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The Location of Pains

David Bain

Abstract: Perceptualists say that having a pain in a body part consists in *perceiving* the part as instantiating some property. I argue that perceptualism makes better sense of the connections between pain location and the experiences undergone by people in pain than three alternative accounts that dispense with perception. Turning to fellow perceptualists, I also reject ways in which David Armstrong and Michael Tye understand and motivate perceptualism, and I propose an alternative interpretation, one that vitiates a pair of objections—due to John Hyman—concerning the meaning of ‘Amy has a pain in her foot’ and the idea of bodily sensitivity. Perceptualism, I conclude, remains our best account of the location of pains.

What is it to have a pain in a part of your body? What, for example, is it to have a pain in a finger or a knee? Located pains puzzle philosophers. It seems natural to say that pains are mental, indeed experiences, hence that if Amy has a pain in her finger, she has an experience there. But philosophers tend to hold that if mental phenomena are anywhere, they are where their subjects are, and that their subjects are whole persons, whole animals, brains, or even souls, but not such body parts as fingers or toes.¹ Regarding beliefs, desires, and perceptual experiences, for example, this orthodoxy fits with pre-theoretical intuition. No one thinks we have in our toes visual experiences of red tomatoes. But in the pain case the philosophical conception appears to rule out a commonplace: that one can have *pains* in such places. You might call this the *paradox of pain location*.

In this paper, I defend an account of pain location I call *perceptualism*. I claim that perceptualism satisfactorily resolves this tension between platitude and orthodoxy (§§2 and 8). I also argue that it makes better sense than the alternatives of the relationships between pain location

¹ For example, O’Shaughnessy (1980, i: 176-77).

and experience (§§4 and 5). I start in §1 by sketching these relationships.

Before that, however, some terminological preliminaries: I speak below of an experience's *representational content* (or just *content*) and *phenomenal character* (or just *character*). 'Content' refers to what an experience represents as being the case (e.g., that there is a red tomato in front of you), 'character' to what it is like for the subject to undergo the experience. 'Qualia' refers to *non-representational* phenomenal properties of experience (if such exist).

1. Pain Phenomena

Consider the following:

Person claim. Necessarily, if a person *S* has a pain in a body part, then *S* is *in* pain (i.e., *S* undergoes a 'pain experience').

The idea is that Amy's having a pain in her toe involves not just Amy's toe, but Amy. It involves, in particular, her being in pain. And being in pain is surely an experiential matter, in particular a matter of things seeming a certain way *to a whole person*.² Again, there is a certain phenomenal character such that a person's being in pain consists in the person undergoing an experience with that character—a *pain experience*, as I shall call it. (The notion of a pain experience, again, is simply the notion of an experience by virtue of undergoing which a subject is in pain.) By contrast, notice that Amy's having a twitch in her cheek does not involve her in the same way; for that, she need undergo no experience. Now, a connected claim about the relationship between pain location and a person's experience is this:

Locative character claim. Necessarily, if *S* has a pain in a given location in one case, and in a different location in another, then between those cases *S* undergoes qualitatively different experiences.

² I shall stick with 'person' for ease, but 'organism' might be preferable inasmuch as I am using 'person' not to exclude non-human animals but to exclude sensitive body parts, which the experience view (below) counts as subjects of experience.

The person claim and the locative character claim are compelling, I suggest, particularly when disentangled from more suspect ideas. It is, for example, one thing to claim that Amy's having a pain in her toe entails she undergoes an experience, another to say that the experience must represent—or be *of*—the pain she has, or that the pain (or her being in pain) must engage her attention, or be noticed by her, or be represented in some experience or belief of hers.

The person claim can suggest that there is no distinction between having a pain in a part and being in pain. But a distinction is prized open by another compelling idea:

Unlocatability. S might be in pain and yet not have a pain in a body part.³

Consider Nelson, who lost his right arm at the Battle of Santa Cruz. Take an occasion after Santa Cruz—call it the *phantom occasion*—on which, phenomenologically, things are for Nelson just as they would be if he had a pain in a right arm of his and nowhere else. On that occasion, surely, there is no part in which Nelson has a pain. He has no right arm in which to have a pain, after all, and even if one wants to say he nevertheless has a phantom arm, a phantom arm is not a body part. So, although Nelson is certainly *in* pain on that occasion, he does not *have a pain in a body part*. Unlocatability follows, as does a distinction between having a pain in a part and being in pain.

One might oppose unlocatability by insisting that Nelson has a pain in his brain or stump.⁴ But, against this view, notice that it does not *seem* to Nelson as though he has a pain in either place. Brains, indeed, are usually thought of as insensitive, that is, as parts in which one cannot have sensations. (Those parts in which we ordinarily speak of our having sensations I shall call *limbs*. Even teeth are limbs in this non-standard

³ As one might also put it, the converse of the conditional embedded in the person claim is false.

⁴ See Newton (1989: 583) and Graham and Stephens (1985: 76; 1987: 402). I discuss in the next section Tye's apparent rejection of unlocatability.

sense; the present point is that brains—likes strands of hair and fingernails—are not.) Moreover, if we say that Nelson has a pain in his brain on the phantom occasion, then we are arguably committed to saying he has a pain there even on non-phantom occasions, in which case we might have to say that he never has a pain anywhere else. We would do well, I think, to avoid this conclusion if we possibly can. This is not to deny that brains are causally necessary for pains, of course. But, thanks to referred pains, we are familiar with the idea that a body part's being involved in the production of pain is not sufficient for a pain to be had in that part. Even if back trouble causes Fred to be in pain, he might consequently have a pain not in his back, but in his thigh.

So an account of pain location should illuminate these *pain phenomena*, as we might call them: the person claim, the locative character claim, unlocatability, phantom cases, referred cases, and what I call in §5 the *locatability conditions* (further connections between pain location and experience). A central purpose of this paper is to argue that perceptualism explains these pain phenomena better than three alternative accounts. The discussion is structured as follows. Perceptualism is introduced in §2. In §3, I present two anti-perceptualist objections of John Hyman's; and, in light of those and some positive remarks of Hyman's and others', I formulate three alternatives to perceptualism. I argue in §§4-5, however, that these alternatives make less good sense than perceptualism of pain phenomena. In the remainder of the paper, I turn to my fellow perceptualists. I argue in §6 that, understood as a metaphysical rather than semantic doctrine, perceptualism escapes the first of Hyman's objections; in §7 that a certain argument for semantic perceptualism fails because it falsely assumes that pains are experiences; and in §8 that, by interpreting it metaphysically and by denying that pains are experiences, perceptualism can be made to withstand Hyman's second objection too.

2. Perceptualism: Variants, Virtues, and Alternatives

Perceptualism. There is some property or process, F, such that S's having (or feeling) a pain in a body part L consists in S's somatosensorily perceiving L as instantiating or undergoing F.

