

## PAIN AND EVIL

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### I

1. It has been held by some philosophers in the past that pain is not an evil, or not necessarily so.<sup>1</sup> In contrast with these ancient opinions, we find some modern philosophers maintaining, not merely that pain *is* an evil—an opinion with which most of us would agree—but that this, or something like this, is true in virtue of the very meaning of the word 'pain', and that it is therefore logically absurd to deny it. In this paper I shall be concerned less with the question of whether pain is, analytically, an evil, than with the preliminary questions of whether it is logically possible to experience pain but not dislike it, whether pain logically entails suffering, and the like. I shall leave undiscussed the precise relations between disliking something and thinking of it as an evil, and between being caused to suffer and undergoing an evil.

It must be noted, also, that the following sorts of cases are irrelevant to the questions which I shall be discussing:

(1) Cases in which a person does not notice or attend to a pain which he feels (or which he would feel if he attended to it) because he is concentrating on something else (*e.g.*, the game of football he is playing);

(2) Cases in which a person, though he dislikes, in itself, the pain which he has, accepts it willingly as a necessary condition for attaining something else which he values (*e.g.*, sexual satisfaction or the purgation of sin). It has been suggested that the masochist falls into this class; I am not sure about this, but I shall for this reason leave him out.

That is to say, I shall be discussing the question whether it is possible for a person not to dislike *in itself* (or, analogously, not to be caused to suffer, *pro tanto*, by) a pain to which he gives his full attention.

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<sup>1</sup> See, *e.g.*, M. Antoninus, vi, 33.

2. I will take, as an example of the thesis that pain has, analytically, to be disliked, the view of Professor Baier.<sup>2</sup> Baier's view is expounded by way of dissent from a statement of Professor Ryle's that "Pain is a sensation of a special sort, which we ordinarily dislike having".<sup>3</sup> Baier rejects the word 'ordinarily', as implying contingency. He thinks that the fact that we dislike pains is not a contingent fact; "whatever sorts of sensations we like and dislike, we only call pains those which we dislike. And if there are sensations which we ordinarily dislike but on some occasions like having, then we do not call them pains on those occasions on which we like having them."<sup>4</sup>

It is not clear from what Baier says whether he thinks that there is a distinct sensation or group of sensations called 'pain', different from, *e.g.*, warmth, cold and pressure, or whether he thinks that 'pain' is simply a word we use of *any* sensation when, either because it has reached a certain intensity, or for some other reason, we dislike it. If he thinks the former, it will be difficult for him to answer the question, what we call this distinct sensation on those occasions, which he admits to exist, when we do not dislike it (since the description 'pain' is ruled out by his theory). If there is this distinct sensation, there is surely a place for a word to describe it without entailing dislike.<sup>5</sup> It is conceivable, indeed, that, since we almost universally dislike the sensation in question, we have not developed any word at all for describing it without implying dislike; but it is much more likely that we merely have not developed any *separate* word—*i.e.*, that the word 'pain' itself is sometimes used to refer neutrally to this bare sensation, though sometimes, as no doubt Ryle also would admit, it is used in such a way as to imply dislike. If this were so, the controversy

<sup>2</sup> *The Moral Point of View*, pp. 268 ff.

<sup>3</sup> *The Concept of Mind*, p. 109.

<sup>4</sup> *Op. cit.*, p. 273.

<sup>5</sup> We shall see later that there are some narrower words (sometimes metaphorical) like 'pricking' and 'stinging' which are used of certain kinds of sensation which are certainly called 'pain' when they are intense enough to be disliked, but which there is a temptation to call 'pain' even when not disliked. These words, however, cannot be what we are looking for, since they would be inappropriate to other kinds of pain (*e.g.*, pain caused by cold). On Baier's theory, interpreted in this first way, there ought to be a general word for the sensation which when we dislike it we call 'pain', but a word which can also be applied to it when we do not dislike it.

between Baier and Ryle would begin to wear thin; for they might both be giving more or less correct accounts of different uses of the word 'pain'.

Baier's account, however, suffers more from ambiguity than Ryle's does; for we still have to consider the possibility that Baier thinks that there is no *distinct* sensation called 'pain', but that 'pain' is simply the name we give to any sensation when we dislike it. This view is less plausible. It has to meet the question of why, in that case, we do not call itches 'pains'—or sweltering heat, or cramps, or electric shocks, or the sensations which we have when tickled, or which we can give ourselves by gently massaging the funny bone, or by scraping our finger-nails down a blackboard. I must confess that the more I think about this subject, the more unpleasant sensations I seem to identify in my experience which are not pains. We have a phrase for the whole genus of these sensations, namely, 'unpleasant sensation'; but 'pain' seems to be a far narrower word than this.

It is true that often, when some sensation other than pain (e.g., warmth) becomes sufficiently intense, we start to feel pain; and it might be claimed that 'pain' means not 'any disliked sensation' but, more narrowly, 'any of a limited number of sensations—including warmth, cold and pressure—when disliked because above a certain intensity'. But even this will not do. For when we are touching something that is getting hotter, and the sensation of warmth turns to one of pain, and we say 'Now the sensation is painful', we do not mean the same as we would if we said that the sensation of warmth had got so intense that we disliked it. Neither logically nor phenomenologically is pain merely the upper end of the scales of intensity of the other sensations, coupled with dislike.

It seems, rather, that there is a phenomenologically distinct sensation or group of sensations which we have when we are in pain, and that there could be (whether there actually is or not) a word for this group of sensations which did not imply dislike. I say 'group of sensations' because burning pains, stinging pains, stabbing pains, aches, *etc.*, are distinguishable from one another, although they clearly fall into a group which is bound together by more than the fact that they are all disliked. This phenomenologically distinct group of sensations, however, is almost

universally disliked, and therefore it is convenient for us to have a word (such as 'pain' almost certainly is in one of its uses) which does imply dislike, but also is confined to this distinct group of sensations, and cannot be used of, for example, electric shocks, itches, or tickles. There is also a place for more general words or phrases which imply dislike, but are not restricted as to the sensation which is the object of the dislike. 'Unpleasant sensation' seems to be a phrase of this kind. Itches, tickles, electric shocks, *etc.*, are unpleasant sensations, but they are not pains.

There are thus, in principle, at least three categories of words which we might use in speaking of our experiences when we are in pain. Our actual words may be expected to overflow from one of these categories into another, so that we shall often have to say that in one use a word falls into one category, while in another use it falls into a different category. This should not dismay us. The three categories are:

(1) Words which refer simply to the bare sensation, without implying dislike. I think that 'pain', in one of its uses, falls into this category, and would be so used more often if the occasions on which we have the sensation without disliking it were not so uncommon. This would seem to be the sense of the word to which Ryle refers.

(2) Words which refer to this same sensation, but in addition imply dislike, so that they cannot be used when the sensation is had but not disliked. If we used 'pain<sub>1</sub>' and 'pain<sub>2</sub>' for the word as used in the first and second categories respectively, we might say, without much distortion, that 'pain<sub>2</sub>' meant 'pain<sub>1</sub> which is disliked' or 'pain<sub>1</sub> which is unpleasant'. 'Agony' and 'anguish' seem, in their literal senses, to fall into this category. If we speak of the 'agony' of a person who is not suffering intensely on account of one of the distinct group of sensations called 'pain', we do so in a metaphorical sense. The verb 'hurt' (intransitive), like 'pain' itself, seems to be used in both these first two categories, and, indeed, metaphorically in the third.

