Be your product

On youth, multilevel marketing, and nutritional cure-alls in Puerto Princesa, Philippines

Hordon, A.; Davatos, I.A.B.; Lasco, G.

DOI
10.1111/amet.12830

Publication date
2019

Document Version
Final published version

Published in
American Ethnologist

License
CC BY-NC

Citation for published version (APA):
Hordon, A., Davatos, I. A. B., & Lasco, G. (2019). Be your product: On youth, multilevel marketing, and nutritional cure-alls in Puerto Princesa, Philippines. American Ethnologist, 46(4), 429-443. https://doi.org/10.1111/amet.12830
Be your product:
On youth, multilevel marketing, and nutritional cure-alls
in Puerto Princesa, Philippines

ABSTRACT
Young people in Puerto Princesa, the Philippines, are drawn to working as salespeople for AIM Global, a purveyor of the nutritional supplement C24/7. The company relies on multilevel marketing, in which sellers recruit other sellers, offering youth not only the chance to earn money but also educational discounts, access to bank cards, and an opportunity to develop do-it-yourself entrepreneurial skills. Trainers encourage sellers to capitalize on their intimate relations, to tailor the supplements to assuage aging clients’ metabolic-health anxieties, and to use C24/7 themselves so that they can testify to its benefits. Such “sociometabolic” work is omnipresent in urban settings, where workers in beauty salons and gyms likewise promise to mitigate the material, bodily disturbances caused by toxic environments and precarious living conditions.

Shortly after the first author arrives in the rural town of Puerto Princesa, on Palawan Island in the Philippines, she hears about a food supplement called C24/7. One of her researcher-assistants, Jaime, tells her that he takes it every day, even though it eats up about 10 percent of his monthly earnings. Working a demanding job at the local university, Jaime pays his younger siblings’ school fees. He needs stamina, he says, and insists that C24/7 helps him sleep, supplements his fast-food diet, and protects him from hangovers. Like many other young men and women in his peri-urban community, Jaime is a member of the Philippine company Alliance in Motion (AIM) Global, which distributes C24/7 and other products through multilevel marketing (MLM), in which sellers recruit other sellers.

In urban centers of the Global South, where living conditions are fragile, jobs temporary, and futures uncertain, MLM schemes appeal to young people as a way of supplementing their income (Fadzillah 2005; Wilson 2004). Throughout Puerto Princesa, posters advertise products sold through MLM, ranging from well-known international brands such as Herbalife and Avon to countless lesser-known local brands. A Western Union money transfer shop sells First Vita Plus, an herbal nutritional supplement designed by a former secretary of health; a clothing store carries Royal beauty products imported from Manila. AIM Global is trending among youth.

MLM flourishes in places where unemployment and underemployment are rampant, and where globalization has led to the...
flexibilization of labor. People who have few economic opportunities value MLM as a chance to make money (Cahn 2006; Desclaux 2014; Fadzillah 2005; Nelson 2013; Schifffer 2018; Wilson 1999). To join MLM companies, however, distributors generally have to purchase memberships with the little money they have or can borrow, without any guarantee of return and without enjoying rights, insurance, or other safeguards. Because MLM work depends on social networks, it works well in places with a large informal sector, like the Philippines (Krige 2012; Ofreneo 2008). In Guatemala, the MLM company Omniflame emerged as a precarious means to reestablish livelihoods in a postwar environment, in which neither the state nor revolutionary organizations met people's needs. A former combatant acknowledges that the charismatic leader of Omniflame is a shrewd businessman, but asks, "Who else will give me a job? I don't speak Spanish, I never went to school. I have no resume" (Nelson 2013, 204). As in the case of AIM Global, Omniflame distributors earn by selling food supplements and by recruiting new distributors who work for them. To join the company, they have to pay fees.

MLM companies' practices often border on illegality. According to the Direct Selling Association of the Philippines (DSAP), face-to-face sales by independent distributors are legitimate. But if an MLM company appears more interested in recruiting new distributors than in selling products, the DSAP warns, it is likely an illegal pyramid scheme. In the 1990s, consumer protection organizations in the United States became increasingly concerned about the pyramid-like characteristics of MLM schemes, such as requiring large up-front purchases and investments and rewarding recruitment (Vander Nat and Keep 2002). In 2016, Herbalife, an MLM company that sells food supplements, was fined US$200 million by the US Federal Trade Commission (FTC) because its members mainly earned by recruiting new members. FTC chairwoman Edith Ramirez said this settlement would "require Herbalife to fundamentally restructure its business so that participants are rewarded for what they sell, not how many people they recruit" (FTC 2016). In the Philippines, however, MLM is not regulated by the country's Department of Trade and Industry, despite a 2002 administrative order that forbids marketing companies from emphasizing recruitment.

What does working for AIM Global entail for young distributors? What makes AIM Global appealing to them, given the high cost of its membership and products? What do they gain from the schemes? In everyday conditions of precarity, MLM capitalizes on intimate relations and requires delicate balancing between economics and health. In this context, MLM channels family resources away from limited household budgets, savings accounts, and schooling to new modes of service-sector work, as young people become self-employed nodes in a business designed to expand the market for food supplements. Their work is simultaneously communicative, affective, and embodied, as is the work done in beauty salons, where employees are expected to use their faces and bodies to project the good life that their treatments promise (Chua 2000; Lan 2001).

We conducted participant observation over three years (2014–17) at AIM Global training sessions, where attendees were encouraged to join the company, given guidance on how to sell its products and recruit other sellers, and educated on the metabolic potentials of C24/7. We later followed up with young distributors. Our collaborative fieldwork involved reflexive dialogues in which, over time, the core theme of this article emerged: the intensity of relational and metabolic work that is conducted by AIM Global distributors.

Our analysis is inspired by the work of Viviana Zelizer (2005, 2012), who opposes the widespread view that economic logics and intimate spheres constitute "hostile" worlds. According to Zelizer, economic transactions are intertwined with social relations, which people navigate through "relational work." One of her examples of this concern is that women are compensated differently than men when helping neighbors: women are expected to do chores for neighbors for free, while men can ask for payment when lending a helping hand. When connecting to neighbors, women and men need to figure out the differential nature of related social ties and transactions. Zelizer's main argument is that navigating the meaning of relations and transactions, and related norms and obligations, requires relational work.

Because AIM Global's business model builds on navigating the boundaries between intimacy and instrumental economic logics, its young sellers are expected to do complex relational work. They are encouraged to profile their family members as potential customers, finding out their health concerns in order to match them with food supplements, and to recruit their friends as members of AIM Global. Some friends and family members resist the instrumentalization of their intimate relationships for business ends. Many have seen other people lose money when signing up for other "scams." Others value MLM labor as an income-generating activity that also provides access to discounted food supplements.

In AIM Global, however, distributors are not just invited to manage interpersonal relations. They are expected to tailor the nutritional supplements to their clients' metabolic concerns and to embody their beneficial effects. Young people, like Jaime, fear that their fast-food diets lack the nutrients they need to maintain their intense urban lifestyles. Such anxieties have arisen thanks to Puerto Princesa's rapidly changing food consumption patterns, as people have moved from fishing and subsistence farming to salaried work. While meals previously consisted of rice with vegetables and fish, diets today in the newly monetized economy are heavy with noodles, processed breads,
and packaged juices. The turn away from home-cooked meals is fueling concerns about nutrition, concerns that are only underlined by manufacturers’ marketing of processed foods as “fortified.” The Philippines’ Department of Health promotes the local production of food supplements to counter malnutrition (DOH 2017), and pharmaceutical companies advertise supplements to boost health and mitigate the stresses of everyday urban living. As a result, sales of food supplements are now booming in the Philippines (Euromonitor 2016).

