



The Pursuit of Wellness: A Sociological Perspective

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Abstract

Health and wellness pursuits are being perceived as integral to the preservation and promotion of health. Wellness refers to self-responsibility and a holistic, preventive and positive approach to health. It refers to a state characterized by a balanced state of mind, body and spirit that contributes to happiness. Wellness promotion is directed not only at those who are sick, but is marketed to individuals who want to enhance their physical, mental and emotional wellbeing. Wellness culture is supported by consumption of various lifestyle products and behaviours. In recent years, wellness has evolved into a global multi-trillion dollar industry. The paper examines wellness from the perspective of consumption and investigates into its sociological ramifications. Attempt has been made in the paper to situate the growth of wellness culture in the societal changes that accompanied modernity. Lifestyle modifications entailed in wellness pursuits have crucial social, political and economic ramifications. As traditional identities weaken and the stronghold of religion loosens, lifestyle choices serve to create identities and the pursuit of health acquires moralistic overtures. The surge in wellness activities is embedded in modernity and its aftermath. It therefore warrants a sociological study to understand the causes and consequences of health enhancing pursuits.

Key Words: Wellness, lifestyle, consumption, body, personal responsibility, virtue

Introduction

Wellness involves the adoption of attitudes, activities, lifestyle choices and consumption habits that enable the pursuit of optimal health (GWI, 2018). Lifestyle choices are the pivot that support the wellness industry. Wellness encompasses the concept of health and happiness that promotes productivity. According to Myers, Sweeney and Witmer (2005) wellness represents a state of optimal health and wellbeing in which a person balances the body, mind and spirit and leads a fuller life. Four principles of wellness referred to by Adams (2003) include that wellness is a multidimensional concept. Wellness research and practice should focus on causes of wellness rather than illness, wellness is about maintaining balance, and wellness is relative, subjective or perceptual.

Increasingly people prioritize wellness and feel impelled to improve their health through consumption of 'healthy foods', dieting, exercise, meditation and relaxation. They seek refuge in holistic systems of health such as yoga, naturopathy and other Asian systems that claim to heal the mind, body and soul. Positive healthcare or wellness promotion is thus directed not only at those who are sick, but extends to all including those who are fit and healthy. Health promotion is a 'multi-sectoral' collaboration whereby preventive health care has moved from the dispensary, clinic and hospital out to all major social sites and urban spaces, including schools and other educational institutions, workplaces and shopping centres (Bunton, 1992).

The paper examines wellness from the perspective of consumption that accompanies modern capitalist society. As discussed earlier lifestyle choices are the pivot that support wellness pursuits. These choices are possible only in modern societies since traditional societies do not support choices. As traditional identities weaken and the stronghold of religion loosens, lifestyle choices serve to create identities and the pursuit of health acquires moralistic overtures. Engagement in health enhancing activities are relegated as virtues in modern societies. The surge in wellness activities can be explained in the context of change that accompanies modernity and its aftermath. Furthermore engagements in health promotive activities have a significant bearing on the 'body' that is the site for consumption and constraints. It is the canvas that displays results of exercise and dieting. Therefore it warrants a sociological study to understand the causes and consequences of wellness. The discussion that follows delves into a sociological understanding of wellness.

Wellness as Consumption

In the contemporary society consumption culture animates public and social system through display and the process of cultural reproduction. Consumer culture is the culture of market society that reiterates the freedom of private choice and private life. It is also a medium of negotiating identity and status in a post-traditional society. In such a society, appearance becomes a privileged site of strategic action in unprecedented ways (Slater,1997). The forces of consumerism are reflected through the body, which mediates social/cultural and biological processes.

Globally, there is a surge in the interest and consumption of wellness. The Global Wellness Institute (GWI) defines wellness as the active pursuit of activities, choices, and lifestyles that lead to a state of holistic health. Despite the COVID induced setback, the global wellness economy stood at \$4.4 trillion in 2020 (GWR, 2021).