(3) Words which imply dislike, but can also be used of

other things than pain in the literal sense. Such words are 'suffering', 'unpleasant', 'distress', and 'discomfort'. There will also, as we have seen, be found in this category metaphorical uses of words whose literal habitat is in one of the first two categories or both. For example, an unkind remark can hurt me.

3. Objection might be taken to the claim that there could be a 'bare sensation' of pain which was not disliked. What, it might be asked, would such an experience be like? Can we *imagine* such an experience? I think that I can not only imagine it, but have had it; but I shall return to this question later. Here I shall just make the obvious point that we cannot conclude, from the fact that something surpasses our imagination, that it cannot happen. I cannot myself imagine what the electric torture would be like; but that does not take away the possibility that it might be inflicted on me. It would be more relevant if it could be established that no *sense* could be given to the expression 'experience which is like pain except for not being disliked.' But that is precisely the question at issue, and this whole paper is an attempt to see what sense can be given to such an expression.

An analogy may help us to understand this question. Let us suppose that I have always disliked a certain degree of cold (for example, that which I experience when I dive into water of a certain temperature having up till then been lying in the shade in still air of a certain other temperature; the experimental conditions could be made more exact, but this will be enough for our purposes.) I am assuming that the coldness of the water is not sufficient to produce actual pain. Now is it not perfectly possible to understand what it would be like for me to experience the same degree of cold, but not dislike it (not be caused any discomfort or distress)? Suppose, for example, that I do this diving act many times in the hope of getting not to mind this degree of cold; and that in the end I succeed. It is not necessary to suppose that there is any change in the degree of cold that I feel (even subjectively); there might be, but that would spoil the example. It may be merely that through habituation I stop minding my skin feeling like that. We do not even need to suppose any course of habituation. Whether I found the cold unpleasant or invigorating

might depend on my general state of mind—on whether I was feeling depressed or elated.

In the case of cold, the vocabulary which we actually have contains an expression—‘to feel cold’ which does not imply dislike. Even in the case of cold, admittedly, dislike of the sensation above a certain intensity is so universal that it might be assumed that a person who said he felt cold *did* dislike it, although the word itself does not imply this. But nevertheless, ‘I liked feeling cold’ is perfectly comprehensible. Intense cold can be liked because invigorating—and this does not mean ‘as a means to the end of being invigorated’. *A fortiori*, it can be not disliked. But our vocabulary might have been different—it is very important to distinguish the question ‘What does our present vocabulary allow?’ from the question ‘How could it comprehensibly be modified?’ We could, that is to say, have had a word for the feeling of cold which did, like ‘pain’ in some of its uses, imply dislike. Let us suppose that ‘cold’ itself was used in this way, and that dislike of cold was much more universal than in fact it is, so that uses of ‘cold’ in the other way, as not implying dislike, were comparatively rare. ‘Cold’ would then behave much as ‘pain’ does now, in respect of implying or not implying dislike (though, of course, there would be other differences).

The difference between the behaviour of our *actual* words ‘cold’ and ‘pain’ reflects a difference in how people commonly react to these two sensations; but—and this is really the nub—that does not mean that we are under any *logical* constraint to react to cold or pain in the way that we do. The constraints that we are under are contingent, though they too are readily explicable. There are good reasons why very few people get into a state in which they do not mind high intensities of pain. Nearly all causes of pain are also causes of harm to the organism; pain is, therefore, such a good warning device—and has indeed been developed as such—that we have acquired, partly by evolution and partly by learning, a very firm disposition to avoid pain; and this firm disposition is associated with a subjective feeling of dislike. This dislike is so universal that it is, as we have seen, reflected in our vocabulary; but that does not make it anything else but contingent that we have the dislike—there logically could be a person who did not dislike high intensities of the

sensation. With our vocabulary as it is, he could say that he did not dislike the pain, using the word in the sense of 'pain<sub>1</sub>' above; but unless such cases became common, there would certainly be conceptual misunderstandings and difficulties owing to the possibility of confusion between the two senses of the word which I have labelled 'pain<sub>1</sub>' and 'pain<sub>2</sub>'. And this is what has actually happened in the experimental and clinical situations to which I shall refer below.

The reasons why our actual word 'cold' does not behave like our actual word 'pain', in the sense of 'pain<sub>2</sub>', are readily understandable. People who do not mind, or who like, high intensities of cold, though uncommon, are not *so* uncommon. Probably nobody who breaks the ice to bathe at Christmas and enjoys it does so without a good deal of self-schooling; but we all know perfectly well that the thing can be done. With 'pain' it would be much more of an oddity. I have said that I would leave the masochist out, because there is a doubt whether his case is relevant. We must therefore look for clearer cases. There are, in fact, small degrees of pain which are by no means disliked by everybody. Most people could draw the point of a needle rather gently across their skin (as in acupuncture) and say truthfully that they could distinctly feel pain, but that they did not dislike it. Some might say that they would rather be without it than with it; but that would apply to a great many sensations about which no philosopher, to my knowledge, takes the line that some do with pain. Most people would rather be without a feeling of giddiness (though children often induce it in themselves out of interest); but nobody says that no sense can be given to the sentence 'I feel giddy, but do not dislike it'.

With some diffidence in the use of this technical term, we might say that the 'threshold' of dislike of pain is usually somewhat above the threshold of pain itself (that is, of the pain<sub>1</sub>-sensation).<sup>6</sup> Now let us suppose that we have a pain which is only just above the threshold of dislike. May I not, by habituation, come *not* to dislike this—to raise the threshold of dislike?

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<sup>6</sup> See C. A. Keele, in *The Assessment of Pain in Man and Animals*, ed. Keele and Smith, 1962, p. 41. Many of the other papers in this symposium are of considerable philosophical interest, especially that by R. Smith. I return to Keele's work below.

We do not, perhaps, have to be heroes to achieve this much. But in any case, it is not necessary actually to achieve it. It is sufficient—indeed more than sufficient—to imagine what it would be like to achieve it; and this I find perfectly easy. Indeed, even imagination is, for the reason given above, not necessary. It is sufficient if I could understand what would be meant by somebody who claimed to have achieved this very minor feat. And this I can certainly do. But if I can do it in this marginal case, I do not see how it can be impossible to *understand*, though it may be difficult to *believe*, a man who says that, by practice, he has got into a state in which he does not dislike lying on a bed of nails, although he has exactly the same experiences, apart from the dislike, that I would have if I lay on a bed of nails. The case is analogous to that of a man who claims to be able to jump, unaided, twenty feet into the air, whereas I can only jump three feet into the air. I understand him, but I do not readily believe him. That in the ‘bed of nails’ case there would be a logical bar to demonstrating conclusively that the feat had been performed (he might just be *very* good at concealing his dislike) does not seem to me to be relevant.

I have put this whole argument in terms of the word ‘dislike’. I think that it could have been put equally well in terms of the words ‘discomfort’, or ‘suffering’, or ‘unpleasant’. I have heard it said that it is logically impossible for a man who is experiencing intense pain not to be suffering, because suffering just *is* intense pain. This is clearly wrong, not only for the irrelevant reason that there are other ways of suffering than by experiencing intense pain (tickling or stifling, for example, will do); but because, by an analogous argument to the preceding, it would become clear that we could understand my *faqir* on his bed of nails if he said that he was experiencing intense pain, but not suffering, not finding it unpleasant, and undergoing no discomfort.

4. I have discussed the problem so far with reference to our common experience. While looking for more exact accounts of the distinction between pain, considered as a bare sensation, and pain, considered as entailing dislike, I have read a good deal of physiological literature, though not, I fear, enough to be sure that

I have understood the very difficult physiological issues about which there is at the moment so much controversy going on. I will, however, select two physiological topics which I think have a very close bearing on our philosophical problem, and do my best to summarize what the physiologists say about them.

