

UC San Diego

UC San Diego Electronic Theses and Dissertations

Title

Where Do I Place My Body and Heart: Embodiment and Emotion across Personal and Historical Transitions in Modern China

Permalink

<https://escholarship.org/uc/item/0hd7s45b>

Author

Wu, Hua

Publication Date

2021

Peer reviewed|Thesis/dissertation

UNIVERSITY OF CALIFORNIA SAN DIEGO

Where Do I Place My Body and Heart: Embodiment and Emotion across Personal and Historical
Transitions in Modern China

A dissertation submitted in partial satisfaction of the
requirements for the degree Doctor of Philosophy

in

Anthropology

by

Hua Wu

Committee in charge:

Professor Thomas Csordas, Chair
Professor Janis Jenkins, Co-Chair
Professor Claire Edington
Professor Richard Madsen
Professor Steven Parish

2021

The dissertation of Hua Wu is approved, and it is acceptable in quality and form for publication on microfilm and electronically.

University of California San Diego

2021

DEDICATION

I dedicate this dissertation to Victoria Cheng (1995 to 2019), known to us as Huizi, to all her loved ones and friends. I shall carry your memory and unfinished dreams to the ever-receding horizon.

And to my grandfather, Wu Shijue, who had been my initial and forever mentor and inspiration. He showed me the meaning of humanity, resilience, and agency. After 25 years of imprisonment, he lived and died with a deeply seated sense of hope for a better China and a better world.

EPIGRAPH

Wherever my body and heart are at peace, there my homeland shall be

Bai Juyi

Tang Dynasty

772 AD – 846 AD

TABLE OF CONTENTS

<i>Dissertation Approval Page</i>	<i>iii</i>
<i>Dedication</i>	<i>iv</i>
<i>Epigraph</i>	<i>v</i>
<i>Table of Contents</i>	<i>vi</i>
<i>List of tables</i>	<i>x</i>
<i>List of figures</i>	<i>xi</i>
<i>Acknowledgements</i>	<i>xii</i>
<i>Vita</i>	<i>xiv</i>
<i>Abstract of the Dissertation</i>	<i>xv</i>
Chapter 1 Is There Any Answer in this Silence	1
1.1 Introduction: Exploring Lived Experience through Embodiment and Emotion	5
1.1.1 Structuring Agency through three modes of body-world interactions.....	8
1.1.2 Why Emotion?	17
1.1.3 Language Use.....	21
1.2 Methodology: A Participant-Centered, Bottom-Up Approach	27
1.2.1 Recruiting Participants Across Generational Cohorts.....	28
1.2.2 Talk the talk: person-centered ethnographic interviews	30
1.2.3 Walk the walk: participation observation	33
1.2.4 Transgenerational Trauma and Experience.....	36
1.2.5 Studies on social change in China and east Asian societies.....	39
1.2.6 Mental health and psycho-boom as a global trend.....	42

1.2.7	The trajectory of chapters.....	43
Chapter 2 <i>The Rootless Pain I Cannot Name</i>		47
2.1	Introduction: Mental Health Concerns in People’s Daily Lives	48
2.1.1	Not Just a Generational Chasm: Emotions across social changes and their psychological impact	50
2.1.2	Hunger: the Huang Family Legacy	55
2.2	The Myth of Filial Piety: Emotional community and the construction of personhood under a transforming patriarchal power hierarchy.....	65
2.2.1	Yumei’s Nightmare	73
2.2.2	Trans-generational Trauma under Dissolving Social Structure Across Historical Transitions	78
2.3	Conclusion	80
Chapter 3 <i>A Field of Happiness</i>		83
3.1	China’s Sent-Down Youth	83
3.1.1	Team Three Class Six: A Production Team at Happiness Field.....	89
3.1.2	A Field of Happiness: Re-visiting the cadre school in Eternal County	91
3.2	A Place of Trauma.....	95
3.2.1	Jianguo	97
3.2.2	Meiling.....	101
3.3	Conclusion	104
Chapter 4 <i>Eclipse</i>.....		107
4.1	Introduction	107
4.1.1	Temporality, Intersubjectivity, and Psychopathological Experience of Time.....	110
4.2	Echo.....	114
4.2.1	Why don’t you jump down?.....	116

4.3	Illness Experience Analysis	117
4.3.1	Dementors, Eclipse, and Healing	120
4.4	Healing: Rhetorical Transformation in Temporality and Personhood Through Nurturing Intersubjective and Intercorporeal Experiences	121
4.4.1	Firework in Daylight	123
4.5	Conclusion	129
	Chapter 5 Bodies as Arenas	132
5.1	Introduction	132
5.1.1	“Jiang Shan Jiao, are you still a virgin”?	132
5.2	From Body to Flesh: Addressing embodiment and experience of women in a patriarchal society	135
5.2.1	Naomi: There is a hole in my heart that could not be filled.....	138
5.2.2	Transitional Phenomena and the Rebellious Flesh	143
5.3	Sexuality and Gendered Experience in Patriarchal Society	149
5.3.1	Quan: The Undesirable Passion of the Desiring Flesh.....	149
5.3.2	Performing Gender, Becoming Flesh.....	154
5.3.3	The desirable trinity: mother-wife-daughter and the fetishized female flesh	156
5.4	Conclusion	160
	Chapter 6 Solving my Problems or Fixing my Life?	163
6.1	Introduction	163
6.1.1	Structures of Agency: A Recap in understanding body-world interactions.....	165
6.2	Professionalism and its discontent: A Mental Health Professionals’ Perspective .	169
6.3	Illness Experience and the Dialogue of Healing: Patients’ perspectives	175
6.3.1	Claire: My life happened to me, and I happened to psychotherapy	176

6.3.2	The Burden of Care and “Healthism” in Everyday Lives.....	178
6.4	Conclusion	181
Chapter 7 Conclusion: Horizon		185
7.1	Case Forty-One	185
7.2	The “Post”-Pandemic Era.....	187
7.2.1	“Finding the certitude of existence”: human struggles across multiple temporalities through embodiment	189
7.3	Horizon: Heading towards a realigned temporal subjectivity	193
7.3.1	Disentangling from previous intersubjectivity and traumatic status with an elaborated horizon	196
7.3.2	Strong social bond, emotional co-experiencing, and an ambiguous but open horizon.....	199
7.3.3	Evolving intersubjectivity, fluctuating health status, with an elaborated but constricted horizon	201
7.3.4	Dynamic intersubjectivity, renewed body-world interactions, and an open and distant horizon	204
7.4	The Journey Continues	207
References.....		211

LIST OF TABLES

Table 1: Core Interlocutors grouped by genders and age cohorts.....	29
---	----

LIST OF FIGURES

Figure 1 The remaining part of the Sent-Down Youth's Dorm at Happiness Field.....	93
Figure 2 The hut that triggered Yumei's to traumatic memory.....	94
Figure 3 Yumei looking at the abandoned field that the team once worked on.....	97
Figure 4 sand-play demonstration of social relations. The lower righthand corner indicates early childhood experience.	182
Figure 5 demonstration of intention: the patient indicates her desire to involve in a romantic relationship but was recovering from her trauma of growing up in a single-parent family and sexual assault.....	183
Figure 6 Experiencing time for a depressive patient. The artist Xiao Ka indicated that the entire room could be seen as the body of a patient.	184

ACKNOWLEDGEMENTS

I would like to express my deepest gratitude to my mentor, Professor Thomas Csordas, for his wisdom and guidance throughout my graduate school. Every conversation we had opened a new horizon for my intellectual field. I am also deeply grateful for Professor Janis Jenkins, who not only provided me with theoretical and methodological instructions, but also emotional support and constant encouragement. I would like to express my appreciation to Professor Claire Edington, who opened my perspective in understanding the history of science, medicine, and psychiatry in Asian cultures and introduced me to a vibrant circle of like-minded scholars. Special thanks to Professor Steven Parish, who not only introduced me to ethnography and psychological anthropology, but also provided spiritual and emotional support for an international scholar alone in a foreign country. I cannot begin to express my thanks to Professor Richard Madsen, who had such faith in me not only as a scholar but also as an independent thinker. He deeply appreciated and empathized with my personal experience. I am deeply indebted to Professor David Jordan, who financially supported all my fieldwork in China through his generous scholarship.

Many thanks to all my participants and colleagues in China. For Professor Pan Tianshu from Fudan University, without whose genuine support my fieldwork could not proceed with such speed. Special thanks to Mr. Lin Jianmin, for helping me organizing my ethnography with the Sent-Down Youth and supporting me throughout the process. Particularly helpful to me during this time were Tianzi Chen, my research assistant, and Duan Mengke, my dance coach who helped me explore the potential and possibility of my body through Ballet.

Lastly, I would like to express my utmost gratitude to my mother, who not only nurtured me to be who I am today but also remained my most trusted friend. Thank you for always have such faith in me and taught me how to be brave even in the darkest moments.

Chapter 3 has been accepted and in progress for publication in *Traumatic Pasts in Asia: History, psychiatry, and trauma from the 1930s to the present*. Mark S. Michael & Hans Pols (eds). Berghahn Books. *In Progress*.

VITA

2012 Bachelor of Arts, Simon Frazer University

2013-2014 Master of Arts, The Chinese University of Hong Kong

2018-2021 Teaching Assistant, Lecturer, University of California San Diego

2021 Doctor of Philosophy, University of California San Diego

PUBLICATIONS

“A Field of Happiness: Space, Trauma and Dealing with Existential Precarity of the Sent-Down Youth in China” in *Traumatic Pasts in Asia: History, psychiatry, and trauma from the 1930s to the present*. Mark S. Michael & Hans Pols (eds). Berghahn Books. *In Progress*.

FIELDS OF STUDY

Major Field: Psychological and Medical Anthropology

ABSTRACT OF THE DISSERTATION

Where Do I Place My Body and Heart: Embodiment and Emotion across Personal and Historical Transitions in Modern China

by

Hua Wu

Doctor of Philosophy in Anthropology

University of California San Diego, 2021

Professor Thomas Csordas, Chair

Professor Janis Jenkins, Co-Chair

Living through radical historical and social changes can be challenging for people as they go through personal transitions and developmental stages across the life-course. Research has shown that living through disruptive social changes influences one generation's health and wellbeing and those of generations to follow. The research shows how the need to navigate social transitions shapes people's mental health and wellbeing. Using cultural phenomenology as a theoretical foundation, I focus on lived experience to integrate psychological and physiological processes. I embed life story narrations and daily activity observations in a larger socio-historical context to discuss how people from various age cohorts who grew up in vastly different historical periods orient towards a future of uncertainty.

In this context, I define embodiment as a way people use their bodies to interact with the world and base their sense of self on the processing and expression of bodily sensations, social relations, and

existential concerns. I identify and illustrate three major themes that are both culturally specific values and under a global scope:

1. People could no longer resolve their existential crisis by merely relying on the traditional kinship system and moral obligations, which results in their exploring and establishing new ways of communication and interactions.
2. Surviving through radical social structural changes, the ideological conflicts across generational groups became challenging for people to live through uncertainty at the current life stage and towards the future. Descendants from families who experience historical trauma are more likely to experience mental health issues, especially across personal or social transitions.
3. There are gaps between the mainstream cultural norms and how people are encouraged to fulfill their aspirations and ideals. The existing patriarchal system and neoliberal cultural trends cannot satisfy people's growing needs for wellbeing or resolving existential tensions. Vulnerable social groups, especially women, suffer more from the neo-Confucian cultural systems.

This dissertation is written at the cross-section of phenomenological anthropology, Chinese studies with broad East Asian cultural impact, and global mental health. The analysis and findings will help understand mental health and psychological wellbeing across the life course, focusing on cross-generational impact and socio-historical transitions.

Chapter 1 Is There Any Answer in this Silence

Prelude: The darkest day in my life

September 26, 2019.

“Are you guys in?”

“Yes.”

“Do you see her?”

“Oh my god...”

“Please open up the camera. I want to see Victoria! Is she okay? Please tell me what is going on.”

“She is lying on the floor. There are empty pill bottles everywhere...I do not dare...we are calling the police and the ambulance.”

“Please let me see her!”

“It’s bad... I am sorry. I’m really... She is not breathing, Miranda.”

“What are you saying? Put some blankets on her! Maybe she is cold!”

“We don’t dare to...Miranda. Her fingertips are all blue. I don’t think she is still alive...”

It was the longest ten minutes of my life. Or was it fifteen minutes? Everything after was blurry in my memory. The police and medical experts called the time of death right there on the scene. Twenty-four hours later, her family claimed her body, turned down an autopsy, somehow ruled out suicide, took her home to Wuhan. One week later, they told me she was buried in her hometown that only I knew she hated. Victoria was like a little sister that I never had as a Chinese singleton born after the One-Child Policy. I have known and lived with her since 2014. She was twenty-four years old by 2019. Thirteen

months later, when I was typing this up on my computer, those flashbacks rushed inside my body like a thunderstorm. The memory burnt in my body. It was not a metaphor.

The memory burnt in my body. It was not a metaphor. My throat would still cramp up. My stomach would twist up into a tight knot. I felt heartburn every time I process the fact that she was gone. I could feel the burning acid at the back of my throat. My fingers would go cold no matter how many layers of clothes I put on in the mild Californian November. The sunlight through my large window shines on my writing desk without warmth. I can feel my hand resting on my laptop, my feet firmly placing on the carpet. However, my vision was blocked by Victoria's body spreading on the tiny little rented room in Shanghai, 500 feet from its largest Mental Health Institution. On September 26, 2019, the scar would hurt fresh and anew randomly as I proceeded with my daily routine. Being quarantined in my dorm throughout most of 2020 forced me to face the past that would not fade when the future would not come into vision. Occasionally, time seemed to stop, leaving me in utmost silence, as if I shouted out questions into an abyss.

This research explores the bodily and emotional experience as people go through personal and historical transitions, emphasizing mental health and psychological well-being, especially in dealing with transgenerational trauma, conflicts, and the reshaping of body-world relationships when the social structures and cultural trends shifted at rapid speed. The precariousness that people face on an everyday basis in China goes a long way back and is deeply embodied, manifested in ways that are both personal and identifiable as patterns across age, gender, and social groups. When I set out to do my fieldwork in 2018, I certainly did not foresee the coming of a series of radical transitions globally and locally, influencing all the people I knew. As I traveled across cities that I have grown up and attended activities, gatherings, and followed my participants around in their daily lives, more people volunteered to join my research because they found a willing and attentive listener as their life and mental health status became jeopardized, or when they were going through difficult times. Victoria started as my friend but volunteered to participate because she was confused by the sudden change in her health status. We spent

four years in California as roommates and friends. She was intellectually mature beyond her age, sharp in mind, extremely talented, and had a kind, pleasing, sometimes timid personality. Her depression and anxiety began to exacerbate after she graduated from UCSD and pursued a linguistic master's degree in one of the US's top universities. Isolated, struggling with her academic life, and continued to have a complicated relationship with her family, she began to lose tremendous weight, had insomnia, and began to experience other symptoms of depression. She had to quit graduate school and returned to China halfway through the winter quarter, but her symptoms exacerbated while staying with her family. In the last six months of my fieldwork, Victoria moved to Shanghai and volunteered to join my research and became my research assistant, helping me with my transcripts, sharing meals with my family, and spending time trying to figure out what was going on with her body and mind. I accompanied her to counseling sessions, sand-play therapies, neurologist visits, and physical therapy. When I was leaving China and wrap up my fieldwork in China, Victoria was planning to go to Japan for culinary studies, a decision that shocked and confused her family. I supported her to pursue a path that would give her heart content. I believed that she was getting better with her depression. I urged her to keep me posted while I was leaving China.

Twenty-four hours before her sudden death, she called me at 3 am Beijing time. She was upset, disoriented, and went through raging thoughts and emotions. Earlier that week, she was worried that her life would not yield any meaning, and she could not financially support herself. Coming from a middle-class family did not bring her any sense of comfort. She tried several part-time jobs in a month but was too anxious during everyday social interactions. During the day, she became very disoriented. While she was texting me with incoherent thoughts and ideas, she was on the wrong subway several times and could not seem to find her way home. I became concerned about her status and contacted her father in Wuhan. He told me he was on a trip to an important business meeting. A sudden sense of irritation quickly accelerated as fury rose in me that I felt a pain in my chest. *Your daughter could be dead.* I remember

thinking to myself. *And you are telling me you are on the way to a business meeting? After you told me you would do anything for Victoria?*

I lost contact with her after she fled from a physical therapy appointment. She contacted my mother and said she had a terrible headache. Thousands of miles from Shanghai, I was the one who sent a friend to check on her, contacted her landlord, called the police, and informed her family about her death. Until this day, as I am typing down her story, I could not gather enough courage to face her family. I do not know how I feel about her parents. Losing their only child must be the most horrible thing in the world, and I am too sad to be angry at them. However, knowing how lonely Victoria felt since childhood, understanding everything she told me but could not communicate with her father, I have seen the worst outcome of untreated transgenerational trauma and failing intimate relationships in a contemporary Chinese family. Her father, who was physically and emotionally abused as the youngest child in his own family, was almost abandoned due to poverty and was reminded all his life that he should be grateful his parents reclaimed him out of mercy. He could not regulate his own emotion and had trouble understanding his own daughter with unrecognized and harbored resentment. On top of untreated intergenerational trauma, the lack of emotional support and mutual understanding are problems I will explore with similar cases presented in the following chapter.

A smart, highly educated young woman, aged 24, died alone in her rented room 500 feet from China's best mental health institution. Even after her death, her parents still did not understand why their daughter was not happy. Growing up in entirely different situations and cultural trends, they did not understand her hobbies, ignored her love of arts and music, dismissed her seeking comfort in cooking and preparing food to combat the transgenerational trauma of starvation and deprivation of enjoying life. This utter lack of understanding was so tragic that witnessing it changed my perspective and my project's meaning. In writing up this dissertation, exploring the lived experience of trauma, suffering, resilience, meaning making across personal, generational, and historical transformations, I see myself carrying on with her legacy. In becoming an ethnographer, I was trusted with many people's life stories. Though I

could not foresee tragic incidents such as losing my best friend or the extremely precarious conditions that many people, myself included, would go through due to the subsequent global pandemic, I always knew that this research would eventually touch upon existential crisis and meaning.

People are cultural animals and storytellers. When we look back into our personal history deeply embedded in the socio-cultural transitions that we experience daily but not always comprehensive for us as individuals, we tend to construct a trajectory out of our lives' nitty-gritty chaos. Since I heard of anthropology as a discipline as one of the very few Chinese international students pursuing a social science degree in North America, losing Victoria at the end of my fieldwork, to get stuck in the raging pandemic throughout the US, my perspective has certainly changed. My ethnography was, and always will be, a deeply personal project, which I composed with the people I cared for, and for the people, I shared my fate, fortune, and faith. It is a project writing at the intersection of existential contemplations, phenomenological anthropology, which documents lived experience (Csordas, 2002; Desjarlais & Throop, 2011; Jackson, 2014; Jenkins, 2015), and analysis of Chinese social changes and their influence on mental health. The participants I recruited continue to be a massive part of my life, and my colleagues and mentors provided me with academic and emotional support.

Most importantly, I dedicate this research to Victoria, not as an attempt to find out why she died, but to explore how she lived. Suppose this research can shed some light on how experiencing historical, social, cultural, and personal transitions influences how people understand their lives and themselves as they navigate ambiguous and precarious situations as history unfolds. In that case, I shall be content to say that I did not shy away from the responsibility of becoming an anthropologist.

1.1 Introduction: Exploring Lived Experience through Embodiment and Emotion

This project engages with contemporary Chinese people's lived experience across generational cohorts, paying particular attention to their life transitions that impact their physical and mental health as

they go through different stages in their lives. I intend to reveal the impact of experiencing radical historical transitions, cultural reformations, and precariousness on people's physical and mental health by studying bodily and emotional experience. Through ethnographic case studies from three generational cohorts, across people who were born from 1950s to 1990s, with a spectrum of physical and mental health status, I look at how unresolved, and under-discussed historical and social trauma passes down from one generation to the next. I explore how people navigate uncertainty and precarity during their transitional life stages. Through interview and participant observation, I analyze how people understand their past, present, and future based on the formation of their personhood, their interaction with people in their social networks, and the sensory and meaning processes. I use phenomenology as my theoretical framework and engage with three relevant concepts: 1) embodiment and exercising agency based on different modes of body-world interactions, 2) emotional expression in various forms under different social contexts and across groups, and 3) transitional lived experience across individuals' life course embedded in social changes. The phenomenological approach and intergenerational orientation allow me to explore people's lived experience both synchronically and diachronically, which I will articulate in the method section.

The core conceptual orientation is to use the embodiment as my methodological starting point. Using embodiment as a paradigm means I am taking people's bodily experience, bodily status, and how people use their bodies to interact with the social context as the foundation of their lived experience. I define a body as at once biological, individual, social, and political (Scheper-Hughes & Lock, 1987). Embodiment, translated from the phenomenologist Merleau-Ponty's work as "actualize in the body" (*ju shen* 具身) in Chinese, captures the fundamental mode of human existence as "being-in-the-world." This mode of existence simultaneously explains the existential immediacy as at once a temporally and historically informed sensory presence and engagement (Csordas, 1994). I quote Csordas's phenomenological analysis of using this concept as a starting point for ethnographic research:

Embodiment, in the sense I am using it, is a methodological standpoint in which bodily experience is understood to be the existential ground of culture and self, and therefore a valuable starting point for their analysis. (Csordas 1994: 269).

Bodily experience and embodiment form the foundation of this research. In Chinese and other East Asian societies, body and mind are not viewed as two separate entities. Therefore, it was appropriate to document and code people's lived experiences through embodiment. The impact of experiencing transitions on people's bodies and psychology is first and foremost grounded in the body. The phenomenological approach allows me to engage with how people understand, process, and communicate their experiences across different age groups, social contexts, genders, and cultural niches by observing and analyzing their bodily and emotional interaction with the world around them. I collect data through three significant ways: conducting person-centered, semi-structured interviews with my participants, documenting their life story narrations; participate in social activities with my participants, including going to reunions, trips, leisure activities and classes, therapy/hospital visits, and family gatherings; co-produce and collect non-verbal lived experience expressions, including art project, dance routines, meditations, and non-biomedical healing rituals such as Tai Chi, Yoga, massages, and religious prayers.

Throughout people's everyday lives, I view bodily sensation and verbal expression as equally important across social contexts. People pay attention to somatic experience, conditions, and well-being as a process of reflection or as social gestures of care. Cultural traditions such as placing actions above words in enhancing interpersonal bonds persists in Chinese people's lives today (Kleinman, 2020; Arthur Kleinman & Kleinman, 1991). When people go through difficulties or sufferings in their lives, people interpret emotional experience and bodily symptoms as one holistic process. Some even dismiss the emotional suffering and ignore their mental health until somatic symptoms manifest and interfere with their daily functions. As a fundamentally collectivist culture, the construction and organization of the self, the awareness of one's bodily boundary, and an individual's engagement with his/her environments are defined as a collection of one's social roles, interpersonal relationships, and the social impact of his or her behaviors. However, a set of social relationships, cultural positions, and, I argue, both produce and result from cultural practices, actions, and intentions (Lock & Farquhar, 2007). To anchor my analysis of contemporary Chinese people's self and lived experience in intersubjectivity is to study a set of concrete,

rather than abstract relationships that reveal more considerable socio-historical changes (Parish 2008). Since I pay specific attention to people's bodily experience and, most importantly, bodily interactions, I define intersubjectivity as the primary process of lived experience where two or more bodies are in relation (Csordas, 2002; Csordas, 2008). It is a circulation of consciousness and unconsciousness, during which all participants embody a specific version that they mutually construct. As I have defined the body as a primary entity where cultural practices start and sedimented, we can also understand intersubjectivity through wordless forms of intercorporeality. Thus, any reflections, actions, descriptions, and observations that directly occur on the body shall be seen as the primary source of my ethnography. The post-event verbal narrations and meaning-making processes is the secondary source that reveals endogenous processes and discourses.

Using intersubjectivity and intercorporeality as the foundation of personhood and reflection on subjective experience is particularly salient during transitional stages in personal lives and social changes. As people go through rapid social transitions, they often focus on changes in their bodily conditions, social relationships, emotions and intentions, and desires and discontent as they navigate changing policies, norms, and cultural trends. Through the concept of embodiment and how each individual navigates their social context and external world using different modes of body-world interaction forms the foundation of my understanding of lived experience, cultural transitions, and existential concerns in people's lives, and most importantly, the structure of agency as individuals lives through rapid social changes and personal transitions.

1.1.1 Structuring Agency through three modes of body-world interactions

As I explore the possible construction and experience of self and personhood, many interlocutors expressed their main concern and effort in constructing their structure of agency across personal and social transitions. How they felt helpless when they were deprived of choices, or how they struggled to achieve what they deemed important with or against cultural norms. Csordas has juxtaposing three scholar's intellectual topology of embodiment as the "indeterminate methodological field" and thus

sketch out the theoretical structures of this field by defining “complementary aspects of the relations of our bodies to the world, specifically with respect to how they deal with the issue of agency” (Csordas in Mascia-Lee, 2011:138). These three complementary aspects respectively form the locus of agency at the level of existence, in habitus, and through power relations. How people exercise their agency thus depends on people’s intentions, social practices, and engaging with discourses. These body-world interactive modes therefore form the foundation for my theoretical approach and data analysis as I sort through people’s life story narrations, everyday social practices and activities, management of social relations and their reasoning and articulation as they go through ideological transitions and discourse. From these three perspectives, I would be able to understand how people intentionally orient into the changing social contexts, how they exercise their agency through social practices and establish habitus as the previous social networks and cultural niches dissolve, and how people react to ideological clashes from Socialist era to Post-Socialist era, in market economy, under neoliberal political and cultural trends, or dealing with a highly authoritative government, institutions, and patriarchal power structure.

1) Merleau-Ponty’s Being-in-the-world mode of existence: Body’s intention through struggles in life.

I am especially interested in people’s intentions, meaning-making processes, and reflections on their behaviors, bodily sensations, and emotional patterns as they go through these struggles, even if these things do not always come with narrations. How people orient towards the world around them in the immediate moments captures my attention the most. On top of using the embodiment as a paradigm to understand people’s lived experiences as they go through personal transitions embedded in China’s rapid social changes, I analyze the data I gathered using the phenomenological theoretical structures consisting of three modes body-world interactions.

I cannot stay in Zhejiang province. Not just I cannot stay with my family or with my parents. I cannot even stay in this city. When I go back home from where I work, I begin to experience pain as the car enters the city. When I stay at home, I cannot fall asleep. I would have a night terror. My whole body would go rigid and numb. When I was staying in my childhood room, my body became so rigid at night that I did not know

if I had a panic attack, awake, or asleep. All I knew was that I was eventually losing control over my limbs as if there was a huge rock placed on my chest. Last year I stayed with my father to accompany him because he did not want me to work in another city. He would think he raised a daughter in vain if I was not living with him, or at least in the same city. When I stayed home with him, he would not pay much attention to me. He would go out and play Mahjong with his friends. I began to experience slow but clear back pain. I went to the hospital and did many tests, but the doctors could not find anything wrong. The back pain was deep, somewhere in between my shoulder blades. Some physicians suggested that it was probably acid reflux and prescribed me some stomach medications. I took medicine, and my heartburn eased. However, my back pain remained. (female, 24. She was diagnosed by her psychiatrist of childhood trauma and emotional disassociation, PTSD, and depression).

I have a migraine. I inherited it from my mother. My mother's whole family was like that. I was a very outstanding student in the best high school in my hometown. However, I could not study until midnight like everybody else. Our schedule was to attend the evening study session from 6 to 9 pm. Then students would go home and continue to do exam papers until midnight to 1 to 2 am. Sometimes, the migraine got so bad that I would be excused from evening study sessions and went to bed at 10.30 pm. My headache and migraine got better after I graduated and only occasionally happened when I was under tremendous stress during work. However, if my family pressured me to visit my hometown, my headache would slowly build-up. On the train back to my hometown from Beijing, my migraine would worsen until I could not see straight. It is such a familiar kind of discomfort that I even anticipate it once the train starts." (female, 28 by the time of the first interview. She reported depressive mood since childhood and frequent migraine).

As participants move to another city, a particular part of the town, or a specific space, they began to experience physical and emotional discomfort. Sometimes the discomfort was so subtle and was not detected until it accumulated into a form of a panic attack or psychosomatic pain. When some participants explained this to their psychiatrist or psychotherapist, it was diagnosed as a traumatic reaction or stress trigger. Medical professionals provided my participants with such clinical explanations to assist them with their daily function. Psychosomatic pain is a form of psychological disorder without identifiable physiological causation but manifests as chronic pain or reaction to acute stressors (Hjern et al., 2008; Tyrer S, 2006). From a phenomenological perspective, we can use this chance to explore the bodily intention during body-world interaction to illustrate people's body boundaries and relationship to their world. I propose to understand people's intentions through bodily experiences as forms of intentions as we navigate the world. Psychosomatic pain is one of the most addressed struggles people experience, on top of the actual physical and emotional pains people also struggle to deal with in their everyday lives.

Merleau-Ponty's understanding of agency depicts the relationship between our bodies and the world as the body projecting into and orienting to the world. The ethnographic vignettes I shared illustrate how the bodily space, instead of the objective, physical space, forms the foundation of our consciousness, emotional processes, social relationships, and world experience. People intentionally orient toward the world around them, in which they formed bodily memories. The stress these young women experienced as they grew up in their families formed a specific bodily intention that reminded them of a particular form of suffering and struggle. Such stressors exist in their interpersonal relationships and extend to the physical, cultural, and most importantly, bodily space. Psychosomatic pain, in this case, can be seen as a form of resistance. Both explicitly said that they did not experience frustration or emotional pain during these journeys. However, beyond verbal expression and complaint, their bodies kept the scores and expressed their struggle in a different form: backpain or migraine as they approach their hometown. Pain, in this case, is at once a form of corporeal intentionality, through which the individual not only inhabit the geographical and architectural space, but more fundamentally creating space by how we move, endure, struggle, concerning the physical, historical, and sometimes subconscious space we grew up and explored (Mascia-Lees, 2011; van der Kolk, 1994).

2) *Bourdieu: the reciprocity between body and the world*

The second mode of body-world interaction is based on Bourdieu's notion of "habitus." I used Bourdieu's conception of habitus and the reciprocal body-world interaction within habitus to understand the relationship between temporality, space, and power in urban Chinese life. Bourdieu defines habitus as an embodiment of cultural capital, which refers to collecting symbols, skills, material belongings, practices, values, and social relations. The habitus is a matrix defined by the social actors' familiar and foreign practices, situating oneself within "real activity" in the practical relation to the world (Bourdieu, 1990). Through the reciprocity between the embodied cultural capitals and the world around, the social actor contributes to and is shaped by the dynamic social context she/he situates in. This mode of body-world interaction can be observed in the changes in people's embodiment and emotion as they go through

space and time. An essential aspect of my research is understanding the nature of mental illness by studying people's embodiment and emotion through the lived experience based on such body-world reciprocity. I argue that one outstanding feature across much mental illness experience is the disturbed temporality through body-world interactions. I will explore time and temporality in Chapter Four. Here, I want to briefly articulate disturbed temporality as the foundational experience of mental illness and can best be understood through the concept of habitus and the malfunction of body-world interaction.

The most common emotional disorder and struggles people experience in their everyday lives in current China is anxiety (Zhang, 2020). Studies have shown that the main reason behind such permeating emotion is primarily due to the rapid transition of Chinese social structure, leaving people with feelings of anticipation and insecurity with increasing precariousness (J. Yang, 2018). Researchers identified the salient stressors in contemporary Chinese people's lives, centered around family and career planning, including emotional, economic, social pressure on their ways of securing housing, jobs, marriage and parenthood, caregiving, and maintaining social relations (Hsu & Madsen, 2019; Li & Wang, 2012; Richaud & Amin, 2019; C. Zhang et al., 2019). I argue that under all these macro-level social structural changes and micro-level everyday life routines, the anxious feeling is an embodiment of disturbed synchronicity of subjective time and rhythms determined by others around the social actor. If the rhythm of the body and the cultural context's rhythm is in sync, the experience of time is steady. Even when our subjective temporality always fluctuates depending on various physical, environmental, and contextual variables, the overall pace through daily practices reaches equilibrium as an anticipated future action eventually takes over the current practice (Skolnick, 2020). Anxiety, I argue, is the present's impasse because people live in a cultural context demanding constant activity with increasing speed, with an unrecognized past, and an obsession with the future. Three aspects of temporality contribute to the impasse of the present, which results in accumulated and permeating anxious feelings. First, there is a deprivation of recognizing past trauma, negative emotions, and even grief in public lives. From the undiscussed traumatic past during the Socialist Regime to the lack of public mourning during the Covid-

19 pandemic, the Party-State intends to dominate the public narration with a “positive energy” that by nature is hegemony and deprivation of humanity. In private lives, each generation’s life experience is so different that the parents’ experience could not be used as a reference for their children’s upbringing, leaving not only generational chasm and conflicts but a general sense of precarity and helplessness as people move with a rapid pace towards further transitions in their lives. Second, there is an obsession with securing a future. Due to the tremendously unpredictable experience, people had in the past, their obsession with a more secure and promising future is fueled into a modern nation’s building. The “Chinese Dream” centered around embedding everyone’s desire into powerful nation-building, tailoring a neoliberalist cultural trend combined with national capitalism. For each social actor, the belief in upward social mobility results in heavy investment in the future. This obsession with the future translates into caregiving and educational investment of the next generation and eagerly securing one’s life quality in old age (Kuan, 2015; Zhang, 2019). However, as the economic boom plateaus and the social hierarchy stabilizes, the competitive capitalist economy, neoliberal cultural trend, and consumerism social practices could not bring meaning and security in people’s increasingly stressful lives. Third, the reciprocity of the body-world relations allows for a continuum of experience of time. As Chinese people go through rapid transition without referring to a narration of the past or an unobstructed future, they face a fragmented world and still struggle to function daily, searching for security that seems mercurious in the current situation. A popular word that describes the life rhythm for contemporary urban life in China is *fu zao* (浮躁), which describes a floating irritation during which a person could not situate in the here and now. This *fu zao* state leads to accumulating anxious feeling as people seek meaning in the fragmented world, which, I argue, by nature is being stretched between an undealt past and an uncertain future, with each moment preoccupied with thoughts, agitation, anticipation, and fear.

3) Foucault’s World-upon-the-body: Battle in Discursive Formation and Existential Crisis

Foucault’s concepts of power inspire the third mode of body-world interaction through the discipline of the body (Mascia-Lees, 2011). Foucault’s idea of the docile body to his analysis on the

discursive practice, which is the exercise of power and the creation of knowledge, truth, and arguably normality, Foucault pointed out how the body became the primary area where power is actualized (Foucault, 1975). In this body-world relationship structure, agency's modality lies in the bodily discipline and negotiation with cultural discourses and hegemonic social structure. Modern Chinese social transitions involved a few major ideological clashes, all of them occurred under a highly centralized government, with State power permeating throughout individual lives and underneath all social units and practices. The definition and the boundary of bodies across Chinese modern civilization is a history of defining and redefining what it means to be human in a transitioning society. The creation of truth, knowledge, and in the establishment of health and normality "is a body of anonymous, historical rules, always determined in the time and space that have defined a given period, and for a given period, and a given social, economic, geographical or linguistic area, the conditions of operation of the enunciative function"(Foucault, 1970:117). Based on my own lived experience, the transgenerational family history I embodied, and the social interaction I had throughout my life, along with the in-depth fieldwork I conducted as an anthropologist, I argue that the creation of modern citizenship in China is fundamentally the struggle of gaining the power to find a place for each individual in the constantly transitioning society, where their experience would be validated, and their future involves the access to define what it means to be human. This process is frequently influenced but oftentimes parallel with the western centered discourse on human rights. Throughout all the ideological clashes and revolutions, building a modern nation out of this ancient civilization is a long battle between forming the docile bodies and the resistance towards such forces by redefining humanity. All these struggles and processes occur on each body and heart through our everyday life behavior and life trajectories across generations. As a young woman in her early 20s indicated, "I am trying hard to get rid of the fragile and elitist feature that my family and my society has been imposed on me. Sometimes my confusion and my sadness is inconsolable because I sense a despair that is hard to overcome. Our father's generation were quiet about the traumatic history, while we are left with little words to address what the confusion was. I felt an urge, a hunger, almost a hole in my heart. I do not know where to place my body and my heart."

In China, the Party-State has always maintained an exclusive political control, though not without periods of more relaxed policies and non-stopping discussion in private settings (Hsu & Madsen, 2019). The struggle between a controlling (and responsive) authoritarian government and its people's resistance, compliance, and negotiation never ceased across major transitions and everyday lives (Weller, 2012). From the Confucianist system to the Socialist era, there is a continuation of central governments' tight grasp and domination over the institutional discipline and enforcement of social orders and the construction of emotional orders to reinforce hierarchal domination of morality, affect, and interpersonal relationships. These struggles are the underlying structure of every participant's life story when embedded across the historical changes. Each generational cohort demonstrate salient characteristic not only in their choice of words during life story narrations, but also trends of social practices and demonstration of emotional experience and moral acts branded with the characteristic of their collective experience and historical transitions they embodied. The 1950s cohort were the most homogenized in their life story narration, mostly due to the highly collective lifestyle, enforcement of propaganda, and lack of enriched education for their generational cohort. However, younger generational cohort also demonstrate salient features, showing the impact of living through social transitions through their life path (Elder, 1994). The generational chasm and ideological conflicts between each cohort bare the imprint of social structural transition and the accompanied reinforcement of moral codes and behavioral patterns. As I shall demonstrate in later chapters, the "silence of our father's generations", indicating the unresolved historical trauma and the unresolved social conflict, on top of the struggle for agency in transitioning cultural discourses, added weight on people's mental health, psychological wellbeing, and existential crisis.

In addition to the transgenerational trauma and the intergenerational ideological conflict and chasm, the unpredictability of policy changes and stark power difference between the individual and the State apparatus contribute to the great sense of anxiety and existential crisis for Chinese people living under significant social changes. My participants across different age groups came to a similar conclusion

of how the State's policy influences everyone as if it actualizes upon each person's flesh (*qie shen* 切身). The most salient struggle through this formation of discursive power, discipline bodies, depriving and regaining agency is the battle over gendered bodies in today's patriarchal system. The promotion of State Policies can deprive a woman of her reproductive rights, sometimes in brutal ways, during the enforcement of the One-Child Policy (Sewell, 2020). Because such policy changes not only the family structure, but also the meaning of heritage, a family's future, and gendered experience of millions of men and women, the enforcement of the One-Child policy has conflicting and long-lasting social consequences. On one hand there was the empowerment of urban daughters (Fong, 2002). On the other hand, there were increased infanticide, abortion, and adoption of rural girls (Ebenstein, 2010). The lift of such policy again changed many families' current life trajectory. The pressure to give birth to a son came back and haunt Chinese women in their current lives, even for those empowered urban daughters.

One-Child policy was just one aspect of cross-generational gendered experience that was salient in Chinese society. When I planned my research, I did not start from a feminist perspective. However, my perspective and ethnographic encounters channeled my research into a feminist position, mainly because the Chinese females' situation worsened as my fieldwork proceeded. As I am writing up this dissertation, this brutal war that discriminate, alienate, objectifying women's bodies and marginalize their social position is still going on. From the rising (and immediate censorship) of the Chinese women's MeToo movement, to the injustice treatment of female medical workers during the battle against the Covid-19 pandemic, as the social structure starting to disintegrate, the existential crisis of what meant to be a human continues to evolve. Women and girls continued to be silenced, marginalized, pushed aside, murdered, raped, hurt, sold as merchandize, deprived or reproductive organs, or reduced to be reproductive organs. They continued to be downgraded to be of subordinate existence in a male-dominated society. However, Chinese women and girls' resistance, rebel, and radical participation in social changes are also the most breath-taking and powerful bottom-up social movements I witnessed, even in the State's absence and censorship. In the following chapters, I will demonstrate how the State's policy and mainstream cultural

trends fail to address gender inequality in contemporary Chinese society. I argue that mainstream cultural trends fail to narrow the gender gap because these cultural trends form a male-dominated perspective with the presumption of a dichotomous gendered perspective placed the female bodies in a subordinate and objectified position (Grosz, 1994). Three significant cultural trends, namely the neo-Confucian moral codes and patriarchal family structure (Yan, 2010), the Socialist legacy and post-socialist State Capitalist economy, and the neoliberal culture promote global competitiveness and individualism, all centralized on enhancing the power hierarchy of a patriarchal nation-state. I will elaborate in chapter five to show how these cultural trends fail to narrow the gender gap and how people demonstrate resilience and agency in fighting for gender equity in China.

1.1.2 Why Emotion?

When I explain to people what I was doing, what psychological anthropology meant, and why I wanted to hear their life stories, I summarize my research purpose by saying, “I study transitions in life through understanding changes in your body and emotion.” People usually get why I emphasized social changes and their impact on personal transitions, having survived major historical turns and were still dealing with the impact and the generational chasm on an everyday basis. They also understand why I focus on bodies, as I explained how I approach the body and psychological conditions holistically, for Chinese culture and traditional philosophies and medicines have always treated body and heart as an organic and interactive whole. “But why emotion? How do you study emotion?” Participants usually confuse me for a psychotherapist or a clinical psychologist. Some of them approach me, seeking advice or counseling. Others jokingly comment that they would not be fit for my research because, though they have “been through a lot,” they are not “crazy”. “Not yet crazy, or as crazy as I should have been, Dr.Wu.” Mr.Liu, a man whose extended family was slaughtered during the Japanese Invasion and whose parents were tortured during the Cultural Revolution, put it lightly. In his late 50s, he had frequent visits to the hospital and suffered from multiple psychosomatic symptoms, including insomnia and chronic pain, but was determined to find out why doctors would not give him a “real physical diagnosis” and why

his daughter is quitting school due to depression and had bipolar. “Women are better with emotions,” he reflected, “maybe that’s why they are not as sick as men usually are. And they live longer.” His observation was accurate in some respect. In China, emotional communication and verbal expression are still a very gendered experience. Female participants are usually very articulate about their psychological status, providing an enriched vocabulary, metaphors, and wisdom during interviews. During one of my conversations, my participant, a 55-year-old woman who survived and thrived through historical and family turmoil, provided me with the best answer.

Because in the end that is all you remember, the emotions you experienced through building relationships, living your life, passing your time in different places and with different people. After all, we are all emotional animals. I have always seen myself as quite rational, you know, ‘man-like,’ that is what they said about me. However, I think I am, and we all are, deeply emotional. Emotion is all you accumulate in your body and the only thing you could eventually communicate with others. Things you shared, things you feel, people you cared about, influenced you, walked in to, and checked out from your life. In the end, everything you could say about your life and make others understand and resonate with are all emotional. I am glad you want to study it. Write it all down. The ridiculous tears, the random laughter, our instincts, desires, gut-feelings, all of those. Write it all down the way it is.

From a phenomenological perspective, Mrs. Wang summarized the science and arts of the phenomenological study of lived experience in the most straightforward and humanistic way possible. As social scientists, we are attracted to people’s lived experiences, especially across social changes. However, social scientists usually emphasized the structural aspect of experiencing social changes, such as economic status, infrastructure changes, living environment, social relations, and cultural practices. There are also great works on the transitions at metaphysical levels, such as ideological clashes or epistemological shifts. However, not enough work has been done on the process and expression of emotion, which have momentous consequences, and do not always exist as opposed to rationality or reason (Girling, 2006). Emotion is the foundation of human experience as each human being embodies their experience in the lifeworld. As they go through these experiences, Mrs. Wang pointed out that emotional and emotional experiences construct most people’s embodied memory and social interactions. “After all, we are all emotional animals.” It reveals a critical aspect of emotion: that it is fundamentally

social. Even Mr.Liu, who bluntly attributed emotional expression as a “female thing,” did not realize that his embodiment of trauma was just another form of emotional experience, expressing everything he could not put to words through his body (van der Kolk, 1994). Our emotional experience makes our lived experience meaningful for us because the emotional experience is the product of social interactions, the result of our constant assessment of social relations. In everyday lives, our first and foremost used references of behaviors, orientations towards the world, and reflection that we inflicted on our bodies.

I intend to capture the moments when people’s motivation and meaning-making process manifest from their unconscious to conscious articulation, behaviors, and interactions. My fieldwork is fundamentally an ethnography of gaining insights into people’s emotional world across social changes. I encourage my participants to bring their emotional experiences into their consciousness and share them with me, then with our joint effort, embedding these conscious narrations in more extensive sociocultural changes. The making of our consciousness is to shed light on our emotional experiences as we try to *embody* and *express* the biological, psychological, and social impact of three distinct and related phenomena: an emotion, the feeling of that emotion, and the knowing that we have a feeling of that emotion (Damasio, 1999). Therefore, study emotion, emotional experience, and culturally constructed emotional expression is to study the first-hand, subjective experience, the reflection and embodied morality of lived experience, and the power struggle across social transition through emotional expression. Through life story narrations, participation in social practices, and various forms of expressions, including visual, physical, and somatic processes, I document how people assess their social experience based on their embodiment of emotions. “Write it all down the way it is” is what I pay attention to before the lived experience gets translated into existing theoretical structures and dissolve into discourses (Jackson, 2014). The best way to capture things as they are, for this project, is to find a way to document people’s emotions as they present, remember, and communicate their lived experience. I define emotion as the fundamentally interpersonal, relational, intersubjective, and intercorporeal communication and expression forms. I understand emotion as the language of lived experience. In addition to the

primary written and spoken language, I include bodily experience, body languages, gestures, facial expressions, movements, rhythms, social practices, forms of emotional languages, a tangible research object in studying and understanding people's everyday life (Lefebvre, 1991).

An ethnographic record of emotion and emotional experience is based on the anthropological studies of cross-cultural psychology (Jenkins & Karno, 1992; Lutz & White, 1986; Lutz, 2011), cognition and sensational processing (Throop, 2005), social relations, and private lives (Faier & Rofel, 2014; L Rofel, 2007; Y Yan, 2003). Using emotion as a cutting point, scholars are able to tackle multiple aspects of social lives, including the performance and meaning of care (A Kleinman, 2020; Mosse, 2016; G Stanghellini, 2016; Yarris, 2014), and empathy (Hollan & Throop, 2008; Throop & Zahavi, 2020). Writing at the intersection of documenting experiences of personal and historical transitions, transgenerational (and cross-generational) interactions, and how these experiences shape people's psychology and mental health, anchoring my ethnography on emotional experience is also contributing to the study of ethnopsychology. Ethnopsychological issues include the "constitution of the self, indigenous categories and vocabularies of emotions; the predominance of particular emotions within societies; the interrelation of various emotions; identification of those situations in which emotions are said to occur; and ethnophysiological accounts of bodily experience of emotions. These elements of ethnopsychology will mediate both the experience and expression of emotion presuming the existence of an actively functioning (or dysfunctional) psyche in transaction with the social world" (Jenkins 1994:100). Emotional experience and expression as a research object can be a challenge to the participants and the ethnographer. Understanding and analyzing people's emotional experience and expression in all possible forms require deep cultural understanding and constant reflection. An essential tool for me is to form empathy by immersing myself in the intersubjectivity between my participant and me. Knowing the difference between having empathy and projection (or, in some cases, transference, especially in dealing with people's intensive life struggles and mental health issues (see Chapter Two in Jenkins 2015), is an

ongoing challenge. Not only do I have to navigate through different individual's lifeworld¹, but I also am mindful of my desires, struggles, confusion, anger, and, in cases such as recruiting and building a relationship with Victoria, loss, and grief. Sometimes the intersubjectivity and empathetic connection between my participant and I became so intense that in the days after our interview or participant observation, I experienced a similar physical experience that my participant experienced as echoing or co-experiencing their suffering and struggle beyond my conscious control. After such intersubjectivity and intercorporeality, I then step out and embed the transition of their emotional experience in more enormous social changes. I can document the transitions in the moral milieu of the local moral world surrounding Chinese people as they experience social transitions (Jenkins & Csordas, 2020). How people "feel" about their interpersonal relationships, their intersubjectively processed life events and their reflection on their decisions, their communications, and interactions with others contextualize morality in their body-world interactions (Gilligan, 1977). To engage with people's emotional experience and expression, I focused on person-centered interviews, participant observations and was able to have access to journals, diaries, letters, and artistic displays of lived experience.

