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IS FEELING PAIN THE PERCEPTION OF SOMETHING?\*

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According to the increasingly popular perceptual/representational accounts of pain (and other bodily sensations such as itches, tickles, orgasms, etc.), feeling pain in a body region is perceiving a non-mental property or some objective condition of that region, typically equated with some sort of (actual or potential) tissue damage. I argue that given a natural understanding of what sensory perception requires and how it is integrated with conceptual systems, these accounts are mistaken. I will also examine the relationship between perceptual views and two (weak and strong) forms of representationalism about experience. Strong representationalism is a thesis about the metaphysics of the phenomenal content of perceptual experiences that says that the representational content (externalistically construed) and the phenomenal content of experiences are one and the same so they cannot come apart. I will show how the case of pains (and other similar bodily sensations) poses a serious challenge for strong representationalism. I will argue that strong representationalism fails to meet the challenge.

In what follows I will take a detailed look at pain experiences as they play the role of an interface between what these experiences seem to represent (e.g., tissue damage) and our conceptual recognitional capacities (rather like the way visual experiences can be thought of as interfaces between the visible world and how we conceptually react to this world through visual experiences). I will present an account of the particular kind of interplay between these three elements in pain (namely, the tissue damage, sensory experience, and the kind of proprietary concepts this experience gives rise to) and contrast it to the interplay one naturally finds in other sensory modalities such as vision. This contrast constitutes the basis for my argument against perceptualist and strong representationalist views of pain. In the concluding section, I will spell out some of the consequences of my account for theories of introspection, phenomenal concepts, and experiential consciousness.

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## I. ASYMMETRY BETWEEN PERCEPTUAL REPORTS AND PAIN REPORTS

There is a marked asymmetry between the way we report perceptual activity and the way we report pain. I want to start by focusing on this contrast because getting clear about the truth-conditions of such reports is useful to understanding the basic contours of our concepts expressed by these reports. One of the premises I will need for my main argument against perceptualism and representationalism about pain is a (largely) empirical claim about what sort of concepts we actually deploy in attributing pains to body parts. Critically reflecting on the way we attribute pains to body parts and contrasting it with the way we report perception is indispensable in building up the evidence for that claim. This exercise will also help motivate and partially support a claim I will make about what genuine perception requires.

So consider the following two sentences:

- (1) I see a dark discoloration on the back of my hand.
- (2) I feel a jabbing pain in the back of my hand.

They seem to have the same surface grammar, and thus *prima facie* invite the same kind of semantic treatment. Let us start with (1).

Even though a reading of ‘see’ in (1) where the verb is not treated as a success verb is not out of the question, it is not the ordinary natural reading (see below). If I am hallucinating a dark discoloration on the back of my hand, then (1) is simply false. For (1) to be true, therefore, I have to stand in the seeing relation to a dark discoloration in the back of my hand — a discoloration that can be seen by others possibly in the same way in which I see it. Furthermore, although the truth of (1) does not require the possession of any concept by me expressed by the words making up the sentence, my uttering of (1) to *make a report* typically does — if we take such utterances as expressions of one’s thoughts.<sup>1</sup> So my seeing would typically induce me to identify something in the back of my hand *as* a dark discoloration. This is a typical case of categorization of something under a perceptual concept induced by perception. So for instance, upon seeing the discoloration, I may report it by uttering:

- (1b) there is a dark discoloration on the back of my hand,

without saying anything in particular about my seeing it. Of course, when I correctly utter (1), my utterance does more than attribute a physical property to a bodily region, it also reports that I am *seeing it*. So there is a second way (1) could be false: there might be a discoloration on my hand even though I am not seeing it — if I am not standing in the seeing relation to it. Despite this, (1) is not an introspective report. It is a perceptual report. This is evidenced, to repeat, by the fact that (1) is just false if there is no

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<sup>1</sup> Hence my *utterance* of (1) is roughly equivalent in its import to my utterance of (1a):

(1a) I see *that* there is a dark discoloration in the back of my hand,  
even though they have different truth conditions.

discoloration on my hand. Introspective reports are not falsified this way. I will take these considerations as expressing the basic characteristics of genuine perceptual reports such as (1) and will elaborate more on these later in Section V.

What can we say about (2)? Like (1), (2) invites us to follow its surface grammar and treat it as expressing a perceptual relation between me and something else which has a bodily location, *viz.*, a jabbing pain in the back of my hand. So what is this jabbing pain I seem to be locating in the back of my hand? A certain quality, to be sure, that I am aware of as being instantiated in the back of my hand. One thing, though, is clear: the truth-conditions of (2) put no constraints whatsoever on how things *physically* are with my hand.<sup>2</sup> Anyone who has a sufficient mastery with the ordinary concept of pain should have no difficulty whatsoever in understanding how (2) could still be true even though there is nothing physically wrong with my hand.<sup>3</sup>

If you have any doubt about this, consider the following. Suppose that we do in fact attribute a *physical* condition, call it *TD* (say, some kind of tissue damage), when we attribute pain to body parts, and that *TD* is the perceptual object of such experiences. So, for instance, John's current excruciating experience (call it *E*) represents a physical condition in his leg (e.g., a tear in his tendon), and our ordinary concept of pain applies in the first instance to the condition in his leg. From this it would follow that

- (a) John would *not* have any pain if he had *E*, but no *TD* in his leg (as in the case of, for instance, centrally generated chronic pains like some forms of sciatica — or, indeed, even as in the case of phantom limb pains),

and, conversely,

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<sup>2</sup> This claim is contested by Chris Hill in "Ow! The Paradox of Pain," in Murat Aydede, ed., *Pain: New Essays on Its Nature and the Methodology of Its Study* (Massachusetts: MIT Press, 2006). Hill distinguishes the cognitive role of our ordinary concept of pain from its reference so that they can and sometimes do come apart as a matter of fact. On his view the cognitive role of a concept should be explicated in terms of the possession conditions of that concept, which detail the thinker's dispositions or lack of dispositions to token that concept under certain conditions. Hill presents four conditions for the concept of pain (PAIN — I will use capitalized words to refer to concepts, see note 12). The upshot of these four conditions seems to be that the tokenings of PAIN track pain experiences, and the presence or absence of pain experiences actively controls the tokenings and non-tokenings of PAIN. But, oddly, Hill goes on to claim that the extension of our ordinary concept of pain is nevertheless tissue damage and not the pain experience. Moreover, on his view, it becomes a puzzle how PAIN could have acquired its extension when its cognitive role as a matter of fact tracks pain experiences. Although I am not persuaded, Hill's argumentation is complex and subtle, and I do not think I can do justice to it here; so I urge the reader to have a close look at this particularly rich and provocative article, where Hill develops and defends a perceptual view of pain that is more radical than most of its kin.

<sup>3</sup> Does the truth of (2) require that I have a right hand? Some tend to say "yes," some "no." According to the anecdotal evidence I have tried to gather over the last couple of years, people do not seem to have clear intuitions about this, and only very few insist one way or the other. In what follows, I will assume that bodily parts to which we attribute pain need to exist and be appropriately connected to the body. This is for polemical purposes only, because if (2) can be true even in the absence of a hand (as in phantom limb pains), clearly its truth-conditions have nothing to do with the apparent "object of perception" (the hand or its physical state).

- (b) John would have pain if he had *TD* but no *E*  
(as would be the case, for instance, if he had taken absolutely effective painkillers, or if a local anesthetic agent had been applied to the area around his tendon).

Obviously, these statements clash with our ordinary or dominant concept of pain.<sup>4</sup> Indeed, consider the possibility that every time you have felt pain, you were mistaken about its causes and that the pain was caused (!) by some internal glitch in your nervous system and there was no assault on the physical integrity of your bodily tissue where you felt the pain. Obviously none of your pain reports about those bodily regions would have been false! If they were made sincerely and your cognitive system were functioning properly, then each of these pain reports would still be true. Of course, we do expect to find some physical disturbance in those regions where we feel pain, but we do not identify this disturbance with pain itself (even though we locate pain in those regions): if we find some physical disturbance as expected in those regions, we normally take it to be the *cause* of our pain, not the pain itself.

So if the truth of (2) is taken to imply attributing a quality to the back of my hand or describing the condition of my hand, this quality or condition is *not* a *physical* quality or condition. But what else could it be? For many physicalists like me, this is one of the main reasons for not taking (2) as primarily making a property attribution to a bodily region. So when I utter (2) to make a report and appear to identify something in the back of my hand as a jabbing pain, whatever else I am doing, *I am not* attributing a property or a condition to the back of my hand and saying that I am feeling *it*.<sup>5</sup> If this is not what I am doing, then obviously the superficial similarity between (1) and (2) is just that — superficial. The underlying logical and semantic structure of these two sentences must be fundamentally different. So what is the proper analysis of sentences such as (2) then? We will take up this question in the next section. But even without having an answer to this question, on the basis of considerations harnessed so far, it is plausible to argue in the following way.

Every genuine case of sensory perception allows reporting an instance of perception in the relevant modality by sentences similar to (1), where the perceptual verb is used dominantly as a success verb. This is for good reason: perception is essentially an activity whereby one gathers information about one's (extramental) environment in real

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<sup>4</sup> Note that this is meant to be a factual claim, not a bit of terminological legislation. All I take myself to be doing here is pointing out some facts about our ordinary concept of pain (more on this below). But see Moreland Perkins, *Sensing the World* (Indianapolis: Hackett, 1993), pp. 54–55. Perkins argues that the actual linguistic practices are a lot more subtle and that they are closer to the way we report other perceptual relations — I have found the latter claim not convincing.

<sup>5</sup> 'it' refers to a token, instantiation of a quality or condition, not to a type — henceforth that is the sense I will have in mind. There are different ways of reporting pain in body regions. Many involve subtleties for conveying contextual information. But insofar they are genuine reports of pain in body parts in accordance with our ordinary concept of pain, they all follow more or less the same semantic pattern in terms of not involving attribution of physical properties or conditions. But, again, see Perkins, *Sensing the World*.

time (including one's internal bodily environment of course). So it is not surprising that the dominant form of reporting it is in the form of expressing a relation between the perceiver and the perceived where the latter are extramental objects or physical conditions of one's environment. It is also not surprising that perception typically yields conceptual categorization of the perceived object or condition: the typical result of a perceptual process is bringing the perceived object under a perceptual concept, which underlies type-identification and recognition. Genuine perception thus puts the premium on the perceived object, not on the perceptual activity itself or on the perceptual experience whereby one is typically brought into epistemic contact with one's extramental environment. Hence the typical result of perception is the acquisition of perceptual beliefs with contents expressible by sentences like (1b). If sentences reporting pain in body parts do not follow the pattern of sentences such as (1) — i.e., if they are not to be construed as reports of perceptual relations between the perceiver and the perceived — then pain *reports* are *prima facie* not perceptual reports, reports to the effect that one stands in a perceptual relation to something extramental. But pain reports report feeling pain. Thus feeling pain is not a form of genuine perception. Call this the *Initial Argument* against perceptual views of pain. As we go along, we will have successively more refined formulations of it.

