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Applying the Concept of Pain

Abstract. This paper reaches the conclusion that, while there are ordinary cases in which the pretending to be in pain possibility is reasonable, these cases always contain some element that makes the pretending possibility reasonable. This will be the element that we ask for when we ask why the possibility is raised. Knowledge that someone else is in pain is a matter of eliminating the proposed element or neutralizing its pain-negating aspect.

Keywords: Pretending, skepticism, certainty, probability, knowledge.

I. Introduction

In his reply to Gassendi, Descartes writes: "Finally, since you often demand an argument from me when you O flesh, possess none yourself, and since the 'onus' of the proof presses on you, we must note that in philosophizing correctly, there is no need for us to prove the falsity of all those things which we do not admit because we do not know whether they are true. We have merely to take the greatest care not to admit as true what we cannot prove to be true." (Descartes 1967, 2: 209). Against this approach to philosophy, Charles Sanders Pierce writes:

We cannot begin with complete doubt. We must begin with all the prejudices which we actually have when we enter upon the study of philosophy. These prejudices are not to be dispelled by a maxim, for they are the things which it does not occur to us can be questioned. Hence this initial skepticism will be mere self-deception, and not real doubt; and no one who follows the Cartesian method will ever be satisfied until he has recovered all those beliefs which in form he has given up. ... Let us not pretend to doubt in philosophy what we do not doubt in our hearts. (Pierce 1966, p. 40)

In the same spirit Charles L. Stevenson writes:

it is typical of the Cartesian approach [to philosophy] to reverse our modern sense of justice, and to hold that all our ideas are guilty until proven innocent. ... Most of us have come to distrust this procedure. We have learned that the initial proof of innocence has been hard to find. ... I see only one way out of this difficulty — that of dropping the

Cartesian approach altogether and of holding our idea innocent until proven guilty. I say this not to propound a categorical imperative, but to make an ordinary proposal — a proposal which simply emphasizes in philosophy a procedure that we have long taken for granted in science and in daily life. (Stevenson 1947, pp. 4–5)

This is reinforced in John Austin's "Other Minds." There Austin begins with a claim to know: "That is a goldfinch" (Austin 1970, p. 125). He takes this to be "a statement of particular, current, empirical fact ... the sort of statement on making which we are liable to be asked 'How do you know?'" (ibid.). Austin tells us about the many ways we could show we know (the keeper reported it, from the booming sound, and so on) and about the many ways in which our claim could be challenged ('Is that the right shade?' 'But goldfinches don't have that color', and so on) and about the many ways in which our claim could not be reasonably challenged (for example, ordinarily we need not rule out that it is stuffed). We must, Pierce, Stevenson, and Austin point out, have some positive reason for doubt; we do not doubt just on account of the Cartesian maxim. In this essay I shall apply this basic idea to the question of how we know somebody else is in pain.

II. A Dialogue

Let us imagine a philosophical dialogue about knowing that someone is in pain. The dialogue is about a man hit by a truck. Let the skeptic be S, and let M be a philosopher who is not a skeptic.

- S. The man might be only pretending.
M. What do you mean *pretending*—a truck hit him and his arm is broken.
S. Well, it is possible that he is not in pain and is only pretending.
M. But how could he not be in pain?
S. Having a broken arm does not *guarantee* that you are in pain. Of course, it looks like he is in pain. But is he really? How can you know he is?
M. Look, let's just move off and then spy on him and see if he continues to groan.
S. That won't show anything. Even if he continued to groan that might be because he was suspicious of someone spying on him. Or he might be afraid of someone coming along and catching him relaxing.
M. Well look, suppose we go over to him and ask him and then closely examine him and then go into his past history and then set someone to watch him for the next two weeks.

- S. But that will not do. Even if all that meshed with the hypothesis that he was in pain, he still might not have been in pain. For all we can tell he may be one of those people who never feel pain.
- M. Now we have you. Because we can tell about that. Why else would he be groaning?
- S. Who knows? Maybe he doesn't want anyone to know that he never feels pain.
- M. But we could check him out. We could talk to his parents who knew him as an infant when he could not pretend.
- S. But what if he always behaved in the right ways—say because of a special physiological adjustment—and thus never seemed to be abnormal.
- M. Well, an examination of his nervous system would reveal this.
- S. Surely it is possible for someone to have a normal nervous system and yet never feel pain.