Jaime and his peers sell supplements to customers who worry about the disrupting effects that substandard foods and polluted environments can have on their metabolisms, as do supplement consumers elsewhere (Hardin 2019; Roberts 2017; Solomon 2016; Yates-Doerr 2015). Health statistics show that, in addition to infectious diseases like tuberculosis, malaria, and dengue, Filipinos are increasingly suffering from obesity, diabetes, cardiovascular disorders, and cancers, requiring hospitalization and high out-of-pocket health expenditures. These metabolic disturbances occur disproportionately in rapidly urbanizing settings such as Puerto Princesa, where the growing middle class is increasingly sedentary and is consuming more processed foods that are low in micronutrients and high in sugar, fat, and salt. AIM Global markets products that are well matched to urban populations’ emerging metabolic-health concerns, relying on distributors to do the metabolic work needed to tailor the products to individuals’ needs.

At the same time, there remain real concerns about malnutrition (Sanabria and Yates-Doerr 2015; Tzioumis and Adair 2014). Our interlocutors grew up taking nutritional supplements to promote healthy development on the advice of workers in mother and child health clinics, where children are regularly weighed and measured. Although the Philippines graduated to the rank of (lower) middle-income country in 2009 (UNDP, n.d.), the country’s malnutrition rates remain high: about one-third of children in the Philippines are stunted, and one-fifth are underweight (Department of Health 2017); one in 10 families has reportedly experienced hunger in the past three months (Social Weather Stations 2019).

Sociometabolic work

Analyzing the MLM distributors’ work calls for a rethinking of the “immaterial” nature of relational work done in the service sector (Hardt and Negri 2000; Leidner 1993; Oksala 2016). Selling nutritional supplements in MLM requires more than interpersonal work; workers must also manage relations between matter and people’s bodies and minds. We refer to this multifaceted set of activities as sociometabolic work, which we define as a particular kind of relational work that involves establishing, maintaining, and negotiating interpersonal relations with customers. To do this, MLM workers consume products to provide testimonies on their effects and tailor products to clients’ concerns about metabolic disturbances and environmental stresses. We use the term metabolic to refer broadly to chemical processes in cells and organs, as well as to interactions between bodies and environments, such as the absorption of foods and toxins (Landecker 2013; Roberts 2017; Solomon 2016). Such a broad understanding of the term attends to the mental, environmental, and physical stresses that people experience in rapidly changing urban environments and that they seek to protect themselves from. In medicine, metabolic is used more narrowly to name a health state common to many urbanites: “metabolic syndrome,” which causes patients to suffer from a combination of symptoms—high blood pressure, abdominal obesity, high fasting levels of blood sugar, and low HDL. These symptoms need to be managed and monitored because they indicate an elevated risk of diabetes and cardiovascular disorders. These indices add to people’s worries about metabolic health (Hardin 2019) and to the demand for food supplements.

Making a life in a modernizing frontier

Until recently, most Puerto Princesa inhabitants made a living from subsistence farming, supplemented by income from fishing and agricultural labor. Since 2010, Puerto Princesa has emerged as a tourist destination and a gateway to resort islands. The service sector is booming. Young men find work as construction workers, security guards, and motorcycle-taxi drivers; young women run small stores or find jobs in hotels, guesthouses, restaurants, or tour companies. People generally pursue multiple livelihoods, as is often the case on the peripheries of global capitalism (Anagnost 2013; Besnier 2011; McCormack and Barclay 2013).

In addition, many families in Puerto Princesa have relatives working in Manila and abroad, and they use remittances from these relatives to finance education and buy land and houses. Puerto Princesa hosts several universities and technical colleges, which prepare young people for work as seafarers (globally, around a quarter of all seafarers are Filipino), nurses (another major national export), engineers, and hotel staff. The middle-class lifestyles of the many balik-bayan (those who return after working abroad) fuel aspirations for better lives. The daily minimum wage in Puerto Princesa hovers around US$6, which many young people think is far from enough. In the service sector, there is little job security, and young people expect to lose their jobs when they become less physically able or attractive.

Most households in Puerto Princesa have backyards where they grow fruits and vegetables, while fishing and shellfish gathering are also common modes of subsistence. But access to land and the sea is declining with the influx of job-seeking migrants, and hotels and guesthouses are
taking over more and more space. Manila-based fast-food chains are now omnipresent in central Puerto Princesa, as are modern consumer goods. Underemployed youth imagine more prosperous futures for themselves, surrounded by posters of happy people eating fast food, living in attractive town houses, and driving shiny new cars and motorcycles that can be paid for in monthly installments. The few who attain these trappings of middle-class status—often with the help of remittances—fuel the aspirations of those left behind; those who cannot afford the goods often resort to the “cheap globalization” (Mann 2001, 64) of imitation Nike sneakers and fake Gucci bags (Bayat and Herrera 2010).

Indeed, Jaime and his peers live in what Jean Comaroff and John Comaroff call the “borderlands” of “millennial capitalism,” where the global meets the local. These borderlands are “sites of tension, particularly for disadvantaged youth . . . who seek to make good on the promise of the free market” (Comaroff and Comaroff 2000, 308). Young people in Puerto Princesa are eager to learn new skills, make connections, and refashion their appearance to represent and achieve success, as are their peers elsewhere in the borderlands (e.g., Cole 2008, 2010; Huang 2017; Liechty 2003; Lukose 2009; Newell 2012; Rofel 2007). They are acutely aware that the world is changing rapidly and that they must “sacrifice, work, invent and negotiate for a future different, and better, than the one they live in now” (Durham 2008, 947).

Although these youth are increasingly well educated, it is difficult for them to secure good jobs, both locally and abroad, because of competition from peers and strict work and residency requirements. When they do find work, it is often only in the form of a temporary contract; work in the informal sector is even more insecure. While increased access to education fuels hopes for a better future, the precariousness of their working lives leads them to wonder whether their aspirations can truly be achieved. Like Nepali youth in Kathmandu (Liechty 2003), our interlocutors inhabit a commercially mediated “nowhere place” between a devalued local past and an unreachable future, especially in the service sector, where young people are overrepresented in selling the very consumer goods they desire (Dávila 2016; Naafs and White 2012; Wilson 2004).

An important attraction of MLM work is that it leaves workers free to develop their own styles of entrepreneurship and their own strategies for tailoring the supplements to their client’s needs. This stands in contrast to service-sector jobs in malls, hotels, restaurants, beauty salons, and karaoke bars, which discipline young workers to conduct relational labor in compliance with company rules. The freedom offered by MLM work attracts youth, as Ara Wilson (1999) found out during her fieldwork among American Way (Amway) distributors in Thailand. Participants in MLM are not required to work fixed hours or follow protocols; instead, they are expected be flexible and creative in engaging new clients. All one needs is “friendliness, hard work and a plan” (Wilson 1999, 416). AIM Global trainers preach an ideology similar to that of Amway: financial success is limited only by “ability, imagination, initiative and persistence” (Bromley 1995, 142). AIM Global’s tagline is “Turning ordinary people into extraordinary millionaires” (AIM 2017). John Asperin, AIM Global’s chief marketing officer, also known as Mr. Excitement, proclaims in his testimonial on the AIM Global website: “If you want to change, you have to change completely. Success is a habit. If you don’t like the situation you are in today, dare to make a change. AIM Global is here to help you change your life!” (AIM 2017).

In a context in which our young interlocutors are confronted with the success of middle-class peers, including those who have been able to sign up for jobs abroad, MLM’s do-it-yourself ideology and purported opportunity to become rich offer an appealing way to catch up economically. Moreover, the supplements themselves also appeal to youth, because they allow them to present themselves as professionals who attend to their own metabolic health as well as that of their clients, using their knowledge of complex food supplements.

### The Papaya Rich Health Center

Shortly after starting fieldwork in Puerto Princesa, the first author meets Felicia in the neighborhood where she rents a house on the outskirts of town. This is a semirural setting where people use their backyards to keep chickens and grow papayas, bananas, mangoes, and vegetables. Felicia runs the Papaya Rich Health Center, a small roadside store displaying colorful banners with images of herbs, fruits, and vegetables. When the researcher comes in, expecting to see all kinds of herbal medications, she finds to her surprise that the health center sells only AIM Global products. Felicia says she learned about C24/7 when her father, a pastor in the evangelical church next to the health center, became seriously ill with diabetes a few years ago. A relative suggested that he take C24/7. Felicia went to the AIM Global office and decided to buy three memberships, allowing her to speed up her earnings and giving her access to discounted C24/7 for her father.