1.1.3 Language Use

Before I elaborate on methodology, I want to point out the salience of language used during this multi-sited fieldwork across generations. The primary data gathering method is the ethnographic person-centered interview. When it comes to the description of embodiment and emotion, the Chinese language is rich in metaphor. In Chinese, we only have a few general categories of emotions. Under the philosophical, religious, and cultural influence of Confucian, Daoist, and Buddhist thoughts, Chinese

¹ Quoting Jackson (2012), I prefer the term lifeworld to "society," "culture," or "community" because this term captures the vitality and dynamic of a developing group, loosely bounded by co-experience, language, history, and political borders. As people enter and dwell in this force field (*kraftfield*), they interact with the constellation of ideas and passions, moral norms, and ethical dilemmas, the tired and unprecedented (Jackson, 2012:7-10).

people usually refer to seven umbrella emotional categories, including joy (*xi* 喜), anger (*nu* 怒), sadness/grief (*ai* 哀), happiness (*le* 乐 related but different from joy, more often used in assessing relationships rather than events), resentment (*yuan* 怨), hatred (*zeng* 憎), and fear (*ju* 惧) (Hsu & Madsen, 2019; Solomon, 1995). In addition to referring to these emotional categories, participants often use metaphors that anchored their emotions, reflections, and feelings in their bodily experience. Some metaphors are not shared by modern mandarin Chinese, tracing back to the ancient origin of local dialect mainly in oral forms. Other metaphors are fundamentally physiological, anchoring the symbolic relationship between psychological processes in the body (Tung, 1994). For example, on top of expressing sadness and distress using the Chinese word “*nan guo*” (hard to go by 难过), participants would often elaborate such emotion by indicating how their bodies suffer under emotional distress. They would say things such as “I found it so hard to go by that my stomach turned to water.” In describing grief, one participant said, “I felt that a dagger stabbed my heart.” Not only would people connect emotion to mental health, but they also saw the link between the psychological struggle with physical illnesses, reflecting the traditional Chinese medicine system that links one emotion with a specific organ (e.g., anger would cause liver damage)(Y. Zhang, 2012). For example, my participants would explain how his father got liver cancer after surviving the Cultural Revolution: “Experiencing the Cultural Revolution was too damaging to his health. He harbored so much anger of that injustice, which destroyed his liver. That’s why he got cancer later. It was all that anger, and he harbored and all the bitterness he suffered”. The psychosomatic sensation was salient throughout their narration that sometimes they meant it both literally and figuratively. These metaphors also change across generations. The younger generation who had more exposure to global cultural trends adopt new ways of expression from English, Japanese, and other forms of popular cultures. Therefore, understanding and coding through these metaphors across generational cohorts also reflect the linguistic, cultural, and even changes of forms and understandings in body-mind interactions.

In mainland China, the official language is Mandarin Chinese. However, the Government did not require the usage of Mandarin Chinese in schools and public institutions until the early 1990s. Therefore, Mandarin Chinese is not the first language for many people, especially in the Southern side of the Yangtze River. Therefore, dialects play a crucial role in understanding embodiment and experience because people's expression is firmly grounded in their bodily sensations and experience. Switching between languages and dialects also played an important role throughout my fieldwork. Able to speak and understand dialects proven to be of great convenience, even when I was conducting most of my fieldwork in Shanghai. When I disclose to my participants that I understood and spoke their dialects, they often open-up more easily. Because I grew up in different cities across provinces and my family also migrated across the country, I could speak three different dialects on top of the official Mandarin Chinese: Shanghai dialect, Hunan dialect, and Sichuan dialect. This ability enabled me to understand most dialects across Yangtze Delta, Hunan Province, Hubei Province, and Southwest China. Multilingual ability granted me much convenience because most participants, especially from the older generation, felt more comfortable expressing their intimate feelings using their native dialects. Each dialect has specific ways of expressing feelings and generating reflections, even philosophies, and attitudes of lives that often went undocumented by the official "literati" Mandarin Chinese. The older generation frequently demonstrates their understanding and interpretations" of "old sayings" to contrast the social transitions and cultural changes they experienced.

The other language switch I observed amongst the younger generation is the use of English terms. My participants switching to English even use English throughout our interviews under the following circumstances. First, people use English terms more often when we talked about mental health issues. As I would demonstrate in the following chapters, the younger generation was the first generation when mental health and psychological well-being were discussed on the public platform. They were the ones who use mental health-related languages and terms to address the sufferings, difficulties, and conditions in their everyday lives (Zhang, 2019). This generation was also the most highly educated and acquired

English language ability through school training, media, and personal interest. One college student who demonstrated significant interest in psychology expressed his discontent in understanding his feelings and experience, attributing the difficulties in communicating with their parent's generation on the Chinese language's emotional terms' vagueness. He said, "it was not until I took an online psychology class from a US university that I realized that there could be so many emotional terms I could use to address the things I went through. The inability to express it was a huge part of the reason I could not understand my depression or my bi-polar disorder. My English was still not good, and I had very few ways to learn these terminologies to understand my conditions. That was why I chose to participate in depression and bipolar support groups and worked as a volunteer. At least I could learn the set of words to describe my experience accurately".

Second, some people are eager to find a way, even a "proper diagnosis" to their experience, to legitimize their suffering, be heard, be treated seriously, or be able to better understand and cope with mental health conditions. They were using English as their second language to talk about their life story partially released people from the burden of Chinese culture and enabled them to concentrate on themselves without the other-oriented moral burden. Haley, a visual artist who struggled with an anxiety disorder and low self-esteem, indicated that thinking and expressing in English helps her "decentralize" from herself because focusing on herself could be overwhelming, embarrassing, and discouraging. Using a second language provided a sense of barrier. "It would be like telling another person's story if I use English so that I can think straight. Deep down, I do not have enough energy to deal with anything if I relate the project to myself. I would think of myself as unworthy and go into existential crisis and panic if I continuously have to face, well, me. As I was growing up, I was discouraged from self-expression or exploration. I thought of myself as a burden to other people and need to bear the burden of care." Another participant pointed out that burden of emotional labor is a gendered experience: "Chinese women and girls were so trained to attend to other people's emotions first. We even become timid and belittle ourselves if we talk about our sufferings. That is why using English to express would be easier for me, even if I know my oral English is probably full of grammar mistakes".

Third, using English provided the interlocutors with terms and conversations free from the stigma attached to conditions, illnesses, and

some traumatic experiences, such as sexual assault and rape. Some participants could not address their mental illness by its Chinese term but would use the English terminology to keep “it clinical,” as one participant put it, “rather than having to deal with a whole load of other shit or a whole bunch of assumptions.”

When talking about using psychotherapeutic terms and clinical terms, I also want to point out how my interlocutors use these terminologies in their everyday lives across cases. As I have explained, Chinese is a very contextual dependent language. Therefore, people can mean very different things even if they use the same term under different circumstances. As is the case in western cultures, people are getting familiar with many clinical terms and psychotherapeutic terminologies in both clinical and non-clinical settings. For example, people may refer to their everyday habits or behavior as being “depressed” or “I have Obsessive Compulsive Disorder (*wo you qiang po zheng* 我有强迫症).” The usage of therapeutic terms in these cases shall be taken as a figure of speech, instead of self-diagnosis. For the participants who were diagnosed with mental disorders, they either refer to their official diagnosis by using English or specifically contextualize the use of such terminology to avoid misunderstandings.

Another interesting phenomenon is how many people, especially those from younger age cohorts, use terms from a psychotherapeutic background and apply it in everyday life situations to assess their emotional processes and social interactions. I will talk about the impact of Psycho-boom in China and how the introduction of a new set of terminologies and how it shifts people’s (re)interpretation of social interactions, relations, and behavioral codes in transitioning cultural trends. In these situations, interlocutors will use both Chinese translations of these terminologies and English. For example, on multiple occasions, participants will refer to how they deal with difficult transgenerational interactions by commenting on how, in a Chinese family, people do not have clear emotional or personal boundaries (*bian jie* 边界), and family members have a lot of projection (*tou she* 投射) on each other, which result in emotional burdens and psychological issues. Unlike using “depression” and “OCD” as a figure of speech, these terms have its specific meaning in Chinese. When used as a psychotherapeutic term, there is an

application of another meaning as well. How people understand and assert meaning in their narrations depends on the specific context and situation, which I will elaborate in Chapter 6.

Finally, each age cohort show significant patterns of speech, vocabulary usage, and habits of interaction, which reflects the vast differences in cultural trends and social structures they grew up with. Interestingly, the 1950s cohorts and the 1990s cohorts showed highly unifying ways of speaking and vocabulary use, despite each individual's insertion of personal interpretation and meaning making when they refer to these words (Rofel 1999). I did not articulate on the uniform use of vocabularies because the focus of this research is on embodiment and emotion. However, the tendency of these two specific generational cohorts to use highly uniformed vocabularies is significant in understanding transgenerational experience and the structure of agency as people use existing cultural trends to understand their existence. My understanding of this phenomenon is that those two generational cohorts were exposed to highly uniformed cultural trends that permeates into their everyday lives, regardless of their gender, class, and educational level. For the 1950s cohort it was due to the collectivist cultural trends during the Cultural Revolution. When they refer to their personal experience throughout the cultural revolution, they quote the phrases and expressions from the propaganda they grew up remembering. All of them know all the songs, dances, and slogans that were used to popularize the State's policies throughout the years. Paradoxically, despite the blooming cultural trends throughout globalization, the 1990s cohort is also exposed to a seemingly diverse but fast paced, simplified, and regulated online platform, which also provided a specific set of vocabularies and ways of expression. It is presumptuous to assume that using uniformed way of speaking and expressing limited the individual embodiment and emotions across transitional periods in people's lives. When I focus on the bodily experience, the relationship between language usage and experience remains only one aspect of the human experience because thinking strategy and language expression as they manifest on the conscious level are just part of embodiment and enculturation. However, it is worth noticing that the tightening cultural control through language use does leave an impact on people's embodiment and emotional processes. As some of my

1950s' participants recalled having no way to express their feelings outside the State regulated slogans "suffocating", and the 1990s' interlocutors call the increasing censorship "demeaning": "Because maybe my grandparents' generation believe in becoming 'just a screw for the construction of socialism', for our generation, we are only becoming the 'leeks of State capitalism that waiting to be cut and grow back again and again'." Each cohort engage with different ways of dark humor or poetic metaphors in interpreting their personal and emotional experience, and it is worth paying attention to how people come up with various ways of expression and why some terms become popular.

1.2 Methodology: A Participant-Centered, Bottom-Up Approach

My interaction with my participants shapes my research topic. Overall, my research documents grass roots lived experience. My data and analysis also reveal how people exercise their agency through interacting with enriched social practices, moral codes, and cultural trends, despite the State-directed discursive formations and the authority's top-down intention in control, discipline, and regulation. As I have pointed out in the beginning, in this research, I ask three questions. First, how do people from different generational cohorts perceive, experience, and understand their transitional periods in social and personal lives? Second, what are people's attitudes and evaluations towards their significant social relationships, especially before, during, and after these transitions? Third, by their participation in my research (and our continuous evolution afterward), how do people process and express their bodily and emotions in their everyday lives? How do they view these experiences concerning their health and wellbeing? These three research questions bring together sociological, anthropological, historical, and psychological inquiries together. I pursue these research questions mainly through person-centered interviews and participant-observation. I approach each participant as individuals and engage with the immediate social network that his/her everyday activities interact with (Jenkins 2015). Each case study includes my participant and his/her social unit. This cross-generational research also takes place across multiple cities. One salient feature of contemporary Chinese life is its mobility across fast-paced urban lives in metropolitan areas and the relatively slow-paced, interpersonally tighter communities that the

younger generations tend to leave behind in “second-line” cities and towns. Therefore, I focus on people and their lifeworld rather than fixed geographical locations. Each participant and his/her lifeworld forms a unique web of social relations, life stories, and various modes of interaction with physical locations, rhythms of life, communicative styles, rituals, and practices, located in fragmented yet highly recognizable shared temporospatial social niches with other people (Lefebvre, 1991).

1.2.1 Recruiting Participants Across Generational Cohorts

I loosely group my participants into generational cohorts, dividing each cohort in a ten-year frame. I take a life course perspective in understanding the shared experience of people born in the same cohort, the connection from one generation to the next, and embed the trajectory of their life course in the larger social-historical transitions (Elder 1994; Elder and Shanahan 2006). In current Chinese society, people speak of generational cohorts by referring to their birth dates within ten years. This reference has both demographic and historical meanings. First, the Chinese Communist Party makes a national plan every five years, a blueprint for the whole nation’s economy and development (Pieke, 2004, 2014). From the People’s Republic (1949), Chinese people experienced major social transitions, political turmoil, and economic fluctuations every ten years. Every ten years, there was at least one salient historical event that would influence every citizen’s everyday life. Therefore, each generational cohort experiences their major life stages by engaging with major socio-historical transitions in different ways, with shared experiences unique to their cohort. For example, *wulinghou* (born after the 50s) grew up during the Cultural Revolution, which meant that this generational cohort generally has less access to more extensive school educations. Their younger siblings, *liulinghou* (born after the 60s), came of age after the Cultural Revolution’s cease and would have much broader access to education and occupation. Therefore, within one family, the siblings could have vastly different incomes in the late 1990s and early 2000s, resulting in different orientations towards the future, attitude to their children, and investment in urban life and upwards social mobility. The generations that came after, as a result, would have a very different interpretation of parent-children’s relationships, have different access and attitude to public education,

interpersonal relationship management, and a very different understanding of upward social mobility. Therefore, the generational cohort in China forms a good start in approaching my participants because their lived experience stretches across different historical periods in different times in their lives, resulting in lasting impacts on their life course and the life course for generations that follow. Their different forms of embodiment, different access to resources, different transitional experience, different exposure to moral codes and understanding of family, gender, normality, and health, along with their shared experience in facing the evolving ideological shifts, cultural trends, and structural changes forms the foundation of my transgenerational research on experiencing social changes. This chart shows the basic information of my core interlocutors grouped by cohorts.

Table 1: Core Interlocutors grouped by genders and age cohorts

Gender/Cohorts	Male	Female
50s	5	4
60s	2	1
70s	2	0
80s	1	14
90s	3	8

I recruited 40 core interlocutors for this research, 13 men and 27 women. Core interlocutors are the people with whom I sat down for three 45-minutes interview sessions across the three years. Recruitment and fieldwork stretch across three years. I initiated my pilot study in summer, 2017 and lived in China from May 2018 to September 2019. Because I recruited participants mainly through snowballing, my own educational background, gender, and age cohort played a big part in my fieldwork. Women from my own age cohort made up a large portion of my research. Women in general were more

vocal about their mental health status and found themselves easier to open to me. Men from older age cohort also did not shy from discussing their life story with me. However, it was somewhat difficult to approach men from my own age cohort. Some were less comfortable of talking to a woman about their emotional life and mental health, others found my educational background a bit intimidating. It was not easy to persuade men to talk about their psychological processes or emotional experience because they did not feel comfortable expressing their emotions with a female stranger. Some men wanted to talk about it, but they did not know how. Others enter long narration about their political opinion or life stories but became very confused when I asked: “how did that make you feel.” I interacted with many male acquaintances. However, they were generally more comfortable to stay in the margin of group conversation when it comes to transitioning life experience or emotional life. Many men actively voiced their experience, yet shy from being the interviewee of my case study. Therefore, women made up most of my core interlocutors. Men were part of the conversation, but I did not have as many in-depth discussions with men as I wanted to. It is worth clarifying that although I concentrated on the lived experience, life narration, archive analysis (including letters, journals, blogs, and visual arts) and participant observation amongst these 40 case studies, I included narrations, talks, comments, and observations with their families, friends, and conversations with people expanding from their social circles when I join their activities in this research. I will elaborate the process in the sections below.

1.2.2 Talk the talk: person-centered ethnographic interviews

When I recruit participants, I focus on life stories in transitions and their influence on physical and mental health and take a trans-generational perspective. Most of my participants (38 out of 40) joined my study because they have concerns, struggles, confusions, or curiosity about the connection between physical and mental health, transitional stress in life. My first few participants helped me developed my study design and form ideas because I did not go into the field with a precise idea of what to study but instead gathered ideas of what mattered throughout their life course and generated research questions from interacting with these participants. I recruited more participants through snowballing and sending

out recruitment on social media platforms. My ethnographic work with each individual is loosely composed of the following events. After I approached individuals who showed interest in my study and were willing to participate, I would sit down with them to schedule three interview sessions with the time and location of their choices. During the first interview, I would briefly introduce my research interest and intention and gain oral consent from the participant. Then I would ask them to share with me their life stories. Most participants would come up with a chronological narration. However, several participants chose to focus on a specific period of life experience (12 cases), a discussion about particularly significant social relations (10 cases) or started with her struggles on one specific mental and physical illness experience (8 cases). During the second and third interviews, I would encourage the participant to focus on several aspects of their lived experience that I found interesting based on our initial talk. In between these interviews, I would participate in social activities, hobbies, treatment, or trips with my participants and immerse them in their lifeworld by participating in these activities. I found chances to talk to their families, friends, co-workers, and other significant social members in their network both together and separately from everyone. Therefore, branching from forty person-centered case studies, I was able to engage with over 200 related social members, gathering data on the intersubjective lived experience they formed and shared. From focusing on such social units rather than just individuals, I gained information on transitions across the trajectory of lives and generations and the shifts in forming social relations. The different ways of forming and interpreting social relations, in turn, reveal the changes in cultural trends and social activities. People's participation in these cultural trends and social activities further shape-changing norms on morality, normality, health, and wellbeing. These interviews and analysis thus articulate and people from different social backgrounds and age groups understand their desires and discontent through precarious times.

Through my coding and analysis, I analyze interview data by identifying the discursive structures in people's narrations and organizations of their behaviors, motivations, intentions, and interpretations (Jenkins & Csordas, 2020), given its life story narrations, illness experiences, or relationship

development. Since I approach life course transitions with multiple generational cohorts, my ethnography shows the discursive structures people engage with chronologically and synchronically. I trace the trajectory of lived experience from childhood to adulthood across everyone's lifetime, and I also compare the major transitional stages, especially adolescence and emerging adulthood, across generational cohorts. I code the data from three levels. The first level of discursive structure recognizes and identifies social context. When people made comments that embed their own lived experience in a larger social context: "This was how people from where I came from (*women na'er* 我们那儿) or when I was growing up (*women na shihou* 我们那时候) usually do." When asked to elaborate, they would indicate a set of beliefs, routines, or social practices. E.g., a participant would state a common belief, such as "corporal punishment is a usual part of child-rearing practice and is not domestic violence." An everyday routine in one's community might be "all people sent their children to cram school on weekends." An identified social practice might be "people usually also go to the Buddhist temple to pay tribute if you suffer from psychiatric disorders." The second level of the discursive structure lies in whether the participant agrees, disagrees, or remained ambiguous about these beliefs, routines, or practices. For example, "I was not sure whether biomedicine or ritualistic healing worked" or "I was very damaged because of harsh corporeal disciplines." They compare their actual experience and feelings with the general assumptions, e.g., "I do not think sent-down youth experience was a source of hardship and suffering because I had a good time with people my age and enjoyed the autonomy and economic independence away from home"). The third level of the discursive structure lies in reflecting on their motivation, intention, and result of engaging with or getting involved in the set of practices, beliefs, or routines. E.g., "I totally denied that I had bipolar, but hospitalization and medication really helped me with my bi-polar," or "I now know that way my father behaved was due to his traumatic childhood. However, his suffering was not caused by me, and I should no longer be responsible for his emotional outlets".

1.2.3 Walk the walk: participation observation

Participant observation added an additional dimension to data, especially when I pay close attention to people's bodily status and behavioral changes under different social contexts. Sixty percent of the time I spent during my fieldwork from May 2018 to August 2019 to following my participants along across different cities, towns, and communities, doing everything they did. I categorized the social activities and practices I participated in three categories for coding: 1) maintaining and strengthening social bonds and relations; 2) seeking healing and cultivating health; 3) optimizing mental/physical wellbeing and enhancing life quality. The emergence of these categories came from people's descriptions of their goals. However, these categories sometimes overlap, depending on the participant's intention, the nature of the activity, and collaboration with other people who participate in the activity. For example, having a meal with friends can be an important way to maintain social relations and enhance friendship and social bonding (Ferrer in Hsu & Madsen, 2019). However, people are also motivated because they believe having specific kind of food in certain seasons is both fashionable and nurturing, as a ritual to mark the experience of life and maximize the medicinal purposes of the food to enhance health (Farquhar & Zhang 2012). Other times, the participant would seek different sorts of social practices and attribute their wellbeing or healing to the accumulation of all these practices. Some claimed that a jade bracelet with material and color matching their personality and body trait cured their insomnia. Others seek rituals that would help ground their soul and spirit to their body so they would not get panic attacks. From Tai Chi to physical therapy, from painting to tea ceremonies, and from expensive gym classes to home-based yoga/meditation sessions, from ballet class to pole dancing, I tried out more than a dozen body-mind practices that my participants practiced throughout the fifteen-month fieldwork. Some of these social activities were thousands of years old; others were emerging fashion trends. Some of those practices or commodities were declared by the companies to have thousands of years of tradition while incorporating modern scientific research and structures.

How does the way contemporary Chinese people navigate through different modulations of healing and utilize all the resources they have access to shed light on the construction of wellbeing? I argue that the dynamics of navigating through modulations of healing, especially when it relates to mental health, is fundamentally an adjustment of one's body and embodiment in the given social context. These processes show the falling out and restoration of interpersonal relationships, intersubjectivity, and intercorporeality. I will elaborate on this point in Chapter 6. Here I will use one short synopsis to illustrate how these processes. It was through participant observation that I glimpsed the life of my core interlocutors without interviewing every member of their families. However, the life and health status of their family members influenced their everyday life conditions tremendously. Lyla, a 36-year-old woman, described the healing process of her father's mental breakdown after surgery in the following way:

We do not know what caused it (his mental breakdown). You know how Chinese men can be. They all appear tough and strong, but they never lived just by themselves or ever faced their vulnerability. He seldom gave any emotional support to any of the family members and when he communicated, he was always awkward and grumpy. It was as if it hurt his pride to be genuine or speak kindly. After his surgery to remove his gallstone, there was some complication. He stayed in the ICU for three days. None of the family members could visit him in the ICU. That got him somehow. Moreover, when he came out, he lost his mind. He could not recognize my mother and shout at her. He claimed that the Jade Emperor sent him. We all freaked out. The doctors summoned the psychiatrist and did a full check. They could not find anything physically wrong with him. So, they prescribed him with some pills.

R: What kind of pills?

L: I do not know. The whole family found the prescription of psychiatric pills a huge scandal. My mother hid it somewhere. Wait a minute, let me see if we can slip into her room and dig it out. Anyway, Pa refused to take it too. They had to slip it in with food or something. It all became very secretive, and there was a lot of fuss and hassle. In addition to psychiatric drugs, my grandmother found a Shaman in her native town in rural Fujian. She wrote several *fu* (written charms on a piece of paper, usually written with cinnabar, which Shamanist and Daoist practitioners believe would transfer celestial power). My mom hid one underneath his sickbed pillow. The rest of his blood kin wore it close to our bodies. Within one week, he got better. He totally regained his head back (*naozi you huilai le* 脑子又回来了) and everything. We don't know which part worked. It might have been the drugs. It might have been the charms. Or both! I don't know!

R: Can I see the *fu*? Or is it better not show it to an outsider?

L: You can look at it, but I can't take a picture. It has Pa's birth date and time on it. They say the power was stored in the writings and the birthdays hold a personal bond

between the individual and the talisman, so we should not take a photo. I heard it would be like exposing him and his body or fate to more harm.

Lyla's Pa recovered within the month. Her case was not the only one when people seek multiple rituals and healing forms when people suffer from mental illnesses. I accompanied several participants or their family members to all the places they seek healing, including a psychiatric hospital, traditional Chinese Medicine Hospitals, Buddhist temples, Daoist temples, Shamans, their Godparents who practiced ritualistic healings. Using multiple healing systems is a well-observed phenomenon amongst Chinese communities, yet more research is needed to deal with mental illness experience (Farquhar 2018; Farquhar and Zhang 2012). With the rising of China's psycho-boom (Tseng and Wu 2013; Wu 1982; Yang 2018), more people begin to explore various ways of enhancing psychological wellbeing and healing mental illness through psychiatric and other treatments. Other participants choose a mixture of relaxing social events (for example, dining with friends) and physical exercises to reinforce their mental health or recover from mental illnesses. Alongside psychiatric medication and psychotherapy sessions, Yoga, various forms of Tai Chi, and Buddhist Meditation retreats were the most popular body-mind exercise in Shanghai, Jiangsu, Zhejiang, and Hunan Provinces. The different understanding of the human body and psyche, body-world relationship, and health standards do not always bother participants as they seek non-clinical treatments², psychiatric medication, and clinical psychotherapy. However, people do express strong opinions either in full support or against traditional Chinese medicine's function when it comes to mental health treatment (or any other forms of illnesses). Ritualistic healings curiously exist on the periphery of all these intersecting social practices. Some people practice it full-heartedly, others adopting a benign attitude in seeing it as "psychological comfort," especially towards the older generation, while still others dismiss it as "feudalistic and superstitious." Attitudes, behaviors, intentions, and explanations vary across situations rather than groups. Therefore, my focus was accompanying

² I avoid using the term "alternative treatments" because in a non-western society, Western biomedical treatment does not dominate people's everyday life or knowledge system.

people to their participation as they navigated their complicated meaning-making processes, interacting with different groups across different social settings.

1.2.4 Transgenerational Trauma and Experience

This research intends to fill the gap between studies on the impacts of social transition and the bodily and emotional experience in the present world of everyday life. When analyzing my data, I combine the phenomenological approach to understand our immediate consciousness, the psychoanalytical approach to understand the origin of trauma across intergenerational interactions, and the ethnographic application of these two approaches (Throop, 2012). I explore the origin of people's social suffering through the understanding of transgenerational trauma. The intergenerational transmission of violence and its impact was widely discussed across cultures, especially in post-colonial regions and ethnic groups suffering from continuous structural violence, discrimination, and violence (Argenti & Schramm, 2010). However, as I was wrapping up my fieldwork, transgenerational trauma in China was only begun to emerge as a social science topic and is gaining growing popularity in psychotherapeutic fields. I drew my inspiration and theoretical references from studies on the impact of transgenerational trauma. I categorize these studies into three main clusters: 1) European research on transgenerational trauma, especially offspring of WWII/Holocaust survivors (Kidron, 2009; Kidron, 2003; Rosenheck, 1986; Schwab, 2010; Trigg, 2009); 2) research on Native American communities and ethnic minorities in North America (Csordas et al., 2010; Dole & Csordas, 2003; Garcia, 2010; Goodkind et al., 2012) and aboriginal people in Oceania countries (Argenti & Schramm, 2010; Beim, 2012; Noormohamed, 2012; Shaw, 2010); and 3) research on the offspring of refugees and immigrants (Dalgaard & Montgomery, 2017; Daud et al., 2008; Rousseau et al., 2013; Yarris, 2014). These works on transgenerational trauma enriched and challenged the understanding of trauma, PTSD (as diagnostic categories and as social phenomena), mental health and development, and transcultural psychiatry's social aspect across historical periods.

Tracing back to Anna Freud's research on the developmental struggles of Jewish orphans, studies on transgenerational trauma contributed not only to the understanding of mental illness and brain development, but also on attachment, development on personality and personhood, and the problems of various institutions that handle the psychological and social damage in surviving massive violence and trauma both during and after World War II (Freud, 1974; Nelson, Charles, A. Fox, Nathan & Zeanah, Charles, 2014). Davion and Gaudillière's book *History Beyond Trauma* grounded their understanding of how psychological damage was done, tracing back to generations that directly experienced social catastrophe and continued to manifest on generations with little to no direct contact with such experience (Davoine & Gaudillière, 2013). The author concluded that trauma that transmitted throughout collective and personal history was a frozen time expressed by frozen words, and the simplistic (yet not at all simple) way to healing is to trace the sound that had no origin, coming from a world that should have disappeared, and build a relationship that would allow the frightful nightmares to melt and be heard.

Based on this body of literature, I start with three understandings across trauma studies to serve as my theoretical foundation for the analysis of ethnographic data. First, the psychological diagnostic term "PTSD" is a historical product. Therefore, the diagnostic category itself does not make it "real". The reality lies in people's lived experiences across cultural settings and personal situations (Marsella et al., 1996). The traumatic experience of surviving social catastrophe is anything but a uniformed and neatly categorized set of behaviors or symptoms. The cultural and personal specificity are shaped by the discursive powers possessed and shaped by different social actors. Therefore, it is crucial to embed the personal experience into his/her family and local history to understand how psychological damage is done (and potentially could be undone).

Second, one common feature of trauma is its inexpressiveness. By inexpressiveness, I do not mean the lack of verbal articulation or difficulty finding the origin of a traumatic experience. As I have pointed out earlier, the foundation of people's struggle lies in the power struggle for cultural discourse, political justice, social equity, and ultimately human rights and meaning of existence. The

inexpressiveness of trauma lies in the little to no access to discursive power in the continuously unjust social structure and living environment. In the case of WWII survivors' offspring, it lies in the total change of living environment. In the case of Native American Youth, this silence lies in the broken world around them, continued to be haunted by violence in domestic and community areas. In places where people survived tyranny, the inexpressiveness lies in the uncanny memories of being repressed and persecuted, creating a culture of fear (Kristensen in Argenti & Schramm, 2010). In China, as people deal with traumatic history such as the legacy of the Cultural Revolution, this silence lies in the lack of discussion in public domains and the State's continuing shedding people off from the welfare system. The public deprivation of witness to their suffering became another form of psychological damage because the existing cultural, political discursive formation denied them the basic need of being human: mourning (Butler et al., 2003; Butler & Spivak, 2007). In addition, any form of social experience would only become psychologically damaging and may transmit to the next generation if historical and social trauma was forced upon the individual and played out in private lives and domestic settings. However, the resolving of existential crisis result from historical trauma needs a social foundation.

Third, the transmission of trauma from one generation to the next lies in the small, everyday interactions, habits, and mentality that originated as coping strategies through harsh times that became dysfunctional, even damaging to the generations that follow. Anna Freud pointed out that the children who survived the concentration camp developed a "shared ego" that made them extremely attached to each other but indifferent and apathetic to death (Freud, 2018). Kidron described the third generation of Jewish survivors who picked up habits such as always preparing shoes before bedtime as an unknown but embodied the legacy of the Holocaust (Frances E. Mascia-Lees 2011). Garcia analyzed how parents would share heroin with their children since the community was haunted by poverty, violence, and loss that the only form of bonding was the co-experience of addiction (Garcia, 2010). In my research, I will also point out the everyday details, interactions, habits, and mentality as a legacy from surviving war,

revolution, and famine that haunted the affluent life of urban youth in China, pointing out the transmission of trauma originated from a mentality of fear, preparing precarity, and avoiding deprivation.

1.2.5 Studies on social change in China and east Asian societies

The second body of literature is the anthropological work on documenting and understanding the rapid social changes in China and other East Asian societies. Navigating through structural and cultural transitions admits social upheavals has been a well-discussed topic since the beginning of the 20th century. Scholars have traced the trajectory of significant social structural changes, including shifts in kinship systems (Jacka, T., Kipnis, A. B., & Sargeson, 2013; Kipnis, 2008; Santos, Goncalo; Harrell, 2017), productive modes, and work lives (Rofel 1999, 2007b; Zhang, L., & Ong 2015), and the related impact on mental health (J. Liu et al., 2011; J. Yang, 2018; L Zhang, 2020), morality (Kuan, 2017; Yunxiang Yan, 2010), gender and body politics (Barlow, Tani, 1993; Heinrich, Ari, 2018; Hu & Scott, 2016), citizenship and identities (J. Li & Wang, 2012; Qian, 2018; Weller, 2012), as well as migration between rural and urban areas and on a global scale (Chiang et al., 2015; Pieke, 2014). I was attracted to this body of literature because the mentioned scholars paid explicit attention to people's everyday lives. These ethnographic works do not always "set up the stage" on top of a series of ideological conflicts, such as Socialism versus Capitalism, Collectivism versus Individualism, or Nationalism versus Colonial Powers. Instead, this body of work pays attention to the mundane activities, practices, and moral pluralism and dilemmas in ordinary people's everyday lives, which better reveal what really matters in a time of disturbing social structure and changes (Kleinman, 2007).

Amongst these works, I identified three major cultural trends. First, there is the national narration of the continuation and recreation of Confucian social systems, not only as a guideline for kinship and interpersonal relationships but also as a political agenda and a set of religious principles that disciplines each individual in a given social situation. As part of the propaganda, Xi's regime envisioned "rejuvenating the great Chinese civilization" based on the renewal of Confucian moral structures. Based on my ethnographic research, I want to argue that the creation of such narration reinforces paternalistic

domination rather than emphasizes core moral teaching from Confucian philosophy, which highlighted benevolence and humanitarianism. Therefore, this cultural system will more likely be used as a set of disciplinary tools that exacerbate social injustice and widen the gender gap, instead of boosting altruism and enhancing a sense of cultural belonging in Chinese society. The more conformity people show to the recreating of such a disciplinary system, the worse their emotional regulation and mental health status are, regardless of their gender identity and social roles allow them to benefit from or be more suppressed by this hierarchy.

The second cultural trend is the legacy from the Socialist Era that became an organic part of Modern China's construction. Both the continuation and the stark contrast before and after the launch of Deng's Economic Reform from the late 1980s to early 1990s have a salient impact on the construction of social relations, moral codes, life goals, and meaning-making process across the four generational cohorts of people. Some of the generational chasms, along with the anxiety, conflicts, and confusion it created, lie in the different experience and exposure to the continuation and contrasting of these ideological changes. The 80s and 90s cohorts, who were mostly the famous Chinese Singleton generation, faces their struggles as they carried the transgenerational burden of China's lost generation and marched into the unprecedented world that their parents did not experience and had a hard time understanding (Bregnbæk 2016; Kuan 2015). Based on research done on both the lived experience from Socialist to Post-Socialist era and the transgenerational experience of the 21st century, my research points out that the generational chasm does not just lie in the vastly different historical periods each generation grew up. Instead, the most challenging difference lies in an unaddressed sense of loneliness and changed structures in human interaction and relationship formation, not only within the dissolving traditional kinship system, but also between the citizens and the nation. During such negotiations, people obtain different visions of the future where multiple personhood and social identities are merging.

The third cultural trend that people are engaging with nationally and globally is neoliberalism under a capitalist market economy. Anthropologists have been engaged with this polysemic concept since

the beginning of this millennium and seemed to be referring to different things about neoliberalism under a different context. Neoliberalism refers to 1) a set of economic policies that liberate trade and industry on a global level, 2) a set of structures and models that defines very different roles for labor, capital, and the State, 3) an ideology that values market exchange as a set of ethic guides to human actions and beliefs, and 4) a mode of governance that embraces the idea of self-regulation in the free market, which leads to the belief of competition and self-interest (Ganti 2014). Since my ethnographic project cares mostly about people's intentions, motivations, behaviors, and the emotional process amongst these social interactions, I mainly use the term "neoliberalism" as a cultural trend that becomes the set of ethic codes and living guide that promote self-reliance, self-interest, and self-regulation. Each generational cohort becomes exposed to the neoliberal cultural trend at different stages in their lives. Therefore, each person's understanding, interpretation, and attitude toward neoliberal ideologies are different. Neoliberalism as a political-economical philosophy fits into the Chinese Communist Party's vision of the Nation-State, especially when it comes to forcing the ideal of a concentrated and organized government that leads a civilized society. As a national project, the State envisioned neoliberalism as a cultural trend that will create a nation of motivated, aspiring, moral entrepreneurs who would reorder China's position under 20th-century globalization (Rofel 2007b). At the turn of the 21st century, as the economic blooming began to plateau and the job market shrinks, the individuals I interacted with found themselves in a "sticky situation." Quoting one of my participants in his late 20s, anxiety and depression almost become a "psychological pandemic" because people were brought up in a tunneled vision for upward social mobilization and competition. "We lose the optimism of our parents' generation who rode the rise of the economy while carry the hope and burden to continue a nearly impossible journey. At the same time, losing that aspiration is somehow immoral. To be poor means being lazy. Delayed economic independence means you are slacking off. Having visions and dreams that do not bring in upward economic mobility is useless." He further compared his generation's situation's similarity with that of the Japanese generation who came of age after the burst of the economic bubble, famous for their lack of

spirit, ambition, and hardworking ethics, concluding that “maybe our cohort is Japan’s Heisei’s Wasted Ones.”

From the Socialist era to the neoliberal National Capitalist market economy, the logic behind each Chinese individual’s “China Dream” is fueled from all three of these cultural trends. People in their everyday lives tried hard to balance quite a few psychological, emotional, and economic burdens between their aging parents, their young children, their job where very few of them could find real meaning or happiness, regardless of the income it brings. People mostly relied on Confucianist philosophy to manage their social relations, have a generationally specific and conflicting attitude towards the Socialist legacy (or their vision of how socialism should be). They are trying to make meaning of their life following the neoliberalist trends. In between fulfilling the social need as a family member, investing in oneself or the future, and negotiating their social position as a citizen, moral behaviors translate into the commodification of biopower and consumerism in many cases.

1.2.6 Mental health and psycho-boom as a global trend

The third body of literature I rely on is the research on the rise of awareness and industry in mental health. The rise of psychological sciences, techniques/technologies, and related industry is a global trend, picking up its speed, especially in developing countries (Chua, 2014; Duncan, 2012; Tran, 2015). A mostly western originated science and schools of thought, researchers are closely observing the blooming of “psych-related” and are cautious of its popularity in the post-colonial era. Following Michel Foucault’s analysis of the rising of psychiatric discipline, people are worried whether the psycho-boom’s popularity and its related techniques and shaping of selfhood would be another imperial domination or used by the Nation-State as a way controlling through biopower (Foucault, 2003). On the other hand, it is of utmost importance that mental health becomes part of human rights and included as people’s wellbeing in the optimization of social welfare. Following WHO’s slogan “no health without mental health,” many developing countries are introducing national campaigns to diminish the long-existing stigma against mental illness and to optimize people’s psychological wellbeing. Cultural and medical anthropologists

have been researching China's psycho-boom, pointing out the social origin and cultural specificity of mental health problems in China due to its radical social transition and traumatic history from the 20th century (Zhang 2019, Yang 2018). Researchers also pointed out that the psycho-boom can also be viewed as a mostly bottom-up process, benefiting the people by answering their need to express and process the social sufferings they went through (Argenti & Schramm, 2010). My ethnography will tackle multiple aspects of the rising psycho-boom in China by bringing in data from patients, professionals, and ordinary people who directly or indirectly interacting with the psychological knowledge system, intervention, and industries. The most exciting part of the ethnographic data is to observe how the philosophy, technique, knowledge systems behind psychological sciences organically and spontaneously interact Chinese indigenous philosophies, medical practices, and everyday life rituals.

1.2.7 The trajectory of chapters

Since my preliminary research in 2017, China, the world, my own life, and my participants' lives have changed tremendously. As my fieldwork evolved, data were pouring in, the intersubjectivity I formed between my participants continues to go through transitions. I present five analytical chapters, illustrating one aspect of people's enriched lived experience across generations and historical periods. As I pointed out in the prelude, I consider the relationships that bond me with my participants the most meaningful outcome of this research, and this dissertation my commitment and promise to the people who shared their stories, time, and life with me. Starting from addressing the manifesting of mental illness amongst young Chinese people, I first address the core issue of transgenerational trauma in modern Chinese families. Then, I move on to discuss one aspect of embodiment and emotion across historical and personal transitions in people's everyday lives in each sequencing chapter. I focus on the influence of personal experience through analyzing the interaction with space, time, gender roles, and in final chapter, psychotherapeutic discourses and changing cultural trends. Starting from individual families and ending with commenting on general social trend, I intend to cover a wide range of topics and experiences using phenomenology as a paradigm.

Chapter two, “Rootless pain I cannot name,” discusses the intergenerational transmission of historical and personal trauma. I begin by pointing out that many urban middle-class young adults who lived a relatively affluent life had mental illnesses, low self-esteem, and tremendous difficulties in their social lives as they came of age. Instead of attributing their mental illness to a coddling and sugar-coating upbringing, I dive deep into the intergenerational transmission of trauma. The chapter articulates that the unresolved traumatic past experienced by their parents, even grandparents’ generations, continued to influence the intersubjectivity formed in their “natal families”. The lack of psychological resources makes people ill-equipped for the fast-paced modern life. The unresolved trauma and different interpretations of personal connections across generational cohorts often exacerbate this sense of unpreparedness. They step into the current market economy that promoted social competition and deprived them further of meaningful support. Writing at the intersection of psychodynamic and phenomenological theories, I explore people’s plight and hope as the traditional kinship system further dissolves, and interpersonal relations continue to change.

Chapter Three, “A Field of Happiness,” focuses on people who grew up during the Cultural Revolution, revealing the transition of history through physical and perceived space. This chapter documented a trip by my focus group and discussed the role space played in people’s lived experiences. Following a group of Sent-Down Youth who spent their adolescent years laboring in rural farm on their forty-year reunion trip, I explored the impact of historical trauma through the people’s emotional interactions as they navigate the ruin of their once-labored farm. I argue that people experience the transition of time and history through using physical, cognitive, and memorial spatial references. With both the absent and remaining buildings, the labor farm’s ruin became the trigger for the traumatic outburst. The cultural construction of time and space played a significant role in the manifesting of suppressed feelings. Also, it became a source of healing through witness and co-experiencing during the reunion trip.

Chapter four, “Eclipse,” deals with time and temporality in people’s mental illness experience. This chapter focuses on one case study with a young woman with emotional dissociative disorder and other mental illnesses. Combining Heidegger and Binswanger’s concept of time, I argue that temporality is the foundation of human experience. A coherent sensation of time forms the coherence in one’s personhood and intersubjective interactions. The nature of mental illnesses, in a way, is distorted temporality. Following Echo’s case and her unique sensation of time, memory, and somatic experience, this chapter discusses the process from illness to healing by focusing on the transition of bodily experience in time. I use Heidegger’s authentic-time to articulate how coherent temporality can be achieved through re-establishing the body-world relationship. Through the rhetoric of transformation in intersubjectivity and intercorporeality, the subjective experience of time may be tuned and synchronize with other people, thus bring healing to the body and mind.

Chapter five, “Bodies as arenas,” deals with gender and sexuality in contemporary Chinese society. Women’s and girls’ bodies are under constant scrutinization, discipline, and damage in the Chinese patriarchal society. Bodily and cultural damage manifests as various forms of physical suffering and mental illness. This chapter presents two case studies, one young woman with eating disorder and the other with PTSD and depression from rape and sexual abuse. I argue that in contemporary Chinese society, women do not always own their bodies but cannot cease to be their bodies. Women’s bodies are at the same time glorified and objectified. As they enter a heterosexual relationship, Chinese women are expected to perform social roles as the obedient and vulnerable daughter, the sacrificing and selfless mother, and the sexually attractive but loyal wife at the same time. This expectation permeates and crosses social situations, which continuously empowers men’s dominant position and imprisons women in their gendered bodies. Therefore, women’s bodies became the arena for the battle of gaining (or re-gaining) agency as they grow up, suffering from various aspects of socialization into this long-lasting misogynistic culture. This chapter discusses women’s struggle as a process of redefining humanity in Chinese society.

The last chapter, “Solving my problems or fixing my life,” deals with China’s Psycho-boom, especially in urban areas. The ethnographic data come from patients, professionals, and enthusiasts who show great passion for learning and engaging with psychological knowledge systems. I argue that this blooming industry is mostly the result of a bottom-up process, providing people with a safe niche, a platform, and a language in which they can address their struggle and sufferings outside the mainstream political and cultural discursive agenda. In many ways, it helps to destigmatize mental illness and optimize people’s wellbeing. On the other hand, the “psych” techniques and principles can also be used and are currently under government control and discipline, accelerating biopower’s centralizing. I argue that researchers and participants shall be cautious about such tendency and pointed out that through the everyday interaction both within and outside the psychiatric clinic. In everyday lives, people still utilize their agency and seek the combination of various healing methods.

This ethnography presents and analyzes first-hand qualitative case studies. Written at the intersection of medical anthropology, phenomenology, and studies on social transition in China through people’s everyday lives, this research contributes to understanding the impact of social change. In today’s increasingly precarious world, it is necessary and essential to pay attention to the details of how ordinary people in their daily lives respond to, interact with, and contribute to the unfolding of history. Through documentation and analysis of embodiment and emotion, I present the struggles and resilience, despair, and hope of people I grew up with or encountered across different circumstances. Often limited by my understanding, lived experience, gender, education, and individual life trajectory, I feel that the questions I ask are like yelling into an emptiness. Through the intersubjectivity and intercorporeality, I embody deep human connection, not only with my informants but also with my mentors and colleagues from across different cultures, which eventually leads to inspiration and, hopefully, an ever-expanding horizon into the future.

Chapter 2 The Rootless Pain I Cannot Name

Intergenerational transmission of trauma and struggle in contemporary Chinese families

“May I talk to you?” I got Anne’s message through WeChat (the Chinese social media and communication app) one afternoon after not hearing from her for almost an entire week. I immediately sensed that something was not right. “I don’t feel too well. I am scared. I feel like I’m having a heart attack.” I was fully aware that Anne did not have a pre-existing heart condition. I quickly checked with her about her bodily status. Anne indicated shortness of breath, tightness in the chest, and that “I felt like my heart is racing to burst, but it was only normal when I check my wristband. I felt that something deep in my body is twitching, and I don’t know whether it was muscle, or organ, or something else. I want to vomit, but I didn’t eat anything.” Based on my fieldwork experience and my research on mental health, I was almost certain that Anne was edging on a panic attack. After making sure that she had access to professional health intervention or an ambulance, if necessary, I guided her through breathing exercises and grounding techniques, followed by a fifteen-minute session of muscle relaxation and light stretches. Much to our relief, her body relaxed, and her breath came back to normal. The uncontrollable, deep twitches were gone.

I stayed on the phone with her for another two hours. Eventually, she was able to talk about her conflicts with her father. Anne displayed psychosomatic symptoms, suffered from insomnia, felt sad and frustrated all the time, and had a panic attack twice a month. All these symptoms accumulated as she stayed longer with her father. Not being able to trace the emotional chain of reaction, Anne was confused and disoriented. Fortunately, the guided breathing exercises, body relaxation, and my companionship with her helped tremendously. A few hours after her episode, she indicated that she never felt quite comfortable in her own skin. For the first time in a long time, she felt that her emotional status, bodily awareness, and external environment seemed to be in-sync. “It was as if I cleaned my glasses, and everything suddenly became lucid.” However, a couple of days later, when I repeated her words

describing her sensation after recovering from the panic attack, she was again confused and said she could no longer remember that feeling.

2.1 Introduction: Mental Health Concerns in People's Daily Lives

There is a surge of mental health concerns in China. There is an increasingly early onset of depression, anxiety, and other mood disorders. Adolescents' and young adults' psychological struggles have become increasingly visible (Kuan, 2015; Yang, 2018). Anne's daily struggling with her mental wellbeing was not uncommon amongst many Chinese people in their emerging adulthood (19 to 25 years of age when beginning to participate in my research). With the popularization of psychological sciences, theories, and practices as a growing cultural trend for self-exploration and self-care (Zhang, 2020), people from the younger generation are more comfortable expressing and exploring their affective life. These explorations are more than pursuing wellbeing. The younger generation also uses it as part of their identity construction in a cultural context where they have to figure out who they are and how they should behave in relation to multiple cultural codes and moral expectations (Csordas, 2002; Jenkins & Csordas, 2020). However, there is a generational difference in approaching psychological struggles and emotional regulations in everyday lives. Stigma against mental illnesses widely exist amongst the older generation and still profoundly influence people's daily lives and career stability (Yu et al., 2018). As of 2020, my ethnographic research shows people who are diagnosed with psychiatric disorders (such as schizophrenia and bipolar) would lose their position in a State-owned company or jobs as civil servants. This reality is not discussed or displayed publicly but people suffer from such discrimination in their lives. Fear of diagnosis, difficulties in obtaining treatment and medication, and related stress in domestic and public lives are still all too real. In addition to this condition, people lack adequate knowledge or access to deal with psychological issues and disorders such as depression and anxiety. During my fieldwork, parents and families of these tortured young people approach me with a common confusion: "Our family is egalitarian

and happy³. We tried our best to provide the best possible life for our child. Why is he/she so unhappy?” They would often add on: “Compare to our situation, their life is so much better. They get to choose their own lifestyle and career. They never knew hunger. Why is their mind problematic? (*jing shen chu wen ti* 精神出问题)?” The same confusion extends to the younger generation. Middle-class urban youth and young adults expressed great confusion and guilt, finding it hard to reconcile their affluent material life, their parents’ and family’s devotion, and their on-going difficulties in mental health and social relations.

Why are people across various social and economic backgrounds having such a hard time achieving psychological wellbeing? One participant, a brilliant college student in her mid-twenties, asked, “I do not know what’s wrong with me? Why do I find it hard to function daily when all aspects of my life were nothing other than ordinary? I did not suffer from domestic violence. My family was relatively well-off. Even when I encounter some setbacks and difficulties in my day-to-day life, it was nothing extreme. So Miranda, tell me, what is wrong with me and why did I find it extremely challenging to maintain a relatively normal emotional life? Why do I circle down the drain and crack so easily? Am I ‘too sensitive’ (*tai min gan* 太敏感) and ‘too fragile’ (*tai cui ruo* 太脆弱) like my parents blamed me to be?” Wenjing, 26, told me that the most frequent word she used since adolescence was “broken (*po sui* 破碎).” “I don’t know why I feel that way, but I constantly felt vulnerable, as if my soul was stretched thin. My mind is scattered, and I feel unmotivated. I feel broken inside, though I don’t even have the right to complaint.” Like Anne and Wenjing, many young adults harbored deep-seated emotions: confusion, guilt, discontent, resentment, and mostly, seeing their struggles and suffering as a form of personal failure.

³ Interestingly, many parents not only used the word “egalitarian” (*ping deng* 平等) but also “democratic” (*min zhu* 民主) to indicate that they pursue the modern child-rearing strategies. However, this kind of notion was usually met with bitter disagreement from the children’s perspective, almost a sign of cross-generational conflict.

