

# PAIN CUT BONE BLOOD

Experiments in research creation:  
a multi-voiced, multi-perspective approach to pain

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## I. Preparations

During the third phase of my project: ‘The Fictional Logic of Pain’<sup>1</sup> I went into the field with the intention to *look at, imagine and feel into pain*.

The foundation of this part of my research were observations that I performed at two big Viennese hospitals. For this endeavour I re-purposed the method of ‘naturalistic non-participant observation’<sup>2</sup> and developed my own method entitled ‘self-reflective observation in the mode of seeing-feeling’.

The following observations took place between April and June 2016 at the Department of Trauma-Surgery at the Vienna General Hospital and the Casualty Department at the Emergency Hospital Meidling.

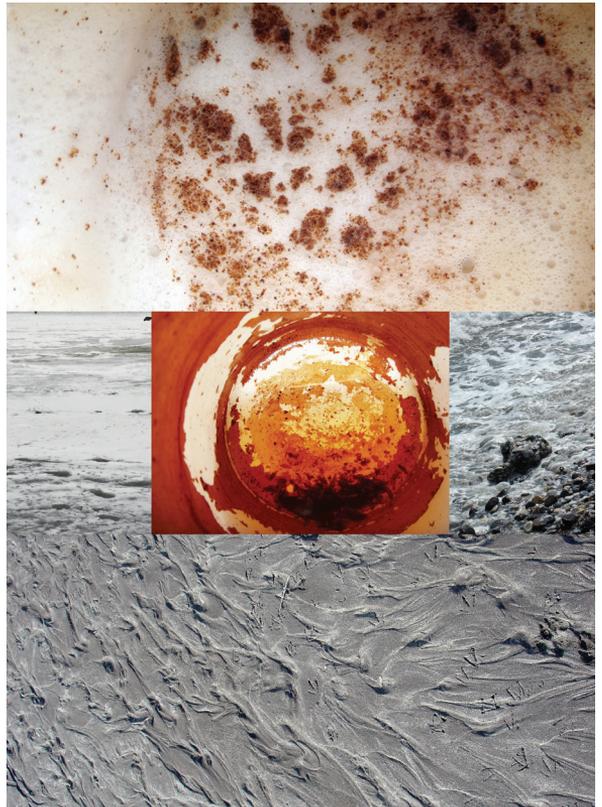
The observations in both cases relied on time-based sampling (the observations were limited to one hour in the morning during weekdays) and on event-based sampling (observations focused on nonverbal pain behaviours as defined and described in the CNPI. This ‘Checklist of Nonverbal Pain Indicators’ is a common tool for pain assessment in healthcare contexts). As a result of these ‘case-studies’ I obtained two observation protocols with ‘matter-of-fact’ entries in a chronological order, describing the occurrences during my stays at the emergency departments.

However, during this time I applied an additional observation method that I call ‘self-reflective observation in the mode of seeing/feeling’. With this term I draw on the notion of ‘empathic vision’, coined by art theorist Jill Bennett, who describes a ‘radical mode of seeing and feeling’<sup>4</sup> that places empathy at the heart of affective responses to images of pain and suffering. The mode of observation I suggest here takes into account the fact of being a living entity with *feelings*, the fact of being a person with a *history*, and the fact of being a human amidst other humans, *a body among other bodies*, gathered at a particular time in a particular place, and therefore taking part in a ‘collective event’ (This implies, for me, that it is per se impossible to conduct something like a ‘non-participant’ observation...).

Nietzsche wrote in regard to the demand for objectivity in scientific thinking and to *pain as a medium of knowledge production*: ‘We are no thinking frogs, no objective recording devices with numbed intestines – we have to give birth to our thoughts out of pain [...]’.<sup>5</sup> Accordingly this method I developed is based on being aware of the outside and the inside world and taking into account both sides simultaneously; it means to reflect all three factors described above while perceiving and processing multimodal in- and outputs in a specific environment and during a defined period of time.

The next step consisted in adopting literary techniques for making the results of my observation experiments productive in regard to *pain knowledge production*.

The first method I employed in this context was the ‘cut-up technique’ as developed by Dada artists at the beginning of the 20th century. It is an aleatory literary technique where you cut up a text and rearrange the parts of it so that a new text emerges.



1) By focusing on its *fictional logic* I establish that *pain* is only comprehensible as a *meaningful experience*, in a *meaningful context*. The research questions of the project are: *How can we understand pain? How can we take care of pain?* The aim of the project is to *reconstruct the meaning of pain* as an existential experience.

2) Participants are observed in their natural setting without interference by the researchers. Researchers should be inconspicuous and do nothing to change the environment or behaviour of the participants.

3) Feldt, K. S. (2000). The checklist of nonverbal pain indicators (CNPI). *Pain Manag. Nurs.* Mar 1 (1), p. 13-21.

4) Bennett, J. (2005). *Empathic Vision. Affect, Trauma, and Contemporary Art*. Stanford: Stanford University Press, p. 11.