Felicia’s father initially took six capsules a day (at a cost of US$4) and soon began to feel fit again. He is now on a maintenance dose of two pills a day. In his mid-50s, he feels well and is grateful to his daughter for the supplements that have made him so much healthier. The three memberships required an initial investment of US$480 and amounted to a supply of 15 boxes of C24/7, each containing 30 capsules. This was more than her father needed. The surplus supplies she sold in the store. In addition, Felicia says she now has many active down-lines, earning her US$300 a month. Though it was not initially her intention, she has become
an active member of AIM Global, earning by selling and recruiting new down-lines.

The researcher meets Felicia again the next day at the AIM Global office, where a training event is taking place. There she introduces her to Leo, an 18-year-old who works driving a motorcycle taxi (locally referred to as tricycle). He wants to join AIM Global so he can get a discount to attend Palawan Polytechnic College to study marine transportation. As a member, he will get a 25 percent reduction in tuition fees. But Leo does not have enough money, so Felicia buys him the US$160 membership, which comes with five boxes of C24/7 that she then asks Leo to sell. She tells him he can repay the costs of membership by selling the five boxes of 30 capsules at US$0.80 a capsule, which will yield an income of US$120. He then needs only US$40 to cover the membership fee, which, she assures him, he can borrow from family members given that the investment will reduce his tuition fees.

In offering to help Leo, she is making it easier for him to become a member. Leo is unsure about his ability to sell dietary supplements. But Felicia convinces him that it will be easy, telling him to pitch C24/7 to his older taxi passengers. “Just start talking about the health benefits, and they will be interested,” she says. She gives him some promotional materials that spell out how much one can earn through MLM and invites him to a training event that coming weekend. The package includes a business-tracking web page and an ATM card, which for Leo represent a desirable new lifestyle.

A brochure included in the package suggests that Leo can earn US$360–$700 a month, an impressive amount in a town where most youth earn minimum wage (US$120 a month). By becoming a member, Leo not only sells products but also gets access to the attractive office spaces of AIM Global in downtown Puerto Princesa. After Felicia’s pep talk, Leo signs up even though he still seems a bit daunted. She promises him that as his up-line (i.e., the person who recruited him and receives a commission for doing so), she will help him find clients and recruit new members.

Felicia’s relational work concerns managing the youth who serve as her down-lines, as well as caring for her father by tailoring C24/7 to his metabolic-health needs. To maintain his supply of C24/7, Felicia has to generate income by recruiting new down-lines, whom she helps in selling and recruiting. As her down-lines multiply, she is increasingly busy, mentoring them in how best to approach clients, how to recruit new down-lines, and how to provide testimonials of the products’ metabolic efficacy. She uses part of her income to maintain her mobile phone, which she uses to stay in touch with clients and activate new recruits.

**Figure 1.** Earning by recruitment in AIM Global’s multilevel marketing scheme, as explained by the company’s trainers. Each member (here represented by “you”) is expected to recruit at least two other sellers, or “down-lines” (the figures at the bottom). The “P500” on either side refers to how much a seller earns for recruiting a down-line (i.e., 500 Philippine pesos), while the “P1500” at the bottom represents the “matching bonus” one receives for connecting the down-lines. Drawing this diagram on a whiteboard, AIM trainers typically add additional levels of down-lines below, emphasizing the rewards one gets for every additional recruit. [This figure appears in color in the online issue]

**Life is hard**

“Life is hard nowadays,” laments Erick, a trainer at an AIM Global training that we are attending. A former hotel employee in the Caribbean, Erick joined AIM Global at his wife’s insistence. Now in his mid-30s, he wears a polo shirt, jeans, and sandals, coming across as a relaxed and successful young businessman. He looks at the small group of participants and asks about the minimum wage in Puerto Princesa: “It’s just 275 pesos, isn’t it?” The group nods. Erick continues, “Do you know how much it costs to start up a business like Jollibee [a popular Filipino fast-food chain]?” Answering his own question, he gives the figure of 2 million pesos. The message rings true: life is hard, and regular jobs do not pay enough.

We attend several such training seminars in AIM Global’s main office in Puerto Princesa, where every weekend the hall is full of young people invited by members like Felicia. Often the speakers are distributors from AIM Global headquarters in Manila, and they invoke endorsements from influential people, including beauty queens, basketball players, and even the mayor. The trainings always include testimonials of people who have gone from rags to riches. The speakers explain how this can be done: by inviting others to become members (see Figure 1). “It’s simple,” Erick explains. The aim is to recruit two new members as down-lines and to encourage them to do the same. “Just talk to your relatives and friends,” he says, “and invite them.” When they register as members, you earn 500 pesos. He adds that once you register two down-lines, you can connect them online, netting another 1,500 pesos. When the down-lines of your down-lines do the same, you earn yet again, Erick says. “But as long as you work hard, you will be greatly rewarded.” Erick ends his talk with another rhetorical question: “Do you want to be rich or very rich?”
Recruitment is important. The scheme’s apparent potential for astronomical earnings through recruitment is what appeals most to our young interlocutors, who are eager to catch up with their peers enjoying middle-class lifestyles. One can earn as much as US$480 a day. In light of this amazing figure, investing US$160 seems a small sacrifice. Erick illustrates with success stories, such as that of Janvic, who was 26 when he joined; his age and personal circumstances make him someone whom youth can relate to and aspire to emulate. Legend has it that he sold some of his personal belongings to buy his initial membership.

The youth attending Erick’s seminar are told how to make a list of prospects, including family, friends, and coworkers; to talk to them about their health concerns while sharing their own experiences with C24/7; and to recruit them as new members or clients. If you are not good at convincing people, your up-lines can help by talking to potential recruits, the trainers say. The trainers further encourage members to take out multiple memberships for themselves: up to seven if one is serious about making it a business, since this means establishing yourself as a down-line six times over, expediting the benefits of the scheme. Purchasing seven memberships entails investing US$1,120.

Those who sell a certain amount become eligible for foreign junkets and an additional commission from selling down-lines. Along with an insurance policy and other benefits, new members receive a DVD containing clips of overseas trips that top earners, such as Felicia, have made to Macau, Hong Kong, the United States, and Europe. Against the backdrop of Europe’s most iconic landmarks—the Eiffel Tower and the ruins of ancient Rome—global ambassadors are referred to as “Ka-AIM Global,” ka- being the Tagalog prefix that evokes belonging, as in kapatid (brother or sister) and kapamilya (family member). “Being family” with fellow members means one can count on their support to recruit new members.

One such AIM Global social group, called the Knights, were frustrated with their many failed attempts to bring prospects to seminars. So they developed more aggressive tactics, which they called “kidnapping.” Kidnapping involves inviting prospects to a meal, a birthday party, or other social event that turns out to be a recruiting session. These tactics create tensions between friends. Our interlocutors in Puerto Princesa complain that nowadays one cannot trust invitations. You may end up being at a marketing event.

Encouraging each other to work hard and quit their barkadas (peer groups) and jobs to have more time for their “sideline” work. Rose, one of our interlocutors, pawned her mother’s necklace; she knew her mother would look for it, so she worked hard to earn it back. In the first month she recruited five new dealers and earned US$120, which she decided to invest in another membership. She borrowed money from her up-line (in exchange for her computer) to retrieve the necklace from the pawnshop. Alas, she did not earn enough to repay her up-line, and she lost her computer.

Other interlocutors meet the challenges of recruiting and finding clients by forming new social groups, which adds intragroup obligations, pressures, and tensions to the relational work. Up-lines became godparents to their down-lines, organizing dinners, parties, and gatherings. Insiders were referred to as “Ka-AIM Global,” ka- being the Tagalog prefix that evokes belonging, as in kapatid (brother or sister) and kapamilya (family member). “Being family” with fellow members means one can count on their support to recruit new members.

