
**DEPOLITICIZING TOBACCO'S EXCEPTIONALITY:
MALE SOCIALITY, DEATH AND MEMORY-MAKING
AMONG CHINESE CIGARETTE SMOKERS**

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*A possible vicissitude of such fatal moments is that
one could become voiceless—not in the sense that one does
not have words—but that these words become frozen.*

Veena Das¹

Shortly before he died, Wu Fengping reached under his hospital mattress and pulled out a stack of photos for me to view. The stack had been tucked near Wu's right shoulder. Often examined and discussed, the photos were reminders for Wu, his spouse Tang Mei, and various visitors of a time before disease devastated his life. Most of the photos feature Wu at holiday events together with family and friends.

When I met them in late 2003 at the Yunnan Provincial Tumor Hospital, Wu was 32 years old, Tang Mei 27. The two had spent nearly all their lives in Chuxiong prefecture, 250 kilometers west of Kunming city. In July 2003, chest pain prompted Wu, a county-government electrician, to seek out health care. Initially, Tang Mei and Wu spent eight days in a Chuxiong clinic and then departed for Kunming and the province's most touted cancer treatment center. By then diagnosis was unequivocal: small cell undifferentiated carcinoma of the lung. As is often the case with lung cancer throughout the world, the slow appearance of symptoms had meant that Wu's diagnosis had arrived too late for treatment to be of much use. Surgery was ruled out. Numerous rounds of expensive chemotherapy were tried and proved ineffective. Wu was completing what would be his final series of chemotherapy infusions when we met. He was a shadow of his former self, ashen and weighing about half his earlier weight. He wore an oxygen mask much of the time and was receiving heavy doses of the narcotic analgesic, Dolantin.

¹ Veena Das, *Life and Words: Violence and the Descent into the Ordinary* (Berkeley: University of California Press, 2006), p. 8.

In early February 2004, when treatment had obviously failed, in accordance with his parents' request, hospital staff arranged an ambulance to deliver Wu home. Several of his personal items were positioned in the ambulance alongside his gurney. Included among these was a simple red nylon satchel. On its side, the satchel sported the copyrighted logo of a Yunnan-based enterprise. In distinctive calligraphy, the logo stated Red River (红河), the name of one of the more prominent cigarette companies in contemporary China and Wu's favorite brand during most of his decade and half as a smoker. Since its founding in the early 1990s by regional government officials, the Red River Tobacco Factory has packaged its locally grown tobacco in Marlboro-like red-topped, white-bodied boxes, and marketed its cigarettes, rolled by newly purchased European and US machines, through familiar tropes of hyper-masculinity. The most common advertising copy for Red River cigarettes in recent years features either a group of oversized bulls galloping across a valley or a vermilion Formula-One race car surging directly at the viewer.

Five days after I watched his ambulance slowly make its way out of the crowded grounds of the Yunnan Provincial Tumor Hospital, Wu Fengping died.

Wu's story is more than that of a "death narrative". It is also a story of mobilization and immobilization. Daily for fifteen years, Wu spent time and money on cigarettes. When he fell ill, large sums of his and his family's energy and savings were devoted to his treatment. Left behind by his death and deeply bereft are a number of people, most immediately his elderly parents, elementary-school-educated wife, and Ruirui, his now-six-year-old son. In the years to come, this family can expect growing hardship as it tries eking out subsistence in the countryside without its former hardy male wage-earner. Despite their tragedy, neither Wu, his wife, nor his parents have ever articulated clear feelings of victimhood to me, whether before or after his death. Nor have they expressed noticeable anger about his demise. Months after the death, Wu's parents told me that they felt disappointed that even the province's vaunted and expensive cancer center could not cure their son; and Wu's wife expressed deep fears about what the future held for her and Ruirui. All three adults also noted the irony that it was the cigarettes Wu so enjoyed that doctors had indicated caused his cancer. Still, none of them entertained any feelings that they or Wu had been tangibly wronged, not even by the producers of Red River cigarettes. A blaming of the industrial and governmental sources of Wu's poisoning has been immobilized.

This Yunnan family speaks to troubling phenomena oft present in the PRC today. From young adulthood, people, mostly men, spend substantial slices of their families' incomes to support nicotine dependencies. Then, book-ended by an all-too-brief period when diagnosis signifies outbreak of a dire tobacco-induced disease and when death eventually strikes, many of these people and their families pay out large proportions of household savings for frequently fruitless medical treatment. Yet, imperceptible among them is blame-making directed at institutions responsible for producing the very cigarettes precipitating the disease.

In this article, I explore these troubling phenomena in terms of a specific set of Chinese citizens whom I have been interviewing recently, men like Wu and their families, people who have been struggling in China with perhaps the most notorious of tobacco-related diseases, lung cancer.² Tapping and extending social theory on mass death, I argue that three socio-historical forces have been especially pivotal in producing and depoliticizing everyday experiences with this disease. First, like people elsewhere in the world, residents of the PRC have come to encounter a paradoxical situation: government authorities that are, on the one hand, reliant on a politics of protecting the nation's health and, on the other, profiteering off a commodity, the cigarette, which is highly addictive, modestly priced and acutely toxic. Second, owing to subtle historical processes that have come to fuse cigarette smoking, life enhancement and male sociality, men have felt a deep need to consume tobacco. Third, after lung cancer diagnosis occurs, the legibility³ of hostility toward tobacco producers is muddled by memory-making, particularly regarding the sick man's past years exchanging cigarettes with other men.

Tobacco Death in Broader Perspective

Lest we risk revivifying repugnant colonial-era "Sick Man of Asia"⁴ stereotypes, analysis of tobacco-related disease in the PRC today must always be contextualized in terms of what is a wider, indeed global, disaster. About a

² Over the last three years, during interviews with residents in my primary research site, Kunming, as well as briefer discussions with persons hailing from other rural and urban PRC locales, lung cancer has been by far the disease most widely and intensively attributed to cigarette smoking. China's national media reports that lung cancer has now replaced stomach cancer as the leading cause of death among all types of cancers in China. Dingding Xin, "Mapping of Fatalities Forecasts Death Trends", *China Daily*, 7 August 2004. Large cancer registries and mortality surveys indicate that nationwide recently (a) lung cancer has been the most prevalent form of cancer overall and most common among men; and (b) breast cancer has been the most prevalent form among women. Ling Yang, D. Maxwell Parkin, Jacques Ferlay, Li Liandi and Yude Chen, "Estimates of Cancer Incidence in China for 2000 and Projections for 2005", *Cancer Epidemiology Biomarkers & Prevention*, Vol. 14, No. 1 (2005), p. 246.

³ Scott has argued that "legibility" is a basic requisite for large-scale social intervention, whether state directed or otherwise. "Any substantial intervention in society" requires legibility, the production of "units that are visible." Whatever the units, "they must be organized in a manner that permits them to be identified, observed, recorded." James C. Scott, *Seeing Like a State: How Certain Schemes to Improve the Human Condition Have Failed*. (New Haven: Yale University Press, 1998), p. 183. For more on the socio-politics of legibility, see Sheila Jasanoff, "Ordering Knowledge, Ordering Society", in Sheila Jasanoff (ed.), *States of Knowledge: The Co-Production of Science and the Social Order* (New York: Routledge, 2004), p. 27-28.

⁴ For a discussion of "The Sick Man of Asia" discourse, see Matthew Kohrman, *Bodies of Difference: Experiences of Disability and Institutional Advocacy in the Making of Modern China* (Berkeley: University of California Press, 2005), p. 224.

third of all people aged 15 and over in the world are consuming in total more than five trillion cigarettes annually. That is triple the number of cigarettes consumed in 1950.⁵ The deadly consequences of this colossal amount of smoking are becoming increasingly patent. Cigarettes are now the second greatest cause of mortality and the leading cause of preventable fatality. At least five million people a year worldwide are dying from smoking. If current smoking rates persist, a billion people will probably die from tobacco-related diseases between now and the end of this century, the vast majority of them in middle-to-lower-income countries.⁶

In contemporary China, approximately 35 per cent of adults smoke tobacco on a daily basis, most in the form of cigarettes. The average cigarette consumer burns through almost two and a half times as many sticks as was the case in 1970.⁷ Knowledge of cigarettes' deleterious health effects has been circulating domestically in recent years both more widely and on more sociological levels. Many Chinese residents today routinely comment amongst themselves about kith and kin that have "died from smoking-related disease" (*siyu xiyan youguan jibing* 死于吸烟有关疾病). Domestic and foreign epidemiologists frequently release new findings about PRC smokers, and the country's government offices and mass media regularly post the following types of data. Cigarettes currently kill over a million citizens a year, a number 40 times greater than annual deaths from HIV/AIDS.⁸ If present trends persist, between now and 2050, the country's annual death toll from tobacco will

⁵ Judith Mackay, Michael Eriksen and Shafey Omar, *The Tobacco Atlas*, 2nd ed. (Atlanta: American Cancer Society, 2006), pp. 32, 50, 72.