2.1.1 Not Just a Generational Chasm: Emotions across social changes and their psychological impact

This apparent dilemma of living an economically secure life and struggling with mental health concerns is grounded in an underlying historical process of emotion and “emotionology” as Chinese society transforms across the past few generations (Lemmings & Brooks, 2014). Emotionology is defined by sociologist Stearns in his analysis of Nobeit Elias’s study of emotions across social changes as the history of certain emotions through people’s psychological interaction to their social structures (Krieken in Lemmings & Brooks 2014). My curiosity lies in not only the generational chasm between the parent-children emotional expression and experience, but also in what was considered to be functional, normal, or desired within the natal family (*yuan sheng Jia ting* 原生家庭). What is the trajectory and cultural understanding of emotionality across the past few generations in China? The answer is in narrative data and communications across generations and how these apparent generational chasms are embedded in larger historical transitions.

As I will illustrate with ethnographic data throughout this chapter, three underlying vital features contribute to the “problems in natal families.” First is the undealt, under-discussed historical and personal trauma the older generations experienced during the turmoil years through rapid social and structural changes from the mid-1950s to early 1990s. Rapidly transformed social structure plays a vital role in the emotional neglect, abuse, and conflicts within domestic settings and private lives. Second is the long-existing Confucian patriarchal kinship structure that downplays the necessity of intimate emotional communications and support creates a cultural system that strengthens the power hierarchy. Such a cultural system provides little to assist the more vulnerable members of the society, such as women and children, while not holding members with power, such as men and parents, accountable for their behaviors. Third, in contemporary Chinese society, the State promoted a return to the traditionalist mode of social relations while the neoliberal trend influences people’s everyday lives. The joint forces of this social structure and cultural trends deprived most citizens of participating in public life. They internalized social injustice, resulting in people letting out their discontent in private settings, pushing the

responsibility for a social member's welfare entirely on individuals' shoulders. As one participant wisely put it, "you could not take it out on the system, or the officials, whoever or whatever screw people up. So, one takes it out somewhere." The persisting structural violence and historical trauma were most likely taken out on vulnerable domestic family members. Throughout these rapid social changes, the competitiveness of the market economy, and the increasingly precarious future the country faces, trauma, anxiety, and an eagerness to exercise control over one's life translate into sophisticated navigation for everyone in everyday life. In contemporary urban Chinese settings, these struggles often manifest as psychological symptoms and emotional disorders.

Living across rapid social transitions and accompanied ideological clashes and changing social relations is challenging for all people (Hinton & Good, 2016; Hsu & Madsen, 2019; Arthur Kleinman, 1988; Arthur Kleinman & Kleinman, 1991). However, some people are more prone to psychological illness and social suffering than others. What are personal, interpersonal, and social factors related to mental illness manifestation and psychological struggles with no apparent direct cause in the younger generation? Can generational chasms and transitions in social norms explain the miscommunications and family dynamics that did not meet the expectations of "providing" competitive, "high-quality" citizens (Kuan, 2015)? Equally importantly, what contributes to resilience, rapid adaptation and helps people navigate difficult times? How do people make sense as they switch between different modes to exercise their agency?

My ethnography shows that the manifestation of mental health issues and people's struggle to achieve psychological wellbeing in contemporary urban Chinese families has an intergenerational traumatic origin. In this historical frame, most psychotherapeutic discourse falls short in addressing their current suffering's social origin. As people become more exposed to psychological analysis and languages, they began to talk about how their natal family's relationships contribute to their current psychological sufferings. This trend started in the early 2000s and quickly bloomed across communities, institutions, and various social platforms (Yang, 2018). People began to discuss stress, trauma, political

discontent, and the consequences of surviving rapid historical transitions as struggles in achieving psychological wellbeing.

Using psychotherapeutic language allows people to explore their emotional experience. However, the link between the psychological discontent and long-term social progress is missing under a psychotherapeutic framework, where the “patient” was reduced to an individual and treated as the center of the problem. The dysfunctional family structure frames the border of his/her lifeworld. Narration started with the patient’s childhood experience and went no further than his/her current emotional status and relationships. People seldom link their current suffering and difficulties in natal family relations to the previous generation’s historical trauma. Across generational cohorts, people tend to focus on the current situation. As they look back to their previous experience, their narrations seldom went beyond their childhood. Historical trauma and its transgenerational impact in China remain a mostly undiscussed genre. There were waves of social discussions and expressions of surviving political trauma in Chinese history, in literature, poetry, and heated political debate⁴. Such discussions die off or are censored by the State, never escaped the marginalized position in collective memory construction or social narration. The unresolved, unexpressed, and unclaimed trauma the previous generation experienced was passed down to the following generation in both conscious social interactions and unconscious projections of emotion. All Chinese families were influenced by rapid social transitions such as civil war (1945 to 1949), the Great Famine (1959 to 1961), the Cultural Revolution (officially 1966 to 1976), and the total socioeconomic restructure during the Post-Socialist Period (1978 on-wards). Amongst these collective experiences, some families experienced these transitions more traumatically and prominently than others.

As I shall show through case studies across generational cohorts, geographic locations, and socioeconomic backgrounds, experiencing direct political violence or economic instability play crucial

⁴ The infamous “Scarred Literature” (*shanghen wenxue* 伤痕文学) trend happened immediately after the Cultural Revolution can be seen as one generation’s attempt to address the traumatic political upheavals and social instabilities they experienced from the 1960s to 1970s.

roles in the interpersonal relations within one's natal family. One or more family members who suffered directly from political persecution, poverty, starvation, and other forms of related stressful situations have a long-lasting impact on their psychological wellbeing. Victims of political persecution and trauma display difficulties in emotional regulation, distress tolerance, and forming supportive social networks in the generations that follow. From a phenomenological perspective, I see that macro-historical context, micro interpersonal context, and one's upbringing and personalities work simultaneously in shaping one's personhood and his/her mode of interaction with the world (Csordas, 2002).

As is the case across cultures, forming interpersonal relationships, expressing, and communicating emotions, and maintaining meaningful social bonds mean very different things across genders, classes, and generational cohorts in China. With rapid social structural changes in the 20th century, people grew up in entirely different worlds before and after the Maoist period, with no fewer transitions occurring in understanding social relationships and private life expectations (Yan 2008). The uncertainty and dissolving social structure for Millennials in China was foreign to their parents' generation, which often resulted in mutual misunderstanding and even resentment within the natal family (Fong 2004). One common feature I identified as I was conducting interviews was how my participants emphasize on material concerns always/should precede emotional comfort. Emotional support and psychological comfort were expressed in different manners across generations and social classes and were considered secondary to material needs. Some participants quoted the old Chinese proverb, "only with a full stomach and full pantry can one afford to learn about civilized ways"⁵ (*cang ling shi, nai zhi li yi* 仓廩实,乃知礼仪). Others who had more western-influenced education refer to the Maslow pyramid to indicate that mental health, psychological issues, and emotional needs were not a priority during the

⁵ "Only with a full stomach and full pantry can one afford to learn about civilized ways. Only when people have enough food and cloth would people learn about shame and glory." This quote was first originated from Guan Zhong in "The Governing of People"(管子·牧民), Prime Minister for the Duke of Qi during Eastern Zhou Dynasty (770 B.C.E to 403 B.C.E), emphasizing that foundation of a civilized society is based on material security.

Collectivist era (the 1950s to 1980s) due to material shortage. As one participant in the 1960s cohort put it, “back in our childhood, life was hard, and wishes were simple. Obedience and filial piety were accepted as norms and facts. All you wanted was a good, full meal. Your parents did not have time to consider what kind of person you would become. Because the State would arrange occupation for most people. Your individual wish and career planning were not their greatest concern anyways. My parents focused on putting food on the table. Back then, we did not have to fight for a job. Everything in the planned economy was, you know, planned.” In these people’s understanding, under material shortage and political precarity, many mental health issues gave way to the need to survive. Having mental illness meant “going completely crazy” and losing humanity or social status, as were the few cases they witnessed during their childhood. “Occasionally you heard about people committing suicide due to poverty or class struggle, but that was during the Cultural Revolution.” Interlocutors from the 1960s and 1970s cohort seldom connect people’s mental status with the sufferings that followed. Because many of them became very successful following the Open-Door policy and throughout the first wave of economic growth during the market economy, they firmly believed that with better material life people’s sufferings are alleviated.

I recognize how the various ways my interlocutors interpret their lived experiences. However, I disagree with Maslow’s pyramid of human needs that claims people could not prioritize self-actualization unless they satisfied “basic needs.” Under similar material shortages, some families show more intimacy, emotional support, and psychological warmth than others. The interactive impact between structural violence and different personhood was clearly at play across situational stress and social contexts. The lack of emotional support and the power struggle from the public to the domestic domain has severe consequences in people’s mental health and psychological wellbeing across generational cohorts, manifesting in various forms of trauma which material affluence did not resolve. Simultaneously, participants showed remarkable resilience despite extreme political stress and material deprivation due to the ample emotional and spiritual support they achieved throughout these traumatic experiences.

In Chinese families, the nature of Confucian patriarchal structure diminishes emotional support, downplays the expression of intimacy, and shifts emotional labor in a highly gendered way. The more one conforms to the Confucianism structure, the less likely one will display emotional support to vulnerable members of the family. During political turmoil such as the Cultural Revolution, people who suffered from political persecution or played a vital part in committing political violence were more likely to transfer such violence in their domestic settings. As a result, offspring of these individuals see emotional support and psychological comfort as a scarce resource, therefore will show less emotional support for their own children, passing down the trauma across generational cohorts. The problem, therefore, lies within the social structure and behavioral codes in the Chinese culture. Rapid historical transitions only exacerbate people's psychological conditions as they were forced into one system and then thrust into another. As I will present with my case studies, this "survival mode" translates into different problems through intergenerational interactions, child-rearing practices, and vastly different experiences through transition across life-courses amongst different generational cohorts. Many people in the younger generation expressed psychological issues, emotional discontent, and moral dilemma of such discontent as they struggle to meet the culturally obligated behaviors and mindset of filial piety (Hsu in Hsu & Madsen 2019). What makes historical and personal trauma go down the generations? How does those traumatic experience manifest across different cohort and in different historical eras or life stages? What are some of the underlying emotional and embodied yearnings that became malfunction behavioral patterns even when they became economically affluent?

2.1.2 Hunger: the Huang Family Legacy

"There is nothing particularly outstanding in my childhood," Anne assured me, but added sarcastically, "I had a joyful childhood and a happy family." When I first recruited Anne to be my participant, she was an aspiring student in social sciences, a rare choice for a Chinese international student at a prestigious US college. The open attitude and insightful narrations she provided indicated outstanding intellectual capability, even wisdom beyond her years. These qualities did nothing to assist her low self-esteem and constant emotional fluctuation that both disoriented and confused her. I observed the first

emotional meltdown when Anne reached out for me to help her with a sociology paper. Halfway through our discussion, Anne became extremely upset and burst into tears. An inspirational discussion about paper ideas quickly spirals down to what seemed to be an existential crisis for Anne, during which she began to question from her choice of majoring in sociology to if she even deserved to be a student at her university. Quite taken aback by her emotional meltdown and failed attempt to comfort her, I suggested that we took a break and offered to cook her something to eat. She was quickly recovered after the meal, regaining calmness and even her usual cheerfulness. When I proposed that maybe her emotional meltdown was a by-product of low blood sugar, Anne was genuinely surprised. “That would make sense, because my dad was exactly like that,” After a moment, she said to me, “but ever since I can remember, I’m always *hungry* and *craving* for food or snacks. And I always had a low self-esteem and extremely nervous about criticism.” She said shyly. “I’m always *chan* (饑 insatiate) and I could not initiate things. I cannot start doing things, you know. The more important the task is, and the moment I realize I need to do something, I became so stressed and resentful, and then I’m nervous and hungry.”

The significant emotions that anchored her lived experience narrations throughout her childhood and the major transitions included: uncertainty/confusion, which oftentimes translates into self-doubt and disorientation. Her emotional meltdowns quickly translate into full-body dysfunction, from motion sickness to memory blanks. She repeatedly indicated a constant mental condition of “craving” for food, attention, comfort, reassurance, and companionship, all the while feeling pathetic about having such craving. She typically displayed an insecure and fearful attachment style (Wright et al., 2009) and her emotional status was exacerbated by her separation anxiety, for she was sent to a boarding school at age six and could not cope with the lifestyle for years on end. As the opening snippet of this chapter showed, she had a difficult time trying to align her self-awareness, emotional status, bodily condition, and external environment. “Usually when I realized it, I was already ‘circle the drain’, feeling horrible, thinking that I had no accomplishments, doubting every decision I had ever made, and all the while feeling pathetic for feeling it.” Anne’s cognitive pattern and emotional habits were typical across several of my case studies,

especially with children sent to boarding schools at a young age and was bullied by peers as they grew up.

I find children who grew up in unstable social contexts often settle into what I call a “reactive” mode. My fieldwork’s unstable social context included constant migration, conflicting family settings, emotionally unstable parenting styles, separation anxiety when they were sent to boarding school or were latch-key children as they grew up, etc. They navigated through various social contexts and situations, waiting to react to other people’s comments and demands. They were especially sensitive to other people’s emotional changes but were unaware of their own emotional fluctuations, usually not until they had a full emotional breakdown. It can be difficult for them to initiate a project, thought, or plan. They constantly seek companionship, usually through online platforms, without explicitly address if they felt lonely. However, many of them felt very socially awkward or got stressed out from real-life social interactions. Within a rigid structure, they felt suffocated and restricted. Without such external routine, they became disoriented, anxious, and easily exhausted emotionally. These features were extremely present amongst the 1990s cohort, oftentimes across personality types and social classes. Such docile, disciplined bodies (Foucault 1996) resulted from both highly authoritarian upbringing and emotional neglect (Wright, Crawford & Castillo 2009; Shaffer, Yates & Egeland 2009). For women and girls, “guilt” anchored almost all their emotions, feelings, and thoughts. They feel immensely guilty if they want something for themselves, feeling distressed about their situations, and are so trained to attend to other people’s (usually authority’s) needs. Anticipating for the uncontrollable event became a normal cognitive and psychological state, a sign that almost resembles domestic abuse (Wright, Crawford & Castillo 2009). In all their waking hours, they described an always waiting/anticipating status to react to the people around them. Even girls (also two males across my 40 case studies, one of whom with transgender/fluid identity) from seemingly secure and “ordinary” families show symptoms of survivors of domestic abuse. They suffer from low self-esteem, were described by parents and peers to be highly sensitive (in a negative tone) and become easily frustrated or feeling defeated when criticized or even commented. Most significantly throughout their everyday experience, temporality and reality are altered

in their perception⁶. Across 16 cases of my study with young females, 13 indicated that they often felt time was either fleeting or dragged long. During these altered mental states, they could not stop going over past or imaginary situations in their mind, second-guessing, and doubting all the things they said/could have said, fueling their anxiety and stress, and would not stop until they are emotionally numb or exhausted. Across the 28 case studies for people in their 20s and 30s (24 of them were from middle class urban families), 18 of them were diagnosed with mental illnesses. For the rest of the 10 people, 7 obvious displayed or reported symptoms of depression or general anxiety disorders, though they did not seek professional intervention. For young women such as Anne, who had no obvious childhood traumatic event, display increasingly severe mental health issues as she entered emerging adulthood. I started to wonder where her fear, doubt, confusion, and disorientation originated from and why a girl who continuously declare that she ought to feel happy show symptoms of surviving domestic abuse.

I did not recruit Anne as my core participant in the first place. Instead, her description of her father's behavior caught my attention. In summer 2018 I arranged interview with her father. Through talking to him, different pieces of the puzzle eventually came together when I interviewed her father, Mr. Huang, in their home in Beijing. Mr. Huang, then aged 50, was a consultant of a continuous education and career training company. My first impression of the family was its egalitarian atmosphere and humorous interactions. Many urban middle-class families are proud of such a family atmosphere. Parents distinguished themselves as modern parents who pursued the more advantaged and developed (*xian jin* 先进) educational principles for their children, different from the traditional, strictly hierarchical family atmosphere and emphasized discipline and punishment. We started our conversation about their parental-children's relationships. However, the narration quickly turned to Mr. Huang's childhood experience.

Being a father was not the center of Mr. Huang's identity. He was much more interested in talking about his childhood traumatic experience, which, Anne later disclosed to me, was a very well-

⁶ See Chapter Four on discussion of time and temporality

rehearsed and often-repeated family story. He suffered from domestic violence and emotional abuse from his own father, Dr. Huang, a surgeon of the Mining unit in a northern Chinese town. Dr. Huang started off as an outstanding medical student and a young physician in the capital city but was sent to the mining town to work as a doctor in the town clinic during the Cultural Revolution due to his political dispute with local officials. According to Mr. Huang, his father never got over such setback and took off his resentment, anger, and inability to achieve higher status in his young son's life. Mr. Huang indicated that he spent his whole childhood in the looming fear of his father and the harsh punishment and frequent beating, which crushed his self-confidence and self-esteem. "I never remembered a day of joy or happiness in my childhood. Though I knew I was quite smart, I dare not to express my thoughts or feelings, nor did I dare to initiate anything even after I went to college. My father totally crushed my psychological condition. To this day, I did not know why he treated me the way he did. Maybe he was politically suppressed and thus harbored so much discontent, maybe he was disappointed that I did not prosper in school as he once did. All I knew was that I wanted to escape, leave the family, this town, especially leave him as soon as I could."

During our initial life story narration interview, which extended to three hours, the core emotions Mr. Huang demonstrated were fear and unhappiness. He used the term fear (*kong Ju* 恐惧) 28 times during our interview when he talked about how his father mistreated him, still feeling the same degree of injustice and resentment as a fresh wound. Mr. Huang illustrated his narration with multiple stories of how he was violently whipped, beaten, and humiliated from a young age with vivid descriptions. His father provided no encouragement, always appeared cold and authoritarian, and was quick to punish him severely. Even though his family was relatively well-off, with both parents working as doctors, he had no memories of being treated with good food, tasty snacks, or kind words. An anecdote both Mr. Huang and Anne told me on different occasions was how Mr. Huang's father brought back a pack of cake during one of his trips to a Beijing conference. Instead of giving the fresh cake to his children right away, Doctor Huang hang the pack up on the ceiling beams above the dining table, and the children looked up to the

package every day, dreaming of gaining the permission to eat it. When Dr. Huang finally decided that the children could have it, the cake had already gone wrong and half-eaten by insects. The story was passed down as a funny anecdote over dinner, frequently told by Mr. Huang to his daughters and usually ended with him commenting, “so look at how happy you both are, eating to your hearts’ content. Your Dad had none of those growing up.”

Food, attention, treats, and the possibility of being punished or rewarded were all expressed as parental power displayed in the domestic setting. That deeply rooted sense of craving became a form of embodied trauma for Mr. Huang. I argue that such a craving was not for food but also a total body experience of a child growing up in an extremely precarious and insecure family and social context. As I mentioned in the introduction chapter, I use embodiment as a paradigm and view the body as the foundation and result throughout various forms of body-world interaction (Csordas 2002). In Mr. Huang’s case, it was evident that his bodily and emotional regulations were based on this undertone of fear of punishment and a deeply seated sense of hunger and craving. Two driving forces mainly dominate his daily mode of existence, the way his intention goes and his “being-in-the-world”: 1) the fear of being punished, which drives him away from commitment and responsibility, because he was afraid of being hold accountable; 2) a craving for attention, indulgence, immediate satisfaction because he does not know how long a pleasurable moment would last.

Contrary to his perception, Mr. Huang displayed low distress tolerance (Simons & Gaher 2005) across various occasions for a man of his age. He was easily frustrated under stress, and, based on narrations from other family members, he shuns away from responsibilities both in domestic settings and workplaces. Huang got hungry quickly, and the hungry sensation is usually accompanied by and expressed as anger, distress, and mood swings. The stress and fear of family and social responsibility would swiftly turn into headaches, shortness of breath, and sudden rages that he assumed that he had little control over. These patterns are typical consequences of childhood maltreatment and emotional abuse (). His behavior and interactions reveal complicated issues with authority figures. Throughout his career path, family lives, and transitions in life, Mr. Huang relied on capable people in his life (such as his wife,

who acted as the breadwinner and outstanding entrepreneur) to make decisions and carry out tasks for him. However, he became highly defensive when he sensed that he was “being controlled” or that things were not going his way, a typical trend I observed across many Chinese males but rarely addressed in the daily lives of scholarly discourses. Quite like the famous psychologist Wu Zhihong’s portrait in his infamous (and now banned) popular psychology book “Giant Baby Nation,” Mr. Huang was emotionally immature despite his sensitive personality and general capability demonstrate kindness and empathy.

The Huang family’s transgenerational transmission of trauma is quite representational when we embed these transitions in larger contexts. The fear of hunger, the understanding that psychological support is a scarce resource with little reward unless used as disciplinary power, and the craving for security dominated Chinese society. The traditional East Asian family is usually composed of an authoritarian father and a doting but emotionally over-involving mother. Psychoanalysts suggested shaping specific personalities under such a model, especially among male children, in East Asian society (Okonogi, 1979). However, few scholars investigate the emotional communications, especially control and manipulations, as power plays in the domestic dynamics that became malfunction, deeply seated psychological problems for people, especially across radical personal and historical transitions. Mr. Huang’s sense of insecurity, fear, and complicated relationship with authority was related to his harsh and abusive father. During our interviews and his family conversation, he portrays Dr. Huang as a typical Confucianist authoritative father figure.

Most interestingly, he used the exact descriptions when he expressed his resentment to the “Central Government” as he loosely participated in China’s 1989 Students’ Movement (G. Yang, 2000). He attributed his later decided to quit his career in the State-Owned systems to similar motivation. It is common to see people who spent their childhood during the Cultural Revolution became radical in their emerging adulthood, demonstrating similar emotional tendencies towards their father and the State. However, during my upbringing and my fieldwork, I also witness many of these people, especially men, quickly fall back into the patriarchal system that ultimately benefits from their gender and social positions in their middle-ages. When they become fathers, they could not break out of the circle of violence. In

their personal lives, they identify with another form of authority against the previous governmental system that oppressed them yet showing no revolutionary or radical thoughts to promote further social changes. Their suffering came from social level and infiltrate into their domestic setting. However, with the persistence of the patriarchal system, the ruling of an authoritarian state, and the rise of the neoliberalist market economy that shifted social welfare responsibility to domestic settings, many Chinese men born in the 1970s became the most conservative generational cohort I interviewed. Mr. Huang and others lean towards conservative political campaigns when they immigrate to the United States, not because they understood American politics better. Their political position exists only to take out their resentment against their fathers and the Chinese political authorities that they saw as did them wrong. Their childhood trauma and political discontent do not rise from a personal level to an institutional and societal level, but in turn, permeate back into their own newly established nuclear family. These people still perceive others in the same social niche as potential competitors for resources, attention, and privileges throughout their social mobility and migration, continuously driven by the fear of punishment, deprivation, and crave privileges. They became the “Giant babies” with deep-seated emotional discontent and constant need for support, comfort, and satisfaction. When Arthur Kleinman concluded his ethnographic research in the late 1980s stated his worry about whether this generation would become another lost generation of China. With the eventual diminishing of civil movements in public settings, many participants during the 1989 June 4 movement did not become the force of change in mainland China. Instead, they became another generation of contributors to the transformed but persisting patriarchal system, using their trauma as leverage for the privilege instead of motivation to promote equity in domestic or public settings.

If Mr. Huang’s problematic relationship with any form of authority came from his complicated relationship with his father, his anxiety towards potential precariousness and complicated relationship with food mainly came from his mother. Dr. Yang, Mr. Huang’s mother, a well-accomplished physician, suffered greatly as the family’s first-born daughter. From a young age, Yang demonstrated outstanding potential and talent at school. Her mother fully supported her to go to medical school. However, during

this expensive and lengthy process, the family with ten siblings went through the Great Famine (1959 to 1961) that followed immediately after the Great Leap Forward. As most agricultural provinces fell under famine and extreme poverty, Yang's mother starved to death to support her study and their family. Dr. Yang spent her whole life first raising her younger siblings, then devoted to the Huang family she married into while becoming a physician herself. Due to the extreme material shortage, trauma, and possibly genetic preconditions, three of her younger brothers suffered from what would be diagnosed today as schizophrenia and manic depression. In the 2000s, one brother had a violent episode, during which he started to attack his neighbor and was murdered during the conflict. As I was doing fieldwork in China, Dr. Yang, though retired after finishing her well-accomplished career, suffered from major depression. Her expression, opinion, and existence in the family were ambiguous and silent. During my interviews with Mr. Huang, he barely mentioned his relationship with his mother. Even in Anne's narration, her grandmother's role was vague. Even her depressive symptoms were barely noticed by other family members, except that Dr. Yang was losing weight, eating less, and went out less.

Dr. Yang's early years of suffering and her constant anxiety to feed everyone in the family had a long-lasting impact on the allocation of resources, an unfortunate but common feature across many Chinese families. They passed down to the generations that grew up in affluent material life. As I will show in later chapters, trauma became persistent and had a long-lasting impact on people because of the hardship that drained its victim of her energy and altered the way individuals orient towards the world. The embodiment of the hunger manifested as an existential crisis, which changed Dr. Yang's cognition, her ways of forming social relationships, and her conception of resource allocations. These cognitive, behavioral, and emotional patterns were communicated down through everyday experience and social interactions she formed with her community members. She silently permitted and participated in Dr. Huang's power-play through food. For example, the father and the youngest son would share a bottle of milk. After they finished, Dr. Yang would refill the bottle with water and let Mr. Huang and his sister share it. Even though the family did not suffer from economic hardship even during the planned economy, Dr. Yang accepted and embraced the idea that not everyone should have ample food. Her childhood

experience and embodiment of starvation made her believe that enjoying love, attention, and resources could not happen to each family member. As a mother, she reconsolidated with the injustice of resource allocation. She committed to self-deprivation first. Then such sacrifice could extend to her first-borns without too much emotional burden in playing favoritism. To this day, Dr. Yang could not help but gaze at guests and their mouth during meals, calculating how much food they were taking from the table, making everyone very uncomfortable. According to Chinese tradition, it was essential to maintain social relations through family meals and welcome relatives and friends to live and spend time in the family (Farrer 2009). Thus, such behavioral patterns made it difficult for any family member to establish or maintain social bonds, creating a socially distancing and spiritually lonely situation, draining social support for family members despite both doctors' outstanding skills.

From observing and analyzing the family dynamics in Huang's family, I conclude that intergenerational trauma is passed down from one generation to the next, mostly through the establishment of small habits in everyday lives. On conscious and subconscious levels, the lingering sense of anxiety and fear of deprivation impact people's behaviors, emotional regulations, and social interactions the most. Habits and behaviors influence the construction of personhood for the younger generation, resulting in low self-esteem, lack of emotional recognition and reflection, and difficulties in managing and expanding social relationships due to dysfunctional habits. Dr. Yang's habit and anxiety over food allocation made it difficult for the family and its members to expand their social network and form friendships. According to Anne, things related to material goods and pleasantries, especially food, were still a significant "tantrum" trigger and stressor for her father. Purchasing groceries was a painful family trip, despite the family's financial security. He would ignore meal preparations and would only purchase the cheapest food from the market. When leftovers have gone wrong, Mr. Huang got impulsively angry and would not tolerate other family members to throw them out. The transgenerational trauma passed down from Dr. Huang to Mr. Huang, then to Anne through different forms of parent-child interaction, everyday routine, and a total lack of emotional support and regulation in the family. Though Anne's parents sought the best school and education for Anne and sent her to an expensive boarding

school, Mr. Huang settled into a habit of depriving and rejecting anything Anne needed or wanted, making her feel guilty about her craving. This sense of guilt and constant psychological readiness to be deprived built into Anne's personality and self-esteem, deeply scarred her both in her private life and damaged her social interaction with peers. For her twelve years at the boarding school, Anne could not bring any snacks or toys to share with her classmates and was constant in a state of craving. "I would dream of having glamorous meals and woke up finding myself chewing my pillow. I internalized a sense of guilt when it came to ask my family to buy me anything. I was always hungry, though the school's dining hall provided abundant meals, I thought it became my thing, a setting status. Even when I needed to buy bigger shoes my father would sigh and get frustrated, saying that I was growing up too fast and it was a waste of money. So, I would not ask him to buy me shoes until I could no longer walk in my old ones. Now my toes are all twisted because I never had fitting shoes. And all the things I got were cheap and was very aware of how awkward and smelly my body was becoming."

2.2 The Myth of Filial Piety: Emotional community and the construction of personhood under a transforming patriarchal power hierarchy

Under radical social transitions, highly authoritative power hierarchy, and stressful living situations, care, attention, and emotional support were viewed as scarce resources, which fueled the transgenerational trauma, fear, and resentment beyond the lack of food and material. I pay special attention to emotional communication and expression to explore intergenerational trauma transmission because emotional experiences are the most intimate aspect of people's everyday lives that reflect social changes. I contribute to the literature on transgenerational trauma by focusing on emotional processes and experience because I believe the embodied emotion through interactions anchor the transmission of traumatic experience across generations. To understand emotional communication and expression, I expand the narrative data of one individual to a social unit, exploring the formation of emotional communities. Emotional community is a concept developed by sociologists Norbert Elias, who paid attention to the emotional rules developed amongst various social groups, which serve to channel the

expression of affect. Elias's theory of social process provided a simple model of subject formation within which emotions, the discourse for articulating or constructing self-experiences, and how selfhood is historically specific are dynamically interrelated to each other, and to the social and communal contexts within which the subject (or self) is actualized (Elias 2000 (1939)). He thus defines the real historical process comes from the reconfiguration of relationships and people who shaped their individuality according to these transiting references and relationships. Elias and his followers' theories form progressive approaches in understanding social change and bridging human psychology and social structures (Lemmings and Brooks 2014:5). As I try to illustrate with my research on intergenerational transmission of trauma through emotional communications (and the lack thereof), social changes can also be detected and understood by studying: what emotions are encouraged through cultural systems? Who has the cultural consent to express emotions? Which members of the emotional community have the access and right to address their emotional needs and expressions? I argue that under the Chinese patriarchy with Confucianism (and neo-Confucianism) institutions, emotional needs are systematically under-discussed and unelaborated in domestic settings. The Confucian social structures, anchoring its moral foundation through filial piety, are fundamentally a power structure that discourages intimacy and prioritize power.

Filial piety is the cultural belief that, because children owe their existence to the parents who gave birth to them and nurtured them, they are forever indebted to their parents and shall, in turn, support their parents in their old ages. As Confucianism was re-interpreted and re-constructed to fit the need to rule an empire, filial piety's humanistic nature is eventually marginalized. Instead, filial piety became the principle behind the production of obedient and aspiring subjects/sons for the patriarchal system, aligning the absolute authority of the emperor and his government in the public sphere and the father in the private sphere. For a long time in Chinese society, prolonging the family line and supporting one's parents were considered the most critical moral obligation in being human and the foundation in sustaining the agricultural economic system (Fei, 1992; Y Yan, 2003). Many scholars explain the manifestation and function of the patriarchal Confucian kinship system and its evolution in modern Chinese society by

capturing the structural and economic transitions and the changes happening in people's private life settings (Fei, 1992; Hsu & Madsen, 2019; Kipnis, 2008; Y Yan, 2003). However, very few scholars address filial piety as a center cultural belief that place the emotional burden on the vulnerable members of the family while seldom hold people with power accountable for their input. The core emotions for people to conform to such cultural hierarchy are guilt and a sense of indebtedness, which, when it translates into communications and interactions, shift the burden of emotional labor to the vulnerable and less powerful family members: women and children. When I observed the family dynamics where intergenerational trauma persisted, women and children needed continuously to be ready and react to their seniors' emotional outlets instead of receiving emotional support from their parents. Women and children also lacked the chance to voice their thoughts and were expected to appear cheerful and content even if they do not feel so. Negative emotions from vulnerable members of the emotional communities were suppressed or violently stopped, including common parental practices where parents completely banned children from crying or sulking, even when they were being punished, scolded, humiliated, or under stress. This authoritatively regulated emotional expression and interpretation of affect occur at public life and in domestic settings, fueling national propaganda campaigns that promote "the ignite and display of positive energy." (*fa hui zheng neng liang* 发挥正能量)(Du, 2014; P. Yang & Tang, 2018). In real life, just further deprived people in lower social hierarchies to understand and address their difficulties and concerns for the sake of the face of people with power.

The top-down cultural discipline and power play through emotional expression permeates from the public setting to the intimate interactions in domestic settings, determining the emotionology across social changes and the construction of emotional communities in private lives. One participant (male, 47) told me that when he was young, he did not know how to cry when he was harshly punished and would become so angry and short-breathed that he would faint on occasions. He considered himself a "democratic and supportive" father and was genuinely confused about why his daughter suffered from depression. When we talked about expressing negative emotion, he commented that "I treated my

daughter with a sense of gender equality, so I raised her like a boy.” When I asked what he meant by that, he said, “I trained her not to cry, even when being scolded or in difficult situations. Because in her life, most things were not stressful as she feared.” As most Chinese parents would in their narrations, he added, “I would do anything for my daughter.” Ignorant of how his own incapable of expressing sadness, the father could not be empathetic towards his daughter’s situation. He became easily irritated when his daughter demonstrated “negative emotions” and in-turn, reinforced their power differences through everyday conversations. It was devastating to witness the father-daughter conversation that I felt suffocated and saddened by the daughter’s unmistakable sense of helplessness a few times. During one of those family gatherings, I had to step out and take deep breaths not to let my frustration show. The father considered his well-intentioned but unsupportive lectures to be “egalitarian conversations,” during which the daughter could hardly put a few words in. From his daughter’s perspective, however, her father was emotionally absent and awkward. “Everything he said to me seemed scripted. Actually, everything we say in the domestic setting seems to be scripted. We always say the same thing, without anyone expressing anything authentic. If I did, he would scold me for being vulnerable or emotional.” The father grew up in a punitive and authoritarian household could not become empathetic and understanding even though the daughter could see he tried his best. This chasm between psychological capability and intention became so frustrating for both parties and eventually translated to a strong sense of guilt for the daughter. “I feel so miserable that I don’t even have the right to be depressed. I hope they give birth to another child who would make them happy and easy to love.”

Ensuring that your parents are happy becomes the new standard of filial piety under neo-Confucianism, a moral obligation emphasized in public narration on top of taking care of one’s parents in their old age (Hsu & Madsen, 2019). Because filial piety is so central and taken for granted in the Chinese cultural system, native scholars seldom discuss it from the perspective of influencing psychological wellbeing or see it as domestic power play and oppression. Social scientists from other cultures hesitate to criticize the psychological damage caused by fulfilling filial piety in a patriarchal society, or treat it as a set of cultural norms, transforming and manifest in various ways during the rapid historical changes in

China (Santos, Goncalo; Harrell, 2017). In some cases, filial piety practices and obligation are so taken for granted that it became a static variable in psychological surveys. However, as many other cultural concepts, filial piety is neither a static set of moral code nor interpreted uniformly across individuals and families in the Chinese cultural settings. Xi's government's effort to rejuvenate the great Chinese civilization (Hsu & Madsen 2019) also emphasized the concept of filial piety. From a state level, it was a way the government eventually place the burden of social welfare to individual households and families. From nation-state to families and households, such recreation of neo-Confucianism culture traits such as filial piety is often used to reinforce patriarchal power hierarchy and a cultural consent that justifies emotional neglect, coercion, and skewed emotional labor. There exist a variety of personal and interpersonal interpretations of filial piety and emotional supports in domestic settings. However, my ethnography shows that the more people conform to the ideas of filial piety and internalized the accompanying guilt and sense of indebtedness, the less sense of agency and contentment a person experience in his/her family life.

The intergenerational conflict, internalized guilt, and suppressed negative emotions often actualizes through people's bodily experience with the emotional and verbal expressions are often dismissed or suppressed. During my fieldwork, I found that self-harm became a form of resistance against family relations' oppressiveness. At face value, this could be read as a youth cultural trend under popular media portrayal. However, the sophisticated motivation behind self-cutting and other forms of self-harm indicate more profound cultural transitions (Csordas & Jenkins, 2018). In my Chinese participants' case, it was often pursued as a form of coping strategy in seeking ways to actualize emotional pain through somatic pain. More uniquely, it was often used to explore bodily boundaries through the process of destressing in dealing with complicated family relationships. In traditional Chinese culture, one should respect one's body not out of self-love but out of filial piety because the existence of one's body is a gift

granted by one's parents⁷. Though this ancient doctrine no longer manifests in people's everyday language, it nevertheless influences people's interpretation of family relationships. In many ways, my participants who display severe mental health issues generally lack a sense of ownership to their own body and will, which takes form as psychosomatic symptoms and emotional distress throughout their adolescence and adulthood. Self-harm sometimes becomes their coping strategies in re-claiming their sense of ownership towards their own body. Across 40 case studies I did, six people reported frequent self-cut, intentional food deprivation, and other forms of self-harm that they never shared with their parents. During one of the family interviews, the mother was astonished when she found out that her daughter repeatedly cut herself throughout her adolescent years. The mother's strong sense of guilt and heartache almost immediately transferred into defensive anger and rage, projecting onto her daughter and accusing her daughter's deliberate self-harm as a form of disrespect and intentionally causing her parents' distress. Her daughter sat there in absolute silence. Later, she told me that causing her parents distress was not her intention at all. "My mother repeatedly told me that I was a piece of flesh separated from her body, and that she shall co-experience all the happiness and sorrow I felt. She used this to explain to me why she only hit me with her hand, so that she would feel the same pain. Later in life, I coped with my own stress through cutting and seeing my own blood, so that I would know that my pain is mine alone."

This entangled interpersonal bonding does not help them cope with the highly individual and self-reliance neoliberal social structure in urban Chinese settings. Several social factors in contemporary Chinese society contribute to discrepancy between fulfilling filial obligations and surviving the neoliberal market economy. First, there is increasing difficulties in obtaining financial independence in today's

⁷ The opening chapter of "The Book of Filial Piety" (《孝经·开宗明义》) states "One's body, each hair, and each inch of skin are gifts from one's parents. The beginning of filial piety is to treat one's body with utmost care. Make your name known down history, so that your parents' name shall be glorified. This shall be the ultimate form of filial piety." This form of thinking became the foundation of relationship of a Chinese person's life, and has a prolonged impact on people's behavior, belief, and lifestyle to this day.

China. On average, participants born in the 50s and 60s claimed financial independence and relied more on peers from their work units around age 17. The average age of financial independence for those born in the 70s was 25. The average age of financial independence for those born in the 80s was 35. Each generational cohort considered financial independence differently, but nearly all people claimed that supporting our parents' supplement was important to them financially. All participants in their emerging adulthood felt guilty about relying partially or fully on their parents for financial support, even though higher education prolonged the age of financial independence. Because the young adults nowadays must rely on their parents' economic support longer than their parent's generation, they generally feel less control over their own lives (Hsu & Madsen 2019). Therefore, the high cost of modern living that demands a joint effort from multiple generations goes against the notion of individual independence in the neoliberal trend, which many people from the younger generation faced. As one of my participants put, "while I still live at home and relying on my parents to pay my tuition fee and living expense, naturally they demand my obedience and think they should direct my life. Though I have my own thoughts, feelings, and desires, I do not really get to vote in many decisions I want to make on my own." The prolonged process of gaining economic independence forms the foundation of neoliberal personhood and fulfilling filial piety as moral obligations. However, it is not a topic frequently brought up while we discuss emotional support and psychological wellbeing.

The dynamic of bodily, and I argue, personal boundaries within the family setting (or the lack of it, in the neoliberal urban families) is a legacy of the agricultural kinship system. Anthropologists studying China and Chinese families established a rich discourse, especially on women's economic, social, and emotional involvement in their offspring under the patriarchal system. From Margery Wolf's concept of uterine family (Wolf, 1972) to the analysis of changing the structure of emotional support in women's community (Gilmartin et al., 1994), researchers pay attention to how the underlying shifts in the economic system and moral obligations as people form emotional bonds across historical periods. To establish personal boundaries is a comparatively new concept, introduced by psychotherapy. It swiftly becomes the core of many narrations of constructing personhood and shaping a sense of self (*su zao zi wo*

塑造自我) during my interviews. The neoliberal cultural trends also encourage people to pursue an individualistic sense of the self, thus in need of a sharper interpersonal boundaries amongst intimate relationships (Yan, 2003). The center of this personhood construct lies in emotional processing during interpersonal interactions within family settings. Some of my participants, especially from the younger generation, began to talk about how each person is responsible for their own emotions, while in real-life settings still struggling with communicating with their family members or seeking emotional confirmations daily. With its modern form, filial piety seems to include making sure one's parents' emotional content and psychological wellbeing as part of the moral obligation (Hsu in Hsu & Madsen 2019).

In many Chinese family settings, the power dynamic lies in the cultural organization of emotion, simultaneously in terms of the larger social context and each family's specific intersubjectivity and relationship (Kleinman & Good, 1985). To be more specific, this power dynamic is actualized not through the pursuit of happiness, but the right to be unhappy, address one's distress and express these emotions. The emotional labor (or affective work), which I define as the attention, effort, and dedication to recognize, attend, even conform/yield to another person's emotional need, rests on the shoulders of women and children. However, in the vulnerable years before a child could fully understand the rapidly changing social situation and complicated social network, he/she could easily become the target of emotional abuse. In family, and arguably in public settings, such emotional labor is at once highly demanded and readily dismissed (Major 2008). In addition to this unaddressed issue in Chinese family settings, corporal punishment was widely acceptable across social classes until the 21st century (and still widely practiced, though somewhat against mainstream cultural ideas) (Kuan 2015). All these family dynamics become why many people did not have a chance to develop a system to regulate their emotions.

In addition to the lack of mutual emotional support and absence of cultural recognition of emotional labor, there are also social structural changes underneath the struggles in domestic life. The dissolving of the traditional kinship system and the disappearance of collective and co-operative

neighborhoods greatly burden caretakers in the family across generational cohorts. With the radically skewed demography of the increasing aging population, people become desperate in securing their children's care. Each individual and each family explores this precarity as they face the accumulating uncertainty in the plateauing of the market economy, while historical and personal trauma keeps bubbling up as family members go through personal transitions. I will use another case study to discuss how the intergenerational trauma played out in the older generation continued to influence people's quality of life, and how the dissolving kinship system and lack of social support exacerbate individual's mental health status in current time. I will now show how the moral obligation of filial piety, the arbitrary power hierarchy in domestic settings, the lack of public support, and the unresolved historical trauma will jointly influence a person's mental health and well-being through the exhaustion of their care labor.

2.2.1 Yumei's Nightmare

Amongst her age cohort, Yumei's experience was traumatic even by 1950s standard. For *wulinghou* (people who were born in the 1950s) who experienced a radical social transition at every turn of the decade, Yumei said she had to continually face the fact that life's suffering was often overwhelming beyond an individual's contemplation or control. We sat down to a long person-centered interview shortly after her 65th birthday. Yumei looked tired and described that she was going through a lot since her mother's death at age 94 the winter before. "I cannot put my feelings into words yet. It was a weird mixture of fear, grief, exhaustion, and a strong sense of relief that I felt empty."

Yumei was born into an aspirational family in the early 1950s. Her parents were a highly educated couple who worked hard despite long years of warfare and instability, eager to devote themselves to constructing a modern new China with great passion and commitment. However, at age four, Yumei's parents were politically persecuted and wrongly imprisoned during the anti-rightist campaign. Yumei's younger brother was two years old when his mother was imprisoned, and his father was locked up and mentally tormented because he appealed to his wife's case. The toddler was deemed

by the preschoolers' caretakers as offspring of anti-revolutionists, and his teachers thus refused to take him to a hospital when he had a fever. The child soon perished due to this cruel ignorance. Yumei learned at a young age that there were specific people in her close social network who would hurt her and her family out of spite in the name of political dispute. The direct suffering in the form of political persecution changed Yumei's perception of the world and her time.

What contributed to her resilience, on the other hand, were kind gestures and unconditional love provided by members in her social unit, who cast stark contrast with the people who put the family through turmoil. Yumei was soon adopted by her paternal aunt, an elementary school teacher, and a mother of four. Her aunt's family was impoverished, but her aunt and cousins doted on her and loved her unconditionally. Yumei's extraordinary resilience proves what developmental psychological research showed about how early childhood unconditional love and support provided a solid foundation of psychological wellbeing, emotional regulation, and mature personhood throughout a lifetime (Winnicott, 1991). The emotionally supportive and loving atmosphere was a significant difference between Yumei's development, which influenced her later personality, transgenerational experience, and parental style, and the development of Mr. Huang's. Under the love and care of her aunt, Yumei survived the Great Famine. However, due to the material hardship, her aunt's health degraded swiftly, and Yumei was again dislocated and raised by her maternal uncle. During her adolescent time at her uncle's home, Yumei's trauma deepened and left a life-long scar. During the heat of the Cultural Revolution, because of Yumei's parents' imprisonment and her uncle's early occupation as an officer for the Kuomintang Army during the Republic of China, the whole household was labeled a target for class struggle. For young Yumei, the historical trauma occurred at multiple levels. In public spheres, her daily life was haunted by Red Guards' raids, who would break into her uncle's household and smash all the family heirlooms and valuable objects. When she was left with the humiliated and stressed uncle and aunt, they both lashed out at the helpless orphan and violently abused her both physically and emotionally. Throughout her lifetime and long after the end of political instability and the prosperous career she developed later in life, the injustice

and violence she suffered as the most vulnerable family member were never appropriately addressed or discussed. Several other family members showed sympathy yet did little both during and after her suffering. Important family members, including her mother, brushed her sufferings and extreme injustice aside, which deepened her trauma and sadness in later years.

By the end of the Maoist era, Yumei was able to reunite with her parents. However, this long-awaited reunion did not develop into a “happily-ever-after” process. Yumei’s mother, Mrs. Ying, who was banished and worked on a labor farm in southwest China for 25 long years, narrowly escaped starvation to death and suffered torture, humiliation, and isolation. A pampered daughter from a wealthy merchant’s family who always had her way in life but was wrongly accused of being a traitor for the country, Ying came out a changed person. As her material life got better, she nevertheless became bellicose, manipulative, and resentful. Ying was very insecure in her marriage life and was always fighting with her husband, who was restored to be a college lecturer after 25 years of imprisonment. When Yumei was pregnant, Ying refused to support Yumei either financially or emotionally, even during Yumei’s childbirth and difficult months as a new mother. Ying participated in her new family life only reluctantly, emotionally distant, and was obsessed with her health conditions. Hunger, again, comes into the picture. After nearly starving to death in the labor camp, Ying often over-ate as her material life became affluent. Soon she was diagnosed with type II diabetes and was preoccupied with her condition. She then dived into long years of trying different diets, causing a fuss over her meals, becoming judgmental and jealous of other family members who could enjoy regular food. She also displayed other typical behaviors for survivors of the Cultural Revolution and the Great Famine: hoarding, extreme caution about money, and continuously anticipating that other people would target her for her property. These were typical behavioral features for many Chinese people who were traumatized during the 1950s and 1960s.

After the death of Yumei’s wise and supportive father, Yumei’s relationship with her mother became even more strained. During a conversation Yumei and I had with the family doctor who were assigned by the local government to conduct family check on the senior citizens in the community

regularly, we agreed that Ying showed tendencies and characteristics that were typically seen amongst people with borderline personality disorders (BPD). “It was either that or a tumor,” the doctor pointed out, “or both. But we would not know for sure without a thorough check.” In her everyday life, Ying became increasingly dependent on Yumei’s care, showing little support but very demanding. Ying was either in a resentful or depressive mood. In the fourteen long years of taking care of Ying on her own, Yumei’s career was abruptly disrupted because Ying refused to live in a senior care center or letting other people come and help in the household. As her health declined with old age, Ying became very fearful of medical treatment despite the necessity of professional intervention. She determined that Yumei would abandon her in the hospital.

With this burden of care solely on her shoulders, Yumei’s mental health was greatly tested, and her energy drained. She frequently reported headaches, back pain, sensitive bowel conditions and stomachaches. She reported of experiencing little to no sense of joy and eventually lost interest in many aspects of life and work. Feeling imprisoned in her household, Yumei woke up to repeated domestic routines that enraged and exhausted her. The mother-daughter relationship became the most significant stressor in both of their lives. Ying became delusional and disoriented in her final days, which stressed Yumei greatly and scared her. In Ying’s last days, she became inconsolably paranoid and seemed to relive the most traumatic moments of her life in the labor camp. “She stood there, with her head bowed and looking grave,” Yumei reported with sorrow and fear, “so I asked her, ‘mom, why don’t you sit down.’ She did not raise her head and muttered, ‘they won’t let me. They won’t let me.’ I burst into tears and told her there was no one there.” Ying passed away within the week as her illusion and disorientation intensified. During one of our conversations after Yumei’s mother’s funeral, Yumei suddenly recalled a vivid nightmare she had a year ago.

I was feeling very tired and exhausted. In my head I had a long list of detailed domestic chores to attend to, which made me very frustrated. I suddenly felt cold and found a long pipe with a needle attached to the vein of my arm. I was astonished and traced the pipe. By the end of it in another room, I found my mother sucking my blood on the other end. I screamed and woke up in cold sweat.