Investing in memberships

To join AIM Global, young people channel money away from more traditional career paths, using money earmarked for education, asking for cash advances from their regular jobs, borrowing money from their up-lines, and selling or pawning family assets. Inspired by charismatic trainers, they believe they can easily recoup their investments and repay their debts. But managing these relations of debt is a key component of the relational work that our interlocutors must perform after joining AIM Global. Our interlocutors feel a strong obligation to their families to make their “sideline” work. Rose, one of our interlocutors, pawned her mother’s necklace; she knew her mother would look for it, so she worked hard to earn it back. In the first month she recruited five new dealers and earned US$120, which she decided to invest in another membership. She borrowed money from her up-line (in exchange for her computer) to retrieve the necklace from the pawnshop. Alas, she did not earn enough to repay her up-line, and she lost her computer.

Going global

Clay has tried to reach out to global markets, because she had difficulty finding clients and recruits in Puerto Princesa. Her up-line, a coworker at the call center where she works, advised her to set up a Facebook account for the business. He told her to show a car on her site to project an image of success, but she wanted to be honest and just posted images of products instead. She stays later after work to take
advantage of the center's high-speed internet, recruiting across time zones. Connecting with people online comes with new ways of relating. She builds relations of trust by chatting online with her contacts, taking into consideration their need for social support. Filipino migrant laborers, she points out, are often lonely in the evenings when they are home from work. Once, when an overseas contact was about to buy a membership, she could not close the sale because her up-line was away and she didn’t know how membership could be purchased from abroad. She felt let down by her up-line. “That’s really the problem,” she says. “You’re new, and you do not know the tactics or recruitment process.”

Despite the challenges, AIM Global networkers have carved out markets in areas with large Filipino populations, such as Hong Kong, the United States, the Middle East, and even Europe. Nathalie, one of the so-called millionaires, moved from Puerto Princesa to Manila, where she runs the business for her husband, a captain on a large container ship. Her husband recruits down-lines among his seamen as well as in the Filipino communities in the port cities he visits. Away from home, the seamen feel vulnerable to metabolic disruptions, and consuming C24/7 gives them a sense of protection. Ramon, one of the big networkers who regularly speaks at seminars, says he has down-lines in Hong Kong and earns US$2,000 to US$4,000 a month through AIM Global. The remoteness of the income source is an enduring source of fascination for distributors. Ramon says, “Can you imagine? I earn from selling C24/7 to people I’ve never even met!”

Be your product

In AIM Global’s training sessions, marketing techniques and principles of do-it-yourself entrepreneurship are mixed with metabolic messages, in which C24/7 promises “round-the-clock cellular health.” “Be your product” is an important principle of AIM Global's sales strategy. “The best drug pusher,” states one of the AIM Global trainers in an ode to the power of personal testimony, “is a drug user.” In their sales talks, trainers introduce distributors who give personal testimonies. Twenty-eight-year-old Jess, a security guard, tells the audience how he surmounts his customers’ reluctance by telling them that he, too, was skeptical about MLM, having signed up only after he and his wife used C24/7 to enhance their fertility. He tells them that they had been married for eight years and had not yet conceived when a friend told them about C24/7, and after four months, his wife was pregnant. Another trainer, Erick, says the DHA in the product is good for the brain and that his family has personally experienced its wonders: his daughter, aged two, can already read and speak phrases in English.

During their seminars the trainers talk at length about health risks: “Who among you has not gotten sick in the past? Raise your hands,” they urge. Their statements paint a picture of a new level of danger. “There are many more diseases now than ever before!” “There was no cancer in the past, but there are now all kinds of cancer!” “We are all prone to illness, and our diets cannot protect us.” Trainers emphasize the metabolic potential of C24/7 by showing “before” and “after” pictures of people making dramatic recoveries from cancer and other illnesses when taking the supplement. In the Philippines, despite a move toward universal health care, the government remains hard pressed to ensure access to quality services (Romualdez, Lasco, and Lim 2011; Xu et al. 2003). The trainers ask, “How much is chemotherapy? How much is kidney dialysis per session? Will you be able to pay for it?”

Surplus nutrition

Trainers routinely invoke a World Health Organization recommendation to consume five portions of vegetables and fruits each day. “Who among us has the money to buy six different vegetables and fruits every day?” While the message seems a bit misplaced, since many people in Puerto Princesa grow their own fruits and vegetables, it finds its mark as people increasingly feel insecure about their diets. C24/7’s stated ingredients include 12 whole fruit and 12 whole vegetable blends, and 12 different kinds of mushrooms. This appears to be more nutrition than backyard gardens can provide or limited household budgets can afford.

The product’s package describes C24/7 as a “Natural-Ceutical” for “round-the-clock nutrition.” As required by the Philippines Food and Drug Administration, the packaging also displays the text (in capital letters): “NO APPROVED THERAPEUTIC CLAIMS.” Paradoxically, this caveat seems to add to the popularity of the supplements, since it is interpreted to mean that the products are relatively safe to use. They are “just food.”

A table presents the percentages of daily vitamins and minerals contained in a “serving size” of seven capsules (ranging from 31 percent for magnesium, 300 percent for vitamin A, 233 percent for vitamin C, and as much as 2500 percent for vitamin B6). Seven capsules seem like a lot, especially considering that they cost US$0.80 each. Moreover, the high percentages listed for B6 are surprising, since this vitamin can cause nerve damage at high dosages. Most people will not take seven capsules a day, lowering the risk, but Felicia’s father at the beginning of his “treatment” was taking a daily dose of six capsules, which may not have been safe (NIH 2019).

After lengthy deliberations, we used some of our research funds to have the capsules tested by the Philippine Institute of Pure and Applied Chemistry of Ateneo University, which routinely performs analyses for food companies. We were reluctant, because of the cost and because we had
not planned to conduct such testing. We decided to analyze only vitamins A, C, and E. In all three cases, the content was much lower than what the company promised. For example, the packaging declares that seven capsules contain 140 milligrams of vitamin C, or 20 milligrams per capsule. The lab found only 4.4 milligrams per capsule. Similarly, the company declares that seven capsules contain 15,000 IU of vitamin A, or 2,142 IU per capsule, while the lab reported only 950 IU per capsule.

Pamphlets shared at the training sessions emphasize the amazing metabolic potential of the capsules’ content (without any mention of possible harm), stating that they contain about 22,000 phytochemicals, digestive nutrients, antiaging compounds, and longevity enhancers, protecting one from diabetes, heart disease, cancer, stroke, and much else (see Figure 2).

These claims originate from a guide on C24/7 written by a family physician, Dr. Butch Villena (2011). The guide begins with a short history of Nature’s Way, the American company that produces C24/7, describing how its founder, Tom Murdoch, sought the advice of a Native American shaman who recommended an herbal tea to treat his wife’s recurrent cancer. The guide includes chapters on the cell, body systems, and free radicals, with hundreds of pages presenting detailed information on the phytonutrients in C24/7 and how they can improve cardiovascular health, moderate blood sugar, fight cancer, and reduce stress.

**Surplus health**

AIM Global thus positions C24/7 as a cure- and prevent-all, generating what Joe Dumit refers to as a demand for “surplus health”: in the United States, pharmaceutical ads on television generate demand for surplus health by directly targeting consumers and encouraging them and doctors to “overvalue the pill’s benefits relative to its side-effects and costs” (Dumit 2012, 206). Pharmaceutical companies develop pills not to cure diseases but to enhance the health of large populations; they do this to secure ever-larger markets, assigning preventive indications to medicines so that doctors encourage their patients to use them and so that people feel compelled to take drugs every day to stay healthy. Demand for surplus health through ingesting C24/7, however, is not generated through direct-to-consumer advertising on TV but in face-to-face interactions with AIM Global dealers, who tailor the product to meet specific needs.