⁶ ACS, *Tobacco Control Front and Center at International Conferences: 1 Billion Tobacco Deaths Possible if Current Trends Continue* (2006), available at http://www.cancer.org/docroot/NWS/content/NWS_2_1x_Tobacco_Control_Front_and_Center_at_International_Conferences.asp, accessed 29 May 2007.

⁷ Judith Mackay, Michael Eriksen and Shafey Omar, *The Tobacco Atlas*, p. 99; WHO, *Tobacco or Health: A Global Status Report (Western Pacific - China)* (WHO: Geneva, 1997), accessed at <http://www.cdc.gov/tobacco/WHO/china.htm>, no longer available (29 May 2007); TobaccoChina Online, *China's Tobacco Industry Registers Balanced Growth of Cigarette Production, Sales, 2007*, available at: <http://www.tobaccochina.com/englishnew/content.aspx?id=28726>, accessed 30 February 2007.

⁸ Bao Jing, "Jingzhong: woguo meinian yibaiwanren yinxiyanerwang" (Alarm Bell: Every Year a Million People Die in Our Country From Smoking), 31 May 2006. Also see Bo-Qi Liu, Richard Peto, Zheng-Ming Chen, Jillian Boreham, Ya-Ping Wu, Jun-Yao Li, T. Colin Campbell and Jun-Shi Chen, "Emerging Tobacco Hazards in China: 1. Retrospective Proportional Mortality Study of One Million Deaths", *British Medical Journal*, Vol. 317, No. 7170 (1998). National Center for AIDS/STD Prevention and Control, *2005 Update on the HIV/AIDS Epidemic and Response in China: Ministry of Health, People's Republic of China, Joint United Nations Programme on HIV/AIDS World Health Organization* (Beijing, 2005), available at <http://www.casy.org/engdocs/2005-China%20HIV-AIDS%20Estimation-English.pdf>, accessed 29 May 2007.

jump as much as 300 per cent.⁹

In light of this situation, it is clear that scholars must investigate more than just generative processes of tobacco production in China. Also to be examined is why “smoking-related” deaths are increasingly ravaging families, often accompanied by acute sensations of grief and loss, yet expressions of victimization and anger are all-too-often inaudible.

Theorizing Mass Death

Analytical discussions of human annihilation, albeit rarely regarding tobacco, have been numerous within the humanities and social sciences of late. Animating many of these discussions is a book by the political philosopher Giorgio Agamben. In *Homo Sacer: Sovereign Power and Bare Life*, Agamben inquires into a paradox: how do massive appearances of *homo sacer*—an ancient Roman phrase meaning a “life that may be killed without the commission of homicide”—surface in settings where government legitimacy hinges on protecting citizens’ wellbeing?¹⁰ Borrowing from Karl Schmitt, Agamben argues that this paradox is generated through “states of exception”.¹¹ These are contexts wherein sovereignty affirms itself by enacting and suspending law and/or broad societal tenets. They are also contexts in which sovereignty “creates and guarantees the situation that the law needs for its own validity”.¹² Agamben emphasizes that war is the most significant articulation of states of exception in our modern epoch; in war, sovereignty at once protects the masses and eradicates them. He further argues that key to facilitating an exception and its production of *homo sacer* are discourses distinguishing life, in particular “the simple fact of living” (a bare life) in juxtaposition to the equally normative “way of living” a good and proper life.¹³

I would suggest that there are at least two related and under-explored levels of Agamben’s thought which this article might serve to advance. The first pertains to where one looks for states of exception. Recent applications of Agamben’s ideas have often echoed his stance that, in war, we find the paradigmatic “materialization of the state of exception”.¹⁴ What though of

⁹ Xin Wang, “Mingtian shangchang chaoshi jinzhi maiyan” (Tomorrow Shopping Malls and Super Markets Will Spread out Banning Cigarette Sales), *Qianhua Wang*, 30 May 2006. Also see Bo-Qi Liu *et al.*, “Emerging Tobacco Hazards”.

¹⁰ Giorgio Agamben, *Homo Sacer: Sovereign Power and Bare Life* (Stanford: Stanford University Press, 1998), p. 165.

¹¹ Carl Schmitt, *Political Theology: Four Chapters on the Concept of Sovereignty* [Studies in Contemporary German Social Thought] (Cambridge: MIT Press, 1985).

¹² Giorgio Agamben, *Homo Sacer*, p. 17.

¹³ Giorgio Agamben, *Homo Sacer*, p. 1.

¹⁴ Giorgio Agamben, *Homo Sacer*, p. 174. Examples include Judith Butler, *Prekarious Life: the Powers of Mourning and Violence* (London: Verso, 2004); Steven Caton, “Coetzee, Agamben, and the Passion of Abu Ghraib”, *American Anthropologist*, Vol. 108, No. 1 (2006), pp. 114-23; Achille Mbembe, “Necropolitics”, *Public Culture*, Vol. 15, No. 1 (2003), pp. 11-40.

other domains producing “unprecedented biopolitical catastrophe”¹⁵ which are no less part of contemporary contexts? For instance, what about the domain of consumer products? How can that sphere simultaneously underwrite life’s promotion and obliteration?¹⁶

The second level to be considered is depoliticization, or how annihilation wrought by states of exception unfolds without eliciting significant public outcry. Agamben avoids conventional explanations like fear of government retribution for understanding depoliticization. Other approaches are needed, he suggests, including those which allow us to make sense of dynamics stitching together discourses of life and the “embodiment of homo sacer”.¹⁷ Of greatest importance for him are those dynamics that reduce humanity to the most rudimentary aspects of life. What about other dynamics, however? The second part of this article examines means by which, in China, highly gendered notions of the good life have been interacting with embodied memories to defang, defuse and demobilize the anger that might otherwise arise from tobacco-related death.

Tobacco as a State of Exception

Perhaps the most pivotal event to date for alerting the world to tobacco’s dangers and reframing it as a state of exception has been the publication of a specific document. Based on decades of under-recognized research in Europe and North America, the text was generated in the early 1960s by the US government, branches of which have long promoted American Big Tobacco at home and abroad.¹⁸ In the first decade after its release, knowledge of this document circulated worldwide in fits and starts, even among China’s academic and government circles, which were then struggling with Maoist isolationism and radicalism.¹⁹ The text is the 1964 US Surgeon General’s

¹⁵ Giorgio Agamben, *Homo Sacer*, p. 188.

¹⁶ An allied intervention, one calling for a reorientation of Agamben’s approach around transnational economics, is provided by Subhabrata Bobby Banerjee, “Live and Let Die: Colonial Sovereignties and the Death Worlds of Necrocapitalism”, *Borderlands*, Vol. 5, No. 1 (2006), available at <http://www.borderlandsejournal.adelaide.edu.au/issues/vol5no1.html>, accessed 29 May 2007.

¹⁷ Giorgio Agamben, *Homo Sacer*, p. 165. By embodiment, I believe Agamben means here the ways that bodies come to be produced by and productive for sociopolitical formation. Also see Thomas Csordas, “Embodiment as a Paradigm for Anthropology”, *Ethos*, Vol. 18, No. 1 (1988), pp. 5-47; C. Chris Shilling, “Embodiment, Experience and Theory: In Defence of the Sociological Tradition”, *The Sociological Review*, Vol. 49, No. 3 (2001), pp. 327-44.

¹⁸ Richard Kluger, *Ashes to Ashes: America’s Hundred-Year Cigarette War, the Public Health, and the Unabashed Triumph of Philip Morris*, 1st ed. (New York: Alfred A. Knopf, 1996); Robert Proctor, “The Anti-Tobacco Campaign of the Nazis: A Little Known Aspect of Public Health in Germany”, *BMJ*, Vol. 313 (1996), pp. 1450-53.

¹⁹ For instance, Dr. Weng Xinzhi, oft-touted as the “father” of contemporary China’s anti-tobacco movement, has noted that he quickly learned of the 1964 Surgeon General’s Report and it had a catalyzing effect on his activism, which began in the late 1970s. In the

Report "Smoking and Health".²⁰ A multitude of scientists and public health officials in innumerable countries have generated a flood of fresh studies and reports since 1964 clarifying and heightening global recognition of the Surgeon General's belated findings, that cigarette smoke is death-inducing. This has, in turn, let loose strong pressure upon governments to act.

