

UNIVERSIDADE DO ALGARVE

“AESTHETICS OF PAIN IN CONTEMPORARY PHOTOGRAPHY. THE SUFFERING BODY IN THE ARTWORKS OF KIR ESADOV AND YURI KOZYREV”

Cristina Godoroja

Dissertação para obtenção do grau de mestre em *Comunicação, Cultura e Artes*

Trabalho efetuado sob a orientação da Prof.^a Doutora Mirian Estela Nogueira Tavares

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“A Estética do Sofrimento na Fotografia Contemporânea. O corpo de Dor nas Obras de Kir Esadov e Yuri Kozyrev”

Resumo

O sofrimento é uma experiência universal. Todos os seres humanos sofrem, mas as diferenças culturais geram significados particulares e respostas específicas ao sofrimento. No entanto, é o corpo o *locus* exato da dor e do sofrimento. A maneira como é visto o corpo influencia a forma como a dor é sentida e expressada. Assistir, olhar para a dor dos outros tornou-se parte da existência humana, particularmente relevante após os eventos de 11 de Setembro de 2001.

Ao longo dos séculos, a dor e o sofrimento foram sempre presentes, bem ancorados na área da arte. Muitos artistas aproximaram-se da sua doença pintando-a, esculpindo-a ou fotografando-a. Apesar de nesta dissertação estiver muito cuidadosa a não romantizar a arte como um instrumento de cura, no entanto, reconheço que pensando e representando a dor significa assumir as suas conotações positivas. A prática fotográfica é muitas vezes utilizada por artistas como uma forma de terapia pessoal.

A tese critica a tendência de localizar a dor dentro de uma parte específica do corpo, reforçando a perspectiva de que esta é moldada pelo contexto individual e socio-cultural. A fotografia aparece com o papel de resistir à medicalização da dor e do sofrimento.

A pesquisa analisa como a fotografia é usada como meio de construção da identidade e instrumento de intervenção.

Termos-chave: corpo, dor, doença, guerra, terapia, fotografia.

Abstract

Suffering is a universal experience. All humans suffer, but cultural differences can lend quite different meanings to that suffering and to the response it is due. However, it is the body the precise locus of suffering. How one regards the body influences the way how pain is experienced and expressed. Regarding the pain of others has become part of human existence. It became particularly relevant after the events on September 11, 2001.

Over the centuries, pain and suffering have always been expressed in art. Many artists' way to appropriate their disease was/is to paint it, sculpt it or photograph it. While I am very careful about romanticizing art as a sublime healing tool, I nevertheless recognize that thinking of pain, is a step forward into assuming the positivity of it. Photographic practice is often used by artists as a personal form of therapy.

I am critical of the tendency to localize pain within specific bodily parts, rather than understanding pain as shaped by both individual and the particular socio-cultural context. Too many such attitudes to pain are emblematic of its medicalization.

The research describes how photography can be used as a means of identity construction and a health care intervention.

Keywords: body, pain, illness, war, therapy, photography.

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INTRODUCTION

State of the art

The experience of pain presents a complex interaction of neurological, emotional, cognitive, social, and cultural factors. As pain experiences are lived in the body non-verbally, visual approaches are often used for the assessment of pain. Over the centuries, pain and suffering have always been expressed in art. Due to its symbolic character, for some people, artistic expression makes easier the transmission of certain aspects of pain and trauma that cannot easily be expressed in words. According to psychoanalyses, the symbolic expression is indirect, causing less anxiety and thus providing more security than verbal communication.

Pain is defined as “an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage (Merskey, 1994). What this definition highlights is firstly the unpleasantness of pain. It goes without saying that, standardly, pain is something we would rather be without. This corresponds with the fact that pain is depicted in both medical advertisement and the visual arts as a turning of the body inside out.

Many artists' way to appropriate their disease is to paint it, sculpt it or photograph it. At times, the narrative of the suffering body is far from linear, rejecting the myth of progress, self-improvement and eventually the victory over pain or disease. It has mostly been the narrative of heroism, sacrifice and courage that has scored highly in contemporary Western art. Images in Western art and culture (i.e. passion of Christ) centred on pain, served as objects of contemplation mostly when pain was mythologized. Carnage has become a successful iconographic subject also nowadays. From etchings of Goya (*Los Caprichos*, 1799; *Disasters of War*, 1810-20) to the seventeenth century devotional sculpture, from videos of Bill Viola (*Nantes Triptych*, 1992; *The Passions*, 2000) to works of Anish Kapoor (*Marsyas*, 2002), pain has long been penetrating art.

Scarry claims that art is connected to pain already on an ontological level (Scarry, 1985). She points out the counter-dependence of the concepts of pain and imagining, between which the subject is positioned. Representing pain is a very delicate issue as it requires obeying a certain ethics. Sontag postulated that the only people with the right to look at images of suffering are those who are able to alleviate it or who could learn from it, the rest being simply voyeurs,

whether conscious or not (Sontag, 2003). According to Sontag, illness is linked to creativity and accompanied by certain *aesthetics of destruction*, the peculiar beauty of havoc and chaos, making one see the physical constraints as a basis for the hope of overcoming them. While I am very careful about romanticizing art as a sublime healing tool, I nevertheless recognize that thinking of pain, instead of denying it, is a step forward into assuming the positivity of it.

The themes of suffering, illness, death and the end of existence are subjects treated with great importance by artists. Such artworks are often reconstructions of scenes from literature or historical events, but there are also paintings that have the value of a private meditation or a simple homage, works meant to serve as companions during the long, silent hours of illness.

Photographic practice is often used by artists as a personal form of therapy. Also, photographic activity could be seen as a political, deconstructive strategy in denaturalizing photographic realism and redefining artistic and social practice. In this sense, the representation is a space of conflict and social struggle, a means of regaining control of the own image.

Central to the concept of pain is the Cartesian binary, issuing a call to our intellectual capacities to explain what is happening to the suffering body. The concept of pain predominates in modern culture, although, in his classic book *The Culture of Pain*, David Morris puzzles over the lack of knowledge about pain that, in his assessment, represents the most significant illiteracy of Western culture (Morris, 1991). In his argument, Morris opposes the tendency to strip pain of its cultural and social relevance. Similarly, Bendelow and Williams are critical of the tendency to localize pain within specific bodily parts and perceive it solely as a result of an elaborate broadcasting system of signals activated by a failure or dysfunction in the machine of a human body and its organs, rather than understanding pain as shaped by both individual and the particular socio-cultural context (Bendelow&Williams, 1995). Too many such attitudes to pain are emblematic of its medicalization.

The universality of the experience of suffering has elicited a variety of responses, both theoretical and practical in nature. All religious and soteriological systems constitute, in some form, a response to the problem of suffering and the human condition. Pain lodged at the core of human experience: pain feared, pain avoided, pain inflicted, pain endured, pain savoured and pain regarded.

Key studies that seek to understand the enormity of human suffering include works such as Elaine Scarry's "The Body in Pain: The Making and Unmaking of the World" (Oxford University Press, 1985) and Arthur Kleinman's "Writing at the Margin. Discourse between Anthropology and Medicine (University of California Press, 1995). Both are based in the literature on the sociology of knowledge and the anthropology of medicine but lack a grounding in the long view of the history of religions out of which fundamental notions of "the suffering body" have emerged in Asian as well as Western contexts.

The research proposes to answer to the following questions, less approached in the literature of specialty so far:

- What are the specific techniques with which is represented the suffering body?
- What are the transformations, the manipulations, the new shapes the body in pain suffers during its transposition into the visual language?
- Is there an essential, idiosyncratic relationship between the representation of the body in pain and medium used, namely, photography?

Objectives:

- to distinguish and explain the concepts of *pain, suffering, trauma*;
- to identify the theories about the representability of pain;
- to depict artworks and analyse the ways of representing pain along history and the factors engaged;
- to understand the motivation of making pain visible;
- to explore the photography as a therapeutic tool for the artist in pain;
- to analyse the reasons of the war photographs as images of collective trauma.

Relevance of the project

This thesis is a critique towards the over medicalization of pain, foregrounding the importance of thinking pain in its relation to social interactions, dominant ideology, individual location, and experience. The research describes how photography can be used as a means of identity construction and a therapeutic intervention that fosters meaning reconstruction of the painful experience. It focuses on the understanding of the ways in which the artist experiences and

visualizes the pain and secondly, how this process of meaning making through art changes his perspective on his painful, traumatic experience.

Suffering is a universal experience. All humans suffer, but cultural differences can lend quite different meanings to that suffering and to the response it is due. In common to all, however, is the body the precise locus of suffering. As has become evident from many recent studies, our notion about the body varies depending on our social and cultural context. How one regards the body influences the way how pain is experienced and expressed. These variations are culturally conditioned and are generally articulated with reference to ideological, moral or religious traditions. This research will prove the cultural dimension of pain, by approaching artworks from different cultural context. Because suffering and its expression is a multi-faced phenomenon, a complex, exhaustive approach is required, fact that makes this paper an interdisciplinary study.

“Regarding the Pain of Others” has become the part of human existence (Sontag, 2003). The notion of visibility, or rather specularly of pain, like suffering and eventually death in front of many eyes, became particularly relevant after the events on September 11 2001, connecting to the medial character of trauma. So, a new perspective on pain and its representability is highly demanded nowadays. The thesis will elucidate how art practice could be making calls for a rethinking of the concept of pain.

Detailed description of the thesis

Pain is a highly problematic concept. It is often claimed that intense pain cannot be processed and that it escapes language (Scarry, 1985); is it then my intention to process it and to find (visual) means to re-tell it. Our understanding of pain influences our expressivity of it. Language of pain is most often a language of dismay, complaint, disappointment, bereavement and fear. By examining paintings and photographs, I investigate how reading the images of pain has transformed in time and how it affects contemporary self-understanding.

My argument is that the making (as opposed to unmaking) aspect of pain can serve as one of the elements of subjectivity. I see the presence of pain here as a dynamically shaping, rather than a passive, condition. People in pain live multiple, layered identities played out at crossroads of social, historical and political factors. They experience pain only and entirely as

they interpret it (Morris, 1991). This struggle for an understanding of pain can be traced throughout history, from the purifying role of pain in Christianity to the myths built upon AIDS as a punishing force directed at the homosexual part of the population.

Nowadays, the need to interpret pain is ever more urgent. Every member of Western civilization is surrounded by pain; his/her being is conditioned by it. Cancer, tuberculosis, suicide, depression, posttraumatic stress disorder, drug addiction, street or domestic violence and sexual abuse are ubiquitous also in the visual sphere, often blurring the notion of individuality and uniqueness of the experience. Exhibitions like World Press Photo promote that spectacularity even more, to the point where the ethics of images of condensed suffering become its aesthetics.

The modes of experiencing pain and trauma are simultaneously collective and individual, local and global, and they are perpetually infiltrating contemporary consciousness. Studying the representation of pain requires a cross-disciplinary approach. Pain and its acknowledgement have come to be seen as dependent on our personal characteristic – narratives, cultural background, feelings, and mood, often regardless of the tissue damage. Described not only as a clinical term, but also as an aspect of war, torture, violence, sexual practices, metaphysical rituals, power relations and political acts of repression, pain invites an interdisciplinary approach. My assumption is that art could be a way to enable pain to enter wider shared discourse and conceptualization. My intention is not only to show how pervasive of a presence pain is in artistic discourse, but also to point out, since visibility is an imperative of contemporary social and cultural life, the ways in which pain is being made visible here. In addressing visual culture, my methodological assumption is that we can derive certain forms of knowledge on pain from visual images.

The thesis will discuss the artworks of the Russian photographer Kir Esadov in terms of the expression of pain and suffering and sets out an argument for the transformative aspect of art within the context of art-therapy. His photographs are analysed under the aspects of pain, embodiment, commitment and transformation. Furthermore, the comprehension of pain through art is explained by hermeneutic theory, stressing the symbolic and atemporal character of art. Art can open the horizon for transcending the individual and present aspects of pain, as well as providing insights into both spectator and author.

The last part of the thesis will discuss the war photography, exploring in particular the work of Yuri Kozyrev, challenging the previous approach. How and why is suffering and death represented as collective experience, will be explored taking into account the ethics of making trauma visible.

Methodology

I try to clarify how artists and art institutions respond, perceive and represent the disease and what is the special frame of contemporary art comparing to other historical moments of the representation of the ill. The current research methodologically engages statements from Michael Foucault's account, medical sociology and cultural and feminist theories of the body. Representing the disease in the arts gives birth to a very specific discourse practice which relies on two main issues: on one hand, the figurative problem of illness as representation, and, on the other hand, the broader implications of this representational field for the wider domain of the politics of representations. Also, it makes evident two main questions: how the category of "individual patient" and its identity constitute the departure point of the representation of illness in the nowadays art; and how the aesthetic that promotes and defends a homophobic carnal perspective coexist with an aesthetic which aspires for recognition.

In order to confer to the research complexity, specificity and integrity, will be engaged two constant perspectives. The first one, the cultural perspective, as I mentioned above, will show how the cultural background shapes the experience of pain and determines its code of representation. Second, the paper will pursue the gender perspective, gender being as a factor affecting the conception, production and interpretation of the artwork. The perception of pain is not only about the confrontation of gender, but gender can give valuable indications concerning the nature of one's reactions to it.

In its beginning, the research will focus on the understanding of the problematic of pain, its constant visibility and the ways of representing it. On a diachronic order will be exposed different codes of representing pain along the history of art and the factors which produced changes within them. Will be distinguished and explained the terms from the same semantic register: *pain, trauma, suffering, atrocity* and others.

The experience of pain will be depicted as **personal** and then as a **collective** one. In the first context will be analysed the artworks of the Russian photographer **Kir Esadov** and in the second- the war photographs of **Yury Kozyrev**.

Ist Chapter: Representing pain: body as medium

I.1. The Phenomenon of pain. Interpreting a universal human embodied experience

Suffering is a universal, unavoidable experience, a human experience not because the animals would be deprived of it, but because they do not attribute it a special significance beyond its physiological component. All humans suffer and each of them constructs a unique narrative of this experience; the cultural differences determine the specificity of the meanings conferred to pain and the responses to it. These cultural differences emerge from the dominant religion in a society and influence even the individuals who do not share any system of religious beliefs.

The departing point of interpreting the experience of pain in all cultural, social contexts is the perception of the body, this precise locus of suffering, this canvas in a permanent shaping and filling in. Taking into account the complexity of the factors involved, studying the suffering experiences requires the complicity of various approaches and perspectives. All these studies should start by addressing the concept of body, the body which is far more than a physical seat of pain. Our perception of the body is shaped by a multitude of agents: cultural location, gender, race, social class, age, personal trajectory. All of these factors and more influence our perspectives, not just as a group but also as individuals; teach us how we should live the experience of pain that would be allowed by the schema we are anchored in. The attitude towards the body and the phenomenon of pain determine whether the suffering person will exhibit shame, guilt, anger, denial, stoicism, acceptance, or even masochistic pleasure.

Furthermore, certain parts of the body have a different importance and statute than others which implies different significance. This segregation, hierarchization of the body parts is generated by the wrong perception of body as not being a unity, but a functional puzzle of more fragments; especially the division is made between the upper part, seen as superior, sacred and the lower part of the body, regarded as inferior, shameful. These variations are culturally conditioned and originate in ideological, moral, or religious traditions. There was always an interest from the part of political, religious institutions to control the body, the most accessible to influence the identity construction.

Given the diversity of the experience of pain, a large series of theoretical and practical responses was produced along the centuries and among cultures. All religious and soteriological systems constitute, in some form, a response to the problem of suffering and the human condition. People from everywhere were preoccupied with the causes and the purposes of suffering, sometimes elaborating even philosophical or poetic approaches as have proliferated in ancient Egypt, Mesopotamia, India and China.

Simultaneously with the theoretical responses, there were developed practical palliative interventions to alleviate pain- in particular, medical, institutionalised treatment of pain (both mental and physical); alternative treatments and complementary ways of healing. All forms of healing are produced in an immediate and direct correlation with the interpretations of roots, causes, meanings and varied significantly across cultural and historical contexts. As mentioned above, the selected form of treatment by a society at a certain moment depends on the general accepted vision on body: if it is regarded as a functional piece of meat including several systems of organs- then, it will be cut, sewed, modelled as any other object; if the body is taken as a unity, as a flux of energy perfectly integrated into the natural flux, then, the forms of healing would be part of the nature, considered sacred and dealing not with the eliminating the discomforting symptoms, but the very roots of the pain; and finally, if the body is perceived as the work of God made out of clay, in this case, pain means to be possessed by the evil forces and the treatment would consist in exorcising, or, in another historical time, the same religious context would encourage the suffering one with the reward of being sanctified, the ones in pain will get to know the heaven. Much earlier the inventions within the modern medicine, typical societies had medical specialists who provided treatment methods according to the means available to them, and, undoubtedly, according to the vision on human body and human condition, sometimes these methods were even astonishing. Often medical personnel were themselves priests or were closely associated with the religious establishment, suggesting that healing represented religious rituals and involved the participation of deities.

Modern medicine, totally detached itself from the religion, involving the scientific, experimentally proved method, tried to homogenise and transform the vision on pain; and enabled the elaboration of revolutionary drugs and treatments to global populations, neglecting the local specificity, although, there are alternative therapies that survived and regained popularity.

The cultural context frames the medical responses to pain materializing the existent concepts concerning the nature of the human being and of the human body which highlight what is defined as being “healthy” or “infirm”. Unfortunately, the cultural aspect of the medical treatment of pain is completely neglected by the academic approach, except sociology and anthropology of medicine.

What kind of pain is it? Where and how does it hurt? These are the questions we ask when confronted with pain, in an endeavour to localize, characterize, and define the pain we experience. Central to the questions is the Cartesian binary, issuing a call to our intellectual capacities to explain what is happening to the aching body (Leder, 1998; Bendelow & Williams,

1995). As such, the questions reveal the concept of pain that predominates in modern culture and the ways in which we think about pain.

In his classic book *The Culture of Pain*, David Morris (1991) puzzles over the lack of knowledge about pain that, in his assessment, represents the most significant illiteracy of Western culture. In his argument, Morris opposes the tendency to strip pain of its cultural and social relevance. Similarly, Bendelow and Williams (1995) are critical of the tendency to localize pain within specific bodily parts and perceive it solely as a result of “an elaborate broadcasting system of signals” activated by a failure or dysfunction in the machine of a human body and its organs, rather than understanding pain as “shaped both by the individual and their particular socio-cultural context” (Morris, 1991). To many, such attitudes to pain are emblematic of its medicalization. Pain undoubtedly “belongs to the most basic human experiences that make us who we are” (Morris, 1991).

It has been essential to approach pain not as a localized sensation, but rather as a complex emotion encompassing both the body and mind. Pain is not located solely in/on the individual body, but in contrast involves the overall situational context and a complex interaction between those who are *in* pain and those who are *out* of pain. Pain is a practice, both in the sense of being carried out, as well as in the sense of bringing about some effects, changes, or response. Briefly, pain is both *done* and *does something*. In approaching pain as cultural and social practice, the question no longer focuses on what pain is and how or where it is felt. Rather, it shifts into the area of what pain does. What effects does pain bring about? Further questions follow: What embodiment does pain produce? How does pain relate to materiality of bodies both in and out of pain?

In the Western, “civilized” cultural context, pain is predominantly referred to as the experience of intense and uncomfortable unfamiliarity, even estrangement from the self. Pain is felt “as something ‘not me’ within ‘me’” (Ahmed, 2004). According to Elaine Scarry (1985), this estrangement also encompasses the level of interpersonal and inter-social relations. Pain is not only bodily trauma, it radically affects the possibility of communication. Feeling pain, being in pain, she thinks, is an extreme state of existence that literally shatters the possibilities of language (Ahmed, 2004). Pain, in this sense, represents a “place beyond words” (Hart, 1998). On a similar note, Joseph A. Kotarba (1983) concludes his studies into chronic pain by defining pain as a lonely experience; as a feeling that the subject has and others cannot have, or vice versa as a feeling that others have, yet the subject him/herself cannot approach. Again, it is the breach in the possibility of sharing and mutuality that for these authors defines the experience of pain. Ahmed argues that the sensation of pain is instrumental in revisiting and redrawing the bodily boundaries, the “pain surfaces” (Ahmed, 2004). Likewise, Lynda Hart (1998) notes that pain intensifies a body’s surface and borders. It is this increased consciousness of borders between individual bodies that informs the emotion of ungraspability of pain.

In his thought-provoking book *The Absent Body*, Drew Leder (1990) explores the role of the body with regard to subjectivity. On the one hand, human experience is always embodied. On the other hand, in everyday life my body is seldom a thematic object of my experience. When

I engage in everyday interaction with others, I often do not think about my body. My body dis-appears from my attention. Leder differentiates between two ways in which one's own body can dis-appear from one's attention. He also makes a distinction between bodily disappearance and dys-appearance. The latter takes place when the body appears to me as "ill" or "bad" (Leder 1990). This is often the case when I experience pain or illness.

My starting-point is phenomenological. I focus on how the subject experiences her or his body, i.e. how the body stands forth to the subject. My body is what makes relations to others possible. It is made meaningful to me in interactions with others and the world and it is never merely an object to me. It is my lived reality. This is the perspective of the lived body that the French phenomenologist Maurice Merleau-Ponty (2002) writes about. "My body", Merleau-Ponty (2002, p. 167,453) says, is my "anchorage in a world." Nevertheless, my body can appear to me in different ways. Merleau-Ponty describes the tacit "self-giveness" of the body. He draws attention to the fact that I am bodily self-aware even if I do not reflect on how I position my body or how to move it. The body is given to me as the centre of my existence.