S begins with the remark that the man might only be pretending. M replies by citing some of his obvious behavior and circumstances. S replies that he may be putting that behavior on and not be in pain. We then move off and observe the man unnoticed. Still, pretense is possible. We trace the man's history. He still might be pretending. Let us call circumstances that could indicate that the person behaving in the ways criterially associated with pain was not in pain countervailing conditions. At no point does S cite any *countervailing condition* (for example, a wink) for thinking that the man is not in pain. There is no reason for thinking this. All S is telling us is that for all we can tell the man might not be in pain. S tells us this in a limited number of ways, for example, he might be pretending. She uses this limited number of ways over and over again. S sees M as the one obliged to give reasons.

III. Probability

We cannot settle the possibility that a person is not in pain by saying that it is highly improbable.

One might agree with S that it is always possible that the person displaying pain behavior is not in pain. But, it might be claimed, M could have replied to S that this possibility is highly unlikely. Thus we will still say we know even when we have not ruled it out because what we claim is very likely true.

This rather plausible sounding view will not work. This is not because we never find the possibility that the person is not in pain more or less probable. We properly speak of evidence and probability. Rather the reason is that probability is essentially a matter of already given knowledge. That is, to say that in such and such a case it is highly improbable that so-and-so is not in pain is to say that we have already found out in cases of this sort that people usually are in pain.

Let us go back to the case of the man being hit by a truck. He clutches his arm and cries out. Is he in pain? Well possibly he is not in pain. No countervailing condition such as a wink is present, but as yet we do not know anything about how such special factors affect the chances that a person is not in pain. So we cannot say as yet that it is highly improbable that he is not in pain on the grounds that no countervailing condition is present. So we look more carefully and perhaps take in more of the circumstances and become more aware of his behavior. But he still may not be in pain. We still cannot say that it is highly improbable or only slightly probable that he is not in pain. No matter what case we begin with we cannot say that it is a case of someone in pain. It is possible that he is not in pain and we do not yet have the statistics for saying this possibility is highly improbable.

To establish any case as a case of someone being in pain we need the requirement that there can be a reasonable doubt about his or her being in pain only if some countervailing condition is present. Now once we have such cases we can compare them with cases in which some person only seems to be but is not in pain. We can notice various differences in circumstance and behavior. We can correlate some items with cases of being in pain and other items with cases of not being in pain. We can use these correlations to work out rough probability estimates.

But this procedure is possible only given that certain cases can be independently established as cases of other people being in pain.

IV. Possibility

Sometimes we think of the skeptical philosopher as merely reflecting on the verb 'to know' and then concluding that we must rule out every logical possibility of error. Perhaps some philosophers have said this. And perhaps it comes from a desire for mathematical certainty, which, in turn, comes

from an inspection of mathematics. But why should an inspection of mathematics lead to anything more than a desire for mathematical certainty in mathematics? How could the model of mathematical proof from axioms and definitions even *seem* to apply to cases in which we know that someone is in pain? It is even more absurd to want logical certainty. To want logical certainty is to want a proof that someone is in pain from definitions and the empty set of premises. To saddle S with such implausible desires would be to make her skepticism uninteresting.

A modern-day skeptic is Peter Unger. Unger requires absolute certainty for knowledge. Unger puts forth the following simple argument, which he claims is "correct in all essentials" (Unger 1975, p. 95):

- (1) If someone *knows* something to be so, then it is all right for the person to be absolutely *certain* that it is so.
- (2) It is never all right for anyone to be absolutely *certain* that anything is so.

Therefore,

- (3) Nobody ever *knows* that anything is so.

Let me introduce a bit of terminology. If a possibility is such that its actually being the case would falsify the statement involved in the claim to know, then the possibility, relative to that claim, is a counter-possibility. Thus, for example, the pretending possibility is a counter-possibility relative to every claim to know that someone is in pain. The statements that X is in pain and that X is pretending to be in pain are incompatible. A counter-possibility is *relevant* to a claim only if it is a possibility that must be ruled out if the claim is allowed to stand.

Peter Unger would regard each of the counter-possibilities S raised in my dialogue as being relevant to the claim that the man hit by a truck is in pain. Since the possibilities cannot be ruled out, he would conclude that M has no right to be absolutely certain that the man hit by the truck is in pain; using (1) above, he would conclude that M does not know that the man is in pain.

Against Unger, I shall urge, following what is suggested by Pierce, Stevenson, and Austin, that when the pretending possibility, for example, is introduced into an ordinary case, and no special factor is present or appealed to, it is unreasonable to say we do not know. If some special factor is present then the doubt is localized to the given case.

V. A Theory

When a person displays pain behavior we must apply the concept of pain to that person or see that it does apply. If we encounter such a person and do not either apply the concept of pain to him or her or see that it does apply, then we fail to grasp the significance of the person's behavior. That is, we fail to see that behavior as behavior that fits into a certain pattern of behavior and circumstances that constitutes what has been called a form of life.