One of the more frequently discussed registers upon which governments have responded over the last three decades has been regulative. Under a banner of public health, governments have been moving to delimit where, how and for whom tobacco may be produced, marketed, distributed and consumed. Much of this work has involved top-down policy and legislative action. In this regard, the most overarching initiative to date has been the World Health Organization's Framework Convention on Tobacco Control (FCTC), initiated in 1995 and since 2003 ratified by over 148 countries. This new tool of global governance requires nations to take multiple steps—such as "adopt and implement effective legislative" measures—"to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure".²¹ The FCTC has been widely praised in the mass media of many countries and by medical leaders as being the world's "first modern health treaty", one promoting "civilized society".²²

Such recent regulatory effort notwithstanding, since the 1960s cigarette sales have more than doubled worldwide.²³

This brings us to a second, less-discussed register upon which governments have been acting since 1964. Recognizing and flouting facts about toxicity and emergent laws regarding product liability/consumer protection, governments have been defining a unique status for tobacco companies.²⁴ This status is being framed through court verdicts in some countries but more often by informal government decisions to avoid prosecutorial activity. It allows tobacco companies to continue selling a product that, as now empirically well established, possesses characteristics like no other in mass circulation. The contemporary cigarette, with its

Maoist era (1949–76), nearly no one in the PRC publicly agitated against tobacco (Weng Xinzhi, personal communication, 27 May 2004).

²⁰ Surgeon General, *Smoking and Health: Report of the Advisory Committee to the Surgeon General of the Public Health Service* (Washington: US Department of Health, Education, and Welfare, 1964).

²¹ Article 3 & 5, WHO Framework Convention on Tobacco Control.

²² For instance, see Canada News Wire, "Landmark Tobacco Treaty Takes Effect on February 27th"(2005); Jong-wook Lee, *Health, Poverty and Human Rights* (WHO, 2003), available at <http://www.who.int/dg/speeches/2003/healthpovertyhumanrights/en/>, accessed 29 May 2007.

²³ Judith Mackay, Michael Eriksen and Shafey Omar, *The Tobacco Atlas*, p. 32.

²⁴ The only country in recent times to adopt an outright moratorium on tobacco rather than opting to regulate it has been Bhutan which in 2004 banned the sale of all tobacco products.

industry-enhanced levels of addictive nicotine and over 400 toxic compounds, when used exactly as intended by manufacturers, will kill half of all regular consumers.²⁵

Forces creating and guaranteeing this unique status, to be sure, have been the nation-state's longstanding treatment of tobacco as an indispensable tool of government financing and its promotion of tobacco as a means of modernist development.²⁶ Worldwide, tobacco taxation occurs on multiple levels. Governments regularly extract revenue by charging duties on imports of tobacco, taxing point-of-sale purchases of cigarettes, and taking a percentage of domestic tobacco companies' profits. Also, in many parts of the world, government branches either own local tobacco companies or closely manage their distribution networks, which means the state also generates income from cigarettes' wholesale.²⁷

How has the cigarette's exceptionality outlined here been unfolding across the PRC? Branches of the Party-state have been formally carrying out *yancao kongzhi* (tobacco control 烟草控制) since the 1980s. Informing this has been appreciation of China's rising tobacco-induced morbidity and mortality as well as a basic tenet of biopolitics: that a key leg in the legitimacy of national governments today is their ability to implement internationally touted means for protecting public health. *Yancao kongzhi*, however, has not meant banning tobacco. Indeed, the Party-state has made no gesture that it desires to outlaw tobacco, something last tried in China with little success by the Ming Dynasty emperor Chong Zhen (1627–44).

Instead, the modus operandi of choice recently has been regulation. Over the last two decades, the Ministry of Health has established a national tobacco-control office and association. Government-run media has disseminated damning information about tobacco's dangers and encouraged people to make smarter lifestyle decisions. State agencies have promoted smoking-cessation initiatives, mandated tar-level reductions, and hosted innumerable local tobacco-control workshops as well as international conferences.

Yancao kongzhi has also consisted of legal intervention. The Party-state, to be sure, has discouraged²⁸ post-Mao litigators from challenging cigarette manufacturers by, for example, tapping seemingly quite applicable consumer protection laws passed in the 1990s, which are now regularly the foundation

²⁵ WHO, *Regulation Urgently Needed to Control Growing List of Deadly Tobacco Products, 2006*, available at <http://www.who.int/mediacentre/news/releases/2006/pr28/en/index.html>, accessed 23 March 2007.

²⁶ Frank Chaloupka, Teh-wei Hu, Kenneth Warner, Rowena Jacobs and Ayda Yurekli, "The Taxation of Tobacco Products", in Prabhat Jha and Frank Chaloupka (eds), *Tobacco Control in Developing Countries* (Oxford: Oxford University Press, 2000).

²⁷ Frank Chaloupka and Rima Nair, "International Issues in the Supply of Tobacco: Recent Changes and Implications for Alcohol", *Addiction*, Vol. 95, Suppl 4 (2000), pp. S477-89.

²⁸ China Development Brief, *Skeletal Legal Aid Requires Flesh and Muscle* (2004).

of plaintiff suits in other commercial domains.²⁹ At the same time, however, Chinese leaders have promulgated and enforced a growing web of regulations delimiting how tobacco can be produced and marketed, and where it may be consumed. Toward this end, in 2005, the National People's Congress ratified the WHO's FCTC.

It is too early to assess the efficacy of FCTC in China. Clear, though, is that regulatory interventions of the previous two decades have been lackluster at quashing the cigarette. The PRC added over 30 million cigarette smokers between 1996 and 2002, and annual Chinese factory output expanded 24 per cent from 1990 to an all-time high of over 2 trillion cigarettes in 2006.³⁰

Like elsewhere, a central engine for tobacco's ongoing pre-eminence in the PRC has been the state, the very body supervising recent tobacco control. After the PRC's founding in 1949, Communist leaders nationalized the country's existing cigarette factories and barred foreign competitors. The factories' new directors, acting in the spirit of revolutionary industrialization, boosted output over the next two decades, as much as fivefold.³¹ In 1976, twelve years after the appearance of the 1964 US Surgeon General's Report, 20th-century China's most prominent smoker, Mao Zedong, died at age 82 of a neurodegenerative disease. That event set in motion, as is well known, the Party-state's ongoing moves to develop the country's broader political economy along unique market-oriented lines. It also created a fresh mandate to expand the country's state-run tobacco industry.

Pent-up "market demand" was only a tangential factor informing this new mandate. Instead, the key catalyst was fiscal problems in governing China's modernist mission. Because no overarching tax system was designed in advance to fill the gap left by the sudden evaporation of most aspects of government financing rooted in Maoist political economics, a sense of fiscal emergency gripped nearly all levels of government in the 1980s and 1990s.³² In response, the Party-state promoted tobacco as a cash cow for government

²⁹ Brooke Overby, "Consumer Protection in China after Accession to the WTO", *Syracuse Journal of International Law and Commerce*, Vol. 33, No. 2 (2006), pp. 347-92; Vivian Wu, "Discerning Consumers Put Traders on Notice over Rights", *South China Morning Post* (3 April 2006), p. A5.

³⁰ Judith Mackay, Michael Eriksen and Shafey Omar, *The Tobacco Atlas*, p. 51; Hong Wang, "Tobacco Control in China: The Dilemma Between Economic Development and Health Improvement", *Salud Publica de Mexico*, Vol. 48, Supplement 1 (2006), pp. 142, 46; TobaccoChina Online, *China's Tobacco Industry*.

³¹ Between 1949 and 1970, total domestic annual production grew from 80 billion to over 392 billion cigarettes. Liu Tienan, *Yancao jingji yu yancao kongzhi* (Tobacco Economy and Tobacco Control) (Beijing: Economic Science Press, 2004), p. 141.

³² Susan Shirk, *The Political Logic of Reform in China* (Berkeley: University of California Press, 1993); Wang Shaoguang and Hu Angang, *The Chinese Economy in Crisis: State Capacity and Tax Reform* (M. E. Sharpe, 2001); Christine Wong, "Fiscal Reform and Local Industrialization: The Problematic Sequencing of Reform in Post-Mao China", *Modern China*, Vol. 18, No. 2 (1992), pp. 197-227.

budgets, far more than ever before. In the 1980s, Beijing encouraged regional governments, especially in the country's poorer inland areas, to pursue tobacco as a self-"development" strategy.³³ They tapped provincial administrators there to borrow from state banks and build fresh and retrofit old cigarette factories. They also signaled county cadres to leverage a new levy, known as the "Special Agriculture Product Tax", applicable only to factory purchases of farmers' bulk tobacco.