The lived body is an ambiguous mind-body unity that experiences and acts in a specific situation. It is our lived relationship to a world immersed in meaning, which we constantly interpret and make meaningful to ourselves through interaction with others. The lived body is someone's "grasp of the world" (Beauvoir, 2003, p. 36). It is "not just one thing in the world, but a way in which the world comes to be" (Leder, 1990, p. 25). Leder (1990, p. 73) suggests that pain effects a "spatiotemporal constriction" for the subject, that acute pain make us experience the body-part in pain as an "alien presence," i.e. as an object other than the self (Leder 1990, p. 73). Alienation implies that the body (that I am) appear as other and strange to me. Possibly, when living with chronic pain, this experience may change its character. Of course, in both acute and chronic pain one may feel alienated from things that previously gave meaning to one's life and, also, from other people. Pain, typically, impacts on the subject's perception, thinking and action. To be in pain implies that one's world has been transformed.

There may also be reasons to add one more case case. In this case, the subject cannot concentrate on anything else than the body-in-pain. I suggest that this is the case of pain that Emanuel Levinas (2005, p. 238) talks about when he says that severe forms of suffering subjugate the self, fully. The acuity of this suffering lies in the "impossibility of retreat". This pain can be impossible to express in words: it not only "resists" but "destroys" language

(Scarry 1985, p. 4). All that it is possible to articulate is the groan and the cry. The self “becomes” pain (Bullington 2009, p. 106); the subject experiences that the hurt body is “swelling to fill the entire universe” (Scarry 1985, p. 35). This negative bodily awareness absorbs the subject’s whole being. Scarry holds that intense pain annihilates objects of complex thought and emotion. There is a qualitative difference between pain that I am pre-reflectively and reflectively aware of but which does not subjugate the self, fully and pain that does.

Alienation implies that the body (that I am) appear as other and strange to me. Leder suggests that this is a possible (but not necessary) consequence of the body becoming an object of experience. The body, which previously has been that from which I direct my attention to others and the world, now becomes that to which I attend. Perception introduces an element of distance. I no longer experience that I am my body, but that I have a body.

It is hard to imagine the person so twisted as to discover beauty in pain. Not even Marquis de Sade travelled so far in his own peculiar warp as to find pain beautiful. Three instances of change seem to me particularly useful for exploring the strange link between pain and beauty. These moments I will call the classical, the sentimental, and the postmodern. The term “moments” frees us from endless wrangling about the definition of historical periods and cultural movements. I mean simply that art at a specific time represents pain in ways that help to challenge and to shape the values of the surrounding culture. The link between beauty and pain that these three moments illuminate is thus far from solely a matter of aesthetics. Beauty, after all, even though it has almost vanished as a serious topic in contemporary thought, still influences our behaviour in countless practical affairs of life. Even without knowing it, ideas of beauty hold a significant influence on the ways we come to experience pain (Morris, 1993, p. 199).

Pain in my work denotes the often nonverbal experience of sensation as opposed to the cognized memory, analysis or naming of that sensation. It often makes confusing the transition from somatic experience to its analytic perception, like in the cases of hysteria, cancer and AIDS. My starting point is the working definition of pain proposed by the International Association for the Study of Pain (IASP): pain is “an unpleasant sensory and emotional experience associated with either actual or

potential tissue damage, or described in terms of such damage”.¹ According to the Association, two quite different kinds of pain exist. The first is termed *nociceptive*, responsive to physical stimuli, because of its direct link with noxious stimuli, or psychological because it is a key component of the body’s normal defense mechanisms protecting the body from a potentially hostile external environment. This pain is associated with tissue damage or inflammation.

The second is termed *neuropathic* and results from a lesion to the peripheral or central nervous system. This can disrupt the ability of the sensory nerves to transmit correct information to the thalamus, and hence the brain interprets painful stimuli even though there is no obvious or documented physiologic cause for the pain (Hadjistavropoulos and Craig, 2004). Many types of pain have been further specified in terms of origin, related nociceptors (pain detecting nerves) and response to medications. Acute pain is defined as fast and sharp short-term pain or pain with an easily identifiable cause. Chronic pain is medically defined as pain lasting six months or longer, often more difficult to treat than acute pain. Cutaneous pain is usually well-defined, localised pain of short duration, caused by injury to the skin or superficial tissues. Somatic pain originates from ligaments, tendons, bones, blood vessels, and even nerves themselves, producing a dull, poorly-localised pain of longer duration. Visceral pain originates from body organs and internal cavities and is extremely difficult to localise, it can be a *referred* pain, where the sensation is localised to an area completely unrelated to the site of injury. Phantom limb pain is the sensation of pain from a limb that one no longer has or from which one no longer gets physical signals. Nevertheless, the term “pain” is generally used to define all sensations that hurt or are unpleasant, not only the transmission of noxious impulses: pain is always a “subjective state” (in: Morris, 2000, p. 9).

Freud (1961) was the first to interconnect physical and psychological pain at the intersection of the whole psychological reality of the subject – its dreams, subconscious, love and mind. Freud argued that organ pains and focused pain in general are the result of tangible representation processes, concentrating on one hurting place, which Freud called *narcissistic cathexis* (Thijs *et al.*, 2005).² In addition, Melzack’s gate control theory (Melzack and Wall, 2003) also contributed greatly to the recognition of pain as saturated with the visible or invisible imprint of specific human cultures. Gate control theory states that pain signals are filtered in the spinal cord by a “gate” that opens and closes under the influence of different factors, i.e. hormones or the stimulation of nerves. This theory suggested that pain is not a direct result of activation of pain receptor neurons, but rather its perception

¹Although this definition might seem formulated a while ago, it is still valid and can be found on the website of the International Association for the Study of Pain, even though other definitions have been re-evaluated in 1994: www.iasp-pain.org

²Particularly research on chronic pain and its psychological, social, and cultural components has fundamentally modified the definition of pain as a matter of nerves and tissue damage.

is modulated by interaction between different neurons. Therefore, a stimulus that activates only nonnociceptive nerves (such as rubbing a sore spot with one's hand) can inhibit pain. In response to this stimulation of the fast conducting touch nerves, the gating mechanism within the spinal cord would then close. The impact of this theory on medical treatment for pain has been profound. Pain and its acknowledgement have come to be seen as dependent on our personal characteristic – narratives, cultural background, feelings, and mood, often regardless of the tissue damage. That has had large consequences on my work.

In my work I am using the terms 'pain' and 'suffering' alternately. Although the distinction between pain and suffering has consequence for ethics, for the purpose of this dissertation pain forms a concept embracing suffering, trauma and crisis. Cassell (1991) points out that pain and suffering are two distinct phenomena, claiming that suffering can often be relieved in the presence of continued pain by making the source of the pain known and exercising control over the experience. Suffering occurs when physical or psychological integrity is threatened. Conversely, he claims that people suffer when the pain is not particularly acute, when they anticipate it, are not sure about its origin or cannot gain control over it. Melzack and Wall (2003) also make a difference between those two terms. Suffering is defined as the negative reaction caused by pain, stress, loss and other psychological complaints. However, the progressing knowledge in psychology and neurology has blurred the differences between those two terms. I would argue that the split between pain and suffering reinforces the binary between body and mind, and employs the *Myth of Two Pains*, a basic belief that pain can be separated into physical and mental pain (Morris, 1991, p. 9). Particularly in the situation of making/looking at art, bodily pain enters an aesthetic and cultural dimension. Being the result of a biochemical process, the networking of nerve pathways and bodily reflexes, pain is at the same time a subjective experience formed by specific minds, senses and cultures. The obsolescence of the split has been confirmed by recent medical developments: as brain-mapping studies show that pain centers and emotion-processing regions often overlap there is practical impossibility to differentiate physical and emotional components of pain (Melzack and Wall, 2003). Sensory, cognitive and emotional processes all contribute to that one word, which in English has remarkably few synonyms.

My assumption is that art could be a way to enable pain to enter wider shared discourse and conceptualization.³ When placed within a "case study," stories of illness and pain may gradually become devoid of meaning for those who live them, changed by a recipient's own experience. At the same time, art and literature offer an alternative to medical terminology for describing one's experience with illness. My intention is not only to show how pervasive of a presence pain is in artistic

³It is important to note that I do not consider art only as a group of components such as production, criticism, funding, iconographic and stylistic sources, exhibitions *et caetera* (Pollock, 1988). Here and throughout all my research I see art as a social practice, as a compendium of power relations, ideological practices and social and cultural limitations.

discourse, but also to point out, since visibility is an imperative of contemporary social and cultural life, the ways in which pain is being made visible here. In addressing visual culture, my methodological assumption is that we can derive certain forms of knowledge on pain from visual images. The experience of pain is shaped by representations, simultaneously pushing against themselves. This antagonism presents an enormous challenge to art. Vision and self knowledge are intertwined – the anxiety of pain and its impact on a viewer informs his/her sense of self. Art is to me the domain where that process is most vividly and played out on different levels. The works I present help me investigate how images of pain contribute to configurations of “I”. I also want to explore what those artworks might tell about the lived experience of pain and how it is communicated to a viewer. We not only feel pain, we also observe it. If work of art is a sign-producing activity unfolding itself within a social context (Bryson & Balaban, 1991), then we have to read that sign as engaging our own positioning and reaction to it. Moving beyond the common cliché that pain is necessary to create art, my primary interest lies in how art practice could be making calls for a rethinking of the concept of pain.

I.2. Pain and communication. Representing the unsharable

It is frequently said that pain is incommunicable and even that it “destroys language”. This paragraph offers a phenomenological account of pain and then explores and critiques this view. It suggests not only that pain is communicable to an adequate degree for clinical purposes, but also that it is itself a form of communication through which the person in pain appeals to the empathy and ethical goodness of the clinician. To explain this latter idea and its ethical implications, reference is made to the writings of Emmanuel Levinas. Perhaps one of the causes for this approach is that pain is thought of as not directly communicable. As a result, clinicians must use an objectifying diagnostic form of judgement in relation to it and the treatments that they prescribe are based only upon such judgement rather than upon the communication of pain on the part of the patient.

Pain is defined as “an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage. What this definition highlights is firstly the unpleasantness of pain. It goes without saying that, standardly, pain is something we would rather be without. The second most obvious point that this definition highlights is that pain is an experience. It makes no sense to say that a person is in pain but that he does not feel it. A person may suffer an injury or a malady of a kind that typically causes pain but, unless they feel it, they are not in pain. Thirdly, this definition points to the body. Pain is an experience that is felt in the body and, indeed, usually in specific organs or regions of the body. Even though there are cases such as those of phantom limbs or of psychogenesis, where pain is felt in the absence of any bodily lesion, pain is always felt *as if* it were located in a specifiable portion of the body. This point is important in that it

allows us to distinguish pain from other forms of suffering. The grief that one might feel at the loss of a loved one or at some other kind of disappointment, the fear that one might feel at the thought that one might be suffering from a disease, or the depression that one might feel at the thought that one's illness has rendered one's projects meaningless, are sometimes described as pain, but they do not fall under the official definition. They are emotions and forms of suffering, but they do not have that essential reference to the body which the definition of pain points to. Nor do they have that phenomenological quality of physical hurt which is definitive of pain. This is not to deny that such forms of emotional or spiritual distress may be accompanied by, or cause, visceral forms of discomfort, but such a bodily state should be thought of as pain separately from the grief, fear, or depression that may be causing it. And pain is, lastly, an emotional experience because of our negative reaction to it. It hurts and we want to be rid of it. Even if we had a theory about pain which allowed us to accept it intellectually, as when we call to mind the evolutionary advantage of being able to feel pain, or understand pain to be a warning of something gone wrong in the body, or when we consider pain to be an acceptable part of God's plan for humanity, we still feel it in its immediacy as unpleasant. To overcome this feeling and to accept it or even feel blessed because of it requires that one objectifies the pain to some degree. It requires that one ask what the merits of pain as such, or of a pain such as mine, might be. It requires that I place a little distance between myself and my pain so as to frame it in an intellectual construct.

Pain is a hurtful mode of subjectivity; a way of being which is distorted, tortured, and distressed. Pain is a form of suffering. It is inherently unpleasant. Like other forms of suffering, pain leads its bearers to powerlessness, alienation, loss of control, and anomie, and the withdrawal of the self into itself. Relief and comfort will therefore comprise, not only alleviation of the pain, but also the empowerment of the patient, their enlivenment, their re-engagement with the world, and the re-establishing of communication and rapport with others. As a mode of subjectivity pain is intensely private. As a mode of subjectivity my pain is radically my own. There exists no objectification of it that would allow another to share my pain.

If pain were as intensely private as I have just suggested, therefore, how can it be an operative and salient feature of a clinical situation for a clinician to respond to? The idea that pain is intensely private and non-communicable would seem to suggest that nothing can be done to overcome the isolation that severe pain forces upon its sufferers and that there is nothing communicable for a responsible clinician to respond to with caring. An observation frequently made about pain is that it is incommunicable. These sentences from Virginia Woolf are often quoted: "English which can express the thoughts of Hamlet and the tragedy of Lear has no words for the shiver or the headache . . . The merest schoolgirl when she falls in love has Shakespeare or Keats to speak her mind for her, but let a sufferer try to describe a pain in his head to a doctor and language at once runs dry" (Autton, 1986, p. 2). It is suggested that the words that we do use to describe pain: words like throbbing, piercing,

persistent, stabbing, and so forth, are clumsy at best. They are metaphors and do not carry literal meaning.

It is also said that such descriptions are not as helpful towards the clear delineation of symptoms and the making of diagnoses as are the visible or otherwise detectible lesions found in the body. After she notes that pain is frequently described with metaphors, the claim that pain is essentially incommunicable is expressed by Irena Madjar in this way: “Thus, because bodily pain resists objectification in language, it is marked by a strong element of *unshareability*. In other words, pain silences and actively destroys language” (Madjar, 1997, p. 48). This seems to me to overstate the case. Firstly, there is nothing unusual about experiences having to be described in metaphors. Try describing the beauty of a sunset without using them. That one needs metaphors here does not imply that the experience is radically private, incommunicable, or unshareable. Secondly, all experience is inherently unshareable in some sense. It is in the nature of experience, being subjective, that it is the experience only of the experiencer. As such it is not shareable. It cannot be another’s experience. You cannot make another feel a pain by talking about it. But this is both obvious and uninteresting.

Virginia Woolf may be right in suggesting that our repertoire of words is relatively poor for communicating pain, but this just shows why we need a range of metaphors. Indeed, we often use them quite successfully. It is noteworthy that attempts have been made to systematise the descriptors of pain into a more coherent symptomology. The McGill Pain Questionnaire developed by Melzack and Torgerson (Smith, 1998) explored the connotations, relationships, contrasts, and similarities between the metaphors used in describing pain and their relation to actual maladies. But what does it mean to say that pain can destroy language? Elaine Scarry has argued this point with reference to such extreme situations as torture and war (Scarry, 1985).

There are a number of philosophical reasons for the difficulties that attend the communication of pain. The first of these is that pain is not “intentional”. What this technical philosophical term means is that it is not *about* anything and does not refer to anything aside from itself. Other subjective states of persons are not like this. When I am angry, I am angry about something. When I feel fear there is an object or an imagined object that I am afraid of. What my pain does is draw attention to itself. It comes to preoccupy me in direct proportion to its severity. It is not a way of apprehending the world, but a mute and brutal presence that pushes all other subjective states, and the world itself, to the periphery of my attention. The consequence of this for our problem is that pain becomes hard to describe. I can describe my anger by saying what it was that annoyed me. I can describe my fear by saying what I was afraid of. But I cannot describe my pain in this way. I can refer to that part of my body in which the pain is located, of course, but this is not identifying an intentional object of pain so much as its locus.

The ways in which I can describe my pain in language (as opposed to expressing it in gestures) is certainly limited by this feature. Another technical argument, and one offered by Scarry, is that pain

defeats language because the primary function of language is to refer to objects. When I say “hat” in an appropriate context, I can be taken to be referring to a hat, whether a particular hat present in that context, or the more general idea of a hat.

It is then suggested that pain is not an object in the world in this way and so is not an object that words can refer to. Now, if this argument were sound, then it would not be possible to speak about any of our inner, subjective states. What am I referring to when I say that I am happy or that Mary is happy? Without going into the technicalities of linguistic philosophy it might be enough to say that even in the absence of worldly objects to refer to, language requires objective criteria for the ascription of such terms. I can call Mary happy on the basis of seeing how she behaves. If she were crying at the time, my description can be deemed to be wrong. Similarly, I can call myself happy when I notice myself behaving in certain ways as well as experiencing certain feelings.

It is the burden of Wittgenstein’s so-called “private language argument” that I cannot attribute inner states to myself solely on the basis of my own experience of those states. I cannot have learnt what the word “happy” means just by noting my own internal states. How do I know that the state I am experiencing is the state that our language designates as “happiness”? By seeing that my expressions of that state are similar to the expressions that others evince when they are standardly described as happy.

And so it is with pain. Certainly the experience is irreducibly subjective. My pain is radically my own. But how do I learn to call it pain? I do so by noting that the way in which the term “pain” is used in the public domain is in order to describe a person who is grimacing, holding his mouth and making a dental appointment, or a person who has suffered an injury to his leg and is hobbling to a surgery for treatment. When such persons say they are in pain, they are not only expressing their inner state, they are also, in effect, teaching me what the word “pain” means. I will then be able to use the term to describe my own inner states when I suffer such or similar injuries, engage in similar behaviours, and experience hurtful sensations. And having learnt it, I can use the term to describe similar inner states of mine which arise in differing contexts. In this way language can refer to pain, even though pain is not an object in the world. But a further function of language is to express our selves in an intersubjective world. Most of the times, our communication is purposeless. It is an expression of sociability and of our need for community. Perhaps the thought that pain destroys language means that it destroys such sociability. One effect of pain that is relevant here is that pain isolates. Pain presses its victims back from the world into a preoccupation with the state of their bodies, and in so doing it isolates persons from the world and from others. Despite what I have been saying about the communicability of pain, it remains true that it moves the boundary between subjectivity and the world inwards.

But persons in pain withdraw into themselves. For them, in proportion to the severity of their pain, their world reduces to their own isolated reality. The world ceases to engage such persons. They are not able to forget themselves and be fully in the world. They are not able to throw themselves into relationships with those around them and partake of the common subjectivity characteristic of social existence. Their pain crowds out all other interests and commitments. Their attention is focused upon themselves. They are obsessed with the states of their own bodies. It is not just that their experience is their own or that it is unshareable. All subjective states are like that. It is not that they do not have the words to express or describe their pain as others have argued. It is that they are not able to escape the prison of self-involvement which their pain has created around them. There is no reality for them but their own suffering. There is no subjectivity present to them but the nagging and searing insistence of their own tortured and isolated subjectivity. The objective and intersubjective world which language establishes and refers to are no longer available to the patient in severe pain. Thus a new form of intersubjectivity needs to be established: namely, one grounded in empathy.

The other person is always “Other” in the radical sense that he or she cannot be appropriated by me in my understanding or perception. I cannot understand another person in the way that I can understand a motor car, for example. In the case of a motor car, even without too much mechanical knowledge, I can completely grasp what it is, what it is for, and how it stands in relation to me. I can put it into the category in which it belongs. I cannot do this with another person. Even a person whom I know well (indeed, especially a person whom I know well) will always be beyond my intellectual, emotional, or conceptual grasp. The Other is infinite and ungraspable. It follows from this, for Levinas, that the way in which I approach another person, my comportment and attitude towards them, is ethical in nature from the very first. The ethically proper comportment that I ought to adopt towards the Other is that of letting their mystery be. I must not appropriate or classify. I must leave space. I must be open to encounter. I must be prepared to be surprised. I must be generous in my comportment, accepting in my attitude, and caring in my approach.

The point that I wish to draw from this is that, despite my arguments showing that pain is more communicable than many have claimed, there is still something important being expressed in the claim that pain is radically private and unshareable. Like so many other identity-constituting features of subjectivity, pain is a mystery to the one who observes it from the outside. It is part of the infinite and ungraspable nature of the “Other”. The theoretical reason for this is that, to me, your pain is not a phenomenon. It is not a percept. It is a modality of your subjectivity. It is a condition of your mystery, of your otherness, of your infinity. While you can convey much of it to me by the things you say, the metaphors you use, or the bodily or verbal gestures that you evince, it remains *your* pain. At the deepest levels of encounter, I cannot grasp it or classify it. Even if I compartmentalise it as part of a diagnosis or treatment regimen, I cannot take possession of it or make it mine. I must respect it as yours. The irony of the argument is that pain is indeed mysterious. Just as the subjectivity of the other

is mysterious, so that modality of their subjectivity which we call pain is mysterious. Pain amplifies and intensifies the interpersonal appeal that exists between people who engage in genuine encounter. It amplifies it because the need of the other is greater and more immediate and because the comportment of the clinician is one of caring and benevolent attention. It intensifies it because, along with the lure of mystery and infinity which each person presents to another in encounter, pain highlights the vulnerability and finitude of each one of us.

Pain is one of the commonest symptoms reported to doctors yet ineffective communication is a continuing challenge and remains a barrier to adequate assessment, understanding and treatment (Kimberlin, 2004). Modern concepts of pain have moved from the elusive simplicity of a pathophysiologic lesion that represents the 'seat' of a pain, towards a complex neural and cortical process that is now frequently thought to 'explain' pain, including its cognitive and affective elements. With this has come the realisation that the physician's and surgeon's roles have moved from excision or complete cure, to management, palliation and enabling some healing of the self. As a result of this paradigm shift it is self evident that effective communication is essential for success, but surveys leave no room for complacency about how well this takes place in pain clinics (Kleinman, 1988).