5) ‘Wir sind keine denkenden Frösche, keine Objektivier- und Registrier-Apparate mit kaltgestellten Eingeweiden – wir müssen beständig unsre Gedanken aus unserem Schmerz gebären [...]’ Nietzsche, F. (1887/1987). *Die fröhliche Wissenschaft. ‘La Gaya Scienza’*. Berlin: Goldmann, p. 12.

The creative principle behind this method is *chance*, but you can also define criteria for the way the text parts are to be rearranged. Using this method, I basically followed what D. H. Lawrence called the ‘logic of emotions’ which comes into effect during the very particular *act of thinking and feeling simultaneously*:

When we are thinking emotionally or passionately, thinking and feeling at the same time, [...] the mind makes swoops and circles. It touches the point of pain or interest, then sweeps away again in a cycle, coils round and approaches again the point of pain or interest.<sup>6</sup>

For my understanding, this logic of emotions is closely related to Brian Massumi’s designation of affect as ‘bodily thinking’, as a ‘movement of thought’ or a ‘thinking movement’ that follows ‘certain logical categories’.<sup>7</sup>

The second technique I adopted for my purposes was the ‘method of free association’ as introduced by French surrealists into literature, inspired by the works of Sigmund Freud and his psychoanalytic method.<sup>8</sup> Here a word or idea acts as a trigger for another word or a sequence of words or ideas, which may or may not feature a logical relationship.

The basic texts for my interventions along these techniques were the *three observation protocols of my field experiments*. However I also used materials from my ‘Archive of Pains’ that I had compiled during the first phase of my project: the archive comprises pain descriptions, extracted from poetical, philosophical, socio-political, psychological and literary texts, and texts transcribed from interviews with linguists, patients and medical doctors on the subject.

In addition, the archive contains visual material and photographic images that I assembled to image plates. These image plates are associated with the pain models I derived from my prior literary studies on pain. Another part comprises a collection of *pain profiles* based on a self-developed *pain profiling sheet*<sup>9</sup> that was completed by people of various backgrounds regarding age, sex and social context.<sup>10</sup>

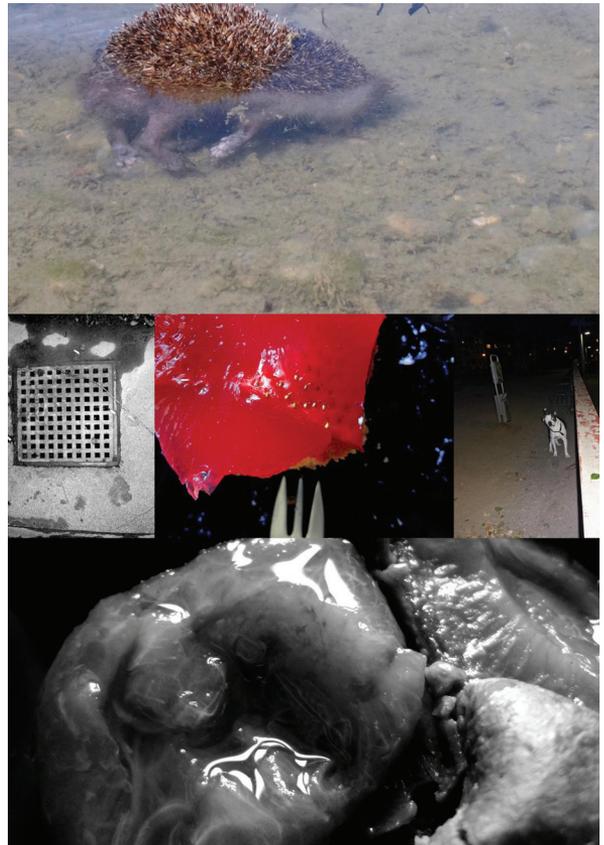
The following assemblage presents the results of my investigations into the *meaning of pain*, condensing the outcomes of my experiments in looking at, imagining and feeling into pain, and at the same time attempting to *reconstruct different perspectives and different voices regarding the experience of pain*.

## II. Investigations

– I am here. I am in the middle. Everything happens. Pain takes place. It is here. And I am here. In the middle of it. Always. Because time ceases to exist –

a) It is the act of thinking emotionally, of thinking and feeling at the same time that reverses, that dissolves time, as D. H. Lawrence has described it.<sup>11</sup>

It is event-time<sup>12</sup>, as Brian Massumi called it, in-between time, not every day-time.



b) Pain — expands the Time — Ages coil within  
The minute Circumference  
Of a single Brain —  
Pain contracts — the Time —  
Occupied with Shot  
Gamuts of Eternities  
Are as they were not —  
(Emily Dickinson)<sup>13</sup>

– And here, where I am, is not an everyday place –

c) Take me within, within,  
up there, three Pain-Inches above  
the floor  
(Paul Celan)<sup>14</sup>

**1) An old woman is lying in a bed that stands behind the waiting zone; she coughs; three people of the clinic staff are gathered around her bed; I can feel fear, discomfort; I sense that something serious is going on, that something is wrong.**

d) Brian Massumi stated in an interview with Joel McKim: Affect for me is inseparable from the concept of shock. It doesn’t have to be a drama. It’s really more about micro-

shocks, the kind that populate every moment of our lives. For example a change in focus, or a rustle at the periphery of vision that draws the gaze toward it. In every shift of attention, there is an interruption, a momentary cut in the mode of onward deployment of life.<sup>15</sup>

e) Europe in pain: According to a big survey titled ‘Pain in Europe’<sup>16</sup> (more than 46,000 people in whole Europe have been questioned), every fifth adult in Europe suffers from chronic pain. The biggest part of sufferers was found in Norway, Poland and Italy. More than a quarter of the questioned adults in these countries reported to have chronic pains. The smallest amount of people with chronic pains was registered in Spain: 11 percent of the surveyed adults there reported chronic pains.