This is the view I defend below. Different versions arise from different accounts of F, as I have explained at greater length elsewhere (2003). My own view is that perceptualism is most plausible when F is construed not as mental or subjective, but as non-mental and objective (in the sense that a complete account of what it is for something to instantiate or undergo F does not mention experience). On one such view, F is nociceptor activity (Armstrong 1968: 314-5); on another, it is bodily disorder (Tye 1995b). I want in this paper to remain neutral between these two objectivist versions of perceptualism, but in any case my argument is for an even less committed view: namely, perceptualism as formulated above. My aim, in short, is to show that an account of pain location must advert to perceptual relations obtaining between people and their body parts.

Despite the neutrality just avowed, I shall focus for the sake of concreteness on the version of perceptualism on which having a pain in a part consists in somatosensorily perceiving the part as being *disordered*, that is, roughly, as having something *wrong* with it.⁵ The view is absolutely not that pains are states of disorder, nor that having a pain in a limb requires it to be disordered. What is required is that the limb be somatosensorily *perceived as* disordered, whether or not it in fact is, and whether or not the subject believes it to be. (One can perceive something as red, after all, and yet know that it is not.) To perceive one's hand *as* disordered is to perceive it by means of an experience representing *that*

⁵ I do not think this means that having a pleasurable sensation in a limb needs to be construed as representing the limb as well ordered. Also, I want to remain neutral here on the question whether or not perceptual content is entirely conceptual, and the question under which mode of presentation (if any)—and courtesy of which psychosemantics—a non-human animal might represent disorder (or, indeed, nociceptor activity).

it is disordered (again, whether or not it is, or is believed to be). To perceive it *somatosensorily* is to perceive it in that mode by which one perceives one's own body 'from the inside'. It is somatosensorily that one perceives one's own heart as racing, for example, or one's own cheek as twitching.⁶

When conjoined with the following theory of being in pain, this perceptualist account of having a pain in a limb illuminates pain phenomena:

BIP.

- (a) S's being in pain consists in S's having a somatosensory experience as of a body part's being disordered; again, pain experiences are somatosensory experiences as of disorder.
- (b) Somatosensory experiences as of disorder have the phenomenal character of pain experiences in virtue of their representational content.⁷ Somatosensory experiences of different body parts being disordered have different phenomenal characters in virtue of their different contents.

(In my 2003, claim (a) is included in my definition of 'injury perceptualism' (2003: 506). But here I am using 'perceptualism' only for the account of pain location. The point to notice is that you might invoke perceptual relations in your account of pain location, as perceptualism does, or invoke perceptual experiences in your account of being in pain, as claim (a) does; or you might do both, as I am recommending.) Conjoined with BIP, perceptualism explains the person claim as follows. Perceptualism says that Amy's having a pain in her finger consists in her perceiving her finger as disordered. This

6 The idea of perceiving 'from the inside' requires further explanation, of course. I say more about the distinctiveness of somatosensory perception in my 2003. (See also note 7.)

7 That the experiences in question are somatosensory rather than, say, visual bears on their phenomenology, but it does so, I argue in my 2003, because somatosensory experiences have distinctive contents.

perceiving, in turn, partly consists in (or constitutes⁸) her undergoing an experience *representing* her finger as disordered. In turn, that experience is—in virtue of its content—a pain experience, according to BIP, i.e., its phenomenal character is such that Amy is *in* pain. Thus perceptualism explains why Amy's having a pain in her finger entails her being in pain. (The locative character claim can be similarly explained.)

Perceptualism illuminates these claims because, conjoined with BIP, it becomes what I call a *phenomenal account*, that is, an account registering in the following way the constitutive connections between having a pain in a limb and undergoing experiences:

Phenomenal Account.

- (i) S's having a pain in a limb partly consists in—or, alternatively, constitutes—S's undergoing a pain experience.
- (ii) The difference between S's having a pain in one location and in another partly consists in—or, alternatively, constitutes—a difference in the phenomenal character of the experiences S undergoes between the two cases.

We shall see below that perceptualism is not the only phenomenal account.

Perceptualism invokes certain perceivings to explain people's having pains in limbs. By conjoining perceptualism with BIP—to generate a phenomenal account and explain the person and locative character claims—I am in effect suggesting that what makes those perceivings the right episodes to invoke is their phenomenal character, and that they have this character in virtue of their content. The latter point—the linkage between content and character—makes perceptualism appealing to representationalists, who hold quite generally that phenomenal

8 'Constitutes' accommodates disjunctive conceptions of perceptual experience, on which see Child 1994 (ch. 5).

character consists in content.⁹ So perceptualism does not invoke qualia, i.e., non-representational phenomenal properties. But nor does it reject them. One could endorse perceptualism—and that the definitive character of pain experiences is representational, and that locative character is too—while thinking qualia are needed in other contexts, e.g., when characterising experiences in other sense modalities.

Above I suggested that perceptualism illuminates the person and locative character claims. But what about the other pain phenomena? To explain the referred case in which Fred has a pain in his thigh and not his injured back, the perceptualist will say that, although Fred's back partly *causes* the experience of disorder, it is his thigh and not his back that he *perceives* as disordered—albeit illusorily, assuming there is nothing wrong with his thigh. Admittedly, he can perceive his thigh only if it is involved in causing his experience, but that is compatible both with his thigh's not being disordered and with disorder in his back also being causally involved. What about unlocatability? Well, although perceiving a part as disordered entails having a perceptual experience—which point was central to the perceptualist's explanation of the person claim—the converse is false. On the phantom occasion, Nelson has a perceptual experience as of a right arm being disordered, for example, but there is no part he *perceives* as disordered. Rather, he suffers a somatosensory hallucination. He is, therefore, in pain (according to BIP) but lacks a pain in a body part (according to perceptualism).

In this context it is worth noting that there is a complication in counting Tye as a perceptualist under the definition above. For one to have a pain in a limb, at least in one sense, Tye requires a perceptual experience but *not* perception, and hence not a limb. Consequently, on his view, 'Amy has a pain in her hand' can be true even if she has no hand (1995b: 112). Moreover, since (like me) Tye takes the relevant perceptual experiences to be pain experiences, he is committed (unlike

9 There are weaker versions of representationalism—or 'intentionalism' as I call it in my 2003—but the finer distinctions need not worry us here.

me) to rejecting unlocatability, i.e., to claiming that being in pain entails having a pain in a limb (even if the limb does not exist). But I think it jars to say that, even lacking hands, phantom limb subjects might have pains in their hands. If, for example, not realising that her hands have been amputated, Amy sincerely and competently utters, 'I have a pain in my hand', she has surely spoken falsely, hence the pressure for her to substitute 'phantom hand' once she discovers the amputation. But, in fact, Tye and I may disagree less than it first seems. For he allows another reading of the sentence which does require the limb's existence (1995b: 112; 2002: 152). Suffice it to say, then, that I am concerned with the circumstances reported by the limb-requiring readings; it is in an account of these circumstances that I am arguing the notion of perception is essential.

Let us take stock. The perceptualist argues that perceptual notions are central to understanding pain phenomena. The person claim is illuminated by the fact that perception entails experience. The notion of illusory perception illuminates the possibility of one's having a pain in a healthy limb caused by disorder elsewhere, or indeed (we might allow) not caused by disorder at all. The idea of hallucination illuminates the phantom case, in which one is in pain but lacks a pain in a limb. And, we might add, the idea of there being enabling conditions on perception explains the obvious fact that a body part can be disordered without the subject being in pain, e.g., because an analgesic is interfering with the mechanisms of somatosensory perception, or because the nerves required for somatosensory perception simply do not extend to the part in question. (In §5, I further motivate perceptualism by invoking additional enabling conditions on perception.)