Local officialdom quickly responded. Scores of factories were built or "modernized". New brands were launched. Further, farmers were pressured, at times coerced, to grow more tobacco leaf, the price of which is still kept at fixed government-set levels.³⁴ To help oversee these and other aspects of China's expanding cigarette industry, in the early 1980s Beijing created the State Tobacco Monopoly Administration (STMA) and its China National Tobacco Company. Under those two institutions' supervision, impediments to foreign imports have been maintained, save for small token gestures, and tax quotas placed on the backs of local leaders have been ratcheted up.³⁵ The results for tax collectors have been dizzying. From the late 1970s to the mid-1990s, tobacco's percentage contribution to state revenue nearly tripled, becoming the top contributor by industry for several years running at the turn of the millennium.³⁶ Between 1996 and 2006, the PRC's annual receipts from tobacco taxes jumped, in US dollar equivalency, from 10 billion to over 36 billion.³⁷

Seeing Past Authoritarian Smoke and Mirrors

By what means has such a state of exception been depoliticized in recent years among everyday people who are increasingly versed in the dangers of cigarettes and who are being ravaged by tobacco-related diseases?

³³ Seventy per cent of China's tobacco is now grown in its Mid- and Southwest provinces, where it has been responsible for 40 to 80 per cent of overall government revenue in the last decade. Hong Wang, "Tobacco Control in China", pp. 141-42.

³⁴ FAO Commodity Studies, *Issues in the Global Tobacco Economy: Selected Case Studies* (Rome: Food and Agriculture Organization of the United Nations, 2003), p. 35; Y. Peng, "The Politics of Tobacco: Relations Between Farmers and Local Governments in China's Southwest", *The China Journal*, No. 36 (1996), p. 70.

³⁵ Even with smuggling of cigarettes into China, Chinese companies today enjoy a domestic market share of as much as 94 per cent. Kelley Lee and Jeff Collin, "'Key to the Future': British American Tobacco and Cigarette Smuggling in China", *PLoS Medicine*, Vol. 3, No. 7 (2006), p. 1081, available at <http://medicine.plosjournals.org/perlserv/?request=index-html&issn=1549-1676>, accessed 29 May 2007.

³⁶ Liu Tienan, *Yancao Jingji*, p. 169.

³⁷ T.-W. Hu, Z. Mao, M. Ong, E. Tong, M. Tao, H. Jiang, K. Hammond, K. R. Smith, J. De Beyer and A. Yurekli, "China at the Crossroads: The Economics of Tobacco and Health", *Tobacco Control*, Vol. 15, No. Supplement 1 (2006), p. 39; TobaccoChina Online, *China's Tobacco Industry*.

To some observers, the answer to this puzzle might seem quite simple. Party-state authoritarianism, infused by financial interests, has been blocking organized grassroots response to tobacco death. After all, during the last fifty years, Chinese leaders have been on-again-off-again immensely hostile to independent political mobilization.

An analysis privileging fear of government, however, would be analytically indolent. My interviews with lung cancer patients/families have elicited no statements suggesting that fear of governmental reprisal shapes political quietude toward tobacco. Interviewees state that such fear shapes other aspects of their lives, but intimations of it are noticeably absent whenever discussions turned to encounters with tobacco-related disease. Second, popular remonstrance is quite evident in other areas of life, despite political repression. To take an example from another health related event, consider the SARS “crisis” of 2003.

Less than 350 SARS fatalities unfolded across the country during that six-month period. Initially, the Party-state made it clear that it was more interested in ensuring political-economic stability than confronting a new and little-understood disease. Fueled by fears of endangerment and outrage over government deception, outcries were made for action by many a Chinese resident, especially well-educated urbanites, outcries which helped embolden international health organizations and the mass media, both foreign and domestic. With their biopolitical legitimacy at stake, China’s highest level leadership eventually acted. Ministerial officials were sacked and a broad-scale systematic governmental response to the respiratory disease followed.³⁸

Popular ferment regarding SARS should not be seen as extraordinary. Public agitation against that disease needs to be understood as but the tip of the iceberg, as just one among many waves of mobilization carried out by an increasingly restless populace. According to Chinese governmental data, there had been no less than a 67 per cent jump in public “protests” across the country in the decade leading up to the SARS outbreak. In 2003, the year that SARS captured the world’s attention, over 58,000 public protests occurred nationwide,³⁹ and by 2005, long after SARS’s almost complete disappearance, the total number of protests in a single year had jumped by a third to 87,000.⁴⁰ Facilitating these acts of remonstrance has been a sweeping array of grievances and feelings of victimization, many directly involving

³⁸ Arthur Kleinman and James L. Watson (eds), *SARS in China: Prelude to Pandemic?* (Stanford: Stanford University Press, 2006).

³⁹ Murray Scott Tanner, *Chinese Government Responses to Rising Social Unrest* (Santa Monica: Rand Corporation, 2005), available at http://www.rand.org/pubs/testimonies/2005/RAND_CT240.pdf, accessed 30 May 2007.

⁴⁰ Jae Ho Chung, Hongyi Lai and Ming Xia, “Mounting Challenges to Governance in China: Surveying Collective Protestors, Religious Sects and Criminal Organizations”, *The China Journal*, No 56 (July 2006), p. 6.

dissatisfaction with government policies, some local, some national.⁴¹

Why then have persons suffering from tobacco-related diseases not been joining the fray in greater number? Why have people such as Wu Fengping and his family members not been quick to feel and act upon hostility toward tobacco companies, in particular their exceptional privilege to sell products killing a large proportion of customers?

An important answer, no doubt, centers around processes of medicalization.⁴² In China during the last decade, there has been a sharp intensification of healthcare privatization, which has involved surges of commodification, specialization and the peddling of hope across the fields of medicine and pharmacology.⁴³ These processes, along with the decline of Maoist healthcare financing schemes, have given anyone struggling with serious illness little reason to reflect on the socio-political conditions producing that morbidity and much reason instead to focus attention on treatment-seeking, trying to find the best healthcare that money can buy and then, if families' financial resources run out and/or treatment fails, becoming angry at drug manufacturers, medical service providers and government officials responsible for healthcare reform (*yigai* 医改). While conducting my last few years of research, I have observed often how processes of medicalization work to depoliticize tobacco.⁴⁴

Dynamics, Differentiations and Dividends

Here, however, I wish to analyze a different set of dynamics pertaining to life management. My analysis is prompted by Agamben's suggestion that discourses of life and processes of embodiment are important for depoliticizing states of exception. It is also provoked by myopia in Agamben's work. In his writings, he has emphasized the extremity of bare life, the simple fact of living, a level of existence which he demonstrates has clear utility for analyzing war. What, though, of more socially differentiated, even culturally

⁴¹ Elizabeth Perry and Mark Selden, "Introduction: Reform and Resistance in Contemporary China", in Elizabeth Perry and Mark Selden (eds), *Chinese Society: Change, Conflict and Resistance*, 2nd ed. (New York: Routledge, 2003), pp. 1-19.

⁴² For discussion regarding medicalization, see Jonathan Metzl and Rebecca Herzig, "Medicalisation in the 21st Century: Introduction", *Lancet*, Vol. 369, No. 9562 (2007). For a more focused discussion relating to cancer and tobacco, see Samuel Epstein, "Losing the War Against Cancer: Who's to Blame and What to Do About It", *International Journal of Health Services*, Vol. 20, No. 1 (1990), pp. 53-71.

⁴³ David Blumenthal and William Hsiao, "Privatization and its Discontents: The Evolving Chinese Health Care System", *The New England Journal of Medicine*, Vol. 353, No. 11 (2005), pp. 1165-70; Yuanli Liu, Keqin Rao and William Hsiao, "Medical Expenditure and Rural Impoverishment in China", *Journal of Health, Population, and Nutrition*, Vol. 21, No. 3 (2003), pp. 216-22.

