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Immortal's Medicine: Daoist Healers and Social Change

Georges Favraud

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Articles

Immortals' Medicine

Daoist Healers and Social Change¹

GEORGES FAVRAUD

This article deals with a Chunyang 纯阳 Daoist transmission between female healers which takes place in the “Transverse Dragon Grottoe-temple” (Henglongdong 横龙洞) situated in the vicinity of Pingxiang City 萍乡市 in western Jiangxi (near the Hunan border). The female masters of this community specialize in women’s internal alchemy (*nüdan* 女丹). They are regionally famous for their medicine that takes care of and heals children. Based on fieldwork observation and written materials gathered between 2004 and 2014, this article follows the transmission of this therapeutic-based Daoist tradition in the course of the 20th century. Its purpose is to shed light on some intrinsic links between Daoism and healing. It also highlights the way this literary and technical practice allows the internalization of rituals, shifts in roles and status, as well as the building of interpersonal networks between Daoist masters and official. These relationships have been instrumental both in the transmission of Daoism during the Maoist era and also more recently in its recomposition since the 1980s.

¹ I first presented this paper at the 9th International Conference on Daoism, organized by Livia Kohn and Thomas Michael at Boston University in June 2014. It formed part of the panel “Daoist Elder Masters Today,” organized by members of the French ANR SHIFU Program. I would like to thank Adeline Herrou, Wu Nengchang, and David Mozina, who participated in the panel and gave fruitful suggestions for its further elaboration. Marine Carrin, Harald Tambs-Lyche, and Catherine Despeux also provided important advice. It appeared earlier in German, in a slightly shorter version (Favraud 2014a). I appreciate the generosity of the German journal and its editor, Dr. Ute Engelhardt, for permitting the republication here.

Huang Fuming 黄复明 (b. 1970) is a female Daoist master who serves as the abbot of the Henglongdong 横龙洞 (Transverse Dragon Grotto) in a suburb of Pingxiang City 萍乡市 in western Jiangxi province. Women masters here not only specialize in women's alchemy (*nüdan* 女丹),² but are regionally famous for their medicine, focusing on the care and healing of children. Now in her forties, Huang Fuming directs the temple and teaches ritual and medicine to younger disciples. Representing a new generation that came to flourish after the Cultural Revolution (1966-76), she studied Daoism with masters of the Henglongdong but also graduated from the Kundao Academy (*kundao xueyuan* 坤道学院) at the foot of Nanyue 南岳, the Southern Peak, near Changsha. Here she studied standardized rituals, academic knowledge of Daoist history and philosophy, as well as managerial skills for a period of two years (see Yang 2011). Today, with the official and modern version of Chinese medicine (TCM; *zhongyi* 中医) quite well developed, Huang Fuming and other Daoist masters have also begun to open their oral and ritual medical studies to the reading of TCM textbooks.³

Based on fieldwork and the study of written materials gathered between 2004 and 2014, I will describe the current healing practices at the Henglongdong, and then particularly analyze the transmission of their therapeutic Daoist tradition in the 20th century. I hope to shed some light on the connection between Daoism and healing, then highlight how the

² Women's alchemy is a late imperial development of physiological or internal alchemy (*neidan* 内丹), a Daoist method of self-cultivation using physical, breathing, and meditative techniques. It has been instrumental in the development of Chinese physiology and medicine, as well as of philosophy and ritual. An important feature of women's alchemy is "beheading the red dragon" (*zhan chilong* 斩赤龙), i.e., ceasing menstruation in order to retain the vital essence of the body (*jing* 精). This essence is then transmuted into vital breathes (*qi* 气) and from there into spirit (*shen* 神). For details, see Despeux 1990; Despeux and Kohn 2003.

³ For the synthesis, westernization, and institutionalization of local medical transmissions into an integrated modern and official TCM, see Hsu 1999; Scheid 2002; Taylor 2005. About its links to the *qigong* movement, see Palmer 2007.

literary and technical practice of medicine opens to an internalization of ritual, possible shifts in social status, and the building of interpersonal networks between Daoist masters and officials. All these were instrumental in the transmission of Daoism under Mao and in its public reconstitution since the 1980s.