Now, before turning to perceptualism's difficulties, we might throw it into sharper relief by contrasting it with some standard alternatives. First, there are sense-datum views, e.g., Frank Jackson's (1977) idea that pains are awareness-dependent, spatially located 'mental objects', and that having a pain in a limb consists in the position of the pain coinciding with the position of the limb. I, and others, have objected to

that view elsewhere.¹⁰ Second, there are views that invoke not sense-data, but qualia. One such view holds that having a pain in one's nose, for instance, consists in perceiving the nose not as disordered, but rather by means of an experience instantiating the appropriate quale—*painful**, say.¹¹ Another dispenses with perception altogether in favour of what we might call *locative qualia*, holding that having a pain in one's nose consists in undergoing an experience that is both *painful** and *nose**. This is the natural view for the many philosophers who hold that pain experiences lack representational content altogether.¹²

I reject both qualia accounts, but my arguments in this paper are effective only against those invoking locative qualia. To anticipate, two of the alternatives to perceptualism that I discuss in §§3-5 are in effect just such accounts. Interestingly, they are also versions that at least try to meet the following challenge that faces these accounts: how to explain the connection between the locative qualia and the bodily locations, e.g., between *nose** and the subject's nose. It is to perceptualism's great credit that it meets the parallel challenge straightforwardly: when one has a pain in one's nose, the perceptualist claims, the relation between one's nose and the pain experience's nose-related phenomenal character is simply this: the latter consists in the former's perceptual representation.¹³

Finally, perceptualism might be contrasted with causal accounts. These say, variously, that having a pain in a finger consists in having a pain experience caused by the finger—perhaps specifically by disorder in the finger—or a pain experience that can be terminated by care for the finger.¹⁴ Such accounts may well be elaborated as versions of views already mentioned, the causal link being relevant only because it bears

10 See my 2003 and Hyman 2003 (12-13).

11 See Evans 1982 (230-31).

12 See my 2003 (503) for references.

13 Representationalists can allow locative *character*, notice, but not locative *qualia*. 'Character', unlike 'qualia', is neutral with respect to whether phenomenal features are representational.

14 See Hyman 2003 for references.

on the location-determining qualia, for example. But, however elaborated, they are undermined by cases already considered. The phantom and referred cases, for example, show that, to have a pain in a limb (e.g., Nelson's stump or Fred's back), it is not sufficient for the limb to cause a pain experience, or to be such that care for it will end a pain experience. Nor, the referred case also shows, is it either necessary or sufficient for *disorder* in the limb to cause the pain experience. Despite rejecting these causal views, however, I agree that causation bears on pain location. It does so, I shall argue, because it is required for perception.

3. Hyman's Objections and Three Further Alternatives

In an interesting and challenging article, John Hyman (2003) rejects perceptualism. His target is Armstrong, who claims that sentences of the form 'S has a pain in x' (call these the *L-sentences*) 'may be translated without loss of meaning' by sentences of the form 'It feels to S that a certain sort of disturbance is occurring in x' (1968: 314).¹⁵ Against this, Hyman has two complaints.

First, Hyman finds Armstrong's analysis unconvincing as a piece of semantics. The meanings Armstrong attributes to the L-sentences are, Hyman says, 'unobvious' and 'complicated', indeed 'baroque' (2003: 11, 16, 20). In the absence of supporting reasons, Hyman thinks, we should prefer a simpler and less ad hoc semantics, which, as we shall see, he attempts to supply. One might further direct against Armstrong a complaint which Hyman makes about another account. Armstrong holds that pains are pain experiences, hence his view appears to be that 'Amy has a pain in her foot' is the result of the ellipsis of 'representing a disturbance' from 'Amy has a pain *representing a disturbance* in her foot'.¹⁶

15 For simplicity, I have omitted what Armstrong says about the experience evoking a desire for it to cease. It is a nice question, which I cannot pursue here, whether a link to such desires is necessary to capture the unpleasantness of having a pain in a limb, and, further, whether having a pain in a limb is *necessarily* unpleasant.

16 Armstrong is explicit that 'I have a pain in my hand' asserts, in part, 'I have a certain sense-impression' (1962: 107).

But L-sentences, Hyman points out (2003: 9), do not *look* incomplete; and, without evidence of ellipsis, the claim that they *are* is ad hoc. Further, it might be objected (although Hyman does not) that a thinker could surely possess the concepts expressed by an L-sentence while lacking those expressed by Armstrong's paraphrase.

Hyman's second complaint is that perceptualism conflicts with the common sense idea, present in Aquinas but unpopular since Descartes, that our bodies are sensitive *in the sense that pains and other sensations are located about them* (2003: 23-24).¹⁷ Apparently, recall, Armstrong thinks the phrase 'in her foot' in 'Amy has a pain *in her foot*' modifies not 'a pain', but the omitted 'some disturbance'. So, for him, such sentences do not ascribe to the pain a location. Armstrong instead says they ascribe to it an 'intentional location' (1968: 315-16), but he means simply that they say the limb is the pain's intentional object, not its location. Such views, Hyman complains, are unacceptably of a piece with Descartes's 'densensitization' of the human body—again, of a piece with his depiction of the body as being 'more like a prosthesis' than it really is (2003: 23).

I sympathise with Hyman's two objections. But I disagree with Hyman that perceptualism is unable to overcome them. What alternative view does Hyman advance? The semantics he proposes is what I call the *pains/hurts paraphrase*, which renders 'Amy has a pain in her hand' as 'Amy's hand hurts' (2003: 16). This, he argues, is not ad hoc but an instance of a familiar and general grammatical rule, the rule that also allows us to use both 'Amy has a twitch in her cheek' and 'Amy's cheek twitches' to express just the same information (2003: 16). Now, I agree this is a highly plausible semantics; but I argue in §6 that it is available to perceptualists. Hence I assume it in what follows. Hyman, by contrast, takes it to support an alternative account of pain location. On the alternative account, pains are states, and states not of whole persons or brains, but of limbs, states which in *that* sense are *in* limbs. For just as

17 See also Cornman 1977 (27, 37) and Graham and Stephens 1985 (74) and 1987 (395-6).

twitches are states of twitching, Hyman argues, pains are states of hurting, ‘which begin when the affected part begins to hurt’ (2003: 15–16). The pain in my toe, for example, is the hurting of my toe. Thus for Hyman pains are ‘strictly and literally and non-intentionally’ in limbs, ‘just as a crease is in a shirt-sleeve’ (2003: 16).

As interesting as they are, these positive remarks of Hyman’s are incomplete. In particular, they say nothing about the relationship between a person having a pain in a limb (the limb’s hurting) and the person’s experience. Until it is developed so as to speak to this issue, Hyman’s view cannot properly be evaluated. Hence I shall consider three elaborations, the first and third of which are also endorsed by others in the literature.