⁴⁴ Matthew Kohrman, "Smoking among Doctors: Governmentality, Embodiment, and the Diversion of Blame in Contemporary China", *Medical Anthropology*, Vol. 27, No. 1 (2008), forthcoming.

celebrated forms of existence, such as masculinities and femininities,⁴⁵ or living the “good life” (好生活)?⁴⁶ How might they come to be complicit in producing mass death’s “zone of indistinction between sacrifice and homicide”?⁴⁷

To discern how dynamics regarding gender and the good life come to defang tobacco-related death in contemporary China, we must first consider a persistent contour of those most likely to be poisoned by tobacco in the PRC. As is the case with much of the world, most PRC smokers are male.⁴⁸

Men are 15 times more likely to smoke than their female compatriots in China today, with the rate of male cigarette usage hovering around 60 per cent, whereas among women it is less than 4 per cent.⁴⁹ The effects of these radically divergent smoking rates on mortality are unsurprisingly stark. By the early 1990s, tobacco was already responsible for 1 in 8 male deaths (compared to 1 in 33 for women). If current trends persist, by 2050 1 in 3 male deaths will be tobacco-related.⁵⁰ Perhaps even more arresting, during the next fifty years, no less than 100 million Chinese men are likely to be killed by cigarette usage.⁵¹ One might expect that the cigarette-ravaged beneficiaries of what Connel calls the “patriarchal dividend” would be strong accelerants for popular protest.⁵² That has not been the case.

To flesh out socio-cultural dynamics undergirding this situation, we must consider what men like Wu Fengping and their family have to say. Halfway through one of our first three-way interviews, Wu and his spouse Tang Mei offered the following remarks, which are in many ways typical of the lung-cancer patients I have interviewed.

⁴⁵ Geraldine Pratt, “Abandoned Women and Spaces of the Exception”, *Antipode*, Vol. 37, No. 5 (2005), pp. 1052-78.

⁴⁶ Judith Farquhar and Qicheng Zhang, “Biopolitical Beijing: Pleasure, Sovereignty, and Self-Cultivation in China’s Capital”, *Cultural Anthropology*, Vol. 20, No. 3 (2005), pp. 303-27.

⁴⁷ Giorgio Agamben, *Homo Sacer*, p. 83.

⁴⁸ Worldwide, nearly a billion men and 250 women are daily smokers. Judith Mackay, Michael Eriksen and Shafey Omar, *The Tobacco Atlas*, pp. 22-25, 98-105.

⁴⁹ In surveys conducted across China in 1996 and 2002, 63 per cent and 58 per cent of men over 15 years of age who were interviewed reported that they smoked a tobacco product. For women, the findings were only 3.8 per cent and 2.6 per cent. Chinese Association on Smoking and Health, “2002 nian Zhongguo renqun xiyan xingwei de liuxingbingxue diaocha” (2002 Epidemiological Survey of China’s Smoking Behavior), *Newsletter of Chinese Smoking and Health*, Vol. 62, No. 5 (2004), p. 7; “Infectious Disease Deaths Up Sharply”, *China Daily*, (Beijing: 2004), 12 February 2002.

⁵⁰ Bo-Qi Liu *et al.*, “Emerging Tobacco Hazards in China”.

⁵¹ ACS, *Country and Regional Profiles and Economics of Tobacco Briefs* (Atlanta: America Cancer Society, 2003), p. 116.

⁵² R. W. Connel, “The Social Organization of Masculinity”, in Stephen Whitehead and Frank Barrett (eds), *The Masculinities Reader* (Cambridge: Blackwell Publishers, 2001), p. 40.

MK: Lately, have you been thinking about anything in particular?

Wu: Lots of things. What caused my cancer especially.

MK: Would you be willing to share any of that with me?

Wu: My doctors say smoking, they say smoking is probably the main cause for my cancer. I'm so young, though. And I know so many people who have smoked much more, much longer than me. Look at them, have they all gotten sick? No. And how about Mao, Deng Xiaoping, and all the cadres you always see smoking on TV. They smoke and smoke. Do they all get lung cancer?

MK: So, what do you think is the reason for your sickness?

Tang Mei (Wu's spouse): Smoking.

Wu: Yes, I'm sick because of cigarettes. What does it say on the pack? "Smoking harms health". The government is always telling people to stop smoking because it's dangerous. I just never thought cigarettes would hurt me at such a young age.

MK: Hmm, yes, yes, I know.

Wu: Something else, falling ill like this has been forcing me to think back a great deal about my life. It has been forcing me to look at old photos and think back about all the cigarettes I've smoked over the years. Getting sick really forces you to think back about how your life has gone.

MK: What have been your reflections?

Wu: I started smoking because it was important, so important for being a man. It was important for developing my life ... I started to smoke when I finished high school and began working. Then, once I started, I just kept smoking, because it was important for keeping my life on track, getting along with people, managing problems. And I kept smoking because it was one of the few day-to-day pleasures I had.

MK: Have you been thinking back about anything else?

Wu: Um, yeah, how before graduating high school, my friends and I played around with cigarettes. It was just play. You know, boys playing with men's things. My parents didn't like that I did it because cigarettes are especially dangerous for the very young. But after I started to work, it became important for my life and they had to recognize that. My father smokes. Nearly all my uncles smoke. It's hard becoming an adult in China and not smoking. I mean it's hard to become an adult man and not smoke. On my first day at work, my colleagues started giving me cigarettes. You know, offering cigarettes (*fayan* 发烟). I had to accept and smoke those cigarettes and then every day give some back.

MK: Did you ever exchange cigarettes with women at work?

Wu: No, no, of course not. Just men. Just men. Back and forth. You give cigarettes. They give cigarettes back. It's terribly rude if you don't. This custom is so important for everything men do.

MK: How about for women?

Tang Mei: It's not important and it looks bad. Some [women] smoke, but

they usually hide away. They don't get together and offer cigarettes (*fayan*) like men. For men, offering cigarettes is a must. It makes everything in life go more smoothly.

Wu: That is except if you're unlucky. [Sigh] Then you get sick like me.

Tang Mei: Yeah, what miserable luck. Now, what can we do? Just try to get healthy again, you know, find very effective treatment.

Wu: Yes, all one can do is try to find effective treatment.

MK: Last time we spoke, you told me that you've nearly always smoked Red River brand. Why Red River?

Wu: I had to buy something, and that's the brand I like. We're from Chuxiong [which has its own prefectural cigarette company] but I like the taste of Red River [prefecture's] cigarettes. Red River is a famous, high quality cigarette company. I'm sure you've seen its ads.

MK: Do either of you blame the Red River cigarette company or the officials who created it for getting you addicted to cigarettes?

Tang Mei: Why would we blame them?

Wu: They started the factory to help Red River. Sure, cigarettes are dangerous, they kill people, that's why they put lots of warning labels everywhere. But, if not producing cigarettes, how is a poor place like Chuxiong or Red River going to get ahead quickly? Governments all over the world do this.

MK: So where does the responsibility lie for you and other men like you getting sick?

Wu: Look around. So many people now, men like me, are sickened by years of smoking cigarettes. We push to get into good hospitals, which have more patients like me now than they know what to do with. We get treatment, sometimes lots of treatment, and then, go home and wait to die. I've thought about that. I've thought back, way back, about so many years of my life, all the smoking I've done, all the people I've been with. Responsible? Who's responsible? Aiya! This is just the way things are ... Smoking, that's what men must do. That's what they must do to get along and succeed.

Four points in these comments deserve special attention. First, neither expressed nor implied is trepidation over a tax-hungry authoritarian state. Second, contempt for tobacco companies and/or their governmental sponsors is conspicuously absent. Third, quite apparent is an awareness of tobacco's state of exception: that government has been arrogating authority by simultaneously warning people off of and promoting tobacco consumption. Fourth, strongly present is an impulse to reflect retrospectively on life formation, in particular the ways men in China have been expected to enact and achieve a good life by smoking and exchanging cigarettes. To understand these expectations, their provenance and the roles they have been playing in demobilizing death, a brief historical turn is required here.