**2) A teenage boy stands near the reception of the casualty department; he shakes his right hand, walks up and down in front of the registration counter.**

Nonverbal Pain Indicator Number four:  
Restlessness<sup>17</sup>

(Constant or intermittent shifting of position, rocking, intermittent or constant hand motions, inability to keep still)

**3) He is accompanied by a woman; she fills out a form, standing at the desk with the registration forms that are kept in different boxes, separated by different language labels, below the desk.**

f) ‘Are words actually of any use to describe what pain [...] really feels like? Words only come when everything is over, when things have calmed down. They refer only to memory, and are either powerless or untruthful.’  
(Alphonse Daudet)<sup>18</sup>

g) Hearing words that describe pain – such as ‘excruciating’ or ‘gruelling’ – activates the areas of the brain that process the corresponding sensation. At least this is what the publication of a study conducted by researchers of the Friedrich-Schiller-University in Jena, Germany, suggests. ‘The findings show that *words alone are capable of activating our pain matrix*’<sup>19</sup>, says psychologist Thomas Weiss. He and his colleagues point out that the findings may be especially significant for people with chronic pain disorders who tend to speak a lot about their painful experiences with their health care providers. They say those conversations may intensify the activity of the pain matrix in the brain and intensify the pain experience.

h) ‘The main motive of patients with chronic pain to join the encounter group is to be together with other affected people and to be able to share their pain. [...] Years of suffering from pain have restricted the social life of many of these patients, so the group is a social event for them: they get out, out of isolation, they meet others, and they talk about their – painful and joyful – experiences. And according to my experience this is exactly what meets one of the main needs of patients with chronic pains.’ (Monika Gratzler, MD, anaesthetist)<sup>20</sup>

**4) Two male teenagers sit in front of me; one has pulled his left foot half out of his shoe, there is no sock on it.**

– Uncovered by cloth, exposed to all eyes, its nakedness gleams white and red under the dazzling lights, exposing the vulnerability of the human flesh –

**5) He wrinkles his forehead, narrows his eyes and twists his mouth.**

6) Preston, P. (2011). Logic and Emotion in Lawrence’s Later Literary Criticism. *Études Lawrenciennes*, 42, p. 59-74. Retrieved from: <http://lawrence.revues.org/115>.  
7) Zournazi, M. (2002). Navigating Moments – with Brian Massumi. In M. Zournazi, Hope: *New Philosophies for Change* (p. 210-243). New York: Routledge, here p. 217.  
8) Freud, S. (1989). *Schriften zur Behandlungsmethode. Studienausgabe, Ergänzungsband*. Frankfurt/Main: Suhrkamp.  
9) This sheet can be found on: [painprofiles.wordpress.com/about/profile-your-pain](http://painprofiles.wordpress.com/about/profile-your-pain). Accessed on 01.07.2016.  
10) For detailed informations on this part of the project visit: [painprofiles.wordpress.com/about/archive-of-pains](http://painprofiles.wordpress.com/about/archive-of-pains). Accessed on 01.07.2016.  
11) ‘The mind makes swoops and circles. It touches the point of pain or interest, then sweeps away again in a cycle, coils round and approaches again the point of pain or interest. There is a curious spiral rhythm, and the mind approaches again and again the point of concern, repeats itself, goes back, destroys the time-sequence entirely, so that time ceases to exist, as the mind stoops to the quarry, then leaves it without striking, [...] yet again turns, bends, circles slowly, swoops and stoops again, until at last there is the closing-in, and the clutch of a decision, or a resolve’ Lawrence, D. H. *Introductions and Reviews*. Ed. N. H. Reeve & J. Worthen. Cambridge: Cambridge University Press, p.172.  
12) ‘This in-between time or transversal time is the time of the event. This temporality enables, and requires you to rethink all of these terms – bodily capacitation, felt transition, quality of lived experience, memory, repetition, seriation, inclination—in dynamic relation to each other.’ Massumi, B. (2009). *Microperception and Micropolitics. Inflections: A Journal for Research-Creation*, 3, p. 1-20.  
13) Dickinson, E.: *Pain Expands the Time*. Retrieved from: <http://www.poemhunter.com/best-poems/emily-dickinson/pain-mdash-expands-the-time>. Accessed on 01.07.2016.  
14) Celan, P.: *Little Night*. Retrieved from <http://www.poemhunter.com/poem/little-night/>. Accessed on 01.07.2016.  
15) Massumi, B. (2008). Of Microperception and Micropolitics. An Interview with Brian Massumi and Joel McKim. *Inflections* No. 3, p. 1-20, here p. 4.  
16) ‘Pain in Europe Survey’, NFO World Group, Octobre 2002-June 2003. Retrieved from <http://www.paineurope.com>. Accessed on 01.07.2016.  
17) CNPI – Checklist for Nonverbal Pain Indicators.  
18) Daudet, A. (2003). *In the land of pain*. Edited and translated by J. Barnes. New York: Knopf.  
19) Warner, J. (2010). *Words Really Do Hurt: Study Shows Words Alone May Activate Pain Response in the Brain*. WebMD Health News. Retrieved from <http://www.webmd.com/pain-management/news/20100402/words-really-do-hurt>. Accessed on 01.07.2016.  
20) Excerpt from an Interview with Dr. Monika Gratzler, anaesthetist and leader of a weekly therapy group for pain patients. The interview took place in Vienna on January 28th, 2016.