Consider first:

The (Objective) State View. S’s having a pain in L consists in L’s being S’s, and L’s hurting, where L’s hurting consists in L’s instantiating an objective property (i.e., a property such that a complete account of what it is for a limb to instantiate it does not mention experiences).

James Cornman (1977) and Natika Newton (1989) endorse the state view or something very like it. Both appear to postulate objective properties of limbs that constitute one’s having a pain in a limb. Cornman says that when a person has ‘an experience of an aching tooth’, the tooth *seems* to have the property aching; and this phenomenology is correct, he thinks, for typically in such cases the tooth really does instantiate aching (1977: 29). Aching is neither identical to nor dependent on the experience; rather, it is an objective, sensible property, to that extent (he thinks) like a colour (1977: 30, 37, 32). Newton accords much the same role to what she calls *hurting* or *pain*—in one of the two senses she thinks ‘pain’ has (1989: 584). Like Cornman’s aching, Newton’s hurting is an objective sensible property. She appears to identify it with pain receptor

stimulation (1989: 584-6).¹⁸ Neither Cornman nor Newton state explicitly that S's limb's aching or hurting constitutes S's *having* an ache or a pain *in* it, but that seems to be their view. Given the plausibility of the pains/hurts paraphrase, it is certainly a natural development of what they say.¹⁹ In the same neck of the woods, Graham and Stephens (1985; 1987) introduce what they call *pain-qualia*, which in their unusual sense (different from mine) are objective, sensible properties of limbs (1985: 78-79; 1987: 399-401). They somewhat equivocate about whether or not pain-qualia are pains (instances of hurting),²⁰ but *if* they are, then the view would seem to be that a limb's possessing a certain objective property constitutes by itself (i.e., without that property's being perceived) the limb's owner having a pain in it.²¹ That, at any rate, is the state view.

Contrast:

The Experience View. S's having a pain in L consists in L's being S's, and L's hurting, where L's hurting consists in L's undergoing an experience.

Limbs are not merely sensitive on this view; they are sentient. Unlike the state view, but like perceptualism, this is a phenomenal account: it holds that Amy's finger's hurting consists in something's undergoing an

18 'Appears' because, although she says 'pain is *intrinsic* to a part of the body, and is *defined* as a state of that part such that pain receptors in it are stimulated' (1989: 584, my emphasis; see also 590), she also says confusingly that pains are secondary qualities or Lockean powers (1989: 569) that are (merely?) 'constituted' by pain-receptor stimulation (1989: 576).

19 This reading is also suggested by Newton's distinction between being in pain and having a pain, and by Cornman's stated desire to endorse as much of 'the naïve view' as possible, which view includes the idea that having one's tooth ache is the same as having an ache or a pain in the tooth (1977: 27).

20 They insist on talking of 'unperceived pain-qualia' rather than 'unperceived pains' (1987: 401), but they do not rule out that 'the word "pain" in locutions such as, "I feel a pain in my knee" refers to a pain-qualia' (1987: 398). They may also be willing to use 'hurts' to refer to a pain-qualia (1985: 74).

21 Are these sensible properties mental or physical? Cornman says they are mental, not physical (1977: 36, 39), Graham and Stephens that they are not mental (1985: 73), and Newton that they are physical (1989: 586).

experience. But what undergoes the experience *in the first instance* is not Amy, as the perceptualist holds, but her finger. As I shall take it, the view further claims that, when Amy's finger hurts, (i) Amy *also* undergoes the experience in question by dint of its being a part of *her* which undergoes it, and (ii) she is thereby in pain, that is, the experience is a pain experience. Regarding the phenomenal difference between Amy's having a pain in her finger and in her foot, that turns not on which part is perceptually represented, but on which part undergoes the experience. On this view, then, facts about subjecthood constitute facts about locative phenomenology.

I know of no philosopher who thinks both that we have pains in limbs and that the experience view explains what it is for us to do so. That would strike most as madness. But the experience view is nevertheless worth registering partly because it can seem to be no more than a consequence of common sense: pains are experiences, it can seem natural to say, hence if we have pains in our limbs, we must have experiences in our limbs, and what could it mean to say an experience is *in* a limb if not that the limb *undergoes* the experience? So that is one route to the experience view. Of course there is, as mentioned at the outset (see also §7), a strong contrary inclination to deny that limbs themselves undergo experiences. But if that denial is right, the foregoing train of thought can seem to become a *reductio* of the commonsense idea that we have pains in limbs. So the experience view is also an element in what I earlier called the paradox of pain location.

The final view I shall consider is this:

Relationalism. S's having a pain in L consists in S's undergoing a pain experience in L.

Relationalists think that Amy's having a pain in her finger consists in an experience being undergone by Amy and not her finger. Specifically, they invoke an *experiential relation* between Amy and the finger, as perceptualists do. But, unlike perceptualists, relationalists think the relation is non-perceptual. Again, the idea is that the experience is

undergone by *Amy in her finger*, where the notion of its being undergone *in her finger* is not to be unpacked either in terms of her finger's undergoing the experience or in terms of her perceiving the finger. Quite how the notion *is* to be unpacked, or whether it is instead to be treated as a *sui generis* and primitive notion, are questions the relationalist needs to answer, of course. But I shall not pursue them here. Now, Bruce Aune appears to endorse relationalism, or something very like it:

'I have a pain *in my arm*' asserts no more than ... 'My arm pains me' ... Instead, therefore, of locating pain *in* one's arm or leg, it seems closer to the facts to say that a certain region of one's arm or leg pains one. (1967: 130).²²

Notice finally that relationalism, like perceptualism and the experience view, is a phenomenal account. The qualitative difference between Amy's having a pain in her finger and in her foot is determined by which part she undergoes the experience in.

So each of the preceding three accounts is a possible elaboration of Hyman's view; and at various points his discussion is suggestive of one or other of them. If instead Hyman accepts none of them, he must spell out in some other way how his view bears on the relation between a person's having a pain in a limb and experiences the person undergoes. It is unclear what other way this might be done. The three preceding views are in any case interesting in their own right. The state and relational views appear in the literature, and can seem to be implicit in the semantics of the L-sentences, and indeed in the phenomenology of pain experiences, while the experience view can seem to be nothing more than a consequence—albeit a problematic consequence—of common sense. It behoves us, therefore, to investigate how these three accounts fair vis-à-vis perceptualism.

²² Aune also says thing suggestive of the state view, but ultimately he appears to regard the idea of a pain 'as something adjectival qualifying just a part of a person's body' as a temptation to be resisted (1967: 133).

4. Arguments from the Person Claim

The three preceding alternatives to perceptualism arguably avoid Hyman's objections, but they face others. In particular, I suggest, they have trouble precisely where perceptualism does not, namely in making sense of the relationship between people having pains in limbs and their experiences.

The state view says that Amy's having a pain in her finger consists in her finger's hurting, where hurting is objective. This poses the problem of how to explain the person and locative character claims. Consider the former. If hurting is objective, why does Amy's having a pain in her finger—i.e., her finger's hurting—entail that she is *in* pain, that she undergoes a pain experience? In this respect, hurting does not seem like a colour. An apple can be red without anything's undergoing an experience, but it is far less clear that the same can be said of a limb's hurting.

