost daily so as to maintain a sense of novelty and ensure that their customers would not tire of them. Appearance and being seen is of considerable interest here. Foucault's (1973: 9) 'medical gaze' was directed on the body, with the intention of exposing the visible indicators of disease, however in the case of Masterpiece Cuts it is actually the customer who, by looking at the pleasing female assistant delivering the treatment, ought to be induced into a state of comfort and well-being. Here the medical gaze is effectively reversed, disease is not uncovered by the ocular, but agreeable visual experience is understood as being beneficial to the body.<sup>8</sup>

In the case of Masterpiece Cuts, the gendering of both labour and the salon space further confuses and supplements the medical claims of the treatment. On one hand, it seems clear that women's role as treatment-givers directly increases the sensuousness of the treatment, affecting and altering moods which accords with specific notions of Chinese medicine. At the same time, a sceptic could say that the medical characteristics of these treatments are superbly apologetic, legitimatising the service as being 'normal' both for the assistants delivering treatments, and the recipients of these therapies. I posit that the ambiguous moral boundaries of these treatments that tend to endear them towards being appropriated within hospitality situations.

What is the significance of women carrying out the work of washing hair in the salon? From my interactions with them they did not see their work as either oppressive or exploitative. In fact, the head of the treating team was proud of her 'special training', and her ability to remove the toxins that she said would enter customer's bodies owing to the chemicals used in perming or dyeing treatments

at the salon. It should also be noted that the majority of salon staff had little formal educational background: most had only completed middle school level of education, none had attended university or technical college. The training offered by the salon, and their own beliefs in the medical efficacy of the treatments that they provided helped them to be able to stake claim to the worthwhileness of their work. This is balanced by aspects of the team's work that, at least, makes allusions to the sexual. But even this, as has been demonstrated above, can be beneficial to health, as simply the act of looking at someone attractive was said to make people feel more relaxed and comfortable. The status of these assistants was deliberately ambiguous, at once encompassing 'professional' deliverer of medical treatment, the tool with which the treatment is given, but also the object of the 'gaze' of the patient. They point to a relationship not of a 'medical gaze' in the Foucauldian description, aimed at the dehumanised, objectified body. Rather, treatments such as Ginger Art Physiotherapy are much closer to Farquhar's description of 'bodily objects'. Instead of an ocular gaze, acting upon the body, Farquhar claims Chinese medicine relies on distributed and diffuse bodies, elements, ingredients and objects. The key is how they transform and affect each other. As Farquhar notes, Chinese medicine focuses on doctors and patients co-operating to 'produce an understanding of the illness' by combining 'ingredients of her memory and non-invasive "readings" of her body' (Farquhar 1991: 374). Such a collaborative approach can help us to understand the ability of these salon assistants to work with their customers in attempts to transform their bodily state and mood. As such, the medicinal treatment is also a social one, in which people work together to produce outcomes over people's health. However, this relationship is not limited to being dyadic in nature between female assistant and (usually male) customer, and instead more often lends itself to complex group hospitality situations.

### **Hosting in Salons: Sharing Senses**

Ginger Art Physiotherapy treatments are of further anthropological interest because of the way these ostensibly medicalised treatments were brought to bear on social relationships. Key to that is a realisation that the therapy is considered an appropriate way in which to host other people. Thus, during the fieldwork hosting between friends was often observed to be taking place in Masterpiece Cuts, whereas it was never seen to occur in the town's smaller salons.

One instance of the use of the salon as a means of hosting comes from Mr He, an aspiring local businessman in his late 20s. Mr He often hosted his

friends, employees and business partners, and was especially keen on arranging dinner banquets. Banqueting has been noted as being of importance in many accounts of modern Chinese hospitality (Yang 1994: 137–138; Kipnis 1997: 37–57; Farquhar 2002: 50; Pharoah 2005: 79–116). On several occasions after eating and drinking at local restaurants, Mr He would drive his guests across town in his 4×4 car to Masterpiece Cuts, where they would take a Ginger Art Physiotherapy treatment together. On one occasion Mr He stressed to his friends the restorative effect that he perceived the treatment would have on them, saying that it would ‘remove toxins’ (*paidu*) – such as the alcohol they had just drunk – from their bodies. Similarly, Mr He always chose to ‘single out’ the same female assistant when entering the salon. As the men lay next to each other, receiving treatments from the female assistants, Mr He created a jovial mood amongst his friends by directing flattering statements towards the assistant he was receiving the therapy from. Once they had finished their treatments, Mr He would proceed to the cashier’s desk and pay the bill for the treatments he and his friends’ had received.

