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## FIELD NOTES

### Encountering the Leaking Faces: A Reflection on the Everyday Moral Call after Experiencing an Accident

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### ABSTRACT

This experimental field note reflects on an encounter with two seriously injured strangers after a road accident in Shenzhen, a metropolis in China. Moving between autobiographical narration and theoretical reflection, it explores how injured and leaking faces interrupt the ordinary visual order of metropolitan life and reactivate an ethical responsibility toward unfamiliar others. Through engagements with feminist posthumanism, Levinasian ethics, and urban sociology, it reflects on the conditions under which the ethical call of the face becomes compelling in everyday metropolitan life. Rather than concluding with a diagnosis of urban indifference, the field note proposes a reparative understanding of first-aid training—not simply as the acquisition of technical competence, but as a form of ethical preparation that cultivates the readiness to reach toward vulnerable bodies in moments of emergency.

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## Encountering the Leaking Faces

A crowd had gathered around something. Two young men lay by the roadside. A shattered electric scooter. Several small pools of blood. I did not think of calling the police; nor did I think of calling an ambulance. After all, this is Shenzhen, the so-called City of the Future, one of the largest cities in China. So busy. So many people. Surveillance cameras and patrol police everywhere.

What I saw were two unclean faces: dust, blood, cheeks swelling with the passing of time, and wounds gradually clotting. Their customized electric scooter, although its front had been crushed and twisted beyond recognition, was still blasting bass-heavy pop music. The rider's glossy, stylish helmet—which he had chosen not to wear—hung awkwardly between the handlebars and the seat, already split open by the force of the collision. The two young men lay a couple of metres apart—if something (the helmet) built to withstand impact had fractured like this, it was difficult to imagine the injuries they had sustained.

Fortunately, my partner called the ambulance. The operator asked us what their injuries looked like. Were they still bleeding? If so, could we wrap the wounds with gauze or cloth?

What did we have? I wondered. We had nothing except the clothes we were wearing. Should I take off my shirt and bandage them? I did not even want—or dare—to touch them. Was I supposed to wrap my clothes around their heads? If so, how would I get home afterward half naked?

In modern urban life, we encounter countless faces every day. They always seem complete and self-contained—or at least they appear so from the outside. I say “seem” because the wishful imagination that our bodies and skins exist as fully enclosed and autonomous entities has already been smashed by feminist posthuman scholarship. We are constantly exchanging matter with the environments around us. Astrida Neimanis (2017, p. 2) poetically uses water both as a material foundation and an allegorical figure to offer a new understanding of embodiment: our bodies are bodies of water—“we leak and seethe, our borders always vulnerable to rupture and renegotiation.” And don't forget Haraway's (1990, p. 220) famous question: “Why should our bodies end at the skin, or include at best other beings encapsulated by skin?”

Yet it is precisely within this illusion that we recognize the face of closure as normal. Blood should flow inside veins; dust should be wiped away and stored in a handkerchief. Everything should remain where it belongs. This condition is what Mary Douglas (1966) called purity—and simultaneously the condition that defines its opposite: danger.

Sitting comfortably in my armchair at my desk, I found myself deeply moved by Neimanis' poetic language. Yes—our bodies are watery. Water continually leaks from our bodies into the surrounding environment, joining the circulation of fluids among humans and nonhumans alike. In this sense, our relations with others and with the environment can indeed be intimate, interconnected, and mutually caring. But what if the skin of our bodies enters an abnormal state? What if a face is struck, scraped, or torn open; blood pours

from facial wounds; tissue fluid seeps from ruptured capillaries to fill the tiny spaces between skin and flesh? When I speak of encountering a leaking face or (a part of) the body, I do not simply refer to bodily permeability in its ordinary condition, in which Neimanis celebrates the body's constant porosity as a new mode of relationality. Rather, I refer to a face whose skin has been crudely ruptured rather than naturally opened; a face that leaks not moderately but excessively; a body whose fluids escape into the environment through injury, violence, and danger.

Encountering so many normal faces in everyday urban life, I often wonder how Levinas (1996 [1984]) could regard the face as the starting point of ethical responsibility toward the Other. When I say that Levinas' phenomenological account of the face-to-face encounter can be questionable, I do not mean there is something wrong with his philosophy. Rather, I mean that those of us accustomed to metropolitan everyday life are, in some sense, removed from the context in which Levinas developed his philosophy of faciality. Although he spent much of his life in Paris, Levinas' intellectual experience seems rather different from the urban traditions represented by Walter Benjamin—look at those exquisite arcades—or Jean-Paul Sartre—consider what he saw in the face of others. Levinas was born in Kaunas, Lithuania, and spent his childhood there. He later studied in Strasbourg and Freiburg. Although these were extremely insignificant towns, his identity as an Eastern European Jewish diasporic thinker, combined with his origins on the margins of the Russian Empire, lent his thought a certain sensibility of scarcity, marginality, and non-urbanity. Perhaps this is why, for Levinas, the Other appears as something scarce enough that every encounter between two faces carries ethical weight.