This dream reflected Yumei's embodied experience of emotional burnout in the mother-daughter relationship. The vivid sense of life being sucked out from her in her dream showed how the less conscious, more emotionally charged part of her experience reflected how she felt throughout her mother Ying's daily interaction. The culturally significant features were prominent if we take a psychodynamic perspective. This mother-daughter relationship, anchored by the cultural demand of filial piety and self-sacrifice, revealed the deeply problematic interpersonal relationship and intersubjective experience in a Chinese domestic setting. Hollan argued in his analysis of the cultural and psychodynamic mediation on selfscapes, dream scenes such as this can be read as significant forms of memory and organization of experience (Hollan, 2014). Such particularities manifest in haunted dreams reflect the culturally and politically influenced encounters in people's lives that disclose the repressed if not bluntly forbidden trauma, fear, and sufferings, in the public narration of a cultural system. All traumas have a social origin, formed, and organized through body-world interaction, and link public life to intimate relationships. Each individual embodies political fear, social distress, and personal experience of violence at the same time. However, as these suffering manifests in dream languages, it reveals the most direct emotional burden and fear in a person's life. In Yumei's dream scene, the deprivation of life energy came from an intimate relationship. She was forced into an isolated position as a caretaker, which she received little social support or recognition. Like Anne, she had to deal with Ying's historical and personal trauma alone. It was a socially, emotionally, and culturally isolated position in which filial piety's cultural concept justified all the sacrifices that she had no choice but conform. The devotion to a difficult, unloving, traumatized parent whose suffering was not caused by her was culturally scripted to be her burden as an obligation. She received little physical, material, or emotional help or compensation from her community, neighborhood, or kinship system.

People who are sympathetic told her to "think it through and let it go (*xiang kai dian'er* 想开点儿)" because filial piety was a culturally accepted, even required thing, without considering the single-sided, unassisted affect work or emotional labor. Though people understand this could be heavy labor and

a tremendous amount of responsibility, nobody addressed or recognized domestic labor and caretaking a mentally deteriorating elderly parent as emotionally, financially, and socially consuming (Allison, 2014). Besides, people in East Asian societies did not usually challenge the fact that women do most of the care labor, without getting compensated or recognized in either public or domestic domain under-discussed and unaddressed in the expanding market economy. Yumei's situation as the only daughter in her generational cohort was unique. However, this situation will soon become common as the singletons' generation begin to handle their aging parents. With no siblings to lend a helping hand and lack of facilities and social welfare to support their elderly parents, the demand of fulfilling filial piety is becoming an increasingly impossible task for Chinese people. Moreover, many people are still dealing with historical and personal trauma in their home settings, "stuck" in the far-from-loving relationship with their traumatized parents and dealing with their unrecognized mental health issues at the same time.

2.2.2 Trans-generational Trauma under Dissolving Social Structure Across Historical Transitions

What struck me the most was how people from different generational cohorts used the same language when addressing concerns about natal family relationships, reflecting a persistent discontent, confusion, and struggle across radically different social situations. Participants with ages ranging from 21 to 67 years frequently pointed out their struggles when they step into a transforming society where they felt unprepared. They all felt a strong emotional bond with their parents. However, they experienced waves of distress when they co-live with their parents, a common feature in urban settings that contrasted strongly with the multi-generational co-living customs. They reflected on how their parents' experience and hopes for them made less sense as they struggled to stand on their own two feet throughout their upbringing.

I felt that from my adolescence years to where I tried to find my place in the world, my parents were largely absent, either physically or emotionally. And when it comes to making important decisions in my life, they could offer little assistant. (Anne, 24)

When they persuaded me to do things, I understand that it came from a good intention. They have their own concerns. But they hardly realized that I live in a very different world from theirs. I was very confused and felt challenged, but they do not

understand my type of challenge. They would compare my suffering with theirs and hardly understand why I was psychologically unprepared. (Danyang, 40)

My parents were absent throughout most of my childhood and upbringing. When we reunited, they were either hesitant to give me any suggestions or help because they did not really know me, or the situation was unprecedented that they did not know what to do either. I was hoping that my mother would help me with things I assumed she would know, like, how to be a mother or how to manage my marriage. It turned out she was as clueless as I was. (Yumei, 65)

Social suffering, for everyone, translates into trauma with persisting psychological impact only when violence and injustice happen at all levels: social instability, enduring injustice, and lack of protection by law or cultural system, and direct physical and emotional abuse done to the individual by specific social members in their communities. Throughout my fieldwork across generational cohorts, I found that people who experienced profound difficulties in managing the intimate relationship with their natal families have family members who directly suffered from historical traumas, such as being politically persecuted in the Anti-rightist movement or the Cultural Revolution. This direct exposure to injustice and violence co-occurring in their public and domestic life settings caused unresolved trauma during their upbringing and critical transitional stages in their lives. After radical social structural changes, such violent conflict was erased from public memory. There was no witness, no compensation, and no closure to the historical trauma suffered by the generation that directly experienced it. On top of that, because public life is tightly controlled and censored in today's Chinese society (Hsu & Madsen 2019), all these unresolved trauma and social injustice were processed within the domestic family settings. The unresolved historical traumas translated into domestic abuse, emotional neglect, or merely the always anxious mindset passed to the next generation through their everyday interactions, through their interpretations of what social relationships should be managed, and through their co-experience of later social changes as the family head into the future together as a closely knitted social unit.

Throughout these transitions, anxiety about precariousness and fear of poverty and starvation dominated people's modes of being-in-the-world (Jenkins, 2015). Survivors embodied the notion of viewing everything as competitions for resources, including love, care, and attention. The anxiety that the State policy will change unpredictability permeated people's life course. People perceive all these

potential threats to be mostly beyond their control. They might get laid off or miss the opportunity to become successful. Such fear and anxiety haunted these people through the navigation of their lifeworld. Throughout the first decade of the 21st century, Chinese people's lives never cease to be directly influenced by State policies and the local authorities. It is also true that with Xi's regime, as the social welfare began to shrink and the rise of the so-called neo-Confucianism that built into the increasingly conservative social system, people have less and less public space and are pushed into their family systems. The families and people who experienced historical trauma are culturally disadvantaged. Under direct transgenerational and emotional abuse, a cognitive disjunction exists between what they "are supposed to feel" and what they experience through embodiment and emotional processing. Anne described her childhood as happy and affluent. However, her embodiment and emotion revealed emotional and physical pain, mental illnesses, and constant disorientation and confusion as she went through transitions in her life. Though many people demonstrate a strong sense of resilience due to the love and support generated in a micro-social context, the overall precariousness and fear are still significant stressors in people's lives. People are yet to construct more fitting cultural norms to optimize their wellbeing.

2.3 Conclusion

This chapter takes a phenomenological approach that focuses on the body-world relationship and how people process their emotions and interact with their cultural milieu to address sophisticated historical, cultural, and personal transitions. From the Huang family and Yumei's case studies, I propose that for intergenerational trauma to occur and pass-down generations, there exist several crucial conditions. First, the social and historical origin of the trauma came from structural violence, such as the Cultural Revolution. Second, the victim suffers directly from a member of his/her community during the traumatic experience. In the case of the Huang family, Dr. Huang suffered political marginalization and directly targeted his young son. In the case of Yumei, both of her parents were imprisoned and suffered near-death experience such as starvation, extreme humiliation, and material hardships. Third, for the

trauma to pass down generations, the victims of such trauma were not able to articulate or process their trauma in public domain in their social lives. Their sufferings were marginalized, rationalized, or suppressed. In addition, they also found themselves ill-equipped in the new world that followed, mainly because of the dissolve of previous, or any form of social support system due to individualism, capitalism, and the neoliberal social trends. Many people who were descendants of historical violence, political persecution, and domestic abuse victims under patriarchal societies continue to find themselves in situations where their trauma and suffering are silenced, unrecognized, or disciplined through the cultural power hierarchy. Social injustice occurs at societal, familial, and interpersonal domains, tied in with the notion of filial piety, which reinforces the patriarchal power hierarchy and defines an individual's personhood in a strictly managed power structure that favors the authority that further victimize vulnerable social members. The historical trauma is unrecognized, resulting in a great sense of fear, anger, and anxiety, which transfer into the domestic domain and is passed to the subsequent generations through emotional neglect, abuse, and an unannounced mutual resentment.

Positive changes, however, are not absent during these processes. As I will further elaborate in later chapters, many people initiated a wide variety of social movements, group activities, and meaning-making processes to face and deal with historical trauma independently. In Chapter three, I shall talk about Yumei and other people from her generational cohort and how they make sense of and survived their hardship as Sent-Down Youth. In Chapter four and five, I will talk about how people who suffered from severe intergenerational trauma seek healings through psychotherapy, religion, and participation in social activities. I identified one underlying commonality as the most important character relating to healing, resilience, and agency despite hardship and traumatic past: the formation of new social relations outside the traditional and orthodox social network plays a key role as people evolve throughout life transitions. Many bottom-up social movements take place in people's everyday lives, allowing everyone to navigate their situations by providing platforms, methods, or languages to address their past and orient towards a future. During these processes, their interpersonal relationships and people's relationship with the space they occupy, and their experience of time all undergo profound transitions. New forms of social

roles emerge, transforming the familial structure, social networks, and even the definition of citizenship. I will deal with each aspect of such transformations in the following chapters while still anchoring all these social transformation facets on people's embodiment and emotions. I intend to show how a dynamic body-world interaction opens a broader horizon that allows a tolerating, humanitarian culture, although such a future will not be easily actualized.

Chapter 3 A Field of Happiness

Space, Trauma, and Dealing with Existential Precarity of the Sent-Down Youth in China

Our Generation

We are of the same age as the People's Republic

We went up to the mountains and trained our backs

We went down to the country and strengthened our legs

Our Generation

We learned what endurance truly meant

We know how regret really tasted

Oh! The bitter-sweet wine of life

We drained so many cups of that

A song written by and for the Sent-Down Youth in China by Wang Yougui

3.1 China's Sent-Down Youth

China's Cultural Revolution (1966-1976) was a sociopolitical movement with significant and long-lasting impact on the country's social structure as well as the everyday lives of people across generations. The leaders of this social program intended to purge the remaining capitalist and traditionalist elements both within the Chinese Communist Party and society in general. Spreading from movements instigated by university students motivated by the ideology of class struggle, it became violent, damaged the economy, and led to massacres and widespread persecution. Several large-scale programs were launched during the Cultural Revolution, led by the Chairman of China's Communist

Party Mao Zedong. One of them was the great rustication program. From 1968 to 1978, Mao led the “Up to the Mountains and Down to the Countryside” (*Shangshan Xiexiang*) program, which aimed to place urban youth with peasants and was a socialist reeducation program. It resulted in one of the greatest rustication movements of youth in modern Chinese history. Scholars have debated its main motivations. Some have emphasized economic reasons by pointing out that it addressed the lack of employment in urban areas. Others have attributed it to Mao’s personal biases against urbanization and the bourgeois ideologies he thought were related to urban life. Although the reasons for the rustication program were complicated, and despite the general unwelcome attitude from both parents and peasants, the administration of this program was efficient (Rene, 2013).

During the rustication movement, seventeen million urban adolescents were relocated to rural communes, military farms, state cadre schools, and the frontier at the Inner Mongolia grasslands. During the Cultural Revolution, its administration was carried out with astonishing efficiency. The Sent-Down Youth spent, on average, seven years in rural communes, where most of them were subjected to hard labor and harsh living conditions, resulting in malnutrition, injuries, and trauma from structural violence administered by local cadres and peasants. Rapes and deaths were not uncommon. The education, careers, family formation, and intellectual development of this generation were consequently severely disrupted. Because of this, the Sent-Down youth are usually referred to as China’s Lost Generation (Zhou & Hou, 1999).

The life experiences of these Sent-Down Youth (or *Zhiqing*, a short form of *Zhishi Qingnian*, Educated Youth) has attracted much scholarly attention, especially in studies on historical transitions, economic change, and the social-structural transformation from the Maoist to the Post-Socialist era (Deng & Treiman, 1997). *Zhiqing* narratives, biographies, surveys, and interviews have focused on themes such as nostalgia, identity construction, recovery from political and historical trauma, and how the life course of affected individuals was affected by tremendous social changes (Hung & Chiu, 2003). This chapter traces connections between theories of trauma and memory, existential precarity (Jørgensen & Schierup,

2016), and phenomenological understandings of embodiment and space. I employ a combination of life story narrations and participant observation to investigate the manifestation of non-verbal expressions as individuals go through traumatic emotional experiences in order to shed light on the immediate sensations triggered by memories (Trigg, 2009). This approach offers new perspectives in understanding trauma as it allows me to observe how traumatic memories surface as individuals navigate through specific spaces. The ethnographic data I have collected document historical and collective experiences by focusing on interpersonal interactions, communication, and the co-experience of life events by members from particular groups (Csordas, 2002). Both co-remembering a shared past and the immediate sensations people had as they went through the reunion trip that is central in this chapter constitute extraordinary experiences. I focus on a specific group as its members were undergoing this co-embodiment of time and space by bearing witness to each other's past and present, and then construct a common future as they renew their social relationships and provide emotional support to each other.

This chapter presents one Sent-Down Youth's reunion trip and visit to the labor farm they once worked on during their adolescent years. The temporal, spatial, relational, and cross-cultural aspects of experience across the life course constitute my major focus in understanding the impact of social transition on human physical and psychological conditions. Among all members of these generational cohorts, the Sent-Down youth group experienced one of the most shocking social, spatial, and cultural transitions, which not only affected their life choices and quality of life in the post-revolutionary era, but also influenced how they established social relations and understood their social roles, generating multi-generational impacts. As I have articulated in the previous chapter, traumatic experiences including domestic, historical, and organized violence significantly affected the survivors as well as following generations.ⁱ During my ethnographic research, I conducted interviews and asked individuals to identify the most significant events they experienced and to elaborate on how they felt, both somatically and emotionally, before, during, and after such events. All participants, individuals who were born in the 1950s, identified the most dramatic changes across the life span. At their early retirement stage when this

research was conducted, many expressed concerns as they now face a future filled with uncertainty in a time that is vastly different from the era in which they grew up.

It is crucial to introduce the group I focus on and the cultural significance of their experiences. The Sent-Down Youth view themselves as “just some ordinary people in an extraordinary time.” Their extraordinary experience provides scholars with a case study on massive social movements and their impact on people’s embodiment and emotion. Their dislocation and the political changes that followed the Revolutionary period (1950s-1970s) up to the Market era (1980s to 2000s) altered the life course of the Sent-Down Youths (Kleinman & Kleinman 1991). As urban youths who joined the *Shangshan Xiexiang* (The Up to the Mountains and Down to Countryside) Movement, the forced separation from their original communities, the physically demanding agricultural labor, and the deprivation of material and social support were the major source of their suffering.

I want to point out that, even though being a *Zhiqing* can constitute a collective identity, memories, interpretations, reflections, and feelings towards their Sent-Down time vary significantly between individuals during and after their *Zhiqing* years. Coming from different family backgrounds, many Sent-Down Youth experienced famine, hardship, and violence back home. The living conditions in the countryside varied depending on how they were assigned to production teams. Some of them went to frontier provinces and started on labor farms designed for prisoners. Others were put into peasant families or lived in isolated conditions in hostile villages. The primary determinant of their Sent-Down experience was their family background, which in turn determined their political status among their peers and in the labor teams, their expectations of the Cultural Revolution, and their choice of life and anticipated life course afterward (Rene, 2013; Zhou & Hou, 1999). Overall, children who came from “good” family origins (i.e., the proletariat class) which carried no political burdens generally evaluated their Sent-Down experience as positive or at least neutral. At times, the material conditions in Sent-Down farms were an improvement in comparison to their home situation. They became the privileged social group occupying a relatively safe political status and did not have to fear persecution or marginalization. Meanwhile,

children from stigmatized groups and families, especially those who had higher expectations of their future before the Cultural Revolution, experienced not only economic and material deprivation as compared to their pre-Revolutionary childhood life, but also deprivation of dignity. They were more likely to perceive their Sent-Down experience as a process of forced separation from the families, and experienced despair due to displacement and lack of kinship support (Hung & Chiu, 2003).

The other important variable which influenced the *Zhiqing* experience depended on whether and how much violence they experienced during their Sent-Down years. In a number of counties, conflicts between peasants and *Zhiqing* escalated as violent class struggle ensued in addition to fights over natural resources (Tan, 2016). Many *Zhiqing* and other people who were to the countryside for political reasons or as criminals ended up dead or severely injured (Rene 2013). Many survivors of extreme violent conflict and massacres were traumatized and reported a much worse overall emotional status throughout their lifetime (Tan 2016). Compared to these traumatized survivors, Sent-Down Youth who were middle-school graduates and worked in *Zhiqing*-only Production Teams had a much easier time because of internal group cohesion and comradeship. Regardless of the overall interpretation of their *Zhiqing* experience, the 1950s age cohort I studied all identified these years as the beginning of a series of turning points in their lives (Lin, 2013). Being a *Zhiqing* became a unique experience of their generational cohort, a memorable life event that was often misunderstood, underrepresented, and under-discussed according to their narration and impression. “If you give me a million dollars I would never go back to that time in my life,” one member indicated, quoting a popular saying from their cohort, “but I would never regret it or trade it with anything else in the world.”

During my preliminary study in 2017 and fieldwork from 2018 to 2019, I connected and interviewed with two Sent-Down Youth (or *Zhiqing*) groups. One group is a team of Shanghai Sent-Down Youth, who were mostly Shanghai locals and labored in Jiling Province, the furthest Northeastern Province at the China-North Korea border. The other group I connected with through the introduction of Yumei, whose case I presented in the previous chapter. Yumei had been a Sent-Down Youth and labored

in a farm in rural Hunan for ten years. After the end of the Cultural Revolution, she found a job in Changsha, and then transferred to Shanghai. I recruited Yumei in Shanghai and followed her to her reunion trip to Hunan Province. For this chapter, I will focus on the participants to the 40-year anniversary union trip for the Hunan Sent-Down Youth. Overall, their conditions and experiences were better off, compared to Shanghai's Sent-Down Youth. Although the Hunan Sent-Down youth were dislocated from the capital city Changsha of Hunan Province to rural western Hunan, they did not leave the province and could travel home on annual basis. Hunan province has relatively mild weather and has always been one of the most important agricultural provinces throughout Chinese history. Even in the most impoverished time during the Socialist era, Hunan farms yield enough food to feed half of the entire population of Southern China. Shanghai's Sent-Down youth, on the other hand, suffered much more in their farms in the frontier provinces. The stark material difference between the highly industrialized and urbanized Shanghai and deep forests at the border difficult for the group of teenagers to bear. The weather in Jilin Province was also unforgiving in the winter. In the late 1970s, each city has its own policy about how to get the Sent-Down youth back from the countryside. Not all Sent-down youth were able to come back and reclaim an urban residence. Some had to go through divorce, others left their children with local peasants in the countryside, while still others migrated to a county but were never able to rejoin their urban families. Many struggled in securing a job or applying for higher education by the end of the Cultural Revolution, yet few could get into a university or community college because most of them barely finished middle school. Amongst all the participants I talked to, the policies for Shanghai Sent-Down youth after their return to the city was the best. After Shanghai Sent-Down youth came back, most of them were able to find a job or pursue some education. The ones who left behind in provinces such as Jilin and Yunnan lived a very different life than their counterparts who came back. Their children were allowed to attend public schools and apply for universities in Shanghai, a policy that most of the other Sent-Down youth could not gain. In summary, all of these Sent-Down youth's life paths took a dramatic change, regardless of where they were sent to.

3.1.1 Team Three Class Six: A Production Team at Happiness Field

I was invited to join the Hunan Sent-Down Youth's reunion trip as I accompanied Yumei to visit Hunan. Yumei was very perplexed before she agreed to go on that trip. She told me that she intentionally refused the 20-year annual reunion team. The thoughts of visiting the farm traumatized her, especially when her Sent-Down Youth friends sent back photos of them paying tributes to their fellow friends who died during their Sent-Down years, most of them due to illness or accidents. She explicitly said that she had many memories of hardship and trauma. Though she constantly talked about it, she never visited the Sent-Down farm as some other team members had done. When I asked her if she had contact with her former *Zhiqing* friends, she indicated that she had just re-established contact with her former *Zhiqing* Team members and was thinking of going to a reunion to revisit the site.

I accompanied twelve men and women who were on their reunion trip, which they named an act of "re-tracing the Sent-Down Route." For a few team members, this was the first time in forty years that they met the former fellow members of their *Zhiqing* group. After a majority of the *Zhiqing* returned to urban areas in the mid- to late 1970s, their life paths diverged. Some of them had grown up in the same community and had gone to the same school. Others had been transferred to labor farms with their whole families. Despite their diverse backgrounds and life course afterwards, their common experience formed a solid foundation for renewing their relationships. The main motive for these anniversaries and reunions, according to the organizers, were memorial in nature. Several team members had organized various trips to revisit the labor farm. The one I attended was relatively intimate and only had a dozen or so participants. "We wanted to reinforce our friendship, recall our youth years, and maybe remind ourselves about the path we traveled. In today's world, nobody understood our experience. Sent-down youth movement was unprecedented and won't happen again. We have no one to share it with but ourselves," suggested one of the team members. "Now we are in our old age, and we only have a few more years of freedom when we are not taking care of grandchildren or our own elderly parents. So, we get together to remember the past."

Most of the twelve people I interviewed during my field trips had mixed feelings when they looked back at their youth spent in the countryside. All of them attributed their perseverance, their ability to endure hardship and suffering, and their broad set of skills and practical knowledge as positive qualities resulting from their Sent-Down experience. Eight of them came from former middle-class families; they expressed the strongest regret about having missed opportunities to receive an education, which was common to their generational cohort (Deng & Treitman 1997). Four explicitly stated that the Sent-Down experience was one of the most traumatic experiences in their lifetime. Based on my observations, the origins of their lingering ill feelings were related to them having witnessed or being subjected to violence that had led to the deaths of peers, family members, and friends during conflicts between *Zhiqing* and local peasants. Violence and sexual assault were most pronounced in military farms (See Chapter 5 in Rene 2013). Those who remained in the Happiness Farm Cadre School after it was converted into a military farm and labor camp suffered from violence and administrative abuse.

When I followed up with the larger group in 2018, several team members reported their experience as mainly positive because they had been able to gain economic and social independence from a young age. In sum, how people recollect and reflect on their Sent-Down experience is determined by several factors both before and after their time spent in the countryside. Despite the hardship they all had endured, such as the lack of material and intellectual resources, it is incorrect to conclude that the Sent-Down experience was a significant trauma for all *Zhiqing*. For this chapter, I will present ethnographic data, document the activities of the team members who played a significant role in organizing the event, and provide life story narrations before, during, and after the reunion trip. I have selected the accounts of three people from diverse backgrounds because they illustrate the varied experiences of *Zhiqing* people. Even though they shared a common space and their life paths intersected, their personal and psychological experiences were vastly different. What had been a place of trauma for one woman was, for another one, a site for natural transitions, and a positive, nostalgic home base where a team spirit was nurtured. I show how their time in the countryside altered their life paths afterwards, and how the re-

experience of embodying this space played a central role in strengthening their intersubjectivity by re-establishing meaning that allowed them to orient themselves towards a common future.

3.1.2 A Field of Happiness: Re-visiting the cadre school in Eternal County

August 2017 was unusually hot, even by the standard of Middle Southern China. Facing the middle reaches of the Yangtze River Plain, the Eternal County lays in the bottom of an area enclosed by mountains. The center of the county is 200 miles from the capital city of the province; the route crossing more than 50 tunnels through the mountains. Before high-speed trains made the whole area much more accessible in the late 2000s, the Eternal County was located far away from prosperous agricultural towns and fast-paced, industrial cities. For more than a thousand years, this place was inhabited by several ethnic minorities and served as a destination for exile. Features that the county famous in today's world, such as tourist attractions near mountain retreats; forests rich in animal and plant species, containing abundant resources; and unique metals and rare minerals, once were the reasons for its undesirable location and poverty. It is a place known for its poor soil, lack of water, scattered and uncultivable land, and steep hills; and therefore, only fit for growing tea, with extreme weather events throughout the year.

The Happiness Field Cadre School was in the heart of this mountainous region. For Yumei, this was the first time that she visited the area since she had left it in 1976. Yumei became a Sent-Down Youth after graduating from high school in a rural area. As I have presented in the previous chapter, Yumei suffered from extreme poverty and severe domestic violence as a teenage girl. Freed from her uncle's abusive family, the initial stage of her Sent-Down experience was relatively easy. Initially, she imagined that she could become a team member and leave her past behind. She later suffered hardship because of the hard labor and the abuses inflicted by cruel and vindictive team leaders. She did not connect to any other team member, despite the usual tight bonding and friendship among teams, which created a considerable gap both socially and timewise until this reunion.

We arrived at Happiness Field during the early afternoon. The temperature was over 100°F (37°C) when our van parked near the only cement-paved road. One team member, who had participated in

reunion trips several times, served as our guide. He pointed to a decaying, plain building near the end of the road, saying: “Here it is.” He then led the way and gestured to the one-floor house with a locked yard: “That was our kitchen and dining hall! That was the place you worked, remember?” Laughing, chatting, and exchanging anecdotes all the way, Yumei froze on the spot, took a few slow steps, and burst into tears. Sobbing uncontrollably, she could not even hold herself up straight. Facing the site of her trauma, she experienced an emotional breakdown; her whole body appeared to give up. Other team members rushed to help her by holding her up, giving her tissues and repeating comforting words: “It is okay, it is okay. It happened to all of us. We all cried the first time we visited here.” “Just let it all out,” said another one: “let it all out. You’ve been holding these tears for so many years, let it all out so that you can turn this page (*zhe yi ye jiu fan guo qu le* 这一页就翻过去了).”

While sobbing, Yumei pointed to the corner of the roof. I followed her gesture but saw nothing, while she continued crying violently. She nodded and said: “That was the place.” “What was the place?” I asked. Another teammate told me that on that part of a tin plate used to hang on corner of the roof. Three times a day, kitchen workers, at times Yumei herself, would bang on the tin plate to signal mealtime. “That was the corner where she worked from 3am to start the fire and help with preparing food for 300 people.” We could only gaze at the roof through a locked yard, seeing an empty and abandoned room which was covered by an overgrown maple tree, which provided shade from the burning sun.



Figure 1 The remaining part of the Sent-Down Youth's Dorm at Happiness Field

As we turned from the dining hall and continued the country road, she pointed to a windowless hut in a state of disrepair with mud walls and a tiled roof, and she said while still in tears: "I was living in a place like that one. I repeated to myself every day: 'I shall not kill myself; I shall not lose my mind or go crazy, I will witness those who did me harm die before me, I shall live. I shall live no matter what!'" Then she cast another gaze at the hut and said: "I was terrified. See? Do you see it? There's nobody around. See how dark it is even in daylight? I *am* terrified. Do you know how dark it was at night? It's endless." I responded: "The night felt endless?" Yumei answered: "Everything ... all of them. ... The day is long, but I dreaded the night as well. ... I don't know. *I'm terrified. I'm afraid of the dark ...* and all alone ... (it's) terrifying."



Figure 2 The hut that triggered Yumei's to traumatic memory

Because Chinese is a language indicating time with prepositions rather than with tenses, one can drop a time indicator at the beginning of a sentence and continue a narration without changing tenses. Given this characteristic, life story narrations in Chinese, especially in moments such as these, transforms expressions more like re-living the past than retrieving memories. Throughout Yumei's emotionally laden narration, it was hard to tell when she narrated the past and when traumatic emotion emerged, and when she described how the suffering in the past influenced her life today.

Yumei's emotional breakdown lasted well into the night. During moments I was alone with her, I attempted to calm her down by initiating discussion or by encouraging narration. In between sobs, she said: "When I saw that dining place, it all came back to me. All the days and nights I spent here. I don't know ... I don't know. ... I'm not sure what to say. I cannot put it into words. I don't even know how to feel. I find it hard to get by (*nan guo*). Those (things) felt very real." I squeezed her hand, wanting to use this bodily contact to indicate that the moments with the team and with me were real as well. However, she did not respond to my gesture. Her hand laid soft and motionless in my palm, and she said: "I don't know what's real anymore."

3.2 A Place of Trauma

Yumei's intense emotions and her disorientation were clearly visible. Rooted in a bodily sensation of feeling dislocated in a site of ruin, what Yumei experienced was not only a re-living of traumatic emotions but also a fear of being trapped in time (Trigg 2009). Entering the actual environment where one of the most traumatic experiences occurred during her early years, embodied emotions flooded Yumei in a serious episode of PTSD. The flooding sensation was as if both her memory and her body were rivers in confluence, an embodiment of time in a specific space where the past and the present coincide (Eleftheriou, 2015). In addition to the architectural structures that served as a reminder of the past, her awareness of what was now missing from that particular site became a reminder of the years that had passed. What functioned as a trigger was not only the familiarity of a material space, but also the site which now appeared as in ruins, which exacerbated the uncanny memory of ever-present suffering and

the timelessness of hurtful feelings (Trigg 2012). As the Sent-Down Team navigated through the half-abandoned village, their taking-in of the ruins produced another version of the same space, a space that reminded them not only of what had happened in the past, but also of what had been historically unclaimed (Caruth, 1996). The intercorporeality of a reproduced social space during their 40th anniversary reunion allowed Yumei's unclaimed, individually embodied past trauma, to be witnessed by her team members for the first time. This invested the space with an additional dose of meaning, this time the ruins, rather than the institution that had been located there in the past.

This unclaimed, under-discussed, and underrepresented experience created a traumatic experience as Yumei, as social actor, was trapped between the immediate sensations of seeing the ruins and dealing with the present. The most salient feature of her post-traumatic episodes was a strong sense of disorientation when Yumei re-traced the tracks she once covered on a daily basis but which she refused to look back to, discuss, or embody for a period of 40 years. For Yumei, the 40 years in between her early adulthood and her later life as successful entrepreneur in a changed world had created a void. Her intense disorientation and the bodily sensation of feeling dislocated from the here and now is typical when encountering sites of trauma, as she met the material environment that she had defined as a site of despair and torture. As trauma studies scholars who discuss the importance of space as evidence of lived world point out, both the presence of familiar sights (e.g., the kitchen and the pig pen) and the absence of significant elements (e.g., the office of the production team, the field that was now uncultivated) can create a profound disruption of our orientation towards the past and the future. Because of the profound difference between her life at Happiness Field and her life during the Reform era, the experiential difference between Yumei's embodiment of her farm life and her later urban life created an emotional and cognitive gap that interrupted her capability to form a coherent sense of self.

The emotional processes described above all shared the same material space, yet the ruins and the site of trauma caused a constant mismatch between the site as mentally comprehended and the site as emotionally perceived. On top of that, their intercorporeality of the time while they were Sent-Down

youth and their intercorporeality at the moment of witnessing Yumei's emotional breakdown reconstructed the site of ruin as well, as the repressed memories came to the surface. This experience caused a clash between the past and an immediate, on-going experience of being-in-the-world, occupying this space at a moment-to-moment pace (Csordas 2002). However, I realize that beyond the sensations of disorientation and trauma, these complex processes of co-embodiments were also processing of claiming unclaimed trauma.



Figure 3 Yumei looking at the abandoned field that the team once worked on

3.2.1 Jianguo

Jianguo was deeply concerned about Yumei's emotional breakdown. Not used to explicitly expressing or articulating his emotions, he followed Yumei around throughout the trip, busied himself with getting her water, offering her food, and, most of the time, mumbling comforting and encouraging words that were genuine but incoherent. Jianguo served as the driver, guide, and organizer of the trip. It

was interesting to see that he occupied the leader's role, which mirrored the one he had back then when he was only sixteen, when he was the "captain" of Team Three immediately after graduating from middle school. Interestingly, although he was worried by Yumei's emotional state and offered to accompany her back to the city, it was Yumei who insisted that they continue the visit to see the entire village and the surrounding fields. Occasionally, he voiced regrets about taking Yumei and other team members on this trip. He stated: "If I ever knew you would be so heartbroken, I would not have taken you here. We were here before, all of us shed tears during our 20th anniversary, but I didn't anticipate this trip to be so traumatic."

For Jianguo, the journey across the countryside was mostly nostalgic. He was very considerate about Yumei's emotional breakdown and was shocked because it was the first time that he learned about Yumei's mistreatment. "I always knew that she was from the 'bad family' back then. But I never put any thought to that. I grew up in a community where there were a lot of engineers, scientists, and scholars who became targets of class struggle during the Cultural Revolution. However, they were and always had been just my uncles and aunties who worked with my parents." Class struggle and targeted families from other social classes influenced every family in Changsha city, where he was from. There had been violence and persecution daily. However, Jianguo's family maintained a traditional perspective by treating others as if they were semi-kinship members. He was educated by his parents to respect those who were knowledgeable. On a personal level, he was shielded from direct exposure to violent class struggle because he was a child from a nurturing, humanistic family. On a social level, his own family was of the proletarian class, so he was spared institutional violence and did not experience any discrimination. This resulted in a very different experience as compared to Yumei, even though they lived in the same physical space for at least ten years. Though Yumei and Jianguo had not met after Jianguo got a promotion when he was 19 and left for a middle school teacher training college in a nearby county, their reunion brought back mutual bonding and friendship. The then 15-year-old was hand-picked to be a student leader by the teachers at his middle school based on his family background (all his family

members were workers in sub-urban Changsha) and his outstanding performance in school, which, he pointed out to me, had nothing to do with academic prowess but only to his dedication to the “collective course.”

During their conversations on co-remembering their Sent-Down experience, prior to our arrival at the site and Yumei’s emotional breakdown, I noticed differences between the way Jianguo and Yumei described their experience and suffering. Jianguo maintained a positive attitude towards his Sent-Down experience as well as towards almost all of his team members, saying that their bonds were “pure” because of their young age. He also accepted the fact that he had not been able to choose a career when he had the chance to enter a college as a recommended Sent-Down member, something Yumei could not have dreamt of. “It definitely was not ideal that they sent me to a county school, but I had a good time and did receive some solid education. I never thought people or cadres were against me. I just accepted things and put an effort in whenever I could,” Jianguo stated. “Even back then, I considered Yumei to be a very positive and aspiring young woman. She was three years older than me, so I sort of looked up to her. As the leader of the team, I learned about her family background. I knew that her parents were imprisoned during the anti-right campaign in 1956 and that she lived with her uncle’s family as an adopted daughter. I never learned about how unfairly she was treated.” He then expressed that he doubted his decision and enthusiasm to take Yumei on this trip. “I thought that it would be healthy for her to re-connect and, you know, ... *turn this page*. I knew the Sent-Down experience was hard for her, but I did not know about the trauma she experienced after I was gone. I feel bad to drag her through all this.”

When Jianguo and I were navigating the hilly village, his expression towards the changing landscape was very different than Yumei’s emotional meltdown. He currently is a traditional Chinese garden designer and architect; not surprisingly, his visual-spatial sense and the accuracy of his memories were outstanding. He clearly remembered which field had which function back in the 1970s, even though most fields were now abandoned. We passed by houses and semi-ruined huts like the kitchen and the shed near a watermelon field. For Jianguo, these ruins served more as reminders of the passing of a youth that

he could never return to. He recognized that urbanization constituted progress but could not help but think about the hard labor they had undertaken to make the farm a better place. “When you see all this, it must be very different from what I am seeing,” he said as he pointed to the half-ruined little hut in the middle of the half-abandoned watermelon field. Urbanization had been so fast-paced people left their seniors and children behind in the countryside. Most parts of the mountainous area of the Eternal County now derived their income from summer retreats instead of agriculture. “What are you seeing beside what I’m looking at?” I asked. “You must see a boring, backward ruin of a countryside,” he said as both of us looked at the horizon. He was pointing to the place where the mountains seemed to cut the outside world off. “I am contemplating the youth we can never go back to, and this land stripped of any testimony of our labor and younger years. After we die, nobody will ever know what happened here.” At that moment, the temporal aspect of our experiences: Jianguo’s past and his identification of the spatial difference between now and then, Yumei’s trauma and the clashing cognitive dissonance between what she recalled and what she was seeing, and my first-time exposure to this place yet bearing witness to their co-remembrance, overlapped with each other in the same physical space. For an instant that seemed to last forever, all of us were gazing to the horizon from the same point in time and space while seeing the same scene of ruin through very different filters which determined our varied experience, knowledge and purpose. In the quiet, hot afternoon everything seemed to be a framed picture. As Jianguo indicated, we were all history, and we were living in a moment that was transcendental and a space filled with memory.

One important purpose of this anniversary was to go on a trip as a sort of testimony to what had happened. Testimony therapy is a form of psychological intervention during which victims of trauma or torture narrate and address their experiences in front of others to attain proof, affirmation, and healing from their survival (Bichescu, Neuner, Schauer, & Elbert 2007). Even though they shared a perceived space, their lived space was vastly different because of their different family backgrounds and their varied experience during and after their Sent-Down years.ⁱⁱ Individuals who were from “better” families like Jianguo expressed that, even during their Sent-Down years, they always knew that they would return to an

urban area sooner or later. They had family support and were never in marginalized or isolated social positions. For Yumei, the ruins reminded her of the despair she experienced when she was trapped in a place that was like an ever-lasting exile, while for Jianguo it was a place of transition, which he interpreted as one of many life events he could not prevent but would nonetheless not regret. This reunion and co-experience of trauma, therefore, was as meaningful for Jianguo as it was for Yumei, for it not only re-established their mutual trust and friendship, but also enabled them to fully grasp what that period of history meant to all different participants. In a way, they were bearing witness to each other's unclaimed past.

Once this testimony was completed, a new present in time and space was established by their co-experience and emotional processing as they walked through the shared, physical space. Their presence at the site reshaped and redefined their lived space and the memory that went with that space. Although their trip was voluntary, its psychological effect was close to what testimony therapy can bring to trauma victims. The politically privileged faced the trauma of history and witnessed its occurrence. The marginalized and persecuted were able to reshape their memories of mutual trust and the absence of hostility, even back in the heated revolutionary years. As Yumei later commented in her narration: "It was comforting to know that they never looked down upon me, and it was even more reassuring to know that they never will."

3.2.2 *Meiling*

Meiling was the only person who had kept in close contact with Yumei. Although they had lost contact after Yumei had moved to Shanghai in the early 2000s, they had frequently visited each other after all members of their *Zhiqing* cadre school came back to urban Changsha. After the reunion trip, they swiftly resumed their tight bond and remained in a relationship that was as close as those of family members. Meiling indicated that she had always saw Yumei as her big sister when they shared a dorm room during their Sent-Down years, and even took Yumei to her home for Chinese New Year when she was not welcome in her uncle's household. Amongst all the team members, Meiling maintained a very

neutral attitude towards her Sent-Down Experience: “Our generation has seen a lot, but it was not as horrible as going through the civil war as my parents’ generation did, nor was it as competitive and ruthless as what my daughter’s generation is going through.” When I asked her about how she maintained a calm, spontaneous, and oftentimes humorous attitude as she was going through all these transitions, she said: “You see, there is the difference between people like Yumei and I. Yumei was smart and aspiring, but very insecure due to her childhood experience. Meanwhile, I grew up in a steady household and was content with being simple and ordinary.”

Her claim sounded true amongst the *Zhiqing* who were younger when they started the Sent-Down journey. Middle-school graduates joined Sent-Down groups when they were 16, while high-school graduates had spent many years wanting to go college only to have their dreams crushed when the Revolution descended into chaos and all universities were closed. For people like Meiling, who grew up in a civil servant’s household, being a Sent-Down Youth was the first time that she had had a full stomach: “I had 5 siblings and only my father had a salary. My mother worked long hours to do handcraft jobs when she had the chance. Our family had always struggled to put a decent meal on the table.” Although she also visited the farm for the first time, Meiling stayed close and comforted Yumei as much as she could, which reversed their adolescent roles of care-taking big sister and younger sibling. She stated: “I never had any interest in coming back and visiting here. I am only here because of Yumei. I knew this would be hard for her.” When she learned about the unjust treatment Yumei had received, Meiling concluded that for Yumei, the Sent-Down experience was a series of unfortunate events at a personal, familial and social level. While we were navigating the village, she recalled both happy scenarios and horrifying moments. When I asked which Sent-Down experience had influenced her most in later life, we were passing the river that was the only waterway leading from the mountain regions. “My life is just like a small river,” she said, “without any major raising or drops. Everything that happened in my life is like nature. People have entered and left my life, I had happy times and sorrowful moments. I felt content or in pain, or I echo other people’s joy or pain. All this is how it was meant to be.

My younger brother and I were the only two children who were Sent Down, because half of our family's offspring had to go. It turned out that we were able to secure better jobs than my youngest siblings who stayed in Changsha. So, you never know."

We walked alongside the river, hearing Yumei's broken sobs. Meiling had tears in her eyes and said: "This is *Ming* (fate)."iii You realize that some major changes had to happen in your life, and that there is no use resisting them." When I asked her to elaborate, she pinched me in the arm and teased: "I have not read enough books to explain such things! That is the job of scholars like you. I only know that the only boundary one has the right to maintain is that of your own body. Go with the flow!" She pointed to the river that vanished into the horizon: "the more relaxed you are, the less chance you're going to drown."

Team members like Jianguo and Meiling tended to attribute the root of Yumei's trauma as based on her own personal misfortune, especially the domestic violence and mistreatment she suffered by her adopted families, while members of non-proletarian families were more likely to attribute her suffering to structural violence such as political persecution and unclaimed historical disaster. Aside from the different political positions all these marginalized people occupied, we also see a significant difference in their mode of body-world interaction based on the surfacing of memory and emotion as they revisited the site. Instead of viewing part of her body as trapped in the traumatic site where time and space had frozen into a solid, dark moment as Yumei did, Meiling was able to maintain a constant, stable sense of self and body-boundaries as she saw her own self navigating from one environment to another. We should not see Meiling's orientation towards the world as passive, because she was able to utilize her agency and actively construct meaningful social relationships across different situations. As compared to Yumei, this site is a site of significant personal history, which contained suffering but was not traumatic. Meiling also avoided looking back for 40 years. However, her personal history did not become a cognitive void but rather existed on the periphery of her awareness, heavily weighing on her conscious yet not dragging her down.

3.3 Conclusion

From a phenomenological point of view, we can view space as having a dialectic triad feature: 1) the material aspects constructed by perception; 2) conceptually comprehended, geometrical space, which in the case of the visiting Sent-Down Youth exists in their narration and life stories; and 3) the lived space in the unconsciousness and dreams, where looping time trapped the past self in unclaimed trauma. For Sent-Down Youth such as Yumei, the ruins of the farm were a space filled with unclaimed trauma. However, as supportive teammates pointed out, her encounter with the farm, her tears and emotional breakdown, and the fact that she reconnected with her friends created a intercorporeality and thus transformed these friends into witnesses to her suffering. Through their reunion and renewed social bonding, she not only was able to free herself from past trauma but also expanded the possibilities of herself as she entered the aging period in her life course. Bearing witness as a meaningful social group forty years after their traumatic experience ended broke the spell of the looping pain and freed the body from a lived yet inexpressible space, allowing her body to enter a new rhythm during which new social connections could be established. Time, in a way, started to flow again after her visit in that quiet afternoon. One year after the trip, I followed up with Yumei and some of her teammates. She had taken another trip to the farm, and this time she experienced no negative emotions at all. As her team member said: “the page was turned.”

This ethnographic encounter was an attempt to understand historical transitions and trauma by focusing not only on the temporal aspect of experiences but also on the space where these experiences took place. In the case of the group of the former Sent-Down Youth visiting the farm, a space marking massive dislocation, which functioned not only as an objective, physical site occupied by these Sent-Down youth for a period of time, but also as a site of significant memories. Energized by the virtually supernatural strength that these social actors had mustered in living through their experience and then facing them again in the present, space was transformed first from a foreign site into a living habitat and political struggle, and, later, into an uncanny and haunting site of ruin that silently constituted a form of

physical testimony for their historical trauma and struggle (Grosz, 1994). Then, finally, with a joint effort, intercorporeality and mutual witnessing, this space was once again transformed into a witness of unclaimed history (Ng, 2011).

As I was writing up my project and contacted most of the team members two years later, they all maintained close contact with each other, and commented that this shared bound had been a great source of comfort in their lives. Yumei indicated that after her traumatic emotional breakdown in the Eternal county, she was no longer haunted by the nightmare of being stuck in the pig pen in the dark. She quoted what Meiling used to comfort her: “It was curious, but I think I really turned the page. Now my friendship with Jianguo, Meiling, and many others were like the family I never had. We had such thorough understanding and helped each other out through some very difficult turns and we still will.” Jianguo was accomplishing quite a few projects as an architect. Throughout the precarious and difficult times during the Pandemic, he often called on Yumei and other team members for emotional support. Meiling invited Yumei to her household whenever Yumei visited Hunan province and added her to their family WeChat group. The Sent-Down experience was no longer an often brought-up topic since they now shared many new aspects in their lives.

Another interesting point that may stimulate future discussions on understanding body, space, and the history of trauma, is the significant social gesture of my participants’ constant effort to bring me into their intercorporeality throughout our trip. Growing up during the Reform Era, my urban upbringing and Western education highlighted my role as an outsider. However, my indirect, “bookish” knowledge of history and my interest in their stories allowed them to treat me as some sort of protégé. My presence, in some way, also bore witness to their history. The sense of timelessness was extremely salient as we visited a small museum dedicated to a Tang dynasty poet who wrote influential articles and poetry when he was exiled to the same county. The participants’ empathy towards him during his exile that occurred 1000 years ago allowed them to articulate poetic expressions of their own existential tension (Bachelard 1994). In Asian culture, a continual relationship between the people and the land renews at every turning

point of history, empowering one with an enlarged perspective on one's own life experience. The space of trauma, when taking a timespan surpassing one's own life into consideration, provided the social actors with a transcendent gaze to both the past and the future, turning the same space into a site of resilience and healing. These rich, culturally specific symbols that allowed the spatial schemas to transcend personal experience (Garcia, 2010) thus provided powerful resources of healing and new meanings to life.

Chapter 3 has been accepted and in progress for publication in *Traumatic Pasts in Asia: History, psychiatry, and trauma from the 1930s to the present*. Mark S. Michael & Hans Pols (eds). Berghahn Books. *In Progress*.

Chapter 4 Eclipse

Temporality and Intersubjectivity in Mental Illness Experiences

If you look at its changing aspect, the universe passes in the twinkling of an eye;

But if you look at its changeless aspect, all creatures, including we, are imperishable;

What reasons have you to envy other things?

Su Dongpo

My Visit to the Red Cliff

1082 A.D. China

What, then, is time? If nobody asks me, I knew it;

If I have to explain it to somebody, I don't know it;

Augustine

Confession

397 to 400 A.D.

4.1 Introduction

Echo: "I didn't have a sense of time."

Researcher: "What do you mean by that?"

E: "I mean, most of the time I was (felt) numb, and I just don't remember. Before I was in college, I was not able to form any continuous memory. ... Before my first panic attack and began to seek psychiatric treatment, I really didn't have continuous memory. I could not remember what happened

throughout a semester, or a summer vacation, or anything like that. Then I realize I also did not have any imagination towards the future either.”

R: “You mean because you could not recall the past, and you could not orient towards the future either?”

E: “That’s right. I didn’t have a sense of time. For me, time did not seem to flow. All events were broken or isolated. And the most important thing was, I also couldn’t remember what kind of person I truly was or I need to become either. I knew I behaved properly, but I had no recollection what I did or said. Sometimes family or friends showed me pictures, and I rationally knew I was part of that event. But there was no picture in my mind, nothing came out of it. From another person’s narration I would think, oh okay, I guess that happened, but I could not relate to the Echo they described. It was like listening to someone else’s story.”

Amongst all my informants, Echo was the first to disclose that she could not give me a life story narration because she could not form an even fragmented recollection of her childhood. While recording her illness narrative, the significance of her unique sense of time caught my attention. The 22-year-old who impressed me with the wisdom and capability to surpass people of her age described all her psychological trauma and struggle with mental illness with an almost aloof attitude. Echo grew up in a well-off but emotionally dysfunctional family. Her illness and healing experiences were quite extraordinary. Although bringing great suffering, those illness experiences could also offer a chance to seek an alternative path in her life course. Throughout the past two years, Echo and I had several in-depth conversations. I was also able to witness profound transitions as she reorganized her sense of self, rearranged her social relations, and even learned to create more connections with her body and the world around her. For this chapter, I will highlight one aspect of her illness experience: the sensation and experience of time before, during, and after significant mental illness episodes.

Psychiatric diagnosis tends to provide concrete pictures of manifesting symptoms and seldom deal with the world in which the patient exists (Giovanni Stanghellini et al., 2015). In adopting a phenomenological approach to temporality and intersubjectivity, I propose that temporality is the bedrock and backdrop of personhood development, both in people's everyday experiences and in accumulating their life stories throughout their life course. I understand personhood as the dynamic, a culturally shaped embodiment of self-consciousness (Marcus & Fischer, 2014). Personhood manifests through intersubjective social activities and body-world interactions (Parish, 2008). Therefore, the experience of temporality experience can be viewed as a reference to the evolution of these gestures and interactions (Csordas, 2008). People may intentionally focus on the present moment to gain calmness and security through a stressful situation. Or they may lose the capability to rely on the memory of the past or intention towards the future because they are emotionally and cognitively exhausted by the constant depressing or anxiety-triggering situations that they had to deal with.

This chapter provides a detailed analysis of Echo's lived experience as a young woman diagnosed with severe emotional disassociation, major depression, general anxiety disorders, and PTSD due to a difficult childhood embedded in a changing social context. I introduce phenomenology and existentialism as my theoretical framework to understand her illness experience. Then I use Csordas's rhetoric of transformation in healing to understand her healing process using body-oriented intervention and meditation. I argue that temporality, or the subjective experience of time, is established through social relations and the formation of personhood and processed through intersubjectivity. Because our bodies and consciousness are a holistic existence, personhood is also processed through intercorporeality, the interaction and co-existing of more than one body (Csordas, 2008). The strong somatic reaction of disrupted temporality provides researchers with ways of understanding alternative existential structures, thus revealing the primary features of mental illness, their originality, treatment, and coping strategies (Ghaemi, 2001). A significant aspect of the mental illness experience is when the patient realizes that his/her temporality does not synchronize with others' or with cosmic time. This realization triggers an

existential crisis, pushing the embodied personal history towards the frontier of consciousness. Moments such as these, traumatic as they were, can also become starting points that motivate them to strive for healing and change.