In recent years, wellness has evolved into a global multi-trillion dollar industry, encompassing diverse sectors that enable consumers to incorporate wellness activities and lifestyles on a daily basis. Wellness tourism is associated with travel undertaken within and outside the country for health and wellbeing. World Health Organization defines health as a state of complete physical, mental and social wellbeing not merely the absence of disease. The reason behind more than a hundred – million travelers around the world every year seeking health and wellness service is medical rejuvenation, recovery and rehabilitation to name a few. Wellness travel can be differentiated from medical travel, as the former refers to travel focusing on wellbeing and improving the quality of life, while medical tourism involves treatment for a medical condition that needs attention.

Wellness tourism promotes wellbeing and hence motivates people to travel to distant locations. The Global Wellness Institute classifies travellers as primary and secondary wellness travelers. Primary wellness travelers are those whose main objective of travel is wellness centered whereas the secondary wellness travellers indulge in wellness activities during the vacation. There is an increasing awareness among people about the need to adopt a healthy lifestyle and to build a strong immune system. Travelers who are conscious of their health are the potential clients of wellness tourism resorts and health products. India has a consumer centric wellness industry catering to people's choice of health and wellness vacation.

Global Wellness Tourism Economy Summary (2018) reveals that an international tourist incurs 53% more expenditure on wellness as compared to the average international tourist whereas a domestic wellness tourist spends 178% more than the average domestic tourist. There are marked individual preferences for selecting a wellness tourism holiday. These could range from weight management, relaxation, de-stressing, healing, meditation, yoga, adventure, and to connect with self and others. The wellness tourism industry is expanding rapidly and this is reflected in the increasing number of wellness resorts and retreats around the world. Wellness tourism provides travellers an opportunity to transform their lives by achieving their customised wellness and fitness goals. It also aids in the promotion of eco-tourism which involves responsible travel to destinations, conservation and environmental preservation of forests, natural springs, marine life and developing national parks and other resources. The growth of wellness retreats not only contributes significantly to the economy of the host country generating employment for the local people. It also helps in promoting and preserving the cultural heritage and tradition across the world. Jennifer Lang and Betty Weiler (2007) have expressed that Asia is in an advantageous position to become a leader in health and tourism, owing to its ancient therapies and techniques that are centuries old. According to Aggarwal et. al. (2008) wellness travelers visit India to learn yoga and spirituality and that India can be considered as the yoga and spiritual capital of the world.


Wellness culture is inextricably linked with the notion of self-care, through the 'consumption of various lifestyle products and behaviours to improve personal health and happiness (Badr, 2022). Wellness is marketed through a plethora of products ranging from cosmetics, apparel, health foods, supplements, water and air purifiers, wearable gadgets, real estate, and wellness destinations. These are advertised vociferously by the media as a panacea for the preservation and promotion of health and beauty. It is through the consumption of goods and services that wellness enthusiasts create self-identity.

As the health educationists assert that the individuals who conserve their bodies through dietary care and exercise will enjoy greater health and live longer, more and more people begin to feel greater responsibility for their health, body shape and appearance (Featherstone, 2001). Health, fitness and beauty become inextricably linked. There is an increasing emphasis in the present times to 'look good', both as an end in itself and as a means to 'feeling good'. Physical attributes become a reflection of inner traits. A well maintained and

a fit body projects hard work, care, constraint, sense of responsibility and aesthetic bent of mind. Body maintenance becomes a distinct and separate preoccupation in its own right. The members of the middle class are in constant search for new mechanisms that can help in averting the risks to health and adopting those that assist their endeavours at the aesthetic portrayal of the self.

Pursuit of Wellness : Sociological Ramifications

The section below discusses the implications of wellness pursuits on body and construction of personal identities their ramifications on the personal responsibility on healthcare. Furthermore, as religion ceases to be the force that regulates behaviour, the practice of healthist and wellness activities are imbued with virtuous behaviour.



Body as a terrain for the display of wellness With heightened interest in protection and projection of bodies, Bryon Turner's concept of the 'somatic society' used to define a social system in which the body becomes the site where control, constraint and consumption are exercised assumes relevance (1992, p.12). It is also the terrain where the net product attained through exercise and dieting is displayed. Lifestyle modifications entailed in wellness pursuits have crucial social, political and economic consequence. As a result of the growing impetus on body maintenance and beauty culture, health acquires an aesthetic dimension of 'achievement', through the consumption of goods and services that are offered by the market. For Cockerham (2005) health lifestyles are a form of consumption wherein what is produced, is used for something more lasting, such as longer life, increased capacity to work, or enhanced enjoyment of one's physical being.