One is tempted to compare Mr He’s hosting activities to Farquhar’s (2002: 122–163) analysis of the political and ethical dimensions of official banquets. Farquhar demonstrated how the salubrious nature of official feasts raised important moral issues for those involved. She argued that the social dilemmas of such feasting activities needed to be understood in terms of traditional Chinese bodily notions of excess and deficiency. In so doing, Farquhar attempted to show how the Chinese find a solution to the challenge which social eating poses in ‘determining the best, most respectful, and also most giving way of relating to each other’ (Derrida 1991 cited in Farquhar 2002: 124). Farquhar argues for an engagement with the specific flow of flavours, alcohol, dialogue and emotion (*ganqing*) in order to understand what she terms the ‘gustatory political gestures’ or ‘carnal-hierarchical romance’ that take place within these spaces (Farquhar 2002: 153). Farquhar also highlights the perceived medicinal nature of meals, showing how government officials dining at one restaurant believed the medicinal meals to be particularly ‘boosting’, and that these dishes would have the effect of making them ‘stronger’ (Farquhar 2002: 61).

Farquhar’s description makes clear both the perceived efficacious nature of eating what she terms ‘medicinal meals’, and that these meals often appear in highly socially charged hosting situations, such as official banquets. However, Farquhar’s ethnographic description focuses more on the way in which the flavours of the meal contribute to the social environment. Farquhar’s account plays down the significance of the relative roles, status and hierarchical

positions of hosts or guests in her descriptions of banquets. It is possible that the medicinal dimension of Ginger Art Physiotherapy treatments makes them somewhat analogous to the 'medicinal meals' described by Farquhar at official banquets.

However, in putting forward such an analogy, I would seek to add to Farquhar's analysis by making clear the ways in which hosting practices ricocheted into local paradigms of well-being. If one reconsiders Farquhar's banqueting under the rubric of hosting, in the way that Masterpiece Cuts was analysed, it would appear that the medicinal nature of both situations allows hosts to not only express a degree of concern regarding the health and well-being of their guests, but also affords them agency and legitimacy over the health and body of their guests.

Parallels also emerge in Hsu's (2005: 85) account of acute pain infliction upon patients with acupuncture needles. Hsu argues that the specific sensations experienced during treatments create an intense moment of synchronicity between individuals, resulting in the creation of social bonds and communities between individuals. Mr He and his friends may arguably achieve a similar kind of synchronicity, but with the important additional consideration that in this case their treatments are delivered at the same time, hopefully ensuring that each of them receive a similar gamut of sensations. Here we may also be drawn to make a comparison with Chau's (2008) description of the 'hot and noisy' (*re'nao*) atmospheres that unite temple festival attendees in rural China. Chau argues attendees are not passive receptors of such sensory experience, but are active in reproducing them. In hair salons the opportunity to produce specific sensual experience may take on a temporally displaced form: the debt created between host and guests during a specific treatment may be repaid through reciprocal treatments (or other sensory experiences) between group members on future occasions.

Pharoah (2005: 108–116) adopts a more critical position towards Farquhar's (2002: 145–153) discussion of the unifying effects of banqueting, drawing on Weberian concepts of hierarchy to argue that banqueting is chiefly a practice in establishing the respective hierarchical positions of the participants. The key here is that I do not see the two arguments as incompatible. After all, it requires a large amount of cooperation to establish even the most authoritarian hierarchy.

As shown in the case of Mr He, this form of hospitality demonstrates a host's ability to care for his friends' well-being, thereby implying that he is fit for the role of benefaction – that he is a good partner to whom his friends can tie their

homes, families and businesses. By imitating the hospitality of the home in the commercial sphere of the salon, Mr He expresses his commercial ability to provide for the well-being of potential business partners, enticing them into becoming 'guests' of his entrepreneurial endeavours.<sup>9</sup> The free capital enterprise which is often conceived of in the West as being external to the person,<sup>10</sup> finds itself in an *in situ* cosmological positionality in Red Mountain Town, and one seen to encompass the whole person.