In everyday metropolitan life, however, the face as a Levinasian ethical invitation would simply cause the memory (by which I mean the conscientious space that can be easily called) of conscience to overflow. Am I supposed to bear ethical responsibility toward the delivery worker who drops off my food and immediately runs toward the elevator? Toward the security guard who checked my "health code"<sup>1</sup> during COVID? Toward the white-collar worker who squeezes me in the subway? Toward the stranger in a shopping mall who presses the elevator's close-door button before I can enter?

However, standing before these two damaged and leaking faces, I genuinely felt an absolute responsibility toward unfamiliar fellow humans. Perhaps they were troublemakers. Perhaps they were the so-called "gui-huo youths"<sup>2</sup>. But they were in pain. My hands went cold, and chills spread through my torso. I could not tell whether it was the cooler weather, the half-finished ice cream I had earlier, or simply a physiological response to their wounds. I thought of war—a condition in which accident becomes routine. A machine humming through the air, suspended by an almost invisible thread called optical fiber, approaches an intact face filled with terror. Then the signal disappears. Bang. A damaged face is produced. Things like this happen every day on the Eastern European plains not far from Levinas' homeland.

To my shame, I never touched them. Not once. What occupied my thoughts were my clothes, my dignity, and my fear.

Of course, we can find countless explanations for this indifference by calling it social. More than a century ago, Simmel (1950 [1903]) already recognized that the metropolis, as a social structural condition, inevitably generates a new form of mental life. He described metropolitan life as essentially “intellectualistic,” standing in sharp contrast to the spirit of the small town, which relies more heavily upon affect and personal relations. On the one hand, the city is bound to capitalism, market rationality, and monetary economy, making relationships between faces—and the humans who bear them—increasingly mediated by economic division of labor and the circulation of money. On the other hand, Simmel took seriously both the intensity of urban sensory stimulation and the limits of human psychological capacity, arguing that city dwellers become desensitized to difference. This helps explain what he famously called the “blasé metropolitan attitude.” Simmel’s insight seems to connect almost every explanation for my indifference: modernity’s disruption of premodern social bonds (something Simmel hinted at and anthropologists later elaborated); capitalism’s alienation of organic social relations (again anticipated by Simmel and further developed by Marxists); the spatial organization of urban life (to which Simmel contributed a lot); psychological explanations like the bystander effect (see Darley and Latané, 1968); and the overly influential yet intellectually derivative discourse of “the disappearance of the nearby” in contemporary China (see Xiang, 2021). Thus I can say: Look, this is why, when confronted with two suffering faces, some people hesitate and many more simply watch.<sup>3</sup>

The young man with dyed white hair tried to sit up, dissuaded by myself. The heavier young man rolled on the ground, mumbling incoherently. Finally, the ambulance arrived at this chaotic and congested intersection. Ten minutes, it turns out, can be very long.

Crossing the road and walking home through the park, those two faces remained in my mind. What is it that makes us so indifferent toward ordinary faces and toward our ethical responsibilities to others? And what makes the Levinasian ethical invitation effective only when confronted with faces marked by impurity and danger under the opposite condition of the everyday? Should we feel relieved that the call of the face still works or saddened by the harsh conditions under which it does?

I do not know.

Perhaps the most practical thing we can do is to learn some first-aid knowledge: how to deal with bleeding wounds, confusion, or respiratory arrest. Then again, perhaps technical knowledge is secondary. What seems more important is preparing ourselves psychologically to reach out when necessary. In *The Birth of the Clinic*, Foucault (1973 [1963]) famously examined the decisive historical moment in the late eighteenth century when modern medicine took shape. It was during this period that medical vision and medical language finally formed an alliance—specifically, the formation of what Foucault called the discourse of medical experience or *la clinique*<sup>4</sup>. In a certain sense, a medical vision and its gesture of looking began to require that physicians see not a suffering person but a pathological object. This became one of the conditions of possibility for modern medicine itself. More practically, from the training of scientists and medical students, learning to transform a suffering being into a scientific-medical object is often

among the first lessons. Consider, for example, the emotional management of scientific novices involved in routinely killing laboratory animals (Arluke, 1999). Or the concept of “detached concern,” used in medical sociology to describe the general professional stance physicians adopt toward patients (Fox, 1959). If we temporarily suspend the critical perspectives of the humanities, perhaps these scientific and medical attitudes toward injury are worth borrowing pragmatically. Why couldn’t learning first aid be a way of stepping outside one’s everyday self and becoming prepared to reach out toward potentially unclean others?