Nonverbal Pain Indicator number two:  
Facial Grimaces/Winces

(Furrowed brow, narrowed eyes, clenched teeth, tightened lips, jaw drop, distorted expressions)

– Now there is an asymmetry; his face is out of balance. This is what pain does: throwing you off balance, making the world fall apart –

i) Much of your pain is self-chosen...  
(Khalil Gibran)<sup>21</sup>

– I don't know what pain is. My, your. My pain: is it mine? This nauseating, searing, squeezing sensation? Yes, it is my pain; the pain of these days. Pain of existence, pain of detachment...

The pain comes from the body. And the body is me: the right shoulder, the right neck, that's me. The pain in the right shoulder, the pain in the right neck, is me. It is part of my current situation, sensation. But I have more on hand, there still is more. I feel, I think, I am more –

**6) There is another man with an injured left foot who sits in the same row as the boy. He wears a jogging suit and the left leg of his jogging trousers is rolled up. He does not wear a shoe on his left foot; only the toes and the front part of his foot are covered with a grey sock. I notice a swollen part in the area of his left ankle, and the skin there is red.**

j) The tulips are too red in the first place, they hurt me. Even through the gift paper I could hear them breathe Lightly, through their white swaddlings, like an awful baby. Their redness talks to my wound, it corresponds.  
(Sylvia Plath)<sup>22</sup>

– Wound: red; flesh, lust. There is a pool of blood inside you, inside me –

**7) The bed with the old woman who had been coughing is brought back; it is now in the same position as at the beginning of my observation; the man who has moved the bed says to the woman: 'Alles Gute, gell!' (All the best, right?) and leaves. The woman lays with her mouth open, there is something very fragile, unprotected about her, something very insecure, at least this is my impression: that she feels insecurity, confusion, fear.**

k) 'Everyone experiences painful situations at some point in one's life. [...] We are interested in the types of thoughts and

feelings that you have when you are in pain. Listed below are thirteen statements describing different thoughts and feelings that may be associated with pain. Using the following scale, please indicate the degree to which you have these thoughts and feelings when you are experiencing pain: 0 – not at all, 1 – to a slight degree, 2 – to a moderate degree, 3 – to a great degree, 4 – all the time:

When I'm in pain...

- 6  I become afraid that the pain will get worse.  
7  I keep thinking of other painful events.  
8  I anxiously want the pain to go away.  
9  I can't seem to keep it out of my mind.  
13  I wonder if something serious is going to happen...<sup>23</sup>



**8) Behind me sits a boy, the palm of his right hand is bandaged, the tip of his right finger is swollen, and the area where the nail begins is blue.**

l) A human being sustains on average 124 minor injuries per year.<sup>24</sup> Assuming a life span of 81 years, about 10,000 injuries accumulate during a life time.

**9) The girl holds the cool pack to the back of her left hand, to the back of her left fingers. Now she tries to take off her jacket, the woman at her side helps her, she exclaims 'Au!'**

**Nonverbal Pain Indicator number one:**

**Vocal complaints: nonverbal**

(sighs, gasps, moans, groans, cries)

– The silence here covers the sound of pain –

AAAAAAAAAAAAAAAA-----AHHHHHHHHHHHH-----

EEEEYOUUCHH!!!

AAAAHHHHHHHAAAAAAAA -----AFGGHH-----IEEEEE-----ARRRGHH

AWK!----UGGH!----AWK!----OUCH!----OW!!!----AU!!!--AUWEH---AUA!!!

m) Ogino et al.<sup>25</sup> conducted a study where they confronted ‘ten healthy subjects’ with images from the International Affective Picture System (images showing painful events), and, images that should evoke ‘emotions of fear and rest’.

‘They were instructed to imagine pain in their own body while viewing each image that showed a painful event. Using functional magnetic resonance imaging, we compared cerebral hemodynamic responses during the imagination of pain with those to emotions of fear and rest.’ The results indicate that the imagination of pain – without an underlying physical injury – ‘engages the cortical representations of the pain-related neural network’, and, according to the researchers, this was not the case with the images evoking emotions of fear and rest.