4.1.1 Temporality, Intersubjectivity, and Psychopathological Experience of Time

I write at the intersection of two philosophical perspectives in understanding time. The first is a phenomenological approach in understanding psychopathology, originating from Merleau-Ponty and Husserl. This approach provides a conceptual foundation in understanding the nuances of immediate sensations, feelings, and emotions as the individual goes through an episode of mental illness (Csordas, 2002). The second is the existential psychotherapeutic school, originating from early Heidegger, with Ludwig Binswanger following his work on *Being and Time*, discussing an individual's world's structure. It is impossible to separate the experience of time from other sensations, feelings, or memory through everyday life or during life story narrations. However, people frequently refer to time and temporality to adjust their routine, activities, social relations, even existence. We could argue that time and temporality is a unique aspect of human existence since our experience is not just "of time" but also emerging and unfolding in time (Phillips in Astila and Lloyd 2014). Foundational philosophical works defined human existence as a process of temporality, marking it as the structure in which a person could form his/her sense of being through establishing a dialectic relationship with time passing, bridging between subjective time and the structures and behaviors of people and objects around the individual (Astila & Lloyd 2014: P241). Therefore, I propose that temporality provides the foundation and reference of a continuous, flexible sense of personhood, which can be the product of functional intersubjective social relations during development and a prerequisite for mental wellbeing later in life.

In this chapter, I rely on the Heideggerian theory by adopting a two-facet, 3-fold intentional temporality structure. I define temporality mainly as a person's experience of time and how the existence of this person is formed and developed in time (Stanghellini, 2016). Temporality is neither exclusively private (solipsistic) or a pure cosmological phenomenon, but "as experienced and lived by the person and

time as working on and with the person” (P43). In an ideal situation, temporality, or rather the consciousness of temporal experience, has two facets: 1) the unity of intentional awareness of present, past, and future; 2) the accumulated recollection of “being-in-the-world,” as the individual creates meaning, feeling, and interpretation by grounding the analysis of existence in time (Heidegger, 2011; Held, 2007). In addition to this conscious awareness of temporality, there is also the immediate and sensational awareness of temporal experience. This immediate organization of sensations also called the “now-moment,” has a 3-fold intentional structure. The primal impression is an intentional awareness of the “now-moment” being present. The retention is the intentional awareness of the past as past. The protention is the intentional awareness of the future event as about to happen. The primal impression, arising from the unity of awareness of external objects and inner consciousness of streaming emotions, attention, and wakefulness (Damasio, 1999), has a width that extends to both the past and the future (Giovanni Stanghellini et al., 2015). As Husserl indicates, “in each primal phase that originally constitutes the immanent content we have retentions of the preceding phases and protentions of the coming phases of precisely this content” (Husserl 1991:40). Both protention and retention form the double horizon of temporality, against which the primal impression is embodied as the now-moments. And from such embodiment arises our continuous awareness of personhood in the world that the individual constantly interacts with. Heidegger defined temporality experienced as such in an ideal situation as the “authentic time” (Heidegger, 2011).

As we try to understand psychopathology, deviation from this Heideggerian “authentic-time” scenario demonstrates fundamental characteristics of illness experiences. Temporality is embodied differently as people struggle with depression, anxiety, trauma, or schizophrenia. For example, for people with major depression, their experience of time slows down during depressive episodes. Every now-moment is stretched long, making the anticipated just-about-to-occur seems never to happen. As one of my participants described her depressive moments, “I knew this too will pass, but when I was in that condition, it truly seemed never-ending.” For people with mania or the mania stage of bipolar, time seems

to be accelerating. The next moment almost tries to swallow the now-moment, pushing their primal impression to the point that their heartbeat would literally raise to an unbearable speed. My participant Jimmy, a young man of 21, expressed his wish to be tied down during moments of maniac stage in bipolar “so that I could stop feeling being chased down by time and situate in the here and now.” For people diagnosed with schizophrenia, their now-moments are detached from the previous and anticipated, making their experience of time scattered and unpredictable (Stanghellini et al. 2016). The experience of PTSD, as I will show in this chapter, has one typical symptom during which the patient experience vivid flashbacks of the moment their trauma occurred. With or without their awareness of stimulus from their social context, those memory rush back. These embodied memories intensity can range from a gentle awareness of unpleasant feeling to a total mental breakdown (Van de Kolk 1994). The patients’ temporality is processed as bi-directionally, stretching from the now-moment to distortedly perceived the past and the future. The patient experiences strong cognitive dissonance as the individual struggles to reconcile experiencing their existence as here and now, while being reminded of their past trauma as triggered by visual cues from the space (see Chapter 3). Their endogenous process of time is isolated from the outside world. As one of my participants described, “it (the traumatic memory and sensations) is trapped in a snow globe. Every time someone or something shakes it, it snows inside of me”. These existential crises arise in the individuals’ daily lives, which oftentimes leads to a deeper understanding and reflection of their personhood.

In people’s everyday lives, temporality as lived experience can also be altered by stress, trauma, and dysfunctional social relations. In an individual’s lifeworld, psychological disorders will separate the sense of personhood from the events the individual experienced, resulting a in detachment and emotional disassociation. This could result from experiencing fragmented now-moments: because each moment is so detached from the previous and next one, there is hardly any continuity in the evolving of events, resulting in a fragmented sensation of one’s personhood, as in cases of schizophrenia. Sometimes such detachment could result from a series of traumatic turns or stressful transitions in lives, resulting in a

disassociation between the subject's perception of the event and emotional impression of what happened. The individual could not recall the experience from a first-person perspective, as we saw in Echo's scenario I shared in the beginning. However, these experiences manifest as somatic symptoms because the individual incorporated the stressful accumulation of events. The first time Echo experienced disorientation, passing out, and loss of memory, her father was going through a severe operation. Her family projected their anxiety on her, blaming her for not arriving on time despite her effort to push through horrible traffic. Echo's remembrance of the event was fragmented but acute. She did not recall what happened before or after she was scolded in the hospital, but she could remember the precise moments of the social conflicts and fear: "I blacked out and woke up in a random street three hours after my father's operation, my aunt's words repeated again and again in my mind. From that day, I ended up feeling acute or dull pain in various places on my body, especially my back. They say that families should have your back, I don't know. Maybe I felt betrayed, that's why I had severe backpain since then."

Temporality constitutes the foundation or backdrop of human experience. A coherent, unified sense of time provides the fundamental structure for a coherent and continuous personhood. As I have argued in the previous chapter, personhood locates in the individual's body and can be seen as the accumulation of social experiences, identity formation, and a result of interaction with the world around the individual. It is acquired gradually and constituted through social exchanges (Conklin & Morgan, 1996). Therefore, I argue that personhood is fundamentally a product of intersubjectivity.

Intersubjectivity is the shared bodily engagement with two or more subjects through cultural practices and semiotic systems (Parsons, 2010). The two facets of temporality, namely the unity of awareness of past, present, and future, and the accumulative lifeworld experiences, correspond with the two levels of intersubjectivity. First, intersubjectivity relies on articulating continuous interaction in the presence between multiple subjects, thus anchoring the social exchanges in time. If an individual grew up in an emotionally unsupportive environment, as I will demonstrate with the case study of Echo, the foundation of her personhood is also unstable. She was constantly preoccupied with the need to react to other

people's projection and demands that she lacks the chance to initiate world-time and ego-time synchronization on her account.

4.2 Echo

Echo and I met in an applied anthropology workshop in Shanghai. Graduated with a history and journalism double-major degree from an elite American University, she started her internship in Shanghai and later moved to the south coast. Confident, cheerful, and always put-together, I was slightly surprised when she approached me and volunteered to be my participant after I introduced my research on intergenerational transmission of trauma, emotion, and embodiment. "I would be the perfect candidate," she said calmly, "I am diagnosed with so many things that you can take your pick."

During our initial interview, Echo identified several core issues she had been struggling with her entire life. The central narration centered around her emotional disassociation. For as long as she could remember, her parents had been fighting and filing for divorce. She got stuck in-between and frequently caught in crossfire by the two families. For years at a time, neither of her parents would take care of her so she migrated across relatives' homes. This unstable upbringing and constant need to respond to different sets of rules and emotional projection from adults did not provide Echo with any chance or space for her own emotional processing. Echo was also sent to boarding school since middle school. She had to deal with anxiety, the intensity of schoolwork, and unsupportive and cold parenting all her life. When Echo was in high school, her parents filed for a divorce after finding out Echo's mother was pregnant with another man's baby. However, divorce did not bring settlement to any of the family members. Her parents' long time "cold violence" (*leng bao li* 冷暴力) escalated as distant and emotional avoidance in the family became nasty fights. When her parents' divorce led to aggravated conflicts, her dad filed for a DNA test, doubting if Echo was her biological daughter. Her mother threatened to have people physically assault her father, aiming for revenge. Echo's mental status was swirling down to depression.

I remembered when I stayed with my father, out of nowhere he would say to me, 'Echo we should chat'. And I would say 'about what?' And he would go into long rant

about what a horrible person my mother was and what a hell she made his life. Then he would say to me, 'I am not trying to blame you, I love you, obviously. But all your action is being recognized by heaven, you know?' And I would get really confused. If it was now, I would thought to myself, or even ask him, what the hell are you talking about? Why are you blaming me and trying to make me feel guilty? But back then I would not have known what to do. And it kept going for two to three years. I could not live with my mother, otherwise he would give me such talks. It was so twisted that both always emphasized they loved me.

While her father tried to force Echo into a moral dilemma through side-picking, from our later discussion, we figured out that her relationship with her mother was more challenging for her personhood growth. Unusual as their family situation was, the mother-daughter relationship was typical in a patriarchal cultural setting. Her mother both viewed the daughter as an extension of her ego and body. She could count Echo as her accomplishment and thus a form of social capital, yet at the same time as a rival in youth to her own identity as an attractive woman (Evans in Kipnis, 2012). Echo described her mother's personality as "a peacock personality," which means the mother had to be the center of attention and the most attractive person in the room. Echo's relationship with her mother had an undertone of a sense of inferiority, which diminished her confidence as a young woman. After moving away from her hometown for her career development, her mother's expression of attention and worry was confusing for Echo for a long time. "I eventually figured out that her care for me was genuine. She wanted to me to have an easy life and thought my independence was difficult and trying." However, underneath these genuine motivations, her mother harbored jealousy and fear of being over-powered or outshined by her daughter's independence and capability. Therefore, the mother frequently sabotaged Echo's sense of achievement by delivering messages wrapped up as care and concern. She would say things such as 'why should a girl remain single and does everything by herself? Why are you putting so much hardship in your life?' The topic would turn to how she was not fulfilling a pias daughter's position by staying away or how she gained nothing and achieved little. The hierarchy and power struggles in a natal family, again, became a major source of stress.

4.2.1 *Why don't you jump down?*

Echo's first major mental break down occurred during her second year in college. Echo's father was undergoing a surgery, and Echo was expected to be in the hospital with the family. She arrived late due to heavy traffic and was accused by her family members on site.

E: "I realized I had a serious mental issue, though I had a strange feeling in my stomach."

R: "How did you know it was a mental issue?"

E: "Because when my stepmother started to accuse me, my memory of the three to four hours before I was supposed to be in the hospital was totally erased. I was not able to step into the hospital. After three to four hours, my father's surgery was over, and I was supposed to go into the room with him, I got a panic attack again. From other people's perspective, I had a strong stomach discomfort. I curled up and couldn't walk. I vaguely remembered I mentioned I shall go to the E.R. for my stomach pain. Then I realized there was a window at the end of the corridor. A high window. There was a voice in my head saying, why don't you jump down? That's when I realized I had a mental issue."

After psychiatric diagnosis, Echo was prescribed anti-anxiety pills. She later found a psychotherapist and started long-term counseling. Her diagnosis included hysteria, emotional disassociation, and PTSD. The most severe symptoms for her resulted from emotional disassociation. It got worse since her parents' divorce, to the point that she could not feel anything, especially at home or even in her hometown. She spent most of her time in boarding schools but had to stay at home during summer breaks where fighting, violence, and family disputes would break out. As a result, her somatic symptoms usually got worse during summers. She always wanted to vomit, went into depression, or experienced panic attacks. Her awareness and attention would "zoom-out" into a state close to auditory hallucination. Her "auditory hallucination" was voiceless. Instead, she described a "wrapped feeling," as if her consciousness was sealed by layers and layers of plastic wraps, making outside voices all muffled. During these phases, which were frequent, and of varying duration, usually without obvious triggering situations, all her sensations would be turned down until she felt numb inside out.

I felt like I was in a ghost shell. My whole body was wrapped up in it. All people around me could just walk right through me. That's how I feel about it. There was no witness to what I was experiencing, including myself. When I look back, all these summers and time at my hometown there were so many blanks without picture, as if a videotape was damaged.

4.3 Illness Experience Analysis

The first relevant point of understanding temporality in Echo's case was the emergence of psychosomatic symptoms caused by stressful intersubjective interactions, which led to her disturbed sense of time. It would be safe to say that while growing up, especially during adolescence years, Echo's family did not sufficiently assist her in the transitional development of her personhood and emotional processing. Emotional abuse, instability in domestic life, and lack of support greatly disturbed the development of her personhood and her temporal experience. In her life, the main stressor that was cumulative since childhood and peaked during her adolescence and emerging adulthood was the domestic violence between her parents and her difficult position in those violent episodes. According to attachment theory, such an insecure environment would lead to avoidance personality in forming meaningful emotional bonds. The impact lasted into adulthood and affected other types of interpersonal relationships (Erikson, 1968). Echo's social role as a daughter was filled with contradictory expectations, being stuck in-between her parents' dispute, which disturbed her emotional connection to her parents and ended up in her blocking out all her own emotions. All the stress, disappointments, frustration, and sadness became somaticized and emerged as symptoms, which spoke for her with all the words she could not articulate herself.

As I mentioned in previous chapters, the establishment and dissolution of intersubjectivity under a collapsing kinship system, both at a societal level and in a closely woven family context, often led to confusion and difficulties in emotional regulation later in life. Adolescence, being the first testing stage in a person's life-course when the individual approaches full membership of her society, is challenging as both the cultural norm at large and specific interpersonal practices at home are collapsing under tremendous changes (Csordas & Jenkins 2018; Jenkins & Csordas 2020). People's well-being and mental health in these situations are of growing concern due to ambiguity, lack of guidance, lack of secure attachment, and emotional support. Echo's case was an exacerbated version of such structural and social relationship collapse. In her lifeworld, expectations, communications, and actual behaviors amongst

family members were heading in different directions and eventually ended up in power struggles and manipulations. In her words, neither of her parents ever got their “cognition and behavior in sync (*zhi xing he yi* 知行合一).” what her parents claimed and expressed never really matched what they did.

Echo’s parents were both emotionally unstable but demanding. Different attachment styles and personalities under such insecure domestic settings result in different manifestations of symptoms later in life. Anne developed extreme separation anxiety and could not be on her own in any circumstances, revealing both emotional enmeshment and egocentric tendencies (Jenkins, 2015). In Echo’s case, her coping strategy in reaction to highly demanding and hostile context was to withdraw and avoid.

Two crucial endogenous processes influenced Echo’s everyday experience and personhood formation based on her scattered temporality experience. The first is her disassociation from her feelings and sensations, never letting these feelings and sensations during body-world interaction form communicable emotions. As mentioned in the introduction, I define emotion as a totality of mood, thoughts, feelings, and experiences based on the body-world interaction. The primary purpose of emotion is to provide communication and feedback, either with ourselves or those around us. Emotions do not necessarily provide guidance of behavior, but greatly influence our experience and perspectives of ourselves and the world around us. As they emerge to the front of our consciousness, either as thoughts or sensations, emotions can contribute greatly to our personhood, as they are the feedback from our states as we navigate through our lifeworld. If the emotional experiences are intentionally blocked or actively withdraw as emotions start to take shape, our sense of self during body-world interaction is also blurred. In Echo’s case, her withdrawal or disassociation is usually through intellectualization during social communications. In her own words, she quickly learned to “say the right thing” or “respond appropriately” without “feeling anything.” This leads to her second habit as she went through different contexts and situations in lives: constantly responding to other people’s emotional needs and seldom initiating connections to her own feelings or facing her stress or frustration. As Echo was growing up, her attention was constantly directed to other people’s emotional needs. She had to cope with the complaining

and demanding father, the self-centered and fearful mother. Both of her parents were very competent in their careers and assertive in their social lives. However, like many contemporary Chinese families, people do not treat each other as separate individuals and lash out in intimate relations. Echo's own feelings: fear, deeply seated sadness, the frustration of never being understood or listened to, were constantly getting pushed aside. In terms of the behavioral and cognitive pattern, in her social network, she was used to responding and answering to the demands of other more powerful parties. Exhaustion from the demands of this role explains why she was more comfortable in solidarity or surrounded by nature where she felt accepted and undisturbed.

A family situation such as Echo's is unfortunately not uncommon in current Chinese society, especially as intimate relations and marriage in the nuclear family break away from the larger kinship system (Yan 2018). The main reason many young people born in the 1990s were described to have "a delicate psychological status" on social media was mainly due to the dysfunctional emotional support system. Their parents go through rapid social, economic, and familial transition without knowing how to communicate feelings or interpersonal boundaries, in the process of providing emotional support for their children in the new era (Kuan 2015, Jenkins 2015). The conflicts center around where the nuclear family's future will lead in an unstable but fast-developing economic system. Such anxiety and disagreement towards a future often ended up embodied and actualized as the only child in such a family (Vong 2012). Across different case studies of emerging adults from the 90s cohorts, my observation of children growing up in such contexts reveals a paradox. They are sensitive and highly empathetic, yet self-centered and challenged to form supportive social relationships, narcissistic but filled with self-doubt, highly competitive while constantly unsure of their decisions, swift in transition of mood yet difficult to connect to or be mindful of their emotions, seemingly assertive and high functioning in social situations, yet seldom initiating emotional gestures and being hyper responsive to other people's emotional demands.

4.3.1 Dementors, Eclipse, and Healing

Echo spent a lot of time on online platforms for business, to chat with friends, and manages a large social circle on a daily basis. However, she described that she was more intellectually involved with people than emotionally invested. “I do not feel the urge to stay attached to other people, and I do not understand their emotion or emotional needs. I just do it through learning to say the right thing at the right time.” As a child, her emotional needs were never answered or satisfied. As she reflected many years later, all the emotions she felt or had to deal with were merely projections (*tou she* 投射) from both of her parents. She realized that she needed to become self-sufficient in many ways when she was seven or eight years old, when she had a fever, called, and ignored by both parents who were playing Majiong, and went to the hospital herself. Her social communication was intellectual, with her trying to figure out the best socially acceptable ways to behave in different cultural niches. On the one hand, this enabled her to form a support system on her own, made up by her friends from college, work, or mostly online, where she could be genuine and open-minded, attracting and attracted to people with similar concerns or experiences. On the other hand, the somatization of stress became exacerbated as she eventually matured into a full social member, moved abroad, and returned to Shanghai for job hunting.

Right before our first interview in December 2018, she had a severe panic attack. This time it came in three strong waves on the same day, and she almost got admitted into the E.R. She passed out twice and then slipped into a long period of depression. She described the core experience of her depression in terms of pain.

I continuously think of death. Always wanted to die. Sometimes I could not go to somewhere high up, because I would hear the voice that encouraged me to jump down. You don't realize that. You just hear that voice...I feel pain. A pain in my chest, my heart aches. The pain was so sharp that I needed to put all my energy just struggling with that pain. Being in so much pain is exhausting. The pain lasted so long, and it was so intense, to the point that I found living to be quite pointless, I just wanted it to stop.

After I turned off the audio recorder, I suggested we take a break. We were sipping coffee at Echo's rented home when she told me about the worst depression. We had coffee her style: no sugar, no

cream, and strong but fragrant bitterness lingering soft and long. She paused and suddenly asked me, “Have you read Harry Potter before?”

R: “Yes, of course.”

E: “Then you know Dementor, the monster that would suck all the joy in you?”

R: “I think J.K. Rowling wrote it as a metaphor to depression, yeah that made sense.”

E: “For a long time, I felt like being followed by a dementor. It was truly the darkest time in my life. It was like an eclipse, during which you vaguely know it would pass, but that moment lasted forever.”

Echo’s description of a scattered, non-linear temporal experience in life story narration and prolonged, lagging moments during her most depressive moments was in-line with phenomenological research on temporality and mental illness (Stanghellini et al. 2016). The main reason for such prolonged sensation was due to anchoring of her somatic experience being in intense pain. From a phenomenological perspective, as we view the body and mind as an undivided whole, Echo’s body expressed all the negative experiences during all her social interactions. This results in an intense primal impression (the now-moment) regardless of her emotional disassociation. As we both agreed later on while we talked about her healing processes, this was the way her body was forcing her to pay attention to the unaddressed situations that she did not have the habit or means to deal with psychologically. Echo’s prolonged primal impression is a way of both shielding the individual from a traumatic past and preventing her from moving towards the next moment so she could not turn away from her body. Dark and difficult as these moments were, it forced her into a situation where she had to deal with the emotion she disassociated.

4.4 Healing: Rhetorical Transformation in Temporality and Personhood Through Nurturing Intersubjective and Intercorporeal Experiences

Echo’s healing processes started from gaining support from the online community, using meditation apps, and eventually building her current career around designing and attending mental health and healing programs. Throughout her emerging adulthood, Echo never really gave up searching for a

proper healing process, nor did she ever cease to deal with daily struggles of mental health issues. As a highly functioning individual, she was always genuine and open about her conditions with the support group she eventually formed through her effort. This group included colleagues, fellow students, and most of her intimate social group which consisted of people who had similar experiences or, in her words, “understood me because at some point in their lives, they felt equally lost and confused.” Such community usually started online and swiftly expanded on cyberspace, where strangers would gather for the sake of common interest, hobby, sharing lifestyles, or come together sharing the same path to pursue answers for the crisis they encountered. Online groups such as these became predominant for the younger generation, where they initiated social relations and tried out their own rules to maintain such relationships. Viewed as strange and superficial by the older generation, who focused more on kinship or work-union relationships, the emotional support and intimacy these young people share initiated from those online forums or spaces such as Douban, Wechat, Weibo, or Zhihu. These forums occupy a great amount of time in their everyday lives. Echo’s communication with her social groups online and in real-life allowed her more agency than her family life.

It was through these social networks and opportunities that Echo started her body-oriented healing process in China, having undergone two years of CBT therapy while she was in the American university. After the serious depressive period she experienced in Shanghai, she started to use meditation and Yoga to deal with everyday stress and psychosomatic symptoms. The most recent meditation healing she went through was to join a Buddhism based retreat, where she and a couple of other practitioners went to a Buddhist temple, cut connections to the outside world, and participated in an intensive guided meditation for four days. During this retreat, the group experienced intensive feelings and emotions while gaining some insight about their bodies, self, and each other. Temporality was experienced and, I argue, restructured during such healing process that Echo was able to re-establish the relationship with herself, her body, and the immediate world around her.

4.4.1 Firework in Daylight

Csordas's rhetorical model of healing, combined with his theory on intersubjectivity and intercorporeality, provides an appropriate foundation to understand bodily oriented healing and intervention to psychological issues in a ritualistic context. The rhetoric of transformation in ritual healing views healing as fundamentally an existential crisis. This paradigm views the transformations that occur when people participate in these healing methods by focusing on the procedure, process, and outcome of rituals. Based on this model, my ethnography provides data in the following aspects of Echo's practices: first, what was the procedure of healing, and during such procedure, how was her state of consciousness altered or evoked; second, what was the changing process and what happened to Echo's thoughts, emotions, and attitudes changed based on her elaboration of meaning and her behavior; third, what was the outcome, including her satisfactory level of such intervention, her symptom and pathology, and most importantly, her habits after participation in such healing (Csordas 2002: 12-15).

Interestingly but not surprisingly, during her healing process, she was able to name or elaborate on her previous illness condition. She indicated that she frequently experienced acute back pain. However, as she moved further away from her hometown, joined a new company, and regularly participated in meditation, the manifestation of such acute pain began to subside. For any form of healing to be effective, given it is religious, ritual/faith-based, or biomedical, certain primary conditions need to be in place as premises for healing to occur: the patient's awareness that there is sufficient emotional support; the affirmation that her existence is worthy in a given community (Csordas 2008: 18), and, based on my observation, a safe social context where a new form of intersubjective can take place. When two or more subjects could engage in healing cultural or semiotic practices in a given structure where the individual could interpret the emerge of his/her sensations, memories, and feelings differently, they can re-write the habitual experience of temporality and thus reach transformation.

Two significant things stood out in Echo's healing process. Echo's PTSD and severe emotional disassociation influence both the continuity of her personhood and is related to her Abnormal Experience

of Temporality (AET). Her ability to stay at the primary now-moment as her skill of meditation got better was outstanding. She was extremely comfortable in “blending with the environment,” especially when she perceived the environment as well-structured, free of dysfunctional interpersonal communications, or close to nature. This was the case in Yoga studios, during her Buddhist Temple retreat, and even when she practiced meditation in the middle of the city:

I felt that the boundary of my body rippled out and eventually disappeared in the world. That my sensations extended and connected with all the sounds and noises around me. I stopped bothering with questions like who I was and whom I was supposed to be. In that moment of non-existing, just with the rising and falling of my breath, I existed. And I felt safe.

From a phenomenological perspective, such body-world interaction allows the subject to give up the sense of personhood trapped in a web of meaning, which limited her intention and crushing her hope for support, intimacy, and deprived her with a sense of predictability. Meditation based on Buddhist teaching and rituals provided a therapeutic discourse, through which the intrapsychic and bodily processes are activated and allowing more constructive ways of expression (Csordas 2008:24). Echo had a scattered sense of the past, which limited her orientation towards the future. Meditation based on breathing created a structure during which she had to turn her attention back to her body. In this process, she started by redefining her body’s boundary, followed by a series of adjustments of body-world interaction. At this stage, she could sense where she existed in safe solidarity, initiate her intentionality towards the world, instead of waiting to react to demanding social situations. Therefore, the meditation process starting with a heightened awareness of her bodily sensation of breathing, created a new context for her to transform to occur.

A more significant transformation occurred during Echo’s temple meditation retreat. One afternoon, the group proposed that they try a double lotus sitting position, which was quite challenging for beginners. The teacher helped Echo into this sitting position and stabilized her tights with scarves. After a short while, Echo began to experience intense pain.

E: “At first I thought it were my legs. I could not help but yell out because the pain was close to unbearable. “

M: “When you said pain, what did you mean? If it weren’t just your legs, where in your body was painful?”

E: “It was my heart. All the pain was coming out of my heart. The teacher helped me with her incantation, assuring me that she would stay with me throughout the whole process. Then I saw it, the pain from my heart. I saw how I harbored 24 years of sadness and fear, and it has been seen.”

M: “What did you mean when you said you ‘saw’ it. Was there a vision?”

E: “I could not name it... maybe it was a vision. I saw it. I was being seen. It was very clear ... from the pain. It was firework in day light (*bai ri yan huo* 白日焰火). It has been there for a long, long time. But in day light it was not sparkly or beautiful, but with a prickly sensation. I saw my fear, the sadness and fear that has always been there. The pain is out there. So, I yelled out, for everybody in the room, not just for myself. Because everybody in the room all had such pain so I just yelled out for all of us. I wanted to be seen. We all wanted to be seen.”

Such transformation that occurred during Echo’s meditation had multiple layers of meaning. For the rhetoric of transformation to occur and accomplish, four interrelated tasks must take place. Firstly, there needs to be a recognition of predisposition. Echo had clinical diagnosis and also accumulated understanding of how she felt and how these psychological and somatic sensations were related to her childhood trauma and experience. Under such recognition, we need to look at the disposition of Echo withing the healing process vis-à-vis her social networks and symbolic resources. This leads to the second point of why and how Echo chose the Buddhist-based retreat for her recovery and healing. According to the rhetoric of transformation in ritual healing, participants shall have or recognize the human capacity to experience the world as sacred. Each healing system attends to human condition differently. In Echo’s case, the meditation retreat she participated had a solid foundation in Buddhism and combine Buddhist philosophy and psychotherapeutic techniques in the structuring of meditative cultivation and self-care. This is a common combination in urban Chinese settings and is gaining popularity in the past few years, an interesting phenomenon that deserves more anthropological attention (Zhang, 2019). The participants (i.e., Echo and fellow meditators in the group) in the context of their community (meditation retreat) must believe that healing is possible. Such belief does not only have its root in the retreat as a healing institute, but also in the existing culture and practical system that brings significance into the current experience for

these participant. The participants must believe the healing effects have spiritual power. In Echo and her fellow meditators' case, this spiritual power is a combination of psychotherapeutic and Buddhist teaching. A person is encouraged to be in one with the cosmos and work in nurturing vitality and goodwill. Third, the participants must be persuaded to change, thus for the transformation to occur (Csordas 2002: 46 - 53). The externalization of pain as a physical sensation and the visualization of pain as "firework in daylight" during the healing processes are significant aspects of rhetoric healing and transformation in many forms of ritualistic healing across cultures. Integrated into the entire symbolic system for each participant in the meditation group, each person externalized their harbored stress, trauma, and grief in different forms, guided by the same Buddhist principle of "mindful seeing" to transcend their present conditions. Echo's visualization and externalization of the sadness and pain indicated the activation of her endogenous processes, a counterforce to her previous emotional disassociation. The visualization, firework in daylight, has cultural and hermeneutic meanings. Firework in Chinese culture represents a form of celebration, marking successful transitions in collective lives. Firework also bear the cultural meaning that everything worth celebrating is also a passing joy, with a fleeting quality that indicates the temporary of all things fabulous. Firework can only be appreciated at night. In broad daylight, its brightness is unnoticeable, which is unfortunate and a waste of time. Therefore, firework in daylight reveals the three features of Echo's sadness: that it was unwitnessed, beautiful, and momentary. White as a color in Chinese culture laden with meaning. It represents grief and pureness, often used in funerals to indicate the pureness of an unpolluted soul. Therefore, the white firework in daylight was the actualization of an individual's culturally significant processing in the healing of past sadness and trauma. Throughout the sitting meditation, Echo was guided into directly facing her own body, emotion, and distress in a safe and structured healing community. The locus of therapy was finally transformed from dysfunctional social relations and intersubjectivity into her own body.

Thirdly, during the healing process, there must be elaboration of alternatives or negotiation of possibilities. For Echo, the most salient negotiation of possibilities is to not be haunted by the past that

presented itself as painful nothingness. The visualization brought forward what event-based memory could not actualize, but still a tangible symbol that Echo understood and saw. In seeing this actualized pain, she felt that she was also seen. This brought forward a different form of embodiment with regard to her temporality. She showed herself another possibility: her ability to stay within the primary moments while witnessing the past trauma externalized as vision and sensation. Though she could not and would not have exact memories of traumatic events, her primary sensation of the now-moment no longer appeared as blocked or numb that weighed down her body and mood. In a way, we see the three folds of an intentional temporality: the primary impression (awareness of the now-moment), retention (awareness of the past), and potential (orientation towards the future) started to connect. As Echo was yelling out due to the externalization of pain and visualizing the previously inexpressible fear and sadness, she built a connection with people who participated in the mediation session with her. During our later interviews, Echo frequently mentioned the bodily connections people could sense from each other in a deeply meditative and healing environment. She described in detail how the intercorporeal connections she was able to sense with or without verbal interactions when she was with other people in a highly supportive and open environment. In the beginning, she suggested that a physical co-presence was the premise for such intercorporeality to happen. However, she suggested the emotional and physical connection she could sense and operate even without physical co-presence. For a person with emotional disassociation who spent her whole childhood responding to demanding environments with learned and scripted verbal communication, Echo felt more secure and comfortable relying on this somatic sense of connection and initiation that bypass verbal social interactions.

Finally, for the rhetoric transformation of healing to occur, there must be an actualization of change. This change occurred for Echo when she stated that “I not only yelled out for the myself, but for the whole group”. Her actualization came from intercorporeality. Intersubjectivity and intercorporeality not only served as people’s reference for the construction of memory and experience, but also important reference of temporality, which formed the backdrop for one’s reality as their lived experience unfolds.

As Echo was able to achieve a sense of intercorporeality of the pain and suffering from other meditators in the retreat, she was able to generate a sense of mercy and mindfulness (*ci xin he zheng nian* 慈心和正念) towards such pain and suffering. Such mercy and mindfulness in turn provided herself with forgiveness, tolerance, and console. She did not, however, need to do this independently or by herself. The intercorporeality and intersubjectivity in the Buddhist Retreat were nurturing and supportive, confirming Csordas's argument that for ritualistic transformation to happen, one's sensations, experience, and their changed intentionality towards the world and themselves needed to be confirmed by a community. When I asked her what she meant when the master/teacher was "supporting" her (*Jia chi* 加持 or *adhiṣṭhāna* in Sanskrit) is the Buddhist term used in a variety of social contexts. It is a form of initiation or blessing in Vajrayana Buddhism. It has many meanings across different contexts, and in this case is best understood as "standing-over" or "in supportive position". Influenced by Tibetan Buddhism and widely used in Chinese contexts, it literally means "give wave", indicating that both the giver of supportive energy and the receiver of such support could benefit from such action), she said the teacher stood by her and offered both verbal and gestural supports by placing hands on her knees and on her backs. The placing of the hand in any form of ritualistic transformations and healings usually has significant social and religious meaning. Going beyond a mere gesture of support, it indicates a transcendent co-position of two egos, forming a collective mode of presence in that moment (Csordas 2008). In the Buddhist Master's presence, the transformation occurred when the embodied but unwitnessed past flush into the present moment. Contrary to previous now-moments during her depression, when the past could not be actualized, and the future could not be reached, the primary impression of the now-moment during transformative healing is to let subjective temporality flow again. Working with similar principles that I analyzed in Chapter two and three, trauma begins to dissolve once people can bear witness to individual experience. Echo's key narration, "to be seen," is the essential element for the transformative moment to occur. It was through the intersubjectively constructed connection and the witness by other people that pulls the subject (Echo) from her scattered temporality

and instantiates a new perspective on temporality. In this newly established intercorporeal relationship, Echo was able to take a third person's perspective towards her own past: she realized that someone bore witness to her past suffering. With that recognition rising to her consciousness, she was also able to reconstruct some of her past, in a language that makes sense in her cultural setting and in her mind. This means that her retention (the awareness that the past is the past) is repaired and connected to her awareness of the present. When her retention was reconstructed, her protention (the awareness of the future as coming into the present) also began to take shape. Her primary impression of the present is thus transformed. This transformation triggered a significant shift for Echo and her emotional disassociation. Throughout the process, she became more capable of feeling her own and other people's emotional fluctuation and sensations, shifting her default existence in the world from avoiding and withdrawing to intentionally orienting towards the surrounding context.

4.5 Conclusion

Transformative healing is a life-long, dynamic process. For Echo, heightened stress, anxiety levels, and battling over depression would always be part of her daily life. However, these experiences cannot just be viewed as crippling diseases but rather a life-long struggle that leads to the cultivation and growth of a fuller personhood. By the time we finished our fourth interview in early 2020, Echo's city was infected by the spreading of coronavirus and turned her New Year holiday into a stressful quarantine. Fighting bubbling anxiety, despair, and fear in such dark days, she shared her daily struggles of distress at national, societal, and personal levels as she continued to deal with family issues and broke up with her boyfriend. She indicated that living under stressful situations during quarantine triggered a great sense of precarity and fear and inspired her to spread good will and positive vibes as she tapped on a strong sense of self-love and a sense of independence of her soul. Although throughout these days she would have moments where she felt she was gripped by fear and despair, meditation helped her to come back to the here and now and allowed her to practice reinforcing the boundary of her body again.

Her relationship with her own body also shifted. In joyful moments of solidarity, she told me that “I took a selfie and celebrated the love I gave my own body. How could I not have realized that my body is so lovable? If I was a porn star I would even pay to view my body! That’s how much I love my body right now.” I congratulated her on building such nurturing relationship with her own body. Also, I thanked her for providing such insightful narratives for me, not only as a scholar but also personally relatable and inspirational. She commented that it was because her past trauma was so painful that her nirvana could be swift and bright.

As we chatted about our own lives and future in the current situation, with looming danger, suppressing political climate, and precarity of life, I realized that Echo’s ability to focus at the “now-moments” was a strong coping strategy. However, focus on the now-moments can only be efficient if one has an embodied understanding of authentic temporality. To live without facing the past or planning for the future due to precarity and stress is to live in limbo, with short-term and long-term psychological consequences, as studies on the waiting periods for refugees and asylum seekers articulated (Haas, 2017). From living a numbing existence to the current inspirational advocate of healing and self-care, I witnessed such transformation that empowered a young woman under extremely stressful situations. To be one with the current moment was not an easy achievement, but when people access such sensation, the totality of their synchronization with temporality can be in vivid contrast to dark moments of depression or disorientating panic attack. It was precisely because Echo experienced both blissful transformations and near-death painful distress that she had such full embodiment of existence at such a young age. The fragmented memory of a traumatic childhood did not, in Echo’s case, prevent her from utilizing her agency and re-establishing bodily boundaries, even gaining a more proactive mode of existence in body-world interactions. Lastly, the abnormal experience of temporality as manifesting reference of her illness experience indicated a scattered and dysfunctional personhood formation in the past. For such transformation to occur, a reshaping of social relations, the access to another system of meanings, and

embodiment of a specific temporal-spatial context need to be present. In the next chapter, I will elaborate on the crucial stimulation and presentation of space in the embodiment and transformation of trauma.

Chapter 5 Bodies as Arenas

The Rebellion of Women's Flesh Through Gendered Experience in a Patriarchal Culture

5.1 Introduction

5.1.1 "*Jiang Shan Jiao, are you still a virgin*"?

When Covid-19 first became a national pandemic in China, the Communist Youth League thought it would be inspiring to introduce their newly designed cartoon mascots. Dressed in Chinese style gown, the young girl Jiang Shan Jiao (Lovely Lands) and the young boy Hong Qi Man (Abundant Red Flags), both names inspired by Mao Zedong's Poem attracted overflowing ridicule and resistance. To use a woman's body (and, in this case, a young teenage girls' body) as a metaphor for the Land and the Nation is a long-practiced tradition in the Chinese patriarchal system. Land/Earth has long been viewed as possessing the feminine quality: fertile, nurturing, and most importantly, property for men. In the contemporary postcolonial era, this metaphor eventually was incorporated as part of national discourse, indicating an inscription of propaganda and nationalism onto female bodies (Zito & Barlow, Tani, 1994). Although the mascots were pulled within hours, this action met with a great wave of fierce resistance online, and the mascot soon became the target of political discontent and mockery. People used this chance to voice their rage about women's lived experience in contemporary, misogynistic Chinese society (The Economist March 7 2020). In Weibo, a widely popular Chinese miniblog, one person posted a question toward *Jiang shan jiao*, asking "*Jiang shan jiao*, do you have periods?", targeting the long-lasting cultural shame over a perfectly normal female body process. This question was reposted over a million times, creating an online phenomenon called "a thousand question for Lovely Land." People asking questions such as "*Jiang shan jiao*, are you still a virgin?" "Did your parents want another child because you were a girl?" "Why is your skirt so short?" "Do you feel inferior even when you have a Ph.D. or master's degree? It will be tough for you to find a husband". Within five minutes, there were over 5 million reading times before it was censored. Even after the mascots were pulled, a collective

sense of resistance in the middle of the pandemic crisis cannot be erased, revealing the sexist culture and structural oppression towards women in general.

Growing up and becoming a woman in China, I share this sentiment and struggle. As a native ethnographer, I found the difficulties, dilemmas, and cultural oppression of women and girls a topic that cannot be avoided. When it comes to mental health and mental illnesses, the social, cultural, and political realities are not the same for men and women across sociocultural settings (Jenkins & Good, 2014). The purpose of this chapter is to explore the bodily experiences shared by my participants as they struggle through the cultural transitions that provided them with contradictory notions of their gendered role. Through the two case studies, I want to argue that the misogynistic culture and disciplinary power are direct causations of women's suffering and mental illness. Chinese patriarchy, the internalized shame throughout the postcolonial era that contributes to the rising nationalism, and the institutionalized gender inequity through rising conservative power all contributed to women's suffering and the persisting gender gap. I will investigate embodiment and emotion in dealing with struggles, oppressions, confusion, and trauma from their gendered experiences as they struggle through a misogynistic culture system. I argue that women's struggles take place directly upon their bodies, and they fight these battles as if their flesh is the very arena where these struggles occur. Upon their bodily experience, people are subjugated and resist gendered discipline and gender/sex-based power abuse. Women go through physical and emotional struggles that may reinforce or damage their wellbeing and health in the process of trying to claim ownership of their bodies. By understanding and announcing these struggles' everyday experiences, we can destabilize and challenge the established gender norms. Taking a closer look at these women's lived experiences, we see stress, oppression, and even self-defeating psychological patterns result from long-term social discipline at a societal, cultural, and interpersonal levels. We need to make the unvoiced sufferings explicit, providing a chance for East Asian women to form solidarity and say no to the chauvinistic culture and the people who try to reinforce these misogynistic norms.

To understand the emergence of some severe mental illness symptoms of women and girls, we need to go back to their story across developmental stages, especially when they realize gender plays a role in their everyday lives. Gendered experience played a central role at each transitional stage during people's life course for almost all participants. I did not plan to talk about gender and sexuality, which could be a book on its own. However, the traumatic experience and mental health struggles resulting from or closely related to gendered social experience were significant for my female participants. As my fieldwork progressed from 2017 to 2019, I encountered eating disorders, general anxiety, major depression, PTSD, and other forms of mood disorders directly related to gender inequality, sexual abuse, or rape. These experiences are the nightmare part of the "Chinese Dream," forming an ugly undertone for half of the population in the process of pursuing Chinese modernity (Rofel, 2002). With the ongoing movement calling for sexual liberation and tolerance, the State responded with harsher discipline on gendered roles, female bodies, and increasing censorship on anything related to feminism, gender discussions, and sex education. Anything related to the challenges of a long-lasting misogynistic, patriarchal system is heavily censored, creating a masculine fantasy that fuels a sense of control through objectifying the female sex. From "women can hold half the sky" in the 1950s to "calling women come back to the family" by Xi's government in 2008, this growing conservative movement became the misery, trauma, and struggle of many people, in both the elder and younger generation.

To understand lived experience in various social situations, I combine phenomenology and feminist approaches to understand people's lived experience as the female bodies are socialized and gendered as cultural norms etching their flesh (Grosz, 1994). As an illustration of my depiction of this war fought on bodies, I present two case studies, a young female with eating disorders and a woman surviving rape and struggle with intimate relations. I conclude that gender inequality experience is simultaneously an oppressive social situation, a set of internalized and not always conscious cultural norms and an experience of daily verbal, physical, and emotional aggressiveness. The lack of a supportive environment at the macro-cultural level and in an individual's intimate social context is a primary cause

of mental illness. However, the fact that women's struggles manifest as mental illness symptoms, their struggles to understand their suffering, and how they express their confusions, all indicate their attempt to reclaim agency. In promoting the concept of "rebellious flesh," I point out how the body resists against cultural norms and reveals the desire for a different future. My case studies are illustrative of women's reality in dealing with mental illnesses. However, these two women are both highly educated and relatively resourceful, revealing only part of Chinese women's reality. The difficult question is, how many *Jiang shan jiao* (Lovely Land) out there have had enough with these misogynistic traits?

5.2 From Body to Flesh: Addressing embodiment and experience of women in a patriarchal society

I combine psychoanalysis, phenomenology, and feminist theories to analyze women's embodiment and emotion. I am taking one step further from focusing on body and embodiment by introducing the concept of "flesh" from a phenomenological perspective. To fully understand women's embodiment and experience in a patriarchal society such as China, I intend to pay attention to what kind of lived experience people must go through to acquire a gender. I want to capture conscious moments of gendered experience, which means I pay attention to how women become aware of their bodies and under which social situations such awareness impacts their understanding of self in a social context. Based on my ethnographic observations, some characteristics of those gendered embodiment include senses of incompleteness, ambiguity, and fluidity. Usually, when gendered experiences manifest to a women's consciousness, they become aware how their bodies, desires, intentions, and the reality they live in are not in sync. They start to see the chasm between their embodied cultural expectation and their intentions and desires. These moments left women feeling apprehensive and confused and triggered reflection and thoughts. Because the social situations women found themselves in are constantly changing, women's embodiment of their gendered experiences is also forever evolving. Therefore, I introduce the concept of flesh, which I define as an incomplete, anti-representational, dynamic process of realizing one's potential

of having a body (Merleau-Ponty, 1966). I shall now elaborate on why flesh is a more fitting concept to bind feminist theory and a phenomenological paradigm.

As I have defined in the introduction, I view the body as at once biological, social, and psychological (Scheper-Hughes & Lock, 1987). It is the fundamental carrier of lived experience for each individual, the entity of intersubjective and collective perception and memories, as well as the dynamic existence that defines and defies nothingness and nihilism (Maclaren, 2017). From a phenomenological perspective, bodies are the incarnation of space, time, and experience. The mode of body-world interaction is through the body's being-in-the-world with its "sense of existential immediacy" (Csordas 1994:10). If body and embodiment indicate "being-in-the-world" as a mode of existence, "flesh," incomplete and future-oriented, indicates a "becoming" mode of existence. By introducing the future-oriented, dynamic, and incomplete concept "flesh," I will be able to focus on the detailed, to-the-body experiences, preventing them from dissolving into discourses as when are conceive as "somatization" or "socialization of physical experiences." As one of my female participants indicated, "the past, present, and especially future obligation of what it means to be a woman is usually a form of pain, a to-the-skin form of pain (*qie fu zhi tong* 切肤之痛). Even if my mind is free and has all sorts of hopes, my body aches, and I mean it quite literally." The realization that even the aspiration of what it means to be a woman brings actual pain to the body inspired me to look beyond the concept of body. I anchor all my analysis of gendered experience on the concept of flesh: the heading-towards-horizon mode of existence. The flesh is fundamentally the bodily awareness when the individual is driven by desire, energy, moving from current body-world interaction towards the next moment, escaping from an unpleasant situation, and aiming for a change. Using flesh to explain women's bodily and psychological awareness, I hope to capture the battles towards claiming the ownership of bodies, or the possibility of claiming one's subjective experiences, especially when these experiences are marginalized, shamed, crushed, or left unresolved.

Discussing this libido-driven, future-oriented concept of flesh, we shall be able to discuss a milieu of inexpressible sensations, even minor changes in mood and bodily conditions in becoming women. I intend to capture the emergence of energy even before they make sense and become an experience. In phenomenology, what is not yet perceived but is intentionally anticipated is called a “horizon.” Husserl also distinguished an internal and external horizon, viewing the inner horizon as the extent of our consciousness and the outer horizon as our anticipation of perceiving the objective world (Geniusas, 2012; Jenkins & Csordas, 2020). The structure of object-horizon enables the individual to distinguish perceptual objects from each other (Geniusas, 2012). Flesh, as Being’s horizon, cannot be thematized and is incomplete. These characters match the characteristics of the female bodies and are integrally compatible with a feminist approach.

Understanding “flesh” means highlighting the dynamism of female flesh. As Grosz pointed out in her “Volatile Bodies,” discussing bodies from a feminist perspective means we shall see the bodies as culturally, sexually, racially specific bodies, the “mobile and changeable terms of cultural production.” She pointed out

As an essential internal condition of human bodies, a consequence of perhaps their organic openness to cultural completion, bodies must take the social order as their productive nucleus. Part of their own ‘nature’ is an organic or ontological ‘incompleteness’ or lack of finality, and amenability to social completion, social ordering and organization. (Grosz 1994: ix)

This chapter will analyze and present the female bodies, bodily conditions, and social existences that are organic, incomplete, and continuously undergoing social ordering, organizations, and disciplines. When my participants describe their life experience, they often talk about the changes in their lives as a particular awareness in their bodies emerges to their consciousness: the realization of how horrified they were in the middle of a sexual assault when despair kicked in the precise moment as her body “gave up”; waking up as if in the middle of trance during a binge eating session in the long battle against eating disorders, with the sense of a bizarre contrast between an aching, full stomach, and a heart “as empty as a void.” These surges of intense sensational, emotional, and cognitive fluctuation mark the realization of

one's flesh: a sharp conflict of one's current reality and one's intention. These moments reflect a woman's inner struggle through illness, oppression, and suffering signifies discontent even if the woman has internalized cultural norms and expectations.

Female experiences are based first and foremost on their gender and sexuality. My position is that women in East Asian societies do not always own their bodies, but they can never cease to be their bodies. Their sexuality, reproductive capability and rights, social positions, kinship roles, and developmental stages are all under masculine and patriarchal disciplines. The definition of female puts women in a subordinate social position viewed as a form of lacking, as no-men, a pale mimic of what a male-dominated existence can be (de Beauvoir, 2010). On top of that, the traditional East Asian kinship system also created an ideological system where women's position, intentionality, and activities are only deemed as having social value or glorified if and when they are subordinate and supportive to men. The only way to get an emic point of view of the female struggle in contemporary Chinese society is to capture the moments of their body awareness and conflict in the flesh. I will focus on what is happening to their bodies, revealing their difficult negotiations with people in their close social networks. Finally, through these women's flesh, I present the battle fought at every level, from their inner self to their families and friends, and with the shifting cultural norm, even State obligations and laws. Since this research deals with the psychical, interpersonal, social, and physical experience of transition, my ethnography will show how the cut-to-skin pains and sufferings can come from multiple levels, from an abusive partner to the misogynistic but invisible political power.