A chasm exists between the subjective experience of pain and its objective measurement on a wide variety of validated scales. Most measures are language based, such as the McGill Questionnaire and verbal rating scale, while verbal metaphors remain formulaic, offering the individual little opportunity to express how they feel, or to contextualise the symptoms within a personal narrative. Furthermore, a well-documented stasis exists in many pain consultations as a result of physicians and patients searching for different meanings denoted by symptoms and wishing to protect different agendas (Kenny, 2004). The physical, metaphoric and linguistic space in which pain consultations take place can therefore be fraught with a sense of impasse, albeit seldom explicitly acknowledged during the encounter, as many of the images made during the original project suggest, One solution may lie in finding a language with the capacity to explore a patient's experience of pain beyond the physiological, which could lessen the divide between the significance of the pain as experienced within the sufferer's social and psychological schema, and the scientific world of current medical understanding of chronic pain. Kleinman describes the capacity to achieve some integration "between physiological, psychological and social meanings" as core to patient complaints (Kleinman, 1988).

Could a visual representation of individual pain provide a bridge between the self and the other? Could photographs depicting the personal experience of pain validate the subjective experience of it, so avoiding the need to prove pain's existence, especially when there are no physical signs from it? Even in this digital age with our awareness of the ambivalence of the relationship between 'photography' and 'reality' we still ascribe an authenticity to that which is captured photographically, making it a particularly useful medium for recreating the reality of another.

In 2001/02 visual artist and pain sufferer, Deborah Padfield, worked with pain specialist Charles Pither and chronic pain patients from St Thomas' Hospital in London to co-create photographic images of pain, as a means of eliciting a different type of verbal dialogue in hospital about pain (Padfield, 2003). Following reports by patients that the process and resulting images helped discussion of the nature and impact of pain on sufferers, a feasibility study was conducted to examine the effect of using pain images during consultations with unselected patients of pain clinics interested in participating in an evaluation.

The social sciences have used photographs to help elicit narrative almost since their invention in the 19th century. Photographs have been seen as potentially revelatory in medicine ever since they were used in the 1850s by Dr Hugh Welch Diamond, (Leggat, 1999) the French neurologist Duchenne (Duchenne, 1976) and by Jean-Martin Charcot, in the context of diagnosing and representing a variety of neurological problems, contentiously including hysteria (Huberman, 2003). But in the late 20th century this use gave way to forms of photo-elicitation and phototherapy pioneered by artists, such as Jo Spence and Rosy Martin, who used the construction of photographs to revisit and transform past experiences, including illness experiences (Wang, 1996). Jo Spence's work affirms the power of photography to return a sense of control to the patient-photographer over their illness and how that illness is represented to others. Versions of phototherapy have evolved since in various arenas of human suffering. Recent studies such as "Photo-voice" a technique researched by Wang, involves participants in producing and analysing images themselves or collectively with another professional (Thoutenhoofd, 1998). Thoutenhoofd studied the use of photographs to explore deaf people's worlds, terming it 'autophotography', and much research has been done into the usefulness of children's drawings for diagnosing pain; pain charts and scales being developed using pictures or numbers, to describe their pain and/or drawings of pain (Unruh, 1983). However, the study reported here is the first study we know of in which photographs

have been used within pain consultations to help in understanding the subjective experience of pain, with a view to improving doctor-patient communication.

A message that emerges from these results is that the resource appeared useful in a variety of ways. Arguably it is the photograph's potential to trigger memory and construct new and multiple realities for viewers that makes it an apposite medium in this sort of context. The writings of Barthes, (Barthes, 1993) Berger (Berger, 1989) and others highlight the relationships between photography and memory, photography and language, and conscious and unconscious experience (Scott, 1999). In this small study, we found that photographic images did appear to bring some elements of pain experience out of unconscious and into more conscious dialogue and control.

The significance of images is highly individual but also influenced by gender, culture and religious viewpoints. It is in the collaborative process of discovering and dissecting these meanings that their significance to, and impact on, pain experience can emerge. Narrative meaning is mediated through language; and here language has itself been mediated through images. Negotiating between image and language affords status to both image and word and also to patient and clinician, encouraging a sharing of the roles of listener and speaker, helping to equalise the consulting space, but, first of all, helping to reconstruct the identity.

When forming a working definition of representation for the purpose of this research, I was often amazed by the contemporary transparency of the term. "Representation," re-circulating in a multiplicity of discourses, has been stretched for miles across cultural studies, art history, feminist theory and other disciplines. It has become, both in popular and in academic writing, a *doxa*, a naturalized assumption. Simultaneously, the multiplicity of discourses on the body (such as medicine, biology, demography, psychology, sociology, psychoanalysis, anthropology and art) has dislocated somehow the definition of representation of the body.

I.3. The history of representation of pain in visual arts

Not all art is about human suffering by any means; the arts celebrate the joy that life brings as much as they mourn the losses that mark it. Celebration and mourning are both part of human existence; they have found expression in song, dance, drama, visual art and poetry since human beings have existed on this earth. *Poiesis*, the capacity to shape our experience through the imagination, must take account

of both dimensions of our lives. I will focus on the ways in which the art can come to terms with pain and human suffering.

What is the art of suffering? Is *poiesis* capable of responding adequately to suffering? What forms must it develop to do so? Can suffering be represented? In what way? All experience resists representation, suffering perhaps most of all. How can we possibly find a way to represent the unrepresentable, to place an experience that overwhelms us into a delimited form? How, above all, to transform suffering into beauty since all art strives after beauty? We need to re-imagine suffering in order to understand the role that imagination plays in the experience of human suffering. In order to do so, we must deconstruct suffering to see how the concept blocks imagination and artistic transformation. But we cannot stop there- we must also look at successful ways of shaping traumatic experience imaginatively. We must explore the art of suffering.

The art would lie in discovering how to avoid merely stiff, passive resistance and how to use pain as a medium for a fluid, creative artwork. The distance between accepting pain and seeking pain is immense. Our view of art and artists still remains powerfully haunted by such portraits of self-mutilation as the bandaged Van Gogh. European Romanticism beginning in the late eighteenth century made pain seem indispensable to the artist- a tormented, unworldly spirit tightrope-walking over the abyss- and such self-portraits in pain may prove irresistibly seductive to an artist who suffers great hardships.

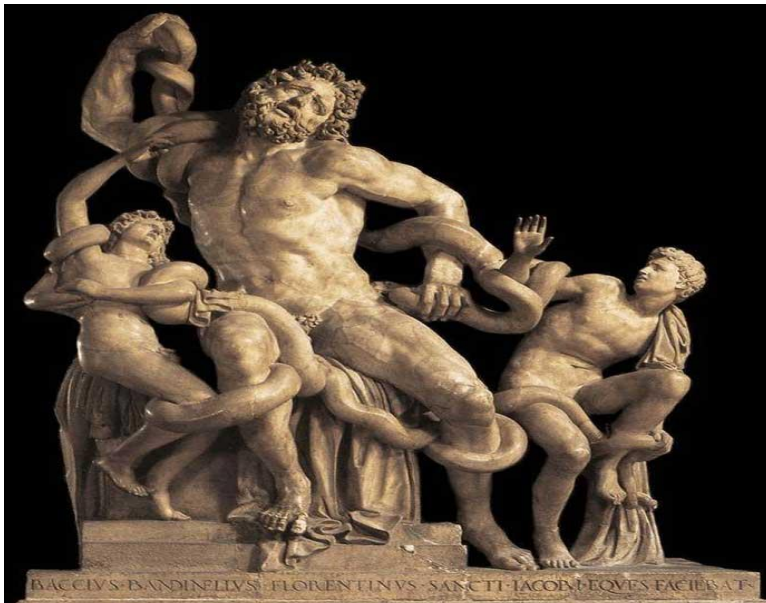
Along the history there was made a clear distinction between mental and physical pain. While writing



this thesis I was asked several times what kind of pain I am approaching. Let's consider the painting "Anguish" by George Dergalis. Is such anguish- suffering so vividly embodied- really best understood as "mental" pain? Does it make sense to say that the physical pain of headache remains completely separate from the mental pain of anguish? It is always possible, of course, to argue that the painter George Dergalis, trapped like all of us in the inadequacies of language, has given his work a misleading title. My approach however is to assume that we can learn much by exploring the insights that artists bring to the experience of pain. The painting of Dergalis, I think, encourages us to question the adequacy of an understanding of pain that separates mind from body.

George Dergalis: *Anguis*

In the history of Western Art, one antique sculpture furnishes us with the prototypical icon of human agony. Since its unearthing in 1506, from a property near the church of Santa Maria Maggiore in Rome, the Laocoon, or “Laocoon Group”, has been an object of sustained if variable attention. Yet even those who remain nowadays unmoved by the sight of the Trojan priest Laocoon writhing against the serpents sent to punish him and his sons must acknowledge this statue’s prime historical importance as a focus of discussion about the aesthetics of pain. There is no doubt that the carving of Laocoon is intended to delineate a body taken to the extremes of pain, though it took a biologist to point out that the corrugations of Laocoon’s brow are exaggerated beyond anatomical accuracy. But such sculptural license is beside the point; and, for my present purposes, the noise implicit from Laocoon’s straining features does not really matter.



The Laocoon Group. Possible dates for the making of this sculpture range from the second century BC to the first century AD.

No one ever seems to have considered the question: whether the sculptors of the Laocoon intended their work to be a masterpiece illustrating the deepest pathos of the sublimest character in the contemplation of the human mind. The ancient Greeks hold no exclusive rights to tragic sensibility. That would seem a truism too obvious to state. Yet how can we demonstrate the force of it in cultures that have left no

literature to match the preserved record of Greek tragedy?

We can trust the language of images alone, we should credit the Egyptians with having at least afforded the occasions and the space for the external manners of lament. The tomb at Amarna thought to be that of Princess Meketaten, daughter of Akenhaten and Nefertiti, once presented a painted index of these expressions of grief: Meketaten seems to have died while giving birth, herself perhaps only ten or eleven years old; and when the pharaoh deeply wept, his grief was contagious. Those tomb-paintings are cracked and broken now. But there is

plentiful evidence in Egyptian art generally to show outbursts of sadness put into clichés of desolation.

Figures kneeling beseeching, falling faint, head-slapping, hair awry- these may fairly be



Lamenting Women, from the Egyptian tomb of Ramose. Scene excerpted from the papyrus of a scribe called Ani, in the “Theban Book of the Dead”, 19th Dynasty (c. 1250 BC)



Marsyas Suspended for Flaying

Copy from a group originally made in the mid-third century BC.

taken to be pictographs of tragic gesticulation. In all the Egyptian imagery of grief, however, there is no effort on any artist’s part to render the face as distorted by pain. The quest for naturalism in depicting human emotions was famously an enterprise of Classical artists. And the Laocoon statue traditionally stands at the end of this enterprise like some *non plus ultra*, or stylistic finishing line.

So, it is a difficult task to trace the Laocoon’s antecedences. Is it possible

to establish any sort of aesthetic decorum in antiquity for the graphic representation of pain? And a task within this task is to avoid retrospective attribution to the ancients of intuitive tenets of Christian faith. In the early Middle Ages, the poet Dante, unable to contemplate Socrates amongst the damned, recruited honorary Christians from the schools of Athens; and during the Second World War, Simone Weil, while witness to the German occupation of Paris, constructed a reading of Homer which virtually incorporated him as a Messianic prophet. But the starting premise must be that for all the inklings of pity we find manifest in Classical thinking and literature, the essence of Christian belief is not there. In believers’ eyes,

Christ died for the world, so Christians translate by faith the extremity of passive suffering into sublime victory. Nothing in Classical antiquity remotely foreshadows that grace. To appreciate the gap one has the two myths where mortals are severely dealt with: the twelve children of Niobids, shot down with arrows because their mother had boasted her fecundity to the gods; or the satyr Marsyas, stripped of his flesh as the penalty for challenging Apollo on the pipes. The Niobids are not the multiple precursors of the Christian martyr St. Sebastian: their mother had slighted deities whose response was rapid and predictable. The satyr-piper Marsyas did not blaze a path for St. Bartholomew, he was flayed alive to punish vanity and his slow agony redeemed no one.

Agreeing on this basic premise- that the Suffering Servant has absolutely no claim to honour



The Sack of Troy

Details of a red figured vase attributed to the Kleophrades Painter, c. 480 BC.

in any of the moral systems devised by the Greeks and Romans- we may proceed to acknowledge Classical Greece as the birthplace of the Western literary genre we call “tragedy”. The story of Laocoon belongs to the epic of the fall of Troy and few would dissent from George Steiner’s salute to Homer’s telling of that story as the primer of tragic art (Steiner, 1961). It is also accepted that the development of tragic drama in Classical Greece was an important prompt to expressionism in the figurative art of the time. Wounds and death and anguish are tragedy’s flags.

Characters on stage gesticulate and howl: if the actors do it well and the tragedy works its proper effect (which the Greeks termed *catharsis* or “purging”), then the audience should howl along too. But two particular restrictions upon the theatrical presentation of suffering in ancient Greece should be noted: the first is that the conventions of Classical Athenian tragedy favored the carriage of violence by words; the second restriction may go some way to unpicking the conundrum of why tragedy should give pleasure or serve as entertainment. In fact, for the Greeks, tragedy did not necessarily yield the satisfaction of catharsis- that douche of emotions for the maintenance of sanity.

Perhaps the playwright's mistake here was not to mythologize contemporary events. About a decade later, a humble Athenian vase-painter produced his own little vignette of Troy's seizure, conceivably making an epitome or parable of what Simone Weil described as "the greatest of grieves that can come among men: the destruction of a city" (Weil, 1987, 24-55). On the shoulder of a vase made to carry water, the painter packs as much dramatic details as the field of illustration permits. Trojan defenders are dying on the floor. Half naked before her rape, the princess Cassandra clutches at an idol for sanctuary. Hector's widow Andromache picks up a kitchen implement and joins the fray; while old Priam on his throne is being hacked about. His bald head seeps blood, and on his lap is the mutilated poppet-body of his grandson Astyanax.

Pathos is conjured here- the palm tree wilts over the woman weeping below and even the godforsakeness too. This painted vase comes at a juncture of the naturalistic development of Greek art when there is yet none of the incarnate physical and physiognomical expressiveness that would appear in the Laocoon the statue. A gestural language of pain and doom is there in the vase scene: three figures clutch their heads to protect the implore, but facial muscles are not apparently exerted. Ignoring the question of what an artist was technically able to produce at this time, we may wonder: was this the consequence of artistic self-restraint?



Head of a Figure from the Temple of Athena Alea at Tegea
Attributed to Skopas, c. 340 BC.

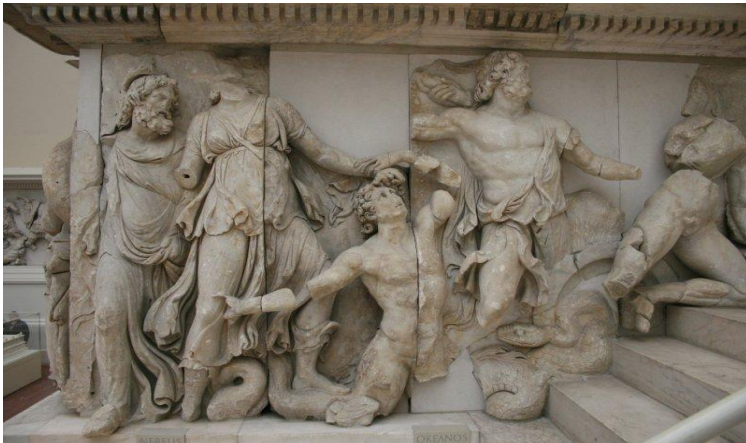
Around 400 BC a Greek painter called Timanthes attempted to depict the story of the sacrifice of Iphigeneia. Human sacrifice was not a custom of Greek religion, so it required some imaginative effort to reconstruct the scenario whereby Agamemnon, having boasted his prowess at hunting and thereby offended Artemis, was required to make amends with the goddess by sacrificing his daughter Iphigeneia. In an unusual fit of clemency and nicely so for those who would compare this myth with the Old Testament story of Abraham and Isaac, Artemis relents at the last moment. There is no the picture to confirm, perhaps a faded replica only. Having shown his the familial bystanders at the sacrifice in grief and lament,

Timanthes had used up his entire repertoire for depicting sadness. When it came to painting the face of Agamemnon himself, the artist could only resort to veiled head. There is a rival story concerning the lengths to which Parrhasius, another Greek painter from the fourth century BC, was driven by the search for expressive realism in a picture of Prometheus, drastic lengths involving no less than the fatal torture of a studio model. But since the work of Timanthes and Parrhasius does not survive, it seems unfair to question how far artists might solicit engaged response, compassionate otherwise, by means of naturalistic depictions of pain.

Nonetheless, scholars of Classical art have long been content to attribute a sense or motive of pathos to this or that artist, purely on the basis of appearances. Of the fourth century BC sculpture Skopas, for instance, we are told that he created a new heroic mode of reversed fortune for which the arched brows of his characteristic figures, however battered, convey intense but indeterminate pathos. Of the Laocoon and other groups, we are reassured that they are concerned not merely with heroism, but with heroic pain, suffering that ennobled.

Plato, pursuing in the fourth century BC the philosophical ideas bequeathed to the intellectual community of Classical Athens by Socrates, recognized that artists, poets and dramatists alike preyed upon the human capacity for sympathy and encouraged its expression. For Plato, pity sullied reason. Pity for others fostered a penchant for self-pity, a weakness. Moreover, it was a gender-inclined sentiment: naturally embedded in the disposition of a woman, emasculating to the reason-guided male. This scorn for pity, or moral lordliness over pity's emotional origins, would stem naturally enough from Plato's admiration for the physical resistance displayed by his mentor Socrates: in the *Symposium*, the image given of Socrates on military service- standing in the snow unshod and for hours, immune from normal bodily pangs of hunger and pain- foreshadows an ethic of self-mastery which makes pity an affront to the philosophic life. Plato's most important philosophical successor at Athens, Aristotle, was not only much more sympathetic to the aims of contemporary poets and artists, he was also intrigued to understand the nature of sympathy itself. In his *Art of Rhetoric*, Aristotle defined pity as a kind of pain excited by the sight of bad things, fatal or painful, befalling someone who does not deserve them. In his methodical way, he itemized a catalogue of occasions which may frequently turn pitiable, ranging from death and separation from loved ones to suffering physical deformity or disappointed expectations.

No pity for those who deserve their woes. Aristotle’s reasoning was soundly echoed in the teachings of one of antiquity’s most widely diffused philosophical disciplines, Stoicism. Stoicism originated about 300 BC and rapidly spread through the Greek world; it was further expounded in the Roman Empire and one Roman emperor, Marcus Aurelius himself, became



Greek Deities Triumphant over Struggling Giants

Detail of the frieze of the Great Altar of Zeus at Pergamum, c. 170 BC.

connection between Laocoon’s tormented form and the twisting, writhing figures of



The Crucifixion and Iconoclasts

Illuminated manuscript page from the Khludov Psalter, mid-ninth century.

an influential adherent. Pity, said the Stoics, is grief for someone who suffers undeservedly. Even then it was unwelcome. The Stoics sought the inner contentment which they called *apatheia*- freedom from emotion. Apathy was the Stoic’s cherished state of wisdom. A Stoic adherent standing before the Laocoon statue may or may not have made the stylistic

vanquished giants on the frieze of the Great Altar of Zeus at Pergamum. Philosophically, however, the similarly agonized bodily movements and facial contortions would be attributed to a shared rationale of deserved suffering. Laocoon’s protestations amount to the histrionics of impiety. So too at Pergamum the giants who would challenge the divine order wear grimace-rippled masks of angry pain. Their corrugated brows alone bespeak villainy. For contrast, consider the faces of the Olympians as they sally against those reptilian giants. Serenity of expression is a feature that unites all the deities, however strenuously they are fighting.

It follows to retrieve an iconographic curiosity

from the centuries of early Christianity. Why, when the literature of Christian Martyrdom was so adoringly descriptive of fleshy pain and the Hell-quickening conduits of blood, were images of martyrs so anodyne, so clean? Why, in particular, was the exemplary pain of Christ crucified never made explicit in this period? Literally so: difficult to see, difficult to imagine. Our familiarity with the Cross as a logo, with Christ Crucified as amulet or homely presence, clouds our capacity to comprehend the original abysmal horror of what Latin legal language deemed to be utmost punishment. Crucifixion was a punishment with a truly putrid reputation in the Roman world. It was death deserved by the most unworthy of all unworthies; it was death with grim humiliation, ignominy and abasement. Who on earth would want its souvenir or remembrance?

The distress of artists and the aficionados of icons during the period of Iconoclasm has been documented well enough. We need merely observe here that for some while, the painters of Christian images risked forms of torture and persecution peculiarly consonant with the treatment of the martyrs in the Roman Empire. And when the iconophiles eventually prevailed, we may almost sense a new charge of graphic energy being levied as vengeance. While clerics and theologians wrangled over the control and codification of sacral images, the artists, as it were, stole a march upon them. Our attention may be drawn to a page in a ninth-century manuscript known as the Khludov Psalter. We see Christ robed put spouting blood from the Cross and the ugly features of a soldier proffering the vinegar-loaded sponge. Adjacent are two known Iconoclasts, busy whitewashing a tondo icon of Christ. Their sponge-on-a-pole is dipped into a chalice of whitewash which plainly imitates the chalice of



Christ Crucified

Mosaic in narthex of the Katholikon (main church) of the monastery of Hosios Loukas (Saint Luke), by Mount Helicon, Greece. Before 1038.

vinegar at the foot of the Cross. Antipathy towards images is thereby judged equivalent to the mockery of Christ in agony.