## Conclusion

While one may be tempted to dismiss an inquiry into hair salons as trivial, this paper has shown that treatments such as Ginger Art Physiotherapy very much accord with Miller's (2005: 2–3; 2009: 16–22) concept of 'depth ontology'. Speaking in relation to clothing, Miller argues that Western thought possesses a tendency to view the cultivation of surfaces as being intrinsically superficial, instead privileging an assumed 'real self' that is held to lie 'deep inside' a person. Miller (1994) counters this with the example of Trinidadians, who he claims perceive the real person as residing on the surface. The case of Masterpiece Cuts has demonstrated that the treatment's concern with style and appearance is but a small part of the total scope of these services. The treatments do not act solely at the surface of the body, but a large part of the efficacy is concerned with working on the body's interior. Furthermore, the paper has demonstrated the clear interconnection between internal physiology, and external, expansive sociality. Such treatments, although on first-glance indulgent and directed at what might be perceived as pertaining to an 'individualist self' are, in fact, especially social in nature and are thus deemed an appropriate means by which to deliver hospitality.

Masterpiece Cuts became an important site in which discourses of Traditional Chinese Medicine were reproduced and acted out through advertising, the layout of the salon space, foodstuffs, medicinal shampoos, heat and physical action on the body. These actions drew on a pool of common knowledge of Chinese medicine held by customers and staff alike. The fact that medical ideologies could be located in such a diffused locales and places encouraged a consideration of the similarities between medicine as experienced in the salon and Foucault's (1973) notion of the 'medical gaze'. However, while the medical gaze has been a useful analogy to work with in order to think about how medicine is dispersed throughout different sites, this paper has found it to have limits when used in the context of Masterpiece Cuts, owing to the markedly different principles that underlie Chinese medicine.

Rather than a medical gaze acting on bodies, this research has emphasised the sensuousity of these treatments that modified, adjusted and heightened senses. The paper went on to describe how this was amplified by mostly male customers receiving the Ginger Art Physiotherapy treatment from female assistants, highlighted through spatiality, uniforms and division of labour in the salon. Instead this paper found much more in common with descriptions of Chinese Medicine that focus on the objects and processes of medicine (Farquhar 1991). The case of Masterpiece Cuts suggests that such descriptions ought to be furthered by examining the way in which these objects and processes may appear in apparently non-medical domains. Doing so would present the possibility of reaching an understanding of Chinese medicine *in situ* in people's everyday lives, with the possibility of a scope as expansive as that afforded by the concept of the medical gaze.

Furthermore, the kind of diffused understanding of Chinese medicine proposed in this paper allows for greater exploration of the ways in which medical ideals may interact with other aspects of human behaviour that would perhaps be overlooked in pure studies of the clinic. The ethnographic example of Mr He highlighted how these medical ideals were appropriated into hospitality situations, and how joint sensual experience acted to create and strengthen emotional connections between friends. Although it was never entirely clear as to how certain my friends were over the degree to which the treatments might actually have worked, in the end, any curative outcomes of such treatments may be less important than the social ones. Whether or not the therapies are in truth 'medicine', in the Western understanding of producing a successful treatment for a specific illness, is not the issue here. Indeed, this paper has highlighted the failings of dualist medical structures present in many Western anthropological interpretations, and demonstrated that in Masterpiece Cuts the sense of a treatment being beneficial to one's well-being here endears these treatments to being of social value in hospitality situations.

By proposing the term 'medicinal hospitality', this paper attempts to add to recent calls for a revitalisation in the study of hospitality in anthropological theory. It is fortunate that in Red Mountain Town (as with much of China) the division between local concepts of well-being and daily practices, including hospitality, is very thin. As such, what has been observed in Masterpiece Cuts appears to be a particularly strong example of how hospitality practices seem to coalesced concerns over, and attempts to exert influence upon the health of others. Thinking about the medicinal aspects of hospitality practices forces

a consideration of the bodies, substances and processes involved in hosting events, in addition to the persons that enact them. As such, it offers the possibility to trace the connections and points of interaction between structural forces and systems of power, while remaining grounded to the material, emotional and sensual. Armed with the prospect of medicinal hospitality as a way of understanding such situation, it is possible to return to the poster that graced the walls of Masterpiece Cuts, and its invitation to ‘wash with Ginger Art, wash to health’, and in the process realise more fully the multitude of senses and sociality that this invokes.