5.2.1 Naomi: There is a hole in my heart that could not be filled

From 2017 to 2019, every time I met Naomi, my heart aches for her. Even as I was sitting down, writing up her ethnographic case study, I could not stop worrying about her health and emotional status. I knew her since girlhood and considered her as my little sister. I remembered her as a kid with a sweet smile, red-cheeked and bright-eyed, active and multitalented, energetic and confident in her childhood. We even went to the same high school. However, when she entered this prestigious high school as one of

the top students in her year, I went abroad for undergraduate studies in psychology. When our path crossed again a few years later, I could hardly recognize the pale shadow of a young woman before me, ready to share with me stories she hardly ever disclosed to anyone else.

The main reason behind Naomi's transition from a healthy, energetic child to an emotionally burdened, underweight young woman was because she had been struggling with an eating disorder since she was 16. Several significant changes happened during her high school years. She had some difficulties adapting to a highly competitive, emotionally distant new school setting for a short while. Her academic performance dropped from the first in her junior high to almost 200th out of 600 students in senior high. Chinese elite high school students are trained to think that going to an elite university is the only life purpose for their high school time. Many adolescents are crushed under such a highly stressful mentality. Propaganda and popular narrations about academic performance drive students into a tunneled vision. Many believed that National Entrance Exam was their only chance in life and that they would fail their family, ruin their future, and end up a total failure if they did not enter a good university (Fong, 2004). "At that time, your life is nothing but study. Even if you do not really spend every waking minute studying, at the back of your mind, you think you ought to." One of my participants, who was also one of those "elite students," described a Chinese college-bound high school student's mentality. "Academic performance determined everything. Your position in your class, whether you would have friends, whether these friends are at the same level with you and will become 'healthy competitors' who can drive you to perform better. Whether your parents can hold their heads up amongst their social circles. All these depend on your academic performance."

When Naomi's teacher informed her parents that their daughter might need to attend cram school for some extra help in her work, especially in math and sciences, her parents were "practically horrified." They pushed her to do better in school. After a short while, Naomi abandoned all her leisure hobbies, cut off all her social contact with previous friends, and spend all her waking hour studying, at that time, much to her parents' satisfaction. Nevertheless, she indicated she was driven by a sense of defiance rather than

obedience. This resisting force remained at the core of Naomi's intimate relationship with people who are close in her social network, always putting her in an emotional dilemma. On the one hand, she was loyal and committed to her kinship system. On the other hand, she defied to conform, almost solely driven by the motivation of "I will do it for you to prove that you were wrong." Many young women conform to expected social activities, driven by a sense of defiance, and these driven forces are internalized and manifested as somatic symptoms later in life.

Other changes occurred silently but with long-lasting consequences in her family. Due to the 2008 financial crisis, her father lost his job. This change had several impacts on my contact with her family and similar observation from other families who also suffered the same blow. Because her family lost an important source of income, the family's psychological dynamic changed as well. Naomi's mother, who had always been a self-motivated woman, devoted more time and energy to her career. She had always been very strict with Naomi since a young age. In the years when she had to overcome the family's hardship and to try very hard to be competent in her career, her handling of her daughter's emotional expressions and development was authoritarian, assertive, and rigid. Under enormous stress and possibly emotional neglect, Naomi became avoidant, sensitive, and further withdrew from her peers. She responded to her mother's will and temper with obedience and little resistance, regardless of her struggles or confusion. Naomi's father, who was gentle, shy, socially avoidant, and attentive to details, was undergoing some stressful situations. One of his coping strategies seemed to be turning his attention to his daughter's daily routine, edging on micromanagement. What silently entered into the teenager's endogenous process over things beyond her control was an intense, even impulsive eagerness to take something under control. Doubtlessly, she turned to the only thing she possessed: her body.

Her family began to be concerned about her health status only after she successfully entered an elite university. In Naomi's narration, her mother's friends called her mother after the celebration party of Naomi's University admission, telling her carefully that "your daughter looked real pale and scarily thin that she could be blown away by wind.," Naomi smiled bitterly, "They did not even dare to tell it to her

face, afraid of hurting her pride. They only subtly suggested that she should take me to see a doctor.”

However, they never sought psychological intervention. Naomi described that for her parents’ generation, psychological intervention was shameful and unthinkable. “Mental health was not a thin. If you have mental health issue you are crazy. If you are crazy, you are no longer a human being. I think in their mind, people who are crazy ended up getting locked up in a hospital ward and never came out. That’s their notion about mental health.” They also did not understand eating disorders, attributing Naomi’s complicated relationship with food to her stress at school and then willful defiance in simple things. Mealtime became a constant battle. In Naomi’s parents’ mind, her eating pattern was due to “wrong ideas about losing weight and poor appetite.” Her parents would force her to eat, pushing her to tears. Purging started around the same time. Naomi tried everything to avoid food. She would spit out the last mouthful of food to the toilet or tuck it away in napkins to throw them out. Other aspects of her life fell under rigid self-regulation, bordering on obsessive compulsion. She would even go to the same public restroom to purge on her way to cram school. According to Naomi’s memory, counting became a behavioral pattern that she relied upon to anchor her bodily and emotional regulation, seeking a sense of control and familiarity. She started to count the calories and the times of chewing, and the amount of food she was able to purge. Around the time she was in college, she struggled with binge-purging cycles. Dining alone became a major stressor. When she was on her own, she could not help but “steal” food and snacks from her roommates, picking eatable things even from the garbage bin. She was highly anxious how other people would find out about her pathological eating patterns, which became an additional obstacle to socializing.

Her conditions exacerbated when she went abroad to exchange for a year. The year she spent in Europe was very challenging and mostly unpleasant. She experienced sexual harassment for the first time in her life. Completely lacking sex education as most young women in her generation were and anxious during socialization, she did not know how to refuse unwanted interactions and was traumatized by the

incident. She began to swing between purging and binge eating, going into a “trance” like status when she binged on food.

On top of that, she developed severe eczema, which was so itchy that she could not sleep. Eczema and rashes are common across my case studies when people, especially women, experience constant stress and anxiety. Research shows that affective disorders, stress, and biased dietary intake contribute greatly to adult eczema (Klokk et al., 2010; Schmitt et al., 2009). Without psychological or psychiatric treatment or intervention, Naomi tried every medicine possible throughout the winter, but eczema would not go away. “I got it everywhere, especially on my scalp. And I would shed skin like crazy. My roommate told me directly that she found me gross. I found myself gross too.” The condition made her even more self-conscious, causing stress, insomnia, and drove her further into emotional isolation. These are all embodiments of stress as she navigated through a precarious social context, especially in moments of loneliness and helplessness. After returning to China, her family and friends had no clue about the hardship she endured. They even congratulated her, to her horror, that she successfully gained weight. Comments and observations such as these drove her to another round of weight loss, combining physical exercise and extreme food avoidance such as red meat and carbohydrates. While we hang-out during family gatherings and meals, Naomi told people she was allergic to red meat. But later in our interview she disclosed to me that she did not have allergic reaction at all, she just wanted to avoid certain food. By the time we started our second and third interviews, she was preparing to get married and was worried about “looking fat” for her wedding again.

After she married, the transition towards intimate relations sometimes became another form of stress. She disclosed her eating problems with her husband, and her eating habits were sometimes better if she had his support and accompanied her in meals. By the time I finished my fieldwork in 2019, she had planned to get pregnant even though her hypothalamus had stopped functioning properly and she would not ovulate. As I was writing up this case study, she gave birth to a son. She was still underweight and would lose one pound or two in a day because she was nursing.

5.2.2 Transitional Phenomena and the Rebellious Flesh

Scientists and theorists have long-established the significant risk factors correlated to the emergence of eating disorder symptoms, especially amongst adolescent and young adult females. Several internalizing social factors can be significant predictors of eating disorders amongst young females across cultures. First, young women's exposure to media demonstrates impossible aesthetics and established a preference over thin body images (Becker et al., 2002; Becker & Hamburg, 1996). Second, the highly competitive cultural environment that deemed physical attractiveness an essential element of success also contributes to young women's increased risks in body dysmorphia and eating disorders (Leung et al., 2010). Eating disorders are also closely related to negative affect and other mood disorders, such as depression and anxiety (Becker, 1995).

On the other hand, psychoanalysts pointed out psychological risk factors as young women go through transitional stages and struggle to negotiate between constructing a maturing self, perceived social roles, and balancing their desire and expectation in their interpersonal relations (Benjamin, 2013a). Throughout developmental stages, the occurrence of pathological eating patterns eerily reflects the patients' relational history. Psychologists propose these concrete symptoms can be viewed as young women's self-regulation attempts, negotiation, and even emotional expression to regain control and overcome transitional difficulties (Ferguson & Mendelsohn, 2011). Eating disorder symptoms disrupts the overall metabolism due to malnutrition. Females usually miss their ovulation circles or stop ovulating entirely. Patients also experience hormone malfunctioning, which further exacerbates their overall mental health (Lee et al., 1999). In summary, it has been widely acknowledged that cultural trends, gender norms, and an individual's developmental experiences and endogenous processes all play a role in the emergence of eating disorders, making it one of the most difficult mental illnesses to treat.

Using Naomi's case as an illustration, I shall begin with a psychoanalytic approach. I view her struggles on eating patterns as part of the transitional phenomena across stressful life stages. I shall first apply Winnicott's theory to understand the bodily and psychological features in understanding Naomi's

conditions. Several features are salient in her experience: 1) the repeated binge-purge cycle usually occurred, not immediately, but shortly after she experienced something stressful; 2) there was a “trance-like” period when she disassociated from herself; 3) an outsider’s intervention sometimes helps, but sometimes makes her conditions worse, depending on the relationship between Naomi and the person who presented and intervened. Winnicott defined the transitional phenomena as a process during which one negotiates between one’s inner self and outer reality (Winnicott, 1991). Throughout developmental stages, the child eventually learns to separate these two processes and see how they interrelate (90-92). Psychoanalysts proposed that eating disorder symptoms could be viewed as a form of coping strategy, or, using Winnicott’s word, transitional object, using which the person can eventually channel her original sense of power into cultural or creative activities that reflects her sense of agency and thus acquire a true sense of satisfaction (Ferguson, H., & Mendelsohn, S. 2011: 359). These coping strategies are dysfunctional because, throughout Naomi’s reaction to stress, she had to disassociate from her body and let the bingeing and purging sensations take over. Such resistance to stress related to eating (chewing, swallowing, and reverse eating such as purging) is what psychoanalysts would view as a regressing to the oral stage. The infant first explores the world through highly developed sensations around the digestive tract. Under highly stressful situations, the patient would regress to an earlier stage to overcome such vulnerability and seek security.

Based on Naomi’s experience and eating patterns, her eating disorder symptoms can be viewed as a transitional coping strategy. However, this is also where my take of her eating disorder phenomenon diverts from a psychoanalytical conclusion. I view her binge-vomiting cycle as a form of resistance against the culture that continuously deprives women of desire and pleasure and regains self-control through inner-self vs. outer world interaction. Instead of viewing her behaviors as an attempt to reestablish body boundaries and seeking comfort through regression to the oral stage, I see the immediate pleasure that her body experienced and the reversing of eating as a form of prioritizing the flesh instead of the culturally cultivated self. Becoming a woman in East Asian society is a process with little cultural

support for gaining agency because the gendered experience is established on a fundamental sense of self-objectification and deprivation. Therefore, instead of attributing the difficulties Naomi experienced as not overcoming unsatisfied infantile desire or “regression” towards an earlier developmental stage under transitional stress, I see her symptoms as the resistance and defiance against a malfunctioning cultural system. Purging and bingeing are fundamentally pleasuring progresses combined with aggressive acts. However, in a cultural world where there is no place, no words, and no structure for women to be aggressive or have pleasure, she turned such aggressiveness to the culturally disciplined body. The rebellious flesh is disassociated from the docile self, resulting in the trance-like status.

We shall now look at the detailed embodiment of cultural discipline and the rebellious flesh. First, Naomi’s sensory processes went through these cycles. The emotional reflection and expression afterward exhibit her body-world interaction and are etched with internalized social expectations and interpersonal relationships she engaged with across her different transitional stages. Her self-restriction and refusal of food are self-regulating attempts in anticipating rejection and unpredictability (Ferguson, & Mendelsohn, 2011). This regulation is not just impaled on her body but is a form of negotiation based on her intersubjective experience. As I explored in previous chapters, intersubjective experience is a shared bodily engagement amongst more than one person that forms the foundation and partially defines the subject as he/she participates in such process. The emergence of personhood, temperament, and in this chapter, organizing principles to go through different situations in life as a guidance of how to perceive, behave, and process one’s emotions, are all based on intersubjective experiences.

Through transitional stages, Naomi developed a set of clear, repeated, and well-practiced organizing principles. This set of organizing principles dominated her routine, social activities, eating habits, even the sensations she allowed herself to feel (Stolorow & Atwood, 1984). Relying on these organizational principles that emphasize self-deprivation, Naomi restrained herself from acknowledging or indulging with desire or need, protecting herself from potential judgment, rejection, shame, or hurtful criticism (P365). This model was repeated in her social life, where she had a problem with self-

expression, looking for comfort or emotional support. As she indicated in her interviews, “I dare not talk about any of these problem with my parents, because I was afraid that they would turn on me and criticizing me about not eating properly or behaving properly.” She also indicated her difficulties in communicating her desires and needs with her fiancé. “I know he loves me, but sometimes what I need from him is some companionship, while he insisted on self-reliance, and told me I was thinking too much. I felt so isolated and awkward, and maybe I was asking too much.”

In contrast to her agentic attempt of establishing self-reliance, her binge-purge cycles reveal the emergence of the rebellious flesh. These were moments when the body took over and resisted against the internalized self-restriction and patriarchal cultural norm that is fundamentally a process of deprivation as a child is socialized to be a woman. According to Naomi, binge eating usually occurred when she was by herself, a situation where she was potentially away from the constant worry of how other people might look at her.

N: I would go to the supermarket...and people would think I was buying groceries for a whole family. I would buy yogurt, approximately eight cups, and finish it in an hour. When I first began, I thought to myself, I would eat adequately today. However, eventually, I would go off track. I would eat faster and faster. This was why I would count the times I chew things. Because if I did not do so, I would not be able to stop. There would be only one idea in my head, and that was to finish everything and just go purging afterward.

R: Was the idea of purging your way out? Like a psychological and physical way of getting the food out? Would you tell yourself you can finish it now and purge later?

N: Yes, I would tell myself I will throw it up later.

R: Like you could not stop?

N: I could not stop. I ate yogurt, then...oranges, five pounds at a time...frozen vegetables, and fish fillets. In the beginning, I would still heat them in ovens...eventually, I would not even bother. I would just munch on them out of the packages, like frozen peas...

R: Did you not find them not tasty?

N: I just want to eat them. Like, finish them up.

R: What about taste?

N: I did not have a sense of taste.

R: No sense of taste. Were you just chewing? Like you could not stop chewing?

N: It was like I was chewing like I had gone mad, including rye bread that people bought for cleaning. In the beginning, I would eat things that I considered “healthy,” then I would go on with things that I absolutely would not eat under normal circumstances, like bread, and pasta, and even uncooked pasta. Like the psychological condition (*xin li zhuang tai* 心理状态) I was in was since I have already eaten one (something I would absolutely not eat), I would have another one, and then another one. Otherwise, I did not feel I have had enough.

R: What do you mean you have not had enough? Do you mean you were not full? I thought you said you could not tell hunger from satiation.

N: I could not. However, my mouth had not chewed enough.

R: Um, so it had nothing to do with your stomach.

N: No, it had nothing to do with my stomach. It’s only about my mouth.

R: So, the point was not about the taste of the food, but the texture? Like the chewing part is the thing you relied on in these moments.

N: I thought it was about chewing. That was why for a while, I purchased chewing gums like crazy, and I almost ‘overdosed’ on chewing gum. However, that simply won’t do.

R: What do you mean that won’t do?

N: Like it wasn’t like keep eating and finishing up what was before my eyes.

R: So, what made you feel fulfilled?

N: I would not feel better until I absolutely finished everything in front of me and purge. The process of vomiting everything would bring me comfort.

These social contexts provided the women with not representational tools and little psychological resources to deal with in the social situations they are involved in (Jenkins & Good 2014). From a psychoanalytical perspective, this gorge-purge cycle is a set of organizing principles that the individual relies on when under enormous stress. Munching and purging to get everything out of the system reflect the psychological interaction between the body and the external world. Naomi’s eating pattern reflects her socializing process as she was interacting with social norms and tried to manage her social relations. She seeks comfort through reliance on chewing, swallowing, and vomiting. Her attempts to regain control by purging allowed a physical outlet and brought her emotional comfort because she could believe that those calories would not build on her body. All these behaviors anchor her sensations and process in her digestive tract, which was one of the most primitive, original sensation a human being relied on since the beginning of our lives. The first set of body-world interaction and the actual embodiment process, during

which we also form our attachment with the primary caretaker and with the world was through digestive tracts (Winnicott 1991; Grosz 1994). From a phenomenological perspective, I argue it was a retreat towards a more natural, primitive, and sensation-based status before the etching of a series of self-denial, depriving organizational principles. The emergence of the rebellious flesh is an awareness with the manifestation of the inner horizon in consciousness, resisting against the external social and cultural strategies that deprive of the body its primitive desires: to be comforted, to be satiated, to be tolerated, and not to be judged no matter which direction one turns.

This abandoning of organizational principles is why during these cycles Naomi experienced an almost “trance-like” state. From a phenomenological perspective, the emotional equilibrium status can be achieved when the inner horizon emerges to one’s consciousness and the outer horizon in the external world that helps the person to distinguish perceptual objects from each other in time and space work interactively and smoothly (Merleau-Ponty 1968). Entering a “trance-like” status means cutting from the external world and retreat into the inner horizon where the pathological yet repeatedly practiced coping strategy would “fly autopilot.”

During my fieldwork, I witnessed one of those moments when both of us were invited to a Japanese all-you-can-eat family dinner together. After being pressured to take a variety of food that other people thought to be good for her, she started to order shrimp sashimi after she politely but nervously shuffled food from her plate. After three orders, I realized that she entered the binge cycle. However, other people who did not know she had an eating disorder cheered her on, as eating a lot during a Chinese feast was considered polite and appropriate. She stopped interacting with others halfway during the meal and focused on eating one order after another, gorging down shrimps. After she had almost 30 pieces, I squeezed her hand and whispered to her that was quite enough for the night. She struggled to focus or follow my suggestion, yet I kept holding her hand. She stopped ordering after another three rounds and eventually began rejoining the conversation after that. My observation of her near relapse into another cycle was during a family gathering, which could be psychologically torturing for many Chinese young

people because they are aware that their families are explicitly or implicitly comparing and assessing their status and behaviors. Therefore, I argue that the rebellious flesh was a coping strategy that resist the imposition of social pressure. Her eating pattern has nothing to do with food and everything to do with how she deals with her social situation.

Naomi continued to struggle with pathological eating patterns and possibly body dysmorphia, anxiety, and depression. Her struggles demonstrated the importance of social and emotional support that became the most essential yet painfully scarce resource in the therapeutic process amongst many urban Chinese people with untreated mental illnesses. As someone struggling with an eating disorder, she almost had to rely on another trusted person, especially during mealtimes, to accompany her when she ate. Something as routine as eating a meal could be a daily trial. Relying on emotionally stable intersubjective co-experience is crucial in her recovery. Companionship and emotional support could be another social repertoire, a healthier coping strategy that she could rely on instead of her symptoms. The sad thing was how little people understand about mental illnesses and the importance of emotional support during such processes. On top of that, becoming a woman in Naomi's world means her identity heavily relies on a constellation of social relations. Unfortunately, the gendered expectation was fundamentally defined by the woman being the caretaker instead of seeking caretaking or support.

5.3 Sexuality and Gendered Experience in Patriarchal Society

5.3.1 Quan: The Undesirable Passion of the Desiring Flesh

From Naomi's battle with pathological eating patterns, we see how the rebellious flesh became the locus of struggle as the individual's gendered experience in becoming a woman in a patriarchal society. Naomi's case revealed the patriarchal cultural norm's dysfunctional characteristic by anchoring the pathological coping strategy on fighting the battle of deprivation on the body. For my next case study, I will focus on sexuality and desire experienced from a woman's perspective. The major psychological trauma experienced by my next participant Quan was surviving sexual harassment and rape. From her lived experience, I have three observations about becoming a woman in a misogynistic culture and

engaging with heterosexual relationships. First, across many girls' developmental stages, the awareness of becoming women is tragically through experiencing violation and oppression. Girls did not realize the significance of their gender and sex until they were exposed to some form of violation in the cultural settings that subordinate and objectify women's bodies. Some became victims of direct sexual assault, domestic violence, and rape. Others experience harassment, verbal abuse, bullying, or unequal treatment based on their gender. As I was writing this chapter, another wave of the "me-too" movement began to re-emerge as some horrifying domestic abuse and sexual torture cases were revealed in China. Prevention of sexual assault became a proposal aiming for legal improvement during the People's Congress in May 2020. More and more people join in optimizing the safety of children, girls, and women. However, Chinese women still live in brutally unjust conditions, suffering from structural violence in the patriarchal system and direct violence from other people, fueled by the misogynistic culture.

Second, women's sexual desire and craving for companionship were often marginalized and rigidly specified in a heterosexual relationship. As a sophisticated human being whose body and psyche are an organic, holistic, dynamic whole, a woman's desire for intimacy, sexual drive, sensual pleasure, and emotional connection are usually applied in a wide variety of relationships. The Cartesian approach that contrasts passion with action, relating passion with suffering, pain, and against rationality (Jager, 1989) is deeply rooted in a variety of cultures, including the current patriarchal Chinese society. A woman in the current Chinese setting often finds herself in a situation where she has to either separate her sexual drive from the desire for intimacy, companionship, understanding and emotional support in an interpersonal relationship or take the risk of turning the whole relationship into a power play. During my fieldwork, my observation suggests that this happens both within and outside of marriage and partnership. Though both male and female participants expressed how they treasure companionship in addition to sexual attraction, males often have a more rigid idea about the gendered role in a relationship. In many heterosexual relationships, men tend to claim and reinforce their masculinity through aggression and possessiveness as they express emotion or participate in sexual relations. Though men are happy to

perform various social roles in their everyday lives, many have a painfully rigid idea that the ultimate sense of security and empowerment regarding sexual and romantic relationships. In their daily lives, men believe security in a sexual relationship shall be expressed through possession and dominance (Benjamin, 2013b). This tendency of using sexual dynamics to ensure social power was described by many of my female participants as “frustrating and disappointing”. I argue that rape, the most violent form of dominance in interpersonal communication, is not only a violent crime against the body and mind of the victim, but also an ultimate denial of the legitimate existence of another equal human being by forcefully depriving the victim of her free will, taking away her claim over her own body and damaging her humanity. It is depriving women of their qualifications to be recognized as a subject (Butler, 2009).

Thirdly, recovering from sexually related traumatic events such as rape, sexual harassment, and gender-based inequity goes beyond dealing with emerging psychosomatic symptoms on a daily basis. In these circumstances, healing means a readjustment of a person’s orientation towards both her past and her future. A victim needs both macro-level structural change, micro-level social relationship changes, and a readjusted endogenous process, during which they re-negotiate the relationship between their body and the world. Because overall structural changes and re-establishing body-world relationships rarely occur, victims of rape seldom fully heal from such trauma. As I will articulate below, this process includes a review of her childhood emotional attachment, her current social circle, and cultural context in Quan’s case. Through a psychotherapeutic dialectic process, she must go through three stages. First, to reorganize her sense of self by identifying the repeated pattern of her past relationships. Second, to realize how she was socialized to project her desire onto other people. Third, to identify how these projections were used against her in her vulnerable moments. With her therapist’s assistance, she struggled to find an alignment between her intention and her desire, learning to recognize the drive and aspiration of her flesh. Her journey involved a lot of pain and deep thinking, presenting some of the most finely reflected expressed emotion.

Quan approached me when I was having a vacation in summer 2018. When she heard about my project on embodiment and emotion, she volunteered to participate in my study because she was, in her own words, in the middle of finding a way to understanding life and pain. I witnessed a series of changes in Quan's life. Despite her devoting a tremendous amount of time and effort, she had to change jobs during the economic collapse, especially for independent business owners. During one of the most vulnerable periods in her life and career, one of her trusted co-workers and close friends took advantage of her and raped her. That incident traumatized her and triggered a period of psychological turmoil and difficulties in her intimate relationships, social life, and financial status. For the past two and a half years, Quan struggled to seek help from psychotherapy, yoga, and artistic pursuit.

As our interviews proceeded, she disclosed a series of traumatic events from her childhood. When she was twelve years old, her step-grandfather violently murdered her grandmother and then committed suicide. Up to this day, nobody in the family could understand what happened. She said that the details of that moment were branded in her memory. Though she did not witness the massacre, she remembered that her step grandfather's brain splashed on her shoes when she rushed to see what was going on. This traumatic event caused a series of unfortunate changes in her family, including her parents' estrangement and the following emotional neglect. She grew up without talking about or dealing with the violence in intimate relationships she witnessed, which influenced her perception of herself and her relationships later in life.

After she was *raped*⁸, she also experienced a re-emergence of childhood memories related to the violation of her body. She was molested by her uncle when she was young. However, her mother turned a

⁸The incident was so traumatic to Quan that she could only use the term "rape" in English, probably because using it in a second language provides some emotional distance. She could not use this term until our third person-centered interview in 2019, almost two years after the incident and 14 months after she regularly attended psychotherapy.

blind eye to the situation when she expressed her confusion. Sexual molestation did not just come from older males. Peers of both gender in her age also molested her body out of curiosity and childhood cruelty through bullying. When she went to college, she sought eagerly for what later realized to be a sense of home and security that she did not experience from her estranged parents. After a disappointing and psychologically torturing relationship ended with her ex-boyfriend, Quan decided to end her unplanned pregnancy. Her body and psyche underwent tremendous stress after the abortion, and she experienced the first wave of major depression. After she overdosed on a whole bottle of melatonin, she realized that it was a suicidal attempt and went to a psychiatric hospital for help. She reported that she could not endure the side effect of anti-depressants and eventually turned to psychotherapy. Her narration of sexual conflict, navigating across abusive heterosexual relationships, and lack of emotional, legal, and cultural support at individual, familial and social level was representative for women of her age and social class.

Quan's childhood experience related to sexual violation was unfortunately common across several generations of Chinese females. Girls and women being victimized by direct sexual abuse result mainly from the following reasons. First, sex education is extremely lacking and virtually non-existent in most places in China, with the exceptions of elite schools in first-line cities (such as Beijing and Shanghai). Anything related to sex or even reproductive education was heavily censored in domestic settings and at schools. Girls and women were left on their own to figure out how to protect themselves from not only strangers but also people who are close in their kinship relationships. Second, the legal system protects men rather than women, favoring the socially privileged and further marginalizing the disadvantaged gender (Fincher 2018). Sexually molested or violated victims are usually forced into ashamed silence because family members would not like these incidents to be known in public (Fincher 2018). The legal system not only fails to protect females in many ways, but is among the most significant obstacles of gender equality, given the fact that people in dominating and powerful positions inside the legal system are mostly male (Fincher, 2013). One of my participants disclosed that her mother suffered from domestic violence from her father. However, when she reported to the police, she was told that

because she only had bruises, one black eye, and one broken bone, this bodily damage level did not reach “minor injury” from a judicial perspective. The process of reporting to the police can be another trial of psychological torture and humiliation for victims. On top of being humiliated and patronized by the policemen, this became the core of trauma for the mother and influenced the psychological condition and social relation of the daughter. This example illustrates the reality of women’s everyday lives in current Chinese society and the looming sense of insecurity, rage, and “a sense of loathing and despair that made all the joyful things seemed trivial in our lives,” as my participant described.

Apart from the difficulties in managing her marriage, interpersonal relationships, and challenges in her career, Quan described that the thing that cost her a tremendous amount of her energy daily was the struggle to regain peace with herself. Her social class and educational background provided her with certain privileges compared to other women who survived sexual and relationship abuse. The most important achievement she acquired from therapy was that the dialogue she had with her therapist allowed her to see the manifestation of various defensive mechanisms that drive her into repeated behavioral patterns when she engages with men.

From our conversation, my therapist made me realize how I ended up in the situation I was in now. She (the therapist) would not be able to change anything, honestly. She could not take away the pain. She could not change the fact that your natal family was a mess. She could not release you from your financial burden, she could not help that there was little love in your relationship. But she was able to let me see how I got stuck and was walking in circles in this current situation. How I refused to accept myself, how I continued to blame myself and prolonged the pain.

I realized that with E (the trusted co-worker who raped her) as well as other men whom I projected much emotion or even had a crush on, they appeared to me as someone who has a sense of authority. I was unconsciously attracted to male authority figures. I seek protection and people who can be responsible, mostly when I was lonely and stressed. The authority figure, if they happen to be sensible, even artistic, I will think wow it’s better than all the figures before.

5.3.2 Performing Gender, Becoming Flesh

Many of my female participants’ lived experience narration revealed a subconsciously repeated behavioral pattern. They crave companionship and emotional support but would find themselves trapped in a dysfunctional relationship with an authoritative male whose support, emotional or otherwise, came in

a patronizing way. As they grew up, they rarely found themselves in a social context where they would not be criticized, reprimanded, or judged. The easiest, most straightforward way for them to become visible, recognizable, or attractive was through embracing their feminine traits in socially appropriate ways. As a female, competency in schoolwork, career, and even popularity in social circles were often ignored or frowned upon. However, if they follow the path of gendered expression of sexual attractiveness, they almost instantly get attention and recognition. In one conversation I had with Quan, she expressed that it was a fast way to gain a sense of empowerment, even though girls are just performing it.

I was *playing a gender*, using it as a way of gaining *power*. I learned it like a game early on. Like you want to play hard to get. I would like to be the one who is in control. But I also have this craving for intimacy. To be vulnerable but protected, to be treasured and not ignored. Many girls I think... would feel that they are sexually attractive, recognized by men means they gain a sense of recognition. I would chase an aspect of recognition such as this. It is easy to gain in our culture, and it's very direct, an instant reward that you would not have in any other aspect in your life. It's as simple as you dress up, put on some make-up, and it becomes visible, all men will look at you. ... Then I realize that I was trying very hard to be recognized, to be seen, to get some comfort or praise. I feel like a wounded child inside, still waiting for some recognition from an authority figure.

Both men and women perform their social role and gendered role (Goffman, 1955). But this phenomenon is specially reinforced in a patriarchal society. The cultural norm would eventually use the sexual attractiveness one displays to hurt, shame, or objectify the body and psyche of a woman (Butler 2009). Encouraged to be sexually attractive but not able to own your sexuality or attractiveness is the dilemma that young women face when managing their social relations, wanting to get a promotion in career, or simply gain psychological or emotional satisfaction (Bray & Cloebrook, 1998). Females are not seen unless they present their bodies and sexuality. When they present them, they are not seen as humans but bodies. To be ignored or possessed, these are the options provided by the patriarchal culture.

As these young women eventually mature and enter the society, forming their social circle outside the kinship system, they found themselves, quoting one participant's word, "emotionally raw." "I am exposed, like a raw nerve, like flesh without skin, naked and nameless," indicating an especially

vulnerable psychological condition women often find themselves in. These young women's parenting styles and gendered model received as they grew up do not equip them for the fast-changing, post-socialist society (Rofel 1999). Their desire for sexual attractiveness as mature women and their desire to be protected and comforted as children became a tension, which manifests as complex, emotional projection, separation anxiety, and other forms of defensive mechanism (Duportail in Lohmar & Brudzinska 2011). The same form of tension motivated Quan to seek what she identified as lacking in the process of acquiring a woman's identity. First there is a lack of recognition that is not based on her gender but rather on her personhood. Second, there is a lack of meaningful bounding that would bring more than scripted heterosexual relationships.

5.3.3 The desirable trinity: mother-wife-daughter and the fetishized female flesh

In Western traditions, the virgin/whore or Madonna/Prostitute perspective in a patriarchal system means men view women as entirely holy and self-sacrificing like the Virgin Mary, or sexually attractive but morally corrupt as a whore. Men often find both features in the same woman to whom they project a craving for intimacy and a shame of sexual complex. This dichotomous perception reinforces sexist attitude and behavior, lower the satisfaction for both parts of a relationship (Bareket et al., 2018). Irigaray argued that women were treated as commodities in a capitalistic and patriarchal society. Under such structure, mothers possess pure use value, virgins possess pure exchange value, and prostitutes possess both. Men seek and accumulate women's use and exchange value as of goods in the market (Irigaray, 1985). I argue that in an East Asian cultural setting, women's bodies are fetishized, commodified, and fantasized based on the patriarchal system that is solely built on the relationship between men in a Confucian hierarchy. The biased perception on women is more likely to be a mother-wife-daughter trinity, where a woman is expected to qualify all the traits by these social roles at once: be an emotional caretaker and nurturing mother, a sexually capable and fertile wife, but spiritually innocent, powerless, and seeking protection and recognition from a father figure. In East Asian culture, the ultimate power lies in the father instead of the husband. Therefore, the sexual desire and complexity also drive people to seek

attraction on women who present the daughter's ultimate vulnerability. This sexually repressed complex and related sexual violence are so prominent in East Asian society that many people even perceive "feminism" as an offensive, rude, and deeply corrupted cluster of beliefs and behaviors.

Even as I participate in people's daily lives, I observed many men subconsciously expect their female partners to fulfill all three roles according to changing contexts or even their changing moods. They put women in difficult positions and are easily frustrated when women do not comply. When a woman fits none of these roles, refuses to conform to any of those emotional projections, or simply stands above the patronizing social interactions, many men simply cease to know how to behave. Men from the older generation believed that they should treat highly educated people with respect yet maintain a sense of authority in front of young women. This was especially true outside of the academic world. When some men approached and talked to me, they clearly struggle with the appropriate tone to keep the conversation going, even expressed their confusion by saying, "I have never talked to a Doctor Girl before". I even got teased while conducting research when a man approached me and commented: "Little Teacher Wu was indeed one of those 'third gender' person. There are men, women, and you are one of those third gender people: a female Ph.D." I was sure he meant that to be a compliment, making me realize how the expected hierarchy based on gender could be easily disturbed.

For Quan and some of my other women participants, the realization came in a much more brutal way. Psychoanalysts would define the repeated behavioral patterns as transference or emotional projection. A psychoanalytic perspective sees seeking father-figure and authority resembles the recognition, protection, and sense of security lacking in her childhood. I see such processes and behavioral patterns not merely as repeated behaviors to fulfill a previous unsatisfied stage but a lifetime of gendered socialization that leads to psychological suffering every step along the way under a patriarchal system. There was little evidence suggesting these women repeated their childhood unfulfilled desires in their current situation. On the contrary, in all other aspects of their lives, including forming friendships and bonding with other people, they are highly functioning, sensitive, nurturing, and empathetic. Only

when they engage in a sexist heterosexual relationship with men can these dysfunctional behavioral patterns emerge. Seeing how women's desiring flesh was sexually objectified once the relationship began to fall into a patriarchal heterosexual performance, a different persona emerges when the man seeks sexual pleasure and emotional projection from a woman (Fawkes, 2015). The patriarchal cultural system grants men full access to shape the mother-wife-daughter out of the women in their lives. They could easily enter a relationship, take what they see fit to the situation, and exit a relationship once their needs are satisfied, regardless of the desire was sexual, emotional, or professional by nature. In many social interactions, men expect to be accommodated and satisfied.

This tendency was proven by Quan's reluctant mentioning of her entangled relationship with her co-worker after the rape incident. I see the etching of a psychosexual trauma moment that came with a long-lasting impact. She stated that the most difficult part was the good memories and how much she depended on their bonding's realistic feelings. The real friendship had made the unconsented intercourse even more hurtful and shameful. She described the awakening of unbearable sensation shortly after she was raped, which I saw as the awakening of the rebellious flesh:

I was numb throughout the intercourse when he was upon me. And when he finished, I was in a state of shock, as if something was leaving my body. Then he turned to me and said...as if it was a command, 'you should go take a shower'. That moment stuck in my head. I remembered I asked myself again and again, what the hell just happened? *What the fuck* was all these?

For many women, the moment when she realized "what the fuck was all these" was a moment of painful awakening. Quan described that that was a moment when time crystalized and numbing sensation retreated like a tide. Both emotional and physical pain manifested into her consciousness when her flesh became the foundation for a readjustment of body-world relationship. Although the man objectified, sexualized, and violated her body, she was sharply pulled back into a moment when her flesh denied her gendered position and rebelled through pain and rage. The awakening of the rebellious flesh cannot be easily appeased, even after years of negotiation and socialization in an unsupportive and unfriendly environment. Though Quan would go in and out of different emotional and embodied status in dealing

with the aftermath of sexual trauma, her renewed relationship with her own body, once initiated, could not stop.

The man “apologized,” in Quan’s words, after several times of confrontation. She indicated that she did not want to go through the judicial system because she was exhausted, and she felt sorry for the man’s young daughter, knowing that reporting the man would for sure ruin the young girl’s childhood. For Quan, total healing from a series of traumatic sexual experiences would be a life-long battle. The core of her discontent, her divided sense of desire and repulsion, and her struggle not only in romantic but also companionship and intimate relations with other men lies in the rigid, limiting, and sexually objectifying patriarchal norm. The unrealistic and inhumane standard of asking a woman to fulfill different social roles and perform with full body and heart at the request and social situation defined by other men is a destructive but ever-lasting theme in women’s everyday lives. Instead of seeing Quan’s malfunctioning social relations as a traumatic impact from childhood neglect and insecure attachment, I instead define it as life-long maltreatment from a patriarchal system. Chinese patriarchal society is constantly scrutinizing girls and women to be culturally comprisable, politically insignificant, and economically marginalized. Most significantly, it makes a woman invisible as long as she possessed the gendered body. It did not only start once she seeks to become a lover or a wife. It started before she was even born. It is a transgenerational historical burden on generations of Chinese women and is still going on in a sexist society.

I am not saying that Chinese men behave this way out of the meanness of their hearts. Many men in East Asian patriarchal culture did not gain proper social learning for them to express and process their emotions properly. Lonely, numb, and lost, male participants described as much emotional hardship in their romantic relationships and were far less capable of articulate their feelings, despite their obvious suffering. The toxic masculinity that prohibited men from directly expressing and communicating their feelings while preventing them from seeing their gender privilege does not seem to grant them happiness in intimate relationships.

5.4 Conclusion

This chapter explored the gendered experience and its impact on women's embodiment and mental health status. I presented the idea of "flesh" on top of body and embodiment, suggesting a future-oriented, libido-driven concept based on Merleau-Ponty's phenomenological approach in people's body-world interaction and lived experience. I argued that the discomfort and "rebellious" emergence of women's flesh, together with their marginalized, silenced, and deprived desire and aspirations, reveals the brutality and inhumane social patterns etched on women's bodies in a patriarchal society. Many researchers focus on women's rights movements and changes across different historical eras (Gilmartin et al., 1994; Hershatter, 2014; Yao & Hershatter, 2014). The sociological and anthropological foundations these researchers laid out were that gendered experience for women in China can never be separated from the State's policies and the long-lasting tradition of a patriarchal kinship system. On top of this structural foundation my intention for this chapter is to point out the individual, cut-to-skin experiences of women that were often filtered through the public domain or dissolved in psychological or mental health discourses as these lived experiences were viewed as symptoms. These cases show how miserable women became when they get stuck in a patriarchal system, feeling as if they were being gas-lighted when their "malfunction" behaviors were dismissed as over-reacting or poorly regulated coping strategies.

It is eerie to see how these "malfunction" bodily and social experiences reflect their engagement of the patriarchal cultural norm. Women constantly must deal with men dismissing their opinion in professional environments, private settings, and kinship networks. No woman, not even one, during my two years of ethnographic fieldwork, amongst 28 of my 40 participants, from teenagers to grandmothers, expressed 100% satisfaction with their bodies, temperament, personality, or career. When these women were not scrutinized by society, they internalized such criticism and judged themselves. Many of them were so insecure that they always must seek reassurance from other people yet still dismiss such assurance due to their fear of rejection or fear of feeling content. The long-lasting social norm that glorifies pain, sacrifice, and compliance of women imprisons them in the very relationships they crave for

emotional support and comfort. During my fieldwork and my communication with women from a variety of social classes and age groups, it is not uncommon to see that many women “practice” gaining power through manipulation and creating sexual tension in intimate relations, to the point that they spend most of their waking hours contemplating on the behavior and emotional reaction of others. Though they spent much time, energy, even psychological resources in these social activities, their overall psychological condition rarely got better. The patriarchal, misogynistic system that provided these women with those “tools,” though seemingly empowering them in many social games, deprive them of their holistic personhood, driving them away from nurturing social networks, and eventually destroy their dignity because it ultimately only wanted a woman to be a gendered body, not a full person.

This system does not leave men in a satisfying relationship either. Some of my male participants expressed their confusion, disorientation, and even severe psychosomatic symptoms such as muscle pain, numbness, and even dissatisfaction with sexual life as their intimate relationship collapses. The rigidly gendered norm and bodily disciplines inculcated by from the Chinese patriarchy system goes against many changing social norms. Most devastatingly, many patriarchal gender norms grant little rights to women, provide empty promises to men, and bring emotional satisfaction to no one. Struggling with eating disorders and surviving traumatic sexual abuse are extreme but unfortunately not uncommon experiences women had to deal with. Given that these women I interviewed already came from a middle class, highly educated background and had relatively enriched financial and psychological resources, one can only contemplate how devastating the situations women from lower social class are in.

At the beginning of our interviews, Naomi and Quan both approached me to discuss their manifesting pathological eating patterns, insomnia, depressive episodes, and relational difficulties. Behind those concerns are their struggles of becoming women in a society that place great challenges to people simply because of their gendered expectation. Every step along the way, they had to deal with interpersonal stresses that burden their mental health and psychological wellbeing. Many women who participated in my study showed great interest in optimizing their mental health and psychological

wellbeing in general. For the next chapter, I am going to talk about how people participate in the booming industry of mental health in China.

Chapter 6 Solving my Problems or Fixing my Life?

Engaging with the Psycho-Boom in Contemporary China

6.1 Introduction

In reaction to fast-past economic growth, radical social change, and the accompanying increasing level of mental health issues, both the State's health policy and popular culture began to emphasize the importance of psychological wellbeing in today's Chinese society. Mental health professionals and government officials engaged with the enculturation of psychiatric and psychotherapeutic practices and discourses to optimize people's health and wellbeing and promote social harmony (Yang, 2018; Zhang, 2018). This cultural phenomenon, referred to by some scholars as the "Psych Boom," provides platforms for psychotherapeutic interventions, discourses, and most importantly, new technologies and languages for people to recognize, address, and engage with their struggles (Zhang, 2018). New standards, notions, and aspirations of what it meant to be healthy or "happy" became the central topic of such engagements (Hsu & Madsen, 2019).

How do we understand the sophisticated drives, motivations, and interests behind people's increasing attention and efforts to interact with psychological discourses and practices? This chapter addresses various modes of interacting with the mental health industry from different participants by focusing on their motivation, experiences, and aspirations. By articulating how people engage with various forms of psychiatric practices and discourses, I argue that in current Chinese society, the pursuit of psychological wellbeing is at its core a struggle to fight for human rights. Psychological discourses and practices provide a platform where understanding human suffering across social groups, generational cohorts, and different social situations cannot be pushed aside. Depending on the purpose, motivation, and the social actors' intention, the "Psyche" industry can be a place for healing or used as disciplinary power. Including mental health and wellbeing in the national program for public health is a double-edged sword. People's mental health medical records can contribute to the macro-scale understanding of public health

and wellbeing or be used as surveillance tools that further marginalize patients. Using the body-world interactive model as a philosophical orientation, we shall see that these engagement's aspirations and discontent express people's utilization of their agency and attempt to provide meaning to their struggles through larger historical and social transitions.

At an individual level, one positive contribution of the "Psych Boom" is the public advocating the importance of mental health and widening access to a platform where people can efficiently communicate and express their feelings and constructively learn about self-care. Engaging with mental health discourses is an educational process. From the interlocuter to his/her social network, psychological discourse and practices provide an enriched vocabulary and scripts that were lacking other cultural codes. With globalization and national campaigns for modernization, East Asian societies join this blooming trend of the "Psych Boom" as people seek more efficient communicative systems, behavioral codes, and philosophical discourses that might resolve their existential tension (Chua, 2014; Tran, 2015). Therefore, in addition to medical intervention, people engage with mental health discourses and practices for self-care, communication, and construction of the private psyche in transitioning social contexts (Jacka, Kipnis, & Sargeson, 2013).

On a larger social level, I suggest that the emergence of many mental illnesses across age, gender, and social classes are due to social structural, and cultural transitions, leaving gaps between people's aspiration and reality. On the one hand, it is of utmost importance to redefine human rights that include mental health and de-stigmatize mental illness. On the other hand, we cannot ignore that patients are moving targets, engaging interactively with the diagnostic label and identity construction (Hacking, 2007). It is urgent to enrich cultural tolerance and reinforce human rights to have more access to intervention and treatment of their mental health issues. However, we shall not medicalize social problems and privatizing the struggle for generalized wellbeing by using individuals as the only locus of perception and intervention.

Embedding the “Psych Boom” phenomenon in a historical context, the current manifestation of mental illnesses results from transgenerational trauma and struggles to adapt to the ever-changing social structure for the past few decades. The manifestation of mental illness symptoms reveals people’s embodiment of suffering from social injustice, cultural constraints, and violence at a personal, relational, and societal level. Such struggles and trauma pass from one generation to the next not only in terms of biological predisposition but also through social interactions (Assmann et al., 2014; George & Engel, 1980; Kleinman, 2007). Underneath mental illness symptoms or psychological struggles, we see deeply rooted political discontent, intolerant and biased cultural norms, and suffering from living through precarious times. Many practitioners and patients’ dilemma when they engage with the psychological discourses and practices lies in the gap between advancing needs for redefining humanity and the bureaucratic, oppressive, and oftentimes hierarchical power structure (Zhang, 2018). As I pointed out in the introduction, the core of contemporary Chinese people’s struggles is the struggle against oppressive discursive formations. People are fighting at multiple levels for a chance to exercise their agency and for the power to define (or re-define) what it means to be human for current and future society. Psychological wellbeing for citizens in their everyday lives shall not be anchored by the eliminating or further marginalization of “malfunctioning” individuals from a highly competitive society. Nor should it be a process to fix their “malfunctions” and create high quality participants for the construction of a modern China. It is more crucial to understand why people suffer and manifest symptoms as they interact with the society. From a psychological anthropological perspective, promoting mental health and wellbeing goes beyond resolving individuals’ medical problems. The real effort lies in creating a tolerate and humanitarian society, where people can exercise their agency in resolving existential tension and dealing with political precarity.

6.1.1 Structures of Agency: A Recap in understanding body-world interactions

For this chapter, I select data from my fieldwork to emphasize three aspects of people’s engagement with mental health discourse and practices. First, I look at how people understand and act

upon their psychological wellbeing. Second, I document mental illness experiences and people's somatic and emotional status before, during, and after psychiatric interventions. Third, I analyze people's engagement, application, and articulation of their psychological knowledge in their everyday lives to manage their social relations, emotional status, and construction of personhood (Parish 2008). All three aspects are part of the multi-faceted, sophisticated phenomenon of engaging with mental health discourses and practices.

I analyze the selected qualitative data by engaging with various modes of body-world interactions from a phenomenological perspective. To restate the theoretical foundation, I propose to use three elementary structures of agency in body-world interactions described by Csordas (2011) to understand how people deal with mental health-related issues in the social, relational, cultural, and spatial contexts they move through daily. I have explained how the three structures of agency can be used as a philosophical foundation for data analysis in the introduction. I will briefly demonstrate such application with examples here.

The first approach is Merleau-Ponty's point of view that the body is intentionally orienting towards the surrounding world around them (Merleau-Ponty, 2012). He argues that we do not experience our bodies as passive objects under normal circumstances but instead intentionally reaching out to our surroundings and building experiences by associating with the world. Thus, our agency is our existence in a "being-toward-the-world" mode (Csordas 2011: 139). I use this being-in-the-world mode to understand the nuances of people's physical and psychological experiences as they go through psychologically challenging situations, revealing how people intentionally seek knowledge, practices, and interventions that are not only part of the recovery processes.