Before moving on, however, let me say a bit more on the relationship between reportability and what perception requires. Reporting by using sentences of a certain form is a linguistic activity. Evidently, the capability of engaging genuine perceptual activity is both phylogenetically and ontogenetically prior to linguistic reportability. So you can have genuine perception without anyone ever uttering or having uttered a word. In this sense, therefore, perception does not require reportability in any way. Rather, the point, as mentioned before, is that the way we report perceptual activity reflects what we take to be necessary for genuine perception. The truth makers of perceptual reports require a certain kind of interaction pattern between the cognitive and sensory mechanisms of the organism and its physical (extramental) environment. Consequently, getting clear about the truth-conditions of perceptual reports is indispensable if we want to understand at least some of the conditions for a process to count as perception. Similarly, getting clear about under what conditions we attribute pain to body parts is indispensable for understanding the contours of the concept(s) of pain we actually have.

Nevertheless, as we will see later on, there are broadly empirical considerations about what conditions need to be in place for genuine perception that are relatively independent of issues about linguistic reportability. Also, once we have a deeper empirical understanding of the nature of perception we may always go back and revise, if necessary, our initial understanding that we have started the inquiry with. The contention and the working hypothesis of this paper is that the folk and scientific conceptions of what genuine perception involves coincide remarkably well, at least so far — indeed they rather support each other. (As we will see in Section IV, the same is true for pain: the folk and scientific conceptions of pain robustly support each other.) Nevertheless, in Section V below, we will be able to formulate a necessary condition for perception that is free of considerations about linguistic reportability.

## II. ATTRIBUTION OF PAIN TO BODILY LOCATIONS

Let us turn to the puzzle raised by pain reporting sentences like (2):

(2) I feel a jabbing pain in the back of my hand.

What, then, do such sentences report, if not the obtaining of a perceptual relation between the perceiver and a perceived object or condition? The answer is somewhat anti-climactic: why, of course, they report pain experiences! That is, they report mental states or events with a certain phenomenal character. This may be anti-climactic in the sense that it seems to be a truism given our ordinary notion of pain,<sup>6</sup> but it does not remove the puzzle. Experiences are in the head (if they are anywhere), and for most physicalists they are in the head by being realized in the brain. If sentences like (2) are reports of the occurrence of certain kinds of experiences, we still need to understand what is going on when we seem to locate pains in body parts. Obviously, if having a pain is having an experience, locating a jabbing pain in the back of my hand is at best confused. How do we reconcile this with the fact that I say something true when I utter (2) (even when, let us assume, there is nothing physically wrong with my hand — say, because I am suffering from a centrally caused chronic condition, which is not uncommon)?<sup>7</sup> In other words, how do we reconcile the common sense understanding of pain as a subjective experience with the comfort and ease with which the very same common sense routinely attributes pains to body parts?

There is no easy and comfortable answer to this question. An increasingly popular answer, however, is promoted by the defenders of perceptual/representational accounts of pain.<sup>8</sup> In this section, I want to focus on this account, not only because I am sympathetic to it, but also because I want to show that it is in serious tension with the main thrust of any

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<sup>6</sup> At least one of the two main threads in the folk conception of pain: pain as experience versus pain as a locatable object of experience — but see below.

<sup>7</sup> Indeed, chronic pain syndromes are not restricted to rare cases like phantom limb pains and referred pains (although the latter are more common than the former). There are more than 1500 pain clinics in the US alone mostly devoted to treating chronic pains, the majority of which are centrally caused pains felt in bodily locations that are not in any pathological conditions. 40% of all Americans suffer from chronic pain at least once and usually late in their lives. Indeed as I write this, I am all too painfully aware of the sciatic pain that I have been suffering for the last six years. I know full well that my right leg is just fine as I have been told so by many medical experts — the cause of the pain (the physical disorder) is in my lower spine. But still: it is true that I feel a burning pain in my leg, *not* in my lower spine.

<sup>8</sup> See, for instance, David M. Armstrong, *Bodily Sensations* (London: Routledge and Kegan Paul, 1962), and *A Materialist Theory of the Mind* (New York: Humanities Press, 1968); G. Pitcher, “Pain Perception,” *Philosophical Review*, LXXIX (1970): 368–393, and *A Theory of Perception* (Princeton: Princeton University Press, 1971); Fred Dretske, “The Mind’s Awareness of Itself,” *Philosophical Studies*, XCV (1999): 103–124; Michael Tye, “A Representational Theory of Pains and their Phenomenal Character” in N. Block, O. Flanagan and G. Güzeldere, eds., *The Nature of Consciousness: Philosophical Debates* (Massachusetts: MIT Press, 1997, pp. 329–39), “Another Look at Representationalism about Pain” in M. Aydede, ed., *Pain: New Essays on Its Nature and the Methodology of Its Study* (Massachusetts: MIT Press, 2006, pp. 99–120), and “In Defense of Representationalism: Reply to Commentaries” in M. Aydede, ed., *Pain: New Essays on Its Nature and the Methodology of Its Study* (Massachusetts: MIT Press, 2006, pp. 163–75).

perceptualist and representationalist account of pain — contrary to the belief of its defenders.

According to this view, sentences like (2) report the occurrence of experiences that *represent* a certain condition (or constellation of conditions) in one's body parts, and having this experience constitutes our perception of this condition. What they represent exactly — what it is that they are perceptions of — is a matter of some controversy. But the most common answer is that pain experiences represent tissue damage or an objective physical condition conducive to tissue damage if sustained (which I will usually abbreviate as tissue damage, or just *TD*) — so their location is the location of the actual or potential tissue damage.<sup>9</sup> Thus pain experiences have accuracy conditions.

One can defend a perceptual view of pain without holding that pain experiences are *fully* or *purely* representational.<sup>10</sup> One can hold the view that pain experiences are representational without holding that they are genuinely perceptual. Nevertheless, for obvious reasons, representationalists have been uniformly perceptualists, and perceptualists hold that pain experiences are either partly or fully representational.

At this juncture, we need to distinguish two types of representationalism about experiences: weak and strong. *Strong representationalists* (e.g., G. Harman, F. Dretske, M. Tye, A. Byrne and D. Hilbert), who are direct realists, maintain that an experience's phenomenal content is identical to (or, is completely exhausted by) its representational content where the latter is typically understood in externalistic terms. So on this view, the phenomenal and representational contents cannot come apart in any possible world.

*Weak representationalists* deny this identity: they typically hold that experiential phenomenology, although it may and typically does represent aspects of extramental reality, cannot be metaphysically reduced to representational content. On this view, the relationship between representational and phenomenal contents is contingent, so they can come apart. Sense-datum theories and various views of qualia as intrinsic and introspectable qualities of experiences are paradigmatic examples of weak representationalism.

Perceptualists must subscribe to some form of representationalism. For weak representationalists, perceptualism about pain is not mandatory (in fact, historically, weak representationalists, especially sense-datum theorists, have tended to shy away from a perceptual view of pain and other similar bodily sensations). Although all strong representationalists have without exception been perceptualists, we will later see that the conceptual relations between these two are complicated.<sup>11</sup> But for the moment, I will treat

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<sup>9</sup> For our purposes, it does not matter what pain experiences represent insofar as they represent some physical condition of the bodily part where pain is attributed.

<sup>10</sup> Moreland Perkins, an indirect realist, is a good example of this. See his *Sensing the World*, and "An Indirectly Realistic, Representational Account of Pain(ed) Perception," in Murat Aydede, ed., *Pain: New Essays on Its Nature and the Methodology of Its Study* (Massachusetts: MIT Press, 2006, pp. 1–58).

<sup>11</sup> For more on these views and how they relate to each other, see my "Pain" entry in *The Stanford Encyclopedia of Philosophy* (Summer 2009 Edition), Edward N. Zalta (ed.), URL = <<http://plato.stanford.edu/archives/sum2009/entries/pain/>>, as well as my "A Critical and Quasi-Historical Essay on Theories of Pain," in Murat Aydede, ed., *Pain: New Essays on Its Nature and the Methodology of Its Study* (Massachusetts: MIT Press, 2006). The early perceptual theorists like Pitcher and Armstrong were direct realists about perception even in the case of bodily sensations including pain, but their

perceptualism and representationalism about pain as if they were equivalent. (I will criticize strong representationalism in Section VI below, after I present my main argument against perceptualism about pain in Section V.)

For many representationalists, pain experiences represent tissue damage nonconceptually in a way analogous to how our visual experiences represent, say, surface colors. If colors are objective physical conditions of surfaces of a certain sort (e.g., surface spectral reflectances — *ssr*, for short), the way our visual system represents them, they say, is such that we cannot necessarily conceptualize them as such. Accordingly our visually acquired concepts such as RED, GREEN, etc., reflect this fact: these concepts function differently than their scientific counterparts do (say, the concepts,  $SSR_{RED}$ ,  $SSR_{GREEN}$ , etc.).<sup>12</sup> So it is no objection to this view that we do not conceptualize what pain experiences represent as tissue damage. Consequently, it might be claimed, there is confusion involved in the common sense understanding of the truth conditions of sentences like (2): we *seem* to use the same term (and perhaps the same concept pre-reflectively) for the damaged condition of bodily tissues as we do in reporting experiences of those conditions, namely ‘pain’. It is therefore important to distinguish the former use of ‘pain’ with a subscript, ‘pain<sub>td</sub>’, reflecting that it denotes the actual or potential tissue damage as presented in experience, i.e., some physical condition of the tissue which is typically the cause of the pain *experience*, which we will denote by ‘pain<sub>e</sub>’ — similarly for the corresponding concepts,  $PAIN_{td}$  and  $PAIN_e$ .<sup>13</sup> (Later I will spell out the reasons for why making this distinction is not optional for the perceptualist/representationalist about pains and other similar bodily sensations).

So what sentences like (2) in fact attribute in the first instance is not pain<sub>td</sub> but rather pain<sub>e</sub>. What I do when I correctly utter (2), on this perceptualist/representationalist view, is to self-attribute an experience which then attributes a physical condition to a location in my hand. Intuitively, by uttering (2) I am saying something like “I am undergoing an experience which represents that some sort of physical disturbance is occurring in the back of my hand.”<sup>14</sup> If so, that there is no physical disturbance occurring

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representationalism is hard to classify mostly because they did not advocate their representationalism as a claim about the metaphysical nature of experiential phenomenology or qualia, as strong representationalists do. Rather, they treated perception as a form of belief acquisition.

<sup>12</sup> In what follows, it is useful to denote concepts by capitalized words that name them. So, for instance, ‘RED’ denotes the concept of red which in turn expresses the property of being red. In other words, RED expresses the property of being red, or redness in short. Even though here I assume for convenience a representationalist framework for concepts according to which concepts are mental representations realized in the brain — which is the psychologist’s preferred reading — nothing of any importance hangs on this: the reader may substitute his or her own preferred interpretation of how concepts are to be understood. For instance, concepts may be merely certain sorts of mental or behavioral capacities that are functionally or dispositionally characterized.

<sup>13</sup> Michael Tye explicitly draws such a distinction in his “In Defense of Representationalism: Reply to Commentaries,” *op. cit.* See also note 15 below.