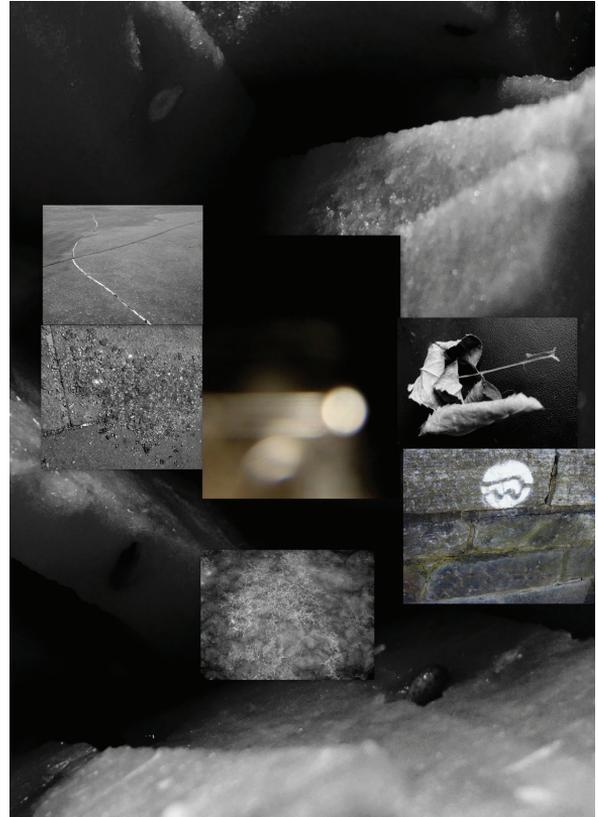
**10) Somebody is calling: ‘Hallo, ich habe es sehr eilig!’ (Hello, I am in a big hurry!); it is the voice of an old man. Nothing happens; five minutes later he calls again: ‘Ich habe es sehr eilig’ (I am in a big hurry); his voice now is a little weaker/quieter than it was before. Ten minutes later he only says: ‘Hallo –’ (Hello –), nothing more. I cannot see him, so I don’t know what is going on, if there is something happening with/to him.**

I try to put myself in his position: he must feel neglected, not being taken seriously, not getting the attention he – according to his point of view – ought to get. I don’t know what he needs, what he misses, and why he is in a hurry.

I wonder if he understands the system of this clinic, the mode of registering, then waiting until one’s name is announced in connection with a room number, indicating the examination room you are expected to go to. Maybe he feels

his case is more urgent than others, maybe he is convinced that his case requires immediate attention, immediate intervention.

– Pain cuts through the net of habits and routines –



**11) An elderly man is carried in on a stretcher; to the area between the waiting zone and the examination rooms. Now he is transferred from the stretcher to a bed on rollers. The old man wears a cap like a fisherman’s cap, his face is calm, and his posture expresses composure, even detachment. He is asked if it is okay the way he lays on the bed now; he nods. I notice that from time to time he touches the brim of his cap; it seems to be a confirming gesture, assuring him, that the cap is still there, on top of his head, and so probably inducing a feeling of comfort, of security.**

– Even the slightest pain causes a transformation –

21) Gibran, K.: *On pain*. Retrieved from <http://www.poemhunter.com/poem/on-pain/>. Accessed on 01.07.2016.

22) Plath, S. (1974). *Ariel*. Frankfurt/Main: Suhrkamp, p. 28.

23) The PCS – Pain Catastrophizing Scale; see for example: Sullivan, M. J. L., Bishop, S. R., & Pivik, J. (1995).

The Pain Catastrophizing Scale: Development and validation. *Psychological Assessment*, 7/4, p. 524-532.

24) Bauer, P., & Schroeder, V. (Eds.) (2013). *Neon Unnützes Wissen 3*. München: Heyne.

25) Ogino, Y., Nemoto, H., Inui, K., Saito, S., Kakigi, R., & Goto, F. (2007). Inner experience of pain: imagination of pain while viewing images showing painful events forms subjective pain representation in human brain. *Cereb Cortex*, 17(5), p. 1139-1146.

12) **The young girl who holds her left hand in a rigid position is constantly moving her feet; the steps resemble dancing steps; then she starts kicking the air.**



– Pain invokes anger, makes you aggressive: provoking the feeling that the world is against you. So you start to resist and fight back –

n) *In the land of pain* is the title of the English translation of a book by the French writer Alphonse Daudet, who lived in the second half of the 19th century. He suffered from ‘neurosyphilis’ during the last 15 years of his life.

The chief manifestations of the illness in his case were ‘locomotor ataxia’: a degeneration of the spinal cord that produced violent spasms of the limbs, weakness, and flashes of blinding pain.

Pain, you must be everything for me. Let me find in you all those foreign lands you will not let me visit. [...] The walks I used to take around this land of pain. Could still find it in myself to laugh.<sup>26</sup>

o) I lose myself when lust or pain is projecting me beyond a sphere where I only have one meaning: the sum of the answers I give to the requirements of utility. I lose

myself, when at the end of the possible I push towards this that will knock me over, so that I will be pleased by the thought of death – and so that I will laugh at my delight in death.  
(Georges Batailles)<sup>27</sup>

Batailles followed this notion of laughter as a means to cope with the adversities of life: he stated that what frightens us is what we can laugh at, and that on a para-philosophical level all laughter is laughter about death.