An attempt has been made, which is of great philosophical interest, to record the precise verbal descriptions given by experimental subjects of their experience when subjected to varying amounts of pain.<sup>7</sup> These verbal descriptions can be supplemented by one physiologist's account of his own experiences, and what he is disposed to say about them, and also by the records of the movements of an indicator moved by the subjects to correspond with their subjective experiences. The indicator scale was marked 'No pain: slight: moderate: severe: very severe.'

Two contrasting features are very noticeable in the reports of these experiments. The first is a definite tendency, which supports the view of Baier, for subjects to confine the description 'pain' to experiences which they found unpleasant. For sensations (induced by putting various chemicals on an exposed blister base) which were not so intense as to be unpleasant, they used words like 'stinging' and 'pricking' (Smith, pp. 38-40). The other feature, which, on the contrary, supports Ryle's view, is the suggestion that the quality of the sensation below the level of unpleasantness is "continuous in most ways" with that above; Keele (p. 30) says, "the element of unpleasantness seems to be superimposed on a sensation which runs through the whole range". The 'continuity' of the sensation was to some extent borne out (for anyone but a philosopher) by the fact that, when the movements of the indicator recording the subjective intensity of the sensation were plotted against the amounts of the chemical in the solution applied to the blister (on a logarithmic scale), a very good correlation resulted.

Keele, attacking the conceptual difficulty in what seems a very sensible way, says, "It is simplest . . . to speak of a sensation of cutaneous pain which may range from the barest detectable level" (he has said earlier, on p. 30, that the sensation may be neutral or even pleasing) "to an intolerably unpleasant experience.

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<sup>7</sup> C. A. Keele and R. Smith, *op. cit.*

If the word pain is used to characterize this sensation throughout its whole scale it would be convenient to have some qualifying word to describe that part of the scale in which the sensation is usually not unpleasant. Phrases such as 'non-painful pain' and 'sub-threshold pain' are clearly not applicable." He proposes the technical terms 'metaesthesia' for the lower part of the scale and 'algaesthesia' for the higher, unpleasant part. Some such technical vocabulary is obviously required, since the ordinary word 'pain' has given rise to confusion because of its ambiguity, already noticed. Keele goes on: "It must, however, be emphasized that the borderline between the metaesthetic and algaesthetic ranges of pain is variable and hard to define, but of the reality of the distinction between these two ranges of pain there can be no doubt."

While, as philosophers, we might cavil at some of this, I think that we should be content with the broad lines of this suggestion. The upshot is that there are two ranges of intensity of a certain sensation, the boundary between which is indefinite and variable; there is a tendency, but only a tendency, in ordinary subjects to reserve the word 'pain' for the higher, unpleasant, range, but an opposing tendency, stronger among the experimenters themselves, but perfectly comprehensible to anyone, to use the word 'pain' of the whole range, pleasant, neutral or unpleasant. Once the phenomena are recognized—as they perhaps cannot be without more careful attention than the average man or even the average philosopher gives to the matter—we do not need to attach too much importance to the terminology, provided that it is consistently used; we shall have no difficulty in describing the phenomena whichever terminology we adopt.

5. The other physiological topic which I think it worth while to introduce (though with the greatest diffidence) is that of lobotomy. There is, as is well known, an operation to the frontal lobes of the brain which markedly alters what physiologists and psychologists call the 'pain-reaction'. Unfortunately this term is highly ambiguous, and before we can discuss the effects of the operation we shall have to sort out its different senses. We may distinguish, within the general class of reactions to pain, the following:

## (1) Experiences:

- (a) The felt dislike of the pain;
- (b) The felt desire to be rid of the pain; some people might equate this with (a);
- (c) The felt desire or inclination to do some particular thing in order to be rid of the pain: *e.g.*, to try to prevent the surgeon moving a painful limb;
- (d) Various after-effects such as fear of the painful event happening again.

## (2) Behaviour:

- (e) Various automatic reactions or reflexes such as wincing, crying out, *etc.* We do not need to discuss whether these are innate or learnt, but it is important that they can be inhibited.
- (f) Voluntary 'pain-terminating' behaviour—*i.e.*, doing particular things in order to be rid of the pain.
- (g) Verbal behaviour of various sorts related to the pain: *e.g.*, saying "I am in pain" or "that hurts" or "that hurt frightfully".
- (h) Various behavioural after-effects such as the avoidance of the pain-producing situation, together with other manifestations of fear, neurotic symptoms, *etc.*

This classification is crude and almost certainly not exhaustive; and well-known philosophical problems arise concerning the relation between some items (*e.g.*, as to whether (c) is, or involves, a disposition to do (f)). But it is detailed enough to show how careful we have to be when we read in case-reports that, for example, after lobotomy a patient's whole reaction to pain was altered. In particular, it appears that, contrary to what we might expect, (e) and (f) do not always go together; some lobotomized patients have a tendency to wince and cry out more than before (possibly because the operation has diminished the inhibition against these reflexes), but their reactions classified under (f) and (h) are diminished.<sup>8</sup> Among the 'experiences' classified

<sup>8</sup> For refs. see Hall, K. R., "Studies of Cutaneous Pain", *Brit. J. Psychol.*, 44 (1953), pp: 289 f.

under (1), it seems fairly clear that those mentioned under (d) can be markedly reduced by lobotomy, although the patients say that the pain is as intense as before; and this would seem to apply also to those mentioned under (c). Patients who have had the operation are said to be no longer bothered or troubled by the pain of their disease; and they co-operate better with the surgeon even when he is doing painful things to them. It seems natural to suppose that if the reactions under (c) are reduced, so also are those under (b); and, if those under (b) are reduced, it is hard to deny that those under (a) are reduced too (how could I dislike the pain just as much as before, but have a smaller desire to be rid of it?)

But the descriptions in the literature are not easy for a philosopher to unravel, because 'pain' and similar words are used indiscriminately by surgeons and patients, sometimes in the sense of 'pain<sub>1</sub>' above, and sometimes in the sense of 'pain<sub>2</sub>'. I am tempted to say that until some philosopher with a precise grasp of the distinctions involved actually has this operation done to him, it is unlikely that we shall be certain exactly what happens to the patient's dislike of the pain. For what it is worth, however, one surgeon says "In a sense, frontal lobotomy is not surgical treatment for the relief of pain, but rather surgical treatment for the relief of suffering"<sup>9</sup> and another says "Psycho-surgery alters the subject's reaction to pain without materially changing his ability to feel pain."<sup>10</sup> It is therefore not improbable that this operation can reduce suffering, distress and dislike without reducing the intensity of the pain-sensation. But whether it can or not, the suggestion that it can is a perfectly comprehensible one, and that is all that, as philosophers, we need. If we can understand what it would be for the suffering to be reduced while the sensation remained the same, we can surely understand also what it would be for the suffering or the distress or dislike to be altogether removed without any diminution in the pain-sensation. We may say, therefore, that the reports about this operation, obscure as they are, to some extent bear out the conclusions which we have already reached from examination of more normal

<sup>9</sup> Koskoff, in comment on Dynes and Poppen, *Am. Med. Ass. J.*, 140 (1949) pp. 15 ff.

<sup>10</sup> W. Freeman and J. W. Watts, *Lancet* 1946, p. 955.

experiences. We can also find in the reports examples of the conceptual difficulties which, if the word 'pain' has the two-faced character that I have claimed, we should expect.