<sup>14</sup> See David M. Armstrong, *A Materialist Theory of the Mind* (p. 314). Armstrong proposes his analysis as a *meaning* analysis of pain attributing sentences like (2). This is surely implausible as it requires that the speaker have the concepts involved in the analyzans. Rather, we should take the proposal as giving merely the truth-conditions.



in my hand (that is, nothing physically wrong with my hand) does not make (2) false. The fact that I can still correctly point to where it really hurts in my hand after hearing from my doctor that nothing is wrong with my hand is explained by reinterpreting what I say and do with that gesture: I am still undergoing an experience which represents my hand as having something physically wrong with it.

So according to this perceptualist/representationalist account, when we make claims about *where* it hurts (attribute pain to bodily locations), we in fact *rescind* from committing ourselves to there being anything physically wrong in those locations — even though we normally *expect* to find some physical disorder in them. In other words, when our attention is drawn to those locations and to the felt qualities in those locations, we do not *logically* commit ourselves to *find* anything in them. What is primary, then, is the experience itself, i.e., that we are undergoing a pain experience in the first instance. Note that, on the proposed analysis of (2), to say that my pain *experience* ( $\text{pain}_e$ ) attributes a physical condition ( $\text{pain}_{\text{td}}$ ) to a bodily location is not to say that *I* do so attribute it. On the contrary, the fact that I leave open whether the attribution is correct shows that I do not. I simply report an experience that tells me something; whether or not I come to believe what it tells me is a matter of factors not to be read into the analysis of what the truth-conditions of (2) are.

I am sympathetic to this kind of representationalist account of *pain reports*. Ironically, however, this treatment of pain reports is in tension with the general thrust of any perceptual/representational account of *pain experiences*, because what it reveals is that in pain, contrary to first appearances, our immediate and spontaneous interest (epistemic or practical) is in the experiences themselves in the first place, rather than in what objects or conditions these experiences represent. As we have noted above, it is the other way around in standard perception — genuine perception where the concepts we are induced to apply apply in the first instance to the objects and conditions that the inducing perceptual experiences represent. We see a ripe banana and identify it as such, as a yellow banana. We see a discoloration and identify it as such. In pain what we identify in the first instance as pain, on this account, is the experience itself — even though our ordinary reports confusingly point to what these experiences represents (assuming the above representationalist account).

Another way to see the tension is to compare normal cases to what happens in hallucinations. When we feel pain in a bodily location  $L$ , we quite naturally expect to find something physically wrong there, i.e.,  $TD$  or  $\text{pain}_{\text{td}}$  in  $L$  — whatever exactly this may turn out to be. If our feeling pain in  $L$  were a genuine case of perception — if it were simply a matter of perceiving  $TD$  in  $L$  — our experiences would put us in cognitive contact with  $TD$  instantiated in  $L$ . Of course, illusions and hallucinations are always a possibility. But, in cases where we do not find  $TD$  in  $L$ , we do not in fact rescind from reporting pain in  $L$ . In such cases, we still *correctly* report pain in  $L$ . Compare now visual hallucinations. I report a pink butterfly flying ahead of me at three o'clock. My report is based on a visual hallucination. My report is false. Not only that, my report that I *see* a pink butterfly flying ahead at a three o'clock is also false. Upon realizing this, and only then, do I revert to “introspective” mode and report correctly that I visually seem or seemed to see a butterfly. This kind of report is not falsified in virtue of the fact that the reported representational

content of the visual experience does not obtain. But nothing of this kind happens in reporting pain! If we find that there is no *TD* in *L*, we do not make any correction, we still keep reporting the situation, correctly, in exactly the same way as we did the first time. This reveals that a pain report is a sort of introspective report from the very beginning about the occurrence of an experience of a certain kind, hence not a genuine perceptual (exteroceptual) report *in the first place*. Indeed, how could feeling pain be genuine perception if our applications of the concept of pain ( $\text{PAIN}_{\text{td}}$ ) are actually indifferent to the informational etiology of what prompts such applications? It may be that when there is no *TD* in *L*, our pain experience misrepresents. But our cognitive reaction to such experiences (as revealed by our linguistic practices) does not record this fact: a misrepresenting pain is still a *genuine* pain. So how could feeling pain be a genuine case of perceiving?

### III. OPAQUE VERSUS TRANSPARENT READINGS OF PAIN ATTRIBUTING SENTENCES

In this section, I want to consider an objection to the foregoing argument. Responding to it will further clarify and strengthen the Initial Argument against perceptualist/representationalist views of pain.<sup>15</sup>

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<sup>15</sup> I believe that the fundamental assumptions motivating the following objection in the main text have significant similarities with Tye's views in his "In Defense of Representationalism: Reply to Commentaries," *op. cit.* However, independently of whether Tye might endorse it, the objection in the main text is interesting enough to stand on its own and to be discussed as such. Nevertheless, let me say a few words on Tye's actual response to similar complaints voiced in the commentaries by Ned Block, Barry Maund, and myself in Murat Aydede, ed., *op. cit.* Tye writes:

I have written above as if  $\text{pain}_O$  [= $\text{pain}_{\text{td}}$ ] is identical with tissue damage. But, as I note in my original paper, this unqualified identity claim is false, on my view.  $\text{Pain}_O$  is tissue damage *only insofar as* it is represented by  $\text{pain}_E$ . This claim puzzles Aydede, Block, and Maund, and I should have said more to explain what I was getting at.

As Block notes, in a world without experiencers, there can be no pain but there certainly can be tissue damage. I agree with Block that this shows that we should not say that  $\text{pain}_O$  is tissue damage simpliciter. Instead, we can accommodate Block's point by holding that we apply the term 'pain' to tissue damage only in a certain context — the context provided by tissue damage being represented by a token of  $\text{pain}_E$ . In my view,  $\text{pain}_O$  is really  $\text{pain}_O$  for person *P* at time *T*; and  $\text{pain}_O$  for *P* at *T* is tissue damage represented by a token  $\text{pain}_E$  of *P* at *T*. So, in a world without experiencers there is no tissue damage represented by a token  $\text{pain}_E$  and correspondingly no pain.  $\text{Pain}_O$ , thus, is not purely objective. It has the status of an "intentional inexistent." (*Op. cit.*, p. 166)

And a little further, in addressing the question of a referred pain in the arm due to some heart problem, Tye says:

An experience of arm pain, I claim, is an experience with representational content. What is the content? My answer is that it is content that is existential in character as follows: it represents that *there is* tissue damage in an arm. This content does not involve a token of tissue damage. It is not object-involving in this way. So, in the case of referred pain, it is not that the experience represents a tissue damage token (a token of  $\text{pain}_O$ ) that is really in the heart *as* being in an arm. The experience does not represent a tissue damage token at all. It is inaccurate since it carries the (mis)information that there is some tissue damage in the arm, and there is no tissue damage there. (*Op. cit.*, p. 170)

The objection goes as follows. Suppose (2) is true. Then I am perceptually aware of a quality instantiated in my hand. This quality is tissue damage ( $\text{pain}_{\text{id}}$ ), so the concept I deploy is  $\text{PAIN}_{\text{id}}$ , just as the quality I see and identify as red is an objective quality of the surface of the tomato (say,  $\text{ssr}_{\text{red}}$ ).<sup>16</sup> But the reason why (2) is *not* false if it turns out that there is no  $\text{pain}_{\text{id}}$  that I feel — i.e., no tissue damage that I am perceptually aware of — is that (2) and other similar pain reporting sentences are routinely meant to be read *opaquely*. Just as an opaque reading of (1) — where ‘see’ is not read as a success verb — would *not* imply that

(1c) there is a dark discoloration in the back of my hand that I am seeing,

an opaque reading of (2) would not imply that

(2a) there is a TD ( $=\text{pain}_{\text{id}}$ ) in the back of my hand that I feel.

In other words, existential exportation fails in such pain reporting contexts as (2). So there are two concepts implicitly at play in a typical pain report such as (2): first, there is the

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Tye’s original remark was: “The term ‘pain’, in one usage, applies to the experience; in another, it applies to the quality represented *insofar as (and only insofar as) it is within the content of a pain experience*. Which quality (or type) is represented? Pain experiences normally track tissue damage. So, tissue damage is the obvious naturalistic candidate for the relevant quality” (*op. cit.*, p. 101). In my “The Main Difficulty with Pain,” in Murat Aydede, ed., *op. cit.*, pp. 133–134, fn. 3, I had noted that this is just wrong since it seems to imply that by uttering sentences like (2) we sometimes *ordinarily mean* something that implies that there is a tissue damage in the back of one’s hand such that one is feeling it (by somatosensorially experiencing it). I doubt there is such an *ordinary* sense of ‘pain’. In the first of the two quotations above, one natural way to interpret Tye’s remarks is as follows:

For any  $X$ , bodily location  $L$ , and adult subject  $S$ :  $S$ ’s  $\text{PAIN}_{\text{id}}$  applies to  $X$  in  $L$  if, and only if,  $X$  is tissue damage in  $L$  occurring in  $S$  and  $X$  is actually being represented as such by  $S$ ’s token  $\text{pain}_{\text{e}}$ .

But given what he says in the second quotation, this cannot be right. For the case of referred pain in the arm seems to be a counterexample (reading from left to right):  $S$  applies  $\text{PAIN}_{\text{id}}$  to  $X$  in  $S$ ’s arm but there is no tissue damage occurring in  $S$ ’s arm. I think it is the second paragraph that accurately represents Tye’s views, which we may attempt to capture as follows:

For any  $X$ , bodily location  $L$ , and adult subject  $S$ :  $S$ ’s  $\text{PAIN}_{\text{id}}$  “applies” to  $X$  in  $L$  in  $S$ ’s body if, and only if,  $S$  is having a token  $\text{pain}_{\text{e}}$  that (somatosensorially/non-conceptually) represents that  $X$  is tissue damage and is occurring in  $S$ ’s  $L$ .

But this is problematic as it involves quantifying into an intensional context. In the referred pain example,  $S$ ’s token  $\text{pain}_{\text{e}}$  is nonveridical (there is no tissue damage in  $S$ ’s arm), but there is no straightforward sense in which  $S$ ’s  $\text{PAIN}_{\text{id}}$  applies to something (condition) in  $S$ ’s arm in a way that preserves the truth of the judgment expressed by the perceptual report “I have a pain in my arm” as uttered by  $S$ . Hence the scare quotes. Nevertheless, what follows in the main text is a way of developing this kind of representationalist view and my criticism of it.

<sup>16</sup> In what follows, I will assume a primary quality view of secondary qualities of the sort defended by Armstrong in *A Materialist Theory of the Mind*, and by David Hilbert in *Color and Color Perception: A Study in Anthropocentric Realism* (Stanford: Center for the Study of Language and Information, 1987). Nothing very important hangs on this. They may be relational or dispositional properties. What is important, though, is that secondary qualities be objective properties characterizable in physical terms — physicalist assumptions are in place as required by most of my perceptualist and representationalist opponents.

concept PAIN<sub>td</sub> *apparently* applied to *tissue damage* as a result of feeling it, just as I can apply RED as a result of seeing red; second, there is the concept PAIN<sub>e</sub> applied to the pain experience, that is, to *feeling pain<sub>td</sub>*, just as the concept, VISUAL EXPERIENCE OF RED, could be applied to an instance of seeing red. But the first concept, PAIN<sub>td</sub>, is not in fact deployed, contrary to appearances, to make a property attribution (to actually locate TD in a body region), but rather to specify or just express what the experience of pain, pain<sub>e</sub>, represents.