Good Life: Cigarettes and Masculinity in an Era of Revolution

In China, the notion that smoking dried leaves can benefit men's lives has been present for more than a millennium.⁵³ A view of tobacco as a vitalizing agent became widespread across China in the 16th century, when European contact helped spread production and consumption of a broader array of crop varieties. As in other parts of the world during the colonial epoch, tobacco was often exalted in China as medicinal and possession of pertinent paraphernalia (for example, snuff bottles and pipes) served to signify stratified forms of "elegant living".⁵⁴ In the late 19th century, as anti-opium efforts expanded, cigarette production began developing in Chinese cities, but the product was slow to take off.⁵⁵ Once advertisers got involved and honed their messages, however, cigarette sales soared. By 1928, over 80 billion cigarettes were being consumed across China a year, most manufactured domestically by transnational corporations.⁵⁶

In the early 20th century, cigarette advertisers experimented with various tropes, many of them, like filial piety, specifically targeting men. Their ad copy blanketed cities and small towns across the country.⁵⁷ By the 1920s, advertisers had honed much of their copy around an overarching biopolitical narrative, mixing notions of modernity, health and physical enactment. This message trumpeted male smoking as an antidote to colonial discourses that had been framing the body politic of China as shamefully enfeebled and backward, epitomized by the label "The Sick Man of Asia". Informed by US advertising techniques, prompted by transnational discourses conflating physical strength and national fitness, and attuned to the resultant desires for men to foster themselves more in terms of *wu* (martial virtue 武) than *wen* (literary attainment 文), Chinese advertisers framed cigarette smoking as an

⁵³ For instance, in the year 225CE, northern soldiers suffering from "tropical miasma" in China's southwest were treated by local residents with instructions to smoke the plant 九叶云南香草 ("Nine-leaf Yunnan grass" *jiuye Yunnan cao*). Yizhi Wang, *Zhiguang yuyan: yunnan yuxi zhuanyan chang fazhan shi* (Bright Yu Tobacco: History of the Yunnan Yuxi Tobacco Factory's Development) (Kunming: Yunnan People's Press, 1992), p. 44.

⁵⁴ Iain Gately, *Tobacco: The Story of How Tobacco Seduced the World*, 1st American ed. (New York: Grove Press, 2001); Timothy Brook, "Smoking in Imperial China", in Sander Gilman and Xun Zhou (eds), *Smoke: A Global History of Smoking* (London: Reaktion Books, 2004), p. 88.

⁵⁵ Frank Dikötter, Lars Laaman and Zhou Xun, *Narcotic Culture: A History of Drugs in China* (London: C. Hurst, 2004).

⁵⁶ Sherman Cochran, *Big Business in China: Sino-foreign Rivalry in the Cigarette Industry 1890-1930* (Cambridge: Harvard University Press, 1980), p. 234.

⁵⁷ Cigarette ads reached far beyond China's Eastern treaty ports quite early in the 20th century. In 1910, one commentator on tobacco advertisements in the Southwestern city of Kunming noted that there is "hardly a bare wall in the town that is not brightened by the flaming posters". O'Brien-Butler, *Records of the British Foreign Office* (London: Public Records Office, 1919), FO 371/864, no. 8889. Also cited in Sherman Cochran, *Big Business*, pp. 21-22.

easy and snappy way to foster a more muscular style of masculinity that, in the Social Darwinist vernacular of the moment, would “save China”.⁵⁸ Crafted for a heterosexual audience, and blending a heady mix of ethics and erotics pertaining to vitality, health, science and modernism, this advertising barrage was designed to encourage Chinese men to embody a fresh form of male life understood as constitutive of a new *telos*: a strong and independent Chinese nation-state. It directed Chinese men to “light up” freshly rolled sticks—marketed under brand names including Progress (*Jinbu* 进步), Armed Forces (*Guojun* 国军) and New China (*Xinzhongguo* 新中国)—and become the breathing spirit of an emergent Chinese nationalism.⁵⁹

China’s early cigarette marketers also targeted female consumers, and images of women played a significant part in early tobacco advertisements. Cigarette smoking, however, did not become as deeply embraced as a positive marker of Chinese womanhood in this period as it did for Chinese manhood. Probably, a key deterrent was how cigarette smoking for women was so often depicted in terms of sexual attractiveness and availability, something that ran afoul of longstanding discourses about female propriety.⁶⁰

Cigarette use was initially marketed as something almost always done individually and privately by women, often as a personal tool for claiming association with foreign-coded forms of independence and wealth. Those representational moves were also visible in some distinctively male-oriented marketing copy. But just as often advertisers framed smoking as something men should do in groups, as a collective practice enabling the individual man to live a better, more modern life by transcending erstwhile social boundaries and forging novel alliances. In other words, unlike for women, the utility of cigarettes for men was to facilitate relationships with other men.

After nationalizing the country’s sprawling tobacco industry in the early 1950s, Communist authorities took steps to boost consumption in ways that, as it would happen, reinforced male smoking. They not only increased the supply of cigarettes available for inexpensive cash purchase, satisfying existing smokers, but also took steps that helped enlist new customers, especially among men.

Cigarettes became a formal part of the kit of basic supplies issued to every member of the young nation’s new warrior/hero ranks, the People’s Liberation Army. In addition, vouchers for free cigarettes were issued to civilians. In the planned economy’s multi-pronged rationing system, tobacco vouchers (香烟

⁵⁸ Susan Brownell, *Training the Body for China: Sports in the Moral Order of the People’s Republic* (Chicago: University of Chicago Press, 1995); Frank Dikötter, *The Discourse of Race in Modern China* (London: Hurst, 1992); Kam Louie, *Theorising Chinese Masculinity: Society and Gender in China* (Cambridge; Oakleigh: Cambridge University Press, 2002).

⁵⁹ Lin Hong and Leisheng Qiu, *Zhongguo laoyan biaotu lu* (A Record of Chinese Old Cigarette Package Designs) (Beijing: Zhongguo Shangye Chubanshe, 2001).

⁶⁰ Yang Gonghuan, personal communication, 15 December 2003. I am also indebted here to conversations with Carol Benedict.

票) were handed out once a month,⁶¹ not to individuals but to family units. Allocations were not adequate to satisfy multiple smokers' habits in a family, but they were enough to fuel one or two persons' addiction. And because of the ongoing symbolism conflating manhood with smoking, as well as the importance bestowed on cigarettes in a young Communist society bereft of nearly any other pleasure-oriented commodity good, cigarette coupons were commonly controlled and used by male family heads and their sons as enunciations of patriarchal vitality.

Cigarette packaging continued to symbolically emphasize masculinity. Most cigarette packaging was redesigned after 1949, and much of it has been repeatedly tweaked further in concert with the shifting political and cultural winds of the Maoist and post-Maoist epochs. The general range of imagery, however—joining male performativity, biosocial fitness, vocational success, nation-making and modernity—has remained constant. Consider the packaging for the Maoist-era “Liberation Brand Cigarettes”. Tools in hand, a super-sized young proletarian confidently strides towards the viewer, elevated sturdily by a unified Chinese nation.



**Front Side of Pack
“Liberation Brand Cigarettes”
Mid-Twentieth Century**

In the years since Mao's death (1976), cigarette advertising has become again quite visible and marketing has taken on a less socialist feel. Thus, labels like Liberation Brand Cigarettes have been discontinued and replaced by names like “Bright”, “West” and “Diamond”. The iconic figures, however, have changed little. Current copy for contemporary China's largest cigarette manufacturer, Yunnan's phallicly titled Red Pagoda Cigarette Company, is exemplary. Here our erstwhile proletarian has been repackaged into modern

⁶¹ Starting in some areas as early as the late 1950s, the highly regionalized issuance of *xiangyan piao* did not mean people were precluded from buying cigarettes or loose unrolled tobacco on the open market. Li Xiangsun (ed.), *Lao piaozheng* (Old Coupons) (Shenzhen: Haitian Press, 1999).

mountaineers who, brandishing ice axes, crampons and the most expensive of outdoor ware, boldly ascend a snow-capped peak together. Public relations personnel of The China National Tobacco Company proudly describe this ad campaign as communicating a message of “health, harmony, and development”.⁶²

A final link between smoking and powerful masculinities is the personal role played by government and party functionaries. Thrust before the eyes of Chinese people for over a half a century have been images of the PRC’s largely male leadership exchanging and smoking cigarettes.⁶³ These images, as much as anything else in the PRC, have come to send a clear message: smoking among men is an unabashedly government-sanctioned means for cultivating and enacting male authority and homosociality.

A Sociality of Smoke

By homosociality, I am referring to social ties (however infused with attraction or competition) that are distinguished by the participation of men only or women only and the exclusion of gendered “others”.⁶⁴ As the 20th century unfolded, cigarettes did more than simply insinuate themselves into China’s social fabric. They became constitutive of what Andrew Kipnis terms “particularized male relationality”.⁶⁵ This fusion of commodity and relationality developed because of cigarettes’ accessibility and public imagery. No less significant, though, was the longstanding import given to male-to-male affiliation. At least as far back as the late imperial period (1368–1911), Mann reminds us, “the dominant channels of social mobility ensured that men would spend the better part of their social lives interacting exclusively with other men. This was a culture where we could expect homosocial bonding to reach the state of a very high art. The way men learned to be social was in the company of other men”.⁶⁶

Today, as Wu Fengping’s and Tang Mei’s earlier comments highlight, a pivotal way men learn proper socio-political comportment and strategize about the future is through homosocial smoking. How does such smoking usually occur? Patterns of social and material exchange involve ritualized movements and stylized techniques of bodily action, but also careful

⁶² TobaccoChina Online, “Hongta: Life, Harmony, and Health”, <http://www.tobaccochina.com/zt/2006hongta/tegao.html> (2006), accessed 15 October 2006.