Contemporary Healing Practice

The Henglongdong community is heir to the Daoist lineage of Pure Yang (Chunyang 纯阳) in the Xiang River 湘江 basin. Located between the city of Yueyang 岳阳 and the sacred peak of Nanyue, it centers on the famous immortal Lü Dongbin 吕洞宾, aka Lü Chunyang. Having first arisen in the Song, this regional tradition was revived in the early 20th century by the local hermit and healer Zhou Fuhai 周福海, who received various revelations from ancestral master Lü. Afterwards, Zhou became famous for the efficacy of his ritual healing and trained numerous disciples, who continued his teachings. Soon after he disappeared in the 1930s, he was divinized as an immortal master (*xianshi* 仙师) and is now considered as the ancestral founder (*zushi* 祖师) of the contemporary ritual genealogies (of masters and co-disciples; see Herrou 2013) of several Chunyang communities in the area, among them also the Henglongdong (see Favraud 2014b).

Commonly parents or grandparents bring a young child to the temple to be healed, taking advantage of the low cost of ritual healing and herbal remedies. Once they face the healer, the father usually introduces the case while the mother sits on a chair and holds the child in her lap. They address the Daoist master as "doctor" (*yisheng* 医生). Increased prosperity over the last decade, as well as the spread of the national healthcare system, has reduced the number of emergencies, but other ailments are still commonly treated here. Thus Huang Fuming deals with common coughs, fevers, and stomach-aches, but also at times confronts cases that the city's hospital doctors were unable to cure (Kleinman 1980). In addition, many families bring their children every few months, sometimes coming back from Shanghai or Guangzhou once a year, for routine examinations and follow-up care. This reflects a culture

that does not separate health and sickness as drastically as Western medicine, but works with concepts of child development articulating physiological, divinatory, and ritual dimensions.⁴

Diagnosis is made on the basis of questions about particular symptoms combined with a physiognomonic inspection of the child (see Despeux 2003), rather than the better-known pulse-taking of traditional medicine. Huang Fuming first observes the child's face, looking and touching eyes and forehead, cheeks and chin. Next, she asks the child to lift his shirt and inspects his chest and belly. After this, she moves on to palms, fingers, and wrists, inspecting these sites important for body divination (see Homola 2014) where core points of the acupuncture channels (*jingmai* 经脉) are also located. In addition, she typically checks the skin for swelling and fluid retention; if such appears, she makes sure to drain it to facilitate the circulation and renewal of vital breathes (*qi*). While doing all this, she moreover discreetly utters ritual incantations (*zhou* 咒) (see Picard 1991) and draws talismans (*fu* 符) on the child hands and forehead with her hands displaying "hand seals" or mudras (*shoujue* 手诀) (see Baptandier 1994; 2015; Mollier 2003).

The Daoist healer often speaks to the child's family about nutrition, digestion, and defecation. This relates to the important role of the digestive system in the medical theory of the five inner organs and six viscera (*wuzang liufu* 五脏六腑) as well as to the continuity between alimentation and medication in traditional healing systems. She strongly emphasizes the noxious effects of ingesting too much cold food, such as watermelon. This connects to the literary classification of food and herbs into hot (*re* 熱) and cold (*han* 寒) (Héritier 1984). Such food avoidances also work with more specifically Daoist methods of "ritual fasting" (*zhai* 齋), one of the prerequisite for the practice of long life and self-cultivation through

⁴ As Fang Ling has shown (2002; 2013), ritual medicine, based on exorcistic techniques aiming at curing disease and granting salvation, is common in Daoism (including Zhengyi, Quanzhen, and many other regional traditions). Ritual medicine has been part of official medical practice and training as promulgated by the state ever since the Sui dynasty (581-618). Under the Ming (1368-1544), due to the rationalist influence of so-called Confucian doctors (*ruyi* 儒医), it was excluded from the official curriculum.

internal alchemy (*neidan* 內丹). Prescriptions based on this often involve vegetarianism and the avoidance of "strong smelling foods" (*huncai* 葷菜), i.e., meat and fish, alcohol, as well as the five strong vegetables (garlic, onions, and leeks), as it is also often the case in Buddhist contexts. From the perspective of meditation, all these are considered impure and polluting since they exert too much stimulation on the hot breathes of the body. Since Daoist ritual fasting aims at developing a state of clarity and stillness (*qingjing* 清靜) (see Kohn 2010), such nutrients are considered to obstruct health and long life.