The multifaceted sociometabolic work that our interlocutors are expected to perform mimics that of drug representatives, whose primary goal is to push more and more drugs into healthy people’s bodies, as a former drug representative admits (Oldani 2004). Pharmaceutical representatives expand the market for drugs by promoting therapies for ever-expanding health indications. Just like AIM Global’s distributors, they amplify products’ therapeutic and potentially positive effects for people who are not (yet) sick while neglecting their potential for harm when healthy people ingest substances that might be toxic. There is, however, a difference. The sociometabolic labor that AIM Global distributors perform involves trying out the products on their own bodies and sharing testimonials of their metabolic effects.

The promotion of pharmaceuticals is regulated by food and drug authorities, which demand evidence of efficacy and safety from large-scale clinical trials before allowing a product on the market. For dietary supplements, companies need only declare their contents and attest through labeling that therapeutic claims are not approved. Controversies regularly occur when laboratory tests reveal that the declared contents are incorrect, as we found for C24/7, or when adverse effects are reported (Newmaster et al. 2013; Offit 2013). In the United States, where C24/7 is produced by Nature’s Way, calls for the tighter regulation of food supplements in the mid-1990s were successfully opposed by senators from Utah, the company’s home state (Offit 2013).

The former director of the Philippine Food and Drug Administration is very concerned about how MLM companies promote food supplements online and in face-to-face sales, feeding on prevailing anxieties about metabolic health. He is especially concerned that supplement consumers delay getting their medical check-ups. To address these concerns, the former secretary of health, Dr. Esperanza Cabral, issued an administrative order in 2015 to replace the message “No approved therapeutic claims” with the Tagalog sentence “Mahalagang paalal: ang [name of supplement] ay hindi gamot at hindi dapat gamiting panggamot sa anumang uri ng sakit” (Important message: this is not a medicinal drug and should not be used to treat the symptoms of any disease; Uy 2015). But this new sentence has not yet appeared on packages of C24/7.

**Unlocking metabolic potentials**

At one of our visits to AIM Global, the first author meets a Seventh-day Adventist pastor who promotes the metabolic benefits of C24/7 in his sermons and on a local radio station. The vegetarian capsules appeal to the Puerto Princesa’s Adventist community, which preaches healthy living and vegetarianism. It is the pastor who managed to persuade the first author to buy a starter pack of discounted C24/7, arguing that it was worth a try and that at her advanced age she should start looking after herself. You may feel healthy, but one never knows, he says, and C24/7, so full of healthy ingredients, will prevent all maladies. Your body, he points out, will take the substances it needs from the capsules, so full of phytochemicals. When she tells him
that she has a history of allergies, he reassures her that the contents of the capsules are all natural. He persuades her to buy the starter pack of five boxes (150 capsules) and pay the initial membership fee of US$160. If the capsules don’t work, you can always give them to your mother, he says.

When the first author continues to resist the sales pitch, he asks her how much her iPad cost. “You invest in your iPad,” he says, “but you don’t want to invest a fraction of that in your health?” He explains that she can start earning as a member by inviting her friends back home to use C24/7 and become members, his eyes shining with the prospect of expanding his business to another country. The first author doesn’t believe the capsules will enhance her health, nor does she intend to become a distributor. But she finds the sales pitch irritating, and giving in seems to be the only way to end it. Also, after months of fieldwork, she thinks she might try out a capsule a day (this is before the authors have explored the capsules’ potentially harmful content). Although our purpose here is not to do autoethnography, we highlight this to show that despite a career in the critical deconstruction of pharmaceuticals and health claims, and despite being skeptical about C24/7, the first author is moved by this pitch, attesting to the power of the rhetoric in the context of interpersonal relations.

MLM relational work involves navigating interpersonal relations to recruit new distributors and managing the affects and desires of potential customers. It also involves the complex labor of promoting metabolic potentials of things in therapeutic encounters, as illustrated by the sales pitch of the Adventist pastor. C24/7 packages and pamphlets, along with online medical endorsements, present the preventive and curative potential of C24/7, which AIM Global distributors unlock through therapeutic encounters in which they generate positive expectations that the supplements will work by matching the supplements to their aging clients’ concerns about the lack of nutrients and metabolisms going wild. The supplements give a sense of control in conditions of precarity in which people in Puerto Princesa are unsure what diseases the future will bring and are worried about their potential economic consequences. Whereas in the beginning of fieldwork C24/7 was AIM Global’s flagship
product, the company has recently introduced diagnostic devices and new nutritional supplements into its lineup. These innovations add to the intensity of distributors’ sociometabolic work, which now involves not only adjusting dosages of a single product but also interpreting test results and proposing combinations of supplements.

**Advanced sociometabolic labor**

Toward the end of our fieldwork, the first author returns to the Papaya Rich Health Center to chat with Felicia and hear how things are going. Felicia invites her to the AIM Global office for a CardioPulse session—a new diagnostic service that, she says, determines if customers are at risk of cardiovascular problems. She gives her a gift certificate (see Figure 3). The first author says she has a headache but will think about it. What follows is an SMS conversation, which illustrates how Felicia conducts sociometabolic labor with unflagging persistence:

Felicia to [Author] 2/6/2014 @ 15.53
Hello mam [Author], thank u 4 your time. Tomorrow again we meet and we plan for our partnership in our new business. Felicia here.-)

Felicia to [Author] 2/6/2014 @ 17.03
Good afternoon hello mam [Author]. We’re here now at aim office, for leadership training. Can you come now? Thank you

Felicia to [Author] 3/6/2014 @ 9.49
How are you mam?

[Author] to Felicia 3/6/2014 @ 10.54
Sakit sa ulo pa [I still have a headache]. a bit better. Ty [Author]

Felicia succeeds. The first author, after several SMS exchanges, thinks that perhaps her headache has something to do with high blood pressure and that a cardio checkup makes sense after all. When she arrives at the AIM Global office, Felicia calls a technician, who gets the computer going. She puts her finger in a little gadget called CardioPulse, which the gift certificate states is a painless, noninvasive alternative angiogram device from Korea.

The test result is a 5 on a scale of 1 to 7: “bad.” The bold letters “TYPE 5” stand out on the results form that Felicia gives her. The author tries to decipher what it means and sees a figure in the form of a wave that apparently indicates “bad.” The graphics show that her “eccentric constriction” is “good,” but “arterial elasticity” and “remaining blood volume” are “bad.” The English-language narrative in the box below the graphics reads,

Your vessel is in the process of growing aged and also blood circulation is not good. Your hands and feet can be sore and cramped. You should try to avoid improper life tendency, smoking and heavy drinking, high calorie, fatty and cholesterol food, and maintain the proper life tendency with regular physical exercise.

She is told that C24/7 is not enough for her and that every day she should take three sachets of the newly introduced supplement Vida!, along with five capsules of Choleduz. While maintaining an affective relation with the author, Felicia uses AIM Global’s diagnostic procedures and the printouts of test results to argue that the author needs these products. The metabolic labor that Felicia performs adds to the intense relational work that she conducts. She is not only relating to the first author as a customer but also comanaging her health.

The first author does not intend to buy Choleduz, a Nature’s Way supplement said to contain omega fatty acids. But she is intrigued by Vida!, the new product that AIM Global appears to be promoting through its CardioPulse testing facility. This product is made not by Nature’s Way but by a competitor in the supplement and vitamin industry, the Dutch company DSM Nutritional Products. Its active ingredient is resVida, a proprietary compound trademarked by the company.

According to DSM, scientific publications have shown that resVida can help maintain “a healthy cardiovascular system” and improve “age-associated metabolic and sensory motor coordination function” (DSM Nutritional Products 2014). In the Philippines, however, it is registered as a food supplement, which does not require clinical evidence to be evaluated by the Food and Drug Administration. In the meantime, AIM Global seems to be making headway with this new product, marketing it as a “cardio-ceutical” drink. Throughout Puerto Princesa, we increasingly see distributors promoting the CardioPulse checkup at AIM Global headquarters. Everyone who takes the test will be advised to use C24/7, and everyone who tests as Type 2 and up will be advised to start using Vida! as well as the omega 3 packaged in Choleduz. Better safe than sorry.