Christ in agony. The Roman Christ whose image appeared within a century went bare-legged and genial. By the close of the first Christian millennium, Christ was otherwise envisaged. He was no

longer triumphantly Apolline. Around the year 1000, not far from Apollo's great oracular site of Delphi, the monastery of Saint Luke, was built and in its chapel narthex we find a new reckoning with the prospect of Christ Crucified. Here we are served with a body slung into the meander of collapse and invaded fivefold by open wounds. Here is a face creased with weariness and the pain-stalked surrender of life. Flanked symmetrically by Mary and John—two bystanders at once admiring but downcast—this monumental cross proposes a revisionary signal of Christian affirmation. This valediction from Saint Paul to the Galatians launched the authority for what we see on the walls of the monastery of Saint Luke: a fresh aesthetic of devotion. It may be that the developed liturgy of the eucharist was driving the message of Christ's sacrifice and therefore fostering more intensive remembrance of Christ's suffering for mankind. But Iconoclasm's disputes had cleared the way for a revived confidence in the power of images. It was the power not only to expose or mediate doctrine, but to produce a Second Nature: the artist's privilege of imitation or mimesis. Orthodoxy decreed that Christ was to be worshipped with the image, not in the image. But the professed vocation of imitating Christ Incarnate would soon require artists throughout Christendom to strive for mimetic fidelity in the image of Christ Crucified and seek, accordingly, to prompt the response of sheer grief.



Rogier van der Weyden: *Detail of the Virgin Supported by St John*



The Roettgen Pietà

Middle Rhenish wooden sculpture, c. 1300

In the same context, a frequent motif is that of *Mater Dolorosa*. Only a twentieth-century Surrealist would be so delinquent as to show Mary spanking her infant son. Medieval image-makers accepted the histrionics of Mary's role as *Mater Dolorosa* without demur. Several Flemish painters, notably Jan van Eyck (c. 1395-1441), were so given to depicting the Madonna that they may be called Marian specialists, of those who showed Mary's grievous collapse at the foot of the cross, Rogier van der Weyden (c. 1399-1464) seems most extravagant in costume and gesture. Immaculately robed, his Mary will fall backwards in a faint, or fling herself to clutch at the cross, either way, she leaks globular tears.

By the sixteenth century, when Michelangelo attempted several sculptural groups of mourning over the lifeless Christ, the formal image of a Pietà would be charged with eroticism, or, at least, suggest the logic that the sorrowful Virgin knows no masculine body save that of her dead son. A German limewood group made at the turn of the thirteenth to fourteenth centuries may reflect the expressive requirements of this moment as staged in popular Passion plays whose audience was everyman. Christ lies awkward there, like a knotty manikin. His mother's face is pulled, appalled; her mouth squared in the wake of the intolerable. Mary has been characterized as alone of all her sex, but in the medieval fostering of Mary's image as *Mater Dolorosa* there is a strong sense that if Christian faith is anchored by the capacity to empathize with the suffering of Christ, then women are, as a gender, better disposed to show that faith.

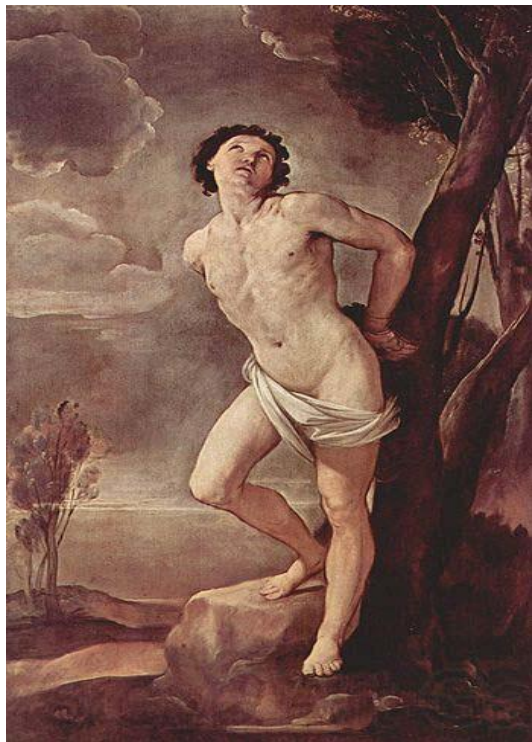


The nineteenth-century Swiss artist Arnold Böcklin has tidied the Christ's body to a near-immaculate state of repose and allowed a fuller swathe of drapery across the holy loins; more significantly- he has supplied the comfort of a howling attendant – Mary Magdalene, mourning as extravagantly as any music-hall heroine.

Some fifteen drawings survive of the hours Rubens spent with the Laocoon. The painter took diverse angles of study from around the group. He returned to his native Antwerp, in Flanders, late in

1608, where he was soon commissioned to undertake two enormous local projects. First was a triple altar-piece for the church of St Walburga, for which Rubens produced a *Raising of the Cross*. The Christ of Rubens departed from Flemish tradition: outstretched here was no spindly, slack-bellied ascetic, but a powerful alumnus of the Classical gymnasium. Then, in a similarly huge triptych painted for Antwerp cathedral, Rubens had this cumbersome champion hoisted down. At its heart this deposition from the cross by Rubens is no less Classically-inspired than Raphael's panel of a century past. Light beams on to and away from a central figure which has ceased to struggle, but which is caught, literally, in Laocoon's schematic pose. And, as if to heighten that figurative recall of the pathos formula, Rubens brings on a further member of the Laocoon Group. He shapes Nicodemus, descending ladder on the right-hand side of the composition, into the attitude of Laocoon's elder son.

Understanding pain as a medium of visionary experience can help account for the almost loving recitation of gruesome martyrdoms so familiar from the lives of the Christian saints. Most of the martyrs passed through barbarous suffering. Such suffering, of course, holds an almost sanctified place in the process of sainthood as a test or trial of faith. Bodily torment thus assumes specific meaning as a sign that points to a realm of eternal truth beyond the



Guido Reni: *Saint Sebastian*

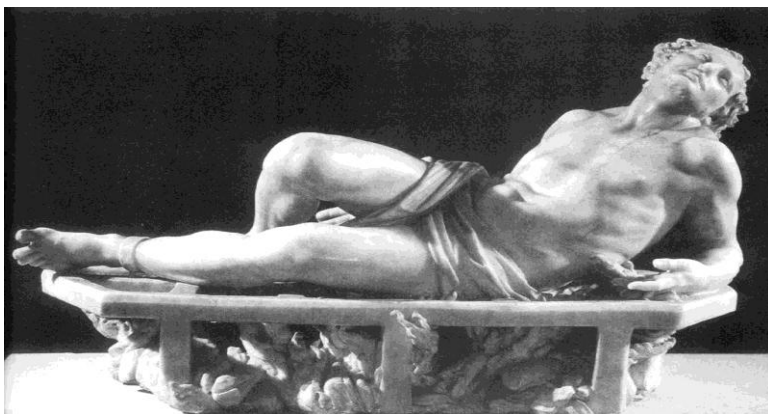
perishable body. Yet we still have not explained why Saint Sebastian, instead of Saint Stephen or Saint Dorothy, seems to have held such a peculiar fascination for medieval and Renaissance painters. One reason for this appeal probably has less to do with visionary experience than with the link between pain and beauty.

A famous painting by Guido Reni shows Sebastian enduring martyrdom with the sensuousness of a languid Greek god. Neoplatonic traditions might here encourage some viewers to understand physical beauty as the outward expression of a beautiful soul.

Visionary pain sometimes contains a powerful element of sensuality, and an eroticism latent in the paintings of Saint Sebastian finds more open expression in the spiritual experience of

female mystics. Arrows, of course, might come from Eros as easily as from Diocletian's archers. In fact, Guido Reni's Sebastian conveys the same mingled erotic and spiritual power that infuses Bernini's famous sculpture of another visionary figure in whom rapture and pain seem strangely united: Saint Teresa of Avila. Pain is a vital element in Teresa's devotional life. Indeed, we might consider her a female counterpart of Sebastian: arrows, pain, beauty, eroticism are inseparable. Teresa's erotic spirituality seems to grow in importance at the very moment when Sebastian's influence begins to wane.

Bernini, the sculptor now acknowledged as captain of the Italian Baroque, was scarcely out of paternal apprenticeship when he fashioned the image of his holy namesake St Lawrence. It may have been a technical challenge: how could a sculptor show the flames of this martyrdom, which hitherto had been shown only in painting and mosaic? By any standards, let alone those ones might apply to a sculptor only sixteen years old, the result is impressive, and certainly true to the original narrative of the martyr's fate. Upon a solid but busily flickering gridiron, St Lawrence reclines on his left elbow as languidly as any Roman banqueter, with his head tipped back in voluptuous satisfaction. Torturers require noise for their gratification, but this is the victim who thwarts them of an ambience shrill with shrieks of pain. True ardour and a carved attitude of rapture that is what Bernini would refine but not alter throughout his subsequent career. The tipped-back head, the pinioned legs and arms of the marble statue- again it is hard to exclude Laocoon's influence here.



The Martyrdom of St Lawrence

Bernini, in order to apprehend the effect that the fire should have on the flesh and the agony of martyrdom on the face of the saint, placed himself with his bare leg and thigh against a lighted brazier and recorded the result using a mirror. This seems like a measure of the sculptor's devotion to his

métier, not an explanation of appearances. But what constitutes "realism" here? Those moderns who cannot look upon Bernini's work without glimpsing the physical insignia of sexual bliss, underestimate the tenor of Counter-Reformation creeds. Bernini and his

contemporaries knew very well what lay behind St Teresa's transverberation. It was the result not of a male sexual prowess, but Teresa's own struggle to climb the ladder of ascent, the four stages of prayer that end in utter surrender to God.

The interest for anatomy and for representing everything in anatomical detail, resuscitated in the nineteenth century. One example is Géricault. He had been in Rome and had studied the monumentalism of bodies by Michelangelo. He went along to the Beaujon hospital in Paris, to contemplate bodies in states of wasting and decay. He went further: visitors to the large studio hired by Géricault for the sake of the massive composition of his work "The Raft of the Medusa" found that the artist was acquiring body parts of criminals decapitated by the guillotine and keeping them about his premises. It was a well established rule for painters submitting historical subjects to the critical scrutiny of the annual Paris exhibition or Salon that the many components of such paintings be individually accurate and studied. However grandiose the theme and overall vision, its details must show an artist's diligent hours of preparation. So Géricault's studio doubled as a temporary morgue. The bits and pieces he had to live with were the rotting dead.

When not used for rest or pleasure, a bed is synonymous with serious illness. So it is that the size of the hospital is measured on the basis of the number of beds they contain; including other objects that are transformed into stand-ins, designed for medical activities. Even the



Rembrandt: *Sick man in Bed*

clinic itself, understood as a place for the diagnostic examination of illness, takes its name from the Greek *klinē*, meaning "bed"; thus "clinical" has its roots in *klinikos*, meaning "of the bed". The themes of illness, death and the end of existence are subjects treated with great importance by artists. The works in question are often reconstructions of scenes from literature or historical events, but there are also paintings that have the value of private meditation or a

simple homage; works meant to serve as companions during the long, silent hours of illness, such as the drawing by Rembrandt of his wife, Saskia. The realistic description of the isolation and impotence experienced by an invalid assumes decidedly more dramatic tones in the works of twentieth-century artists. The details present a cruel vision of reality, and the sick person is shown abandoned to him- or herself. Illness seems to have won out over even suffering itself, leaving no space for a companion, let alone someone to stay with the sick person and await a reawakening.

Rembrandt makes skillful use of black, suggesting by means of dark shadows a sense of precariousness and dramatic premonition that infuses the entire composition. The artist does not merely depict reality, but expresses with extraordinary awareness the sick's woman suffering and sorrow, communicated through the position of her body and the expression of her face.

The woman portrayed is probably Rembrandt's wife, Saskia, whose health was seriously imperiled by a series of pregnancies, beginning in 1635- the year after their marriage with the birth of a baby that soon died (Bordin, 2010, p. 48). There were two more births of children who died prematurely and finally, in 1641 the birth of Titus, the only child to reach adulthood. The following year Saskia died.

A similar topic is represented in the work of Angelo Morbelli "The Sick Daughter".



Angelo Morbelli: *The Sick Daughter*

A flicker of light entering the room through the window suggests that the mother, watching over her sick daughter has been at her vigil for a long time. The presence of the woman is certainly a sign of the companionship that can break the isolation of illness. The painting technique of Divisionism (similar to Pointillism), which Morbelli

had used since the 1880s, allowed him to modulate the light, moving beyond mere naturalistic

description and illuminating the simple interior with a sense of hope. The artist's language, full of subdued, but authentic intimacy, suggests intense emotion, while the slow entry of

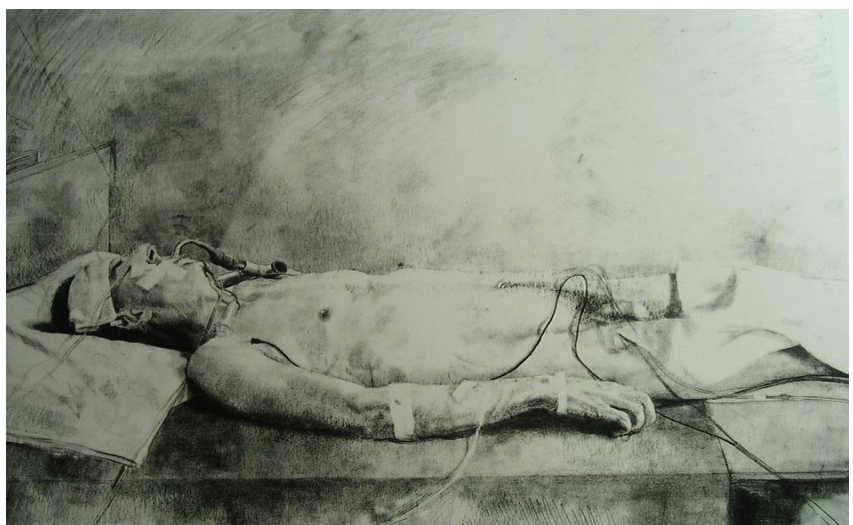


Ferdinand Hodler: *The Sick Valentine Godé- Darel*

light becomes a sign of acceptance of the truth of all existence. In a sort of funeral diary, the Swiss symbolist artist Ferdinand Hodler recounted the slow death of his companion, consumed by a tumor (“The Sick Valentine Godé-Darel”). Understandable exhaustion seems to make the woman’s head heavy, and she has troubles keeping her eyes open; her face expresses unspeakable

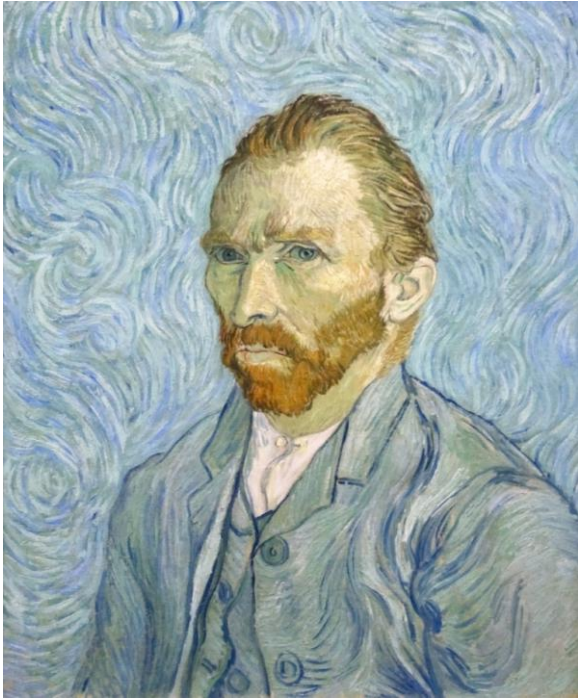
suffering, while the presence on the right of a clock on the wall and flowers increases the sense of transience and the imminent end of life. Against the pale glow of the surface of the page, the outline of the image becomes a disturbing presence, permitting the viewer to move from exterior to interior reality. The spectral appearance of the woman symbolically translates her body, and the extreme stage of a disease becomes iconic of existential anxiety.

The work “Operated On” presents with intense realism, in minute detail every individual element of the mechanical devices attached to this patient in intensive care: tubes for assisted breathing and the collection of urine, the cables of an electrocardiogram, and a needle for infusions. Even the cloth placed on the man’s forehead to help lower his body temperature becomes an anonymous bandage, but one that does not imply the attentive presence of a caregiver close at hand.



Antonio López García: *Operated On*

The immobility of the scene is such that the man himself seems to have lost the warmth of life and is transformed into a mannequin with a sheet that covers his legs, the only part of his body that is not involved at the moment in any medical treatment.



Vincent Van Gogh: *Self-Portrait, September 1889*

For an artist self-portrait is the opportunity to give an account on the self and his or her art, laying bare a psychological state and communicating what cannot be said with words. In the psychiatric hospital at Saint-Rémy, Van Gogh had the use of two rooms, one in which to sleep, another for his work. In this solitude he painted works of extraordinary intensity and torment energy, including “Starry Night”, in which the cosmic swirling of brushstrokes constitutes a dramatic backdrop for the deeply felt “Self-Portrait, September 1889”, painted on the day after another crisis of the painter’s illness. Van Gogh’s dramatically intense expression leads into the depths of his awareness

and he wrote that it was in “learning to suffer without complaining, learning to consider pain without repugnance, that one risks vertigo.” He risked his life to show how fragile our existence is and communicated in the only way possible for an artist by making his paintings speak. Time and again, artistic sensitivity proves itself capable of investigating, with creative brilliance, the experience of illness and even the pitiless progress of the decay of old age.

Each of Van Gogh’s self-portrait is different, a not only in terms of setting, but in terms of dramatic intensity, and thus each is unique in terms of specific chromatic relationships and the meanings signified by his brushstrokes. In the self-portrait of September 1889, swirling brushstrokes in cold tones cut into the surface and create a sense of flow, dominated by an internal energy.

“Self-Portrait with Bandaged Ear, 1889” was made after overcoming the crisis that had led the artist to cut off his earlobe, and the use of color reveals a rediscovered serenity. The Japanese print and the easel suggests his desire to return to painting and thus to his life.



Vincent Van Gogh: *Self-Portrait with Bandaged Ear*

The image of a sick person has of his or herself can include not only the disease, but also the healer. This painting plays on a contrast between the wasted figure of the delirious painter, suffering nightmares that materialize in the background and the tireless physician who, like a true Good Samaritan, supports and cares for his friend.

To the sick person nothing seems to exist beyond his or her own personal situation, and there is no separation between, on the one hand, the world of actual, objective reality and, on the other, the imaginary and the symbolic sphere. So it is that a work like this self-portrait that can be transformed into a sort of ex-voto made for the healing physician, who is seen as a savior. In fact, in 1820 Goya, then seventy-free years old, gave the work to his friend Dr. Arrieta to thank him for saving his life.



Francisco de Goya: *Self-Portrait with Dr. Arrieta*

The inventory started in 1839. Delacroix welcomed it. The box-camera devised by Henri Daguerre in 1839 was for Delacroix a boon to all painters. The daguerreotype was seen as a translator commissioned to initiate us further into the secrets of nature. It was an indiscriminate tool, inclusive to a fault. But it was of more benefit than threat to art. Others, most famously the poet and Salon critic Charles Baudelaire, in a ragging essay of 1859 denounced all the

claims of photography to be art (Baudelaire, 1964).

Art or not, there is a sense in which every photograph is forlorn. If photography compiles a visual list of everything in the world, it is always a passing permanence. When the lens falls such shut the flu goes on. For seconds, or fractions of second, we clutch at eternity. “Photographs state the innocence, the vulnerability of lives heading toward their own destruction” as Susan Sontag noted in her meditation *On Photography* (1977), and this “link between photography and death haunts all photographs of people.”

Beyond the plangency intrinsic to the medium, however there is the camera’s claim upon verisimilitude. Géricault was not accurate in the number of bodies he put on the raft of the Medusa, and Delacroix never went to Chios, but both artists, in their way, intended some sort of documentary credibility in the scenes of disaster they portrayed. Goya let it be known by using the tag “I saw this”, those appraising the work of Géricault and Delacroix were overtly made aware that both artists had interviewed eye-witnesses to the events commemorated on canvas. Was photography the brusque new route to such conviction, the ultimate mechanistic on the claim “I saw this”?

Most of us know what our forebears were less inclined to suspect that photographs can be staged, faked and otherwise distorted, that the medium carries no absolute assurance that it is safe for us to suspend disbelief. Still we are prone to accept that a photograph will expose truth with raw immediacy. So it is a curious fact that in the early days of photography on the



C.R.W. Nevinson: *La Patrie*

first occasion that a camera was sent to war, it was to undertake a cover-up mission.

Later on, the avant-garde painter represented the war, but that did include illustrating suffering. The Futurists stand close to the source of the modern understanding of the term “avant-garde”. In military

usage avant-garde means the part of an army that goes on ahead, like an expeditionary force. All the many artistic statements and adventures that have subsequently been labeled as avant-garde in this risk-taking, forerunning sense, none bear it so aptly as the Futurists. For the Futurists were not only prepared to make a metaphorical advance guard in seeking beauty from the industrialized world, they signed up for direct action. “Nous voulons glorifier la guerre- seule hygiène du monde” insisted Marinetti in his salvo of 1909. Explaining the unrepentant Futurist eagerness for war and destruction is not so easy. Marinetti participated in both street fistcuffs and formal combat, he cannot be said to have enthused about bloodletting because he knew nothing of it. War is beautiful, stated the Futurists, because it creates the new architectural forms of big tanks, geometrical flight formations, smoke spirals from burning villages. They were not idly dreaming, nor teasing purely for the sake of mischief. So the mystery is: how could creative, intelligent, sensitive individuals commit themselves to such a credo?