To get a better grip on this proposal, think of those rare occasions where we find it natural to use sentences like (1) to report our visual experiences and their character without committing ourselves to their veridicality — in fact sometimes knowing full well that they are not veridical. Suppose for instance you are in a vision laboratory, where the experimenter asks you to describe what you see while you are looking at a stereogram properly fixated. It is quite natural that your report will take the form exhibited by (1). You will say things like,

(3) I see a red cube partially occluded by a green ball to its left,

knowing full well that there is no red cube or green ball that you see. The rarity of such situations is the primary reason why reports of this sort are typically meant to be understood as involving success verbs, i.e., as not opaque.<sup>17</sup> But, it might be claimed, this fact is not really relevant. There are cases where an opaque reading is natural and this fact does nothing to show that visual experiences are not genuinely perceptual. The only difference with pain then is that the dominant reading is reversed: pain reports are normally opaque.

We can make at least two points against this. First, it actually concedes, in a way, that pain experiences are not genuinely perceptual. For we can reformulate the crucial step in the Initial Argument in the following way: for any experiences that are intuitively of the same phenomenal kind, they are genuinely perceptual only if their report normally/dominantly uses success verbs, i.e., takes the form exhibited by the likes of (1) and (3), *read transparently*. The motivation for this necessary condition, as we have observed, is that genuine perception normally induces the direct application of a concept to the object represented by the perception in a committal way, that is, in a way which does not shield the perceptual report from being false if it turns out that the property attributed

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<sup>17</sup> In fact this norm is so dominant and strong that we are inclined to object even to reporting illusions using a form like (1) or (3), e.g.,

(4) I see a bent stick immersed in water.

We do of course understand what is meant, but that is because we have usually the correct form for expressing it:

(4a) I see a stick immersed in water as if it were bent.

In fact, it is plausible to argue that *strictly speaking* it is always incorrect to report hallucinations or illusions by using a form such as (1), (3) or (4); it may be that we tolerate these in the practical contexts in which they are uttered, because we know how to translate them into forms such as (4a). For a more nuanced view, though, see G. E. M. Anscombe, “The Intentionality of Sensation: A Grammatical Feature,” in *Metaphysics and the Philosophy of Mind: Collected Philosophical Papers, Vol. III* (Oxford: Blackwell, 1965), pp. 3–20.

by the use of this concept is not in fact instantiated. For being committal in concept application is what serves our informational needs; that is how we utilize the experience for the information that it contains about our immediate (physical and bodily) environment. But if the application of PAIN<sub>td</sub> in reporting pain is normally non-committal, that is, used normally only to report what the content of the experience is that induces it, and not to report the actual instantiation of pain<sub>td</sub>, then clearly pain experiences are not genuinely perceptual — even if they might be fully representational.<sup>18</sup>

Second, the above response suggests that even though pain reports are normally opaque, sometimes they are not. I do not think this is correct. For to say that sometimes they are not is to say that pain reports of the following general form

(5) I feel pain in *L*

can sometimes be false in virtue of the fact that there turns out to be no tissue damage in *L*. I suppose that one can, if one wishes, stipulate such uses of (5) under certain conditions. But this would not be sanctioned by our ordinary concept of pain. Sincere utterances of (5) by people who have the concept of pain have their truth conditions determined not by the presence or absence of tissue damage (pain<sub>td</sub>), but by the presence or absence of a certain kind of experience. Insisting that this experience represents tissue damage does not change the essential part of the truth-conditions of (5), namely the occurrence of an experience irrespective of whether this experience is veridical. So even when we grant that pain<sub>e</sub> is representational and what it represents is pain<sub>td</sub> in *L*, pain reports of the above type have no natural non-opaque readings, not even sometimes. This is simply how our concept of pain works.

#### IV. INTUITIONS AND THE SCIENTIFIC CONCEPTION OF PAIN

The claim about how our concept of pain actually works relies on our intuitions about the truth conditions of sentences reporting pains in bodily locations. On this issue I want to address two related questions that may have been bothering some readers.

One question is about the accuracy or generality of the intuitions that guide the analysis of the ordinary concept of pain as revealed by our linguistic practices.<sup>19</sup> Some have recently questioned whether philosophers' intuitions about what we would say in various actual or counterfactual situations reliably track intuitions in the larger population

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<sup>18</sup> So a strong representationalism for phenomenal content of the sort Dretske and Tye defend appears to be compatible with a non-perceptualist view of pain (assuming the affective pain qualia can also be given a representationalist treatment). The resulting position, needless to say, would be very odd. We will discuss the compatibility issue further below.

<sup>19</sup> When I talk about the ordinary or folk concept of pain, what I mean is confined to only those aspects of the ordinary conception of pain that are delineated by agreements on the truth-conditions of pain attributing sentences like (2). My claim in the main text is that the intuitions about these conditions are quite general and robust. Whether these intuitions succeed in articulating a coherent conception of pain synthesizing all of its folk aspects is a question I leave aside here — but see my “Pain” entry in the *Stanford Encyclopedia of Philosophy*, *op. cit.*, for more discussion of this issue.

and across different cultures.<sup>20</sup> For if it can be established that they do not, then the evidence from philosophers' intuitions cannot be used to establish truths that have universal validity. In our case, the issue boils down to whether *my* intuitions about the application conditions of 'pain' or the concept of pain are reliable for accurately characterizing what I have been calling the *ordinary* or *folk* conception of pain — at least those elements in it as revealed by reflecting on the truth-conditions of pain attributing sentences. Alas, it seems that we need empirical data to adjudicate the matter.<sup>21</sup> However, I have been informally testing my own intuitions against the intuitions of my students and colleagues for at least ten years now, paying particular attention to responses from people with different ethnic background. Although the evidence is admittedly anecdotal, I am happy to report that I have not come across any clear-cut evidence that contradicts my claim about what the truth-conditions of pain attributing sentences are according to the ordinary folk.

The other question alluded above can be posed as an objection: even if it is granted that our linguistic practices are a reliable guide to delineate the basic contours of our actual concept of pain, what is thus delineated will be a concept of *folk psychology*, and there may be good reasons for thinking that our scientific (or, for that matter, philosophical) understanding of pain may be different, or at the very least, should not be guided by it.<sup>22</sup> I am generally sympathetic to this kind of worry. But in the case of pain, scientists themselves have been sanguine about preserving the essential elements of folk psychological conception of pain. Indeed, the "definition" of 'pain' has always been a vexing issue for pain scientists — so much so that in the early 1980s the International Association for the Study of Pain (IASP) formed a subcommittee on taxonomy to impose some order on the apparently diverse usages of pain terms in the field. 'Pain' itself was not left out and became the first entry in the report. The committee consisted of fourteen internationally prominent pain researchers who had worked on the entries for more than three years. Their definition of 'pain' has been widely accepted in the field of pain research and therapy. Although the acceptance is not universal, the remaining controversy is about the details and choice of words, not about its substance. This canonical characterization of pain was first published in 1986 in IASP's official journal, *Pain*, and endorsed again in 1994.<sup>23</sup> Here it is:

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<sup>20</sup> See, for instance, Edouard Machery, Ron Mallon, Shaun Nichols and Stephen Stich, "Semantics, Cross-Cultural Style," *Cognition*, XCII (2004): B1–B12. See also Ron Mallon, Edouard Machery, Shaun Nichols and Stephen Stich, "Against Arguments from Reference," to appear in *Philosophy and Phenomenological Research*.

<sup>21</sup> Plans are underway for doing some experimental philosophy and gather the relevant data in the near future.

<sup>22</sup> Indeed, there have been calls for eliminating or revising the commonsense conception of pain. Most notably: D. C. Dennett, "Why You Cannot Make a Computer that Feels Pain," in *Brainstorms* (Massachusetts: MIT Press, 1978, pp. 190–229); N. Newton, "On Viewing Pain As a Secondary Quality," *Noûs*, XXIII (1989): 569–598; V. G. Hardcastle, *The Myth of Pain* (Massachusetts: MIT Press, 1999); C. Hill, "Ow! The Paradox of Pain," *op. cit.*

<sup>23</sup> "Pain Terms: A List with Definitions and Notes on Pain," *Pain*, III (Suppl., 1986): 216–21. The revised pain terminology list published in 1994 is now available on the IASP's web site: <[http://www.iasp-pain.org/AM/Template.cfm?Section=Pain\\_Definitions&Template=/CM/HTMLDisplay.cfm&ContentID=1728](http://www.iasp-pain.org/AM/Template.cfm?Section=Pain_Definitions&Template=/CM/HTMLDisplay.cfm&ContentID=1728)>

**Pain:** An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage.

*Note:* Pain is always subjective. Each individual learns the application of the word through experiences related to injury in early life ... Experiences which resemble pain, e.g., pricking, but are not unpleasant, should not be called pain. Unpleasant abnormal experiences (dysaesthesia) may also be pain but are not necessarily so because, subjectively, they may not have the usual sensory qualities of pain. Many people report pain in the absence of tissue damage or any likely pathological cause; usually this happens for psychological reasons. There is no way to distinguish their experience from that due to tissue damage if we take the subjective report. If they regard their experience as pain and if they report it in the same ways as pain caused by tissue damage, it should be accepted as pain. This definition avoids tying pain to the stimulus. Activity induced in the nociceptor and nociceptive pathways by a noxious stimulus is not pain, which is always a psychological state, even though we may well appreciate that pain most often has a proximate physical cause. (p. 250)

What is remarkable about this characterization is that it embodies, indeed insists on, all the features that the folk think are essential to the concept of pain, according to which pains are essentially *subjective* and *private experiences* that should *not* be equated with or tied to tissue damage (physical stimulus). As far as I can tell, there is no tendency in pain science to substantially revise or replace this characterization in the near future with one emphasizing the “objectivity” of pains. On the contrary, all the indicators I can discern point in the opposite direction emphasizing increasingly more pain’s emotional/affective aspect at the expense of its “perceptual” dimension, squarely anchoring the concept to the experience rather than to its alleged object, tissue damage. In fact, the note appended to the definition above *explicitly* warns us against conceptually tying the concept of pain to the noxious stimulus.

Still, one might think that we (including the scientists) *ought* to revise our conception of pain so that (some, most, all?) instances of schema (5) would come out true or false on the basis of standing or failing to stand in a perceptual relation to tissue damage. But in the face of overwhelming evidence that this conception of pain, as a matter of fact, is here to stay for the foreseeable future, we need independent evidence and argumentation to motivate this suggestion, which we simply lack. Besides, there is no need for this revision merely due to a lack of expressive power in our language or thought. We can already express the resulting truth-conditions of (5) after the proposed revision: simply replace ‘pain’ with ‘tissue damage’ (with a few more minor qualifications perhaps): *et voilà*, we capture the truth-conditions of a revised (5) as envisaged.