One short illustration of this being-toward-the-world mode of agency in body-world interaction in a therapeutic setting is the popular Sand-play therapy in China. Sand-play therapy was first introduced as a psychological intervention for patients with limited language capacity or Autism. However, it spread fast for children, young adults, college students, and the general public as an alternative way of

expression beyond words (Cao et al., 2019; Wen et al., 2010). The sandbox presents a miniature version of the world based on the patients' subjective experiences. Each corner reflects conscious or subconscious aspects of the patient's experience and current living situation. As the patient selects and places toys and models in the sandbox, the process and result reflect the intentional articulation of their endogenous experience. Both as a way of recreating experiences and representing intrapsychic conflicts, sand-play serves as a visual, spatial, and sometimes philosophical presentation of the world that the patient (or presenter) establishes through intention. As I pointed out in previous chapters, many patients find it hard to initiate emotional processing because they continuously react to external stimuli, highly alert, and are stressed because they perceive their world as highly demanding or judge. A sandbox therapy eliminates the demand for a verbal response. Traditional therapeutic intervention focuses on establishing a potentially hierarchical interpersonal relation. Sandbox therapy creates a safe niche for replaying lived experience to process their emotions and recognize the meaning behind those emotions. During my ethnographic research, people with anxiety issues and communicative problems reported improved mental states through sandbox therapy. They succeeded in attempts for self-exploration as they demonstrate their passing moods, vignettes of lived experience, dreams, and poetic demonstration of their personality or social network through placing small toys on the sandboard (see figure 4 and 5).

The second mode of agency is evident in Bourdieu's reciprocity of body and world (Csordas 2011). People exercise their agency through cultural practices and the construction of a habitus. People both intentionally orient towards the world through real activities and are occupied as the world "imposes its presences, with its urgencies, its things to be done and said ... which directly govern words and deeds without ever unfolding as a spectacle" (Bourdieu, 2017). This structure of agency is especially useful in understanding people's situation regarding the trans-generational struggle of mental health issues. Traumatic experiences result from social injustice, and dysfunctional emotional communications are passed down across generations, exacerbated as people go through radical social transitions. With the eventually shrinking public life and legal participation in promoting policy changes, people's habitus is

also confined to small social units. As the previous chapters indicate, natal families become the actual location for lashing out dysfunctional emotions and social relations. With the rising of neoliberal cultural trends, social suffering and structural violence are channeled to individual experience. Without adequate social support, witness, or recognition of meanings, some patients felt overwhelmed by loneliness and distorted sensations. As a patient diagnosed with bipolar disorder stated, “I thought the world was crazy. But it turned out that I was the only one who was crazy. So, what was that craziness I perceived with the world? Maybe I was imprisoned in my own body, where the world inside of me was crazy.”

Because habitus describes the totality of lived experience, I was struck by how habitus’ idea made so much sense when patients visualize their experience of struggling with depression. I was attending a visual exhibition in Shanghai dedicated to raising awareness of depression and bipolar disorders. They presented one unique art installation portraying to dedicate a whole room on the second floor as “the body of a patient,” a perfect demonstration of embodiment and interaction with habitus. Habitus, in this context, could be understood as the embodiment of a personal history of interacting with the time and space he/she lived through. In the middle of this room, the artist put a sickbed with a whole year of calendar ripped apart and scattered around the bed. The artist, Xiao Ka, indicated that this showed how a patient with depression experience time. Instead of seeing it as a linear, flowing, or sequential passing of moments, “time and moments felt snowing down on you, zooming in and out of your full awareness.” (see figure 6).

The third mode of agency is evident in Foucault’s theory that sees the world as acting upon the body. This theory is relevant when it comes to understanding of the Chinese State’s medical care system. With the promotion of technology and management of public health, especially after successfully managing the pandemic, health management’s surveillance function in China is now seems to be using George Orwell’s 1984 like a manual. Through utilizing mental institutions, the government attempts to discipline its citizens through two movements. First, from hospital to community, medicalization was used as a mode of governmentality in people’s everyday lives to define and control “deviant behaviors”

(Szasz, 2007). Second, instead of focusing on the wellbeing of the patients and their caretakers, the local government focuses on “social harmony” and maintaining stability to restrain the behaviors and space for people with mental illness issues (Yang, 2018). As I will demonstrate through my ethnographic case studies, the therapeutic discourse becomes a discursive practice --- a negotiation and exercise of power and creation of history, truth, and knowledge (Foucault, 2003). This type of discursive practice takes place within the clinical setting and impacts how the individual understands his/her power and resistance. According to Foucault, this is another way of reinforcing the power hierarchy in a person’s daily life and as a contemporary citizen.

6.2 Professionalism and its discontent: A Mental Health Professionals’ Perspective

I met with psychiatrists, psychotherapists, and counselors in clinical settings and in their rare leisure times. For the ethnographic interview, I focus on the following aspects of their career and life: 1) their general attitude towards their career; 2) their motivation and experience in becoming a mental health professional; 3) the training they went through and professional platforms they use; 4) What are their aspirations and things they would like to change. I conducted participant observation during their working hours. Then I conduct one-on-one interviews with some of them in their leisure time. I was also a member of several psychological and psychiatrists’ WeChat groups where they exchange resources, information on workshops, and also discuss their experiences and daily lives in a support group form.

Based on my ethnographic study, psychiatrists and psychotherapists generally have a more positive attitude toward their professions compared with other medical professionals in China. Psychiatrists, therapists, and counselors that I talked to are more likely to express that they are satisfied that mental health is their area of specialties. They saw meaning in their knowledge and practices both in their personal lives and professional relationships. The dialectic nature of psychiatric diagnosis and recognition of patients’ total body experiences provide a positive foundation for the doctor-patient relationship, providing the patients with a secure space and constructive conversations (Giovanni

Stanghellini, 2016). The most challenging and emotionally exhausting situations most Chinese medical professions face are the difficult and distorted doctor-patient ratio and the heavy workload due to a lack of efficient medical resource allocation. Doctor-patient relationships are usually complicated for medical professionals to handle, resulting from a series of inappropriate incentives as consequences of the healthcare system's reformation since the early 2000s (He & Qian, 2016). There is long wait-list and time for a patient to see a qualified doctor. Patients have increasing out of pocket expenses for medical care compared with the pre-1980s socialist system and pre-health care system reformation era when the work unit or social welfare could cover more medical expenses. In general hospitals, each patient spent as little as 5 to 15 minutes with the physician he was assigned to and usually had to run up and down to get all the requested tests done. In comparison, major psychiatric centers offer one-hour sit-down talk and diagnosis for patients, especially if they are there for the first time. Dr. Yang, a 26-year-old young psychiatrist that I interviewed, indicated that choosing psychiatry as a career allowed him to identify himself more as a "helper" than a "healer," a less authoritarian and more empathetic role that boosts his sense of purposefulness. "I was glad I could see myself as a helper that assist my patients to go on the path of healing. And I am very satisfied with the relationship I was able to establish with my patients. I am very content with my decision to become a psychiatrist."

What makes a Chinese doctor, medical student, and other health professional turn to work as a psychiatrist, psychotherapist, or counselor? First, the huge gap between the increasing need for psychological treatment and intervention and the qualified professional is astonishing in China. Though the number of registered psychiatrists, psychiatric nurses, and hospitals equipped with psychiatric ward and counseling services increased compared to the first decade of the 21st century, by 2015, the ratio of psychiatric professionals per 100,000 remains only 2.02/100,000 (J. Liu et al., 2011). This situation worsens after the pandemic when more than 50% of the medical staff suffer from depression and PTSD (Dong et al., 2020; W. Li et al., 2020; Z. Liu et al., 2020). The general public also has to deal with traumatic experiences and related emotional disorders in the post-pandemic era (Ahmed et al., 2020). The

scarcest area is child psychiatrists, illustrating the extreme lack of qualified psychiatrists at this point. By 2019, there were only 100,000 pediatricians and fewer than 500 full-time child psychiatrists in the country, with most of them working in major cities such as Beijing, Shanghai, and Guangzhou. Fully aware of the scarcity of qualified psychiatrists, many current operating psychiatrists were transferred from other departments. Many of them worked as neurologists and had to deal with psychosomatically related symptoms or psychological problems due to chronic illness all the time before they became full-time psychiatrists. Knowing that their contribution to the area makes a difference is one important motivation booster for many doctors.

Second, despite the lingering stigmatization of mental illness, the acceptance of mental illness and awareness of psychological wellbeing is increasing, especially among younger urban middle classes. Recent surveys show that in every 10 Chinese people with major depressive symptoms, 0.95 seek clinical diagnosis or interventions, using it often as a last resort. The promotion for professional intervention has been increasing from 2015 to 2019. “It is amazing to see not only the transformation of terminologies, doctor-patient relationships, and especially the family and society’s attitude towards people with mental health problems. In the past, most people do not even recognize mental illnesses as real human conditions. Today we see people discuss about emotional wellbeing and mental health in public platforms,” said Dr. Huang, a female doctor in her late 50s who experienced the development of China’s psychiatry firsthand.

Third, most psychiatrists and psychologists voluntarily choose to specialize in mental health during their training as medical students. When I asked the 26-year-old Dr. Yang why he chose to become a psychiatrist, he indicated that this was the most significant life choices he made due to personal experience.

My great grandfather and both my grandparents were doctors. So, it was a family tradition for me to go to medical school. When I first got into one of the most elite medical schools in Shanghai, I did not really enjoy the training and was very confused about my purpose in life. I considered myself to be an emotionally sensitive person, thus I experienced difficulties not only in my studies but in my interpersonal relationships.

However, my parents and other family members could offer me little to no emotional support because they did not understand why I was so ‘fragile’. I was exposed to psychology and related philosophy as I was aiming for self-help and emotional coping strategies when I was about to choose my concentration in my fifth year of training. I really liked my choice in becoming a psychiatrist.

Mental health professionals, interacting with psychological knowledge, discourses, and practices, were often triggered by a personal need to understand human experience, emotional processing, and deal with existential tensions for many medical students who voluntarily turn into psychiatry and psychology. This tendency was partly due to the Chinese high school and university system of selecting medical students. Most institutions provide an 8-year intensive training program, picking students with a science background from high school. The 8-year program offers almost all non-existing humanities, writing, or social science training. There are also very few systematic psychology or psychiatry classes offered by the medical school. Students have no exposure to systematic theoretical training during their medical school years. They also have very little higher education towards philosophy, or any training related to social interaction. A professional and licensed social worker responsible for training new medical staff and residential doctors expressed her frustration when she was trying to promote patient-centered, humanitarian communications in training sessions. “I want to include some social science backgrounds and make medical students become more aware of concepts such as the medical gaze and letting them understand the importance of taking perspectives and understand the patients’ vulnerable sensation when involving in the medical system. But a lot of them think these humanitarian interventions and knowledge are a waste of time. I do not know how to make medical students see it is important to understand the social injustice and hierarchical difference in the modern medical system. The doctor-patient relationship in China is bad enough. Do they not worry?”

Medical professionals and doctors are anxious, not only as physicians but also as human beings. The need to understand existential tensions and deal with life and death as students go through internship and training programs sometimes became emotionally exhausting and psychologically challenging. The extreme and unique experience of being a doctor also happens in their emerging adulthood and

transitional years. “How to survive the system as a human being is a great challenge,” indicated one young medical student, “because it is difficult to deal with so many things at the same time. The stretched health system, desperate patients, rigid hierarchy, overwhelming workload, and the hostility in different relationships.”

During our interviews, Yang expressed how helpful understanding psychology has been for him as a doctor or a “helper” and deepen his personhood. It is astonishing to reflect on how the medical school and the Chinese educational system offer a little basic understanding of humanity, human conditions, and even basic social interactions as we communicate and express our feelings. “Our society is yet to offer a culture system that encourages people to understanding each other and oneself at a personal level, instead of just training for proper behaviors according to static social roles and always looking for better academic performances.” These tendencies, she pointed out, contribute to the “immaturity of modern Chinese culture” (*wen hua you zhi xing* 文化幼稚性) when it comes to the understanding of humanity, emotions, and establishing social selves across situations and contexts. Whether Chinese culture has never provided a functioning cultural system that allows intersubjectivity and effective communication is open to debate. However, she did present a valid observation based on her experience as a therapist that the existing mainstream culture under the influences of neo-Confucianism and neoliberalism does not fully answer the need to exercise people’s agency across challenging life situations.

Looking for enrichment in psychological and cultural resources is a widely shared both as aspiration and frustration amongst mental health professionals. Many psychiatrists, especially those from the younger generation and had international training, strive for a more humanistic approach and are not satisfied with the State’s policy of controlling and criminalizing severely mentally disturbed patients. Such discontent was expressed only in private, with great caution, yet with genuine concern. One psychiatrist explicitly expressed discontent for the required registration of people diagnosed with schizophrenia and bipolar disorder in the local police system, which usually comes with related restrictions in these people’s daily lives. One social worker expressed that he detest working with the

local government when they try to ease the patients' way into ordinary community lives, criticizing that the government is only controlling disadvantaged citizens from a medical perspective. During major national or international events such as Shanghai Expo, people who were registered as mentally ill were discouraged from even stepping out of their communities. The severely disturbed community members from lower-income families were re-institutionalized and warded up. People in recovery from chronic conditions such as schizophrenia were discouraged from going out of their neighborhood. The social workers were even encouraged to do grocery shopping for them so that nobody on the street of Shanghai would appear "abnormal." "When the face (*mian zi* 面子) of the State is bigger than the life quality of the people, then psychiatry is just another tool for such disciplinary measurement and does nothing to help the patient." This Foucauldian comment on how psychiatry helps the State to operate on the body is illustrative in understanding how the medicalization of social issues was operating in China. When the State values "social harmony" over its citizens' wellbeing shows how psychiatrists, though part of the power hierarchy, detest the role they were forced to play.

The concern lies in the ineffective cooperation amongst many related social institutions, result in failing to let patients with severe conditions going back to their communities and societies. It is especially challenging to establish a "habitus" for people with mental health concerns if various institutions cannot cooperate. "After all, as psychiatrists we can only deal with the disease, and oftentimes just the most severe symptoms that impair their basic social functioning. This is a very crucial but limited part in terms of their overall psychological wellbeing. We need therapists, counselors, support groups, social workers, and many other people to help the patients' healing processes," said Dr. Yang when he showed me the group therapy activity room. The psychiatric health center offers 600 beds, but the waiting list is painfully long. "Public hospitals at district level are oftentimes not equipped to take in patients with violent behavior tendencies, but psychiatric ward in prisons is not the best place for recovery. If the patients are underage, they ended up being locked up at home."

In summary, psychiatrists, psychotherapists, and counselors I interviewed generally showed a positive attitude towards their career. They had a clear sense of purpose because they were aware of how vital their occupation is in answering the increasing need for professional intervention. Overall, they all demonstrated good relationships with their patients and are eager to establish a more humanitarian system for treatment and intervention. Sadly, they cannot always provide service to the patients as they want to due to the heavy patient flow, inefficient allocation of resources amongst various social institutions, and sometimes the cross-generational lack of empathy between older doctors and younger patients.

6.3 Illness Experience and the Dialogue of Healing: Patients' perspectives

There are three common features I identified through interview and participant observation with mental health patients. First, the manifestation of mental illness symptoms usually happened at stressful, transitional stages in life. In turn, these experiences become turning points for the patients, from which they must re-adjust their social relations and their understanding of their body and self. Being diagnosed with mental illness creates a “crack” in the patients’ daily routine. They take what a phenomenologist would call a double gaze into their past and future and reinterpret where they are and who they are, usually at the initial stage of recovery. Within a therapeutic environment, the patient will have the chance to reconstruct their social relations (Zhang, 2017) and reorganize their attitudes towards themselves and others. According to both patients and professionals, reorganizing social relations is the most critical part of the contemporary Chinese cultural context. Second, many patients described both the illness experience and healing as learning processes. Many of them became advocates in promoting mental health and address broader social issues that they experienced as part of their engagement with mental health struggles. Third, social-economic background and educational level are significant variables in mental illness and healing processes. Due to the structure of the current Chinese health care system, it takes a lot of resources, information, and support for people who suffer from mental health issues and symptoms to seek professional intervention. A psychotherapeutic session in Shanghai costs 250 Chinese

Yuan to as high as 1500/hour. It takes much time, resources, and most emotional effort and energy to be involved in the professional treatment or establish a stable therapeutic relationship.

6.3.1 Claire: My life happened to me, and I happened to psychotherapy

As a 21-year-old from the top university in Shanghai, Claire could fit perfectly into Susanne Bregnbak's description of China's fragile elite (Bregnbak, 2016). She is a "survivor" of China's rigorously competitive educational system under the One Child Policy, with doting parents who offered enormous financial support but insufficient emotional support and grew up under the regime when the State acts like parents' pressure for "high-quality" citizens. She was sent to boarding school when she was four years old and always had a hard time with peer relations. "Autism was not a thing back then, but my childhood experience and interactions showed typical autistic behaviors. My cousin also has severe Autism, I think it runs in the family. I probably have Asperger." In addition to this suspicion, she shared with her therapist, Claire also told me that she always found the process and expression of emotion a myth. At her younger age, she was easily irritable and impulsive with anger issues, sometimes hitting peers in a sudden burst of rage. During her adolescent years, she could not bond with other girls. "It was as if I always had different personalities sharing one body, and one of these personalities is a violent zombie."

Claire experienced one of the most intense emotional break-down by the end of her freshman year in a top-ranked university. Across several hospitals and psychiatric centers, mental health professionals could not agree if she has major depression, general anxiety disorder, or bipolar disorder. The disagreement between different psychologists and the patient also reflects the diagnostic and treatment process for an emotional disorder that is more fluid. Some patients who participated in my research call their diagnosis "very rough."

Although Claire reached an adult's legal age, the dynamics and swift transitions in her mood and modes of interactions still reflect adolescent fluidity (Jenkins & Csordas 2020). "I think what confuses the doctors was the way I behave and the way I feel are occasionally contradictory. I could hardly suppress

my rage, but my doctors do not see burst of violence.” The dissonance between how she felt and how other people saw her, in turn, became another stressor that left her confused and disoriented. In the worst episodes, part of the days blanked out from her memory, and she had no recollection of what happened. All of these did not significantly impact her academic performance, though such outstanding grades could no longer reinforce her confidence.

Like many mental health patients, Claire did not seek professional intervention until she could no longer “function” in her daily life. For days she could not bring herself up and go to classes. Other times she experienced insomnia and lost appetite and even the sense of taste, stuck in “a tightened, frustrated anger all day.” She identified several major stressors that were widely shared by the participants I talked to who were born between 1985 to 1997. This generational cohort grew up after the launch of the open-door policy. Most urban families were relatively well-off in terms of economy. However, the intergenerational tension within the families was very high. The parents grew up in the Socialist era and were stressed out in adapting to the Market economy and received little emotional support growing up. Their children were the first generation of the One-Child Policy and were under double pressure from the family and the State in becoming citizens of “quality” (*su zhi*) (Kuan, 2015). Those “Only Hope” children spent twelve years from six to eighteen preparing to be academically competitive. More often than not, teachers and parents pay little attention to their hobbies, emotional status, and how they spend their little time besides coursework. Though a vast number of this generational cohort became academically advanced, many of them face mental health issues due to their upbringing. They are painfully unprepared psychologically and socially for adulthood. In addition to the tunnel-visioned upbringing, the parents’ generation has little clue about their children’s world. Compared to the static social structure and almost homogenous community, their children now live in a world with conflicting rules and swiftly changing ideologies and expectations. The relationship people deal with daily gets more sophisticated as they move away from the kinship-bound hometown and migrate into the megacities. With more existential precarity clashing into their presence, a growing number of teenagers and young adults experience various

emotional disorders and mental health issues. “I think people need a map. Or at least a trajectory of life. However, I don’t have any. I cannot seem to remember what happened a few days ago. My days and nights are crashing into each other. Sometimes I am overwhelmed because all I can think of are my mood swings.”

Claire loved drawing and was a visual thinker. Therefore, her therapist’s method was to have her draw a “roadmap” of her childhood, daily lives, and emotional experiences. Reliance on non-verbal expression has been popular and useful for my observation of therapeutic interventions. As I explained in the previous part, verbalizing one’s issues can be challenging towards people who always had a hard time communicating or, as some of my participants indicate, “are still in the process of learning which words represent what in a therapeutic scenario.” Finding a different way for her to orient to the world and make sense of her being-in-the-world mode is a crucial task in therapeutic settings.

In Claire’s roadmap, she sketched out her life trajectory, illustrated with tags of the core feelings she remembered. All these images across different life stages allowed her to express her feelings across temporal and social situations. Though struggling with psychological disorders, her current situation allows her to pay attention to the phenomenological “double-gaze”: to look back into her past and orient towards the future, based on the current total body experience (Merleau-Ponty, 2013). Though this form of narration is very selective, it helps Claire visualize her experience with a series of life events. Because experience is determined by a sensory process in temporal context within interpersonal, social, and cultural settings (Csordas & Jenkins 2018), the visual trajectory helps Claire form a dialectic narration of her experience with minimum social pressure. Eventually, according to her therapist, this meaning making process and her art projects can prove her agency.

6.3.2 The Burden of Care and “Healthism” in Everyday Lives

Claire describes her mental health status as an ongoing battle, a description not unique amongst mental health patients. The definition of recovery and health is usually portrayed as a combination of comfortable or endurable bodily and mental status, with an increased sense of agency towards their bodies

and other aspects of their lives. Across mental health professionals, social workers, patients, families, and people who are enthusiastic about psychological knowledge, the idea of health is under much debate. Psychiatrists and psychotherapists have a clear sense of psychological wellbeing for their patients, partly because of their professional understanding of mental illnesses as clusters of symptoms. Their interaction with the patients takes place in a clinical setting. For the patients and people who struggle with mental health issues, 90% of their time they must deal with everyday life, symptoms, and, according to one of my participants, “the messiness of normal people and daily lives.” Alleviation of symptoms is for sure a desirable goal to achieve and core to “psychological wellbeing.” As I have demonstrated in Chapter Five (Eclipse), healing can only happen if people from their community or social unite believe that their effort is meaningful. However, many participants express the overwhelming obligation to “get better” from those who care for them, becoming another stressor in their already overwhelming daily lives. When psychological wellbeing equates to total emotional homeostasis or the harmonious social being for their families’ wellbeing, “health” becomes another form of responsibility.

You fall ill (*sheng bing*) because you are not happy. Because you didn’t become the one you thought you were to be. Then you get depressed and lose the capacity to feel happy again. Due to your conditions, which your family thinks it’s due to your mental weakness or their lack of good education or discipline, you also *lose the right to be happy*, because you didn’t make your family happy. Do you see it? Do you see the dead-end that I’m trapped in? I can’t make my family happy. And I’m not happy. Now I don’t know if I’m the cause, the result, or both. I just feel like I’m the curse. At the bottom of it, I didn’t make enough money so I can be economically independent. And I didn’t find a husband to be socially independent by starting my own family. I still live with my parents. I am the embodiment of their lost hope.” (Female, 36, an employee of a finance company).

As I have pointed out in Chapter Two, a Chinese family can be hierarchical when it comes to emotional labor. People cannot express their true feelings around others in fear of causing trouble or even getting blames. Instead of being happy for oneself, the right to be unhappy is scarce. People also have different definitions of wellbeing and health. What it meant to be happy is frequently equalized with being healthy in a mental health context. I argue that there is a tendency that such discourse falls under “healthism”. Healthism refers to the problematizing of wellbeing and centering it around the individual,

which turns them into the only locus of control and intervention (Crawford, 1980). When it comes to the relationship between the citizen and the State, there was very little agency the individual could utilize. For one of my participants who was a victim of sexual assault, her depressive symptom, PTSD, and constant struggle with relational stress became part of her core identity. “My healing process is taking place in my own body, then I look around the world and really started to see how Chinese women are seriously victimized by the misogynistic culture. How males in my life and dominating cultural trend dismiss people’s experience such as mine! It feels like that my personal space is being invaded over and over again.” As our conversation diverges from her treatment plan to her active participation in the Chinese *MeToo* movement, which was silenced by the State’s control over popular media, she burst out. She said, “Look Miranda, all of us are ill, what I look for is not recovery. These things I can work on, day in and day out, the process itself is healing for me. What I look for is freedom, and respect, and not to be pushed aside again. Is that something psychotherapy could bring to me? No way. Psychotherapy brings me emotional let out and self-care, but what I *crave* is not to be a non-depressed person. I don’t mind depression, what I want is the right to be a woman again.”

Her statement moved me deeply. Mental health practices and discourses provide people with a platform to exercise their agency, learn about emotional processing, and deal with difficult life situations. To “eliminate” people’s suffering is to dismiss a fundamental human process (Jenkins, 2015) and dismiss their meaning and value. During psychotherapeutic interventions, people enter a safe, oftentimes non-political space for them to process the sufferings they went through. However, in a clinical setting, that is as far as these discourses and practices can go. The underlying social origins of psychological sufferings could not be dealt with in a clinical setting: the unaddressed, cross-generational life experiences and differences in emotional expressions, the unclaimed trauma that results from social injustice and problems in our culture, and the insufficient allocation of resources which intensifies social injustice. These problems cannot be resolved by enriching psychological theories and discourses. Forcing people to deal with their “depression” and dismiss their social and political discontent by describing them as disorders

that may disturb social harmony is no less than another form of institutional violence. Using healthism as an approach to marginalize people who already fell under the victimhood of social injustice transfer mental health discourse into further bodily disciplinary tools. As they manifest as clusters of symptoms, mental health problems can be addressed and recognized in clinical settings. However, life problems and human suffering shall not be medicalized, marginalized, or dismissed.

6.4 Conclusion

The increasing engagement with mental health discourses and practices is driven by the need to adjust towards changing social contexts and a craving for humanistic recognition of a more sophisticated sense of self in current Chinese society. It is important to notice the discrepancy between the desire to enhance mental health and psychological wellbeing and the available resources provided by professional institutions and clinics. People turn to psychological discourses and practices, looking for a cultural niche and the chance to establish a habitus where they can exchange techniques and practices to understand their lived experience. With the sophisticated construction of the social self, newly learned behavior codes, and attempts in re-establishing social relations, it is inevitable that people eventually wanted to address their moral obligation and discontent towards political desires and the reformation of their society. Mental health discourses and practices can only take care of people's manifesting symptoms and legitimize the time and energy to such self-care. Treatment plans and medication can assist people with social functioning. However, on a societal level, relying entirely on psychotherapeutic intervention is like using band aids to fix bullet holes. My participants' identified social problems, such as the striving for a more humanitarian and patient-centered medical system, proper allocation of resources, re-adjusting self within intimate and broader social networks, and gender equality against misogynistic cultural norms. These cannot be resolved by psychotherapy. They might be felt, embodied, and suffered at a very personal level but are at their core social and political discontent that needs to be addressed in the public sphere. Issues such as these cannot be only dealt with by their therapists or social workers but instead shared by all State citizens.



Figure 4 sand-play demonstration of social relations. The lower righthand corner indicates early childhood experience, where this patient placed mother-baby seals without knowing this corner represents intimate relations or demonstration of experience with her mother.



Figure 5 demonstration of intention: the patient indicates her desire to involve in a romantic relationship but was recovering from her trauma of growing up in a single-parent family and sexual assault.



Figure 6 Experiencing time for a depressive patient. The artist Xiao Ka indicated that the entire room could be seen as the body of a patient.

Chapter 7 Conclusion: Horizon

7.1 Case Forty-One

I reached out my hand. Under the dim light in the dawn, I vaguely realized that I was one inch from touching her hand.

If I could try a bit harder. Just one more inch, I could reach her.

“I’m so sorry, Miranda, I’m so very sorry.” Victoria said, though tears were streaming down from her face, she seemed calmer. Her body was not curled up like the time she did in the psychiatric clinic during therapy.

“What happened? Hold my hand!” I yelled. If I could just hold her hand, maybe she would be okay. Maybe I would not lose her.

“I didn’t mean to kill myself. It was an accident.” She explained, her face started to fade away.

I woke up as if being slapped into consciousness, cold sweat and tears on my face, chest so tight that I realized I was sucking in air like a fish out of water. My body was going into shock. A million breathing techniques were racing through my mind. Amid the rising panic attack, I could hear the constant rational little voice at the back of my head: your body is under stress, the carbon dioxide in your blood was dropping due to the rapid short breath. You need to get up and adjust your breathing. However, my muscles were giving up, except for my digestive tract. My throat tightened, and my stomach was twitching up, threatening to throw up the non-existing content in my stomach. I would not lose control over my muscles. The pride of a martial art practitioner woke up, and my body reacted faster than my mind. Before I could make a rational decision, my eyes closed, and I stopped the rapid breathing, holding my breath as if I was diving into a dark sea. In a couple of heartbeats, my attention was directed to my body: first, the muscles around my joints, then the core muscles from my abdomen to my thigh. A prickling sensation ran down from my scalp to my toes, as if an electric shock ran through my body. The

painful twitching of my chest and digestive tract did not ease but slowly faded into the background. I concentrated on the sound of my heartbeats in my head, banging on my eardrum. With each “thump,” it hurt so bad that tears burnt underneath my eyelids.

She is dead. I’m alive. She’s gone. I’m here.

With each “thump,” these words chanted in my mind, as if not by me but by another conscious entity that resided in my brain. After I could not tell how long, the panic attack ceased. The quick flashes between Shanghai apartment and my nightmare, of the two of us hanging out and Victoria lying dead in her room, faded into a dream as I came fully awake. I was lying on my San Diego dorm’s single bed, overwhelmed with grief and a strange mixture feeling of survivor’s guilt and a very conscious sensation of feeling alive. My embodiment and emotion became my forty-first case study. What would happen to a person after experiencing a beloved one’s death, separation, political marginalization, and trauma? I realized that various modes of existence were a lot more corporeal and sensational than just a set of metaphysical thoughts and theories. It could be this acute awareness of being alive as one directly experiences death and stare at your mortality when the intersubjectivity you shared with the person was brutally severed. As I pointed out in the introduction chapter and chapter four, temporality is the backdrop of lived experience and the foundation of existential stance. I turned my attention to documentation and analyzed the altered temporality I experienced as I recovered from PTSD and situational depression. I became my own case study. In my field notes, I wrote down “case forty-one, female, thirty-two years old, intergenerational trauma, PTSD, situational stress, loss of significant other, precarious living conditions. No previous mental health issues”. Within six months, I experienced many psychosomatic symptoms that some of my participants described, though only to a mild and manageable level. The traumatic outbreak hit me sometimes out of nowhere. Minor things trigger strong bodily reactions that remind me of Victoria, from the smell of her favorite food to a song we once sang together. One way to disentangle from these traumatic moments, I figured out, was to face the flooding of my sensations and feelings with utmost sincerity and openness. Within half a year, I was able to live with such flashbacks and return to a

relatively regular status within 2 minutes. I could feel the disturbance of my temporality, and such disturbance became shorter with passing time.

Throughout the year 2020, I learned to deal with death, grief, separation, and constant stress in dealing with precarious conditions on different scales. Everyone had to go through the shared reality of a global pandemic, readjust their life with quarantine, face despair, political instability, hostility in international relations, death and sickness of loved ones, and economic crash. However, each had his/her form of interaction with such reality, with a personal and acute sense of existential tension as presupposed normality becoming an expensive luxury. As one of my participants said, “Sometimes I think, everybody is constantly crushing. It was when the macro-structure began to crush that we began to share the crushing experience and sensation.” The increasingly precarious international relationships between China and the U.S. added a sense of tension and unpredictability. Withdrawing from the field became a prolonged struggle for me, as I was recovering from PTSD and situational depression, on top of dealing with the worsening pandemic in the U.S. and separation anxiety from my own family and friends. Weird perception and apperception emerged as I was simultaneously moving between the two worlds and physically stuck in between the two countries, adding a newly found understanding of what it meant to be a native ethnographer, with my coding and writing proceeding and gaining new understanding and update, my temporality stretched between the immediate and distant past.

7.2 The “Post”-Pandemic Era

In between these constant struggles and sufferings, my interactions and connections with my participants deepened. Many of them contact me regularly and voluntarily, exchanging information and concerns. The Covid-19 pandemic played a considerable part in many people’s life paths. When people were forced to pause their “normal” life, temporality once again changed, especially in the fast-paced metropolitan areas in China. After the first few months of intense shock, depression, and overwhelming stress, as the pandemic eventually got under control in the mainland yet worsened across the globe, many

people had to make changes in their life trajectory. An existential question emerged for all: now what? How should life go on from this point?

I observed several patterns during the so-called “post-pandemic era” in China based on my post-field experience. First, Chinese people adapt to new regulations and “new normality” so fast. After a few in-depth conversations with my participants about their understanding of the pandemic’s outbreak, I propose that the fast adjustment and acceptance of living with the pandemic has to do with people’s perceptual relationship between the human and the natural world, or cosmological orders in Chinese culture. The Chinese cultural tradition does not take an Anthropocene perspective. Instead, Chinese people believe that Nature holds a higher cosmological, even moral position than human intention and activities. Although many people are highly critical of the governments’ mishandling issues at different stages throughout the pandemic, few people displayed the narcissistic attitude of disbelieving the pandemic’s impact. Many people reflected on the traumatic experience and saw it as a chance to rethink human-world relation.

Compared with the daily ideological and political dispute over simple regulations on wearing a face mask I observed in the U.S., the solidarity, caution, and moral stance against those who ignored other people’s safety for selfish purposes in China became a stunning contrast. Despite the individualistic trend that Chinese society has been going through for two decades (Yan, 2003, 2010), the collectivist and other-oriented morality and social stance still play a big part in contemporary life. Despite the overwhelmingly precarious conditions, people turned their attention quickly to the regulation and mundane tasks of everyday lives. Second, throughout fighting the pandemic, many social conflicts bubbled up to what I see as a point of no return. As I have pointed out in chapter five and chapter six, women’s rights against the patriarchal system and the spreading of psychological disorders were two of the most salient social issues that both the State and the people now must deal with. Many people, especially the younger generations, turned their attention from pursuing global citizenship to re-imagining their lives as Chinese citizens. This process also accelerated the desire to narrow the gap between what people hope for and what they are

currently living with, especially in terms of political discontent and opposition to structural violence. With a heightened sense of awareness, attention, and participation, the small but crucial social units people established throughout the quarantine in communities became newly formed social groups. Public calls for gender equality and rights to health and wellbeing accelerated throughout the pandemic and are becoming new social forces despite the continuing censorship and strict public regulation from the State. Third, due to the sudden halt in life and overwhelming precarity people experienced in the past year, I began to observe individuals across generational cohorts begin to disentangle from their previous circumstances and relationships, each trying in their ways to relocate themselves in the shaken and renewed social network and reality. Though this does not always mean less suffering or more comfortable living conditions, changes began to happen with more initiation and agency. Lastly, for those participants who had previous mental health conditions, this year became the turning point in many ways. Many participants who did not seek professional intervention (or intervention of any kind) were pushed beyond the point they could handle independently and began to seek help. Seeking intervention, in turn, results in a renewed perception and apperception of what mental health and psychological wellbeing mean to the participants and related others.

7.2.1 “Finding the certitude of existence”: human struggles across multiple temporalities through embodiment

If I use one word to summarize people’s lived experiences through personal and historical transitions, it shall be “struggle.” Struggle as an anthropological concept is a fundamental human process of vigorously engaging possibility, through which we understand the human capacity of resilience in the face of affliction (Jenkins, 2015). In analyzing the struggles people go through in facing challenging periods in the trajectory of their lives, the ethnography goes beyond clinical categories to understand manifesting symptoms and focus on human intention as they navigate through complex social contexts (Jenkins & Csordas, 2020: 7-9). Starting from discussing embodiment and emotional transmission of transgenerational trauma, I discussed how people’s navigation through personal and historical transitions, space, time, gender, and engaging with mental health trends shape personal experience throughout

historical periods. I witnessed and participated with people's daily struggles, physically and psychologically, in defining their humanity and make sense of their existence.

These struggles form the basis of this research. Based on the ethnographic research and the post-field interaction and observation throughout the pandemic era, I suggest that people try to resolve their existential crisis by engaging with different modes of body-world interactions and embodiment of personal and historical transitions to find a certitude of existence (*huo zhe de shi gan* 活着的实感). A phenomenological approach in understanding this body-world interaction and embodiment of change can be summarized through Husserl's quote: "Whatever in the world, including my existence as a human being, exist for me only as the content of a certain experiential apperception in the mode of certitude of existence" (Husserl, 1960:138). Husserl's understanding of this pre-theoretical experience of being-in-the-world is actualized when individuals engage with immediate consciousness awareness while such a stance is still invested with historical, practical, and subjective relevance (Throop, 2012). To understand how Chinese people find their certitude of existence in their lifeworld, I propose three forms of temporality that people rely on in their daily lives when they orient towards the future based on their historical, practical, and subjective relevance. Everyone seeks a place in the world by negotiating with three cultural systems, creating a morally pluralistic social dynamism at once historically invested and psychologically driven.

Under the neoliberal model of governmentality and the post-industrial market economy, people's everyday life routine is dominated by high-technology bio-power regulations. This trend is accelerated through the management of the Covid-19 pandemic. Now all individuals' social activities, mobility, health status, and social contacts can be traced through the health code for the benefit of keeping the pandemic under control. The boundary of the bodies, once again, has changed, and so does the intersubjective fields of each individuals' interaction with others (Heinrich, Ari, 2018; Zhang, L., & Ong, 2015; Li Zhang, 2018). Under the neoliberalist trend, the shaping of moral, productive, and able subject is dominating the lives of most people who see themselves and are treated as human capital. People's

everyday routines are dominated by the tendency to pursue productivity, quantifiable time, equitable to cash and commodity. Ji Xiao(绩效), the outcome of productiveness and efficiency, was introduced to almost all labor forms, from university professors to delivery service workers. People participated in a heated debate about whether the 9-9-6⁹ working style shall be permitted. I was astonished to see that this exploitation of workers against the labor law is even under debate these days. It seems that if cash reward is granted, people will participate even without minimum insurance or legal support. One interlocuter, a young scholar who struggled to meet an elite Chinese university's KPI (key performance indicator) requirement before she can be tenured, reported a exacerbating sense of exhaustion and meaninglessness, despite her outstanding teaching skills and scholarly achievement. "It was not possible for me to publish five articles on international journal articles per year. I am not a STEM scientist. Literature does not work like that. The leaders of the university are running this place like a company, and they want to quantify everything. I constantly felt unworthy and at the same time undervalued. I am depressed but I don't even have time to see a therapist because I am teaching four classes, taking in master students, and need to fulfill the KPI." This pervasive way of operating, from the State apparatus to laborers' everyday lives, becomes a strong undertone, especially dominating urban dwellers' life patterns in "first-line" megacities, such as Beijing and Shanghai.

Second, a very different mode of interacting with the world is also spreading fast, almost as a reaction to the previously mentioned neoliberal trend that treats people as human motors in the post-industrial era. People are trying to find ways to fight off fatigue, the mental and physical status resulting from operating like machines in the capitalist apparatus (Rabinbach, 1992). Under the influence of traditional Chinese value systems, cultural practices, and worldviews, Chinese people try to sync with the cosmological time and temporality through adopting and recreating traditional lifestyles, even in the highly industrialized urban space. Traditional Chinese worldview sees each body as a "mini cosmos" that

⁹ 9-9-6 refers to working from 9 a.m. to 9 p.m., six days a week

represents the operation of the universe. The cyclical temporality, from the changing of the seasons to the transition from dawn to dusk, to the ups and downs through a nation's history and an individual's lifetime, prepared Chinese people with a set of vocabulary, knowledge, and explanations across radical transitions in their private life and shared experience. From engaging with these philosophies, social practices, and cultural customs, many people seek alternative ways to redefine "normality," "rhythm of life," (Jenkins, 1997), even negotiating with "status of health" by seeking synchronization of a cosmological temporality through meditation, rituals, and nurturing life practices (Yang Sheng 养生)(Farquhar & Zhang, 2012). Contrary to my pre-field assumption, people across all age groups participate in these activities and movements in their own ways. From these daily rituals and practices, readjusting their worldviews, body-world relationships, even interpreting their fortune to decide what to do as macro-level transitions continue to evolve.

Third, there are very detailed but culturally salient movements in creating "personal time" and "personal space" in reaction to the macro-level changes in State regulation of biopower and transitions in the global capitalist market. In between the daily social life and the subconscious and sensory-driven life, the embodiment of social movement is lived and articulated in intimate and personal moments. Each individual has his/her way of constructing a habitus that would eventually become their niche in nurturing and creating possible selves by interacting and exploring with significant others in their lifeworld (Parish, 2008). These are incredibly intimate activities, with only a couple of close friends who, through small social gestures and co-experience emotions, establish shared moments and bonds. These shared moments become the foundation of extended self and social identity, reaching a transferred, collective identity as the macro-systems shifts and crumbles (Herzfeld, 2016). Seeking emotional support, community, and social bonds in cyberspace also play a big part in these attempts. However, experience from cyberspace brings mixed-result in people's mental health and identity construction, a topic that is worth pursuing for scholars with relevant interest (Holmes, 1997). These everyday life practices included planning meals, practicing newly established "traditions" and rituals amongst families and friends, the construction of

emotional interaction, or seeking platforms for expression. I argue that this form of temporality permeates from the conscious social life to the subconscious, manifest as transcendent moments through religious or meditative rituals, and most commonly in dreams. In those emotionally invested and imaginatively vivid dreams, people can reflect on how his/her organization of the self is related to various parts of his/her life, from political to spiritual desire and discontent, to repressed desires and drives (Casey, 2018). In these moments, people rely more on their bodily status and emotional fluctuations as a reference, seeking intuitively for “what feels right,” anchoring their true feelings in their bodily sensations without dissolve or evaluated by the existing social standard (Casey & Edgerton, 2005; Hollan, 2014). These moments of manifesting sensation are where the coherent sense of self is usually challenged and reorganized, where trauma takes over, or engage in enlightenment shines through. To reorganize a more coherent, adaptive, or expanded sense of self, many people undergo social conflicts, re-establish intersubjectivity, or psychotherapy.

7.3 Horizon: Heading towards a realigned temporal subjectivity

I set out to research people’s embodiment and emotion across personal and historical transitions. As I began my ethnographic work, I was able to try out multiple roles: sometimes as a biographer, listening to people’s life story narrations, and trying to figure out a trajectory. Sometimes I occupied the position of a journalist, bearing witness as my participants go through a journey. With the heartbreaking exception of losing Victoria, I maintained a stable relationship with all forty core participants and, in many cases, their families and friends throughout the two years. In addition to, and in many cases, because of the pandemic’s shared experience, there are several key features to the participants’ life in the post-pandemic era. For people who experienced many struggles through their personal and historical transitions, the most essential lived experience was a process of “disentanglement” from their previous social relations, intersubjectivities (Zhang 2020), and perceptions of possible selves (Parish 2008). Through a renewed perception and apperception of their intersubjectivity, people turn their intention and motivation to change into a possibility of having a desirable future.

During these adjustments and struggles, people reposition themselves through establishing different intersubjectivities. First, many people disentangled from their previous social relations, began rethinking obligations, and re-interpreted their social positions in their natal family, marriage, and intimate relationships. Second, this disentanglement can also happen in public lives. In both Chapter two and chapter six, I have shown that, because of the lack of public life, much transgenerational trauma, political discontent, and social stress are internalized into the domestic sphere and taken out in people's private lives. With the bottom-up movements in communities and on social media throughout the pandemic, I witness a change to this situation. Even though the mainstream media did not cover or comment on many such movements, the fight for gender equity, human rights, access to health, and better protecting vulnerable and marginalized social members spread across the country and became the everyday topic in people's lives. Many people began to rethink their position not only as an individual but also as a citizen in this country. Though it is very different from practicing citizenship in the United States, it has profoundly changed people's lives. Thirdly, because of my own position as an international student, I reached out and contacted international students throughout my fieldwork period, especially during the quarantine time when the pandemic became a global disaster. Through those international students, their families, and acquaintances, I was able to contact groups of Chinese people who lived or desire to live as "world citizens." Their dream and life trajectories included seeking education, career, and life across China and other countries. Such plans were brutally disturbed by the pandemic, and chaos followed afterward. Chinese people who seek education, do business, or plan to immigrate bring in a new discussion about their future and their homeland's future in the precarious presence, unfolding an orientation towards the possibilities of having a life cross cultures filled with anxiety, uncertainty, and hope.

If we trace all these disentanglements, repositions, and reorientation towards the future, we see people actualize their intentions through different modes of being-in-the-world. All life story narrations, across generational cohorts, lead to a discussion about the possibility of having a better life and becoming

an evolved version of the possible self in the future. An important worldview in Chinese culture is the dynamic vision of one's life course, through which one rarely perceives time as a linear line, nor one's life path a straight road towards happiness. From ancient times to the post-colonial era, Chinese culture provided a set of social practices, philosophies (influenced by Confucianism as modes of governmentality, Daoism, and Buddhist traditions), and everyday customs that give its people different ways of negotiating their temporality and trajectory of life with the political, historical, and cosmological time (S. Liu, 1974; Struve, 2005). Because people anticipate changes, difficulties, and obstacles, most people actively attend to the future, though they experience different temporality and heading to different "next pages" depending on their life stage, experience, and age. Such dynamism is vibrating and occasionally astonishing to witness, for the resilience and hope people displayed, despite their complaints and struggles in their daily lives. Four generations of Chinese people have all been through radical social changes and historical unrest at some point in their lives, scarred with intergenerational trauma and a sense of anxiety when facing precarity in their daily lives. On the other hand, precisely due to such radical transitions, they demonstrate a broadened sense of imagination and a strong moral stance of existence.

To conclude this discussion, I want to consider the concept of the horizon. Horizon is a perceptual metaphor common in phenomenology. It came from the literal horizon, which recedes as we advance toward it. In the metaphorical case, a horizon can be closer, elaborate in life plans, routines, and even the immediate perception and apperceptions. It can also be distant and expansive, either as a form of cosmological stance or applicable to a sense of temporal trajectory and biographical coherence (Jenkins & Csordas 2020:224). How will people in contemporary Chinese society proceed and step into a precarious future? As I have elaborated in the previous section, people engage with multiple cultural structures to adjust their existential stance and embody various forms of temporality. Horizon, as a phenomenological philosophy notion, captures the interaction between subjective experience and objective appearance. People's perception of a horizon is a system of implicit reference which they accumulated through their past and immediate body-world interactions (Geniusas, 2012). Under the various modes of body-world

interaction, Chinese people experience the shaping of a neoliberal ethical subject, interacting with cultural and cosmological nature-human relationships that aim to synchronize and harmony, and the organization of self in a complex society consciousness lifeworld to subconsciousness and dreams. They either interpolate a horizon that was anxiety triggering because people realize the uncontrollable features as history unfolds, or they embrace an open attitude, with practical goals in mind and an idealistic, more distant horizon further into the future. Whether their future is more elaborated or unelaborated, whether their apperception of horizon is more constricted or ambiguous (Jenkins & Csordas, 2020), people still move back and forth from the various temporalities in different social performances and interactions. Their perception of a horizon is fluid as they move between rituals and strategies (Alexander, 2004) and between the manifestation of behaviors in consciousness and the elaboration of dreams (Hollan in Casey & Edgerton, 2005). As each participant from a different generational cohort working into a different horizon, the co-experiencing of the present becomes a dynamic field of intersubjectivity. Though some participants realize the intergenerational and social origin of their trauma and psychological suffering, the pursuit of wellbeing and hope does not lie in the minding of the generational chasm but in creating a lifeworld that would allow different forms of embodiment, emotional expression, and orientation towards the future to co-exist. As Stengers pointed out in her book, hope lies not in the probability as calculated anticipation authorized by the world as it is, but to create possibility against probability, to “try and feel and in towards a possibility of becoming”(Zournazi & Stengers, 2002).

7.3.1 Disentangling from previous intersubjectivity and traumatic status with an elaborated horizon

Anne

Two years after graduating with a sociology degree, Anne got into a Ph.D. program in social science. During this process, the Huang family immigrated to the U.S. but was having a challenging time settling down since neither of Anne’s parents speaks English. During the pandemic and, in Anne’s word, being “imprisoned” under the same roof with her father, Mr.Huang, became the last straw on her mental

health. When the new quarter started, Anne moved into her friend's household and sought professional intervention. She was diagnosed with an anxiety disorder and mild depression then began to take a minimum dose of Zoloft. Her mental health condition improved immediately after taking medication. Staying away from her father also helped her with her emotional stability and regulation. Peer support and disentanglement from natal family were major features in the immediate improvement of mental health across almost all cases in the younger generation. Because of immigration and separation during the quarantine, Anne's family also had renewed awareness of mental illness and conditions. After Anne started taking medication, her parents finally realized that her mental health was in jeopardy and began to re-evaluate how they interact within the household. With Anne staying away, her younger sister, who stayed with Mr. Huang, also began to demonstrate childhood emotional abuse symptoms, including delayed emotional maturity, inability to focus, low self-esteem, constant stress, and fear of her father's emotional explosion. Distance learning in an English environment also exacerbated the 12-year-olds' difficulty in accommodating to the new environment. Mr. Huang, trying to start a new business in the new country, had neither the language capacity nor psychological resources to care for his younger daughter, now that boarding school was out of the option. Anne's mother began to realize her younger daughter's declining health condition and emotional status and planned to intervene. It seemed possible to stop the continuous impact of intergenerational trauma once the family member realized the trauma is transferred to the next generation with emotional abuse and Mr. Huang's poor social skills and incapability in providing adequate childcare. Anne and her mother agreed that once Mr. Huang could go back to China, they would encourage him to seek professional intervention and improve his own mental health.