Dietetics of this sort serves as a guideline for herbal medicine, an important branch of Daoist healing at the Henglongdong. The female masters obtain wild herbs by gathering them near the temple and in local mountains, by purchasing them from local herbalists, and by cultivating them in their garden. The temple's pharmacy holds several hundreds of medicinal herbs. Once the healer prescribes an herbal concoction, the patient's family goes to the pharmacy, where another woman master prepares the remedy. She instructs them how to cook and administer it, emphasizing the importance of not using herbs to replace Western drugs. The two kinds of treatment are potentially complementary, but never exchangeable.

Henglongdong healers also produce thin cords of moxa, i.e., *artemisia vulgaris* (*ai* 艾), to burn on the acupuncture points of the children. They name this practice "lighting the lamp's flame" (*dadenghuo* 打灯火), and consider it as a kind of "acupuncture and moxibustion" (*zhenjiu* 針灸), despite the fact that they do not actually practice acupuncture with needles. As a form of moxibustion (*jiufa* 灸法), according to a modern TCM definition, this practice corresponds to "a therapeutic procedure involving ignited material (usually moxa) to apply heat to certain points or areas of the body surface for curing disease through regulation of the function of meridians and *zang-fu* organs" (Xie 2002, 495).

However, to understand it fully, we also have to take into account the Daoist use of lamps, involving a ritual fabrication of fire often employed to structure a ritual space (Schipper 1975). "Lighting the lamp" thus aims at stimulating, both physically (heat) and ritually (lamp), the

dynamic structures mapped into the body and the person through acupuncture points and meridians. This approach follows a cosmology that does not separate nature and culture in the way modern science does (Descola 2013). The practice of “lighting the lamp” only appears between the 10th and 5th lunar months, avoiding the hot season, when additional heat is counter-indicated. The last day they resort to this technique each year is the 5th day of the 5th month, the *duanwu* 端午 festival: the beginning of the summer, the mastery of water (usually through the more masculine dragon-boat races), and the expulsion of plagues and calamities. On that day, Daoists at the Henglongdong welcome a crowd of several hundred families.

Daoist Encounters

The story of these healer’s community began in 1947, when the female masters Li Tiantai 李天台, from Liling 醴陵 district on the other side of the Hunan border, and the Pingxiang native Peng Yuandeng 彭元澄, called upon their disciples, sponsors, and protectors to raise funds to buy the temple from a declining Buddhist community, to restore it, and to rename it Henglongdong Chunyangguan 横龙东纯阳观.⁵

As described in contemporary oral testimonials and documented in her tomb stele, the *Li Tiantai zhenren muting ji* 李天泰真人墓亭记, placed next to the temple and dated to 1996, Li Tiantai was born in 1900 in Liling. In her teenage years, she asked Zhou Fuhai to heal her mother who had been confined to bed for three years. When Zhou arrived at their home, he was struck by a strong “predestined affinity” (*yuanfen* 原分) that allowed him to heal her with his rituals.

⁵ According to the Pingxiang Gazetteer, this ancient temple developed gradually and has been restored many times over the past 800 years. In the beginning it was just a thatched hut next to a grotto in a verdant valley east of Pingxiang. Under the Ming, it received the formal title of Buddhist temple (*si* 寺) and was thus known as Henglongsi 横龙寺. The buildings extant today go back to the Qing: two huge halls plus monastic living quarters (Huang 1996, 1126-27).