Before leaving the subject of lobotomy, I will venture to make a tentative suggestion. One of the things that are most noticeable about these patients is that they in general stop being concerned about things; many of their other evaluations seem to go by the board or get reduced besides their dislike of pain. Thus one patient's son said of him, "It would make no difference to Dad whether I told him I had won a thousand pounds, or that I was going outside to shoot myself."<sup>11</sup> This, of course, entails a profound personality change, which has made surgeons very reluctant to use this operation except as a last resort. This lack of concern might be associated—I have not come across any clear evidence of this—with a shortening of the time-span over which the patient has fears or desires for the future. That could explain why patients who have had the operation to relieve a painful incurable disease cease to fear the onset of the attacks of pain. Now if the 'time-span of concern', as we may call it, were *sufficiently* shortened, would we be able to have any desires or concerns at all—since desire is always a desire for some future state (though this future state may be the continuance or discontinuance of a present state)? Is it not therefore logically possible for a patient to stop having any desires (to become quite apathetic, or in other words, not to like or dislike anything; for I cannot dislike something without, *pro tanto*, wanting it to stop, though of course I may want other things more)? But if so, is it not logically possible for him to retain his sensations, and in particular the sensation of pain, with undiminished intensity, while ceasing to have any affective attitudes towards them?

It may be asked whether there are any *drugs* which, as lobotomy has been said to do, could relieve suffering without diminishing the intensity of the pain-sensation. Pharmacologists evidently disagree about the answer to this question.<sup>12</sup> But it is certainly logically possible that such a drug should be invented; and we have in our common experience of alcohol something

<sup>11</sup> M. Falconer, *Ass. Res. Nervous and Mental Disease*, vol. 27, 709.

<sup>12</sup> For references, see H. K. Beecher, *Measurement of Subjective Responses*, 1959.

which comes near to what we are looking for. Before anaesthetics proper came into use, surgeons used to give their patients whisky before operations; as anybody may verify, this does not diminish substantially the intensity of the pain-sensation, but may make it a great deal easier to bear. In *King Lear*, Edmund says, as he slashes his arm (in this case, admittedly, for an ulterior purpose), "I have seen drunkards do more than this in sport" (II, 1); and it does not have to be assumed that the drunkards feel any less of the pain-sensation than sober men—only that they do not mind it so much.

6. It may be objected at this point that, if it were logically possible not to dislike pains, and therefore not to display the manifestations of dislike, such as withdrawal of limbs from the painful stimulus, children could never learn the use of the word 'pain'. For, it might be said, we can only learn these words because, when we are young, our elders see us displaying these manifestations, and say "Does it hurt?", "Have you got a pain?", etc. A philosopher might seek to prove thus that there is an analytic connection between having a pain and manifestations of dislike. But the argument is ineffective; for the teaching procedure would work perfectly well if the connection between pain and the manifestations of dislike were not analytic but contingent, provided that cases of pain without the manifestations, or *vice versa*, were rare. For me to succeed in teaching children the use of the word 'pain', it is sufficient for me correctly to *guess*, on one or two occasions, that they are in pain because they are doing what normally manifests dislike of pain; it is not necessary for me to be certain (let alone logically certain) that if they are doing these things they are in pain, or that if they were in pain they would be doing these things.

From the fact that certain contingent circumstances have in general to obtain before a certain word can come into use (even if this fact is itself logically demonstrable) it by no means follows that these same contingent circumstances are logical conditions of the word's correct use on a particular occasion, or determine what its *meaning* is on that or other occasions. Thus 'pain' might be the name of a completely private experience (a word which could be legitimately used whatever was happening

overtly) even though the word could not have come into use unless, normally, these private experiences were correlated with overt occurrences. This point is of some methodological importance, but there is no time to pursue it.

7. In conclusion, let me satisfy the demands of honesty by declaring the axe which I have been grinding in this paper—though I fancy that its edge will have become visible to most people by now. There are those who seek to impugn the distinction between descriptive and evaluative judgements; and one of the arguments that I have heard used in this controversy is the following. To say that I am in intense pain is to state a fact; I cannot truly deny, if I have a certain distinct experience, that I am in intense pain. Therefore, it is claimed, the statement 'I am in intense pain' satisfies the conditions for being called 'descriptive'. But on the other hand, I cannot be in intense pain without thinking it bad, or disliking it, or suffering; to think something bad, however, or to dislike it, or to suffer because of it, is already to be making an evaluation. And (the argument goes on) since all of this is true in virtue of the meaning of the word 'pain', 'I am in intense pain' seems also to satisfy the conditions for being called an evaluative judgement. Therefore, it is concluded, the distinction breaks down.

The answer that I would give to this argument will, I hope, be clear from the foregoing discussion. There may be a use of the word 'pain' such that it is analytic to say that a man who is in intense pain is suffering, or having something bad happen to him; or that a man who experiences pain always dislikes it. But if this is so, it may be only because 'pain' in this use is a complex word, implying *both* the existence of a certain distinct sensation, *and* suffering, *etc.* The argument does not rule out the possibility of a man having the very same experience except for the absence of the suffering. And if he did, there would be nothing to prevent him calling the experience which he had 'pain' in the sense of my 'pain<sub>1</sub>', or, if this be objected to, using some other word. Let us, in order to avoid verbal dispute, use ' $\phi$ ' for this other word.

Let it be admitted that, if a man is having the sensation  $\phi$ , he cannot truly deny that he is having it. And let it be admitted,

further, that if he is disliking the sensation, he cannot truly deny that he is disliking it (and similarly with suffering). This is the case, even if to dislike something is to make an evaluation; for if I am evaluating something in a certain way, I cannot truly deny that that is what I am doing. Let it be admitted, even, that on any particular occasion, if I do dislike the sensation  $\phi$ , there is nothing I can do about it. This would not prevent disliking something from being a kind of evaluation; for there are many evaluations that are not psychologically *ad lib*. If I were flogged with a cat of nine tails, I should certainly dislike it, constituted as I am. But all this is not enough to establish the case of the philosophers whom I am now considering; for they want to make a logical, and not merely a psychological connexion, however inescapable, between experiencing the sensation  $\phi$  and disliking it, suffering, *etc*.

If it be once allowed that, as I have been trying to establish, it is logically possible to have the sensation  $\phi$  without disliking it, to have it intensely without suffering, and so on, the argument falls down. If I have the sensation called ' $\phi$ ', all that I can be compelled logically to admit is that I have the sensation called ' $\phi$ '. Logic cannot make me suffer. That I shall nearly always suffer when I experience intensely the sensation called ' $\phi$ ' is a well-established contingent truth. To try to make it more is to succumb to one of the oldest temptations in philosophy: the temptation to try to prove synthetic conclusions by logical considerations alone.

Mr. Hare challenges the claim, sometimes made in recent years, that it is impossible for a person to feel or experience pain and not dislike it. He argues, not merely that it is logically possible that this should happen, but further that there are grounds for thinking that as a matter of empirical fact it sometimes *does* happen. He is prepared to allow that there is a use of the word 'pain' in which it implies dislike—what he calls 'pain<sub>2</sub>'; he denies, however, that it is only used in this sense, and identifies another use—'pain<sub>1</sub>'—in which we can (or could) speak without absurdity or inconsistency of pains that we do not find unpleasant or do not mind, and even of ones we found positively agreeable. It is this latter use of the word which he believes to be exemplified in at least some of the descriptions and reports he cites from physiological literature on the subject of pain. He does not rule out the possibility that illustrations of its use in this sense might also be discovered in accounts of masochistic phenomena of the sort provided by psycho-analysts and others, but has preferred not to consider such accounts on the ground that he has doubts about their relevance.