The state theorist could reply by claiming that being in pain *just is* having a hurting limb. But, for one thing, this requires denying unlocatability, which the phantom occasion supported. For another, if Amy's having a hurting limb is an objective state of affairs and yet constitutes her being in pain, then being in pain is not a phenomenal matter. But surely it is. Surely, Amy's being in pain necessarily involves things seeming a certain way to her. Surely, when we seek an explanation of why Amy's having a pain in a limb (or her limb's hurting) entails her being in pain, what we want explained is why it entails her undergoing an experience. The state view has no explanation.

Instead of explaining the person claim, perhaps the state theorist ought either to reject it or to deem it a brute datum, not admitting of further explanation. *Ceteris paribus*, however, we should prefer an account that illuminates the entailment; and the entailment is difficult to deny. Amy may be able to have a pain in her finger without noticing she does; but it is odd to think she can have a pain in her finger without being in pain, indeed without undergoing any experience at all. Newton attempts to evoke contrary intuitions with a case in which a person is

distracted, and another in which a patient is told there is a pain in his abdomen which he will not feel until the anaesthetic wears off (1989: 585-6). But suppose, when Amy is young, the nerves connecting her left foot's pain receptors to her brain are severed because something has gone wrong in that foot such that those receptors are constantly stimulated. Might Amy sensibly be told, after the operation, that she will *have* a pain in her foot for the rest of her life whether or not she is ever again *in* pain? Surely not. If hurting is objective, moreover, why might a foot not hurt even after it itself is removed? At this point, Cornman says that a severed limb is insufficiently complex to hurt all by itself (1977: 36). This intuition of his is compelling, but I suggest the reason is that we think hurting involves experiencing, and realise that experiencing requires a degree of functional complexity not to be found in severed limbs.

Turning to the experience view, the person claim is again problematic. Why is it that Amy's finger's undergoing an experience (constituting her having a pain in her finger) entails that she, the whole person, undergoes an experience (constituting her being in pain)? Again, what guarantees that *her* perspective will be implicated when *her finger* experiences? In §3, I suggested a mereological explanation: if Amy's finger undergoes an experience, then, given it is a part of her, so does she—just as, if it is injured so is she, and if it twitches so does she. But what conception of *a part of Amy* will sustain this explanation? Here are three candidates:

A body part x is *a part of Amy* iff

- (i) x is biologically integrated with her, or, alternatively
- (ii) both (i) and x is not itself a subject of experience, or, alternatively
- (iii) both (i) and x is a thing in which she can have pains and other sensations.

But conception (i) fails to sustain the inference. If Beth is Amy's

conjoined twin, she is a part of Amy in sense (i), but she might undergo experiences that Amy does not. Conception (ii) does not help, for experience theorists must deny that Amy's finger is a part of her in that sense, since for them limbs *are* subjects of experience. As for (iii), it threatens circularity. The experience view explains Amy's having a pain in a finger in terms of the finger's being a part of her and undergoing an experience; it would be circular then to explain the finger's being a part of her in terms of its being a limb in which she can have pains.

Furthermore, severed limbs are again problematic. For the experience view, Amy's finger's hurting consists in its undergoing an experience. But it is unclear that the view can explain why the experience must cease when the finger is severed. When an *unsevered* finger hurts, after all, the direction of the experience theorist's explanation is from finger to whole person: Amy undergoes a pain experience by virtue of her finger's doing so. Why then should the finger's no longer being a part of her prevent it from undergoing the experience alone as it were?

Finally, turning to relationalism, it fares better than its predecessors. Consider the person claim: having a pain in a limb entails being in pain. The perceptualist explanation of this involved saying, in effect, that having a pain in a limb partly *consists in* being in pain. Arguably, relationalists could explain the same thing by reversing that constitutive claim, saying instead that a person's being in pain (his undergoing a pain experience) consists in his having a pain in a limb (his undergoing a pain experience *in his limb*, its 'paining' him). The suggestion faces a difficulty, but perhaps not an insuperable one. The difficulty is that it rules out unlocatability: how can being in pain consist in having a pain in a limb when Nelson, on the phantom occasion, is in pain *without* having a pain in a limb?²³ But notice relationalists can speak to this difficulty by making their constitutive claim disjunctive:

Disjunctive thesis. S's being in pain consists in *either* (i) S's having a

23 See Tye 1995b (224, n. 20) and Jackson 1977 (54).

pain in a limb or (ii) its being for S merely as if S has a pain in a limb.

The idea is that Amy's undergoing a pain experience consists in her undergoing a pain experience either *in a limb* or *simpliciter*. Consider two subjectively indistinguishable cases: in one, Amy has a pain in her finger; in the other, a phantom case, it is for her merely as if she does. In both she is in pain, but in the first this is because she undergoes a pain experience in her finger, whereas in the second it is because she undergoes a pain experience simpliciter.²⁴

Some will object that, being subjectively indistinguishable, the two cases are of a single phenomenal kind and hence cannot be differently constituted. Again if the locative phenomenology in the non-phantom case consists in the experience's being undergone *in the finger*, how can it be shared by an experience *not* undergone in the finger? But this is, at least, not a knock-down argument against relationalism. There exists, as it were, a precedent: conjoined with the disjunctive thesis, relationalism resembles disjunctivist conceptions of visual experience.²⁵ Such a view holds that its seeming to a subject as though there is a red cube in front of him consists in either (i) his veridically seeing something as a red cube or (ii) its being for him merely as if he does. Although the experience is constituted in the one case by a relation obtaining between the subject and the cube, but in the other not, the two experiences may yet be subjectively indistinguishable. My point is simply that if this conception is tenable in the case of visual experience, then it is not a foregone conclusion that the phenomenological objection above undermines the

24 The above claim that being in pain consists in having a pain in a limb is one I earlier offered to the state view and (via the mereological proposal) to the experience view too. The experience theorist, faced with the consequent challenge of how not to falsify unlocatability, could adopt a similar disjunctive proposal to the one under discussion, claiming that Amy's undergoing a pain experience consists in either a limb of hers undergoing a pain experience or her doing so (directly, as it were). But none of this would help the experience view with the problem of severed limbs or the problem of articulating a suitable conception of a *part of Amy*.

25 See Child 1994 (ch. 5).

disjunctive thesis in the case of pain experiences.

As for severed limbs, the relationalist could say it is a primitive condition on undergoing an experience in a limb that the limb not be severed. So even if the state and experience views are in trouble, relationalism is proving reasonably resilient. In the next section, however, I present an argument that perceptualism is superior to all three alternatives, even relationalism. In particular, perceptualism enables a superior account not only of why one cannot have a pain in a severed limb, but of a range of conditions on one's having pains in limbs that are not severed.

5. The Argument from Locatability Conditions

Suppose Amy's eyes are closed. Her left hand is—and seems to her to be—on the desk in front of her. As a result of a thorn in that hand, she has a pain in it. She has no pains elsewhere; nor does it seem to her as though she has. Now, to identify what I call the locatability conditions, we should ask: in what ways might matters have been different such that Amy did *not* have a pain in her hand—or indeed in any limb—even though the situation was subjectively indistinguishable from the actual case in which she does?