This “affinity” indicates a perception or feeling of close connection between two people, possibly because of similarities in their horoscopes (see Herrou 2013, 120-23). Independent of the personal will of the individual, “affinity” creates intimate personal relationships, of a mysterious or obscure (*xuan* 玄) nature. When traditional doctors often use it to explain why some could not be healed while another underwent successful treatment; Daoist masters also take recourse to this notion to explain or justify their acceptance or refusal of someone as their disciple. This two-fold aspect of the term points to an underlying connection between healing and ritual transmission. Li Tiantai, too, was struck by Zhou’s power and elected to follow him as a disciple together with various others, notably Zhou Tianhuang 周天煌, another Liling native (see Favraud 2014b).

Based on oral records and two stele inscriptions—the *Chongxiu Peng Yuandeng zhenren mubei* 重修彭元澄真人墓碑 and the *Mubeiji* 墓碑记, both dated to 2002—Peng Yuandeng was born in 1905 in a medical family from Pingxiang. Beautiful and intelligent, she was a natural vegetarian. When she was eleven years old, her parents wanted to marry her off. However, her “eight characters” (*bazi* 八字), the astrological coordinates describing the year, month, day, and hour of birth, did not match three potential suitors. Her parents became ever more desperate in their attempts to secure an alliance, pushing her so hard that she fell gravely ill. They applied various herbal remedies to her without any effect, and only Zhou Fuhai’s disciple, Zhou Tianhuang, finally managed to heal her. Grateful and inspired, she became his disciple and entered the Chunyang ritual genealogy.

Peng Yuandeng being depicted as naturally vegetarian and with a horoscope unfit for marriage, this story underlines the natural spontaneity (*ziran* 自然) of her vocation and her closeness to the “original unity” (*hunyuán* 混元). She went through a period of crisis and rupture, underwent healing and after leaving her family (*chujia* 出家) was resocialized in a Daoist ritual kinship. Her story in many ways is typical of narratives of religious vocation in Daoist monasticism. This, again, underlines a common succession from being ritually healed to entering an apprenticeship process in alchemical and ritual cultivation.

Under the guidance of Zhou Tianhuang and other Daoist masters, Peng Yuandeng began to recite the sacred scriptures (*nianjing* 念经) containing mythical and alchemical knowledge. The practice involves playing music, chanting, and engaging body and breathes to study and activate the texts while establishing clear lines of communication with the divine world during communal rituals. In terms of meditation, the *Mubeiji* notes that she studied the *Huangting jing* 黄庭经 (*Yellow Court Scripture*), an important precursor of inner observation (*neiguan* 内观) and internal alchemy. It works by visualizing and activating ancestral masters, deities, and pure breaths of Dao in the bodily organs.⁶ Furthermore, she learned how to relate these internal explorations of the self and the body to the study of local medicine under the guidance of various Daoist masters, while actively absorbing literary knowledge from the medical classics.

Internalization of Ritual

When the Daoist healers settled in the Henglongdong in 1947, after decades of social and military unrest, there was neither Western medicine nor a public healthcare system in the Chinese countryside. As Peng Yuan 彭园, the son of Peng Yuandeng's brother who still lives in Pingxiang relates, she fulfilled an important function among the people. With the help of local and sometimes unorthodox remedies, such as cormorant spittle (*luci de koushui* 鸬鹚的口水), she healed high fevers and convulsions (*gaoshao choufeng* 高烧抽风), mumps (*saixianyan* 腮腺炎), NS cyanosis (*fagan* 发绀). Once, according to the tomb stele, she even brought a child back to life after he had been declared dead by the hospital physicians: from the Daoist hagiographic perspective, this is a miraculous resurrection. However, she was most well-known for her ability to help

⁶ See Robinet 1993. The *Huangting jing* is the main source on meditation for contemporary female masters in eastern Hunan. It was revealed by Lady Wei Huacun 魏華存 (252-334), later the ancestral master of women's cults and transmissions, especially around Nanyue Hengshan since the Tang dynasty (618-907). See Robson 2009, 184-212.

malnourished children, who were numerous at these times of social unrest. For doing so, she lighted moxa candles on various acupuncture points on their inflated bellies, extracted a yellowish liquid from their fingers with sewing needles, and prescribed herbal remedies to complete her treatment.