13) **Now I notice a certain smell in the air, and that it does something to my stomach; it is this clinical smell, it makes me feel a bit nauseous. Also there is a beeping noise now that irritates me. I feel the urge to leave this place, I oppress it. The beeping does not stop; I am unable to identify its source. But suddenly it’s gone.**

– Pain inscribes itself into the flesh, leaving signs of distortion, of monstrosity. It forces the flesh to abandon its borders, to open up to the outside world –

14) **The man in the jogging outfit comes back from the examination room, a bandage, or maybe it is a plaster cast, covers his left foot and his left ankle; only the toes a left bare. He walks on his crutches to the counter and lines up. He keeps his injured foot behind him, resting it on its naked toes –**

Nonverbal Pain Indicator number three: Bracing  
(Clutching or holding onto furniture, equipment, or affected area –)

p) McGill Pain Questionnaire<sup>28</sup>, group E – evaluative pain descriptions / category 16:

ANNOYING  
TROUBLESOME  
MISERABLE  
INTENSE  
UNBEARABLE

q) Do words hurt? As soon as we hear words like ‘tormenting’, ‘gruelling’ or ‘plaguing’, exactly those areas in the brain are activated which process the corresponding pain. Psychologists from Jena University examined this phenomenon in a study<sup>29</sup>, using functional magnetic resonance tomography (fMRT). ‘We could observe a clear activation of the pain matrix in the brain by pain-associated words’, Maria Richter states. Other negatively connoted words, however, do not activate those regions. Neither for neutrally nor for positively connoted words comparable activity patterns could be examined.<sup>30</sup>

- r) Yes, we are going to suffer, now; the sky  
Throbs like a feverish forehead; **pain is real.**  
(W. H. Auden)<sup>31</sup>

15) **Is this real? I ask myself. Is here the reality; am I part of it; the ‘department of trauma’-reality, the reality of people having accidents, injuries, and going to the hospital, waiting for help, for care, for cure, for the pain to go away, for the damage to be repaired.**

- s) The Russian psychologist Lev Vygotsky indicated that there is ‘a law of the emotional reality of the imagination’. It says that all forms of creative imagination include affective elements. According to Vygotsky, ‘this means that **every construct of the imagination has an effect on our feelings**, and if this construct does not in itself correspond to reality, nonetheless **the feelings it evokes are real feelings, feelings a person truly experiences** [emphasis added].<sup>32</sup>

16) **Am I part of this as I am watching this? How real is this? What does my presence in this room mean, my presence as an observer? Here, now, I am the observer, but I have been a patient, too; I know how it feels to be in pain, to wait for an examination, an explanation; for help, for care, for cure...**

- t) Michel de Montaigne (1574) wrote in an essay about the *force of imagination*:

I am one of those who are most sensible of the power of imagination: everyone is jostled by it, but some are overthrown by it. It has a very piercing impression upon me [...]. **The very sight of another’s pain materially pains me**, and I often usurp the sensations of another person. [...] I do not at all wonder that fancy should give fevers and sometimes kill such as allow it too much scope, and are too willing to entertain it [emphasis added].<sup>33</sup>

- u) Affect contagion, according to communication theorist Anna Gibbs, is the bioneurological means by which particular affects are transmitted from body to body.<sup>34</sup>

17) **Now it is nearly an hour that I am here. I am not**

**injured. My body is intact; its skin does not open up for the world.**

– Pain is an obstacle between me and the world/  
between me and my body –



18) **Someone is sighing and I feel all the worries of this place expressed within this sigh; this insecurity, vagueness/this being exposed in your bodily fragility; this being reliant on somebody who is in charge for the parts of your body that are out of order, out of normality...**

– Pain is a critical comment of the body on the world –

– Pain is a sign of rebellion against the current conditions of existence –

26) Daudet, A. (2003). *In the land of pain*. Edited and translated by J. Barnes. New York: Knopf.

27) Batailles, G. (1999). *Die innere Erfahrung*. München: Matthes & Seitz, p. 265.

28) Melzack, R. (1975). *The McGill Pain Questionnaire: Major properties and scoring methods*. *Pain*, 1 (3), p. 277–299.

29) Richter, M., Eck, J., Straube, T., Miltner, W. H. R., & Weiss, T. (2010). Do words hurt? Brain activation during explicit and implicit processing of pain words. *Pain*, 148(2), p. 198–205.

30) Weiss, T. (2010). *Do words hurt? Psychologists show that verbal stimuli activate pain matrix*. Retrieved from [https://www.uni-jena.de/en/News/Archiv/Archiv+2010/PM100326\\_weiss\\_hurt.html](https://www.uni-jena.de/en/News/Archiv/Archiv+2010/PM100326_weiss_hurt.html). Accessed on 01.07.2016.

31) Auden, W. H. (1939, 1979). *In Time of War, XIV*. Retrieved from <http://themargins.net/anth/1930-1939/auden.html>. Accessed on 01.07.2016.