However, whether or not there may be normative reasons to revise the ordinary (and, as it now stands, scientific) conception of pain is largely irrelevant to my purposes in this paper. What I need for my argument against perceptualism/representationalism about pain is the broadly empirical claim that we have a naturally acquired concept of pain whose application conditions do not, as a matter of fact, semantically track the physical

(noxious) stimulus (“tissue damage” as the alleged object of perception). In other words, my claim is about the actual concept the folk share: if it turns out that pain scientists themselves insist on a concept of pain that follows the main folk conception, it is all the better for my purposes.

## V. THE ARGUMENT FROM FOCUS AGAINST PERCEPTUALISM

In this section I want to lay out the main argument against perceptualism about pain. I will call it the *Argument from Focus* for reasons that will become clear as we go along.

Let me start by expanding on the disambiguation of the ordinary concept of pain that the representationalist proposes: the concept of  $\text{pain}_{\text{td}}$  ( $\text{PAIN}_{\text{td}}$ ) and the concept of  $\text{pain}_{\text{e}}$  ( $\text{PAIN}_{\text{e}}$ ). Most often, the representationalist likens the concept of  $\text{pain}_{\text{td}}$  to the concept of red, in that both are supposed to pick out an objective property in a way that does not clue the possessor of these concepts to the real nature of these properties. Indeed, there are perceptual theorists who claim that the pain quality we seem to locate on body parts is to be modeled after so-called secondary qualities.<sup>24</sup> However, our discussion so far has revealed that this is not quite right. For consider, the visual concept of red, RED, that we directly acquire from experiences and directly apply to surfaces through the visual experiences of red. There are visual applications of this concept that we are prepared to countenance as mistaken — as, for instance, when we unsuspectingly apply it to a white surface that is illuminated by a red light. Similarly with respect to all concepts of secondary qualities. But as we have seen, there are no natural and sincere applications of  $\text{PAIN}_{\text{td}}$  (in the relevant range of cases) that we are prepared to countenance as mistaken in a similar way. And that is because the application of this concept seems to go always with  $\text{pain}_{\text{e}}$ , (*feeling pain*<sub>td</sub> according to the representationalist), which is to say it is non-committal: it is “applied” only to express or specify the representational content of  $\text{pain}_{\text{e}}$ . But ordinary applications of other secondary quality concepts are almost always committal. That is why their applications can be mistaken.

Another way to put this point is to say that there is always an appearance/reality distinction applicable to secondary qualities (or their instances) — just as there is for almost everything else. We look at a ripe red tomato. We see its redness, which then prompts us, under certain circumstances, to apply the concept RED not to the experience but to the tomato. Here the experience of redness is, intuitively, transparent: our application of RED goes right through the experience of red to the tomato’s surface, so to speak. Call this kind of direct concept applications, *labeling* applications or uses.<sup>25</sup> Then

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<sup>24</sup> See, among others, Stephens, G. L. and G. Graham, “Minding your P’s and Q’s: Pain and Sensible Qualities,” *Noûs*, XXI (1987): 395–405; N. Newton, “On Viewing Pain As a Secondary Quality,” *op. cit.*; M. Tye, “Another Look at Representationalism about Pain,” *op. cit.*

<sup>25</sup> Cf. Jerry Fodor, “Information and Representation,” in *Information, Language, and Cognition*, P. P. Hanson, ed., (Vancouver, Canada: UBC Press, 1990, pp. 175–90). We do not of course “use” concepts in the way we use, say, words or tools. Concepts conceived here as mental representations are rather the vehicles of thought and thinking. So to say of a concept that it has labeling uses is to say that we have the capacity to make spontaneous *de re* judgments in direct response (i.e., through an experience of the appropriate sort) to a stimulus that falls under the concept deployed in making the judgment.



the problem with PAIN<sub>td</sub> can be stated succinctly: it does not seem to have any labeling uses. Even though there is an appearance/reality distinction for tissue damage (i.e., pain<sub>td</sub>), we do not seem to ever label it by PAIN<sub>td</sub>, even though it represents pain<sub>td</sub>. The support for this claim, as we have seen, is largely empirical and comes from a careful analysis of the truth-conditions of pain attribution sentences (this is on the natural assumption that our practice of locating pains in body parts would track the use of PAIN<sub>td</sub> — as well as PAIN<sub>e</sub> — if the representationalist disambiguation is correct). So it turns out that the only use we have for PAIN<sub>td</sub> are non-labeling uses, as in specifying the representational content of pain<sub>e</sub> — despite the fact that we appear to label something in a body region *L* when we report pain in *L*.

But this seems extremely odd (to put it mildly). If the representationalist is correct in distinguishing two concepts of pain somehow implicitly embedded in the ordinary concept of pain as revealed in the practice of attributing pains to body parts, then, surely, one would naturally expect to find that PAIN<sub>td</sub> would have labeling uses. In fact, one would expect to find that such uses would be the dominant ones. But this is not what we find at all. This raises the question of whether we really have two distinct concepts here, PAIN<sub>e</sub> and PAIN<sub>td</sub>, as the representationalist claims. But the representationalist *is* committed to this distinction for at least three reasons.<sup>26</sup>

First, the representationalist wants to draw a distinction between an experience and its representational content so that she can say that pain reports are reports of experiences with a particular representational content. Then she needs to say what that particular content is. As a theorist, there is no problem in her saying that it is *tissue damage* that these experiences represent (deploying her concept TISSUE DAMAGE). But she also needs to distinguish the concept TISSUE DAMAGE from the concept PAIN<sub>td</sub>. For when making first person introspective judgments or reports, the concept TISSUE DAMAGE (or the term ‘tissue damage’) will not do — just as the concept of, say, a surface spectral reflectance of a certain sort (e.g., SSR<sub>RED</sub>) will not ordinarily serve, in introspective mode, to report the content of one’s experience when looking at a ripe tomato. According to the representationalist (for most representationalists these days, anyway), just as the concept RED is required to make an introspective report about one’s visual experience when one looks at a red tomato, the concept PAIN<sub>td</sub> is required to report pain experiences. So, on this proposal, even though TISSUE DAMAGE and PAIN<sub>td</sub> (likewise, SSR<sub>RED</sub> and RED) are co-extensional, they are distinct concepts — they function differently in one’s cognitive economy.

Second, as will be remembered, there is also the urgent need to explain what we do when we point to a body region *L* and say “this is exactly where I feel pain” to remove the mystery of what it is that we might be locating there if pain reports are reports of experiences (presumably located in the head). The proposal was that we have two concepts implicitly at play in such reports. PAIN<sub>td</sub> is used, contrary to appearances, not to *attribute* tissue damage to *L* (not to label tissue damage there), but rather just to *express* what is represented by pain<sub>e</sub> whose presence we are reporting.

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<sup>26</sup> Note that I have not committed myself to this distinction. Within the confines of this paper, I want to remain agnostic about it.

Third, the representationalist, qua defender of a perceptual view of pain, needs to say what it is that the pain experience is a perception of. Granted, unlike ordinary perception, pain reports are, oddly enough, reports of experiences rather than what these experiences are experiences of; still, it would be even more perplexing if the experiencer had no clue about what the object of her perception is. The representationalist needs the concept  $PAIN_{td}$  in order to explain the experiencer's conception of the object of her perception, however confused this might be.<sup>27</sup>

So the concept  $PAIN_{td}$  is needed to state what  $pain_e$  represents, i.e., tissue damage. But as we have seen, it turns out that it has no labeling uses. Whenever we sincerely report pain in body regions  $L$ , show where it hurts, and describe spatiotemporal qualities of pains we so locate, even though we in fact use a concept,  $PAIN_{td}$  and appear to apply it to  $L$  to attribute tissue damage there, we in fact do *not* logically commit ourselves to there being any tissue damage in  $L$ , according to the representationalist. If this is correct, then, the only use we have for  $PAIN_{td}$  could at most be ceremonial: to say or express *what* the content of  $pain_e$  is, without commenting on its accuracy.

Now we are ready to transform and expand the Initial Argument against perceptualism without exclusively relying on considerations about the form and evaluation conditions of linguistic reports.

Genuine perception requires that experiences give rise to labeling uses of what we might call *sensory* concepts — concepts whose acquisition requires certain sensory experiences. Concepts of standard secondary qualities are typical (maybe the only) examples of such concepts. These concepts are modality specific partly because each sensory modality or submodality that gives rise to them has its own proprietary range of worldly properties (special sensibles) that it can detect and thus represent. So, for instance, the possession of the visual sensory concept RED requires that one has had visual experiences as of red.<sup>28</sup> We might then define the transparency of sensory experiences with respect to sensory concepts as follows:

(TRANS) Sensory experiences are transparent with respect to the sensory concepts they give rise to just in case these concepts have labeling uses directly applying to those worldly sensible qualities represented by these experiences, and never to the experiences that give rise to them.

Here 'directly' highlights what is already implicit in the term 'labeling', namely that the applications (labeling uses) are causally as well as epistemically mediated by the very same experiences representing those sensible qualities. So the picture is that the same set of experiences both gives rise to sensory concepts and mediates their direct applications (labeling uses) to the instances of those qualities they represent. This is the picture of transparency as I construe it here.

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<sup>27</sup> Note that this is not in conflict with the claim that pain experiences represent tissue damage non-conceptually. The issue is rather what kind of concepts this experience gives rise to in organisms capable of using and acquiring concepts like us.

<sup>28</sup> Here 'red' is used to denote a determinable, not a determinate shade of red. Same with the property RED expresses.

Now we are in a position to state a necessary condition for genuine perception thus:

(COND) For any experiences of a given kind, they are genuinely perceptual only if they are transparent to the sensory concepts they give rise to.

This condition is strongly supported by the way we report our perceptual activity. But how it can be independently motivated should be obvious. The kind of information-flow organization it describes is what will serve the informational needs of an organism equipped with it. Perception's job is to put the perceiver in epistemic contact with the perceiver's immediate environment. This requires that the conceptual system responsive to the incoming sensory information should operate with (at least sensory) concepts that apply not to the sensory experiences but to what these experiences represent, namely, to various aspects of the extra-mental world. I am not sure I need to elaborate this point at length, since, as far as I can tell, all perceptualists and representationalists do agree with COND — or if they do not, given the main tenets of their positions, they ought to.

If COND is true and feeling pain in a bodily location  $L$  were perceiving some physical condition of  $L$ , then we would expect  $\text{PAIN}_{\text{td}}$  to have labeling uses. But this is not what we find: despite having the same kind of information flow, the immediate concept that pain experiences (putatively) give rise to,  $\text{PAIN}_{\text{td}}$ , has no labeling uses. So even though the pain experience,  $\text{pain}_e$ , may carry information about tissue damage, and even though the introspective applications of  $\text{PAIN}_e$  may carry information about the occurrences of pain experiences, the “sensory” concept  $\text{PAIN}_{\text{td}}$  that the pain experience gives rise to has, oddly enough, no labeling uses. Thus a pain experience is not transparent to its “sensory” concept,  $\text{PAIN}_{\text{td}}$ .<sup>29</sup> It is as if its “applications” get routinely stuck, so to speak, at the experience while trying to reach back to the tissue damage. We may say that its semantic “focus” is different from the focus of genuine sensory concepts. Be that as it may, we seem to have reached exactly the same conclusion as before: feeling pain is not perceiving something extramental. In the next section, I want to run the same argument against strong representationalism.