After the so-called peaceful liberation (*heping jiefang* 和平解放) in 1949, the Communist rulers instituted severe prohibitions on religious activities in Pingxiang.⁷ According to official sources, they ordered the temple's fields distributed to peasants and forbade all public rituals and devotional activities. Confining the Daoist masters to their living quarters, they made them participate in production work. In addition, they used the temple halls to house an agricultural high-school and a convalescence home for local administrators, notably the staff of the district's Bureau of Commerce (Huang 1996, 1126-27).⁸

Local testimonials, on the other hand, claim that, even when public rituals were prohibited, the Daoist masters still lived in the temple, practicing their basic precepts as well as their breathing and visualization methods in privacy. It is noteworthy that these meditative methods constitute the internalized and invisible side of both Daoist ritual and healing techniques. They involve the ability of the healer to observe the patient's vitality (*jingshen* 精神) and treat the disease in question (see Rochat 1988) as well as the capacity of the celebrant to build the inner chamber of stillness (*jing* 静) at the pivotal center of a communal ritual (see Lagerwey 1987).

Peng Yuandeng's tomb inscriptions reflect this fundamental structure underlying and linking Daoist meditation, communal ritual and healing methods. They explain how she could continue to practice Daoism internally despite the prohibitions. When both religion and society were "forcefully controlled" (*e* 扼), she found support with her softness in the Dao of Heaven (*tian dao zhu ruo* 天道助弱). Doing so, she managed

⁷ Pingxiang is deeply marked by Communist history. After the defeat of the Autumn Harvest uprising of 1927, the Hunan-Jiangxi Soviet was first created there, nearby where the Long March started a few years later, in 1934.

⁸ For a nation-wide overview of this period of the religious history of China, see Goossaert and Palmer 2011.

to “guard the One and maintain perfection, thereby continually communicating with the spirits” (*shouyi cunzhen, nai neng tongshen* 守一存真乃能通神).⁹ This just show how important the invisible aspects of Daoist practice are and how Daoists can move beyond rigid outside constraints rather than confronting and resisting them.¹⁰ In other words, at the time and despite the prohibitions under Mao, several individuals continued to practice their ritual internally while Daoist ritual space (*tan* 坛) retreated from public into the inner life of the masters.¹¹

Throughout the 1950s and 1960s, the Henglongdong healers still treated numerous sick children on a daily basis, using what they call a “immortals’ medicine” (*xianyiyi* 仙医). Despite the modernization and the official ban on “superstitious activities” (*mixin* 迷信), Peng’s and Li’s healing skills remained important locally and served the public interest. Their popularity, moreover, explains why the various Communist officials and cadres of the Bureau of Commerce and Education were willing to coexist with the Daoist masters, sometimes even supporting and protecting their activities from the assaults of more fundamentalist revolutionaries.¹²

Shifts in Social Status

This cooperation, however, did not last, floundering during the Cultural Revolution (1966-1976). In 1969, the Red Star production brigade (Hongxing dadui 红星大队) in charge of overseeing the construction of a

⁹ This expression refers to the aim of the Daoist master to build himself up as a microcosm by returning to the undifferentiated origin of life, from where all forms and destinies continually arise.

¹⁰ This approach to life through non-opposition is found in the *Daode jing* as much as in contemporary Daoist-oriented martial arts, such as taiji quan.

¹¹ *Tan* basically means “altar,” however, it also designates all the persons, instruments, and spirits involved in a ritual, as well as the sociological networks and geographical territory involved in the cult community – not unlike the Christian term “parish.”

¹² For an account of local officials’ behavior regarding religious activities during that period, see Smith 2006.

military railway line came to control the temple and transformed it into a warehouse for stocking electrical materials (see Huang 1996). They expelled all masters and disciples and forced them to return to lay life, to living "in the streets" (*jieshang* 街上), as they put it. Even then, from outside of the temples, some of these women managed to continue their Daoist practices and transmission more or less visibly, through shifts in their social status, made possible by their technical mastery of medicine and by their social networks.