32) Vygotsky, L. S. (1930/2004). Imagination and creativity in childhood. *Journal of Russian and East European Psychology*, 42, p. 7–97, here p.10–20.

33) Montaigne, M. d. (1574/2006). Of the force of imagination. Trans. Ch. Cotton. In P. Madden (Ed.), *Quotidiana* (2006, December 26). Retrieved from [http://essays.quotidiana.org/montaigne/force\\_of\\_imagination](http://essays.quotidiana.org/montaigne/force_of_imagination). Accessed on 01.07.2016.

34) Gibbs, A. (2010). After Affect: Sympathy, Synchrony, and Mimetic Communication. In M. Gregg & G. J. Siegworth (Eds.), *The Affect Theory Reader* (p. 186–205). Durham: Duke University Press, here p. 191.

v) Philosopher Teresa Brennan developed a theory of the ‘Transmission of Affect’<sup>35</sup>. The core of this theory consists in the assumption of a constant communication between individuals and their physical and social environments. This notion challenges Western individualism and its understanding of emotions and energies as to be contained within the body of the individual.

In Brennan’s definition, affect is fundamentally an energetic force capable of permeating the skin of other bodies. In regard to the social consequences of her theory, Brennan declared:

What is at stake with the notion of the transmission of affect is precisely the opposite of the sociobiological claim that the biological determines the social. What is at stake is rather the means by which social interaction shapes biology. **My affect, if it comes across to you, alters your anatomical makeup for good or ill.**<sup>36</sup>

w) In his interview with Joel McKim, Brian Massumi explained the notion of **affective attunement** as follows:

Say there are a number of bodies indexed to the same cut, primed to the same cue, shocked in concert. What happens is a collective event. It’s distributed across those bodies. [...] However different their eventual actions, all will have unfolded from the same suspense. They will have been attuned – differentially – to the same interruptive commotion. ‘Affective attunement’ [...] is a crucial piece to the affective puzzle.<sup>37</sup>

**19) While leaving the clinic, I think: Somehow it is all about what to do next; what to think about it, how to deal with the situation. Who knows what should be done? Who knows what is best? Who is going to tell me what to think, what to do? What steps to take, what measures to take, and what to expect from the future? ...**

x) Pain is the sign for something not answered; it refers to something open, something that goes on the next moment to demand: What is wrong? How much longer? Why must I/ought I/should I/can I/ suffer? (Ivan Illich)<sup>38</sup>

y) **‘In affect, we are never alone** [emphasis added], said Brian Massumi in the interview with Mary Zourzani for her book on hope.<sup>39</sup> ‘That’s because affects in Spinoza’s definition<sup>40</sup> are basically ways of connecting, to others and to other situations. They are our angle of participation in processes larger than ourselves. **With intensified affect comes a stronger sense of embeddedness in a larger field of life** – a heightened sense of belonging, with other people and to other places [emphasis added].’<sup>41</sup>

z) Pain Cut Bone Blood  
Green white walls  
Voices without bodies  
A clinical smell making me nauseous  
A beeping noise driving me insane

Flesh Blood Bone Cut  
I perceive gestures of insecurity  
Gestures of pain  
Tensions, Constrictions ~  
Stiffness, Weakness  
Deranged bodies,  
Asymmetries

Flesh Cut Pain Blood  
I sense losses of order  
Losses of words  
Pain cuts flesh,  
Bones  
Blood starts talking –

**20) It is 11:15 and I leave the Department for Trauma at the AKH Wien.**

### III. Considerations

– Regarding is pain research –

When eyes are used as *organs of empathy*, regarding becomes pain research.

When looking at becomes *feeling into*, the gaze switches to the *radical mode of seeing feeling*<sup>42</sup> that allows for employing empathy as an epistemic means.

Seeing someone with an injury does not stop at the pain-associated image – it makes you *imagine the pain* possibly connected to the injury. This imagination of the pain of the other leads to an actual experience of pain, as neuropsychological studies show.<sup>43</sup> It leads to *feeling pain – your pain*.

Seeing and *imagining the pain of the other* lets you feel your pain as if what has happened to the body of the other has happened to you. Thus terms like ‘affect contagion’ or ‘transmission of affect’ are not accurate: it is more an ‘attunement via affection, via imagination’, that causes a shift of activation in the spectator.

The Russian psychologist Lev Vygotsky explains this with the imagination's drive to be embodied:

**A product of the imagination [...] shows a tendency to be embodied in real life. The imagination, by virtue of the strength of the impulses it contains, tends to become creative, that is, to actively transform whatever it has been directed at** [emphasis added].<sup>44</sup>

But for this *creative transformation* an activity is required, on your side, on the side of the spectator, so that the *affect* can become a *feeling*, that the image can become productive and your imagination can become real. It requires what Brennan calls 'considered sensing', which is the basis for discernment. This discernment makes the difference between affect and feeling, as Brennan explains. If we do not feel, we are just containers for all kinds of affective flotsam – unaware of its occurrence, and therefore missing its *significance*.<sup>45</sup>

Consequently, *if we do not feel, we do not care* – a thesis that corresponds with the results of a current study on the effects of pain analgesia on pain empathy: the corresponding publication suggests that **inducing pain analgesia reduces pain empathy**.<sup>46</sup>

According to the researchers, one possible deduction from these findings is that **taking painkillers may decrease one's feeling of empathy for the pain of others**.