Call the actual case **A** and contrast it with the four cases (**B-E**) summarised below:

Cases	<i>Does Amy have an appropriate limb?</i>	<i>Does disorder in that limb cause Amy to be in pain?</i>	<i>Is the limb's real location causing its apparent location?</i>	<i>Is that limb where it appears to Amy to be?</i>
A	✓	✓	✓	✓
B	✗	—	—	—
C	✓	✗	✗	✓
D	✓	✓	✗	✓
E	✓	✓	✓	✗

Case B. Amy's left hand has been amputated and destroyed.

Case C. Amy has a left hand on the desk in front of her but it is not causing any aspect of her experience. The hand is not causing her to be in pain; rather, owing to some deviant neural wiring, a thorn in her right foot is. Nor is the hand's position causing it to seem to her that her hand is on the desk in front of her; rather, even when her hand is moved behind her back, things continue to seem to her as though it (or at least *a left hand of hers*) is on the desk in front.

Case D. Amy has a left hand on the desk in front of her but, although the thorn in it is causing her to be in pain, the hand—as in case C—is not causing its apparent position.

Case E. Amy has a left hand but it is behind her back. It is causing her to be in pain; and its real position is causing its apparent position, but by a mechanism such that it appears to be elsewhere than where it is. Although it seems to Amy that the hand (or at least *a left hand of hers*) is in front, on the desk, it is really behind her back; and when placed in front, it seems to be behind.

I suggest that in all four counterfactual cases Amy does not have a pain in her left hand—or anywhere else—even though things for her are subjectively indistinguishable from case A, in which she does. Case B, a phantom situation, is a familiar illustration of such a possibility. But, neglected though they are in the literature, I think the remaining three cases illustrate it too, even though in those cases Amy has a left hand. Take case C and compare the following scenario: Ben has no hands, although it seems to him as though he has a pain in a hand of his at a position where Carol happens to have *her* hand. Despite Ben's pain experience, and Carol's hand's being the right kind of limb in the right place at the right time, Ben surely does not have a pain in Carol's hand. So too in case C, I suggest. Despite her experience, Amy does not have a

pain in her own hand, since her hand is causing that experience no more than Carol's hand caused Ben's. Admittedly, referred cases show that, for Amy to have a pain in her hand, it is not necessary that a *disordered state* of the hand cause her to be in pain; but I am suggesting that her hand must nonetheless have *some* role in her experience's aetiology. In particular, I think it is intuitive that the hand's real position must cause its apparent position, and in such a way that the hand seem to be at—or very near—the place it really is, hence that even in cases D and E Amy does not have a pain in her hand. In case E, for example, if asked to point with her right hand to where she has a pain in her left hand, Amy would point to a region of space, just above the desk, where in fact no limb of hers is located. This would not stop us from saying that she is *in* pain, but I think it would stop us from saying she has a pain in her left hand, which in case E is really behind her back.

If correct, all of this shows that phantom cases are not the only cases that support unlocatability. It shows that what is required for a person in pain, i.e., undergoing a pain experience, additionally to have a pain in a limb is not only a limb of the appropriate sort, but also that the limb be involved in the aetiology of the person's experience, in particular that its real position be responsible for its apparent position, and that it be at, or very near, the place it seems to be. Call these the *locatability conditions*. Now, I think perceptualism makes very good sense of these conditions, indeed such good sense that my verdicts even about the less clear-cut scenarios such as D are strengthened by reflective equilibrium.

To see this, recall that, according to BIP, Amy's *being in pain* in the cases above consists in her having a somatosensory experience as of a left hand of hers being disordered. Perceptualism says that what she additionally needs in order to *have a pain in her left hand* is to *perceive* it as disordered. So if perceptualism is right, the locatability conditions ought to coincide with the conditions for a subject undergoing a somatosensory experience additionally to perceive a limb somatosensorily. So, what are those conditions?

Anticipating a parallel, we might consider the requirements for

seeing. In particular, what are the conditions on visual acquaintance, i.e., the relation between subject and object that enables the subject to think visually-based perceptual demonstrative thoughts about the object, e.g., that this apple is red? Well, plausibly, one can see the apple only if one undergoes a visual experience and the apple exists. The apple must also cause the experience in the right way, as Paul Grice (1961) has shown us.²⁶ And Gareth Evans (1982), John McDowell (1990), and Christopher Peacocke (1983, 1991) all persuasively argue that visual acquaintance additionally requires that the experience more or less correctly *place* the apple in egocentric space—presumably as a consequence of the apple’s real position—thus enabling its subject (at least in principle) to locate it.²⁷

Now, plausibly, these conditions also apply to *somatosensory* acquaintance. If so, perceptualism predicts that these conditions will coincide with the locatability conditions. And my verdicts about cases B, C, D, and E indicate that this prediction is exactly right. That an experience more or less correctly place a limb, for example, is required both for somatosensory acquaintance and for having a pain in a limb, I have suggested. Surely this is because having a pain in a limb constitutively involves somatosensory acquaintance, hence conditions on the latter are conditions on the former. Again, the coincidence of the acquaintance and locatability conditions strongly indicates that having a pain in a limb is a perceptual phenomenon. The reason Amy does not have a pain in her left hand in the counterfactual cases, I am suggesting, is that in those cases the conditions on somatosensory acquaintance are not met.

So perceptualism impressively illuminates the locatability conditions. Its opponents must either show that they can provide equally

26 Child (1994: ch. 5) argues that this is compatible with disjunctivism.

27 This condition does not preclude—as Peacocke insists we should not—acquaintance in a case in which refraction causes one’s visual experience marginally to misrepresent the apple’s location; but it does preclude acquaintance, as Peacocke agrees we should (1990: 125-6, n.2), if the apple is reflected in a complex array of mirrors such that the subject cannot use his experience in the normal way to find it.

illuminating explanations of the locatability conditions or show that they do not need to. Given the remarkable coincidence between the locatability and acquaintance conditions, I think the prospects of perceptualism's opponents' meeting the explanatory challenge are poor. As for denying the locatability conditions, notice that even if not everyone accepts my verdicts about the less clear-cut counterfactual cases, it is hard to deny that there is a telling parallelism at least between the *issues* of locatability conditions and acquaintance conditions. Those unsympathetic to the limb position requirement, for example, may well be equally unsympathetic to the corresponding requirement on visual acquaintance; and, to that extent, even they have reason to think that pain location is a perceptual phenomenon. If, as I have argued, it is, then all three alternatives to perceptualism fail.

6. Perceptualism as a Metaphysical Account

I sympathise with Hyman's semantic objections against perceptualism. But I also endorse perceptualism, and have now argued for its superiority over three alternative views. This antinomy is resolved by noticing what is often missed: perceptualism can be interpreted either as a semantic or as a merely metaphysical thesis. Interpreting it in the latter way, perceptualists can escape Hyman's semantic objections, and indeed can endorse Hyman's positive account of the semantics of L-sentences.