In what follows I shall first comment briefly on some of the complex issues Hare raises in his paper. I shall then go on to say something about the subject he has decided not to discuss, namely, masochism. Whether relevant or not, the masochist has usually found his way at some point into philosophical writings on the present topic, and I think that it would be a pity if on this occasion he were to be wholly disregarded. But I should add that I introduce this question with quite as much diffidence as that to which Hare confesses in bringing up the subject of lobotomy.

## I

Hare's approach *via* a route which goes beyond common experience and involves him in the consideration of examples drawn from specialised enquiry and research seems to me useful and salutary. There is perhaps always some temptation for

philosophers to try to settle in advance questions to which experimental findings appear to be, in one way or another, applicable: in the present context it would seem particularly important to attempt to gauge the range and limits of our concepts with reference to such findings rather than take the course of deciding, on the basis of a too narrow or too familiar set of cases, what certain terms in our language must mean and then going on to put aside or explain away apparently recalcitrant instances as and when they arise. At best the second type of procedure is apt to arouse a sense of intellectual dissatisfaction—it may look (as Hare suggests) as if logic were in some mysterious way capable of preventing us from feeling or doing certain things, or alternatively of forcing us to feel and do them. At worst it may be felt to act as a positive discouragement to the pursuit of promising lines of scientific investigation; for instance, by suggesting that ostensibly well-attested facts, inviting more detailed inspection and enquiry, are not facts at all, since they do not represent conceivable states of affairs. Notoriously, the history of philosophy is littered with the remains of *a priori* objections to ideas and theories that have managed to survive the strictures passed upon them; for this reason alone I think that it is as well to be wary of philosophical claims to the effect that it is of the 'essence' of pain that it should be disliked, and to take seriously cases taken from the laboratory and elsewhere which could cast doubt upon their validity.

I also find myself in general agreement with much that Hare writes in criticism of the claims in question. I think, though, that more could be said concerning some of the considerations which may have influenced philosophers who have wished to make them.

It is not merely, as Professor Baier explicitly argues and as Hare himself is ready to allow, that we learn the use of the word 'pain' in contexts where we or others behave in a manner naturally understood and described as 'manifesting dislike', although this has obvious relevance. It also seems important to recognise the degree to which the notion of pain as a source of suffering and as an object of fear is embedded in our conception

of what it is to be a human being, and the extent to which this notion governs whole ranges of our characteristic interpersonal attitudes and emotions, finding expression in the vocabulary in which we describe them. To be told of someone who did not mind, or even welcomed, pain (*tout court* and without further explanation) would be to receive a shock extending beyond mere surprise at an unusual empirical contingency and springing partly from the violence done to some of the most fundamental categories in terms of which we are accustomed to conceive ourselves and our relations to others. It was perhaps for this, among other reasons, that Baier originally took exception to Professor Ryle's statement that pain is a sensation we ordinarily dislike having. For (whatever may in fact have been intended) this might suggest that it is just an empirically well-confirmed fact that we do normally—most of us and most of the time—find pains unpleasant, seek to avoid experiencing them, when we have them want them to stop, and so on. But such a view, it could be argued, gives the impression that dislike of pain is broadly comparable to dislike, *e.g.*, of certain tastes and smells, though possibly more general and certainly more acute; and this seems wrong. Hare may reasonably claim that in drawing a distinction between two uses of 'pain' along the lines he proposes he has taken this into account, and that he has moreover succeeded in explaining the conceptual facts as opposed to merely drawing attention to them. I think, even so, that to say that in the last analysis it is only 'contingent that we have the dislike', while in one sense it may be true, at the same time fails to do sufficient justice to the full implications and ramifications of our attitude to pain. The idea of not disliking pain derives much of its air of paradox from the fact that it implies the suspension of a whole system of interconnected responses and beliefs which combine to constitute something essential to our outlook on the world and to our modes of living within it.

Yet whatever truth there may be in this, does it in any way preclude the possibility of there being particular circumstances in which it would be both intelligible and appropriate to use such

an expression as 'experience which is like pain except for not being disliked'? For this, it may be claimed, is all that is ultimately at issue. And those who hold positions of the kind Hare attacks might reply by asking in turn what it would be to attribute sensations of pain in the absence of *any* of the dislike reactions normally associated with and regarded as justifying such ascriptions. Thus suppose we came across a race of beings who exhibited no pain-behaviour. Much might depend on how the detail of the example was filled in, but as it stands it is, of course, far from evident that if we were confronted by instances of such creatures cutting and wounding themselves without signs of suffering, we should unhesitatingly describe them as not disliking pain; would it not, on the contrary, be natural to speak of them as *insensitive* to pain? And if here, why not elsewhere? If nothing would ever, properly and unambiguously, count as a case falling under the suggested description, what clear sense can it have?

There seem to be two possible answers to this, both of which (unless I mistake him) Hare would give, and which are, I think, connected. The first consists in shifting the application of the description from others to myself: are there not circumstances under which I can at least conceive of myself describing *my* experiences in this way? The second consists in considering specific cases, like the experimental subjects and lobotomy patients Hare refers to. What distinguishes the latter is that here we have to do with people who are certainly perfectly familiar with the experience of pain and who have learned the language in which it is talked about in the normal way; at the same time they sometimes provide first-person reports of feeling pain, while denying that it distresses or troubles them and apparently manifesting behaviour largely consonant with this denial. It would still, I suppose, be open to a philosopher who wished to preserve a necessary connexion between pain and dislike to refuse to allow that what was being experienced in such cases was correctly describable as 'pain'; in a recent article, indeed, Baier goes some way—though with qualifications—towards doing this. Thus while he admits that it is "natural for

prefrontal lobotomy patients to continue to speak of having pains, because they still have sensations which are recognisably similar to those they always had", he seems to think that we are nonetheless "strongly inclined to say that they no longer have *real* pains", or at any rate that it would be "misleading" to say that they had.<sup>1</sup> But it may seem a little hard not to accept a description which (it is allowed) the man himself finds it natural to give; in any event, the divergences could be accommodated in terms of Hare's suggested two uses, the essential point which I take it Hare wishes to establish being conceded. A different kind of case, which appears on occasions to occur and which might raise considerable problems concerning its appropriate description, would be one involving apparent discrepancies between the criteria relevant to determining dislike. In this connexion I must confess to being not entirely happy about Hare's 'tentative suggestion' that *sufficiently* reducing what he calls the 'time-span of concern' of a patient might eliminate all his 'affective attitudes', including his dislike of his pain. This seems to rest upon the claim that disliking something entails wanting it to stop. In such a curious case as the one envisaged, however, it would seem that we might still have reasons for saying that the patient was suffering—*e.g.*, he 'dwelt on' his pain, moped, appeared miserable, grimaced, and so on. It may be said that none of this could be so in the absence of desire that the pain should cease, but (given that he is no longer supposed capable of desires of any kind) I do not at the moment see why not. But, leaving this aside, there seem to remain clear cases where it would be puzzling to know whether to say that the patient's suffering had disappeared, or even diminished. Suppose, for example, that the patient's fear of future onsets of pain appeared to have gone, but that in other respects his reactions to pain remained unchanged? The decision as to whether to say that the suffering was really less or whether to say that it only *seemed* to be so because, *e.g.*, the patient's time-span of concern had been considerably shortened might be a hard one to make. And

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<sup>1</sup> "Pains" (*Australasian Journal of Philosophy*, May 1962, pp. 1–23).

what, too, is the status of the patient's own reports concerning his attitude to his pain? Are these *always* to be accepted, and, if not, in what circumstances should we regard his other reactions and behaviour as putting them in question?