### Acknowledgements

I am incredibly grateful to Aaron Parkhurst, Daniel Miller, Rebecca Empson, Timothy Carroll and the anonymous reviewers from this journal, all of whom very generously provided a number of insightful comments on draft versions of this article. My thanks also go to Marc Jarratt who helped to produce the floor plan illustration from my original fieldnotes.

### Funding

This research would not have been possible without the help of an Economic and Social Research Council Doctoral Studentship award.

### Notes

1. I spent eighteen months carrying out ethnographic fieldwork in this town between September 2009 and March 2010 for my PhD research (McDonald 2013). In order to preserve the anonymity of the individuals who participated in this research, all personal, place and business names have been altered.
2. Here wind refers to the one of the ‘six excesses’ perceived in Chinese medicine to cause illness: wind, cold, heat, dampness, dryness and fire (Zhang 2007: 79).
3. The character *wu* can represent the colour black. Some Red Mountain Town people expressed a belief that black hair was an indicator of one’s health. Similarly, Farquhar (2002: 85) recounts the storyline of Chinese revolutionary opera *White-Haired Girl*, in which a young woman’s hair turns white owing to nutritional deficiency. Zhang’s (2007: 65) study of emotions in Chinese medicine also notes the existence amongst her informants of the perception that the emotional state of worry can turn one’s hair grey.
4. A slight paradox, considering that most of the customers receiving Ginger Art Physiotherapy treatments were males (to be discussed later).
5. In the treatment area, which was staffed by two people (a male and a female), the strictly enforced uniform regulations broke down. The male staff member, in contrast to all the other hairdressers (who wore white) wore a non-regulation black shirt.
6. At Masterpiece Cuts there was one occasion when it was acceptable for men to wash hair: if they were members of the treating team. This team, which was of mixed gender, occasionally washed the hair of customers who were having their



- hair dyed or straightened if the female hair-washing assistants were too busy delivering Ginger Art Physiotherapy treatments, and it was necessary for the time-sensitive treatments to continue being delivered. However, such washing always took place in the 'rinse area of the salon', and never in the 'Wash and Protect Areas' (see Figure 2).
7. Interestingly, some of the herbal ingredients above, such as the privet fruit, and the 'soup for internal harmony', were supposed to be 'for women', reflecting what Farquhar (2002: 60) refers to as the 'gendered character' of herbal medicinal ingredients.
  8. The local phrase 'nurturing the eyes' (*yangyan*) is of significance in understanding the state of comfort that may be induced by the act of looking. The phrase describes activities that are believed to be beneficial to the health of eyes. They include mandatory eye exercises carried out in Chinese schools (Kipnis 2011: 115), but also participants explained that looking at other pleasing landscapes, scenery or forests could similarly help to nurture the eyes. One friend even claimed that his faulty television, which displayed all images in an unusual green hue, made it especially nurturing for the eyes.
  9. See McDonald (2013: 271–274) for further explanation of how companies can be thought of as forms of houses.
  10. Or, as is shown in the case of corporate legal personality in Western law, external to the person, and yet capable of being endowed with rights and duties in the same manner as an individual (Dewey 1926).

## References

- Bax, Trent Malcolm. 2007. *Sex and Work in the City: Shanghai's Service Industry and the Chinese Modern Project. An Ethnography of Chinese Hairdressers and Australian Blokes* (MPhil thesis). The University of Hong Kong.
- Bray, Francesca. 1997. *Technology and Gender: Fabrics of Power in Late Imperial China*. Berkeley: University of California Press.
- Candea, Matei & Giovanni da Col. 2012. The Return to Hospitality. *Journal of the Royal Anthropological Institute*, 18:S1–S19.
- Chau, Adam Yeut. 2008. The Sensorial Production of the Social. *Ethnos*, 73(4):485–504.
- Derrida, Jacques. 1991. 'Eating Well' or the Calculation of the Subject: An Interview with Jacques Derrida. In *Who Comes after the Subject?* edited by Eduardo Cadava, Peter Connor & Jean-Luc Nancy. pp. 96–119. New York, NY: Routledge.
- Dewey, John. 1926. The Historic Background of Corporate Legal Personality. *Yale Law Journal*, 35(6):655–673.
- Farquhar, Judith. 1991. Objects, Processes, and Female Infertility in Chinese Medicine. *Medical Anthropology Quarterly*, 5(4):370–399.
- Farquhar, Judith. 2002. *Appetites: Food and Sex in Postsocialist China*. Durham, NC: Duke University Press.
- Farquhar, Judith & Qicheng Zhang. 2005. Biopolitical Beijing: Pleasure, Sovereignty, and Self-Cultivation in China's Capital. *Cultural Anthropology*, 20(3):303–327.
- Foucault, Michel. 1973. *The Birth of the Clinic: An Archaeology of Medical Perception* (A. M. Sheridan, Trans.). London: Tavistock.