Artists around Europe joined the war. War, however, was not respectful of the alliances of art.



Paul Nash: *We Are Making a New World*

“All a poet can do today is warn”, a motto which was Wilfred Owen’s demure way of claiming for poetry no place of consolation, but, at least, the keen accuracy of open eyes. Christopher Nevinson, for his part very soon became convinced of the painter’s equivalent urgency here: to warn, and above all inform. Is canvas of wounded man in the train of retreat is typical of his vision and revision of Futurism’s splendid faith

in guns. War- sole hygiene of the world? Warriors- steeped in the honour of acting on their stalwart masculinity?

One of the officially directed British “war artists” was Paul Nash. Nash was a landscapist; still he was frustrated by the prohibition laid upon him not to show any corpses, even when being faced with one huge grave. So Nash resorted to the device of the pathetic fallacy- the investment of inanimate scenery with human personality, sensibility. The pathetic fallacy was

first recognized as a feature of Romanticism by Ruskin in 1856. In the artwork of Nash “We Are Making a New World”, there are no aircrafts, no tanks, no men, no scattered parts thereof, only earth’s cold clay: pocked, crumpled and ridged, and sodden- as if with its own tears; only trees- amputated, gassed, stumpy, blown to nothingness. So, even without representing human bodies, Nash could suggest the human suffering.

IInd Chapter: Pain as personal experience

II.1. Medicine and photography. The individualization of the sufferer

Since the invention of the photography in the XIXth century, the social sciences broadly explored the benefits of this tool. Believing in its nature of capturing and immortalizing the truth, it was used as revelatory in medicine- in 1850 by Dr. Hugh Welch Diamond, by the French neurologist Duchenne, by Jean-Martin Charcot in the context of diagnosing and illustrating several neurological problems including hysteria. In the XXth century the importance of the photography is qualitatively improved from a mere tool that witness and document the reality, to a therapeutic process. Jo Spence and Rosy Martin pioneered the phototherapy allowing the sufferers to transform their experience of pain, to transpose it from a semantic register to another- where there is less control; confer them the power to control their illness and its representation to others. If pain is a social, then a personal construction, why not transforming it, using its potential and language for a greater experience, this would free the sufferers from the feeling of being condemned.

The medium of photography in my view has very specific means of visualizing the painful experience of the body. In photography, the notion of objectification and externalization of pathological or malfunctioning organs and anatomical parts is often implied. Gilman (1993) stresses the collaboration between the educative function of photographic images and the aesthetic tradition of representing the mentally ill; in the nineteenth century photographs of the pathological (mad, criminal, prostitutes and freaks) were extremely popular and constituted a recognized source of knowledge. The notion of photographs as documents rather than art reflects the tension between the belief that photographic and filmic images function as epistemological tools to get to know reality and that the knowledge and documentary value of a photograph is determined not solely by notions of authenticity, correctness and truth (Crimp, 1980). Elkins (1999) argues that most contemporary medical imagery based on photography - positron-emission tomography (PET), computerized axial tomography (CAT) and magnetic resonance imaging (MRI) - depicts the malfunctioning body as weightless and painless.

The experience of the body in pain is a phenomenon that mainly defies attempts at visual representation. Beyond the obvious claim that an image can never unproblematically represent the complexity of a lived reality, the visceral experience of pain both animates and confounds attempts to 'make sense' of pain within the logic of a culture and a politics that

rely for their ethical bearings on the verifiability associated with the visible. Despite the apparent disconnect between the ‘objective’ visual and the ‘subjective’ or experiential tactile, the image of the body in pain animates and makes possible a whole host of political activities, from torture to military intervention to anti-war activities to critical social science scholarship. It is not a facile process to adjudicate between the ethics of privileging such imagery on the basis of intentionality alone. Indeed, many of these practices rely on a techno-logic of the visual to validate their respective projects, and many rely on the circulation of abject imagery to illustrate and support their political claims. In turn, these practices fetishize pain in their drive to make visible what is essentially *unimageable* – that is, the spectrum of experience associated with the body in pain.

The body in pain is thus produced as an aesthetic visual image, a symbolic icon that stands in for itself as the referent object of political violence. To say that pain is essentially unimageable, however, is not to say that it operates as an interiority that cannot be accessed or responded to.

In 2000-2002 visual artist and pain sufferer Deborah Padfield, in collaboration with pain specialist Charles Pither realised a project in Saint Thomas’ Hospital in London among the chronic pain patients. It consisted in making photographic images which would faithfully express the complexity of the experience of pain. The aim of the project was to make easier the dialogue between the patients and the health care professionals, especially for those sufferers who find difficult to articulate and explain verbally how they feel. Combined with the face to face dialogue, the photographs provided new, complementary, useful information, particularly about the emotional state of the patient; facilitated the identification of the origin, kind and nature of pain; it diminished the feelings of isolation; though not all images were relevant and with communicative value for the clinicians.

If the arts might be considered as a means to express in a plastic way the human condition, then, the illness as being at the core of the human experience needs a legitimate space within arts. The increasing number of the images of pain, disease in contemporary art highlights the continuous attempts in shaping and legitimizing a particular aesthetic of pain within the institutional discourse of the contemporary art practice. When referring to the term “discourse”, I mean in foucauldian sense as a historical, social structure of categories and beliefs. So, I aim to decode the message of these works and the art discourse behind that

defines them; as well as the political, social and ethical context in which they originate and circulate. As it is obvious, the matter of ethics and aesthetics are overlapping.

In the history of representation of pain and illness, the medical discourse had a crucial role providing a complex explanation. From Hieronymous Bosch's *The Extraction of the Stone of Madness*, to Albrecht Dürer's *Melancholia I*, to Rembrandt's *The Anatomy Lesson of Dr Tulp* we witness a constant invasion of the medical into the visual. The process of the institutionalization of medicine was accompanied by the growing interest of the arts for the phenomenon of illness. The 19th century welcomed the birth of the clinic and, at the same time, the birth of photography, both supporting and completing each other, offering a broader understanding of the patient. The interactive relationship between medicine and art resulted in an aesthetic realism of the reality of pain. The commencement of this interaction can be identified in earlier stages of the institutionalization of both discourses- anatomy, physiognomy and the apparition of the idea of Public Health are interpreted with particular references to photography. This realism is deeply grounded on the modernism's fixation with "truth" and "objectivity".

In the 1970's occurs a turns against iconography and a re-politicization of the artworld. Once with the increasing popularity and the wide influence of the psychoanalysis, the intersection between aesthetic and medical perspectives of seeing the afflicted generated new approaches.

Michael Foucault's historical-philosophical accounts about the institutionalization of medicine constructed the narrative about the mechanism of "natural" and "social" man. Foucault's approach deciphers the ways in which life has been medicalised and institutionalized since the 19th century and identifies the medicine as one of the most important agents of exercise of disciplinary power on the human subject. According to Foucault, the birth of the clinic caused and facilitated the individualization of the sufferer; it conferred to pain and disease an organization, a structure and a space that permits visualization and categorization. The concept of "individual patient" appeared due to the simultaneous birth of clinic and photography. Under the clinical gaze illness has been detected and configured; and the idea of seeing as a way of diagnosis gained prominence (Foucault, 2003).

The sociologist Georges Didi-Huberman states that the identification of pain by using the visible mode formulated "the figurative problem that obsessed every medical clinic, the problem of the link between seeing and knowing, seeing and suffering" (Didi-Huberman,

2003). This phantasmatic link remained an unresolved structural and political problem within the history of the representation of pain. The category of “individual patient” as both subject and object for the clinical observation turned into a sensible space for political, ethical issues, especially after the 1970s when the representation of suffering started to bear new connotations. The political valences as well as the aesthetic one of the images of illness are still pertinent and require a holistic understanding. I try to clarify how artists and art institutions respond, perceive and represent the disease and what is the special frame of contemporary art comparing to other historical moments of the representation of the ill. The current paragraph of the thesis methodologically engages statements from Michael Foucault’s account, medical sociology and cultural and feminist theories of the body.

Representing pain in the arts gives birth to a very specific discourse practice which relies on two main issues: on one hand, the figurative problem of pain as representation, and, on the other hand, the broader implications of this representational field for the wider domain of the politics of representations. Also, it makes evident two main questions: how the category of “individual patient” and its identity constitute the departure point of the representation of illness in the nowadays art; and how the aesthetic that promotes and defends a homophobic carnal perspective coexists with an aesthetic which aspires for recognition.

The most representative case of the reaction of the art community to a topic of medical concern is that of the responses to AIDS syndrome. It provoked a new wave of cultural activism, contributed to the re-politicization of the artworld, it was a fertile time for the apparition of a new generation of female artists which used their bodies in representing their subjectivity thus giving new reverberations to the feminist work of the 1970s.

The continuous interaction between the personal and the political since the 1980s aroused a quest for a decentered human subjectivity, a visually declared need of recognition aesthetically and politically shaped by representation of illness. Feminist artists used their bodies as a “canvas” where identity is shaped and displayed. This generation of artists constructed a new vision about the wounded, the personal experience of being ill by challenging the medical and the political understanding of pain, disease, health and normalcy.

The cultural critic and writer Douglas Crimp opens his work *AIDS: Cultural Analysis/Cultural Activism* with a highly disputed statement: “I assert to begin with that “disease” does not exist” (Crimp, 2002). He underlines that representations configure as the locus of power and control, a space of creating and exercise of a certain ideology. Our

perception of health and illness, of pain and wellbeing is directly shaped and constantly influenced by our culture.

Even if the World Health Organisation did not alter the definition of health elaborated in 1948, medical sociologists affirm that the concept of health implies continuously fluid meanings according to the cultural, social and political changes; and the perception of disease is in constant adaptation. Ultimately, the research aims not just to deconstruct what means to be ill, but also what means to be human. The images of disease are articulated on a subject, but the individual disappears, is just a support, the images of illness thus making isolated icons associated to the fear of collapse, of evanescence. At the same time, there is a tendency of “de-individuation” of diseases under a homogenizing power that incites to homophobia. The politics of the representation of disease aim to stigmatize, to ostracize and control.

Studies into the ways how people construct meaning in pain narratives indicate that aesthetic expressions of experiences may play an important role in meaning making and sharing. Pain, especially when it is provoked by illness, does not only influence a person’s physical wellbeing and psycho-social functioning, but also affects and permeates the way how we experience ourselves (Bury, 1982). Serious illness, especially chronic illness, transfers a patient into another life world with particular social roles, rules and identities (Kleinman, 1988). How one feels and defines his or her identity depends on the recognition one receives in the interaction with others (Gergen, 1994). In this process the sufferer must find answers to questions: ‘Why me? What is the cause of my falling ill? How can I control the pain?’ This involves coming to terms with experiences of loss, overcoming fear and anger and restoring self-confidence.

Drawing inspiration from psychological tests that use ambiguous images and photos to make subjects project their own interpretation into the test material, photography is considered by some social scientists as a hermeneutical device (Hagedorn, 1996) that helps subjects to project meaning (Harper, 2002) from deeper layers of consciousness. In health care, Frith and Harcourt (Frank, 1998) used hermeneutic photography to capture women’s experiences of chemotherapy for breast cancer. Keller et al. (Keller, 2008) used a hermeneutic method with photography to uncover contexts relevant for assessing dietary intake and physical activity in diverse ethnic groups. Oliffe and Bottorff (Oliffe, 2007) interviewed patients with prostate cancer on the photographs they had made about the experience of having cancer. Photography has also been used as a client-controlled instrument to improve quality of care (Royers, 2000).

Although these examples of photo-interviewing focused on clients' reflections on their lived experiences, this was not done for therapeutic reasons. Photo-interviewing was in the first place a research tool; the reflection was not sought for as an instrument of improving awareness for the sake of empowerment. Photo research remained descriptive; it did not serve as a vehicle for transforming social reality.

Hermeneutic photography as a therapeutic instrument aims at facilitating persons to give meaning to their life world. Photographs enable humans to find meaning through visualizing and interpreting lived experience. Making photographs of situations in one's life may be seen to trigger a reflective process in which images become the carriers of symbolic and metaphoric associations, of which the photographer had no clear idea when taking his pictures (Hagedorn, 1996).

Since the 1990s, when the activists artists moved into a position of authority and their works became institutionalized and commodified in the art market, the image representing disease ceased to bear the same political connotation, becoming more self-reflective, more and more aestheticized and spectacularised. Medicine continue to invade arts and the artists constantly approach illness- from tuberculosis, to madness, cancer and AIDS.

Pain is the most common symptom reported by patient to the doctor. The personal, subjective nature of pain makes its communication inexact and less efficient and thus it constitutes an obstacle in its understanding, assessment and treatment. Communicating pain involves more affective elements which turn difficult an objective measurement. The metaphoric and linguistic tools to contextualise the symptoms within a personal narrative are not explicit enough. That is the reason why other non-verbal tools could improve the communication. One solution would consist in establishing a language which would integrate the physiological, psychological and social meanings of pain, accessible for the patient and for the scientific world of current medical understanding. Such a solution might be the visual representation of pain. It would be a medium to bridge the chasm between the self and the other. The question is: in which measure the photograph can transpose the personal, subjective experience of pain as an objective, universally understood proof of its existence, even in the absence of the physical signs of it? Even in this digital age with our awareness of the ambivalence of the relationship between photography and reality we still privilege and

attribute an authenticity to that which is captured photographically, making it a reliable medium for reproducing and/or recreating the reality of another.

II.2. Feminist art: body as canvas for identity construction

Every picture is a picture of a body. Every work of visual art is a representation of the body (Elkins, 1999). To say this is to say that we see bodies, even where there are none, and that the creation of a form is to some degree also the creation of a body. And if I splash of paint or a ruled grid can be a picture of the body, or the denial of a body, then there must be a desire at work, perhaps among the most primal desires of all: we prefer to have bodies in front of us, or in our hands, and if we cannot have them, we continue to see them, as afterimages or ghosts. This is a beautiful and complicated subject, the way our eyes continue to look out at the most diverse kinds of things and bring back echoes of bodies.

“Distortion” is such a term: it is connected to philosophic discourse on representation in general, and it is both elemental and specific in body images of all kinds. Claude Gandelman names one aspect of the equation between the represented body and distortion when he says that the “reality of the body *qua repraesentatio* is its essential distortion,” (Gandelman, 1991, p. 74) and I would argue that the opposite and correlative aspect is the essential bodily form toward which all representation tends. Any representation of a body involves distortion, because all representation is distortion, and conversely, representation works within a logic of the body, so that representation is embodiment: it produces and projects bodies.

Pain signifies that mode of awareness that listens to the body and is aware of its feeling- whether that feeling is the low-level muttering of a body in good health or the high pain of illness. In the same way, pictures of the body normally work to preserve certain bodily properties so that distortion is usually local and specifiable. The danger is in generalizing, as Gandelman does, and implying that everything in representations of the body is equally within the field of distortion. Instead, bodily distortion is both a condition and a property of representation but both the whole of it and that is what allows the analysis of represented bodies to go forward without turning into an equation of holistic properties: a body’s reality *qua repraesentatio* is some distortion. When representing the body in pain, the artist assumes a double distortion- by pain and by representation itself, the second being intended, controlled

one. In the end, any representation of the suffering body is a distortion of a distortion. Being accustomed in the history of art to see beautiful women bodies represented almost exclusively by men, I will try to analyze the works of female artists who use their bodies, not to please the gaze of others, but as a space for the identity construction.

Since representations always have consequences for the understanding of who we are and who we want to become (Dyer, 1993), the interconnectedness of pain and self-portrait is a helpful tool in mapping female identity. Can artistic production help us grasp the concept of diseases and traumas? How do artists situate their own painful bodies? Is there a way to grasp fluid and changing formations of the body in pain?

Over the centuries, pain and suffering have always been expressed in art: among others, by female contemporary or modern artists. In some cases these artworks express the artist's pain ascribable to diseases and terminal illness, or mental health problems that might stem from childhood traumas.

The artists and artworks mentioned here are complex and go far beyond the concept of “feminist arts”; put in plural, since feminist arts and feminist art critique comprise different currents that cannot be reduced to a single categorization. On a formal level, the heterogeneity of the representation of pain will be demonstrated in this paper. The criteria, here, is the rule-breaking aspects of the arts and its formal sophistication, without attempting to examine all those modern and contemporary artists who have worked in this vein.

The artworks described here can neither be reduced to the experience of pain, nor can the artists be constitutionally or biographically simplified to any particular denominator in the psychopathology of mental health. Yet, they can help us to understand pain, since art is a symbolic language, which due to its atemporal character condenses the intensity of pain in the present, the possible explanations for it in the past, and the potential transformation for the future (Gadamer, 1997). Thus art can open the horizon for transcending the individual and present aspects of pain, as well as providing insights into both spectator and author. These aspects are of importance in art therapy and art psychotherapy, where patients, beyond verbalization, can express themselves through art materials, in a special, safe environment determined by the infrastructure and the training of the art therapist.

Hannah Wilke is known as a controversial figure within the feminist art of the 1970s. She started to challenge the significances of the body within the art process by making fleshy sculptures of vaginal shapes out of clay and latex. After her mother had a stroke and was diagnosed with a second round of breast cancer in 1978, Wilke had to withdraw from her art studio and became the caregiver of her mother. Actually, in terms of art, Wilke continued to have a prolific period. She started taking pictures of her mother in order to have the illusion of



Hannah Wilke: *Portrait of the Artist with Her Mother, Selma Butter*. From the *So Help Me Hannah Series (1978-1981)*

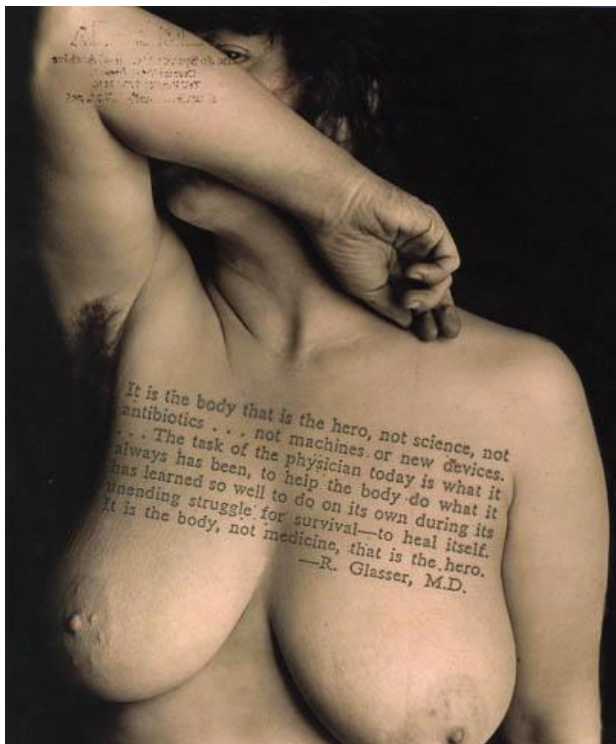
permanence, of immortality over the certitude of the passing away of her mother. She intended to feel again with her mother, but this time- to heal her own wounds. After the death of her mother, the artist organised an exhibition with all these pictures together with womb-like sculptures and graphics. Thus, Wilke's work became a prototypical attempt of representing the breast cancer in visual arts.

Her work *Portrait of the Artist with Her Mother, Selma Butter* consists in two large-scale portraits juxtaposing Wilke's beautiful, voluptuous torso highly esteticized and put in evidence by miniature toy weapons; and her mother's aged, ill body in terminal breast cancer.

In many of her works, Wilke appears as a model trying to deconstruct the stereotyped paradigm of the female beauty. With the Hannah's attempt to represent the "unrepresentable"

and the “unpresentable” it was reviewed within the field of art the concept of body, and especially the female body. How much disease might be a topic for art and how can these two interact, it was a main issue of Wilke’s works after being herself diagnosed with lymphoma in 1987. Her self-portraits of *Intra-Venus* (1992-1993), transposing the language of disease in another semiotic register- the visual one, turn the private experience into a public documentation of a highly controversial matter. At the same time, Wilke mobilized the artists to explore more the objectification and commodification of the female body issue. At this point, art gains a political aspect.

Jo Spence (England, 1934–1992) used photographic practice as a personal form of therapy,



Jo Spence: *The Body is the Hero*

demonstrating in many of her artworks the impact of her cancer.

Starting from the “postmodern photographic activity” movement that opposed the hyper-aesthetic photography of the seventies, Spence considered her photographic activity to be a political, deconstructive strategy in denaturalizing photographic realism and redefining artistic and social practice. In this sense, the representation was a space of conflict and social struggle (Ribalta, 2005, p. 8). She aimed to reactivate photography as a popular culture in opposition to the fetishization of photography within official institutions of art and culture, such as

museums and galleries.

Spence aspired to use photography as a means of regaining control of her own image. In this sense, she privileged autorepresentation, declining to photograph others, since the relationship of photographer/photographed is never democratic: there is always an imbalance of power.

Spence converted photography into an instrument of rebellion and therapy for the pathologies



Jo Spence: *Decay Project*

caused by the symbolic violence of normalized lifestyles reproduced by the dominant images of the cultural sphere. She invariably emphasized the educational dimension of her practice. In this sense, Spence was not working primarily for an official artistic public or context. The role of “subaltern counterpublics” – for example unions, students, therapy groups, feminist groups, photography workshops, and community centers – is crucial here, on account of their potential for social transformation in contrast to

mere reproduction or consumerism (Ribalta, 2005, p. 10).