**Sociometabolic work in conditions of precarity**

AIM Global operates at the intersection of youths’ worries about their futures in increasingly flexible labor markets and their clients’ anxieties about their metabolic health. Whereas in the past labor laws could provide some form of social protection, in today’s liberalized economy, Filipino youth are uncertain about their future employment, despite having increasingly high levels of education. AIM Global capitalizes on their precarity and on people’s worries about changing diets, polluted environments, and the catastrophic costs of ill health. People no longer believe that ordinary food can meet their dietary needs, creating a demand for surplus health.
The company appeals to young people, who hope that by selling food supplements they can attain desirable middle-class lifestyles. Moreover, by joining the company, they can get access to food supplements at discounted rates for themselves and their family members. The unchecked positive health imagery of food supplements disguises the company’s exploitative processes, in which distributors higher up in the MLM scheme benefit from the sales generated through the intense and multifaceted sociometabolic work of people lower down.

Finding money to invest in memberships requires interpersonal relational work to divert funds earmarked for schooling, pawn family assets, or borrow from families, friends, or up-liners. Young people negotiate obligations to pay back loans and navigate tensions with parents who believe that AIM Global is a pyramid scheme. Their relational work extends to assessing their connections for possible clients and trying to recruit friends as members. Earning depends on whether down-lines are active, which adds mentoring to their work. Sometimes youth operate in groups, which creates even more complex relational dynamics, especially when frictions occur over unequal investments, debts, and workloads. In families and with peers, MLM workers negotiate and redraw boundaries between intimate and economic spheres of life (Zelizer 2005, 2012).

AIM Global distributors are expected to simultaneously embody C24/7’s efficacy and to tailor food supplements to clients’ health needs. This is well illustrated by the work that Felicia did when she asked about the first author’s well-being, employed diagnostic tests to measure the state of her veins, and suggested she use C24/7 along with Vida! and Choleduz to stay healthy. The sociometabolic dimension of the relational work is also evident when AIM Global trainers assert that the best drug pusher is a drug user. Sharing their own metabolic experiences with food supplements is part of the relational work that our interlocutors do. This includes collecting testimonials from their clients, generating over time a situated body of evidence showing the products’ merits, while developing relations of trust, both in face-to-face and online interactions, with people nearby and in other time zones.

This embodied labor can be alienating, in the sense that MLM workers are under pressure to perform the beneficial effect of their services and products without necessarily experiencing it as such, in the same way that flight attendants’ emotional labor is alienating, as they paint on a smile that they don’t feel (Hochschild 1983). In MLM, moreover, sociometabolic labor is “dislocated” (Harvey and Krohn-Hansen 2018) by the upward movement of capital, which perpetuates preexisting inequalities. As long as new down-lines keep getting recruited, up-liners make money. But if one fails to recruit new members, or if down-lines are inactive, one earns very little (Legara et al. 2008).

Entering an MLM scheme is thus risky business, especially for people who have little financial and social capital to begin with. Young people with more assets can buy...
multiple memberships and can motivate and train their down-lines more effectively, resulting in more active teams. Those with larger social networks and access to fast internet can reach out to more potential clients and new recruits. People who become members early on have an easier time recruiting new members. People who are better educated can more clearly explain supplements’ metabolic potential. Down-lines who are mentored well do better. Over time, many of our interlocutors quit MLM because their expectations of getting rich quick were not met and because they felt that the sociometabolic labor was too complex and time consuming. They lost their initial investment, and these dollars flowed upward to people above them in the scheme.

But emphasizing the exploitative and alienating nature of service-sector work in MLM means downplaying how distributors positively value their work. Youth living in the “borderlands” of “millennial capitalism” (Comaroff and Comaroff 2000) feel burdened by the intense sociometabolic work that they need to do to earn a decent income in MLM, and many give up while nonetheless valuing the new “life-making” skills they gain through marketing and sales experience and the health value of the commodities they sell. To understand their work, we need to be “attentive to different coexisting regimes of value” (Narotzky and Besnier 2014, 56) that operate in their lives.

These young people have come of age in an era of labor market flexibility, which requires “constant self-fashioning and self-investment” (McCormack and Salmenniemi 2016, 13). Our interlocutors felt that their participation in AIM Global brought them closer to their middle-class aspirations, symbolically if not monetarily, especially when recruiting people from around the world online while consuming pizza, Jollibee burgers, and C24/7. While they could rarely accumulate wealth through MLM, many young people feel that they have become better at “selling themselves” (Gershon 2017) and that they have acquired skills that will increase their chances of landing better jobs in competitive marketplaces where entrepreneurship, persistence, and creativity are highly valued assets. While those who quit returned to more traditional ways of investing in the future, their experiments in neoliberal entrepreneurship and relational labor nonetheless changed how they cared for each other in families and communities. The multifaceted labor that young people do in MLM is relational work—a concept proposed by Zelizer (2012) to examine economic transactions in everyday lives. This work includes recruiting new customers and new distributors, as well as mentoring tasks. Our ethnography, however, suggests that the concept needs to be expanded to also account for the profoundly metabolic nature of the work. Sociometabolic labor involves learning clients’ concerns about disrupted bodily processes and environmental stresses and disturbances, and then tailoring products to meet these metabolic needs.

Sociometabolic labor is omnipresent in rapidly changing urban environments, where people are confronting increasingly flexible, competitive, and demanding labor conditions (Gershon 2011; Harvey 1990; Pine 2007; Urciuoli 2008); an abundance of fast food; toxic environments; and health programs that demand that they exercise, relax, and eat well (Yates-Doerr 2015). Its emergence reflects both changes in labor arrangements and ways of understanding bodies in a postindustrial era. Labor is no longer just a productive exchange relation between person and environment (Schmidt 1971), nor simply a linear process of the bodily “taking in fuel and putting out energy” (Roberts 2017, 597). Rather, it also involves attending to disruptions in complex bodily systems and protecting people from toxic environments.

Sociometabolic work is limited neither to MLM nor to the selling of food supplements; it is also done in beauty salons, where service-sector workers detoxify skin and replenish it with nutrients; shiatsu clinics, where masseurs remove blockages in energy flows; gyms, where trainers advise on the use of protein shakes (often also part of MLM programs) and design exercise programs to build muscles; and antiaging clinics, where health workers seek to slow down the processes of metabolic destruction. In all these service-sector sites, workers are expected to embody metabolic health with glowing skin, radiant energy, toned and muscular bodies, and youthful appearances.

Future anthropological studies of sociometabolic labor can help further refine its particularities in diverse labor arrangements in the growing service sector. They can do so by unraveling the multiplicity of regimes of value at stake and by attending to variations in disciplinary structures (acknowledging also hybrid forms when, e.g., fitness coaches or salon workers participate in MLM as a sideline). Ethnographies of sociometabolic labor further need to be mindful of the range of technologies, including new diagnostic tools and social media, used to create demand for metabolic well-being (increasingly across time zones and borders), and the varied practices through which metabolic health is enhanced. They must also be alert to the flows of metabolites, adjuvants, and plastic vessels into the environment as waste, which affects the ecologies in which we live and our future metabolic health (Hardon and Sanabria 2017). With attention to the regimes of value at stake, technological assemblages that create demand, disciplinary structures that grant sellers varying degrees of freedom, and the flows of waste that affect our metabolic health, anthropological studies on sociometabolic labor in the service sector can generate new understandings of the complex relations between porous bodies and urban ecologies in conditions of precarity.
Notes

Acknowledgments. We thank our interlocutors for sharing their experiences with us; the anonymous reviewers of American Ethnologist, who gave generous comments and incisive suggestions for revision; and David Hymans and Erin Martinez for editing the manuscript. Emily Yates-Doerr gave very valuable comments on an earlier version of the paper. The research reported herein received funding from the European Research Council under Grant Agreement 323646 for a project entitled Chemical Youth (http://www.chemicalyouth.org). In the review and decision process, the editor of AE, Niko Besnier, was seconded by Associate Editor Paige West because of his conflict of interest with the first author. We very much appreciate the precise copyediting by Pablo Morales and thank Julie Neithercutt for timely and clear communications.