## VI. THE ARGUMENT FROM FOCUS AGAINST STRONG REPRESENTATIONALISM

Suppose that my conclusion is correct: feeling a pain in a bodily location  $L$  is not perceiving something extramental there. It is relatively clear that with some adjustments this anti-perceptualist conclusion can be absorbed by most weak representationalists without much trouble. For instance, a sense-datum theorist might simply say that the sense-data involved in pain experiences do not represent anything or do not represent tissue damage while representing spatiotemporal properties of body regions. Such a theorist would have to give up a perceptualist view of pain and other similar bodily

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<sup>29</sup> More accurately: pain experiences do not give rise to *sensory* concepts at all. Rather, I will suggest, in the concluding section, that they give rise to *phenomenal* concepts. For a detailed argument to this effect, see M. Aydede and G. Güzeldere, “Cognitive Architecture, Concepts, and Introspection: An Information-Theoretic Solution to the Problem of Phenomenal Consciousness,” *Noûs*, XXXIX (2005): 197–255.

sensations, but she may still retain her weak representationalism — thus perceptualism — with respect to experiences generated by other sensory modalities.<sup>30</sup>

But we may wonder whether our conclusion is compatible with strong representationalism. It would seem that a strong representationalist may still consistently claim that the phenomenal content of pain experiences is identical to their representational content, and that the representational content of pain<sub>e</sub> is a physical condition of body regions satisfying certain further conditions (non-conceptual, poised, abstract, etc.), that is, pain<sub>id</sub>. It may be claimed that the fact that pain<sub>e</sub> does not give rise to proper sensory concepts with labeling uses — that is, the fact that feeling pain is not perception — shows nothing about the truth of strong representationalism, which is a claim about the metaphysical nature of phenomenal content of experiences: pain<sub>e</sub> has a phenomenal content that is identical to its representational content, and we have a concept, PAIN<sub>id</sub>, to express what this content is. So what is the problem?

Apart from the oddity of combining strong representationalism about pain with a non-perceptual view of pain, there is the following problem. Let us reflect whether the following condition on strong representationalism, paralleling COND, is true:

(COND\*) For any experiences of a given kind, they are strongly representational only if they are transparent to the sensory concepts they give rise to.

If strong representationalism is true, one would naturally expect COND\* to be true. But our anti-perceptualist conclusion shows that the consequent of COND\* is false when the given kind is pain.<sup>31</sup> In response, a strong representationalist might do either one of two things. She might accept the conclusion, agree that feeling pain is not perceiving something extramental as per COND, and is not strongly representational either as per COND\*, but insist that strong representationalism holds anyway in experiences of other kinds (visual, tactile, auditory, etc.). This would not be much of a response, of course, since securing these admissions has been the aim of this paper.<sup>32</sup> But even in the unlikely event that a strong representationalist might concede that pain is neither perceptual nor strongly representational, restricting strong representationalism to modalities other than pain (and other intransitive bodily sensations) would greatly diminish the appeal of this view. Remember that strong representationalism is a view about the metaphysical nature of phenomenal content: it attempts to remove the mystery surrounding phenomenal content

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<sup>30</sup> For instance, in *Perception: A Representative Theory* (Cambridge: Cambridge University Press, 1977), Frank Jackson sees no problem in saying that feeling pain in *L* is to be directly aware of a sense-datum literally located in *L*, where the sense-datum is a mental object that may or may not signal tissue damage. Sense-datum theories are only one of many versions of weak representationalism. Most modern weak representationalists reject sense-data while holding that experiences have phenomenal qualities intrinsic to them that only contingently represent extramental properties.

<sup>31</sup> I believe that this conclusion generalizes to all similar bodily sensations such as itches, tickles, tingles, orgasms, etc. — what Armstrong calls “intransitive bodily sensations.” See D. M. Armstrong, *A Materialist Theory of the Mind and Bodily Sensations*.

<sup>32</sup> Dretske in fact seems to hint at such a possibility. See Fred Dretske, *Naturalizing the Mind* (Massachusetts: MIT Press, 1995), and “The Mind’s Awareness of Itself,” *op. cit.*

of conscious experiences or qualia by saying that their essence is representation (of a certain sort). If there are experiences whose phenomenal content cannot be wholly reduced to their representational content, then suspicion arises as to whether representation really exhausts the nature of qualitative phenomenology for *any* kind of experiences. I will return to this point at the end of this section.

A second more likely response might directly challenge COND\* by saying that although it is perfectly natural to *expect* COND\* to be true given strong representationalism, it is in fact false. The expectation is consistent with actual falsity. We seem to have many examples of this. For instance, it may be perfectly natural for me, after taking a look inside the fridge, to conclude “I see that there is no milk left.” But this conclusion may not be entailed by my evidence “I do not see that there is milk.”<sup>33</sup> Similarly, it might be said, strong representationalism does not, strictly speaking, entail that each experiential kind is transparent to the sensory concepts it gives rise to, and pain experiences in particular are not transparent to PAIN<sub>td</sub>. Still the phenomenal content of pain experiences is what they represent, that is, pain<sub>td</sub> at *L*.

But this response needs to be independently motivated and argued for in order to be credible. In particular, the strong representationalist should tell us why in the case of pain the perfectly natural expectation of transparency gets to be frustrated. After all, ordinarily not seeing any milk bottles in the fridge is good evidence for my coming to see that there is no milk left. If in this case my otherwise reliable evidence mislead me to a wrong conclusion, I had better understand why.

One might think that there is a straightforward explanation of why pain experiences are not transparent. The reason why COND\* fails, it might be said, is that pain experiences are awful to have; that is, they have a negative affect or a negative hedonic quality that turns the attention, interest, or cognitive reaction away from the object of experience (pain<sub>td</sub>) to the experience itself. In other words, this affective aspect of pain experiences is the reason why the ordinary concept of pain got primarily anchored in the experience itself rather than what this experience represents, i.e., pain<sub>td</sub>. I should note that this response is sheer speculation on my part since I know of no actual strong representationalist who has even acknowledged the problem created by COND\*, let alone offered an explanation of why COND\* does not hold in the case of pain without jeopardizing strong representationalism.

But let us continue to speculate a bit more. How is this response, which seems plausible at first, supposed to explain that PAIN<sub>td</sub> has no labeling uses? Remember, that is what transparency comes to. To say that pain experiences are not transparent to the “sensory” concepts they give rise to is to say that these concepts have no labeling uses. The appeal to negative affect might explain why PAIN<sub>e</sub> has turned out to be the dominant strand in our ordinary concept of pain, but it is not at all clear how it could explain why PAIN<sub>td</sub> has no labeling uses directly applying to pain<sub>td</sub> despite the fact that that is what it represents according to the strong representationalist. Maybe the idea is that since the

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<sup>33</sup> Cf. Armstrong, *A Materialist Theory of the Mind*, for the “headless woman fallacy” and the discussion that follows.

dominant concept  $PAIN_e$  is the concept of *feeling pain*<sub>td</sub>, we need the concept  $PAIN_{td}$  not to label anything but just to express what it is that we feel.

An analogy might help here. Suppose for some ecological or biological reason the experience of seeing red becomes an awful experience to undergo. We may then cognitively fixate or focus on the experience itself rather than the color red it represents. This might result in developing a monadic concept  $RED_e$  that can be analyzed as the experiential concept of *seeing red*<sub>ssr</sub> (where ‘red<sub>ssr</sub>’ names a property of surfaces expressed by the concept  $RED_{ssr}$ ). Things may so change that  $RED_e$  becomes the dominant concept, which would obliterate the labeling uses of the concept  $RED_{ssr}$ . It seems conceivable that in such a hypothetical situation we may start using a single word ‘red’ for both the experience of seeing red and the color red it represents so that the following sentence schema gets to be analyzed like (2) and (5) above:

(6) I see red on  $S$

where  $S$  is a surface of an object.<sup>34</sup> The truth conditions of (6) would parallel those of (5): they would not be falsified if it turns out that there is no redness on  $S$  (that is, if  $S$  is not red). Unseen reds would then be as absurd as unfelt pains are. So (6) would not be a perceptual report and seeing red would not be genuine perception as implied by COND. Still, the strong representationalist might claim, intuitively the experience of seeing red,  $red_e$ , would be strongly representational: its phenomenal content would be identical to its representational content despite the fact that it would not be transparent to its “sensory” concept  $RED_{ssr}$ . Similarly with feeling pain.

I am not sure all this makes sense. I have pushed this line of response to the challenge posed by COND\* as far as I can on behalf of the strong representationalist. Maybe there is a story to be told why COND\* is false in the case of feeling pain that is consistent with strong representationalism, but I doubt whether this response, based as it is on the effects of negative affect, is that story. Appealing to the negative affect or hedonic quality of pain experiences does not in fact seem to be available to a strong representationalist in the explanation of why COND\* is false in the way I suggested. For if this negative affect is part of pain’s phenomenal content, as it certainly appears to be, then, according to the strong representationalist, it must itself be identical to some aspect or part of pain’s representational content.<sup>35</sup> But then one might naturally expect that this affective quality must be transparent to whatever affective concept it gives rise to. If so, however, it must function, like all representations, to direct cognitive focus or attention to what is represented, not to the representor (not to the experience or aspects of experience).

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<sup>34</sup> As it stands, it is not clear whether (6) is even grammatical. Instead of trying to find grammatical examples (e.g., “I see a bit of redness on the right gill of my beta”), I think it is better to leave it as it is to make the parallelism discussed in the text clearer.

<sup>35</sup> Indeed, Tye claims that the negative affective phenomenology is also strongly representational: pain experiences represent tissue damage as bad. So the affective phenomenology reduces to the badness of tissue damage as represented by pain experiences. See Tye’s “Another Look at Representationalism about Pain,” *op. cit.*, as well as his replies to the commentators in the same volume. In his replies, Tye identifies the badness of tissue damage with some further physical condition of the damaged tissue.

In other words, appealing to a negative affective quality should produce an explanatory effect exactly opposite to the effect intended by the strong representationalist in the present context. Again, representationalists seem to get the cognitive “focus” wrong. But this means that we do not have an explanation of why COND\* is false contrary to what strong representationalism predicts. In the absence of such an explanation, I suggest we conclude that COND\* is true just as COND is, and that, therefore, strong representationalism about pain and other intransitive bodily sensations is false.

However, I am inclined to draw a stronger conclusion. I think the following conditional is true:

(SR) If strong representationalism about pain and other intransitive bodily sensations is false, strong representationalism *simpliciter* is false.

Above I have briefly mentioned why the falsity of strong representationalism about pain would greatly diminish the allure of this position with respect to *any* phenomenal content. I will not say more than that here about why I believe (SR) is true, partly because I think pretty much any strong representationalists would agree with me that (SR) is true.