What is this concept of pain? It is not merely the concept of a person being in pain. For the application of the concept of pretending to be in pain is an application of the concept of pain.

Suppose Joe and Bill are at a zoo. Bill gets rather childish when he is at the zoo. There is an orangutan in an area Bill is standing before. Bill mimics him. He hunches over the rail and holds his head and makes low guttural sounds. Joe glances in his direction. It looks as if Bill has collapsed over the rail, perhaps with a stomach cramp, groaning. Joe rushes over to Bill and asks him what's wrong. Bill straightens up with a blushing smile and says he was just imitating the orangutan.

There is another way we may be mistaken. Joe says Bill is in pain when Bill is not in pain but is pretending to have stomach cramps. Here Joe is not wrong in applying the concept of pain to Bill in the same sense in which he was wrong in the orangutan case. There Joe's mistake was that of thinking that Bill was groaning. Here, even if it turns out that Bill was pretending, Bill *was* groaning. Joe's application of the concept of pain to Bill may not be a true application but it is a proper application. Joe will say that Bill was not in pain but only pretending to be in pain. Joe will not withdraw his application of the concept of pain to Bill but will alter the mode of application.

So when we describe the general concept of pain we must say that it includes the various concepts of being in pain, feigning pain, imitating pain, and so on. The two basic ideas involved in this concept are those of being in pain and only seeming to be in pain.

Yet, when we are before a person displaying pain behavior, we do not say, "This person is in pain or in some way only seems to be in pain." We say this person is in pain. We apply the concept of pain in terms of one of its specific modalities.

How can this be explained or justified? Suppose a person is pain behaving. Suppose also there is nothing untoward that we can observe about

the situation. That is, the person does not wink or smile; her cries are not exaggerated; she has no known suspicious motive or a suspect character; and so on. Then there is no reasonable doubt that the person is in pain. It may be the case that we have failed to notice something or that we fail to know something, but this does not alter the fact that we are justified in saying she is in pain.

If the utterance of "So-and-so is in pain" is a claim to know then the question "How do you know?" is in order. If this question is in order in cases in which we say the person pain behaving in apparently normal circumstances (that is, where no countervailing conditions are present) is in pain, then we must view the behavior as evidence that the person is in pain. And then the question will arise as to what reason we have for saying the person is in pain on that evidence.

When is the utterance of "So-and-so is in pain" a claim to know that so-and-so is in pain? It is clear that we cannot determine what sort of utterance is being used just from the utterance itself. Given different contexts the speaker might be guessing that so-and-so is in pain, or suggesting that so-and-so is in pain, or informing someone that the person is in pain, and so forth. As is now well known, the status of a given utterance can be determined by a variety of factors coming either before or after the utterance itself.

One good indication that the utterance is a claim to know is the occurrence of the question "How do you know?" When it is appropriate to fully accept this question consequent to having said, "So-and-so is in pain," the speaker has made a knowledge claim.

I believe the correct methods for describing common knowledge and common knowing are the methods of Austin. The data to which we would have to appeal in giving our descriptions would be that of what we would say in fully described cases drawn from daily life. Whatever opinion we might have about the philosophical relevance of Austin's inquiries, it is unquestionable that they do produce adequate descriptions of what we would say we know and of when we would say we know and of all those ways in which we would ordinarily scrutinize and qualify our claims to know.

I examine some cases in which I apply Austin's method of describing what we would say philosophy set aside.

Case 1. You and I are standing before a person who is groaning, and holding her stomach. I remark of the fact she is in pain. You look at me and ask how do I know that. My response is "What do you mean? What makes

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you think she is not in pain?" I do not fully accept the question. Now you respond that you saw the woman wink and thus feel that she may only be pretending. Now I reply: "No, she is in pain." And now you ask once more: "Well then, how do you know she is?" At this juncture it is clear that your question is entirely in order. I must answer it or forfeit my right to say that she is in pain and to say that I know she is in pain. I can now support my claim in one of two ways. First, I can show that the wink was not a countervailing condition. ("She wasn't winking; that was a tic.") Second, I can admit that it was a countervailing condition but neutralize its effect. ("Yes, she did wink, but that doesn't mean anything. I know she would not pretend something like this. She just doesn't want us to worry. Look at how she is clenching her fists.")

Case 2. Again we are before someone displaying pain behavior. You remark on the fact that his cries seem exaggerated. I reply, "Well he is in pain." You ask, "How do you know?" Again this question is perfectly in order. Again there are two ways I can support my claim. First, I may argue that his cries are not exaggerated. Second, I may argue that in other ways his behavior is authentic, thus neutralizing the countervailing aspect.