Beyond using their medical skills within the family and neighborhood, some of them engaged in a career of "barefoot doctor" (*chijiao yisheng* 赤脚医生), carrying on Daoist medical conceptions under this official title. As the Chinese healthcare system developed, the Ministry of Health sponsored a large-scale program to train "indigenous paramedics" in the basics of Western medicine, so that they could dispense emergency treatments in the countryside. Zhang and Unschuld suggest that "rather than herbs and acupuncture, antibiotics and western medicines were prescribed and even simple surgical operations commonly done" (2008). Still, *A Barefoot Doctor's Manual*, published by the Revolutionary Health Committee of Hunan Province (1974), shows that biomedical interventions were often accompanied by TCM acupuncture or herbal treatments, "purified" from ritual aspects.¹³ Fieldwork testimonials also confirm that this campaign allowed many Daoist masters of the martial and healing arts from different parts of the country to continue practicing their skills (Favraud 2011). The data invites a renewed study of the barefoot doctors' campaign, while questioning the deep intention of Mao's health policy regarding the development of Chinese medicine.

Yet, Peng Yuandeng went even further. As her nephew puts it, although "one could hardly avoid censorship in public opinion . . . she was charged [by official doctors] to open a pediatrics unit in the Pingxiang city hospital." Her medical skills, their social usefulness, and her social networks thus allowed Master Peng to develop a hospital unit under the auspices of the Chinese official healthcare system, which strove to insti-

¹³ The manual teaches both biomedical anatomy and the body from a TCM perspective, and it contains a dedicated chapter on herbal medicine, displaying 400 different herbs. I thank Catherine Despeux for this information.

tutionalize and standardize Chinese medicine. While the state claims that the overall medical modernization of the country involved getting rid of all “superstitious” concepts and practices—a process David Palmer describes as a “secularization of the body” (2011)—in fact, Peng’s situation may have been not all that unusual. This means that Daoist and other local healers played a much greater role in the unfolding of modern Chinese healthcare and society than previously assumed.

Peng’s hagiography next describes how she suffered from extensive fatigue due to her unceasing medical work. In 1971, with the Cultural Revolution still in full swing, she fell ill and died. In 1982, after Deng Xiaoping had begun the opening policy of the Four Modernizations, the State reestablished the principle of religious freedom at the national level. This provided a legal foundation for Li Tiantai, her disciples, and their official patrons to charge the Red Star Brigade several thousand RMB in rent for their temple. However, it took them three more years to reorganize a personal network with local patrons and district administrators strong enough to restore the temple to its rightful owners and reestablish the liturgy.

Evolving officially into a “space of religious activity” (*zongjiao huodong changsuo* 宗教活动场所), the Daoist community since then has lived under the authority of the city’s Department of Religion, and the party’s United Front Division (*tongyi zhanxian bu* 统一战线部). Contemporary official narrative further legitimizes the temple’s existence by explaining that its ancient architecture is part of the Chinese cultural heritage and claims its location in beautiful natural landscape as part of the development of environmental tourism (see Weller 2006). Such a cultural policy aiming at reviving founding myths and cultural history at several levels of the society serves to strengthen the Nation-State’s legitimacy and identity both inside and outside the country (see David 2007).

In practical terms, this means that district officials of the Bureau of Culture patronize or use temple life for political ends, while Daoist masters sometimes base their own public relations on concepts of cultural heritage and relate to the Bureau of Culture more than to that of Religion. The medical skills of the Daoists, besides forming part of the cultural heritage, also serve as another strong point, since they are useful to the local population (Huang 1996). This official recognition of public useful-

ness in local society greatly helps the Daoist community in their procurement of economic support and political legitimacy, even though some parts of their practice are still labeled "superstitious."

The Henglongdong being an important center of communal activities, its reopening also serves the local officials in building up their personal "channeling zones," i.e., to extend and diversify their sphere of activities, wealth, and power, in a process of liberalization and of decentralization (see Chau 2012). This threefold legitimacy of officially sanctioned religion, cultural heritage, and public interest, along with the new ways local officials came to deal with local society, enabled the Daoist community to restart its ritual and healing openly in the 1980s. This still leaves the question to what extent one should speak of a "revival" and a "reinvention" of religious activities. Is it perhaps better to call it a "re-constitution" of social and religious life in a new context, observable in the public reappearance of communal practices that had been partly lost, partly internalized, and partly diverted (outside what is commonly termed "religion") for several decades?