#### – Knowing your pain allows for world-making –

Feeling means taking part, resulting in discerning what is going on, resulting in an increase of knowledge. Therefore affect, as political philosopher Brian Massumi emphasises, also means **potentiality**<sup>47</sup>, as the shift of activation caused by affects increases **openness**. What happens in regard to this potentiality is open; it depends on what we make of it.

*Pain is good to know: it can be rendered productive for insights.*

I know pain. You know pain. We all know pain. But do we know our pains?

Feminist researcher Liz Philipose points out that to know your pain already brings into force your agency of interpretation and making of meanings, that is: of 'world-making'. Philipose presents a collectivist understanding of emotions which is implied 'in this idea that I **can be influenced by my pain to recognize how others might be shaped by theirs** [emphasis added]'.<sup>48</sup>

She draws on the work of cultural scientist Sara Ahmed who focuses on emotions as cultural practices. Ahmed's central notion is that **emotions do things – they generate and create meaning in the world**. Emotions as 'material rhetoric' have affective power, as for example to align bodies with other bodies 'by the way they move us'.<sup>49</sup>

*Pains are moving, alluring us to world-making-activities, attuning our bodies with other bodies and therefore putting us in relation to others, locating us in social space.*

#### – Pain opens bodies and connects them –

Pains cut into our net of habits, and even the slightest pain causes a *transformation*, starting with this shift of activation that its affective quality induces. Something seizes you, time loses its usual succession, space seems to open up, the line between inside and outside blurs; on the one hand, there is a hold, a freeze-up, but on the other there is this enormous speed of ongoing processes that occur simultaneously – like memories from past experiences, expectations of the future, and the sensations of your current state. All this is activated by the pain; it is the *potentiality* – something that is inherent in the ability to affect and be affected. It is the *intensity* of the affective shift that activates these processes and leads to an increase of openness, of freedom.

35) Brennan, T. (2004). *The Transmission of Affect*. New York: The Cornell University Press, p. 94.

36) Brennan, T. (2004). *The Transmission of Affect*. New York: The Cornell University Press, p. 74.

37) Massumi, B. (2008). Of Microperception and Micropolitics. An Interview with Brian Massumi and Joel McKim. *Inflexions* No. 3 (2008, August 15). Retrieved from [http://www.senselab.ca/inflexions/volume\\_3/node\\_i3/massumi\\_en\\_inflexions\\_vol03.html](http://www.senselab.ca/inflexions/volume_3/node_i3/massumi_en_inflexions_vol03.html). Accessed on 01.07.2016.

38) Illich, I. (1976). *Medical Nemeses*. Chapter I.3: The Killing of Pain. New York: Random House.

39) Zournazi, M. (2002). *Hope: New Philosophies for Change*. New York: Routledge.

40) The basic Spinozan definition of affect can be summarized as the ability to affect and to be affected.

41) Zournazi, M. (2002). Navigating Moments – with Brian Massumi. In M. Zournazi, *Hope: New Philosophies for Change* (p. 210-243). New York: Routledge, here p. 214.

42) Bennett, J. (2005). *Empathic Vision. Affect, Trauma, and Contemporary Art*. Stanford: Stanford University Press, p. 11.

43) For example: Ogino, Y., Nemoto, H., Inui, K., Saito, S., Kakigi, R., & Goto, F. (2007). Inner experience of pain: imagination of pain while viewing images showing painful events forms subjective pain representation in human brain. *Cereb Cortex*, 17(5), p. 1139-1146.

44) Vygotsky, L. S. (1930/2004). Imagination and creativity in childhood. *Journal of Russian and East European Psychology*, 42, p. 7-97, here p. 41.

45) Brennan, T. (2004). *The Transmission of Affect*. New York: The Cornell University Press, p. 94.

46) Rütgen, M., Seidl, E.-M., Silani, G., Riečanský, I., Hummer, A., Windischberger, C., Petrovic, P. & Lamma, C. (2015). Placebo analgesia and its opioidergic regulation suggest that empathy for pain is grounded in self pain. *PNAS*, 112/ 41, E5638–E5646.

47) Massumi, B. (2008). Of Microperception and Micropolitics. An Interview with Brian Massumi and Joel McKim. *Inflexions* No. 3, p. 1-20.

48) Philipose, L. (2007). The Politics of Pain and the End of Empire. *International Feminist Journal of Politics*, 9:1, p. 60-81, here p. 64.

49) Ahmed, S. (2004). *The Cultural Politics of Emotion*. London & New York: Routledge, p. 195.



All images: photo collages by Barbara Macek

1. 'Time Pain I'
2. 'Existential Pain IV'
3. 'Space Pain II'
4. 'Space Pain III'
5. 'Wild Dark Pain II'
6. 'Knowing Pain IV'
7. 'Pain Animal I'
8. 'Existential Pain III'