Problems similar to these, together with a number of others, arise in the case of the masochist, to whose predicament I now turn.

## II

The case of the masochist is frequently referred to by philosophers in their discussions of pain. Like Hare, though, they often seem doubtful of its precise bearing on the problem at issue, and references to it have for the most part been rather brief. Thus Baier, in the section of his book from which Hare quotes, does not explicitly refer to masochistic phenomena, confining himself to the claim that if there are sensations which we ordinarily describe as painful but which on some particular occasion we do not dislike or even enjoy, we cannot when this happens "say that we are in pain or that we are having a pain":<sup>2</sup> the example he gives is having one's ears bitten. He does, however, consider the case of the martyr, saying that the pains which the martyr is described as liking or rejoicing in are "not liked for their own sakes, but for what they imply", and in the later article already alluded to he extends a similar treatment to the case of "masochists and sadists"; with such people, suffering is indulged in as a condition of the attainment of further ends—"masochists and sadists would not gloat over the suffering . . . if their ends, the attainment of voluptuous sensations or the punishment of their victims, did not require these sufferings, or at least seem to require them." Professor Nowell-Smith, on the other hand, does not share Baier's views on the logical point raised by masochism; in his book on *Ethics* he writes that it is "sophisticated, but not logically impossible, to enjoy a painful sensation and to want to prolong it; there are no logical limits to the possibilities of masochistic enjoyment."<sup>3</sup>

<sup>2</sup> *The Moral Point of View*, pp. 273-4.

<sup>3</sup> *Ethics*, p. 132.

Again, in a recent study<sup>4</sup> Mr. D. M. Armstrong does not rule out the logical possibility that a person might enjoy a bodily feeling of pain, but he doubts whether such a possibility is ever in fact realised in masochism, suggesting that the latter is really a case of putting up with pain (disliked 'in itself') for the sake of other (pleasurable) features of the situation in which it occurs. Elsewhere, however, the question has once more been raised in an interesting way as to whether it is possible even to give a clear sense to the assertion that masochists enjoy painful sensations, at any rate if this is supposed to mean more than that they enjoy being subjected to kinds of treatment (like being beaten) which most people dislike or try to avoid.<sup>5</sup> For how can one speak of their being *in pain* if their behaviour is not consonant with certain recognisable patterns, such as ones indicative of a desire that what they are experiencing should stop?

Such diversity of views partly reflects a difference of opinion as to how the phenomena of masochism should be described, as to whether certain familiar descriptions of what happens in masochism—like 'The masochist's pain is his pleasure'—are misleading or (indeed) inconsistent. But it also seems sometimes to reflect a difference of opinion (admittedly not easily disentangled from the first) regarding the facts of masochism as observed and recorded by clinical investigators—in other words, the empirical character of the behaviour concerning which an intelligible mode of description is sought. It may therefore be worth looking at a few of the things psycho-analysts have said about a problem with which they at least possess the advantage of being in first-hand practical contact; and this I propose to do. I should add, however, that the works I refer to represent no more than a small sample of the writings on the subject, and that I also do not know what reputation they enjoy in professional circles at the present time.

An immediately striking feature of clinical accounts may be mentioned at the outset. Analysts often appear to be in

<sup>4</sup> *Bodily Sensations*, pp. 91 and 107–8.

<sup>5</sup> See, e.g., C. C. W. Taylor, "Pleasure", (*Analysis*, Supplement, January 1963).

difficulties of a terminological kind, and give the impression of finding the crude every-day 'pleasure/pain' vocabulary an awkward instrument to work with: thus inconsistencies and confusions of usage, of the kind to which Hare drew attention when speaking of experimental work on the physiology of pain, tend to occur in this field likewise, and writers often ring the changes on words like 'suffering', 'discomfort', 'unpleasure' and 'pain' itself in a somewhat indiscriminate fashion. Again, what is perhaps more fundamental from the present point of view, there are signs of uncertainty concerning the kind of 'problem' or 'paradox' the case of the masochist presents. For example, is he to be regarded as a person who simply fails (or appears to fail) to conform to "a basic law of the psychic apparatus, according to which man strives for pleasure and tries to escape unpleasure"?<sup>6</sup> That is to say, is he simply an exceptional case? Or is the position rather that there is something basically incoherent or unintelligible in the whole notion of masochism as it is frequently represented? Pain, generally avoided and disliked, is spoken of as being enjoyed and actively striven for: but how is this possible? Is there not something intellectually unacceptable, 'inconsistent' or 'contradictory', in such a supposition? As one writer expresses himself, it is as if one wished to refer to "what rationally could not exist and yet is there".<sup>7</sup> And elsewhere the same analyst speaks of there being a "*contradictio in adjecto*" in the popular conception of the masochist as one who seeks "unpleasurable pleasure" and whose satisfaction is thought of as directly deriving from "pain and shame".<sup>8</sup> In general, one tends to be aware of an oscillation between two separate but not clearly distinguished views: the view that masochism in the commonly accepted sense raises conceptual difficulties of a profound and far-reaching nature and, on the other hand, the view that the difficulties presented are essentially of an empirical kind—what the masochist is alleged to do apparently flies in the face of all that our knowledge of

<sup>6</sup> W. Reich, *Character Analysis*, p. 215.

<sup>7</sup> T. Reich, *Masochism in Sex and Society*, p. 39.

<sup>8</sup> *Ibid.*, p. 269.

human beings and their motivation would lead us to expect. It is, however, in a spirit consonant with the second of these views that psycho-analytical investigation seems chiefly to proceed: desire for, and enjoyment of, pain are at least describable phenomena, the question being one of determining in what sense, if any, they actually occur.

Following Freud, analysts have distinguished between masochism regarded as a "perversion",<sup>9</sup> in which satisfaction is consciously sought in specific situations, and so-called "moral masochism", a confusing label for a certain general attitude towards life in which the overall pattern of an individual's behaviour exhibits a marked tendency towards involvement in distressing, frustrating or disappointing circumstances. This distinction is by no means clear-cut, and it has been suggested that the difference is primarily one of "awareness"—in masochism of the first kind "both the striving for satisfaction and the satisfaction are conscious", in that of the second "both are unconscious".<sup>10</sup> Nevertheless, it seems useful for present purposes to keep the distinction in view. Thus 'moral masochism', whatever philosophical questions it may give rise to on other counts, appears to have no special connexion with the experiencing of unpleasant sensations as such; in any case, those who exemplify it typically refuse to admit that they take pleasure in the disagreeable situations in which they habitually find themselves. By contrast, masochism in the first sense mentioned above is commonly understood to involve the idea of pain, or some other sensation normally experienced as unpleasant, as an important component; for instance, satisfaction may be looked for through (actual or fantasied) submission to beating, torture, physical constriction and so forth. It is concerning masochism so conceived that Freud speaks of "sensations of pain, like other unpleasant sensations, extend(ing) into sexual excitation and produc(ing) a condition which is pleasurable"<sup>11</sup>, and that Reik

<sup>9</sup> Cf. Reik *op. cit.*, pp. 24 ff. and 277.

<sup>10</sup> K. Horney, *The Neurotic Personality of our Time*, p. 260.