The commodified body is the focus of the 'keep-fit industry' backed by fibre diets, slimming techniques, gadgets etc. In this 'body-beautiful' culture, the body becomes the target of advertising and consumer luxury. It becomes a vehicle of pleasure and self-expression (Featherstone, 2001). The quest for health and wellbeing is facilitated and endorsed by the market strategies under capitalism. The media— print and image and more importantly social media project image of 'lean' and 'taut' bodies as healthy and desirable. Featherstone writes that "within consumer culture, slimness has become associated with health and health educational message that being overweight is a health risk has become absorbed into conventional wisdom" (2001, p.233).

For Bourdieu (1984) the emancipation and empowerment of personhood, slimness, fitness and youth have become tokens of class and status distinctions. Social success is achieved and no longer ascribed. Success depends on the ability to manage the self by enhancing personal image through trained and disciplined bodies. Featherstone opines “in dense interpersonal environment of modern bureaucracy, an individual’s lifestyle depends upon the ability to negotiate interactions on the basis of ‘personality’. Impression management, style, panache and careful bodily presentation therefore become important” (Featherstone, 2003, p.165). Such a conception of self that pays greater emphasis upon appearance, display and management of impression is referred to as ‘performing self’ and is characteristic of consumer culture.

Assumption of Personal Responsibility: The emphasis on personal responsibility to cultivate health and wellbeing has roots in ancient Galenic medicine. Galen advocated that the art of hygiene enabled persons to live through old age without sickness and pain. The agents of Hygeia included “things to be taken in the body, such as food, drink, air, and physical actions such as massage, walking, gymnastics, sleep, and sexual functions. These substances and activities were to be carefully regulated, particularly the choice of food. Furthermore, Galen prophesied that those who allowed themselves to harm their bodies despite the existence of knowledge and possibilities of prevention were morally culpable. The body came to be perceived as the home of the soul. People felt impelled to care for the body not because health *per se* was desirable, but also because they were accountable to God for its preservation. Hence the regulation of life to promote health was regarded as morally imperative (Reiser, 1985, 9-10). Individual responsibility for health promotion is presented as a means of directing individuals to take responsibility for their own health status, and in doing so, reducing the financial burden on the health care services (Lupton 1995, p.51). Crawford (1977) has expressed concern over excessive emphasis on individual responsibility in healthcare. It often results in blaming the victim for contracting disease. In such a culture, sickness is perceived as equivalent to moral failing on the part of the patient.

Wellness as a Virtue /Morality: Peter Conrad examined the role of moral meanings of health promoting behaviour and their role in promoting wellness. He opines that morality and health are linked whereby “words like health and wellness have a positive moral valence while disease and illness have a negative valence” (Conrad 1994, p. 387). He refers to “wellness as virtue” for eating healthy food, exercising/ yoga and meditation are virtuous deeds and the lapses with regard to them induce guilt. Failure to fulfil their own

wellness expectations often leads individuals to make moral restitution or brings on feelings of guilt. While dieting can be perceived as a battle between good and evil, exercise can be visualised as a means of personal and social redemption (see Conrad 1994, p. 388). Conrad argues that though the wellness movement is secular in nature, it is moralistically inclined. He refers to the pursuit of wellness as a “particular type of moral discourse -"wellness as virtue." By this he means that the pursuit of health and fitness becomes a "good" end in itself.” Regular exercise and good eating become measures of virtue. This helps individuals feel good about themselves, improving their self-image (Conrad, 1994 p. 397).