Some key perceptualists appear to miss this. Or, at any rate, they present their view as a semantic thesis, a thesis about the meaning or logical form of the L-sentences (or the propositions they express). Armstrong, for example, speaks of his view providing *translations* of the L-sentences (1968: 314). Tye, similarly, states that his is an account of what we are *saying* when we use the L-sentences (1995b: 112; 2002: 151-2). His talk of their 'hidden intensionality' (1995b: 112; 1995a: 227), moreover, suggests that they can be paraphrased by sentences containing intensional verbs, e.g., 'Amy *somatosensorily represents* that her hand is disordered'. But, like Hyman, I find such claims implausible. For the reasons gestured at in §3, it strikes me as unlikely that 'Amy has a

pain in her hand' and 'Amy somatosensorily represents that her hand is disordered' share either their meaning or logical form.

Still, such semantic claims, I suggest, are quite inessential to perceptualism. As a merely metaphysical or constitutive thesis, perceptualism is silent about the semantics of L-sentences. When it comes to the semantics, therefore, perceptualists are surely free to endorse Hyman's pains/hurts paraphrase, i.e., his rather plausible claim that 'Amy has a pain in her hand' can be paraphrased 'Amy's hand hurts'. For, interpreted as a metaphysical thesis, perceptualism is simply an account of what makes it the case that Amy has a pain in her hand—again, assuming the paraphrase *is* correct, what makes it the case that her hand hurts. My point is that a theorist can give an illuminating account of that without spelling out the meaning or form of the L-sentences. Again, perceptualists might be right that the sentence, 'Amy is somatosensorily perceiving her hand as disordered' can be used to provide an illuminating explanation of what the truth of the sentence, 'Amy has a pain in her hand' consists in *even if* those two sentences—the explanans and the explanandum—share neither their meaning nor form, and even if there could be someone, e.g., a child, capable of understanding the latter but not the former.

The same sort of point is increasingly cropping up in other philosophical contexts. Colin McGinn, for example, argues that an object's being red consists in its being disposed to appear red to normal perceivers, but he explicitly denies that this is to say 'that colour predicates contain a suppressed argument-place for ... a group of perceivers ... in logical form, so that they differ *semantically* from the syntactically similar primary quality predicates' (1983: 10). More recently, Heather Dyke (forthcoming) has argued that although A-theorists about time are right that tensed sentences cannot be paraphrased by tenseless sentences, B-theorists might yet be right that tenseless sentences can be used to give the most illuminating account of

what makes tensed sentences true.²⁸ My suggested reconciliation of perceptualism with Hyman's semantic points has just the same structure.

All of this arguably undermines one of Tye's motivations for perceptualism. Tye appears to think that perceptualism best explains the invalidity of the following argument (1995b: 111-12):

A.

1. Amy has a pain in her fingertip.
2. Amy's fingertip is in her mouth.
3. Therefore, Amy has a pain in her mouth.²⁹

But I suggest that, taken as a metaphysical thesis, perceptualism is the wrong kind of view to figure in an explanation of invalidity,³⁰ whereas taken instead as a semantic thesis, it is defeated by a competing explanation. For what someone who seeks an explanation of A's invalidity wants, surely, is an explanation of the difference in form between A and such arguments as the following:

B.

1. Amy has a beer in the fridge
2. The fridge is in the kitchen
3. Therefore, Amy has a beer in the kitchen.

After all, B can easily be expanded into a formally *valid* argument by the addition of an uncontroversial nonlogical principle. Hence, given A is obviously *invalid* and yet bears a passing formal resemblance to B, the resemblance needs to be explained away. But, if that is the task, then—being silent about logical form—metaphysical perceptualism is the

28 See also Weir (forthcoming: ch. 1). I say more about the distinction between metaphysical and semantic theses in Bain (in preparation).

29 Instead of A1 and A3, Tye has sentences of the form, 'The pain is in S's x', but I take it he thinks these function like L-sentences.

30 I am grateful to Mike Martin for helping me to see this.

wrong sort of view for the job. To so much as engage with this explanatory task, perceptualism needs to be taken as a semantic view, one that paraphrases A1 and A3 in terms of sentences involving an intensional operator such as ‘somatosensorily represents that’. When interpreted *this* way, perceptualism does generate an explanation of invalidity. But the explanation in question faces stiff competition from an attractive account which instead paraphrases A1 and A3 respectively as ‘Amy’s fingertip hurts’ and ‘Amy’s mouth hurts’, and which therefore formally assimilates A to such arguments as:³¹

C.

1. Amy’s finger twitches
2. Amy’s finger is in her mouth
3. Therefore, Amy’s mouth twitches.

(C is formally quite unlike B, of course, and in particular *cannot* be expanded via an uncontroversial principle into something formally valid.) Given the choice, this second explanation strikes me as much more plausible than the first. If it is correct, then neither semantic nor metaphysical perceptualism can be motivated by Tye’s argument. But metaphysical perceptualism is not thereby ruled out. For its truth, I suggest, is perfectly compatible with the second explanation.

7. The Experience Argument

Here is a second argument for semantic perceptualism that I reject:

1. The referent (or semantic value) of ‘a pain’ in the L-sentences (e.g., ‘Amy has a pain in her hand’) is a kind of experience. As I shall also put it, pains are experiences.
2. Experiences themselves are never really in (or undergone by or undergone in) limbs.

³¹ See Hyman (2002: 20-21) and Noordhof (2001; 2002).

3. Therefore, pains themselves are never really in limbs.
4. Therefore, either L-sentences are false or they say something other than that pains themselves really are in limbs.
5. The L-sentences are sometimes true; an error theory of the L-sentences (as embraced, for example, by Descartes³²) ought to be rejected.
6. Therefore, the L-sentences say something other than that pains themselves really are in limbs.
7. On the next most plausible account—given the semantic constraint imposed by (1)—what the L-sentences say about pains (i.e., about pain experiences) is not that they themselves are really in limbs, but that they *represent* limbs (as being disordered).
8. Therefore, semantic perceptualism is true.

There are at least hints of this argument in Tye and Armstrong. They both clearly endorse the first premise: that pains are experiences.³³ And they seem to endorse the second. Take Armstrong, for example. He apparently thinks that pains themselves are really in brains, hence—as (3) states—that they are not really in limbs. This is admittedly not quite what he says, which is that ‘philosophical reflection’ drives us to say, ‘The pain is in my mind’ (1968: 316). But given Armstrong is a materialist, embracing ‘a central-state account of *all* the mental concepts’ (1968: 80), ‘brain’ is surely more apt here than ‘mind’;³⁴ and, given that ‘The pain is in my brain’ says something false (about perceiving one’s own brain) when interpreted according to Armstrong’s own semantic

32 See Hyman 2002 (5-6) for this interpretation of Descartes.

33 See Armstrong 1962 (124), 1968 (312, 314); and Tye 2002 (151), 1995b (112-16, especially 116), 1995a (228-9, especially 229).