After 1982, the year her breast cancer was first diagnosed, for the most part her work addressed the representation of health, regarding stereotypes of gender and class. Her series *Pictures of Health* (1982–86) documents her experience of disease and critiques the process of infantilization, victimization, and depersonalization that she herself experienced as a patient. It also documents the day-to-day realities of living with the disease and her research into new life patterns and alternative therapies. The camera becomes a tool for raising questions, rather than affirmations and confirmations (Roberts, 2005).

In 1984, she commenced her own phototherapy, through which she intended to establish the political and therapeutic potential of life stories and the restaging of traumatic family experiences, such as her relationship with her mother or the imposition of stereotyped behavioral patterns concerning gender and class. She conceived innovative photographic techniques, with the use of dramatization inspired by the Epic Theatre of Brecht and Augusto Boal's Theatre of the Oppressed – for example in *Libido Uprising* (1989) – with the aim of actively deconstructing asphyxiating conditions and structures, which are themselves unleashed and maintained by images. In this work, Spence considered herself a photographer-educator (Roberts, 2005). These ideas followed her previous research into the family album,

which aimed to go beyond the official family discourse, usually represented by pictures of births, baptisms, weddings, birthdays, holidays, houses, schools, etc. Working on her family story, she revisited the past, recovering “disallowed” images, such as divorces, insults, arguments: in short, conflicts. She also pursued this work with her patients, with the aim of using phototherapy as a “visual map of your psychological processes” (Roberts, 2005, p. 99). If such conflictive images were not available, they were restaged, clients becoming active subjects who were able to rewrite their “supposedly” given story.

The advantage of photography lies in its approachability as a technique for ordinary people. Using this advantage, Spence acted as a photographer-educator and phototherapist beyond all norms of certified and licensed psychotherapy or clinical psychology practice, but from the position of both a skilled photographer and one with an embodied political knowledge. In this context, therapy is embedded in a political context, considering it in a way that is able to deconstruct institutionalized models and points of view. New ways of inhabiting the world are then offered (Longoni, 2011). The possibility of change through agency should be transmitted. In Spence's own words: “Through the political knowledge of yourself you can advance and go beyond the perfect image” (Ribalta, 2005, p. 14). The art-practice of going “beyond the perfect image” to which she was aspiring resists the risk of permanent stasis. In this sense, Spence always stressed that the process of experimentation and learning should never stop with the finished artwork. It continues afterwards giving space for further reflection, insights, knowledge, agency, modifications, and change.

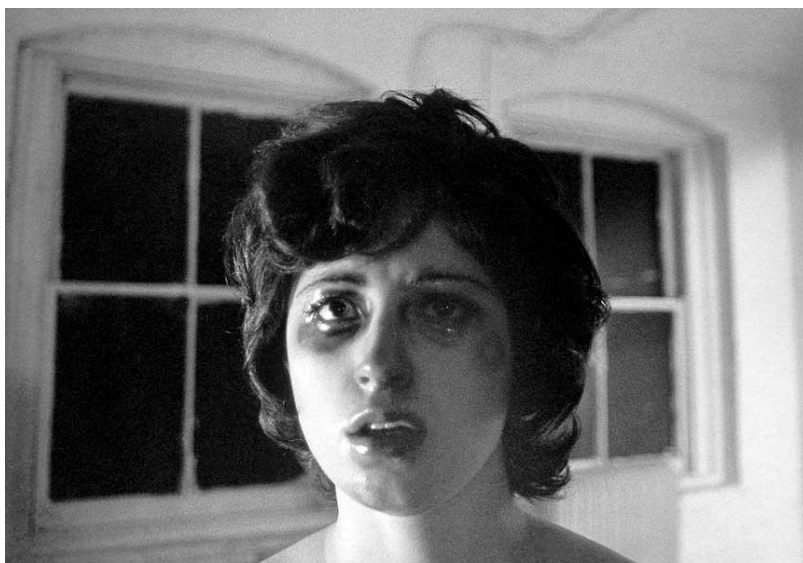
For her, as for all the artists in this paper, art was a vital process, although for Spence it was also to be collocated in a socialist context (Roberts, 2005). She aspired to a global sphere, starting from her own or her clients’ personal situation and aiming to reach a wider political sphere, connecting the individual image and story to a broader institutional and political context (Spence, 2005). She strove to reunite social and personal identities, politicizing personal narratives and personalizing politics (Grover, 2005).

Cindy Sherman’s art can be read as a symptom of pain, a reflection of a mental state. Sherman shows pain as a structural instability, the blurring of the boundaries of stereotyped femininity. Like her own artistic persona, pain in Sherman’s work is de-individualized; it might just as well be the pain of an author, a model, a character or a viewer. Abandoning any claim on notions such as authorship or intentionality, Sherman disowns – but does not

disembody – pain. Pain in Sherman’s art changes the body in the same way that emotional crisis watermarks the identity. Sherman never shows her characters as what is widely understood as idealized figures. Her art forms the counterpart to the American cult of the well-functioning, toned-down body, where any memory of pain had been erased. Pain denied elsewhere here becomes pain transformed into monstrosity, nausea, pathology, hysteria, and disguise. Sherman’s photographs force the viewer to acknowledge the amount of pain constituting the female subject.

Sherman’s work has been mostly looked upon through its relevance to postmodern theory and its new aesthetic characterized by pastiche, self-referentiality, fragmentation, hybridization and multiplicity. The body in her art has been conceptualized as a seat of passions, emotions and desires, the site of sexuality, the site of illness and death in reference to massive AIDS awareness in the 1980s and 1990s, and finally, the space marked as different, as other. Sherman’s art has mostly been connected to psychoanalytic readings, used as a means to identify and to disrupt the production of the current forms of sexual difference. Her work called for a new conceptual approach, influenced by semiotics, the unspoken and unrepresented conditions of signification, and by feminist theory. The major critical writing on the artist consists of a corpus of explicitly feminist texts on difference, gender and sexuality.

Although often regarded in terms of violence, terror, repression, anxiety and psychosis,



Cindy Sherman: *Untitled Film Stills*

Sherman’s work has not been directly connected to pain. It is significant that the most aggressive of Sherman’s series have received proportionally the least commentary. Nevertheless, the series made after *Film Stills* better fit my argument and exemplify the concept of pain more clearly. The

concept of pain as one of the most frequent symptoms of bodily crisis is crucial to my understanding of Sherman's subsequent series: *Fashion*

Pictures, Disaster Pictures, Disgust Pictures and the *Clown Series*. Sherman's photographs form an account of pain in the female subject; they describe the nature of the relationship between pain and several types of concepts commonly seen as female, such as hysteria, monstrosity, grotesque or bulimia. Cindy Sherman's art makes one realize that pain, besides being cellular damage, is a reflection of the mental state, and as such can help to read visual accounts of the struggle to preserve feminine identity.

Pain is a deeply psychoanalytic concept. The incapacity to tolerate frustration causes failure of the symbolic function, and the consequent failure of the thinking process, resulting in repression and the occurrence of symptoms. Cindy Sherman's photographs are the metaphors of painful experiences, with no systematic discourse, but at the same time deeply embedded and continuously inscribed in her art. Sherman's works illustrate the way in which those experiences have entered into the domain of popular media and culture, re-constructing femininity as present in art, fashion magazines, pornography, cinema and cultural clichés. In visual representation the problem of female embodiment – immaterial, fluid, transcendent, modified - is particularly relevant to the notion of crisis that pain brings along. According to Showalter, women are “human beings who will convert feelings into symptoms when we are unable to speak” (Showalter, 1997, p. 207). Consequently, I think that Sherman presents symptoms that make bodily comfort and wellbeing impossible. As Bryson (1993) points out, a significant obstacle for understanding the body lies in the issue of pain. Pain makes the body oscillates between being a material, autonomous entity and an object of a scientific study reduced to a piece of flesh. Pain marks the limits of the language and comprehension; there are very few signs one could exchange for his or her pain to push it into representational codes. I would nevertheless argue that pain can be traceable in Sherman's photographs, but only if one moves beyond the concept of pain as tissue damage.

The body in Sherman's art, manipulated and shattered by the voyeuristic gaze, instrumentality, absence of sexual taboos, and pornographic and advertising practices, can no longer bear any pretence to wholeness and integrity.

It has been marked as a symbol of a pathological, disintegrating identity. Just as it could be useful for feminist purposes, Sherman's art could be considered as reenacting the long history of female oppression. Burton (2006) argues that Sherman's characters are usually read as passive and preyed upon, threatened by the media-produced male gaze. Dead, sick, unconscious, crazy, pathological women caught in the dramatic moments of collapse or madness; seen as half-animals, mannequins and hybrids surrounded by dirt, rubbish, chaos, vomit, emptiness, and darkness, they are stripped of any integrity as subjects as they are being looked upon. While Sherman shows her women characters in the network of power relations already existing, it is simultaneously an active process of questioning those relations and



Cindy Sherman: *Untitled*

submitting to them. It has been speculated that Sherman's enormous commercial success is based on the voyeuristic pleasure with which images of women are looked at.

Critically reading feminist scholarship on Sherman, I try to look at her art anew and present the ways in which concepts such as hysteria, abjection, monstrosity or grotesque can be seen as painful. Pain causes metamorphosis; it causes one to change, sometimes unrecognizably. Being disquietingly someone else in every photograph, Sherman presents the fluctuating crisis of female embodiment. Canguilhem

(1966) stated that the subject in pain undergoes a drastic change when falling sick, becoming detached from the image of itself from before. Sherman's art complies with that statement. That is why the problem of self-portrait is so relevant in her case. "I don't do self-portraits" said Sherman in an interview, "I always try to get as far away from myself as possible in the photographs. It could be, though, that it's precisely by doing so that I create a self-portrait, doing these totally crazy things with these characters" (in: Bronfen, 2003, p. 413).

Being an actress, director, stylist and camerawoman in one, she is turning herself into the image that she herself directs. The range of Sherman's artistic self-transformation is astonishing. Using wigs, makeup, dresses, accessories, background and lightning, she puts herself into any age, personality, body type, mood, and narrative. While the classical genre of self-portrait usually shows an artist in a staged pose, assuming to show the "essence" of one's personality, Sherman's photographs are very stereotyped, almost-but-not-quite-recognizable pictures with a wide number of possible readings. Using her own body, Sherman mediates between the physicality of her flesh and the image of it she creates: over-familiar archetypes of film starlet, fashion model, housewife and career woman. While the genre of the female portrait traditionally constitutes a framework to explore femininity, this femininity is here deconstructed by presenting media images and cultural clichés. Using herself as a blank canvas, she never refers to her individual features: "People are going to look under the makeup and wigs from that common denominator, the recognizable. I'm trying to make other people recognize something of themselves rather than me" (in: Bronfen, 1986, p. 416). All those changes make Sherman's body – the signifier of the artist's presence – disappear. That self effacement is disquieting and troubling. I would argue however that understanding Sherman's work is to partly recognize it as self-portrait. The key to that understanding is the materiality of the body. Sherman's body is always materially present in the photograph. It restricts her in its physical characteristics. Being white, she only explores white femininity. Being a woman, she almost always presents female figures.

Sherman's photographs are the proof that we almost never experience ourselves out of our bodies. We are always basically able to distinguish ourselves from the others by setting bodily boundaries. Even if when looking at our image in the mirror we sometimes experience the feeling of distance and detachment, we still remain the subject within this image. To constitute ourselves as embodied subjects through technologies of representation, we need the body. The only moment the artist escapes those restrictions is when she stops showing her body. "What could I possibly do when I want to stop using myself and don't want 'other people' in the photos?" asks Sherman in her notes (in: Cruz 1997, p. 163). The answer is artificial parts, dummies, toys, mannequins, prostheses, masks and occasionally empty photographs without people in them. Those solutions present an interesting case for any research on pain. As much as we need the body to conceptualize about pain, pain remains in Sherman's photographs even when the body is replaced by plastic and rubber. Although

depersonalized, Sherman's photographs are a self-reflexive attempt to establish identity politics in the situation of crisis.

All the above artists have treated pain on very different formal levels. However, they share in common a disrespect and disregard for authority in a highly constructive way. They overcome formal classifications to create new forms that themselves prove unclassifiable. None of these artists is committed to any one particular aesthetic, neither – in both their art and lives – do they accept authorities that would impose styles or conventions. Their art could be said to go hand in glove with their personalities, raising the impossibility of separating their artwork from their lives. What they also share is the feeling of needing art as a vehicle to express, treat, and perhaps even transcend pain, by placing it outside, into artistic creation. Moreover, all of them engage in ritualistic dynamics in their pain related artworks.

It should be noted, however, that (Sontag, 2003) critiques the superabundance of images that has led to a situation of complete saturation, and hence to the impossibility of moving the spectator. Here she elects for an ecology of images, since the sheer flow excludes the privileged image. She favors reserved spaces for serious reflection. In short, Sontag reminds us that it is important how images in general are disseminated and how they are perceived. A pain-transforming artwork, however, should be considered a special case, requiring not only sufficient material in and of itself, but also a situation conducive to the process of serious and absorbing contemplation. Both conditions need to be fulfilled before it can offer insights.

II.3. Kir Esadov: Metaphors of suffering

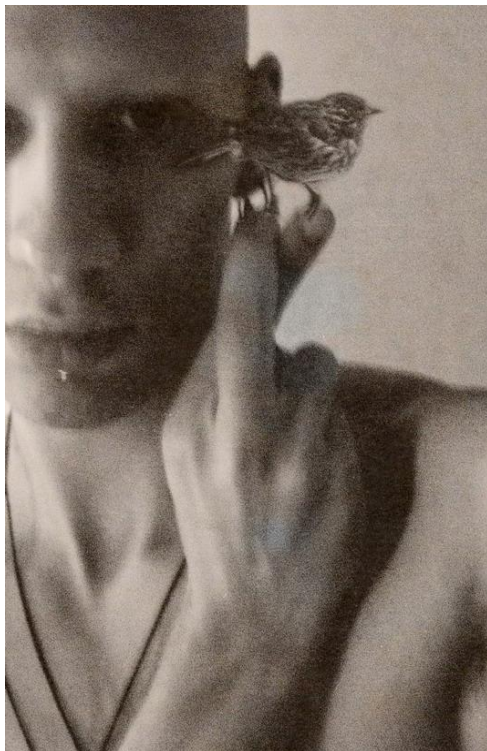
“I believe you simply need to develop pictures whose aesthetics meet your sense of beauty and attach it to your personality, like your sense of humor or intellect, or compassion, or anxiety, or perversions, or whatever eats you up inside the most.”

Kir Esadov

Born in 1988, Kir Esadov is a contemporary photographer from Russia, currently based in Moscow. He received a B.A. in social pedagogy in 2008. After graduating, he worked in

an orphanage for children with severe speech disorders. In 2011 he graduated from the Rodchenko Art School. He had several solo exhibitions in Russia and many other group exhibitions in Moscow, Saint Petersburg, Kiev, Zrenjanin, Belgrade, Bratislava, Houston. Kir Esadov is represented by *Meglinskya Gallery* and *Fotodepartment*. At the moment he works as a freelancer theatre photographer. I was in Moscow and had the chance to meet Kir Esadov, to see his works and get to know his own perspective on it.

Kir Esadov grew up in a circus family in Moscow, surrounded by people who perceived magic as something ordinary. Over time, his photography developed into a construction of the intimate and the exposed self. Indiscriminately mixing together documentary and play-like photography, Kir Esadov recreates his deeply personal microcosm, a very brutal place, sore, but still magical. "I became a photographer because I have no perseverance to write" states Kir Esadov suggesting his acute necessity of expressing himself. "I feel that I can never do consistent photographic series. My goal is to create a massive and complete view of my tiny and immature inner anxiety. Very slowly, step by step, this micro world is forming from pieces, fragments, shards of the physical world." There is of obvious relevance the fact that Kir Esadov's passion for photography is grounded in a decisive event of his life- while a student, Kir Esadov had a car accident that immobilized him for more than one year and left him disabled. In his desperate loneliness, he discovered the photography as the only way of



reintegrating his fragmented self and a means to connect to the outside world. People whom Esadov uses to photograph are bearers of his own pain- cancer or AIDS sufferers, disabled people, or people who had an emotional trauma. Even if makes their portraits, Kir Esadov affirms that does this for his own therapy. None of the works presented below has a title.

I will explore the way he uses the self portraits, both to depict the emotional nature of these relationships as well as to bolster his wounded, readily fragmented, and often depleted sense of self. I will focus extensively on the experience of selfhood and the creation of self structure, most particularly on that stage of self and object

differentiation in which the other is experienced as a part of the self for the purposes of tension relief as well as to establish a sense of self cohesion. I will use the term *selfobject* to refer to the symbiotic way in which a person whose emotional development has been arrested during early stages might use others for the purpose of maintaining a coherent sense of self. It seems that Esadov uses his self portraits as *twins* *selfobjects* (i.e., to soothe himself while having reflected back to his an unflawed mirror image of himself, with whom he could experience an essential likeness).

Suffering from anxiety and extreme insecurity, he considers that the aspects of his psyche would be better externalized, in his photographs. According to Esadov, his work is close to ideas of the soul and introspection, “to inner feelings. [...] They are indoor things”. He always maintains that art is essential to life, like breathing: a necessity rather than a joyful activity, which undermines the boundaries between art and life. For Esadov, art is an essence, “coming from the inside of a person”. It is as if the frailty of his materiality mirrors his own fragility, alongside the desire to contain this vulnerability, while always being conscious of its impermanence. Esadov's idea is to exorcize through the body the *phantasmatic*, which he locates there. He calls phantasmatic the consequences of traumatic experiences that block the creative potential of the human being.



His iconographic metaphors deepen the relationship he tries to establish with the world, because they clearly communicate the extent of his fear. Esadov's use of rich symbolic imagery create a vivid sense of his connections to his past, present, and future. Linking memories and increasing the therapeutic effect contribute to autobiographical coherency, a necessary ingredient for mending adult disrupted attachment.

Esadov's art is, in fact, an expressive movement toward less painful possibilities. This change was facilitated by his awareness, availability of

positive emotions, rich language, and creativity. Each art request provide him the opportunity to look at a different aspect of himself. He is ultimately able to imagine how the exploration of the sensory, emotional, cognitive, and social aspects of pain can give hope.

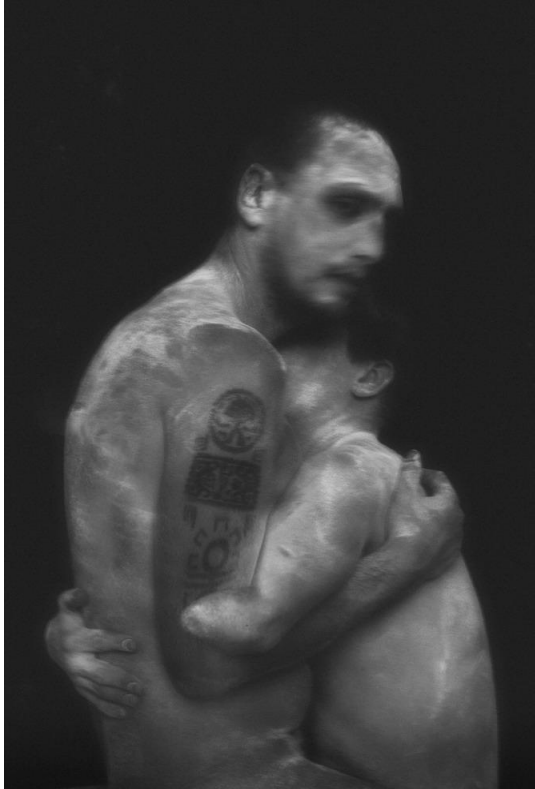
“Draw the problem” encourages the person to tell the story of the pain: the sensory impact, the medical history, how stress, fear, and emotion may be involved, and insights as to how the problem is perceived. The positive relational resonance can create a holding environment for the processing and expression of pain through the art.

The second art request pulls for the mental image of the self. It is an invitation to explore how the pain affects the development and maintenance of selfhood. The autobiographical portrait includes clues to his attachment style. This is important given the potential meshing of attachment styles and vulnerability to pain.

The third request asks for a depiction of internal and external resources that help the problem. This request invites cognitive awareness and provides a glimpse of hope and change. It elicits interpersonal resources and optimally evokes positive expectations and, most importantly, a sense of control.

The final request invites an image of the self now, or the image of the self without pain, in the future. A focus on the *future* also supports the visual exploration and concretization of a renewed mental self-image. To ascertain the potential for change, it is useful to discuss and compare few self-portraits.

My general concern in this section is the question how, depicting his disabled body, Kir Esadov expresses his subjectivity through his photographs. My main point would be that rather than unity and fixed position, the subject’s fluctuation and variability are the theme of those photographs of the body in crisis. To argue that, I trace how Esadov presents his embodiment and his situatedness in his self-portraits, or portraits of other people, or even photographs with animals which do not cease to be representations of his suffering.



My argument is that in the case of bodily crisis, representation is an effective mode to trace back one's identity and to re-constitute the subject endangered by this crisis. I will use Esadov's example to show how representation, and in particular self-representation, forms a tool of construction, not decomposition.⁴ Rather than accepting van Alphen's argument on the disintegrating feature of representation, I will argue here that the conception of the fluid self, introduced as unstable and unreliable, does not have to be perceived as *negative* (destructive or unrepresentable). The de-composing can turn out to be the constituting. The "undoing of life" can turn out extremely helpful in the study of

Esadov's work. The response to the problem of pain in Esadov's art by critics is in my opinion often speculative, and therefore unconvincing. It reminds a lot of the painter Frida Kahlo. Instead of re-positioning the imagery of pain and victimization, existing critics, even

if they are few and insignificant yet, in fact, they use Esadov's disability only as a tool for organizing his works, turning away from the problem of pain itself. The artist is associated with his pain, eclipsed by his pain.