Fitzpatrick draws parallels between recommendations of religion and those of health promotion. He argues that activities such as gluttony, sloth, lust that were earlier proscribed as sinful are now forbidden in the name of health. Further he notes the similarities between the two: “the devotion to the cause of fitness displayed by the faithful, the spirit of self-denial required to sanctify the body, the zealotry of the newly converted, the dogmatism of the clergy. It appears that health provides some compensation for the decline of traditional religion, both as a focus of individual aspiration and as a secular moral framework for society”. (Fitzpatrick, 2001, p.69).

Lupton reiterates the moralistic connotations of health and wellness practices. She argues that “'Healthiness' has replaced 'Godliness' as a yardstick of accomplishment and proper living”. This is because the recommendations of the healthist lifestyle choices provide direction for ‘righteous living’ that set the standards for the moral regulation of the society (Lupton, 1995, p.4). The pursuit of wellness is therefore guided by a sense of satisfaction that accompanies good deeds. It imbues the wellness activities with moral validation. Such an interpretation serves to justify the expenditure of time, money and energy into health related pursuits. In this secular age, focusing upon one's diet and other lifestyle choices has become an alternative to prayer and righteous living, in providing a means of making sense of life and death. Public health and health promotion, then, may be viewed as contributing to the moral regulation of society, focusing as they do upon ethical and moral practices of the self.

Interpreting the Wellness Revolution

Individualistic explanation for wellness pursuits may range from fortification of health, enhancement of bodily image and attainment of peace and happiness. The individual's rationale is motivated by societal changes marked by the breakdown of traditions and overwhelming dominance of consumer culture.

Giddens notes that, unlike in pre-industrial societies where identities were anchored in tradition, religion or law, modern societies do not ascribe fixed identities. On the contrary the identities in modern societies are the function of the choices made by the concerned persons (1991, p. 84). Given the nature of the reality in the modern world, these identities are plural and fluid. Another significant characteristic of modernity as postulated by Giddens, lies in the fact that it places 'mediated experience' at the centre of social life wherein marketing and advertising shape the choices people make. For Giddens identity formation in modern societies involves a 'reflexive project of the self'. Such a project involves constant self-monitoring, self-scrutiny, planning and ordering of the elements for the creation of the self under consumerism as central to this 'self-obsession' (see Slater, 1997, p.91). Slater regards modernity as 'a recipe for identity-crisis on a mass scale'. It forces individuals to 'choose, construct, maintain, interpret, negotiate', who they want to be seen as, using bewildering variety of material and symbolic resources' (Slater, 1997, p.84). Slater further argues that the characterization of modernity as a mass crisis connects with consumer culture, since consumerism exploits this mass identity crisis by offering commodities that express the identities of their consumers (Slater, 1997, 85). For Featherstone (2003), individuals in modern society are 'excessively self-conscious', 'chronically uneasy about health, afraid of ageing and death'. Appearance, looks, demeanour define the self. Terence Turner (1994) theorizes on the increasing emphasis on the ability of people to present themselves as personal identities pushing themselves against the traditional rigidities of the family, caste and ethnic identities. As achievement takes precedence over ascription as a basis for evaluation and assessment of the individual, the significance once attributed primordial and ascriptive identities is outweighed by attributes rooted in the self. Hence there arises a dire need to project and promote the self through one's appearance.

The need to engage in wellness activities is propelled by the anxiety regarding 'risk' in urban living. The element of risk is integral to modern societies. The term 'risk society' was coined by Ulrich Beck to draw attention to changes introduced by modernization due to technological rationalization. These changes in the

organization of work generate altered lifestyle, forms of love, power and knowledge. 'Everyone is caught up in defensive battles of various types anticipating the hostile substances in one's manner of living and eating' (Beck, 1992, p. 45). Lupton identifies two perspectives to the understanding of risk discourse on health. The first one focuses on the external dangers such as the risk of environmental hazards -pollution, nuclear waste and toxic chemical residues etc. Though the population bears the brunt of these environmental pollutants, they have no control over these factors. Risk also figures in the 'lifestyle choices' of the individual. It is on account of the second factor that emphasis is placed on individual responsibility towards disease prevention and health promotion (Lupton, 2005). Unlike in the past where health and fitness were the natural outcome of daily living, in the present times it becomes an additional responsibility that needs to be fulfilled to protect and preserve health in the risk laden environment. The deteriorating quality of air, water and commercially grown food in urban areas is another cause for anxiety that impels people to invest time money in health promoting pursuits. Cohn (2000) argues that concern over risk directly relates to ideas of individual control and freedom. Cockerham (2005) is of the opinion that healthy lifestyle is cultivated to avoid risk in general and is oriented toward overall health and fitness. There is a conscious effort on the part of the individuals to take control of their health to guard against risk. While not much can be done about the health denying qualities of the physical and social environment, lifestyle remains an essential domain of control to combat the risks in daily lives. Media has played a constructive role in arousing awareness towards risk factors and also about fortification of bodies against such risks.

