

popular anger at this perceived affront to Muslim tenets, and a riot ensued. When police found themselves unable to deal with it, they called on the clerics—the same ones who had incited their followers to action—and the riots ended. Unfortunately, we are not told how the police managed to persuade the clerics to do so. Two clerics were arrested and received prison sentences, being held in another town to reduce the possibility of a mob marching on the jail. In addition to indicating that tensions can arise even among Muslim groups regarded as less troublesome, it also illustrates that the Hui relationship with the party state is more nuanced than the clear-cut “us versus them” dichotomy that the foreign analyses frequently imply. The government must also mediate differences among the Hui in a way that is at least minimally acceptable to the disputants as well as consonant with official rules and regulations.

Erie concludes by observing that the party is trapped in its own ideological strait-jacket: reliance on Hui authorities and Islamic law is an important factor in maintaining social stability, yet the party cannot admit that it is dependent on them. Most recently, the party-state has endeavored to assert its authority by progressively shrinking the scope of the *minjian*. Whether this will achieve the desired results remains to be seen. The vexed relationship between secular and sacred power is, to be sure, not unique to the PRC. Religion has adapted and survived adverse circumstances before, in China as well as other societies, and Islam has proven itself remarkably resilient.

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*Medicine and Memory in Tibet: Amchi Physicians in an Age of Reform.* By  
 THERESIA HOFER. Seattle: University of Washington Press, 2018. xv, 286 pp.  
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In *Medicine and Memory in Tibet*, Theresia Hofer presents several years of ethnographic work in Tsang, particularly Ngamring, engaging three generations of *amchi* physicians from the most significant *Tsang Mentrong*—literally, “Medical Houses,” hosting a specific group, family, or lineage of Tibetan medical doctors—and historic monastic practices. She extends the Lévi-Straussian concept of the house as a form of social organization to broaden and sharpen scholarship on Tibetan medical knowledge transmission, for which *Tsang Mentrong* played a fundamental role outside the large, central medical institutions in pre-1950 central Tibet. She shows how though *Mentrong amchi* formed the majority of Tibetan physicians at this time, they became marginalized in both formalized policies and academic analysis due to exclusion from centralized government-supported entities and official narratives of *Sowa Rigpa*, or the “Science of Healing,” as Tibetan medicine is known.

Skillfully conducting an “ethnography of historicity” (p. 15), Hofer engages these absent voices of marginal actors through richly detailed oral life histories, offering accounts of Tibetan medical practice inspired by subaltern studies. In doing so, she employs practices of memory construction and historicized narrative, actively engaging tensions of enforced narratives, publicized memories, and the state’s ever-present gaze with personalized recollections of the past. Her work contributes a critical presentation of how *amchi*, previously in the most revered positions of social authority and continuity of medical lineages, experienced the waves of policies and reforms from the early 1950s to the millennial turn.

Much scholarship has looked at the political history of this period, but not the impact on the Tibetan medical field specifically. Hofer critically fills in the gaps. She illuminates the transformations undergone by Tibetan medicine on the margins, ranging from the de facto independence of Central Tibet pre-1950, United Front policies, Cultural Revolution assaults, and Democratic Reforms, to the cautious revival of the mid-1970s and Hu Yaobang's famous visit to Tibet in 1980, and up to the modernization, industrialization, and marketization of recent times. She shows how key moments and actors assembled critical turning points to move from devastation to careful renaissance in the Tibetan medical field.

Hofer critically challenges the characterization that Tibetan medicine had been rehabilitated to its formerly integral position in Tibetan society by the mid-1980s, demonstrating how this may have applied only to Lhasa Mentsikhang, the Institute of Medicine and Astrology in Lhasa. She shows how *Tsang Mentrong amchi* were embedded in specific opposed class structures and Buddhist institutional links that led to their demise, and neither they nor the monasteries have been reinstated even today. Her critical window into private *Tsang* initiatives during the mid-1980s and 1990s shows how efforts to revitalize Tibetan medical cultures operated outside governmental Tibetan medicine institutions and state-sponsored initiatives. As such, she contributes a substantial body of work to ethnographies of other marginalized *amchi* groups across the Himalayas.

Building on several earlier contributions, Hofer provides one of the most explicit and consistent accounts of gender thus far in *Sowa Rigpa* anthropology. She shows that despite the gendered cultural framework that men should be the principle medical lineage heirs, other factors influence practical transmission. In her examples of Ani Ngawang, Ani Payang, and Ani Pema Lhamo—three nuns who inherited medical lineages—two were chosen as principle heirs despite there being male monks and disciples who could have received that privilege. Here, she shows the roles of intelligence, social status, kinship, and material and immaterial practice proficiency in the transmission of lineage. She even unveils a case of a female lineage holder for the renowned Tibetan pharmacological achievement of making *tsotel*, a precious and complex medicinal compound traditionally characterized as the exclusive domain of men.

Finally, Hofer offers key insights into the historical foundations for the rise of the Tibetan pharmaceutical industry. She presents the central policies that legitimized and detached pharmaceuticals from diagnostics and treatment, distinguishing them as an industry separate from the Tibetan medical profession and physicians' guiding care. She shows how the industrialization, modernization, and marketization of health care led to a distinct *Sowa Rigpa* moral economy differentially engaged at the periphery rather than the center. Today, we see how accelerated industrialization and relatively relaxed religious policies have forged engagement with a *Sowa Rigpa* moral economy and the valuation of lineage more than ever before.

Hofer's work promises to interest a wide readership—scholars, researchers, and students of Tibet and China studies, medical and political history, medical anthropology, anthropology of history, development studies, subaltern and gender studies, as well as public health. Hofer successfully contributes valuable on-the-ground data to these diverse fields and widens the scope of our understanding of modern Tibetan history as it was experienced by leaders in the medical field outside the central institutions. *Medicine and Memory in Tibet* could be used for both undergraduate and graduate courses on ethnographic methodologies, particularly those that engage historicized narratives.

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