Case 3. We are alone. You have not seen Smith and do not know that I have. I say that Smith was in pain. You ask me how I know. Again this question is perfectly in order. But now it amounts to "How did you come to be in a position to say that he is in pain?" Thus the answer to this question is to state the position I was in, for example, "I was in the room with him." Sometimes I will cite his pain behavior. But when I do this I am not basing my claim on the fact that he behaved in those ways. Rather, I refer to his behavior to show my position was a good one, for example, "I was in the next room with him and heard him crying out and groaning."

Case 4. Suppose you and I see somebody pain behaving. Nothing in this situation is amiss, but you have been fooled recently a few times by people's pain behavior when there was no pain. Perhaps in those earlier circumstances the people were pretending, perhaps just imitating somebody else's behavior. So, when on this occasion I say that the person we see is in pain, you are mistrustful and ask how I know. Once you explain yourself, I accept the question. I then have to explain why this case differs from the recent others that fooled you. Each of these cases features some disparity between the claimant and questioner. In the first two cases the disparity turns either on knowledge of or the assessment of some countervailing condition.

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In the third case it turns on a difference of position. In the fourth case it turns on a difference of recent experience.

It is not necessary that there be a second party. A person can think that so-and-so is in pain and then detect some countervailing condition and then either reject it or neutralize it and come to know the person is in pain. So we can generalize: the utterance "So-and-so is in pain" is a claim to know so-and-so is in pain when that utterance is made with the knowledge that there is some reason to doubt the person is in pain. "Claiming to know" thus has an essential connection with "showing you know," for the claim to know is, in these cases, the claim that certain possibilities can either be ruled out or neutralized.

Case 5. You and I are in the presence of someone pain behaving. There are no detectible countervailing conditions. Neither of us believes there are any. We each know that the other person does not believe there are any. Now I remark on how much pain she is in. I would not be telling you this or informing you of this. Your position is the same as mine. Now you ask: "How do you know she is in pain?" The question is altogether odd. We hear the words of the question. We understand these words. But these words in this question form in this situation are unintelligible.

I shall put forth a theory that, I think, explains the oddness in case 5 and the lack of oddness in cases 1–4.

When we said in case 5 that the person was in terrible pain we were simply applying the concept of pain to her in its primary form. The concept of pain includes a primary form, which is being in pain, and a secondary form, which is only seeming to be in pain either by way of pretense, or hallucinating, or hoaxing, and so on. In case 5 we were not claiming that we knew. We were not claiming that we had found this out (for example, by getting into a good position to see her), nor were we claiming that this is something we could show (for example, by neutralizing some countervailing condition). We were only showing that we took in the situation through our application of the concept of pain. The question "How do you know?" misrepresents the application of a concept. It represents it as a claim to know that the application is true. The question makes it look as if we had to do what we normally have to do in situations that involve countervailing conditions as in cases 1–4. There we have to give further reasons for thinking that the person really is in pain. But in fact this is not what we have to do, for all we have done is apply the concept of pain.

VI. Objection

Now central to the theory is the claim that when we say a person is in pain in cases lacking countervailing conditions we are not informing or telling anyone that so-and-so is in pain. We are remarking on something. To this there is the reply that we have made this remark by stating a fact. What we really did was state this fact and our calling it a remark merely indicates how it fits into the context. The words themselves constituted a statement and this statement could fit into many different contexts as a remark or an explanation or a reporting, and so on. No matter how it fits, the statement is either true or false. Since the statement is either true or false, we either know or fail to know whether it is true or false.

The theory also says that we do not make a knowledge claim in case 4. But, one might object, surely we do realize that the person is in pain. Surely this realization is not merely a belief or a guess or a hunch. This realization or taking it in that the person is in pain is knowing that the person is in pain. Just as a statement underlies a remark, so knowing underlies realizing and taking in. Just as stating that so-and-so is in pain fits into one context as a remark and into another context as a report, so knowing fits into one context as a realization and into another as a claim.

VII. A Reply

The perceptual situation in which we are consciously before a person pain behaving in a situation lacking countervailing conditions is the basic situation. According to the theory, this is the kind of situation in which we apply the concept of pain to a person. The objection says that it is the kind of situation in which we must know that a person is in pain. If so, then our most basic awareness of the reality of other people being in pain is a matter of knowing.

But to think of us as knowing in these basic cases is to admit the rightness of the question "How do you know?" And then we should be able to provide grounds for our claims and rule out possibilities that might show that our claims are incorrect. If the question "How do you know?" is in order, then the only possible answer to it is that I know the person is in pain because he or she is displaying pain behavior.

One might still think there is arguably still a serious question about how we know that somebody's in pain. The colloquial question—"How do you