1. All interlocutors’ names are pseudonyms. The name of the corporation and the products it markets are not.

2. We obtained verbal informed consent from our interviewees. The trainings we attended were open to the public, as are the websites we studied.

3. Her analysis echoes the work by feminist anthropologists who draw attention to how women’s unpaid affective labor in homes and families enables the productive labor of other household members (Narotzky 2015; Oksala 2016; Weeks 2011).

4. Philippine government statistics show that, on average, families pay around US$120 for health per year, with an estimated 56 percent of total health expenditures coming out of pocket. See Philippine National Health Accounts, press release 2016–1017 (PSA 2018).

5. The slogans of AIM Global trainers echo the “prosperity gospel” (Coleman 2000). But our interlocutors, whose families are mostly Catholic, generally did not approach their engagement with AIM Global as a religious practice, with the exception of some distributors who distribute the products in Seventh-day Adventist religious communities.

6. While all countries worldwide tightly regulate pharmaceuticals, not all food and drug authorities scrutinize evidence from clinical trials before allowing a new pharmaceutical on the market.

7. These dynamics resemble the complexities that young men who engage in informal work together in urban Ethiopia have to deal with as they balance affection and reciprocity (Mains 2013).

References

AIM (Alliance in Motion). 2017. “Board of Directors.” https://www.alliancemotion.com/about_bod.

Anagnost, Ann. 2013. “Introduction: Life-Making in Neoliberal Times.” In Global Futures in East Asia: Youth, Nation and the New Economy in Uncertain Times, edited by Ann Anagnost, Andrea Arai, and Hai Ren, 1–28. Stanford, CA: Stanford University Press.

Bayat, Asef, and Linda Herrera. 2010. “Introduction: Being Young and Muslim in Neoliberal Times.” In Being Young and Muslim: New Cultural Politics in the Global North and South, edited by Linda Herrera and Asef Bayat, 3–24. New York: Oxford University Press.

Besnier, Niko. 2011. On the Edge of the Global: Modern Anxieties in a Pacific Island State. Stanford, CA: Stanford University Press.

Bromley, David G. 1995. “Quasi-religious Corporations: A New Integration of Religion and Capitalism?” In Religion and the Transformations of Capitalism: Comparative Approaches, edited by Richard Roberts, 135–60. London: Routledge.

Cahn, Peter. 2006. “Building Down and Dreaming Up.” American Ethnologist 33, no. 1 (February): 126–42.

Chua, Beng-Huat. 2000. Consumption in Asia: Lifestyles and Identities. New York: Routledge.

Cole, Jennifer. 2008. “Fashioning Distinction: Youth and Consumerism in Urban Madagascar.” In Figuring the Future: Globalization and the Temporality of Children and Youth, edited by Jennifer Cole and Deborah Durham, 99–124. Santa Fe, NM: School for Advanced Research Press.

———. 2010. Sex and Salvation: Imagining the Future in Madagascar. Chicago: University of Chicago Press.

Coleman, Simon. 2000. The Globalization of Charismatic Christianity: Spreading the Gospel of Prosperity. Cambridge: Cambridge University Press.

Comaroff, Jean, and John L. Comaroff. 2000. “Millennial Capitalism: First Thoughts on a Second Coming.” Public Culture 2, no. 2 (Spring): 291–343.

Dávila, Arlene. 2016. El Mall: The Spatial and Class Politics of Shopping Malls in Latin America. Berkeley: University of California Press.

Desclaux, Alice. 2014. “Ambivalence in Cultural Framing of Cosmopolitan Alternative ‘Medicines’ in Senegal.” Carare 37 (2): 53–60.

DOH (Department of Health). 2017. Philippine Plan of Action for Nutrition 2017–2022. A Call to Urgent Action for Filipinos and Its Leadership. Manila: National Nutrition Council.

DSM Nutritional Products. 2014. “resVida Health Benefit Solution.” https://www.dsm.com/content/dam/dsm/human-nutrition/pdfs/resVida_A4_2pp_leaflet_08_09_2014_Final.pdf.

Dumit, Joe. 2012. Drugs for Life: How Pharmaceutical Companies Define Our Health. Durham, NC: Duke University Press.

Durham, Deborah. 2008. “New Horizons: Youth at the Millennium.” Anthropological Quarterly 81, no. 4 (Fall): 945–57.

Euromonitor. 2016. Passport: Vitamins and Dietary Supplements in the Philippines. London: Euromonitor International.

Fadzillah, Ida. 2005. “The Amway Connection: How Transnational Ideas of Beauty and Money Affect Northern Thai Girls’ Perceptions of Their Future Options.” In Youthscapes: The Popular, the National, the Global, edited by Sunaina Maira and Elisabeth Soep, 85–102. Philadelphia: University of Pennsylvania Press.

FTC (Federal Trade Commission). 2016. “Herbalife Will Restructure Its Multi-level Marketing Operations and Pay $200 Million for Consumer Redress to Settle FTC Charges.” July 15, 2016. https://www.ftc.gov/news-events/press-releases/2016/07/herbalife-will-restructure-its-multi-level-marketing-operations.

Gershon, Ilana. 2011. “Neoliberal Agency.” Current Anthropology 52, no. 4 (August): 537–55.

———. 2017. Down and Out in the New Economy: How People Find (or Don’t Find) Work Today. Chicago: University of Chicago Press.

Hardin, Jessica. 2019. Faith and the Pursuit of Health: Cardiometabolic Disorders in Samoa. New Brunswick, NJ: Rutgers University Press.

Hardon, Anita, and Emilia Sanabria. 2017. “Fluid Drugs: Revisiting the Anthropology of Pharmaceuticals.” Annual Review of Anthropology 46:117–32.

Hardt, Michael, and Antonio Negri. 2000. Empire. Cambridge, MA: Harvard University Press.
Harvey, David. 1990. The Condition of Postmodernity: An Enquiry into the Origins of Cultural Change. Malden, MA: Blackwell.

Harvey, Penny, and Christian Krohn-Hansen. 2018. “Introduction: Dislocating Labour: Anthropological Reconfigurations.” Journal of the Royal Anthropological Institute 24, no. S1 (April): 10–28.

Hochschild, Arlie Russell. 1983. The Managed Heart: Commercialization of Human Feeling. Berkeley: University of California Press.

Huang, Julia Qermezi. 2017. “The Ambiguous Figures of Social Enterprise: Gendered Flexibility and Relational Work among the Agents of Bangladesh.” American Ethnologist 44, no. 4 (November): 603–16.

Kriger, Detlev. 2012. “Fields of Dreams, Fields of Schemes: Ponzzi Finance and Multi-level Marketing in South Africa.” Africa 82 (1): 69–92.

Lan, Pei-Chia. 2001. “The Body as a Contested Terrain for Labor Control: Cosmetics Retailers in Department Stores and Direct Selling.” In The Critical Study of Work: Labor, Technology, and Global Production, edited by Rick Baldoz, Charles Koeber, and Philip Kraft, 83–105. Philadelphia: Temple University Press.

Landecker, Hannah. 2013. “Postindustrial Metabolism: Fat Knowledge.” Public Culture 25 (3): 495–522.

Legara, Erika, Christopher Monterola, Dranreb Juanico, Marisciel Litong-Palima, and Caesar Saloma. 2008. “Earning Potential in Multilevel Marketing Enterprises.” Physica A 387, no. 19–20 (August): 4889–95.

Leidner, Robin. 1993. Fast Food, Fast Talk: Service Work and the Routinization of Everyday Life. Berkeley: University of California Press.