I conclude that strong representationalism *simpliciter* is false.

## VII. OBJECTIONS AND REPLIES

Before closing, I would like to discuss three ways in which one might resist the anti-perceptualist conclusion we reached in Section V, namely, that feeling pain is not perceiving something extramental. First, a perceptual theorist might appeal to the neuroscience of pain processing. Second, one might adopt a disjunctivist account of perceptual experience according to which veridical pain experiences where PAIN<sub>td</sub>, it is claimed, always has labeling uses are quite different in kind from non-veridical pain experiences whose explanation does not assume a common core with the veridical experiences.<sup>36</sup> Third, one might treat it as raising a pseudo-problem for perceptual views generated by our common linguistic practices. I think they all fail to undermine the anti-perceptualist conclusion we have reached.

Let me take up the first response.<sup>37</sup> When one looks at the underlying neural mechanisms involved in pain processing, it is very clear that they are quite complex dedicated neural systems that share a lot of common characteristics with other sensory modalities. The specialization start with the receptors (called nociceptors) in the peripheral neural system — for the most part they respond only to potentially harmful (nociceptive)

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<sup>36</sup> Forms of disjunctivism about perceptual experience in general can be found in the writings of M. G. F. Martin, “Perception, Concepts, and Memory,” *The Philosophical Review*, CI (1992): 745–763; J. McDowell, “The 1997 Woodbridge Lectures,” this JOURNAL, XCV (1998), and *Mind and World* (Massachusetts: Harvard University Press, 1998); H. Putnam, “Sense, Nonsense, and the Senses: An Inquiry into the Powers of the Human Mind,” this JOURNAL, XCI (1994): 445–517. For a critical review, see S. Sturgeon, *Matters of Mind: Consciousness, Reason and Nature* (New York: Routledge, 2000).

<sup>37</sup> See Hill, *op. cit.*, for a perceptualist argument that appeals to cognitive neuroscience.

stimuli. Their activity is communicated to the central nervous system mostly by dedicated nerve fibers. There are specialized modulatory spinal cord mechanisms for nociceptive information processing. These are connected, again through mostly dedicated nerve tracks, to the midbrain areas and the thalamus. There are somatotopically organized areas in the thalamus that are designed to receive input from these tracks and send the incoming nociceptive information to higher brain areas. Although our knowledge of the brain mechanisms underlying pain experiences are less detailed, still we know that there are specialized brain mechanisms processing nociceptive information. Everything we know about these neural mechanisms points in the direction that nociception is a genuine *sensory modality* in pretty much the same sense in which, say, (early) vision or hearing is (or rather, involves) a sensory modality. So, one might conclude, feeling pain subserved by these mechanisms is genuinely *perceptual*.

But this conclusion does not follow from the evidence presented. Given the overwhelming neuroscientific evidence, it is foolish to deny that nociception is a genuine sensory modality. But this was not our question. Our question is rather whether the experiences this sensory modality helps to generate are genuinely perceptual. Perception requires some cognitive uptake or recognitional response to incoming sensory information: a merely sensory experience does not become perceptual until some sort of categorization *can* occur — even if this happens within the main perceptual processing stream, as seems to be the case. As COND implies, sensory experiences or the proprietary sensory information they contain must interface with conceptual or categorizing systems to become perceptual. I do not mean to suggest that each and every sensory experience ought to result in an actual labeling use of a sensory concept to become perceptual. Rather, the claim is at the *system level*: a sensory system needs to be coupled with a conceptual/categorizing system where the experiences generated within this matrix are generally transparent to the sensory concepts they give rise to. Moreover, COND as a condition on perception does not require a sophisticated categorization system, but it requires some conceptual capacity to form at least some (proprietary — as always) sensory concepts that can be directly applied to the object of perception, categorizing its features that the subserving sensory modality detects.<sup>38</sup> In brief, seeing  $x$ , say, is not perceptual until it can induce seeing  $x$  as  $F$ , where  $F$  is a visible quality of  $x$  whose concept is sensory.

Let us now take up the disjunctivist response to our main conclusion. A disjunctivist might claim that feeling pain is genuinely perceiving something (tissue damage) only when the pain experience involved is veridical, in which case PAIN<sub>td</sub> is routinely used to label pain<sub>td</sub>, and not just to express what the experience represents. All other experiences that are “non-veridical” but subjectively indistinguishable from feeling pain<sub>td</sub> (i.e., pain<sub>e</sub>) are not perception at all, in which case PAIN<sub>td</sub> has routinely non-labeling uses — that is, pain<sub>e</sub> is not transparent to PAIN<sub>td</sub>. Disjunctivists tend to be direct realist about perception, but of a sort that often rejects representationalism. For if perception were mediated by representations (experiences with accuracy conditions), it would be possible, indeed quite natural, to claim that non-perceptual experiences that are

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<sup>38</sup> In this minimal sense, any vertebrate that is capable of positive and negative reinforcement learning is apt for being endowed with relevant sensory concepts.



subjectively indistinguishable are so because they share their representational content with genuinely perceptual experiences so that it would make sense to talk about “veridical” and “non-veridical” experiences (their accuracy conditions). But, even though we have introduced disjunctivism using this representationalist terminology, it is generally not available to disjunctivists themselves.

One of the difficulties with this proposal is that a vast majority of correct pain reports turns out not to be perceptual reports at all! For, given that pain experiences are very often “non-veridical,”<sup>39</sup> and *their* reports, when made sincerely, *are* correct, there are a vast number of genuine cases of feeling pain that are not instances of genuine perception. On this proposal, in other words, some genuine pains are perceptual, some are not. Given the basic tenets of disjunctivism, this result would probably be welcome by a disjunctivist.

But there is a related and more serious difficulty with this proposal. According to disjunctivists, an experience is perceptual only when it is veridical, and no subjectively indistinguishable mental states whose etiology is deviant share any common psychological or epistemic common core with those experiences that are genuinely perceptual. But this deprives the disjunctivist from giving any plausible account of why common practice routinely lumps certain “veridical” and “non-veridical” experiences together as pain — surely there must be some significant factor shared by both kinds that *explains* this *actual* practice. But the basic tenet of disjunctivism is to deny any such common factor that is supposed to explain why subjects cannot distinguish between them in introspection.<sup>40</sup> Note that this is stronger than the standard complaint often raised about disjunctivism; namely, that disjunctivists do not have (and often refuse to have) an explanation of why veridical and non-veridical experiences in a perceptual modality may be subjectively indistinguishable in introspection. My complaint here is that the folk actually have already a concept of pain deployed in feeling and reporting pain that does not distinguish between veridical and non-veridical pain experiences. This is a complaint about disjunctivists’ inability to explain a deeply seeded and widespread actual practice.

But most importantly, I do not think that even in the case of veridical pain experiences the supposedly sensory concept PAIN<sub>td</sub> is routinely put in labeling uses. Considering counterfactual variations on a particular deployment of a concept is always philosophically legitimate in the attempt to reveal the basic contours of that concept. So consider any particular instance of the sentence schema (5) where the experience (feeling pain<sub>td</sub>) is “veridical,” that is, there is tissue damage in that bodily location where you correctly seem to ascribe pain<sub>td</sub>. Now ask yourself counterfactually whether you would

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<sup>39</sup> Here we do not need to mention rarer phantom limb pain syndromes. Given the ubiquity of spatial and temporal summation of nociceptive processes (among many other phenomena such as hyperalgesia and hypoalgesia), the subjective severity and intensity of pain experiences very often do not correlate well with the severity and intensity of tissue damage. So even though completely hallucinatory pain experiences may be rare, assuming representationalism, illusory pain experiences are quite common.

<sup>40</sup> Partly for this reason, modern representationalists (like Tye and Dretske, among others), who maintain that experiential phenomenology is reducible without remainder to representational content of experiences, do not subscribe to disjunctivism. Recall their account of sentences locating pains in body parts. They maintain that even non-veridical pain experiences are genuine pains because they (incorrectly) represent tissue damage in healthy body parts and that is why their phenomenology is indistinguishable from those that are veridical.

consider your judgment *mistaken* if there were no tissue damage in that bodily location on that particular occasion — while holding everything else constant (including your psychological state — surely pain experiences are psychological states if anything is!). I submit that you would not. But if this is correct, it means that even when you correctly report pain in a bodily location  $L$ , you do not deploy the concept  $\text{PAIN}_{\text{id}}$  (supposing that that is what you deploy) to label tissue damage in  $L$ .

Note that in parallel cases in other perceptual modalities (such as visually misidentifying something as red), you *would* consider your judgment to be mistaken, and that is the ground for disjunctivists to declare that such experiences as inducing mistaken judgments are not genuinely perceptual. In other words, they would not object to testing the contours of the concept in counterfactual situations. So there is a marked asymmetry between the concept  $\text{PAIN}_{\text{id}}$  and all other sensory concepts with genuinely labeling uses. In effect, the disjunctivist says something like this:

- (7) My report ‘I feel pain in  $L$ ’ is true if (iff?) either (i) there is tissue damage in  $L$  and I label it directly (through a certain kind of experience) by my use of  $\text{PAIN}_{\text{id}}$ , or (ii) there is no tissue damage in  $L$  and I use  $\text{PAIN}_{\text{id}}$  (in a non-labeling way, it turns out) merely to express what kind of experiential state I am in such that I cannot subjectively distinguish it from the one expressed in clause (i).

To see the asymmetry, consider a parallel case in standard perception such as vision:

- (8) My report ‘I see a red patch on  $L$ ’ is true if (iff?) (i) there is a red patch on  $L$  and I label it directly (through a certain kind of experience) by my use of RED, or (ii) there is no red patch on  $L$  and I use RED (in a non-labeling way, it turns out) merely to express what kind of experiential state I am in such that I cannot subjectively distinguish it from the one expressed in clause (i).

(8) is false. The disjunctivist must explain this asymmetry if she wants to maintain that  $\text{PAIN}_{\text{id}}$  has labeling uses when, and only when, our pain experiences are “veridical.” I am not sure this can be done without begging the question.

Worse, yet, the disjunctivist position seems self-undermining. One way to see this is by reflecting on whether the fact that (8) is false is surprising. Well, it is not surprising at all. For genuine concepts with labeling uses are concepts that can be misapplied. That is why, at least partly, if (8ii) is true (while 8i is false), my report ‘I see a red patch on  $L$ ’ is false. If I am hallucinating a red patch and my report is based on that, then I am misapplying RED. But if (7) is true, as the disjunctivist claims, then  $\text{PAIN}_{\text{id}}$  cannot be misapplied in the relevant sense — i.e., it cannot have incorrect labeling uses! But it is plausible to argue that a concept that cannot have incorrect labeling uses, in the relevant range of cases, cannot have correct labeling uses either, which is to say that it would not be a genuine concept at all!