I thought of one auntie at the scene, fussing around, waving her hands about, and using wet wipes to clean the injured men’s faces. What right did I have to laugh at her? At least she reached out; I did not.

## Concluding Memo

This experimental field note traces an encounter with two injured strangers whose damaged, leaking faces interrupted the ordinary visual order of urban life. Drawing on feminist posthumanism, I begin by questioning the illusion of the body’s boundedness and integrity: bodies are always already porous, yet everyday urban perception depends upon imagining faces as closed, clean, and self-contained. The accident violently suspended this illusion. Blood, swelling, dust, and ruptured skin transformed two ordinary faces into what Mary Douglas would call matter out of place, rendering them simultaneously dangerous and ethically compelling.

This experience of an accident also raises questions about Emmanuel Levinas’s ethics of the face and faciality. I reflected on whether his philosophical premise is still applicable for contemporary metropolitan context. Surrounded daily by countless anonymous faces, urban dwellers develop what Georg Simmel famously described as the “blasé metropolitan attitude.” Under such conditions, the Levinasian ethical call risks becoming unsustainable, if not impossible, in ordinary encounters.

Paradoxically, it was precisely the injured, leaking faces as the interruption of everyday faciality, that reactivated the ethical summons. My experiences point to the moment of oscillation between metropolitan indifference and the willingness to reach toward strangers. The final reflection therefore shifts from abstract diagnosis to practical ethics. Learning first aid is not only about acquiring medical knowledge or technical competence. It may also be understood as cultivating a disposition of readiness—a preparedness to suspend everyday tendency towards avoidance, to overcome fear of contamination, and to reach out toward vulnerable, leaking bodies when ethical summons emerge. In this sense, my thinking to some extent reverses the critical concern of medical training in humanities. I suggest that, for laypersons like ourselves, certain forms of medical training possess a reparative potential: they prepare us to respond to, rather than retreat from, the needs of others.

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## Notes

1. The health code is a location-tracking app used during the COVID-19 pandemic in China, functioning as an e-passport to be checked usually by security guards or doormen.
2. Gui-huo youths or gui-huo shao-nian (literally “Ghost Fire Boys” or “Ghost Fire Youths”) is a popular Chinese label referring to young men who ride heavily modified electric scooters or motorcycles. They are stereotypically associated with loud exhausts or speakers, flashy decorations, dangerous stunts such as wheelies, and the refusal to wear helmets (RADII Media, 2025). Public discourse often associates them with dyed hair, conducts of loafing around or marginalized backgrounds and regions in China. While, as some reviewers indicated, the social behaviors of those gui-huo youths can also be interpreted as “a coded way of reclaiming agency when other pathways to identity or mobility feel blocked” (Wong, 2025). During the writing of the article, I instantly associated the injured riders with the label of gui-huo youths—a practice that deserves both criticism and self-criticism. Although such a judgement risks reproducing stereotypes, my assumption was prompted by a combination of signs: their dyed hair, the refusal to wear helmets, the incessantly blaring music that continued to play from the wrecked scooter, and my estimation of the speed at which the collision had occurred. Under China’s recent national regulations (known as Xin-guo-biao) for electric bicycles, battery capacity, motor power, and maximum speed are strictly limited (for example, the maximum legal speed is 25 km/h). The amount of kinetic energy required to crush the scooter’s front frame and crack a helmet strongly suggested that the vehicle had been travelling well above this limit, which is commonly understood to indicate that its speed limiter had been removed and that higher-voltage batteries or more powerful motors had been installed. Such modifications not only increase the vehicle’s speed but also its mass and the force of impact during a collision. Moreover, according to the Shenzhen Special Economic Zone Road Traffic Safety Regulations, electric bicycles in Shenzhen are prohibited from carrying passengers taller than 1.2 metres in principle, which means transporting another youth or adult as the rider did is itself a traffic violation.
3. From what I observed, perhaps only three to five people actually called an ambulance. My estimate is based on the number of people who remained around the scene making phone calls or video calls with the accident center after the traffic police and patrol officers had cordoned off the accident site and dispersed the crowd—three people in total, including myself. This is because calling an ambulance requires providing the emergency center with sufficient information about the injured persons beyond merely reporting the location, often through voice or video communication. While I was speaking with the dispatcher, my partner, who was observing from the periphery, noted that most bystanders had taken no constructive action, not even calling emergency services.
4. The French term *la clinique* originally refers not simply to a “clinic” as a medical facility, but more broadly to the institution of clinical medicine centered on bedside observation. As Sheridan Smith indicated in the Translator’s Note to *The Birth of the Clinic*, “When Foucault speaks of *la clinique*, he is thinking of both clinical medicine and the teaching hospital” (Foucault, 1973 [1963], p. vii).