⁶³ Also see Frank Dikötter, Lars Laaman and Zhou Xun, *Narcotic Culture: A History of Drugs in China*, p. 205.

⁶⁴ Martin Huang, *Negotiating Masculinities in Late Imperial China* (Honolulu: University of Hawai’i Press, 2006); Eve Kosofsky Sedgwick, *Between Men: English Literature and Male Homosocial Desire, Gender and Culture* (New York: Columbia University Press, 1985).

⁶⁵ Andrew Kipnis, “Zouping Christianity as Gendered Critique? An Ethnography of Political Potentials”, *Anthropology and Humanism*, Vol. 27, No. 1 (2002), p. 87.

⁶⁶ Susan Mann, “The Male Bond in Chinese History and Culture”, *The American Historical Review*, Vol. 105, No. 5 (2000), p. 1606.

considerations of social status and levels of familiarity, recognition of moment-to-moment instrumental agendas, and appreciations of the understood quality and provenance of cigarette packs that men carry on their person. When two or more men get together, after brief verbal greetings, one will pull out a pack of cigarettes (frequently a pack more expensive than he usually taps when smoking alone), draw out sticks, and then distribute one to each and every man present. After that first round of cigarettes is consumed and a suitable time has passed, another man will *fayan*. This can go on for hours or until the men part.

Interviews with older Chinese smokers suggest that male-to-male *fayan* became far more prominent after 1949. In light of Maoism increasingly celebrating collectivist ethics, epitomized by slogans like “eat from the same pot”, and with post-revolutionary anti-prostitution campaigns further coding cigarettes as transgressive for femininity, people in the young People’s Republic experienced an intensification of an unspoken precept governing sociability: men should “smoke from the same pack”.⁶⁷

Several China scholars have offered comments on *fayan*.⁶⁸ In most instances, the comments have been made as part of each author’s broader discussions of social relations (*guanxi* 关系) and feelings of intimacy (*ganqing* 感情). These are features of contemporary Chinese society nurtured by the last century of political disruption and occupational specialization, a century wherein the need for alliances to accomplish everyday tasks, small or large, has grown immensely. As these authors illuminate, after a century of pitched tumult, *guanxi* and *ganqing* now sit at the heart of modern Chinese conceptions of proper personhood and notions of vital life. For many a Chinese citizen today, the social and moral efficacy one enjoys is significantly defined by and contingent on the depth and display of his/her accrued *guanxi* and *ganqing*.⁶⁹

⁶⁷ Individual cigarettes continue to be exchanged primarily by men. Certainly, women sometimes provide men with unopened packs or cartons as a “gift”. But unless a very high level of intimacy already exists, or unless occurring in sexualized venues like bars or nightclubs, rarely will a woman offer a man an individual cigarette and expect that it will be lit immediately and smoked. One common exception here is weddings, where the bride in many parts of China is expected to greet arriving guests with a tray of treats: expensive loose cigarettes for men and packaged small candies for everyone else. Also see David Wank, “Cigarettes and Domination in Chinese Business Networks: Institutional Change during the Market Transition”, in Deborah Davis (ed.), *The Consumer Revolution in Urban China* (Berkeley: University of California Press, 2000), p. 277.

⁶⁸ Andrew Kipnis, *Producing Guanxi: Sentiment, Self, and Subculture in a North China Village* (Durham: Duke University Press, 1997), p. 46; David Wank, “Cigarettes and Domination in Chinese Business Networks”; Yunxiang Yan, *The Flow of Gifts: Reciprocity and Social Networks in a Chinese Village* (Stanford: Stanford University Press, 1996), pp. 57-61; Mayfair Yang, *Gifts, Favors, and Banquets: The Art of Social Relationships in China* (Ithaca: Cornell University Press, 1994), p. 120.

⁶⁹ Also see Kwang-kuo Hwang, “Face and Favor: The Chinese Power Game”, *The American Journal of Sociology*, Vol. 92, No. 4 (1987), pp. 944-74; Arthur Kleinman and Joan

Occasionally noted but rarely emphasized is the form of gendered social distinction enacted in interactions among *fayan*, *guanxi* and *ganqing*. What many men are doing when they exchange cigarettes amongst themselves and exclude women is more than just building, revivifying, sustaining, and at times redirecting relationships or sentiments. They are also acting to develop and demonstrate belonging in fields of “bodily hexis”.⁷⁰ They are acting to develop and demonstrate belonging in somatosocially defined modalities of life—masculinity—that they and others recognize, however smugly, as being long and inequitably celebrated across China *vis-à-vis* a female “other” and stratified by distinctions of family background, class, education, age, physicality and ethnicity.⁷¹ Of course, not every man in China regularly smokes; most do, but not all.⁷² Rates of daily smoking notwithstanding, the point here is that nearly all men are offered cigarettes by other men, and amongst those who accept such offerings and, in turn, feel obliged to reciprocate, smoking commonly functions as a strong expression of a distinctive way of life, as an annunciation of active participation in a morally sanctioned, gendered sphere of being.

Remembrance and Demobilization

What then of people like Wu Fengping and his family who are stricken by smoking-induced fatal diseases? Agamben’s focus on bare life suggests a lack of remembrance for those killed in states of exception. For example, when concluding his discussion of Primo Levi’s Holocaust icon, Der Muselmann, Agamben states, “mute and absolutely alone”, Der Muselmann “has passed into another world without memory and without grief”.⁷³ We see quite a different situation when we move to the commodity-oriented state of exception that is tobacco in China. First, although some social isolation regularly occurs after being diagnosed with a dire tobacco-induced disease, men like Wu are rarely left alone. They are usually brought under the close supervision of family members and, to a greater or lesser degree depending on socio-economic resources, the therapeutic eye of health care professionals. Second, the social space that men like Wu and their families enter following

Kleinman, “How Bodies Remember: Social Memory and Bodily Experience of Criticism, Resistance, and Delegitimation following China’s Cultural Revolution”, *New Literary History*, Vol. 25, No. 3 (1994), pp. 707-23.

⁷⁰ Bourdieu describes bodily hexis as “political mythology realized, em-bodied, turned into a permanent disposition, a durable way of standing, speaking, walking, and thereby of feeling and thinking”. Pierre Bourdieu, *The Logic of Practice*, trans. Richard Nice (Stanford: Stanford University Press, 1990), pp. 69-70.

⁷¹ For a related discussion of Chinese masculinity, one centering not on tobacco consumption but instead sex, see Tiantian Zheng, “Cool Masculinity: Male Clients’ Sex Consumption and Business Alliance in Urban China’s Sex Industry”, *Journal of Contemporary China*, Vol. 15, No. 46 (2006), pp. 161-82.

⁷² See note 49 above.

⁷³ Giorgio Agamben, *Homo Sacer*, p. 185.

diagnosis is a far cry from a “world without memory”. On the contrary, this space is frequently overrun by memory-making.

A key piece in that memory-making, as many readers might guess, is careful reflection on how cigarettes came to enter and play a large role in sick men’s lives. Such review of smoking biographies, though, rarely ever gets framed in terms of abstractions like government support for tobacco. Nor does it get framed primarily in terms of a flawed “self” as has been discussed in other cultural contexts.⁷⁴ Reflection instead occurs on registers that are at once far more intersubjective and corporeal. Particularly noteworthy are sentimental recollections of past bodily actions and cigarette exchange by the very man now so acutely sickened—of hands tearing open cellophane wrappers on new brightly colored packs, of hands zealously swapping sticks, of lips drawing in fragrant smoke. Because *fayan* has played such a significant role in everyday *guanxi* formation across China, because the “deep incentive to remember” during the dying process tends to be heavily energized by material culture’s corporeal engagement with the interpersonal,⁷⁵ and no doubt because of how sovereignty is so easily veiled by everyday commodity practices, men like Wu and their family members are prompted to think back and focus on the thousands of cigarettes traded and smoked by the now sickened individual and his kinsmen, workmates, patrons, clients and allies.

As part of their particular memory-making, these men and their families also entertain the question of blame. Not surprisingly, they frequently begin by questioning whether blame should be born by the men’s homosocial exchange networks, if responsibility for disease and death should rest with the male *guanxi* for which the sick had come to feel deep *ganqing*.