There has been a surge in lifestyle related diseases and NCDs. Diseases such as cancers, cardiovascular and respiratory diseases, diabetes account for 63 percent of deaths. Most of these diseases are attributed to faulty lifestyle habits such as sedentariness, lack of exercise, consumption of alcohol, tobacco and unhealthy food habits (Traina, 2019, p.145). Lifestyle modification is the key to deal with such diseases. They can either be prevented or managed through modification of lifestyle since they are not amenable to cure through modern medicine. People turn to holistic systems of medicine like Ayurveda, Naturopathy, Yoga, medicine or other Asian systems of medicine because they are high on wellness quotient. They claim to heal mind, body and the spirit without being invasive. Hence they are regarded safe and benign. The element of massage in Ayurveda and Naturopathy along with meditation in Yoga are relaxing and rejuvenating. This explains the surge in the

demand for wellness facilities in parts of the world that specialize in holistic healing. Especially during wellness vacations.

Individual responsibility for health promotion is presented as a means of directing individuals to take responsibility for their own health status, and in doing so, reducing the financial burden of health care services on the State (Lupton, 1995, p. 51). Therefore, despite the enormous amount of personal resources- be it time, money, physical effort, expended on maintenance of the self- is not regarded as narcissism. Rather such personal investment is deemed as a wilful obedience to the duties and obligations imposed by citizenship. In essence, the healthy lifestyle culture can be seen as a moralistic one whereby values such as prudence, hard work, responsibility and asceticism are expressed through pursuits listed above. The impetus to undertake such pursuits under the banner of healthy lifestyles exemplify what Foucault refers to as technologies of the self, efforts humans make to 'transform themselves in order to attain a certain state of happiness, purity, wisdom, perfection, or immortality' (Foucault 1988, p. 18). It is through technologies of the self that aspects of self-constitution are carried out rendering particular images, statuses and identities into being (Ayo 2012, p. 101).

Conclusion

The study of wellness from the sociological perspective helps in the understanding of its popularity and proliferation as a global phenomenon. It is not only embedded in modernity but also sustained by the capitalistic forces of choice and consumption that permeate all aspects of an individual's life- be it health, lifestyle or identity. Lifestyle choices are reflected through social, cultural and biological processes that help forge self-identity. The consumption of goods and services associated with lifestyle choices impart health, an aesthetic dimension. There is an increasing emphasis on 'looking and feeling good' as a mark of wellness. The onus of maintaining health therefore becomes the personal responsibility of the individual as healthist practices are evaluated as virtuous. Inability to maintain health smacks of irresponsible behaviour for which the victim is blamed and made to feel guilty.

The quest for health enhancing pursuits is linked to the anxiety and 'risk' regarding living in industrial cities often characterised by 'health denying' environment. People living in urban areas are compelled to invest in

the fortification of their health to combat risks of toxic air water and food. Wellness pursuits transcend the boundary between disease and health. As a health promoting engagement, it is pursued to boost physical, mental, emotional and spiritual health. It blurs the boundaries between hedonism, discipline, leisure and physical work'out'. Many wellness enthusiasts spend holidays and vacations learning to perform advanced yoga, stamina building exercises, jogging or other strenuous fitness activities. Wellness culture has given impetus to holistic therapies resulting in medical pluralism.

Sociological understanding of wellness enables us to contextualize it in the consumption culture and its growing demands on the individual. It also helps in analysing the dynamics of social, economic and political institutions in the proliferation of wellness culture.

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