There might be suggestions of self-inflicted or imagined pain regarding the photograph of Esadov, pain that he uses on others and on himself. Nevertheless, I find it extremely inaccurate to transform Esadov's disability into narcissistic

⁴Also Elkins (1999) engages in the problem of representation as bodily distortion, stating that any representation of a body involves distortion, because all representation *is* distortion.

longing for love and admiration, just as much as I disagree with portraying Esadov's illness as a sort of incentive that inspired him to photograph. By ignoring clear iconography of pain in Esadov's photographs the whole concept of pain remains problematic to interpretation.

I defend the thesis that photographing his disabled body is to Esadov an act of retrieving his self-image and finding the coherence within assembled pieces of identity. Esadov is an interesting response to Bacon, if we forget the linearity of time for a moment. Although divided by the differences of culture, education, sexuality, personal histories, and modes of expression, those two artists share similarities that should be acknowledged. Embodiment, for instance, is absolutely central in both Bacon's and Esadov's work. It is also central to viewer's understanding of their work.

I intend to draw the comparison between the body in pain presented by Esadov and by Francis Bacon. In his book on Bacon, Ernst van Alphen (1992) writes about "a momentary loss of self" in the moment of perception of an artwork. Looking at Bacon's painting, a viewer temporarily loses his or her capacity to reflect on it. Representation in this case is a loss of self both for a viewer *and* for the subject of representation; it is an act of decomposing and killing the subject. It is not followed by perception; it is rather the process of perception that concludes with representation. The deformation of Bacon's figures is therefore proof of the lack, or disintegration, of identity. Van Alphen, arguing with Jacques Derrida's statement that there is no life outside the representation (Derrida, 1987), points out how "affective" representation in Bacon's works exposes the crumbling of a coherent subject. He denies representation's constitutive character, its life-giving power. Representation is not life; it is rather life that turns out to be representation (van Alphen, 1992).⁵ Along with destroying the language of a sufferer, the notion of pain present in Bacon's paintings also tends to destroy the conceptualization abilities and language of a viewer. However, while Bacon's bodies are deformed and blurry, Esadov's photographs, blurry as well, are opened, meditative, with oneiric character. While Bacon addresses the viewer in a most sensory way, Esadov's photographs have more "calming" effect – they appeal to one's feeling the silence, the space, the body that is weightless.

⁵Van Alphen adopts a similar approach in his analysis of the art of Dutch artist Armando, referring to violence of the World War II. There again he argues for the unspeakability and unrepresentability of death (in: Goodwin and Bronfen, 1993).

Much like Bacon's, Esadov's photographs might be perceived as works on suffering and disintegration. I, nonetheless, would insist on reading his art as work on suffering and *re-*



integration. The body does not connect to any sense of integrity or solidity in Bacon's work. My argument is that in Esadov's work, it does. That might be because Esadov represents his *own* body and even when he represents the body of others, he is projecting his pain. The position I want to defend is that Esadov's work is about constructing, not de-constructing the subject. Re-integration is a process that can often go unnoticed, and that demands a certain effort from a viewer. It is nevertheless useful, even crucial, to know more about that "moment of loss" van Alphen writes about. Van Alphen quotes Bacon's intention to "hit the nervous system" of

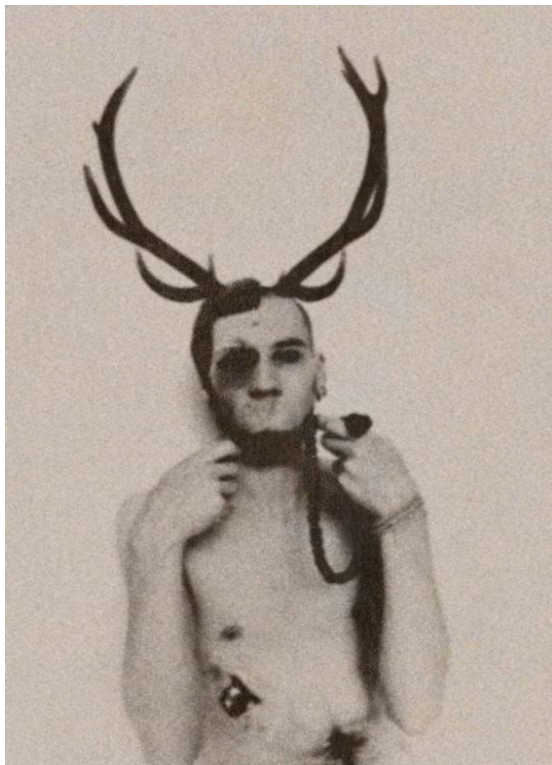
a viewer (van Alphen, 1992, p. 11).

Agony, pain, screams, paralytic movements evoke anxiety and disturbance in an even slightest empathetic recipient of Bacon's painting. Watching Esadov's works, I notice that the drama and agony are not so violent, but even peaceful. Pain does not burst out from the photograph; instead, it becomes more and more intense with looking, it catches the viewer and gradually immerses him into its universe. While in Bacon's work disintegration of the self is accentuated by powerfully violent aesthetics, Esadov adopts elements of nature- trees, clouds, animals; shows just parts of the body or even just silhouettes; and relies much on the background. Like Bacon's figures, the ones of Esadov are shapeless, unfinished, skinless and chaotic. The view I would argue is that Esadov, on his part, invites the viewer to join his suffering, making her or him the integral part of constituting his identity. He carefully constructs himself in various settings, creating an artistic persona, turned to the audience. Figures in Bacon's paintings, whether it is a paralytic child, female nude, screaming man or a dwarf, are disfigured, shattering the viewer's sense of self, and the subject's sense of self.

Pain in Esadov's photographs is still massively acknowledged, even if subtly hidden, although violence is less striking, or maybe just not as quickly happening – it is a slow, constant

process, not a spasm. Examining the styles used by those two artists can be helpful while analysing the fluctuating presence of the subject. Whereas Bacon lets us hear a terrifying scream revealing muscles under the skin, Esadov reverses the process by giving us an unflinching mask, a shadow instead of a face. All this subdues the dynamic of expression, but not its intensity. In re-drawing attention to Esadov's work, rather than his biography, a viewer has a chance to become aware of the problem of visibility/invisibility of pain.

Esadov's work fits very broadly into a type of portraiture, in so much as his work portrays people, though perhaps more 'in motion' than traditional portraiture. This allows Esadov to choreograph his photographs with tactility using various kinds of lines, shading, tones of black and white, and space to frame and explore his ideas, develop the content and create

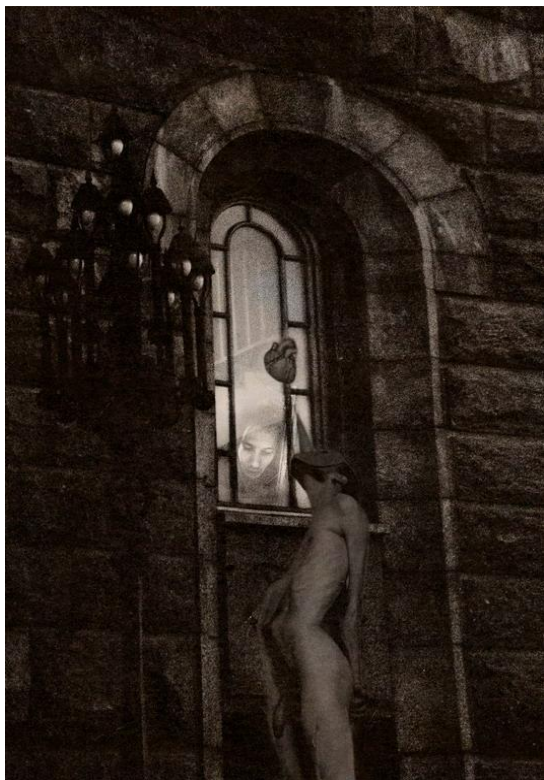


particular moods. His use of centrifugal, evanescent lines is a particularly articulate texture within his work, leading our eyes around the composition while gesturing to something beyond or outside the image. In some works the lines are not definitive, marking people beside one other and apart from one other. Such expressions of relationships are also conveyed by Esadov's use of shadows and small lines that appear as wave patterns indicating a sense of movement or active e/motion. Esadov also uses a grey scale as content and expression. For example, he uses muted shades in grey which give expression to the people in the photographs

while gesturing to an ambiguous (at times definitively detached) relationship to one another. Esadov explains: "... maybe there are a lot of greys because I see things in grey, not black and white. I am drawn to complex and murky situations". Similarly, Esadov uses space to shape and give texture to the content. The relationship of positive space- space that is filled with objects or subject- to negative space- space that is empty or between objects or subjects- often mirrors the relationships within the image. His photographs contain very little object detail and might be described as stark.

This in between, or negative space, though perhaps not the subject itself, is germane and contours a theme that appears in much of Esadov's work: aloneness. The way Esadov has used negative space heightens the man's vulnerability and isolation and offers an expression of solitude that the viewer is left to witness, alone. This mirroring of emotions between what is in the drawing and what we feel as a viewer opens Esadov's work to reflect on our own experiences of suffering.

Pain is not an abstract term; it concerns real body and interferes with body functioning. Similarly, illness is a physically experienced event. Nonetheless, the power of cultural codes and discourses to shape the physical experience of pain and illness has created a whole field in the narrative of medicine and sociology (Morris, 2000). Illness in our society has often



been constructed as a metaphor; meaning built around AIDS is an example of general knowledge condemning politically suspect citizens. Persecuted groups – homosexuals, prostitutes, drug addicts - are seen by the community as violating socially acceptable characteristics (Sontag, 1990). Therefore, representation of pain and disability engage questions about its locus, its destructive powers, its perception by others. In his book *Disease and Representation*, Sander L. Gilman claims that illness is a loss of control, that results in us becoming an Other. The fear of being the Other constructs a very stable and fixed image of disease, external to our sense of self. Accordingly, when brought in touch with

artworks representing disorder, disease, or madness, we experience tension and anxiety about our self controlling powers (Gilman, 1988). The ambiguity involved in the way in which we read visual representations of pain and disease is a result of our sense of control and the process of othering. The positioning of an Other is a necessary moment in the constitution of any cultural body. Because our experience of the body is fragmented and limited, and more internal than external, it has been argued that only the presence of the other can bring wholeness to the subject (Grosz, 1994). The problem of disability as connected to the problem of the Other and to cultural processes of normalizing was introduced by Foucault.

The position I defend is that self-portrait has been a technique used by Esadov to counter the process of social and cultural “othering”. Esadov’s art is an example of the visual constitution of otherness in the narrative of illness and pain. Through self-representation, through taking a look at himself from the outside, Esadov is able to establish himself as a viewer of the Other. The process of fixing and stabilizing the disease through artistic representation allowed him to deal with the fear of losing control of his self-image. This instability can also be noticed in the



formal side of Esadov’s paintings. The figure of Esadov is most of the time grounded in the centre of the composition, but is not fixed, it is centrifugal, it is losing its materiality. The technique of “visualizing” or “dematerializing” the disease and extracting it from the body is a common practice among cancer patients (Stacey, 1997) and has its sources in shamanism and its rituals of “pulling” the pain out of the body (Scarry, 1985). What is seen as a destructive force of representation: “I feel that [the photograph] creates my body or mortifies it, according to its caprice” (Barthes, 1981, p. 10), Esadov reverses in his photographs. To examine Esadov’s representations of

pain and disability is to study that validation and its normative practices and validations constraining the body in crisis.

Like often in Esadov's works the landscape and the elements of nature, form a mirror where the physical/mental condition of Esadov is reflected. In this case, the landscape is almost



agonizing, particularly on the side of the reclining Esadov. Scarry acknowledges the possibility of projection as a technique of dealing with pain: "the human being who creates on behalf of the pain in her own body may remake herself to be one who creates on behalf of the pain originating in another's body" (Scarry, 1985, p. 324). It provides him with a different kind of visual

knowledge, a new way to negotiate the relationship between the inside and the outside of the body. In my choice of visual material here I am particularly concerned with the problem of externalization and internalization of pain. I point out how the experience of pain has been constructed using visual language, but also try to analyze how that experience sometimes attempts to escape *all* possible language. I argue that the effort to trace that language is formative to the mapping of male subject experiencing crisis of the body. Scarry (1985) draws our attention to how pain is often described through an "as if" structure: "it feels as if a needle is going into my spine," "I feel as if a hammer is crushing my bones". The



external object of pain is often introduced when talking about pain, even though the pain is coming from within. The subject's pain here is being transported into the external world of

things and symbols. Pain can also be *internalized* by carrying the objects of external world into the body.

IIIrd Chapter: Pain as collective experience

III.1. Collective trauma. Imagery of suffering and horror

Pain is not simply a private, interior state, but rather a mode of knowing (in) the world – of knowing and making known, which is contextual, contingent, specific and often fleeting. Recognizing this, we can begin to explore how pain already circulates within the contours of our relationality with others; here, pain is not relegated to the realm of immediate physical, emotional hurt, but also includes the emotional trauma, psychological distress, grief and mourning that pain often entails. In this section I will focus on the particularity on the representation of the collective pain, and when talking about collective pain, there are paradoxically involved two other concepts- anonymity and memory. It is not always clear where the boundaries lie between the one in pain, the one who inscribes that pain or the one who grieves that pain as a witness. The constitution of who we are is always made possible by our ties with, and not our separation from others. In other words, it is possible to access the pain of others as pain, and to have our own pain accessed by others by virtue of this relationality. This does not require us to discover or construct a universal expression or interpretation of pain - for example, a symbolic of pain as articulated through imagery - in order to recognize and respond to pain. Perhaps it is precisely because we do not share a universal mode of expressing pain that we resist the possibility that pain behaviour is part of the pain process itself.

Collective suffering and pain might be generated directly by the state- often the injury results from violence, such as assault and torture; or indirectly by people such as pollution, poverty, disasters. Such collective, long term actions have a strong, incontrollable impact on individuals at emotional and physical level. The line between human and-non human causes evanesces, even if all of them are, in fact, of anthropic origin. Regardless of the cause, is the individual who experiences pain. Paradoxically, provoking suffering intentionally is seen as a non-human; but being subjected to pain is a human or even sacred act, then representing pain caused by non-human actions, is an artwork.

Research suggests that realism is an important contextual feature of media violence. Studies have shown that more realistic portrayals of violence may heighten levels of involvement and aggression. Because research has shown that not only the physical consequences, such as blood or dead bodies, but also the emotional results, such as people screaming or crying, may

seriously affect people. On the one hand, it may increase fear reactions, especially when children identify with the victims. However, the conveyance of realistic harm and pain cues may decrease aggression and desensitization.

Images of the body in pain are the primary medium through which we come to know war, torture and other pain-producing activities. The Cartesian paradigm of subjectivity suggests that pain is an interior event that can only be imperfectly expressed through language or visuality. This creates a significant disjuncture between the body that experiences pain and the one who observes this body. The imperative to make pain visible is driven by the desire to access the pain of the other; but, in the context of the Cartesian subject, this access is simultaneously impossible. This paragraph explores as well the ethics of using such imagery for projects that seek to resist or oppose war and torture, and suggests alternative ways of understanding and responding to bodies in pain.

Despite the apparent disconnect between the ‘objective’ visual and the ‘subjective’ or experiential tactile, the image of the body in pain animates and makes possible a whole host of political activities, from torture to military intervention to anti-war activities to critical social science scholarship. It is not a facile process to adjudicate between the ethics of privileging such imagery on the basis of intentionality alone. Indeed, many of these practices rely on a techno-logic of the visual to validate their respective projects, and many rely on the circulation of object imagery to illustrate and support their political claims. In turn, these practices fetishize pain in their drive to make visible what is essentially *unimageable* – that is, the spectrum of experience associated with the body in pain. The body in pain is thus produced as an aesthetical visual image, a symbolic icon that stands in for itself as the referent object of political violence.

The Cartesian representation of the subject-self as a bounded interiority that relates to the world through language and other forms of expression is the underlying schematic on which accounts of pain are largely narrated. Elaine Scarry (1985, p. 13) argues that to have pain is to have certainty; to hear about another’s pain is to have doubt. The underpinning logic of this claim is the sovereign subject who experiences pain, and who can rely only on a series of imperfect and imprecise expressions in order to describe the sensation of that pain to others. The expression of pain is not to be understood as pain itself, but only a description of that which is happening inside the bounded body of the subject. For Scarry, pain is a uniquely inexpressible experience, because unlike desire, grief or love, physical pain takes no object.

For this reason, the visual expression of pain and trauma translates into a politics of representation that flattens the experience of pain by being able to capture only the visible causes or expressions of pain.

One of the results of this is the development of an aesthetic imagery of pain-causing phenomena – an iconography of symbols that stand in for pain and thus become the representational alibis for actual pain: images of starvation, of emaciated concentration-camp victims, of hooded prisoners, of broken and bleeding skins, of blood-stained floors in prison cells, and so on. In the imaging of pain-causing phenomena and of bodies in pain, the specificity of the interior experience of pain, and of the subject that experiences it, is elided or even entirely evacuated. People become representations of their plights. As Feldman argues, we encounter “generalities of bodies – dead, wounded, starving, diseased, and homeless. . . In their pervasive depersonalization, they appear as an anonymous corporeality” (cited in Malkki, 1996, p. 388). The fundamental inexpressibility of pain is the unsaid hypothesis on which a range of claims about torture, war, and death as primarily interior experiences (and thus doubtable experiences) are made possible. For Hannah Arendt, for example, the concentration-camp survivor, had he been able to return to narrate his experience, would not have been believed. The suffering in the camp as a space of profound and potentially limitless pain is understood to defy attempts at narration, because the capacity to express the content of that pain is understood to be severely curtailed.

In interrogating collective pain in photography this section explores how trauma is often reliant on material formats to translate both its occurrence and its burden on the human condition. Our contemporary visual economy produces a materialization of culture where it is manifested not only through displays but structuring a modern way of seeing and comprehending. I position photography as both the social construction of the visual as well as the visual construction of the social. Both processes are iterative where neither is reductive or subsumed by any one element whether it is social, ideological or historical. Mitchell premises vision is that a cultural construction is learned and cultivated, and not simply given by nature. It is connected to the history of arts, technologies, media and social practices of display and spectatorship and is deeply involved with human societies with the ethics and politics, aesthetics and epistemology of seeing and being seen (Mitchell, 2006). In this case, photography evolves through a complex interplay of discursive and ideological debates mediating the ways in which we see, believe and make meaning. These processes do not thwart individual agency but they provide material and symbolic spaces for collective

identification. The increasing use of visuals and simulation technologies to experience or re-live trauma no longer privileges the eye or the gaze alone but combines it with emotive elements to evoke sympathy. The intertwining of image with trauma and its distribution through a circulation economy is a resonant part of contemporary visual culture.

Trauma needs an audience to bear witness, to work through the catharsis and to consign it to the annals of history where it can be repeatedly re-visited to make sense of other trauma that human societies inflict on each other or experience through natural disasters. Trauma equally has a face photography provides this ‘faciality’ where these depictions both function as pictures of ‘re-memory’ (Toni Morrison, 1987) and as narratives of history torn out of their historical contexts to be viewed with renewed horror. The ontological status of an image as bearing witness also calls into account how we valorize the image as a form of visual testimony. With real stories becoming a past, the past often becomes commodified through the visual. The emergence and popularity of ‘dark’ tourism or tourism associated with sites of death, disaster and depravity (Foley and Lennon, 1999) is to a large extent dependent on symbols, physical spaces, artifacts and visuals. This visual economy is equally dependent on new media formats which shrink distance and temporality between the event and spectator where the circulation of iconic images create collective identification with an event producing a capsule memory.

By studying the history of specific images, we can better understand how photographers meant to document events at the time were later transformed into both objects of art and emblems of memory. Photography is not simply illustration of historical narrative. We must examine how captions used in wartime photo became titles of exhibition photographs, how the placement and context of an image changed over time, and, most important, how the actual image changed as its role changed from documenting a moment in time to fostering reflection of the past. By doing this, we can trace how overlapping narratives of the war that informed one another at the time became competing memories of the past.

The absence of the photographs depicting mere bodily injury and death contributes to what Elaine Scarry describes as “the disappearance of the body” in contemporary war, despite the fact that “injuring is, in fact, the central activity of war,” its “obsessive content.” This central fact, Scarry notes, “often slips from view” (Scarry, 1985, p. 67). The body’s disappearance allows the state and the press to direct the public’s attention to the “mythic reality” of war,

rather than its “sensory reality” in which “we see events for what they are” and “war is exposed for what it is- organized murder” (Hedges, 2002, p. 21).

Approaching collective pain, especially war, there is one more term necessary to introduce- ‘atrocities’, the act of extreme cruelty and heinousness. It attributes the first use of this meaning of atrocity to Thomas Jefferson, who referred in 1793 to the ‘atrocities’ committed by a Native American tribe.⁶ There is, then, a link between the concept of atrocity, public concern about it and periods of intensified humanitarian sentiment. Atrocity first emerged as a public discourse at the end of the eighteenth century - an era scholars have associated with cultures of sentimentalism that articulated new understandings of suffering and the body, and thereby prompted a wave of humanitarian action and a new fascination with pain.