- Foucault, Michel. 1979. *Discipline and Punish: The Birth of the Prison* (A. Sheridan, Trans.). Harmondsworth: Penguin Books.
- Haley, Usha C. V. & George T. Haley. 2006. The Logic of Chinese Business Strategy: East Versus West: Part II. *The Journal of Business Strategy*, 27(2):43–53.
- Hsu, Elisabeth. 2005. Acute Pain Infliction as Therapy. *Etnofoor*, 18(1):78–96.
- Hsu, Elisabeth. 2008. The Senses and the Social: An Introduction. *Ethnos*, 73(4):433–443.
- Hyde, Sandra Teresa. 2001. Sex Tourism Practices on the Periphery: Eroticizing Ethnicity and Pathologizing Sex on the Lancang. In *China Urban: Ethnographies of Contemporary Culture*, edited by Nancy N. Chen, Constance D. Clark, Suzanne Z. Gottschang & Lyn Jeffery. pp. 143–162. Durham, NC: Duke University Press.
- Kastner, Theo Jeorg. 2004. *Chinese Nutrition Therapy: Dietetics in Traditional Chinese Medicine (TCM)*. Stuttgart: Thieme.
- Kipnis, Andrew B. 1997. *Producing Guanxi: Sentiment, Self, and Subculture in a North China Village*. Durham, NC: Duke University Press.
- Kipnis, Andrew B. 2011. *Governing Educational Desire: Culture, Politics, and Schooling in China*. Chicago, IL: University of Chicago Press.
- Liu, Chongyun & Angela Tseng. 2005. *Chinese Herbal Medicine: Modern Applications of Traditional Formula*. Boca Raton, FL: CRC Press.
- McDonald, Thomas N. 2013. *Structures of Hosting in a South-Western Chinese Town* (PhD thesis). University College London.
- Miller, Daniel. 1994. Style and Ontology. In *Consumption and Identity*, edited by J. Friedman, pp. 71–96. Chur: Harwood Academic.
- Miller, Daniel. 2002. Coca-Cola: A Black Sweet Drink from Trinidad. In *The Material Culture Reader*, edited by V. Buchli, pp. 245–264. Oxford: Berg.
- Miller, Daniel. 2005. Introduction. In *Clothing as Material Culture*, edited by Susanne Küchler & Daniel Miller, pp. 1–20. Oxford: Berg.
- Miller, Daniel. 2009. *Stuff*. Cambridge: Polity Press.
- Moerman, Daniel E. 2002. *Meaning, Medicine, and the Placebo Effect*. Cambridge: Cambridge University Press.
- Pharoah, Robin. 2005. *Visions of Authority: Leadership, Hierarchy and Power in Central China* (PhD thesis). London School of Economics and Political Science, University of London.
- Prendergast, Mark. 1993. *For God, Country and Coca-Cola: The History of the World's Most Popular Soft Drink*. London: Phoenix.
- Tian, Kelly & Lily Dong. 2010. *Consumer-Citizens of China: The Role of Foreign Brands in the Imagined Future China*. London: Routledge.
- Yang, Mayfair Mei-hui. 1994. *Gifts, Favors, and Banquets: The Art of Social Relationships in China*. Ithaca, NY: Cornell University Press.
- Zhang, Heqing. 2006. Female Sex Sellers and Public Policy in the People's Republic of China. In *Sex and Sexuality in China*, edited by Elaine Jeffreys. pp. 139–158. Abingdon: Routledge.
- Zhang, Yanhua. 2007. *Transforming Emotions with Chinese Medicine: An Ethnographic Account from Contemporary China*. Albany: State University of New York Press.
- Zheng, Tiantian. 2009. *Red Lights: The Lives of Sex Workers in Postsocialist China*. Minneapolis: University of Minnesota Press.