Here the production of blame gets deeply mired. Memories of *fayan* are evoked, but how can anyone blame male social intimates for their past behavior, for having acted like men? Recollections of cigarette-swapping are palpable for the sick and their family, but how can they blame the many men with whom the diseased individual had shared over decades, especially the men with whom the most trusted and cherished of relationships have been developed, and usually the greatest number of cigarettes exchanged? How can anyone indict social intimates for having “properly” pursued what, for men, has been understood with increasing intensity over the last century as the good life?

⁷⁴ Scholars have highlighted a distinct form of memory at work among former smokers stricken by lung cancer in North American and Great Britain since 1970. This centers on the smoking self. It evokes reflections of individual culpability. Its retrospective gaze interrogates the smoker for indulging in “‘unsafe’ behavior”. It blames lung cancer survivors, framing their disease as “punishment for living unhealthy lives”. Susan Sontag, *Illness as Metaphor*; and, *AIDS and its Metaphors*, 1st Anchor Books ed. (New York: Doubleday, 1990), p. 113. Also see A. Chapple, S. Ziebland and A. McPherson, “Stigma, Shame, and Blame Experienced by Patients with Lung Cancer: Qualitative Study”, *BMJ*, Vol. 328, No. 7454 (2004), pp. 1470-74.

⁷⁵ Elizabeth Hallam and Jenny Hockey, *Death, Memory and Material Culture* (New York: Berg, 2001), p. 3.

Three lung cancer patients who I have interviewed in recent years give voice to these fraught dynamics.

Xu Rongli

Here in the hospital, it's hard sleeping, especially on nights after receiving chemotherapy. Often I lie in bed in the middle of the night and wonder who is to blame for this situation? It's so complicated! I'm sick because of cigarette smoking, right? Do you know how many people have given me cigarettes? So many! The people I work with. My cousins. My old classmates. My neighbors. Am I to blame them for this sickness? Of course not. But those are the people with whom I've smoked all these years. They've given me cigarettes, I've given them cigarettes, they've given me cigarettes.

Zhang Jie

My doctors say I'm sick because I smoked. So, of course, I ask myself, all those years, why did I smoke so much? I started in middle school, stealing cigarettes from my dad. My friends and I used to sneak off and smoke together. Sometimes they'd supply the cigarettes. Sometimes I'd supply them. Acting like big shots. Trying to be a "real man" (*nanzihan* 男子汉) ... Since then, everyone has gotten addicted to nicotine. And everyone who's made more money has been buying better, more expensive cigarettes, using them to make connections (*guanxi*). Before I got sick and quit, every day, like everyone else, I'd be tossing cigarettes at others from packs that were each 10, 15, 20 yuan. What fun! But [sigh], that's what caused me to be in this desperate situation. All of us smoking so much ... Now, my wife sometimes gets frustrated when friends come to visit me and she sees them exchanging cigarettes. I understand her frustration. But it's not like we can criticize them. Those are my friends. It would be rude.

Lin Xupeng

Cigarettes were so much a part of my life for so many years. To think back now and know that's what's killing me. Strange, so strange. Everything of importance I've done in my life, all the things making me feel good have involved getting together with others, developing relationships, and smoking. And when I wasn't with others giving cigarettes or receiving cigarettes, I'd be off by myself smoking, using cigarettes to manage my mood. My *gemen* [literally "brothers", but idiomatically meaning a man's "male associates"] and I used to joke by saying, how can any of us live without cigarettes ... Now here I am, so sick ... I wonder sometimes if any of them feel bad for giving me so many cigarettes all those years. If it wasn't for them, who knows if I'd have smoked so much. I quit once or twice but it never stuck because I always had to smoke with my *gemen* or smoke to help business along.

Jun Jing describes a case where kin-based memories of tragedy are transformed into feelings of victimization and even a "political manifesto of

local protest".⁷⁶ For the kin of men sickened by lung cancer, however, the same rarely seems to be the case. Rather than facilitating family members to transmogrify their grief into outrage and protest, remembering through webs of sociality often works to demobilize anger. It diffuses the trauma of lung cancer diagnosis and death, converting it into, at most, compartmentalized knots of reproach.

A Spouse

Last year, after he got sick, I started thinking back about all the cigarette smoking [my husband] did ... So many people were involved ... Like him, his friends, the people he worked with, so many were always pulling out packs and offering cigarettes. On holidays, family members would be offering cigarettes back and forth and smoking. Sometimes I'd even buy [my husband] a carton to share with his friends. And now [sigh] this is all causing us so much pain.

An Adult Daughter

What's that expression? Men who don't smoke will work in vain to ascend to top of the world (*Nanren buchouyan baizaishi shangding* (男人不抽烟白在世上颠)). I remember my dad repeating that in the past. Is that why he smoked so much? ... He began when he was in the army for a few years and then never stopped. Over the years, he and his friends, comrades, brothers were always smoking together. If that's what men do, maybe I should make all those people pay for his hospital bills. Ha! Never. Not possible.

A Father

When he got sick, I'd think back to when [my son] was a boy. His mom and I used to tell him not to smoke. But, then he grew up and got a job. To succeed, he had to smoke with all his colleagues ... His company even gave him a cigarette stipend for business trips. After he started making big money, he'd even buy me fancy cigarettes, really expensive ones at New Year ... Now [sigh] my son is gone. My poor grandchild. Why my son? Why not me? I've smoked much longer. Doesn't seem right ... Maybe I should have pushed him to smoke less. My wife says that sometimes.

Conclusion

A profusion of death worldwide today is being enabled by an intensifying transnational state of exception. Through the internal workings of this exception, government authorities in the PRC and beyond have been shoring up their political-economic might by at once nurturing and regulating cigarette circulation. For many in China, living and dying a premature death from this state of exception has become a journey that, for now, ends without

⁷⁶ Jun Jing, *The Temple of Memories: History, Power, and Morality in a Chinese Village* (Stanford: Stanford University Press, 1996), p. 86.

generating popular outcry. As Wu Fengping stated shortly before departing Kunming: “So many people now, men like me, are sickened by years of smoking cigarettes. We push to get into good hospitals, which have more patients like me now than they know what to do with. We get treatment, sometimes lots of treatment, and then, usually, go home and wait to die”.

Expanding Agamben’s framework, I have argued that ways of living and memory-making are important in depoliticizing this state of exception. A confluence of historical processes have come to configure cigarette-smoking among Chinese men as simultaneously an insistent embodied signifier of masculinity and nearly inescapable interpersonal means of achieving success. It has configured cigarette smoking as a highly masculinized “regime of living”,⁷⁷ as an assemblage of ethical values and political practices that hail male subjects, situating them in webs of homosociality, facilitating their mobility and making them legible among themselves and in juxtaposition to female others.

After a man gets diagnosed with a severe tobacco-induced disease, intensive memory-making of past experiences almost always begins, and invariably much of that retrospection winds its way back through the sickened man’s past ways of living with cigarettes. “Memorialized experience merges subjectivity with the social world”.⁷⁸ Retrospection drifts deep into the sentient, sedimented events of a man’s past and the overlapping cycles of homosocial cigarette exchange that have animated it. With an interrogative eye, retrospection probes back into the cycles of exchange that, for years, had inextricably provided the now all-too-sickened smoker socially protective, vitality-bolstering, conceit-inducing platforms on which to live.

Because of this memory-making and no doubt other factors, an impulse among survivors to mine for wrongdoing is today often directed into the interpersonal biographies of cigarettes offered and received. Ethics of etiquette, reciprocity, sociability and life-formation that have fueled cigarette-swapping as distinctively male all make it difficult for anyone to mobilize beyond, at best, murmured reproach.

This is not a sanguine story described here. Some readers may nonetheless be content with the hope that, in the years ahead, families in China and elsewhere wounded by tobacco’s present reign will come to possess more politically meaningful palettes for reflecting on the sources of their suffering. That may occur. Until then, far more is needed. People inside and outside China should not simply sit idly by and wait. Each of us must step forward. We must demand that those participating in national and international governance rethink current strategies at regulating cigarettes and strive instead to dismantle fully tobacco’s exceptionality.

⁷⁷ Stephen Collier and Andrew Lakoff, “On Regimes of Living”, in Stephen Collier and Aihwa Ong (eds), *Global Assemblages: Technology, Politics, and Ethics as Anthropological Problems* (Malden: Blackwell Publishers, 2005), p. 24.

⁷⁸ Arthur Kleinman and Joan Kleinman, “How Bodies Remember”, p. 717.