34 This would also allow him to side-step Hyman’s complaint that ‘The pain is in my mind’ is said only in cases of psychosomatic pain, and that ‘in my mind’ is anyway not a spatial adjunct (2003: 12).

perceptualism,³⁵ Armstrong's idea is surely better put by saying, 'The pain *itself* is *really* in my brain', where 'itself' and 'really' are supposed to forestall perceptualist re-interpretation. But Armstrong also rejects the error theory: 'ordinary usage', he says, drives us to accept 'The pain is in my hand' (1968: 314). He resolves this 'troublesome dilemma' by endorsing semantic perceptualism, thus acknowledging the truth of L-sentences and thereby eschewing the letter of the error theory, while nonetheless construing them so as to endorse something of the error theory's *spirit*: that pains themselves are not really in limbs.³⁶

I reject the experience argument because, unlike Armstrong and Tye, I deny its first premise: that 'a pain' in the L-sentences refers to a kind of experience. If this were so, the L-sentences would be about experiences, and in my view that would leave no plausible account of what they say—especially none on which they are true. Denying the first premise, moreover, helps to blunt Hyman's objection that perceptualism fails to do justice to the idea of bodily sensitivity. Or so I argue in the next and final section.

8. What and Where Are Pains Themselves, Really?

Denying that pains are experiences undermines the experience argument for semantic perceptualism, but I shall presently suggest it also weakens Hyman's second objection, his complaint that perceptualists fail to do justice to the idea that some parts of our bodies—our hands, for example, but not strands of our hair—are sensitive. First, however, the denial faces a challenge.

The challenge is simply this: if pains are not experiences, what are they? The key to meeting the challenge is to recall that metaphysical perceptualists are free to endorse the pains/hurts paraphrase, e.g., that 'Amy has a pain in her hand' means 'Amy's hand hurts'. This generates a choice of three replies. The first two emphasise that the pains/hurts

35 Here I, like Armstrong, am treating sentences of the form 'The pain is in S's L' like L-sentences.

36 See also Tye 1995b (116).

paraphrase eliminates the phrase ‘a pain’, and insist that the L-sentences are idiomatic. Strategy (i) thus recommends that we deny pains exist. The general approach is familiar: one might similarly deny that ‘behaves’ exist on the basis that ‘Abe attended the meeting on Bert’s behalf’, for instance, can be paraphrased ‘Abe represented Bert at the meeting’. Strategy (ii) instead presses the idiom proposal not as a way of *answering* such questions as ‘What are pains?’ and ‘Do pains exist?’, but as a way of *silencing* them. Such questions are confused, the idea goes, since they are invited by occurrences of ‘a pain’ omitted by the paraphrase, and hence are no longer pressing once the paraphrase is endorsed. By contrast, strategy (iii) finds no fault with the question and allows that pains exist. It claims that pains are states of hurting. Unlike the *objective* state view, the states which strategy (iii) posits are experience-dependent: what it is for a limb to be in such a state—i.e., for it to hurt—is for it to be perceived as disordered. To this extent, states of hurting are, on this view, like the state of being green on certain subjectivist views of colour.

So, using one or other of these strategies to handle the question, ‘What are pains?’, perceptualists can deny that pains are experiences. But it might be objected against these strategies that the pains/hurts paraphrase cannot eliminate *all* occurrences of ‘a pain’. If the objection goes, ‘Nelson has a pain’ is true even on the phantom occasion, when no limb of his hurts, then that occurrence of ‘a pain’ *must* refer to a kind of experience, in which case—on pain of ambiguity—so must occurrences in the L-sentences. In reply, however, one might deny the truth of ‘Nelson has a pain’ (contrast: ‘Nelson is *in* pain’) on the phantom occasion. Or, less radically and more plausibly, one might claim that ‘a pain’ *is* ambiguous, referring to an experience when used on the phantom occasion in ‘Nelson has a pain’, but not when used on other occasions in L-sentences.³⁷

Now, denying that pains are experiences helps with Hyman’s

³⁷ See Newton 1989 (584) and Ayers (1991: i, 185) for related suggestions.

objection that perceptualism is of a piece with Descartes's 'desensitization' of the human body—of a piece, again, with a picture on which the body is 'more like a prosthesis than it really is' (2003: 23). It is tempting to reply that this objection is anyway misplaced, since—unlike Descartes—perceptualists do not deny the truth of the L-sentences. But Hyman's complaint, I take it, is that perceptualism is nonetheless in the *spirit* of an error theory in so far as it holds that, when Amy has a pain in her hand, the pain *itself* is—if anywhere—*really* in her brain, or perhaps really where she, the whole person, is.

One bold perceptualist reply is suggested by strategy (iii) above. According to it, even perceptualists can allow that pain themselves are really in limbs, and mean more by this than simply that the L-sentences are true. For on strategy (iii), 'Amy has a pain in her hand' is not idiomatic and its use of 'a pain' refers to a kind of state, a state of hurting—a state, the idea goes, which Amy's hand really is in if the L-sentence is true. Since such states are experience-dependent, on this view, Hyman might deny that the suggestion fully does justice to the idea of bodily sensitivity. But such an insistence on how bodily sensitivity should be elaborated at least risks transforming that idea from a commonsense intuition which we must all aim to accommodate into a piece of theory.

Still, I confess this bold perceptualist strategy can seem to be something of a stretch. But it is not the only line that perceptualists can take to assuage the worry that their view is bound to provide an unsatisfactory answer to the question where pains themselves really are—again, that their view is bound to return an answer other than 'In limbs'. For one thing, if perceptualists deny—as I have recommended—that pains are experiences, then even if they think that experiences are in the brain, or where the whole person is, that certainly need not commit them to saying that those are the real locations of pains themselves. For another thing, perceptualists might anyway regard the question where pains themselves really are as confused, hence not requiring an answer. For if strategy (i) above is correct, the question concerns the location of

items that do not exist; and if strategy (ii) is correct, it is a question the pains/hurts paraphrase ought to silence, along with ‘What, really, are pains themselves?’. So, by endorsing the pains/hurts paraphrase and denying that pains are experiences, I suggest that we can make perceptualism better able to fend off Hyman’s objection about bodily sensitivity.

There is a final way of taking the worry about sensitivity. Perceptualists construe the distinction between sensitive and insensitive body parts—e.g., between fingers and fingernails—as the distinction between those parts of our bodies that we can somatosensorily perceive and those we cannot. This approach might seem to underplay the distinctiveness of the relationship between us and our sensitive parts. One might worry that on the perceptualist view our relationship to our sensitive parts is not interestingly different from the relationship between us and the objects we see or touch. But this is a non sequitur. Somatosensory perception, I have argued elsewhere (2003), is *sui generis*. Quite unlike our visual experiences, for example, the contents of somatosensory experiences represent body parts not merely as body parts, but as parts of *one’s own body*.

So my brand of perceptualism can allow that Amy has a pain in her hand. It does not say that the pain itself is really elsewhere than in her hand, moreover, and it allows that her experiential relationship to her hand is importantly different from the relationship between her and the things she sees. This is surely as much as needs to be done to accommodate the sensitivity of limbs—especially given, on the one hand, the shortcomings of those views that might seem to do more (e.g., the state and experience views) and, on the other hand, perceptualism’s other virtues. For I have argued that, metaphysically interpreted, perceptualism provides the most illuminating explanation of such pain phenomena as the locatability conditions, and it does so while also being compatible with the most plausible semantics of the L-sentences. Hence,

I conclude, it is still our best account of the location of pains.³⁸

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