<sup>11</sup> S. Freud, "Instincts and their Vicissitudes" (*Collected Papers*, IV, pp. 60-83).

at one point identifies "the paradoxical pairing of pain or discomfort" with pleasure as the "essential element" in the problem of masochism.<sup>12</sup>

As, however, Reik himself subsequently goes on to point out, to formulate the problem in these terms is too crude and can be positively misleading. In the first place there are many cases of perversions which psycho-analysts have no hesitation in describing as 'masochistic' but in none of which "the sensation of pain is emphasised . . . ; rather is the stress on the pleasure in the idea of anxiety or terror."<sup>13</sup> Secondly, in those instances where pain or other forms of physical discomfort do play a central rôle certain further considerations must be borne in mind. For it is not, of course, pain as such that the masochist finds (or appears to find) pleasurable, but only those pains which occur in circumstances of a specific kind. There must, in other words, be a *setting*: as example after example provided by clinical reports illustrates, questions such as those of how the pain is caused, in what situation and by whom, are of crucial importance, and the picture of the masochist as one who simply desires painful sensations in and for themselves, irrespective of how they are produced or what form they take, can be shown to be naïve. Likewise, it has to be remembered that the value accorded to a particular masochistic experience is dependent upon the subject's conception of what is happening to him—upon the type of description applicable to it (*e.g.*, he is being 'humiliated' or 'punished') or upon the character of the fantasies with which he surrounds it ("in masochistic fantasies the common denominator is a feeling of being putty in the master's hand, of being devoid of all will, of all power, of being absolutely subjected to another's domination").<sup>14</sup> Remove this necessary background and the experiences undergone would no longer possess the peculiar significance which makes them desirable in the masochist's eyes.

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<sup>12</sup> Reik, *op. cit.*, p. 14.

<sup>13</sup> Reik, *op. cit.*, pp. 42-3.

<sup>14</sup> Horney, *op. cit.*, p. 274.

It is these special features of the masochist's apparent enjoyment of pain or discomfort which have led some psychologists to look for explanations that remove the 'paradox' of masochism by showing that what at first sight seems to be the goal of masochistic endeavour, the object of masochistic pleasure, is in fact neither of these things. It is not the experience of pain that is sought and enjoyed as something intrinsically desirable; rather, such experience must be understood and interpreted as a 'pre-requisite' or 'condition' of satisfaction, in the sense that without it what the masochist 'really' wants and takes pleasure in—sexual gratification—would not (or could not) occur. Thus Reik claims that it is never "pain itself that is desired originally" but only "something connected with pain" and not identifiable with it. It may be suggested, for instance, that certain preliminary feelings of guilt have to be assuaged before the satisfaction sought can be achieved; the pain which the masochist suffers is comparable to an 'indulgence' or 'licence' that serves the rôle of permitting him a gratification otherwise forbidden him—it represents for him a kind of penalty inflicted in advance, the "symbolic displacement" of the more terrible punishment which he secretly fears.<sup>15</sup> Again, the masochist's behaviour may be interpreted as an attempt to escape responsibility: Reich treats the case of one patient who submitted to beating as the manifestation of a wish to achieve satisfaction "by way of a detour, and to shift the responsibility to the punishing person."<sup>16</sup> Such explanations share the common feature of seeking to set activities which at first glance seem incredible in a light that exhibits them as elements in a pattern with an intelligible object or destination. And to this extent those philosophers who have claimed that masochistic phenomena are irrelevant to the problem of whether pain is conceivable in the absence of dislike would appear to be justified.

Even so, there are complications which derive in part from what the psychologists themselves say concerning their accounts of masochism. The interpretations in question all take as their

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<sup>15</sup> Reik, *op. cit.*, pp. 125 ff.

<sup>16</sup> Reich, *op. cit.*, p. 243.

starting-points experiences undergone in early childhood; these, by instilling or arousing attitudes of shame, fear and so on, are held to give rise to subsequent deviations from the norm in adult life. But it may still be argued that the suggestion that such deviations develop as a consequence of (say) a desire to 'ward off' or anticipate in diluted form some threatened punishment, while perhaps ruling out the hypothesis of an innate or original 'urge to suffer', does not preclude the possibility that what at first presents itself in some sense as a 'necessary evil' which has to be endured may not ultimately be desired or found enjoyable in its own right. And there appears indeed to be uncertainty in the minds of some analysts concerning the question of what exactly it is that the masochist enjoys when he willingly submits to pain or discomfort. It is admitted, for instance, that many patients at least speak *as if* they enjoy their pains, and find such things as being beaten in certain circumstances pleasurable. About this it is sometimes said that the reports masochists give of their experiences are unreliable, and that a 'literal acceptance' of their 'conscious descriptions' can lead investigators to draw false conclusions:

"The psychological and analytical observers were victims of an optical illusion which, though excusable, had to be exposed. This is all the more necessary *as the masochists themselves, as far as their conscious is concerned, are deluded in the same way. Therefore their testimony, though given in all good faith, is of less importance than is usually assumed.*"<sup>17</sup> The suggestion behind such passages is that the masochist confuses (possibly as a result of self-deception) an experience which merely accompanies his pleasure with the experience he actually enjoys—the two are often so closely related temporarily that it may wrongly appear, even to the masochistic subject himself, that he enjoys pain. Elsewhere, however, this view is combined with what *prima facie* would appear to be a different thesis. At one point Reik mentions the case of a woman patient who used to distinguish

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<sup>17</sup> Reik, *op. cit.*, p. 271 (my italics). Cf. also Reich (*op. cit.*, p. 217): "Only when I began to doubt the correctness and precision of the patients' statements did the light begin to dawn."

between pains she found 'disagreeable' and others which she described as 'interesting'; the latter were of the type produced by cuts and abrasions, and the explanation of her adult attitude towards them lay in associations formed in early childhood, when cutting herself had made her the object of comforting and concern. In a broadly similar manner it seems sometimes to be implied, not that the masochist is mistaken in his introspective reports, but merely that the pleasure he now genuinely obtains from painful experiences is a transferred pleasure, transferred from the sexual gratification with which these experiences are associated—thus "what is pleasant for the masochist now was once unpleasant to him, . . . that he enjoys it now must be secondary and is a result of certain complicated processes",<sup>18</sup> the latter producing an 'osmosis' of pain and pleasure. In other words, the claim seems here to be that the object, or part of the object, of the masochist's pleasure may well be the pains that he feels, the point being simply that this was not the case 'originally' and that it has only come to be so as a consequence of certain events in his psychological history.

Difficulties of interpretation certainly arise with all this: both because it is not always clear in what sense words like 'pleasant' are being used and also because of the references to unconscious factors. There is, moreover, an often confusing employment of causal terminology to characterise the relation between the masochist's pleasure and what he finds pleasant. In some of the psycho-analytical accounts given of reports of masochistic enjoyment there is more than a hint that the masochist makes a false causal inference concerning the source of his pleasure; thus he thinks that it must be produced by pain (partly because pain normally precedes or accompanies it, partly because he unconsciously conceals from himself the true explanation), whereas in fact it is produced by sexual gratification or by the anticipatory idea of such gratification. But there is an odd ring about the suggestion that a man can be mistaken about his pleasure in *this* way, as if his pleasure was an independently identifiable and

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<sup>18</sup> Reik, *op. cit.*, p. 267.

describable occurrence and as if its source was something established (by himself or others) in the manner of a straightforward causal hypothesis. If, when pressed, the masochist insists that it *is* pain that he enjoys and not (or not merely) something else that accompanies the pain, it is not obvious how the analyst or anybody else is to convince him that he is wrong; at the least, it does not seem to be a matter of showing him to be mistaken in the way a man may be shown to be mistaken when he supposes that it is coffee which gives him indigestion or causes his headaches. And the fact that the masochist's claims are not open to conclusive correction in this sense may help to explain the element of ambiguity, noticed above, which underlies the treatment sometimes accorded to them.