Healing and Salvation

Li Tiantai died in 1986. Afterwards, her disciple Liu Yangying 刘阳映 (1924-2013), who worked with Peng in the city hospital during the Cultural Revolution, took on the responsibility of the temple's activities and continued to treat children. In 2004, she retired from her healing activities and handed down the direction of the temple and its ritual space to her main disciple Huang Fuming, granting me some interviews in her free time.

In April 1993, Liu Yangying as well as two other Daoist elder doctors from different regions received a patriotic religious award from the National Daoist Association (*Zhongguo daojiao xiehui* 中国道教协会). Distinguished for her dedication to help the people through medicine, this award also states that her medical skills are a way to transmit and to develop Daoism (Ma 2011). It echoes with the discourse of local Daoists referring to Peng's methods as "immortals' medicine." As the tomb stele notes, her practice not only served to heal sick children, but in the same time "to save endangered children by pulling them out as early as possi-

ble from the ocean of suffering” (*jiu huan'er zao tuo kuhai* 救患儿早脱苦海). As Huang Fuming notes, healing children is easier and contains much greater promise. The destinies of adults being more determined and harder to change, it is much more “tiresome” (*wuliao* 无聊) to heal them. The master accordingly emphasizes the importance of the principle of “returning to the origin” (*huanyuan* 还元) and of the divinatory techniques aiming at “correcting destiny” (*gaiyun* 改运) in Daoist ritual and healing. The account goes far beyond merely materialistic medical support (see Berthier 1987; Baptandier 1996).

The concept of “salvation” (*jiu* 救) is pivotal in the relation of Daoism and medicine. It appears first in Laozi’s *Daode jing* as a “structure of care” in connection with the role of the sage and his effort to prolong his own as well as other people’s lives. Laozi’s sage care of the people—as opposed to “rejecting” (*qi* 棄) them—is based on his ability to see and act beyond appearances, by opening his mind to the world in full simplicity and regarding people as “children” (*hai* 孩) (Michael 2015; *Daode jing*, chs. 27, 49, and 52). In the course of history, Laozi’s idea of salvation underwent numerous changes, and their influences on Daoist medicine remains to be systematically studied. In the late Warring States period, it notably developed under the influence of immortality cults and practices, expanded into millenarian and liturgical visions after the 2nd century CE, and grew in conjunction with Buddhist notions, such as compassion (*ci* 慈), especially since the Tang dynasty (618-907) (see Verellen 1992). More recently, it has been imbued with the Christian concept of charity and institutionalized in religious NGOs, e.g., major Chinese religious organizations building hospitals, schools, orphanages, and working with other philanthropic activities (see Laliberté et al. 2011).

To sum up, Daoist medicine as practiced and transmitted in the Henglongdong remains embedded in an ancient “world of knowledge.” This is fundamentally different from modern ideas and practices on many levels. Intellectually it works with the cosmology of the five phases, traditional classification of plants, ancient representations of the body and the individual, as well as a particular understanding of nutrition and ritual purity. In terms of ritual, it utilizes genealogically and orally

transmitted visualization, incantations, and talismans. As far as divination goes, it applies horoscopes and calendars, physiognomy, as well as concepts of fate, affinity of destiny, and personal encounters. Cultually, it emphasizes interactions with invisible entities, a process of returning to the origins of vitality, and ideals of the pure simplicity of childhood.

This system of representation and practice activates a Daoist conception of human life that articulates psycho-physical healing and cultivation, transformation of personal and social life trajectories, as well as this-worldly and other-worldly salvation. And, as the case of the Henglongdong medical tradition has made clear, this ancient paradigm still influences the development of contemporary medical practices and the modern Chinese healthcare system. Common statements that laud the capacity of traditional medicine to prevent pathologies and heal apparently complex diseases are accordingly tentative translations that serve to bridge the paradigmatic gap between two fundamentally different cosmologies. They strive to reconcile the modern separation between the categories of nature and culture (see Descola 2013).