Yumei

Yumei recovered from PTSD after her reunion trip with the Sent-Down Youth group. She was no longer haunted by nightmares from that specific time of her life. With her Sent-Down Youth friends' support and encouragement, she talked about her relationship with her late mother and felt that people

from the same generational cohort could understand her situation better. Three years after her mother's death, she also experienced her two cousins' death due to cancer. This death sequence in her family and the family of her close friends left Yumei much shaken as she entered her late 60s. However, she demonstrates excellent resilience and resourcefulness when she faces her existential crisis. She reported her most emotionally reliable and healthy relationship with her son, who currently works in North America. Her reconciliation with her late mother took place during the Qing Ming Festival, the late spring ritual when people respect their ancestors by attending to their tombs and offering flowers, fruits, food, and paper money. Yumei reported that she sat there in front of her mother's tomb for a long time, "telling her how I truly felt and what I have been through since her death." Under the culturally salient ritualist structure, Yumei was able to reorganize her sense of self, now that her mother Yin and herself were separated by life and death. The mother-daughter relationship, however, did not end with the death of one party. Yumei continued to work on her own identity and the intergenerational trauma she suffered through historical and personal transformation. However, with the external changes in her current lifeworld, she now had the psychological resource and change to re-draw the boundary between her own ego and her mother's ego (Hollan, 2014). The hierarchy between a demanding parent and a filial child was transferred from everyday life to a spiritual domain. Within this domain, the living has more credit and agency as the unconscious wish of annihilation was fulfilled (Hollan, 2014:181) replaced with the wish of continuous existing through reorganizing self-scape and memorizing the positive part of their relationship. In this form, Yumei was also able to disentangle from a previous intersubjectivity and reorganize her sense of self.

As a disappointed daughter and an aspiring mother, she explicitly emphasized that she did not want her son to fulfill filial piety's cultural expectation. Instead, she described her relationship with her son to be a continually developing and evolving one. In our latest interview, Yumei said that if she looked back, she would be crushed by the suffering and injustice shared by many people from her generation. Her way of finding meaning out of such suffering was to "look forward." "Although we can't possibly

know what the world would look like in five years, I should instead just focus on my own daily life and the wellbeing of the people I care.” Like many people from her cohort, Yumei’s most important life goal was not to become a burden of her child, knowing that the Chinese singleton’s generation would be overwhelmed with the burden of care. She also hoped that the social service and facilities would improve as China enters an aging society. She valued “independence and self-reliance in material and economic life” and would maintain “strong emotional bound with my own friend and the next generation.” She anchors her daily life with self-cultivation through exercise, self-care, and reading. “Our generation did not have adequate education, which was the biggest regret in my life. However, it was as the ancient poetry indicated, if you learn in your old age, inspiration come like a candlelight. However, that would still be better than walking in the dark.”

7.3.2 Strong social bond, emotional co-experiencing, and an ambiguous but open horizon

Jianguo

Jianguo, Yumei’s Sent-Down Youth friend, maintained close contact with Yumei and other Sent-Down Youth friends. Despite approaching retirement age, Jianguo still worked as a garden designer and devoted his time and energy to several important civil projects, expressing his aesthetic and philosophy of life by designing traditional Chinese gardens in urban spaces. He is now a happy grandfather and would occasionally assist with childcare when his daughter and son-in-law are busy with architecture jobs. Twice a week, Jianguo would organize several friends from his Sent-Down Youth years to get together and play Mahjong. They would then share food and wine, enjoying high-quality companionship with each other in a totally egalitarian and mutually supportive relationship (Hsu & Madsen, 2019). As chief of the Sent-Down Youth team when he was seventeen, Jianguo continued to feel obligated in taking care of his teammates, even in their 60s. He even helped a few Sent-Down Youth friends when they were in a financial crisis. His friendship with Yumei continued to evolve and extended to both of their families, forming a strong emotional bond that continued across generations.

Meiling

Forty years ago, when Yumei had nowhere to go during the Chinese New Year, Meiling took Yumei to her own home despite the material and food shortage. Meiling's parents welcomed Yumei like their own daughter. Nowadays, through the re-connection since the reunion trip, Yumei was welcomed again into Meiling's large extended family. They chat daily through a family WeChat group, sharing everything in life. In 2020, Meiling's mother passed away in her 90s. Yumei and other family members supported each other to go through the difficult family transition in the middle of the pandemic, which further deepened their mutual emotional support. In Meiling's family, they continued to enjoy life with a strong sense of solidarity and profound witty humor daily.

Echo

Echo started her own company, became a young entrepreneur despite the downfall of the economy. Her business aims at designing, organizing, and selling courses on meditation and psychotherapy online. Echo managed her podcast, online platform, meditation training program both online and in communities. During the two years of our interactions, Echo reported her steadily improving health status, despite the shocking transitions during the pandemic and other family members' decline in mental health. Through the past year, she had been living away from her natal family and eventually established a strong supportive system with peers and friends from online, a typical way of social interaction and communication amongst people in their 20s in China nowadays. This haven created amongst peers, free of judgement or social evaluation, become a steady source of emotional support, as well as an information exchange platform. The previously frequent burn-out, black-out, and body-emotion disassociation eventually ceased to exist. With improved mental health, she was able to treat her physical and psychosomatic symptoms with less anxiety and adopted an open and mindful attitude in "co-existing with the aftermath of trauma". Echo also redefined her relationship with her parents and relatives. At least from her part, she was able to maintain a safe boundary between her parents and herself. The reorganized self-scape gave her more energy to be empathetic and understanding to both of her parents'

families. Echo's embodiment and body-world interaction remain a unique case in my ethnographic fieldwork. During her social interactions, though Echo engages in regular conversations with an extensive network of friends and acquaintances, she reported that she could only feel connected and bond with people through somatically co-experiencing other people's emotional fluctuation, instead of relying on verbal communications.

In terms of healing, Echo combined spiritual healing and Traditional Chinese Medicine. She reported that the TCM herbal formula worked wonderfully in improving her health in ways that previous biomedicine never did. She did not get the herbal formula from hospitals or clinics, but instead treatment from private practitioners who combined medication with food and other reorganized daily routines. Echo indicated that this form of holistic healing system made her feel she was treated as a human. In addition to ritualistic healing, meditation, and traditional Chinese herbal medicine, Echo continued to work with a psychotherapist. Combining different healing methods and engaging with multiple knowledge systems in everyday life is a topic I would like to pursue in future ethnographic work.

7.3.3 Evolving intersubjectivity, fluctuating health status, with an elaborated but constricted horizon

Naomi

Naomi's health condition is worrisome as of 2021. In the past three years, Naomi made some massive progress in her life. She became a mother in 2020 and was working out issues in her marriage and family life. Most devastatingly to my concern, Naomi's eating disorder remains untreated. From artificial insemination to C-section during birth, her body took a toll during pregnancy and breastfeeding. As she was nurturing her baby, her body weight could drop rapidly up to a pound per day. Weighing herself and providing enough milk for her baby added another layer of stress to her body and mind. However, consistently situated in a complicated network with both her natal family and her in-laws, Naomi seldom discloses her thoughts on her body. Her mother adopted a similar attitude towards the changes in their lives and the transition of Naomi's roles and retreated from talking about or attending to

Naomi's mental health conditions. The stigma of mental illness, based on my observation, maintained a huge cloud over people's heads in the family. It seemed that if family members consider their face (mianzi) to be of utmost importance and constantly evaluate their degree of happiness on social performance across generations in their social circles, the more stress individuals in the family would feel in their daily lives, and the less likely their mental health conditions would be treated. It seemed that the more people in a social unit cling to a static set of ideas about how social roles should be performed and social obligations should work out, the less dynamism people could embrace in their intersubjectivity. The less dynamic their intersubjectivity plays out, the less agency people would be able to exercise. Either in interpersonal interactions in a private family or everyone's interaction with larger social institutions, the correlation between static intersubjectivity and mental stress is profound in modern Chinese society.

As of 2021, Naomi's family friends expressed concerns about her conditions, though Naomi herself remains silent. During some of our leisure conversations, she expressed her concern about her baby son's eating habits. Though the details of the newly established intersubjectivity and intercorporeality remained to be further explored, Naomi tends to focus on very detailed plans daily, weekly, and even monthly without attending to a more distant future.

Quan

Throughout 2019, Quan's marriage and career were under tremendous challenge and transformation. Approaching 2020, she reported little progress in her psychotherapeutic sessions, suspending and reinitiating with her therapy sessions with fluctuating mental health status. The aftermath of her sexual assault and the chasm it drew between Quan and her husband continued to be stressful for her for a long time. Quan's intimate relations continued to be influenced by her childhood trauma, early attachment style, and the sexual abuse. Quan continued to explore safer and functional ways to resolve the insecurity, projection, and power struggles in the intimate relations she was involved in, organized, and reorganized her self-scape as she struggled with her career plan in the economic downfall. The pandemic and quarantine took an encouraging turn on her life and relationship management. This halt in life and

career gave Quan time and space to take a step back and redirect her attention to alternative ways of self-cultivation and healing. Her husband could no longer travel to England, and they began to spend more time together, which played a positive part as they continued to work out problems in their marriage. Quan also made tremendous progress in her music course, started learning guitar and quickly became good at it, even teaching students within 14 months. With the pandemic continuing to have a disastrous impact on dining and catering business, Quan also embraced a more short-term, elaborated life plan, living one day at a time as she closely engaged in reopening the restaurant once the quarantine and safety regulation lifted. She did not indicate any long-term planning given her current health status and career situation.

For adults who are in their early 30s to mid-40s or are starting their career as graduates or migrant workers, the economic downfall throughout the quarantine and the ever-competitive capitalist market is taking a toll on their mental and physical health. Young entrepreneurs and employers are struggling with gaining economic independence on top of trying to fulfill their other social obligations, as young parents, partners, and as sons and daughters who continued to deal with cross-generational chasms, dysfunctional natal families, or simply finding out a way to embrace the future with their aging parents. Many participants identified the two most stressful things in their lives: job/economic security and their parents' obligation. As I had elaborated in Chapter Two, the Asian family hierarchy anchored people's intersubjectivity on the filial piety guilt trap, which could mentally cripple people, especially when people with higher social hierarchy continued to expect people in the lower social hierarchy to sacrifice and strive at the same time as the macrosocial structure is falling apart.

Moving up the social ladder, the goal for many families through the 90s and early 2000s is becoming an increasingly difficult task for the current laboring force. Young people call themselves "the Nation state's leeks who would be cut off anytime" in reaction to the neoliberal governmentality and capitalist market with shrinking welfare. "I'm sick because I'm poor," said Super, my participant who came from the North-East province and tried hard to establish her life in Shanghai. Her mental and

physical health status was worsened with prolonged working hours. New graduates like Super could not survive on her basic salary and had to rely on “performance pay.” The more one works, the potential higher payment. Since the 2019 pandemic, overworking and exhaustion has been the major cause of worsening mental health condition, even sudden death, across various occupations. For most working- and middle-class people who participated in my study in Yangtze Delta Area and more economically developed cities, the despair and stress do not necessarily come from immediate poverty but from constant stress: the fear of being replaced or being “eliminated” because they are not good enough, competitive enough, or needed. This mindset has been internalized since their adolescence and people are suffering from real consequences of this system and mindset as the economy takes a downfall. The elaborated life plan is driven by anxiety, and a sense of precariousness overrides the constricted horizon that their parents’ generation did not expect as China transferred from a planned economy to an open market when they succeeded in the economic uprise and spirit of entrepreneurship. The negotiation of defining one’s social position not just as human capital but also as a human being will be a long and challenging journey for all people in China.

7.3.4 Dynamic intersubjectivity, renewed body-world interactions, and an open and distant horizon

Dr. Yang

Dr. Yang, my liaison with Shanghai’s most prominent psychiatric and mental health institution, served his term in 2019 and was transferred to another hospital. Dr. Yang was actively involved in Victoria’s case for a while and demonstrated strong emotional support as I was going through trauma and shock after losing Victoria. During our most recent update, he now works as a resident surgeon in a major hospital. He actively participated in the first round of combating the Covid-19 pandemic. Shanghai’s civil management and Disease Control Center is the best in China and performed outstandingly in regulating and controlling the pandemic throughout different stages from 2019 to 2020. All the hospitals, communities, and public facilities were well-prepared. Though medical staff had a very challenging time,

citizens were mostly satisfied and showed a strong sense of solidarity and security throughout the pandemic. During our follow up conversations, Dr. Yang was more concerned about my situation in the U.S. than I about his. From our conversation and interview with his co-workers and fellow medical students, I gained first-hand updates about the mental health management work in the post-pandemic era. Mental health professionals expected the surge in mental health crisis after the pandemic and demonstrated a highly humane attitude towards the patients and their families. The most interesting observation I had was how each mental health professional engaged with transforming the States' regulation and policies by adopting a patient-centered approach. As I have articulated in Chapter Six, the local police officers needed to be notified if an individual was diagnosed with schizophrenia or bipolar disorder. To protect the patients from social stigma and related negative consequences in their lives, psychiatrists would adopt active ways to help the patients with their conditions. Sometimes a psychiatrist would prescribe a bipolar patient with adequate medication, but only record "anxiety disorder" on his/her medical file to optimize their chances of seeking a job or maintaining normal daily lives. Many psychiatrists I talked with demonstrate a strong sense of solidarity with their patients. The pandemic will change the mental health intervention structures and services soon, a potential topic that researchers should follow up in the coming months.

Claire

As I have pointed out at the beginning of this chapter, the Covid-19 pandemic and quarantine outbreak had been a great challenge for people with pre-existing mental health conditions. In her final year in a university in Shanghai, Claire experienced the most significant disturbance of her routine and life as a college student. Though neither her hometown Guangzhou nor Shanghai had been severely influenced during the first round of pandemic at the beginning of 2020, both city's governments still dismissed universities and schools, requiring students to stay in their own homes and take classes through distance learning. For many young adults such as Claire, the college had been a safe haven. Back at home, they were stuck in an old, "scripted" way of social interaction with their family members, where they

were expected to behave like adults but only granted the agency of children. Claire perceived little empowerment when she was in the domestic setting. She spent half of the winter semester at home and eventually felt suffocated, depressed, guilty, and anxious daily. She was sent to boarding school since she was four, and these few months were the longest she stayed under the same roof with her parents. “Obviously none of us know how to be with each other for such a long time.” Finding “personal space,” as I have indicated in the introduction chapter and the chapter on intergenerational trauma, was the biggest challenge for adult children who stayed at home with their parents. Living separately from parents was associated with better mental health across East Asian societies (Hikichi et al., 2020). According to my ethnographic observation, cohabiting with parents almost always worsens mental health conditions for those who had pre-existing mental health issues. The good thing is Claire’s mental health condition became instantly better after she went back to the university in Shanghai. The most important positive change, she indicated, was that she could go back to a familiar routine that includes doing things she loved and a “safety net” consisting of egalitarian peer relations and emotional support.

Several other participants with pre-existing mental health problems found themselves in worsening health conditions at the beginning of the quarantine. Despite the mishandling of information and attempted censorship by the Wuhan government, the Chinese government and medical institutions managed and regulated the pandemic relatively successfully. People’s lives generally went back to normal around mid-May 2020. The group that suffered most in my case studies are international students, immigrants, and their families back in China. International students found themselves stuck in the middle between the host country and home country. For those who studied in the U.K and the U.S., the stress and precarity seemed unending and prolonged. Throughout Trump’s administration, Chinese students’ mental health condition, either in China or in the U.S., worsened at an alarming state. Four of my participants were international students or immigrants, and almost all of them experienced severe panic attacks, anxiety, and depression. Across my circle of friends and acquaintances, many international students reported worsening mental health conditions, self-harm attempt, separation anxiety, and suicide. On top

of suffering from the poorly managed pandemic, they also suffer from political hostility and a gravely disrupted life plan, an issue I will discuss in separate articles. One important observation I should point out here is that, for descendants whose family suffered from political persecution, their anxiety, fear, and depression due to political unrest and the hostile international relationship were obviously more severe than those who came from families that did not go through severe historical trauma. The intergenerational transmission of trauma was exacerbated during the political unrest of the 2020 pandemic. With the eventual alleviation of Trump governments' hostile policies, international students were generally relaxed. They are the group who indicated a "one day at a time" attitude while holding on to a distant hope that international relations can be mended, and life could still go on. Though many still report that even thinking about a future is too stressful for them to handle in the present days.

7.4 The Journey Continues

In this research, I explored how people use their bodily and emotional experience to make sense of the personal and historical transitions they have been through in contemporary Chinese society. I analyzed the manifestation of mental health symptoms, not only due to suffering social injustice and cultural transitions without a proper support system but also how a historical origin created trauma that pass down across generations. I demonstrated how transitional experience was articulated through cross-generational interactions and everyday life habits. One contribution of this research is to document and analyze how emotional experience anchors the transmission of transgenerational trauma. For traumatic experience to pass down generations, victims of such trauma experience the following conditions. First, the trauma has a social and historical origin that exist beyond personal capacity. Second, the trauma persisted because the individual experienced direct violence done to his/her body and heart by someone from his/her own community, result in fundamental changes of his/her orientation towards the world that follows the historical and personal transitions. Third, such trauma was recognized, witnessed, articulated, or discussed in public or private domain after the historical and personal traumatic even ceased. The victim thus internalized and carried out their traumatized emotions and pass it down to intimate others,

usually the vulnerable members of the family, as they orient toward the future, through everyday interactions. These experiences became exacerbated every time when the individual's social support system was deprived or dissolved with societal or personal transitions. In case of my Chinese interlocutors, the dissolve of kinship system, withdrawal of social welfare, and the neoliberal capitalist market structure replacing socialist collectivism community structures all exacerbates their transgenerational traumatic experience. For the generation that directly experienced such trauma, their struggle manifest as dysfunctioning social relationships or emotional regulations. For the generations that follow, ill-equipped with psychological resources, self-esteem, or emotional community, their struggles manifest as somatic and psychological symptoms and sufferings, resulting in increasing number of mental illnesses, loneliness, and emotional pain. Overall, transgenerational trauma persisted in modern China because of the undiscussed historical trauma continued to shape people's selfhood and the ways in which they interact with the world. The current cultural trends, such as the morally unjust application of filial piety under patriarchal system, further marginalize vulnerable members of the domestic and public settings.

In addition to the overall discussion of transgenerational trauma through social transitions, I focus on several aspect of lived experience to discuss people's struggles. Through focusing on spatial changes, I argued how dislocation and changing landscape became a place of trauma for people who lived through rustication and urbanization, as was experienced by the Sent-Down Youth. I discussed the cognitive, embodied, and unconscious make-up of a physical space throughout a person's experience and talked about how drastic transitions exacerbate the dysfunctional relationship between people and the land. The existing and missing part of the farm they once labored on both reminded how their collectively constructed memory and individually experienced suffering existed and evaporated in the silence of history. To recover from such traumatic experience, their renewed social bond and mutual witness became new sites of agency, regardless of how their physical space changed over time. In discussing mental illness cases, I demonstrated how disrupted temporality was the backdrop and foundation of

illness experience. In documenting the illness and healing experience of Echo, a girl with emotional disassociation and PTSD, I demonstrated how the rhetoric of healing can happen when the individual re-situate herself in a culturally accepting place and recreate relationship with her body through intersubjectivity.

Besides transgenerational trauma, space, and temporality, I also highlighted the gendered experience and upbringing of my female interlocutors. Using eating disorder and surviving sexual violence as illustrations, I talked about how Chinese women, as is the case in many other places in the world, women do not always own their bodies but cannot cease to be their bodies. Using rebellious flesh as a feminist interpretation of body and embodiment, I discussed how manifesting symptoms of eating disorder can be viewed to reclaim agency of the body in resisting the world that crushing down on the female flesh by depriving its pleasure. I also demonstrate how performing gender in a heterosexual relationship under Chinese patriarchal system requires a woman to be mother-wife-daughter simultaneously in order to satisfy the male-oriented, egocentric, unequal relationship, which is psychologically toxic to both parties but extremely damaging and dehumanizing for women. Though Chinese feminist movement is only proceeding with painfully slow speed and repeatedly meeting strong resistant, I believe it is a force that could not be stopped once it initiated. As a medical anthropologist, I want to propose that further research should be carried out to see how we can maximize the wellbeing of women during such process.

Optimize the wellbeing of individuals yet not to medicalize social and political meanings through people's struggle is a constant dilemma faced by me and many of my participants. In the last chapter, I deal with how people engage with macro-social trends such as the Psycho-Boom. I argued that for the optimization of people's wellbeing, the fundamental struggle lies in the fighting for discursive coherence, redefining human rights and humanity, and creating a society with cultural norms that not only emphasize hierarchy and order, but also tolerance of plural forms of existence. I demonstrate how people go through

suffering and inspiration, negotiating their position and organizing their sense of self in their immediate cultural contexts and in the cosmological sense.

As a native ethnographer, I have been through and continue to go through a journey that turns everything I thought I was familiar with strange and establishes intersubjectivity with what I used to find bizarre. With the ever stretching, the ever-receding horizon as history unfolds, I see people continued to find a place in this world where they can place their body and heart, experience confusion, unrest, and content daily. With the looming features of structural violence and gender inequity, people in contemporary Chinese society still demonstrated a strong sense of hope even amongst those who struggle with mental illness daily. The resilience, the emphasis on behavior, and the commitment people show, even with everyday routine, are astonishing to observe even through the most extreme situations, such as the pandemic or natural disasters like the flood in summer 2020. The everyday social gestures of kindness, altruism, and the established intersubjectivity amongst the most unlikely social relations give me the courage to face the upcoming precariousness under social transitions on a global scale. After all, hope lies in the possibility against evidence or calculated probability and the pursuit of becoming, instead of being (Zournazi & Stengers, 2002). Through the constant becoming, further research should pursue how ordinary Chinese people in their everyday life extend their striving for possibilities. It is within such a constant dynamic where resilience would assist the birth of hope. Just as the politician and poet Qu Yuan beautifully articulated two thousand years ago during the Warring State era: on and on stretch the road, long it was and far; I would go high and low in the search that I made (Owen, 1996).

References

- Alexander, Jeffery C. (2004). "Cultural Pragmatics: Social Performance Between Ritual and Strategy." *Sociological Theory* 22(4):527–73.
- Anon. (2020). "Covid-19 Has Revealed Widespread Sexism in China, but Women Are Resisting Furiously Online." *The Economist*, March 7.
- Argenti, N., & Schramm, K. (2010). *Remembering Violence: Anthropological Perspectives on Intergenerational Transmission* (N Argenti & K. Schramm (eds.)). Berghahn Books.
- Atkinson, J., & Nelson, J. (2010). Trauma, Transgenerational Transfer and Effects on Community Wellbeing 10. In N. Purdie, P. Dudgeon, & R. Walker (Eds.), *Working together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice* (pp. 135–144). Australian Institute of Health and Welfare.
- Astila, Valtteri, and Dan Lloyd. (2014). *Subjective Time: The Philosophy, Psychology, and Neuroscience of Temporality*. Cambridge: The MIT Press.
- Bachelard, G. (2014). *The poetics of space*. Penguin Classics.
- Bareket, Orly, Rotem Kahalon, Nurit Shnabel, and Peter Glick. 2018. "The Madonna-Whore Dichotomy: Men Who Perceive Women's Nurturance and Sexuality as Mutually Exclusive Endorse Patriarchy and Show Lower Relationship Satisfaction." *Sex Roles* 79(9–10):519–32.
- Barlow, Tani, E. (1993). *Gender Politics in Modern China: Writing & Feminism*. Duke University Press.
- de Beauvoir, Simone. (2010). *The Second Sex: Translated by Constance Borde and Sheila Malvovancy-Chevallier*. New York: Alfred A. Knopf.
- Becker, Anne E. (1995). *Body, Self, and Society: The View from Fiji*. University of Pennsylvania Press.
- Becker, Anne E., Rebecca A. Burwell, Stephen E. Gilman, David B. Herzog, and Paul Hamburg. (2002). "Eating Behaviours and Attitudes Following Prolonged Exposure to Television among Ethnic Fijian Adolescent Girls." *British Journal of Psychiatry* 180(June):509–14.
- Becker, Anne E., and Paul Hamburg. (1996). "Culture, the Media, and Eating Disorders." *Harvard Review of Psychiatry* 4(3):163–67.
- Beim, A. (2012). Remembering Violence: Anthropological Perspectives on Intergenerational Transmission. *Symbolic Interaction*, 30(1), 270.
- Benjamin, Jessica. (2013)a. *Shadow of the Other: Intersubjectivity and Gender in Psychoanalysis*. Routledge.
- Benjamin, Jessica. (2013)b. *The Bonds of Love: Psychoanalysis, Feminism, & the Problem of Domination*. Pantheon.
- Bichescu, D., Neuner, F., Schauer, M., & Elbert, T. (2007). Narrative exposure therapy for political imprisonment-related chronic posttraumatic stress disorder and depression. *Behaviour research and therapy*, 45(9), 2212-2220
- Bourdieu, P. (1990). *The Logic of Practice*.

- Butler, J., Brown, W., Cvetkovich, A., & Weinbaum, A. E. (2003). *Loss: The Politics of Mourning*. 488.
- Butler, Judith. 2009. "Sexual Politics, Torture, and Secular Time." Pp. 17–39 in *Intimate Citizenships: Gender, Sexualities, Politics*. New York: Routledge.
- Butler, J., & Spivak, G. C. (2007). Who sings the nation-state? In *Language, politics, belonging*.
- Bray, A., and C. Cloebrook. (1998). "The Haunted Flesh: Corporeal Feminism and the Politics of (Dis)Embodiment." *Journal of Women in Culture and Society* 24(1):35–67.
- Caruth, C. (1996). *Unclaimed Experience: Trauma, Narrative, and History*. Johns.
- Casey, Conerly. (2018). "Sensory Politics and War: Affective Anchoring and Vitality in Nigeria and Kuwait." Pp. 147–74 in *Political Sentiments and Social Movements*. New York: Palgrave Macmillan US.
- Chiang, Y. L., Hannum, E., & Kao, G. (2015). It's not just about the money: Gender and youth migration from rural China. *Chinese Sociological Review*, 47(2), 177–201.
- Conklin, Beth A., and Lynn M. Morgan. (1996). "Babies, Bodies, and the Production of Personhood in North America and a Native Amazonian Society." *Ethos* 24(4):657–94.
- Chua, J. L. (2014). *In Pursuit of the Good Life: Aspiration and Suicide in Globalizing South India*. University of California Press.
- Csordas, Thomas J. (2008). "Intersubjectivity and Intercorporeality." *Subjectivity* 22:110–21.
- Csordas, T. J. (2002). *Body, meaning, healing*. Palgrave Macmillan US.
- Csordas, T. J. (1994). *Embodiment and experience: The existential ground of culture and self* (Vol. 2). Cambridge University Press.
- Csordas, T. J. (2008). Intersubjectivity and Intercorporeality. *Subjectivity*, 22, 110–121.
- Csordas, T. J. (2015). Toward a Cultural Phenomenology of Body-World Relations. In C. Houston & K. Ram (Eds.), *Phenomenology in Anthropology. A Sense of Perspective* (pp. 50–67). Indiana University Press.
- Csordas, Thomas J., and Janis H. Jenkins. (2018). "Living with a Thousand Cuts: Self-Cutting, Agency, and Mental Illness among Adolescents." *Ethos* 46(2):206–29.
- Csordas, T. J., Dole, C., Tran, A., Strickland, M., & Storck, M. G. (2010). Ways of asking, ways of telling: A methodological comparison of ethnographic and research diagnostic interviews. *Culture, Medicine and Psychiatry*, 34(1), 29–55.
- Dalgaard, N. T., & Montgomery, E. (2017). The transgenerational transmission of refugee trauma: Family functioning and children's psychosocial adjustment. *International Journal of Migration, Health and Social Care*, 13(3), 289–301.
- Damasio, A. (1999). *The Feeling of what Happens*. Houghton Mifflin Harcourt.

- Daud, A., af Klinteberg, B., & Rydelius, P. A. (2008). Resilience and vulnerability among refugee children of traumatized and non-traumatized parents. *Child and Adolescent Psychiatry and Mental Health, 2*.
- Davoine, F., & Gaudillière, J. (2013). *History beyond trauma*. Other Press.
- Deng, Z., & Treiman, D.J. (1997) The impact of the cultural revolution on trends in educational attainment in the People's Republic of China. *American Journal of Sociology, 103* (2), 391–428.
- Desjarlais, R., & Jason Throop, C. (2011). Phenomenological approaches in anthropology. *Annual Review of Anthropology, 40*, 87–102.
- Dole, C., & Csordas, T. J. (2003). Trials of Navajo Youth: Identity, Healing, and the Struggle for Maturity. *Ethos, 31*(3), 357–384.
- Du, Shanshan. (2014). “Social Media and the Transformation of ‘Chinese Nationalism’: ‘Igniting Positive Energy’ in China since the 2012 London Olympics. *Anthropology Today 30*(1):5–8.
- Duncan, W. (2012). The culture of mental health in a changing Oaxaca. *UC San Diego Electronic Theses and Dissertations*.
- Ebenstein, A. (2010). The “Missing Girls” of China and the Unintended Consequences of the One Child Policy. *Journal of Human Resources, 45*(1), 87–115.
- Elias, Norbert. (2000(1939)). *The Civilizing Process: Sociogenetic and Psychogenetic Investigations*, trans. Edmund Jephcott, ed. Eric Dunning et al. Oxford: Blackwll.
- Eleftheriou, L. (2015). Bodies like Rivers: seeking for a space for body memory in the discourse of trauma. *European Journal of English Studies, 19*(1), 315-330.
- Erikson, Erik. (1968). *Identity: Youth and Crisis*. W.W. Norton & Company.
- Fawkes, Johanna. (2015). “Performance and Persona: Goffman and Jung’s Approaches to Professional Identity Applied to Public Relations.” *Public Relations Review 41*(5):675–80.
- Fei, Xiaotong. (1992). *From the Soil: The Foundations of Chinese Society*. Oakland: Univ of California Press.
- Ferguson, Heather, and Sarah Mendelsohn. (2011). “Full of Your Self: How Eating Disorder Symptoms Encode a Relational History.” *International Journal of Psychoanalytic Self Psychology 6*(3):352–76.
- Faier, L., & Rofel, L. (2014). Ethnographies of encounter. In *Annual Review of Anthropology* (Vol. 43, pp. 363–377). Annual Reviews Inc.
- Fong, V. L. (2004). *Only Hope: Coming of Age under China’s One-Child Policy*.
- Fong, V. L. (2002). China’s One-Child Policy and the Empowerment of Urban Daughters. *American Anthropologist, 104*(4), 1098–1109.
- Foucault, M. (1970). The archaeology of knowledge. *Social Science Information, 9*(1), 175–185.
- Foucault, M. (1975). Discipline and punish. *A. Sheridan, Tr., Paris, FR, Gallimard*.

- Foucault, M. (2003). *Psychiatric Power: Lectures at the college de France, 1973-1974*. Picador.
- Freud, A. (1974). *The writings of Anna Freud: I. Introduction to psychoanalysis: Lectures for child analysts and teachers, 1922-1935*. International Universities Press.
- Freud, A. (2018). *The ego and the mechanisms of defence*. Routledge.
- Garcia, A. (2010). *The pastoral clinic: Addictoin and dispossession along the Rio Grande* University of California Press.
- Ghaemi, S. Nassir. (2001). "Rediscovering Existential Psychotherapy: The Contribution of Ludwig Binswanger." *American Journal of Psychotherapy* 55(1):51–64
- Geniusas, Saulius. 2012. *The Origins of the Horizon in Husserl's Phenomenology*. Dordrecht: Springer Netherlands.
- Gilligan, C. (1977). In a different voice: Women's conceptions of self and of morality. *Harvard Educational Review*, 47(4), 481–517.
- Gilmartin, CK, G. Hershatter, L. Rofel, and T. White. (1994). *Engendering China: Women, Culture, and the State*. Cambridge: Harvard University Press.
- Girling, J. (2006). *Emotion and Reason in Social Change: Insights from Fiction*. Palgrave Macmillan US.
- Goodkind, J., Hess, J., ... B. G.-Q. health, & 2012, undefined. (2012). "We're Still in a Struggle" Diné Resilience, Survival, Historical Trauma, and Healing. *Journals.Sagepub.Com*, 22(8), 1019–1036.
- Goffman, Erving. (1955). "On Face-Work: An Analysis of Rigual Elements in Social Interaction." *Psychiatry* 18(3):213–31.
- Grosz, E. (1995). *Space, Time and Perversion. Essays on the Politics of the Bodies*. Routledge.
- Grosz, E. (1994). *Volatile bodies: Toward a corporeal feminism*. Indiana University Press.
- Haas, B. M. (2017). Citizens-in-waiting, deportees-in-waiting: Power, temporality, and suffering in the US asylum system. *Ethos*, 45(1), 75-97.
- Heidegger, Martin. (2011). *The Concept of Time*. Continuum.
- Held, Klaus. (2007). "Phenomenology of 'Authentic Time' in Husserl and Heidegger." *International Journal of Philosophical Studies* 15(3):327–47.
- Hershatter, G. (2014). *The Gender of Memory: Rural Women and China's Collective Past* (Vol.8). University of California Press.
- Heinrich, Ari, L. (2018). *Chinese Surplus: Biopolitical Aesthetics and the Medically Commodified Body*. Duke University Press.
- Herzfeld, Michael. (2016). *Cultural Intimacy: Social Poetics and the Real Life of States, Societies, and Institutions*. Routledge.

- Herring, S., Spangaro, J., Lauw, M., & McNamara, L. (2013). The intersection of trauma, racism, and cultural competence in effective work with Aboriginal people: Waiting for trust. *Australian Social Work*, 66(1), 104-117
- Hinton, D. E., and Byron J. Good. (2016). *Culture and PTSD: Trauma in Global and Historical Perspective*. University of Pennsylvania Press.
- Holmes, David. (1997). *Virtual Politics: Identity and Community in Cyberspace*. Sage.
- Hjern, A., Alfven, G., & Östberg, V. (2008). School stressors, psychological complaints and psychosomatic pain. *Acta Paediatrica, International Journal of Paediatrics*, 97(1), 112–117.
- Hollan, Douglas. (2014). “From Ghosts to Ancestors (and Back Again): On the Cultural and Psychodynamic Mediation of Selfscapes.” *Ethos* 42(2):175–97.
- Hollan, D., & Throop, C. J. (2008). Whatever happened to empathy?: Introduction. In *Ethos* (Vol. 36, Issue 4, pp. 385–401).
- Hsu, B., & Madsen, R. (2019). *The Chinese Pursuit of Happiness: Anxieties, Hopes, and Moral Tensions in Everyday Life*.
- Hu, Y., & Scott, J. (2016). Family and Gender Values in China: Generational, Geographic, and Gender Differences. *Journal of Family Issues*, 37(9), 1267–1293.
- Husserl, E. (1991). *On the Phenomenology of the Consciousness of Internal Time (1893-1917)*. Kluwer.
- Hung, E. P., & Chiu, S. W. (2003). The lost generation: Life course dynamics and xiangang in China. *Modern China*, 29(2), 204-236.
- Irigaray, L. (1985). *This sex which is not one*. Cornell university press.
- Jacka, T., Kipnis, A. B., & Sargeson, S. (2013). *Contemporary China: Society and social change*. Cambridge University Press.
- Jackson, M. (2014). Lifeworlds: Essays in Existential Anthropology. In *American Anthropologist* (Vol. 116, Issue 1).
- Jørgensen, M. B., & Schierup, C. U. (2016). *Politics of precarity: migrant conditions, struggles and experiences*. Brill.
- Jenkins, J. (2015). *Extraordinary conditions: Culture and experience in mental illness*.
- Jenkins, J. H. (1991). The state construction of affect: Political ethos and mental health among Salvadoran refugees. *Culture, Medicine and Psychiatry*, 15(2), 139-165.
- Jenkins, J. H. (1994). The psychocultural study of emotion and mental disorder. *Handbook of psychological anthropology*. Westport, CT: Greenwood Publishers, 97-120.
- Jenkins, J.H., & Karno, M. (1992). The meaning of expressed emotion: theoretical issues raised by cross-cultural research. *Am J Psychiatry*, 149(january), 9–21.

- Jenkins, J.H., & Csordas, T. J. (2020). *Troubled in the land of enchantment: Adolescent experience of psychiatric treatment*. University of California Press.
- Jenkins, J.H. (1997). "Subjective Experience of Persistent Schizophrenia and Depression among U.S. Latinos and Euro-Americans." *British Journal of Psychiatry* 1:20–25
- Kidron, C. A. (2011). Embodied Legacies of Genocide. In F. E. Mascia-Lees, *A companion to the anthropology of the body and embodiment* (pp. 451-466). Chichester: Wiley-Blackwell.
- Kidron, C. A. (2009). Toward an Ethnography of Silence. The Lived Presence of the Past in the Everyday Life of Holocaust Trauma Survivors and Their Descendants in Israel. *Current Anthropology*, 50(1), 5–27.
- Kidron, C. A. (2003). Surviving a distant past: A case study of the cultural construction of trauma descendant identity. *Ethos*, 31(4), 513–544.
- Kipnis, A. (2008). *Chinese kinship: contemporary anthropological perspectives*. Routledge. (G. D. Brandstädter, S., & Santos (ed.)). Routledge.
- Kleinman, A. (2020). The Soul of Care: The Moral Education of a Husband and a Doctor, by Arthur Kleinman. *Reflective Practice: Formation and Supervision in Ministry*, 40.
- Kleinman, A. M. (2007). *What really matters: Living a moral life amidst uncertainty and danger*. Oxford University Press, USA.
- Kleinman, A., & Kleinman, J. (1991). Suffering and its professional transformation: Toward an ethnography of interpersonal experience. *Culture, medicine and psychiatry*, 15(3), 275-275.
- Kleinman, Arthur. (1988). *The Illness Narratives: Suffering, Healing, and the Human Condition*. Basic books.
- Kleinman, Arthur, and Byron Good. (1985). *Culture and Depression: Studies in the Anthropology and Cross-Cultural Psychiatry of Affect and Disorder*. edited by A. Kleinman and B. Good. Oakland: University of California Press.
- Kleinman, Arthur, and Joan Kleinman. (1991). "Suffering and Its Professional Transformation: Toward an Ethnography of Interpersonal Experience." *Culture, Medicine and Psychiatry* 15(3):275.
- Kuan, T. (2015). *Love's uncertainty: The politics and ethics of child rearing in contemporary China*. University of California Press.
- Kuan, T. (2017). The problem of moral luck, anthropologically speaking. *Anthropological Theory*, 17(1), 30–59.
- Lemmings, Davis, and Ann Brooks. (2014). *Emotions and Social Change: Historical and Sociological Perspectives*. New York and London: Routledge.
- Lefebvre, H. (1991). *Critique of everyday life: Foundations for a sociology of the everyday*.
- Lin, Q. (2013). Lost in transformation? The employment trajectories of China's cultural revolution cohort. *The ANNALS of the American Academy of Political and Social Science*, 646(1), 172-193.

- Li, J., & Wang, H. (2012). Home Ownership and Political Participation in Urban China. *Chinese Sociology & Anthropology*, 44(4), 58–81.
- Liu, Shu-hsien. (1974). "Time and Temporality: The Chinese Perspective." *Philosophy East and West* 145–53.
- Liu, J., Ma, H., He, Y.-L., Xie, B., Xu, Y.-F., Tang, H.-Y., Li, M., Hao, W., Wang, X.-D., Zhang, M.-Y., Ng, C. H., Goding, M., Fraser, J., Herrman, H., Chiu, H. F. K., Chan, S. S., Chiu, E., & Yu, X. (2011). Mental health system in China: history, recent service reform and future challenges. *World Psychiatry*, 10(3), 210–216.
- Lock, M. M., & Farquhar, J. (2007). *Beyond the Body Proper: Reading the anthropology of material life*. Duke University Press.
- Lupke, C. (2005). *The magnitude of ming: command, allotment, and fate in Chinese culture*. Honolulu: University of Hawai'i Press.
- Lutz, C, & White, G. M. (1986). The Anthropology of Emotions. *Annual Review of Anthropology*, 15(1), 405–436.
- Lutz, CA. (2011). *Unnatural emotions: Everyday sentiments on a Micronesian atoll and their challenge to Western theory*. University of Chicago Press.
- Marsella, A. J., Friedman, M. J., Geritty, E. T., & Scurfield, R. M. (Eds.). (1996). *Ethnocultural aspects of posttraumatic stress disorder: issues, research, and clinical applications*. American Psychological Association.
- Marcus, Geroge E., and Michael M. Fischer. (2014). *Anthropology as a Cultural Critique: An Experimental Moment in the Human Sciences*. Chicago: University of Chicago Press.
- Mascia-Lees, F. E. (2011). *A Companion to the Anthropology of the Body and Embodiment* (F. E. Mascia-Lees (Ed.)). Wiley-Blackwell.
- Mosse, D. (2016). An intricate anthropology of care. In *Contemporary South Asia* (Vol. 24, Issue 4, pp. 445–447). Routledge.
- Nelson, Charles, A. Fox, Nathan, A., & Zeanah, Charles, H. (2014). *Romania's Abandoned Children: Deprivation, Brain Development, and Struggle for Recovery*. Harvard University Press.
- Noormohamed, R. et al. (2012). Intervention to Address Intergenerational Trauma : Overcoming, Resisting and Preventing Structural Violence. *Intergenerational Trauma and Aboriginal Youth, Winter*.
- Ng, A. H. S. (2011). Toni Morrison's *Beloved*: space, architecture, trauma. *symplokē*, 19(1-2), 231-245.
- Okonogi, Keigo. 1979. "Japanese Psychoanalysis and the Ajase Complex (Kosawa)." *Psychotherapy and Psychosomatics* 31(1–4):350–56.
- Owen, Stephen. (1996). *An Anthology of Chinese Literature: Beginnings to 1911*. New York and London: W.W. Norton & Company

- Parish, Steven. (2008). *Subjectivity and Suffering in American Culture: Possible Selves*. Springer.
- Parsons, Talcott. (2010). *Social Structure & Person*. Simon and Schuster.
- Pieke, F. N. (2004). Contours of an Anthropology of the Chinese State : Political Structure , Agency and Economic Development in Rural China. *Development*, 517–538.
- Pieke, F. N. (2014). Anthropology, China, and the Chinese Century. *Annual Review of Anthropology*, 43(1), 123–138.
- Qian, L. (2018). The ‘Inferior’ Talk Back: Suzhi (Human Quality), Social Mobility, and E-Commerce Economy in China. *Journal of Contemporary China*, 27(114), 887–901.
- Rene, H. K. (2012). *China's Sent-down Generation: Public Administration and the Legacies of Mao's Rustication Program*. Georgetown University Press.
- Rabinbach, Anson. (1992). *The Human Motor: Energy, Fatigue, and the Origins of Modernity*. University of California Press.
- Richaud, L., & Amin, A. (2019). Mental health, subjectivity and the city: an ethnography of migrant stress in Shanghai. *International Health*, 11(Supplement_1), S7–S13.
- Rofel, L. (2007). *Desiring China: Experiments in neoliberalism, sexuality, and public culture*.
- Rofel, L. (1999). *Other modernities: Gendered yearnings in China after socialism*. Univ of California Press.
- Rosenheck, R. (1986). Impact of posttraumatic stress disorder of World War II on the next generation. *Journal of Nervous and Mental Disease*, 174(6), 319–317.
- Rousseau, C., Measham, T., & Nadeau, L. (2013). Addressing trauma in collaborative mental health care for refugee children. *Clinical Child Psychology and Psychiatry*, 18(1), 121–136.
- Santos, Goncalo; Harrell, S. (2017). *Transforming Patriarchy: Chinese Families in the Twenty-First Century* (S. Santos, Goncalo; Harrell (Ed.)). University of Washington Press.
- Scheper-Hughes, N., & Lock, M. M. (1987). The Mindful Body: A Prolegomenon to Future Work in Medical Anthropology. *Medical Anthropology Quarterly*, 1(1), 6–41.
- Schwab, G. (2010). *Haunting legacies: Violent histories and transgenerational trauma*. Columbia University Press.
- Shaw, R. (2010). Afterword: Violence and the Generation of Memory. *Remembering Violence: Anthropological Perspectives on Intergenerational Transmission*, 251–260.
- Skolnick, N. J. (2020). Relational Psychoanalysis and Temporality Time out of Mind. In *Journal of Chemical Information and Modeling* (Vol. 53, Issue 9).
- Solomon, R. C. (1995). *Emotions in Asian Thought: A Dialogue in Comparative Philosophy, With a Discussion by Robert C. Solomon*. State University of New York Press.

- Shaffer, A., Yates, T. M., & Egeland, B. R. (2009). The relation of emotional maltreatment to early adolescent competence: Developmental processes in a prospective study. *Child abuse & neglect*, 33(1), 36-44.
- Stanghellini, G. (2016). *Lost in dialogue: anthropology, psychopathology, and care*.
- Stanghellini, Giovanni, Massimo Ballerini, Simona Presenza, Milena Mancini, Andrea Raballo, Stefano Blasi, and John Cutting. 2015. "Psychopathology of Lived Time: Abnormal Time Experience in Persons With Schizophrenia." *Schizophrenia Bulletin* 42(1):sbv052.
- Struve, Lynn. (2005). *Time, Temporality, and Imperial Transition: East Asia from Ming to Qing*. University of Hawaii Press
- Tan, Hecheng. (2016). *The Killing Wind: A Chinese County's Descent Into Madness During the Cultural Revolution*. Oxford University Press.
- Throop, C. J. (2012). On Inaccessibility and Vulnerability: Some Horizons of Compatibility between Phenomenology and Psychoanalysis. *Ethos*, 40(1), 75–96.
- Throop, C. J. (2005). Hypocognition, a "Sense of the Uncanny," and the Anthropology of Ambiguity: Reflections on Robert I. Levy's Contribution to Theories of Experience in Anthropology. *Ethos*, 33(4), 499–511.
- Throop, C. J., & Zahavi, D. (2020). Dark and Bright Empathy Phenomenological and Anthropological Reflections. *Journals.Uchicago.Edu*, 61(3), 283–303.
- Tran, A. (2015). Rich Sentiments and the Cultural Politics of Emotion in Postreform Ho Chi Minh City, Vietnam. *American Anthropologist*, 117(3), 1548–1433.
- Trigg, D. (2012). *The memory of place: A phenomenology of the uncanny*. Ohio University Press.
- Trigg, D. (2009). The place of trauma: Memory, hauntings, and the temporality of ruins. *Journals.Sagepub.Com*, 2(1), 87–101.
- Tung, M. P. M. (1994). Symbolic meanings of the body in Chinese culture and "somatization." *Culture, Medicine and Psychiatry*, 18(4), 483–492.
- Tyrer S. (2006). Psychosomatic pain. In *The British Journal of Psychiatry*.
- van der Kolk, B. A. (1994). The body keeps the score: Memory and the evolving psychobiology of posttraumatic stress. In *Harvard Review of Psychiatry* (Vol. 1, Issue 5, pp. 253–265). Informa Healthcare.
- Weller, R. (2012). Responsive Authoritarianism and Blind-Eye Governance in China. In N. B. Dorothy J. Solinger (Ed.), *Socialism vanquished, Socialism Challenged: Eastern European and China, 1989-2009* (pp. 83–99). Oxford University Press, USA.
- Winnicott, D. W. n.d. *The Maturation Processes and the Facilitating Environment*. New York: Routledge.
- Wolf, Margery. 1972. *Uterine Families and the Women's Community*.

- Wright, M. O. D., Crawford, E., & Del Castillo, D. (2009). Childhood emotional maltreatment and later psychological distress among college students: The mediating role of maladaptive schemas. *Child abuse & neglect*, 33(1), 59-68.
- Yan, Y. (2003). *Private life under socialism: Love, intimacy, and family change in a Chinese village, 1949-1999*.
- Yan, Yunxiang. (2010). The Politics of Moral Crisis in Contemporary China. *The China Journal*, 85(1).
- Yang, Guobin. 2000. "Achieving Emotions in Collective Action: Emotional Processes and Movement Mobilization in the 1989 Chinese Student Movement." *The Sociological Quarterly* 41(4):593–614.
- Yang, J. 2018. *Mental Health in China: Change, Tradition, and Therapeutic Governance*. Medford.
- Yarris, K. E. lizabet. (2014). "Pensando mucho" ("thinking too much"): embodied distress among grandmothers in Nicaraguan transnational families. *Culture, Medicine and Psychiatry*, 38(3), 473–498.
- Yang, Peidong, and Lijun Tang. 2018. "Positive Energy": Hegemonic Intervention and Online Media Discourse in China's Xi Jinping Era. Vol. 16. Article.
- Yu, Shelly, Sarah D. Kowitt, Edwin B. Fisher, and Gongying Li. 2018. "Mental Health in China: Stigma, Family Obligations, and the Potential of Peer Support." *Community Mental Health Journal* 54(6):757–64.
- Zhang, C., Fong, V. L., Yoshikawa, H., Way, N., Chen, X., & Lu, Z. (2019). The Rise of Maternal Grandmother Child Care in Urban Chinese Families. *Journal of Marriage and Family*, 81(5), 1174–1191.
- Zhang, L. (2020). *Anxious China: Inner Revolution and Politics of Psychotherapy*.
- Zhang, L. (2019). *Anxious China: Inner Revolution and Politics of Psychotherapy*. University of California Press.
- Zhang, L., & Ong, A. (Eds). (2015). *Privatizing China: Socialism from Afar*. Cornell University Press.
- Zhang, Y. (2012). *Transforming Emotions with Chinese Medicine: An Ethnographic Account from Contemporary China*. State University of New York Press.
- Zhou, X., & Hou, L. (1999). Children of the Cultural Revolution: The state and the life course in the People's Republic of China. *American Sociological Review*, 12-36.
- Zournazi, Mary, and Isabelle Stengers. (2002). "A 'Cosmo-Politics'--- Risk, Hope, Change." Pp. 244–72 in *Hope: New Philosophies for Change*, edited by M. Zournazi. Pluto Press.