Yet it may nevertheless be urged that there do remain ways in which a man's reports of what gives him pleasure can go wrong, and that for this reason the reports provided by masochists may after all be suspect, despite their being offered without any intention to deceive. Even if crude causal models are rejected as inapplicable here, it could still be the case that patients on occasions misidentify or misrepresent the features of their experiences which make them enjoyable, and that they themselves may become aware of this when they reflect more carefully or when certain factors are brought to their attention. Thus, to take an example suggested by Reich, a man may affirm that he enjoys the sensation of being beaten but may wrongly identify what it is about the sensation that he finds agreeable—in reality “the patient wants to feel the warmth of the skin, not pain”, the pain only being “taken into the bargain because of the ‘burning’”.<sup>19</sup> Or again, it may be that the masochist's account of what he enjoys is inadequate or misleading in another way. I pointed out earlier that it seems to be a condition of masochistic pleasure involving the experience of pain that there should be a certain setting or situational context of a fairly narrowly circumscribed kind, and further that this necessary setting is closely connected with the particular significance which the experience

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<sup>19</sup> Reich, *op. cit.*, p. 227.

has for the masochist. Now it is of course possible that the subject should not himself consciously recognise this significance, only coming to a realisation and acknowledgement of it later as a result of treatment. And an important feature of his new awareness and understanding may be that he no longer accepts, or that he at any rate wishes to modify, the terms in which he originally characterised his practices as enjoyable. Thus what before he was content to describe as his finding pleasure or satisfaction in the performance of a certain ritual he may now describe in a fashion which reveals the 'inner meaning' the practice has for him: by, for instance, exhibiting the symbolic rôle served by the actions of the participants and by pointing up links or analogies between what happens to him in the ritual and various incidents that took place during his infancy. By becoming clearer as to what he is doing he is led to revise his account of the nature of his pleasure.

The replacement of one description for another in a manner that displays the phenomenon in a different and wider perspective does, I think, play an essential part in psycho-analytical explanations of masochistic pleasure. It is, however, rather less easy to see just what conclusions follow regarding the question of whether, in the light of them, the masochist can still be spoken of as enjoying his pains. In what sense, for example, are the latter *important* for his enjoyment? As has been said, one answer to this is that the pain provides him with a kind of 'licence' to sexual gratification, and that this is how he will come to describe the situation when he reaches a true awareness of its character: the pains were endured for the sake of the pleasurable sequel. But two points arise here. First, there is the difficulty (already alluded to) of determining exactly how this interpretation is to be taken. Secondly, there is the more general point that the question of whether or not a particular feeling or sensation is enjoyable cannot be always satisfactorily answered without reference to the context in which it occurs, a context that may include the conceptions, wishes, attitudes, *etc.* (conscious or unconscious) of the experiencing subject. It certainly seems possible that a man may describe a bodily feeling as

agreeable in one set of circumstances and highly unpleasant in another, this depending upon particular beliefs or emotions which he has (or, in typical psycho-analytical cases, the fantasies or 'projections' in terms of which he interprets his situation). One psychologist cites the example of a patient who was prone to complain of unpleasant internal sensations but who, "when the pressure of her hatred was temporarily alleviated, ... recognised that the actual sensations were the same, but instead of causing her suffering, they were the source of exquisite delight".<sup>20</sup> Or, to take a different sort of instance, one might contrast what a man would say about the sensation of being surrounded by hot water when taking a bath with what he would be likely to say about it if he were under the impression that it represented the initial stage of some process of torture. There often exists, no doubt, a justified inclination to claim that it is not the sensation itself which is liked (or disliked) but other things of which it is, *e.g.*, an 'indication' or which it 'implies'. But though this may sometimes be so, it is not clear that all cases can be adequately dealt with along such lines; it seems evident, too, that the simple contrast between what is liked in (or for) itself and what is liked (enjoyed?) 'for its implications' is a somewhat blunt conceptual instrument which needs to be handled with care. Thus the satisfaction obtained from some masochistic practices may be partly explained in terms of their hidden 'implications', where this is to represent them as the disguised fulfilment of an unconscious wish—*e.g.*, of a wish to be loved by a parent<sup>21</sup>—and where it is not (or not necessarily) claimed that what is undergone is endured for the sake of something else, to the attainment of which it serves as a means or condition.

In what has been said I have not been able to do more than scratch the surface of a topic that has received less attention from philosophers than it seems to merit; I have, though, wished to suggest that to decide whether, and if so in what way, the psycho-analytical data bear upon the point in dispute may be a more complex matter than is sometimes thought, and that the chief

<sup>20</sup> K. Stephen, *The Wish to Fall Ill*, p. 99.

<sup>21</sup> Cf. Reik, *op. cit.*, pp. 15 ff.

difficulties centre round the question of how the reports of patients are to be understood. Are such reports simply loosely or elliptically worded, so that a fuller statement of what was actually meant would reveal that the patient did not really *intend* to assert that he enjoyed the pain? The writers I have read do not appear to endorse this, at any rate as a general answer covering all cases. Is there then a genuine confusion in the patient's mind, leading him to attribute his pleasure to sensations, or 'aspects' of sensations, other than those he in fact enjoys? Or if, on the other hand, there really is a sense in which he can properly be said to take pleasure in his pains, what does this involve? Is it merely a matter of transference by association, in the manner sometimes suggested? Or is it rather that (in some cases at least) his pains are experienced as endowed with a particular emotional significance, this significance being relative to factors that may only become apparent to the patient himself during the course of his analysis?

It may still be objected that some of these questions cannot be intelligibly raised, since they rest upon a presupposition that cannot logically be entertained. And this seems to be tantamount to arguing that, *whatever* the empirical findings (including the masochist's reports) might be, it would never be legitimate to say that the masochist enjoyed *pain*; one would have to describe his pleasure in some other way. But what would be the basis of such a contention? That this is not how the word 'pain' is used? But suppose this is just how the masochist does use it, justifying his use on the ground that it correctly describes the sensation that he has. It may be replied that our acceptance of a claim of this kind depends in an essential way upon the satisfaction of certain behavioural criteria, which in the present instance are not fulfilled. Certainly the masochist's behaviour is eccentric; it is not, however, abnormal over the whole range of his responses. In the vast majority of circumstances he may react to painful stimuli in the standard ways, and show no deviations from the normal in what he says about them. And even in those special situations where his behaviour is admittedly divergent, it may be the case that he still manifests *some* reactions of the expected

type (for instance, he may wince). If the latter happens, it could be maintained that, while we can now understandably say that he feels pain, we are also committed to saying that he dislikes it; and that this would be true even if the reaction in question were inhibited, provided only that there was a felt disposition to manifest it which the man confessed to. But this again seems too short a way with the problem, if only because of the presence of other features of the man's behaviour which are not consonant with the description of him as disliking what happens to him: as has been pointed out, there is a variety of criteria here which may (and, it seems, sometimes do) conflict. In any event, I am not denying that there may be cases about which we are hard put what to say and where alternative descriptions might, for different reasons, be equally acceptable (or unacceptable). I am only contesting the suggestion that, if a masochist reports that he sometimes enjoys pain, then—irrespective of anything else that may be said about it—his description of his condition can be rejected there and then on purely *a priori* grounds. This seems to me to come dangerously close to what Hare has called “trying to prove synthetic conclusions by logical considerations alone.”