Daoist Strategies of Resistance

Only few of the twenty to thirty female Daoists who lived in the Henglongdong in the early 1950s came back to the temple after religious policy relaxed in the 1980s. Social change in China, from the 1898 reforms aiming at "transforming temples into [modern] schools" (*huimiao banxue* 毁庙办学; see Schipper 2008 [1998]; Goossaert 2006) to the Cultural Revolution (1966-1976), caused significant religious devastation, reducing the number of temples and masters, destroying records, statues and ritual instruments, and fundamentally re-categorizing or eliminating ancient knowledge and institutions.

Nevertheless, fieldwork reveals that several aspects of Daoism continued to be practiced and transmitted outside of temples, in organizations not identified as "religious," even during the hard-core Communist era. These form the foundation that allowed the full reconstitution of Daoism in the public space since the 1980s. Following the case of Chunyang—a regional tradition among numerous others, often hidden in the shadows of the larger, officially sanctioned schools of Quanzhen 全真

and Zhengyi 正一—we can move beyond common interpretations in terms of frontal resistance or dissimulation. Three points are essential in this context.

First, Daoist knowledge and organizations survived through internalization of ritual. They had recourse to a “hidden transcript” (Scott 1990), e.g., an ability to dissimulate and elaborate their skills, opinions and strategies in secrecy or privacy. More than that, they also contained a core technical component of Daoist ritual with meaningful links to physiological alchemy, communal liturgy, and healing practices. The internal aspect of Daoist ritual not only structures and empowers the inner life of the masters, but also develops their agency and their ability to produce healthy relations. Ultimately, it is highly useful in dealing with hostile authorities.

Second, the close articulation of technical (i.e., medical) and ritual mastery (referred to as *fashu* 法术 in the Henglongdong) has allowed Daoist masters to maintain several of their roles in a context of strong prohibition, through shifts in their social status. It shows that their power originates from a non-political source: namely a set of skills based on a worldview for which knowledge of the self and of the world are inseparable. As barefoot doctors or working in State hospitals, Daoists have put their skills into action and continued to transmit their teachings. They also were able to take part in the construction of the Chinese healthcare system, thereby exerting an influence on the building of modern institutions from the bottom up.¹⁴ These facts deeply question the drastic gap politically built by the Communist Party between a patrimonial “old society” (*jiu shehui* 旧社会) and a contemporary “new China” (*Xin Zhongguo* 新中国). Does this “great divide” merit academic credit? Or is it rather the case that Daoist masters continually adapt to, and even par-

¹⁴ As Wu Nengchang noted at the 2014 Daoist conference, Master Dingling 鼎靈 (1929-2013) of Fujian was able to apply his ritual and martial-exorcistic Daoist skills (referred to here as *gongfu* 功夫) in the context of theater performances that served to implement Communist policies as well as educate and “entertain” the rural population with so-called folkloric, orally transmitted plays and mythological narratives. Such cases invite comparison with the Buryat shamans studied by Caroline Humphreys (1999) as “*bricoleurs* of the Soviet world”.

ticipate in, the historical elaborations and changes of Chinese civilization?¹⁵

Third, Daoist communities have long developed strong interpersonal networks with local administrators and the society in general. Indeed, they often play a mediating role between them. Chinese local societies often organize themselves inside temples, taking the form of "cult communities" and inviting ritual masters to coordinate their activities ritually. Daoist masters have thus pivotal roles in such networks of "affinities" and common interests meshed in the neighborhood, which also includes economic and political patrons. As these networks permeate modern hierarchies and institutions, not unlike under the imperial Confucian state, they were instrumental during the prohibitions of the 1950s. In addition, they facilitated and enhanced the masters' shift in social status during the Cultural Revolution and the communities' full reconstitution in the public space since the 1980s.

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¹⁵ Fairbank (1986) suggests that, besides deep technological and intellectual changes, the contemporary history of China can be seen as a new dynastic cycle.

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