Liechty, Mark. 2003. Suitably Modern: Making Middle-Class Culture in a New Consumer Society. Princeton, NJ: Princeton University Press.

Lukose, Ritty. 2009. Liberalization’s Children: Gender, Youth and Consumer Citizenship in Globalizing India. Durham, NC: Duke University Press.

Mains, Daniel. 2013. “Friends and Money: Balancing Affection and Reciprocity among Young Men in Urban Ethiopia.” American Ethnologist 40, no. 2 (May): 335–46.

Mann, Michael. 2001. “Globalization and September 11.” New Left Review, no. 12 (November–December): 51–72.

McCormack, Donna, and Suvi Salmenniemi. 2016. “The Biopolitics of Precarity and the Self.” European Journal of Cultural Studies 19 (1): 3–15.

McCormack, Fiona, and Kate Barclay. 2013. “Insights on Capitalism from Oceania.” In Engaging with Capitalism: Cases from Oceania, edited by Fiona McCormack and Kate Barclay, 1–28. Bingley, UK: Emerald House.

Naafs, Suzanne, and Ben White. 2012. “Intermediate Generations: Reflections on Indonesian Youth Studies.” Asia Pacific Journal of Anthropology 13, no. 1 (February): 3–20.

Narotzky, Susan. 2015. “The Payoff of Love and the Traffic of Favors: Reciprocity, Social Capital, and the Blurring of Value Realms in Flexible Capitalism.” In Flexible Capitalism: Exchange and Ambiguity at Work, edited by Jens Kjaerulf, 288–310. Oxford: Berghahn.

Narotzky, Susan, and Niko Besnier. 2014. “Crisis, Value and Hope: Rethinking the Economy; An Introduction to Supplement 9.” Current Anthropology 55, 59 (August): S4–16.

Nelson, Diana. 2013. “100 Percent Omnilife: Health, Economy, and the End/s of War.” In War by Other Means: Aftermath in Post-genocide Guatemala, edited by Carlota McAllister and Diana Nelson, 178–231. Durham, NC: Duke University Press.

Newell, Sasha. 2012. The Modernity Bluff: Crime, Consumption, and Citizenship in Côte d’Ivoire. Chicago: University of Chicago Press.

Newmaster, Steven, Meghan Grguric, Dhiyaa Shammughanandhan, Sathishkumar Ramalingam, and Subramaniam Ragupathy. 2013. “DNA Barcoding Detects Contamination and Substitution in North American Herbal Products.” BMC Medicine 11, article no. 222. http://www.biomedcentral.com/1741-7015/11/222.

NIH (National Institutes of Health). 2019. “Vitamin B6.” Last updated July 11, 2019. https://ods.od.nih.gov/factsheets/VitaminB6-Consumer/.

Olfi, Paul. 2013. Do You Believe in Magic? Vitamins, Supplements, and All Things Natural—a Look behind the Curtains. London: HarperCollins.

Oreneno, Rene. 2008. “Neoliberalism and the Working People of Southeast Asia.” Asian Journal of Social Science 36 (2): 170–86.

Oksala, Johanna. 2016. “Affective Labor and Feminist Politics.” Signs 41, no. 2 (January): 281–303.

Oldani, Michael. 2004. “Thick Prescriptions: Toward an Interpretation of Pharmaceutical Sales Practices.” Medical Anthropology Quarterly 18, no. 3 (September): 325–56.

Pine, Jason. 2007. “Economy of Speed: New Narco-capitalism.” Public Culture 19 (2): 357–68.

PSA (Philippine Statistics Authority). 2018. “Total Health Expenditures Grew by 8.0 Percent in 2017.” October 18, 2018. https://psa.gov.ph/national-health-accounts-press-releases.

Roberts, Elizabeth. 2017. “What Gets Inside: Violent Entanglements and Toxic Boundaries in Mexico City.” Anthropology 32, no. 4 (November): 591–619.

Rofel, Lisa. 2007. Desiring China: Experiments in Neoliberalism, Sexuality, and Public Culture. Durham, NC: Duke University Press.

Romualdez, Alberto Jr., Gideon Lasco, and Byran Albert Lim. 2011. “Universal Health Care.” Journal of the ASEAN Federation of Endocrine Societies 27 (2): 180–83.

Sanabria, Emilia, and Emily Yates-Doerr. 2015. “Economy of Speed: New Narco-capitalism.” Ethnology 27 (2): 180–83.

Sanabria, Emilia, and Christian Krohn-Hansen. 2018. “Introduction: Dislocating Labour: Anthropological Reconfigurations.” Journal of the Royal Anthropological Institute 24, no. S1 (April): 10–28.

Schoemaker, Mary. 1985. New Ethnography: From Oceania.” In Engaging with Capitalism: Cases from Oceania, edited by Fiona McCormack and Kate Barclay, 1–28. Bingley, UK: Emerald House.

Social Weather Stations. 2019. “Fourth Quarter 2018 Social Weather Survey: Hunger Decreases to 10.5% of Families.” January 16, 2019. https://www.sws.org.ph/swsmain/artcldisppage/?artcsyscode=ART-20190116202611.

Soomer, Richard. 2016. Metabolic Living: Food, Fat and the Absorption of Illness in India. Durham, NC: Duke University Press.

Souza, Flavio, and Linda S. Adair. 2014. “Childhood Dual Burden of Under- and Overnutrition in Low- and Middle-Income Countries: A Critical Review.” Food and Nutrition Bulletin 35, no. 2 (June): 230–43.

UNDP (United Nations Development Programme). n.d. “About the Philippines.” Accessed August 4, 2019. http://www.ph.undp.org/content/philippines/en/home/countryinfo.

Uy, Jocelyn R. 2015. “Drop ‘No Therapeutic Claim’ from Labels–DOH.” Philippine Daily Inquirer, March 2, 2015. https://newsinfo.inquirer.net/676191/drop-no-therapeutic-claim-from-labels-doh.
Vander Nat, Peter J., and William W. Keep. 2002. “Marketing Fraud: An Approach for Differentiating Multilevel Marketing from Pyramid Schemes.” *Journal of Public Policy and Marketing* 21, no. 1 (April): 139–51.

Villena, Butch. 2011. *Complete 24/7: The Natural Healers*. Quezon City, the Philippines: AIM Global.

Weeks, Kathi. 2011. *Feminism, Marxism, Anti-work Politics, and Postwork Imaginaries*. Durham, NC: Duke University Press.

Wilson, Ara. 1999. “The Empire of Direct Sales and the Making of Thai Entrepreneurs.” *Critique of Anthropology* 19, no. 4 (December): 401–22.  
———. 2004. *The Intimate Economies of Bangkok: Tomboys, Tycoons, and Avon Ladies in the Global City*. Berkeley: University of California Press.

Xu, Ke, David Evans, Kei Kawabata, Riadh Zeramdini, Jan Klavus, and Christopher Murray. 2003. “Household Catastrophic Health Expenditure: A Multi-country Analysis.” *Lancet* 362, no. 9378 (July): 111–17.

Yates-Doerr, Emily. 2015. *The Weight of Obesity: Hunger and Global Health in Postwar Guatemala*. Berkeley: University of California Press.

Zelizer, Viviana. 2005. *The Purchase of Intimacy*. Princeton, NJ: Princeton University Press.  
———. 2012. “How I Became a Relational Economic Sociologist and What Does That Mean?” *Politics and Society* 40, no. 2 (June): 145–74.

Anita Hardon  
Amsterdam Institute for Social Science Research  
University of Amsterdam  
Postbus 15718  
1001 NE Amsterdam  
The Netherlands  
a.p.hardon@uva.nl

Ian Anthony B. Davatos  
Humanities Department  
Palawan State University  
University Road  
Puerto Princesa  
5300 Palawan  
Philippines  
iandavatos26@gmail.com

Gideon Lasco  
Department of Anthropology  
University of the Philippines  
Rm. 1317, Pavilion 1  
Quirino Avenue  
Diliman  
1101 Quezon City  
Philippines  
glasco@gmail.com