Finally, let us take up the charge that all we have done so far is to raise a pseudo-problem for perceptual theories.<sup>41</sup> One might argue in the following way. We can invent a term ‘see<sub>2</sub>’ such that one can see<sub>2</sub> even when the perceptual object is not present (so ‘see<sub>2</sub>’ applies to the visual experience, unlike the ordinary ‘see<sub>1</sub>’). In other words, on this usage sentences like (1) are read opaquely in the relevant way. We can also invent a term ‘feel<sub>1</sub>’ such that feeling<sub>1</sub> requires the presence of the perceptual object, tissue damage (so ‘feel<sub>1</sub>’, unlike the ordinary ‘feel<sub>2</sub>’, is transparent). As it happens, in our language ‘see’ expresses “see<sub>1</sub>” and ‘feel’ expresses “feel<sub>2</sub>”, but that is just terminology; at the level of phenomena, the two cases are on a par. The intuition behind this response is that the flow of information in pain processing both at perceptual and conceptual levels is of the same kind with those in standard exteroception like vision, hearing, etc. So metaphysically, that is, at the level of phenomena, information processing in pain is no different than the information processing involved in non-controversial cases of perception.

But this response does not really engage the argument from focus that relies on a certain understanding of what perception requires. The question is not whether we can or cannot invent new terms or form new concepts so that the two types of phenomena turn out to be type-identical. Actual linguistic practices reflect our conceptual practices, how we think and conceptually respond to incoming perceptual information. As a matter of fact, our conceptual practices treat seeing and other standard exteroception differently than they treat feeling pain, despite the fact that the types of information flow seem identical in both cases. The question is why? For these practices are shaped by our actual epistemic needs and psychological preferences that show up in our behavior. They are not arbitrary, and thus may not lend themselves to easy revision — if we wanted to revise them. If perception is a psychological process by which we gather information about the extramental world and align our conceptual and behavioral responses on this basis in a certain way, it is a fair question to ask whether a psychological process that deviates from this is perception — especially when the deviation seems to reflect that our epistemic needs and psychological preferences are markedly different than those involved in exteroception. (Furthermore, strictly speaking, it is misleading to say that the information flow in pain and in, say, vision is the same, because pain experiences do not give rise to sensory concepts with labeling uses: as we have seen, pain experiences are not transparent to PAIN<sub>id</sub>, and for that matter, to PAIN<sub>e</sub>.)

The question of whether feeling pain is perception is not, therefore, a purely metaphysical or philosophical question, but it is also at least partly but importantly an empirical (psychological) question. Thus it calls for an independently motivated account of what perception is or requires. The arguments I have leveled against perceptual views of pain rely on a certain understanding of perception according to which sensory experiences of extramental objects or properties give rise to sensory concepts with labeling uses (that is to say, an understanding of perception for which COND is true). This way of understanding perception is not gratuitous. As we have seen earlier, it is supported by common sense, but it is ultimately justified by theoretical as well as empirical

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<sup>41</sup> David Chalmers and Kirk Ludwig have independently raised this concern. The main text follows Chalmers’ formulation. Also, *cf.* Hill, *op. cit.*

considerations about what perception is *for*, what kind of role it plays in the epistemic, cognitive, and behavioral travails of organisms it serves.

It is natural to think that the explanation offered above of why COND\* is actually false, although does not work for strong representationalists, may work well for perceptualists in explaining why COND does not hold for feeling pain. Recall that the explanation of why our conceptual and behavioral reactions to incoming nociceptive information turned out to be the way they did is that pain experiences normally have a negative affect that turns the immediate cognitive and behavioral “focus” on to themselves (away from their objects they allegedly represent). Whatever further explanation might be given for this affective aspect of pain experiences, it is plausible to think that it is this aspect of pain experiences that explains why COND does not hold for feeling pain. Indeed, early perceptual theorists like Pitcher and Armstrong, unlike many modern defenders, have thought that way. But the explanation is more complicated than that — a lot more. The negative affect probably plays a role, but to get a fully satisfactory explanation one needs to look at the nature of the information pain experiences deliver (its amount, complexity, and richness as well as how well it is integrated with information available through other modalities, etc).<sup>42</sup>

It is important to emphasize, however, that having an explanation of why COND fails for feeling pain does not allow the perceptualist to argue in this way: “Look, in feeling pain, everything is just like what happens, say, in seeing red, except that we have got a funny way of realigning our immediate conceptual response to incoming perceptual information. But we have got a perfectly good naturalistic explanation why this is so that is consistent with a perceptual view of pain.” The claim of this paper is that providing an explanation of why COND fails in the case of feeling pain is irrelevant to the issue of whether COND expresses a reasonable requirement for genuine perception. Explaining why COND fails in pain is in effect explaining why feeling pain fails to be genuine perception. Having an explanation of why COND fails is certainly an important matter, but it should not be confused with defending a perceptual view of pain — on the contrary it is an admission that feeling pain is not perception. So no matter what the explanation is, once you have flouted COND, you ain’t got a perceptual view. As we have seen, COND is not gratuitous or arbitrary. There are deep reasons why it is essential for a proper understanding of perception and perceptual experience.<sup>43</sup>

## VIII. CONCLUDING REMARKS

I have argued for two distinct but related claims. One is the anti-perceptualist claim about pain: feeling pain in a body part is not perceiving an extra-mental condition of that part. The other is that strong representationalism about phenomenal content is false.

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<sup>42</sup> For an extended discussion of this issue, see M. Aydede and G. Güzeldere, *op. cit.*

<sup>43</sup> I sympathize with a reaction to this that goes, as per the third objection above: “if that is the way the perceptual view fails, no big deal — metaphysically speaking!” Well, I have never said or implied that failing to be a perception in this way would be a big deal — metaphysically speaking, whatever that means exactly... But see the concluding remarks below for what I take to be the importance of this conclusion.

Historically, what Armstrong has called intransitive bodily sensations (like itches, tickles, orgasms, pains and so on) were thought to pose serious problems for naturalist or physicalist approaches to minds. The thought was that if they could be squeezed into a perceptual mold (understood in direct realist terms for the most part), these problems would diminish.<sup>44</sup> But, given our current understanding of the conceptual space in the metaphysics of mind, it is possible to look at things from a different perspective. If there are serious metaphysical problems with conscious experiences and their qualitative phenomenology, surely, these are relatively independent of whether these experiences are genuinely *perceptual*. Suppose they are, are we any closer to solving the metaphysical problem of phenomenal/experiential consciousness? Not really. Suppose they are not, do we seriously risk being dualist or non-physicalist or becoming a mystic? Not really. So why do we not, qua metaphysicians, stop worrying about whether pain and other intransitive bodily sensations are genuine perceptions, when it seems clear that a perceptual view of pain is at odds with facts about what genuine perception requires (not to mention our ordinary concept of pain supporting remarkably robust intuitions about its extension)?

Strong representationalism is the more recent incarnation of more or less the same set of worries about the metaphysics of conscious experiences. Here the results of this paper are in a way more important: if strong representationalism is false, then we know that the solution that representationalists have proposed to the metaphysical problem of naturalizing phenomenal content does not work. I myself welcome this conclusion since I do not think that strong representationalism is the right way to approach the problem of naturalizing phenomenal content.<sup>45</sup>

Furthermore, I fear that years of attempts to mold pain and other intransitive bodily sensations into a perceptual form on a par with other exteroception for which COND is true have blinded scores of philosophers to important clues about the nature and structure of phenomenal consciousness hidden in what is so peculiar about these bodily sensations and the way we ordinarily conceptualize or think of them.<sup>46</sup> The fact that we do have naturally developed concepts (PAIN, ITCH, TICKLE, etc.) that non-inferentially track

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<sup>44</sup> This kind of worry is most explicit in Pitcher, one of the earlier and most articulate defenders of direct realist perceptual view of pain: “The obstacles [to a direct realist version of the perceptual view of pain] are some features of pain that seem to rule out [such a view], since they seem to demand either (a) that pains be mental (or at any rate nonphysical) particulars, or (b) that the awareness of pains be the awareness of subjective “sense-contents” that are not identical with anything in the physical world. My aim in the paper is to show that these obstacles are merely illusory, and there are no features of pains that force on us the mental-particulars view of pain. So although my attack on [this view] is only indirect, I nevertheless regard it as lethal.” Page 369 in G. Pitcher, “Pain Perception,” *op. cit.*

<sup>45</sup> See Aydede and Güzeldere, *op. cit.*, for a physicalist account of perceptual experience and its introspection that makes a particularly heavy use of the peculiar character of intransitive bodily sensations and pain in particular and the in-between character of the concepts these give rise to. In a way, they propose reversing the tradition: naturalization of the perceptual experience requires paying very close attention to what happens in these bodily sensations. Their account is information-theoretic but not strongly representationalist about the ontology of phenomenal properties.

<sup>46</sup> Perkins (*op. cit.*) is the only exception I know of who defends a perceptual view of pain and is very sensitive to the worries I raise here.

experiences rather than their putative extramental objects *is* an extremely interesting fact. I think these concepts and the way we acquire and use them are the *existence proof* that we can and do have non-inferential introspective access to our experiences (or to certain aspects of these experiences) and that this access *can* be established without first cognitively exploiting their representational content (if they have one) — contrary to many strong representationalists' claims notwithstanding. I think that a careful examination of these concepts will likely reveal important clues about introspection and the nature of so-called phenomenal concepts that has become the topic of intense debate in recent years among philosophers who write on phenomenal consciousness.

Phenomenal concepts are concepts deployed in thinking or conceiving of phenomenal aspects (qualia) of our conscious experiences. Many attribute interesting semantic (e.g., primitive, unanalyzable) and epistemic (e.g., recognitional, direct, unmediated) characteristics to these concepts in the hope of explaining our peculiar first-person access to our experiences and the way we conceive of their phenomenal qualities. Consequently, many others question whether there can be concepts with such features that would help dispel some of the mysteries of phenomenal consciousness. Some have even denied the existence of phenomenal concepts.<sup>47</sup> If the conclusions of this paper are correct and what I have said about the interplay between pain experiences and the proprietary concepts they give rise to is right, then the concept of pain *is* already a phenomenal concept. This is also true for the concepts of other intransitive bodily sensations. If pain reports are primarily introspective reports, then the thoughts expressed by these reports must deploy phenomenal concepts. Thus any qualia externalist who rejects or otherwise downplays the internalist intuitions about pain qualia (or any qualia, for that matter) and our direct access to them, or anyone who is skeptical about phenomenal concepts, must address the argument of this paper about pain experiences and the way we access them.<sup>48</sup>

In the rush to naturalize the phenomenal mind, we have “perceptualized” every aspect of it — as a quick glance to the recent literature on emotions would also testify. This was overkill. “Perceptualization” is not mandatory for a naturalist or a physicalist.

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<sup>47</sup> See, for instance, Michael Tye, *Consciousness Revisited: Materialism without Phenomenal Concepts* (Massachusetts: MIT Press, 2009), and Jesse Prinz, “Mental Pointing: Phenomenal Knowledge without Concepts,” *Journal of Consciousness Studies*, XIV (2007): 184–210.

<sup>48</sup> Primitivists and projectivists about sensory (secondary) qualities might find the results of this paper especially intriguing. Although I do not have much sympathies with primitivism, I am increasingly getting drawn into a projectivist account — but I have not yet tried out, in any detail, various ways of avoiding it.