The photograph is a prophesy in reverse, as Roland Barthes divined. Men at arms are shot and shot again, shot in black and white. The classic war photographs (photographs of the classic wars) are all in black and white. The dead and the wounded bleed black blood; the young bleed into the old; the poison bleeds out, eventually. In the meantime, the bodies pile up. Contortionists, they practice composition. We goggle at them and try not to look. The artist was Goya, who knew more than enough of men and war. The mottos of his *Disasters of War* (1810–1820) are legendary: “One cannot look at this”, “I saw it”, “This is the truth”. Every war photographer has Goya on his shoulder (Danchev 2009). Don McCullin made these mottos his own. In his autobiography, he recalls coming on a father and two sons lying in a pool of their own blood in a stone house in Cyprus during the conflict of the 1960s. He is riveted by the scene, as much for the tableau as the tragedy. McCullin is an ethical professional. Still riveted when the rest of the family return, he is suddenly conscious of trespassing with his camera, but the survivors are content for him to do what he has to do: “When I realised I had been given the go-ahead to photograph, I started composing my pictures in a very serious and dignified way. It was the first time that I had pictured something of this immense significance and I felt as if I had a canvas in front of me and I was, stroke by stroke, applying the composition to a story I was telling myself. I was, I realized later, trying to photograph in a way that Goya painted or did his war sketches” (McCullin, 2002, p. 47).

⁶Thomas Jefferson to William Carmichael and William Short, 30 June 1793, Thomas Jefferson Papers, Library of Congress, http://jeffersonswest.unl.edu/archive/view_doc.php?id=jef.00062.

In so building the image composition, the bodies and the elements of décor convey the same of overwhelming pain. The faces may not look at us directly, but they address us unmistakably. The address is at once stoic and urgent. Eduardo Galeano has written of Sebastião Salgado's photographs of famine in the Sahel- another battlefield in another war: "These photos watch you. These people fix their gaze on you. They seem more dead than alive, exotic phantoms flowering in a desert of thorns that isn't of this world or of this time. But they look at you and silently they address you. My world is your world too, they say; my time is also your time" (Galeano, quoted in Salgado 2004, p. 133). Photographs may also be instruments of the imagination, tools for morals. Here is an answer to Susan Sontag's final question about photography, on which she brooded for so long. A photograph may be telling us: this too exists.

Current academic, journalistic, and artistic work on war and its aftermath is part of a larger cultural movement reflecting what Annette Wieviorka has called "the era of the witness." In the era of the witness, testimonial discourse "has become stereotypical [and] is embedded in the surrounding political discourse, which is, as it were, superimposed on the testimonies that it in turn instrumentalizes" (Wieviorka, 2006, p. 126). Verbal and visual discourses revolving around atrocity, genocide and mass killings are decidedly intimidating and powerful inasmuch as they are derived from and inevitably connected with the "never again" often postulated in connection with Holocaust testimony. These discourses are also highly ambivalent: mass killings should never happen again but they do occur regularly- Cambodia, Bosnia, Sudan, Burundi, Somalia, the Congo, Rwanda, and so on. In addition, there is a tension between the survivors' often articulated need to tell their stories and the moral imperative to bear witness, thus emphasizing the individual's agency, on the one hand, and the experience of being reduced, in the process of giving testimony, to a victim and hence being denied agency, on the other hand (Wieviorka, 2006). The "never again" discourse is also ambivalent because the act of giving testimony aims among other things to liberate individuals from their traumatic memories. However, it may actually undermine their subject positions in the postgenocide environment within which testimony is given and with which the act of testifying is intimately connected: the past may become bearable (to some extent), but the present may become unbearable.

Visual representations are important components of many genocide discourses (Zelizer, 1998). It may be argued that, in the era of the witness, visual representations, and especially

photography, have contributed a great deal to the delocalization and internationalization of the memory of war and genocide. Photography, however, covers and bears witness (in the sense alluded to in the quotation that opened this section) to different atrocities to different degrees. Neither images of actual killings, nor images of dead bodies explain the killings. Both often leave their audiences “momentarily horrified but largely ignorant” (Keane, 1995, p. 7). In the era of the witness, the public are often consumers of crisis and “spectator[s] to crisis,” rather than being witnesses in the more ambitious sense of “responsible, ethical, participant” (Taylor, 2003, p. 243).

Jill Bennett has shown in her work on trauma art, works of art including art photography, decoupled from the pressures under which photojournalism normally operates, are capable of raising political awareness and making the viewers think about both the conditions addressed in the works of art and their own involvement in and responsibility for these very conditions. Bennett suggests that the question should be asked “of what art itself might tell us about the lived experience and memory of trauma . . . and [about] the experiences of conflict and loss.” With Bennett then the question arises “what it is that art itself *does* that gives rise to a way of thinking and feeling about [trauma]” (Bennett, 2005, p. 2). In their work on photojournalistic icons, Robert Hariman and John Louis Lucaites argue that the “daily stream of photojournalistic images . . . defines the public through an act of common spectatorship” (Hariman, 2007, p. 42). In a Habermasian discursive-action approach applied to images, they suggest that political space is nowadays constituted mainly through images. This argumentation contributes to the debate about the ethics of representing human suffering since it seems to imply that human suffering has to be visually represented, because otherwise the victims would be excluded from the political and no response to the conditions depicted in a given image would be possible. Without visual representation, victims would literally become invisible. As pictures cannot give the viewers the assurance they might like to be given, their contribution to this discourse appears limited. However, it is limited only as long as contribution is equated with explaining and understanding, which are normally regarded as the core concepts underlying academic knowledge production.

The meaning of pictures is intangible and ephemeral, open to interpretation, and changeable over space and across time. Images are unsuitable for generalization and theory building; their relationship to any prior reality is highly problematic and their truth-value is limited. This helps explain why Western culture, although obsessed with images, simultaneously exhibits

some degree of uneasiness about them, often translated into the need to explain pictures rather than accept them for what they are- even though we do not know what they are exactly. Consider, for example, the numerous attempts to explain what Robert Capa's famous photograph "Fallen Soldier" *really* shows (Mitchell, 1994). While some of these interpretations complicate Capa's involvement in the scene and increase his responsibility for the soldier's death, the exact conditions under which the photograph was taken are almost irrelevant for the picture's continuing iconic power: "the more one learns about the circumstances in which Capa made his famous photograph, the less those circumstances matter" (Dyer, 2008).

Images of war and its aftermath should at the very least be regarded as vehicles with which to visualize the unbridgeable gap between an observer's perceptions of the depiction of another's pain, on the one hand, and the other's physical and emotional (i.e., lived experience of) pain, on the other hand. As beautiful images, they invite the standard criticism articulated in connection with the work, for example, of James Nachtwey and Sebastião Salgado, according to which aestheticization and depoliticization go hand in hand. In its crude version, the criticism that some forms of photographic representation aestheticize that which they depict while others do not is obviously flawed, as representation cannot *not* aestheticize; when representing something or someone, the option not to aestheticize does not exist. In its refined form, the criticism refers to images of human suffering that, due to their formal structure or to what in a given situation is understood as beauty, are assumed to be "used as resources for gratification" and to offer the viewer "disinterested pleasure." Such images are said to abstract from the sources of the suffering depicted and the conditions under which it occurred and to obscure the "meaning and implications" of suffering. They are accused of depoliticizing the viewers by diverting their attention from the depicted conditions of suffering to the quality of the image and the beauty of what it depicts. It is often assumed that there is a causal nexus between the formal structure and beauty of an image and the lack of political engagement with its subject on the part of the viewer. Exposed, in pain, to our look, people endure "a second suffering" as long as we are looking and, by so doing, contribute to their exploitation and the theft of their subjectivity. Looking at their pain is, in this sense, a secondary exploitation.

III.2. Bodies in Pain and the Ethics of Photography

The question of whether it is possible for us to recognize pain in the body of another, and what that might mean for rethinking our politics as we move deeper across the landscapes of the so-called war and atrocity, makes up the core concern of this thesis section. I want to pose that the drive to make *visible* the body in pain often evokes a particular kind of seeing, which ultimately works to further the Cartesian rupture between self and other. I want to pose that the imperative to make pain visible through representation actually works to contain and delimit the experience of pain by locating it so firmly in the distant and disconnected bodies of others that our ability to engage is relegated to that of observation, which severely limits the possibility of making response.

I will argue that the inscription of pain through torture and war has been followed by a fetishization of pain through the recirculation of imagery. This fetishization is present even where the intended purposes of circulating the imagery are to oppose and resist torture and war. The drive to repetitively circulate the icon of the tortured body is to risk the circulation of the same logic of verifiability that animated the production of pain in the first place – that is, the appropriation of others' bodies through photography and their objectification toward the service of particular kinds of politics.

This section will explore some of the ethical consequences that are associated with the imaging of pain, advancing the argument that the logic of the visual image risks the final obliteration of the human subject whose world is already undone by the experience of pain. The Cartesian representation of the subject-self as a bounded interiority that relates to the world through language and other forms of expression is the underlying schematic on which accounts of pain are largely narrated. Elaine Scarry (1985, p. 13) argues that to have pain is to have certainty; to hear about another's pain is to have doubt. The underpinning logic of this claim is the sovereign subject who experiences pain, and who can rely only on a series of imperfect and imprecise expressions in order to describe the sensation of that pain to others. The expression of pain is not to be understood as pain itself, but only a description of that which is happening inside the bounded body of the subject. For Scarry, pain is a uniquely inexpressible experience, because unlike desire, grief or love, physical pain takes no object. She writes that there is an exceptional character of pain when compared to all our other

interior states, we do not simply ‘have feelings’ but have feelings *for* somebody or something, that love is love of *x*, fear is fear of *y*, ambivalence is ambivalence about *z*. If one were to move through all the emotional, perceptual, and somatic states that take an object – hatred for, seeing of, being hungry for – this list would become a very long one. This list and its implicit affirmation would, however, be suddenly interrupted when, moving through the human interior, one at last reached physical pain, for physical pain – unlike any other state of consciousness – has no referential content. It is not *of* or *for* anything. It is precisely because it takes no object that it, more than any other phenomenon, resists objectification in language (Scarry, 1985).

This atomistic model of individual human beings with their unique interior landscapes translates into the fundamental unsayability of pain, and the failure of pain to take an object means that we can only approach the pain of others with doubt. For Scarry (1985, p. 4), “pain comes unsharably into our midst as at once that which cannot be denied and that which cannot be confirmed”. Here, the possibilities for accurately or meaningfully expressing pain are always subject to the ever-present threat of their negation. As physical pain is seen to destroy the possibility of its own expression in language, the options for representing pain are limited to a range of visual practices that can only ever point to some trace – some visible *cause* that might point to the presence of pain in another (i.e. the emaciated body in starvation, the torn and bleeding body in war. In this sense, the drive to image the pain of others seeks to impart a certainty to experience that, in the Cartesian model, can ever only be marked by a radical doubt. It is from within the frame of doubt associated with pain that the drive to visualize correlative expressions of pain – rather than the pain itself – occurs. For this reason, the visual expression of pain and trauma translates into a politics of representation that flattens the experience of pain by being able to capture only the visible causes or expressions of pain. One of the results of this is the development of an aesthetic imagery of pain-causing phenomena – an iconography of symbols that stand in for pain and thus become the representational alibis for actual pain: images of starvation, of emaciated concentration-camp victims, of hooded prisoners, of broken and bleeding skins, of blood-stained floors in prison cells, and so on.

In the imaging of pain-causing phenomena and of bodies in pain, the specificity of the interior experience of pain, and of the subject that experiences it, is elided or even entirely evacuated. People become representations of their plights. As Feldman argues, we encounter

“generalities of bodies – dead, wounded, starving, diseased, and homeless. . . In their pervasive depersonalization, [they appear as an] anonymous corporeality” (cited in Malkki, 1996, p. 388). The fundamental inexpressibility of pain is the unsaid hypothesis on which a range of claims about torture, war, and death as primarily interior experiences (and thus doubtable experiences) are made possible. For Hannah Arendt, for example, the concentration-camp survivor, had he been able to return to narrate his experience, would not have been believed. The suffering in the camp as a space of profound and potentially limitless pain is understood to defy attempts at narration, because the capacity to express the content of that pain is understood to be severely curtailed. Arendt uses terms such as ‘unimaginable’ to describe experiences that can never be fully embraced by the imagination, and that, as a consequence, can never be fully reported. In short, “it is as though [the survivor] had a story to tell of another planet” (Arendt, 2000, p. 125). Similarly, she writes that “anyone speaking or writing about the concentration camps is . . . regarded as suspect; and if the speaker has resolutely returned to the world of the living, he himself is often assailed by doubts with regard to his own truthfulness, as though he had mistaken a nightmare for reality” (Arendt, 2000, p. 120). Here, we see that pain and trauma are regarded as so fundamentally inaccessible and unshareable that any attempt at recounting one’s experiences is haunted by the stark fact that one’s suffering will always and necessarily be received by others with radical doubt.

The poverty of communicating traumatic experience was also expressed by Walter Benjamin, who suggests that “witnessing war takes away the ability to speak about it” (cited in Sliwinski, 2004, p. 151). Jenny Edkins (2003, p. 8) expresses a similar understanding with regard to trauma, writing that “what we *can* say no longer makes sense; what we *want* to say, we can’t. There are no words for it”. Similarly, the act of witnessing others’ pain (and deaths) is also fraught with an unsayability, because the witness is limited to only a modicum of access to the pain of the other body.

To be sure, there is an ethical imperative here to mark the experience of trauma as both unique and exceptional – an imperative that, for all its ethical motivations, also works to further divide the pain-filled from the pain-less. Here, the witnessing of pain, because it is marked by the inability of the witness to experience the pain of the other body, can ever only be a partial witnessing. This is Levi’s (1989) formulation of the differentiation between the drowned and the saved. The drowned cannot come back to bear witness to what happened to

them, and the saved are capable of only a partial witnessing. Of course, the possibility of perfect witnessing – of perfect affinity between the one who experiences pain and the one who witnesses it – is not only impossible, but also probably undesirable. The reasons for this undesirability are found not in the impossibility of experiencing the pain of the other, but rather in the immanent risk that the pain of others might be evacuated – through a refocusing on the self – from the realm of politics.

The political imaginary of a world populated by Cartesian subjects who reach out to one another across a range of linguistic, sensory and experiential divides is a world in which expression will always be met with a grain of unknowability. This unknowability is articulated and reconfirmed through the production of the visual – through the artefacts of the world that will always provide an imperfect representation of a phenomenon that takes no worldly object. The inability to know that another is in pain, to believe another to be in pain, is maintained both by the disconnect between Cartesian subjects and in the disconnect between the watcher and the watched in the context of imagery (Malkki, 1996). The question of response and responsibility is thus posed within a context of fundamental inaccessibility, unbelievability and, in turn, political and ethical hopelessness (Sontag, 2003).

Constrained already by the inaccessibility of the experience of pain in the body of another, the representation of pain and pain-causing events through photographic imagery can be seen to further inscribe this distance. Sliwinski (2004, p. 151) argues that “despite the drive to narrate, at some point in the encounter with images, the viewer falls silent too, suggesting the technology demands narrative but also resists that demand”. It is in this evacuated space that we attempt to make sense of the imagery we find before us. It is also because of this evacuation that the drive to narrate takes on a special urgency. Unsurprisingly, the visual symbolics of pain are the subject of fierce contestation. They are images not for the sake of imagery itself, but they assist in the conclusion of the narratives that come to be associated with the imagery. Images thus become part of the narrative-stabilization process that seeks to solidify stories that mobilize disparate and fragmented events into a matrix of meaning.

One can trace the development and solidification of narratives around images, engaging in an excavation of the ways in which facts have solidified around the fragmented visual representations of events. Bodily pain and death are shepherded into specific narratives that seek to combat terror through invasion and conquest. Imagery forms our dominant medium of

access to the pain of the other, and already works to qualify the nature or the necessity of the pain, particularly when pain enters political space. It is difficult to navigate the question of whether the repeated use of this imagery for projects that are considered by their authors to be just and/or ethical is not itself an integral component of the violence that produced the torture in the first place. The gaze enabled by the photograph also works as a sort of ‘hooding’ of the subject, maintaining the inherently violent fantasy that we can see without being seen. This is the pornography of the war image, and here “the obscenity lies in part in its public exhibition” (Malik, 2006, p. 110). Even where the display of the photographs is intended to generate opposition and resistance to the practices of torture, this pornographic element of seeing remains.

The circulation of the imagery associated collective suffering cannot be separated from the violent production of that imagery in the first place, and this is so regardless of the intentionality associated with the circulation of these images. Sliwinski (2004, p. 154) argues that “the helplessness and horror of bearing witness to suffering brings with it the demand for a response, and yet one’s response to photographs can do nothing to alleviate the suffering depicted”. Even the circulation of this imagery for the purposes of resistance is always subject to the objectification of suffering that the photograph produces. For Sliwinski (2004, p. 155), “in the painful encounter with the image lies the responsibility to recognize that individuals are represented in photographs, to recognize their suffering, but also a second responsibility: to recognize the impossibility of that recognition”.

There is no necessary politics associated with the images; and, in fact, the degree to which the photograph evacuates and flattens subjects requires us to either accept the avoidance of politics that the photograph announces or to actively attempt to reinsert a politics. For this reason, the ‘ethical’ use of the imagery of torture and other atrocities is always in a state of absolute tension: the bodies in the photographs are still exposed to our gaze in ways that render them abject, nameless and humiliated – even when our goal in the use of that imagery is to oppose their condition. The imagery of their pain is still read *by and for us*, and this requires us to interrogate both how and why we are engaged in the circulation of the photographs. For Sliwinski (2004, p. 158), “there is something to be seen and therefore known in images of suffering, but it is not the traumatic experiences of others. Rather we are asked to look and imagine their terror, but in this looking [we encounter our] own failure to see”. Bal (2005, p. 159) expresses it this way: “Compassion without an identification that is

both specific and heteropathic leads us to an emotional realm where the fear of violence can be made objectless”.

In the context of an originary disbelief surrounding the experience of others’ pain, one can appreciate why the imagery becomes a necessary instrument towards a politics of resistance. For example, Scarry (1985, p. 9) argues that “Amnesty International’s ability to bring about the cessation of torture depends centrally on its ability to communicate the reality of physical pain to those who are not themselves in pain”. Those bodies in pain must rely on our capacity to *imagine* this pain, which cannot be expressed and can only find an imperfect voice in rupturing moments that also work toward the building of narratives – that is, the photograph, the testimony, the symbolic aesthetic portrayal through art or poetry. The disconnect rests on the very foundations of our modes of knowing. Imagining requires us to think ourselves into the skins of others, and the consequence is that our looking both becomes and remains ours alone. For Sliwinski (2004, p. 153), this means that “to look at the photographs – because one only looks – is to become directly culpable for the erasure of the other’s singularity”. It is thus that we find in certain instances the image that seems to capture a quintessential, transhistorical, collective pain, which in turn elides the specificity of the pain itself. The symbolic comes to stand in for the pain, even as it attempts to express what is *real* about pain, suffering and trauma.

As such, the images that are produced, circulated and mobilized as iconic representations of war are profoundly depoliticizing. The shock and awe component of this imagery does not simply capture the objective facticity of those who find themselves trapped in conditions of extreme hurt and devastation. Rather, the shock and awe culture itself is reproduced through the circulation of that imagery and in the narratives that collect and solidify around the events that the images are made to articulate. There is an imperative here to reconsider both politics and ethics when confronted with images of the body in pain, and to rethink responsibility in each instance. In this way, we might remember that the photograph operates as a sociopolitical text, and is read and re-read in different ways toward the achievement of different narratives and projects. Henry Giroux (2004, p. 791) argues that “photographic images must be engaged ethically as well as socio-politically because they are implicated in history and they often work to suppress the very conditions that produce them. Often framed within dominant forms of circulation and meaning, such images generally work to legitimate particular forms of recognition and meaning marked by disturbing forms of diversion and

evasion". It is worth considering the possibility that this imagery actually works to cordon off the pain of the sufferers and further distances them from us as the circulators and meaning-producers of their plight.

Does the circulation of this imagery for the purposes of normative political and educational projects automatically already include an ethical reflexivity? The circulation of this imagery cannot rely on ethical intention alone – or perhaps at all – because there is no single way to read the image and because we cannot escape the voyeurism and the objectification associated with its circulation. The use of images for ethical aims risks falling into the same trap as that which led to the desire to perpetrate and image the torture in the first place: the circulation of shattered bodies, in part, as political specimens for political projects. Given this, the following question seems to me to be crucial: what are the ethical implications of the circulation of the images of bodies in pain? I do not want to suggest that we should not be confronted with the world-shattering materiality of torture. Rather, I am interested in the ethics of the choices we make concerning how we express and interpret this materiality.

It is clear that visual representation has the capacity to animate important forms of political resistance. It is precisely this that makes questioning the ethics of imagery difficult. The ability to maintain this position rests on the notion that there is a significant degree of ethical separation between the torture and the imaging and circulation of the imagery of torture, and that intention is of paramount importance. The increasing reliance on visuality to tell us about the world creates a disconnect that makes possible the claim that this imagery can be circulated ethically. By marking and framing the pain-producing event as that which happens to and in the other body, the photograph as visual artefact also works to propose and police a boundary between worlds of pain and non-pain, creating a rupture that may be insurmountable. In the context of the ongoing war and terror, this disjuncture becomes particularly pernicious. There is a risk here that the politics that are mobilized in response are primarily self-referential, rather than other-regarding. The suffering of the other is emptied of its immanence, and reread back both to and by us in ways that work either to condemn or excuse – and in any event explain – the violent politics that caused the pain. But, in either case, consideration of that pain is quickly bypassed, and we are left with the ability only to point to the problem that caused it.

The risk in accessing the pain of the other in its own right *as pain* is the possibility of our consanguinity with him – to his presence in ourselves – to the possibility of recognizing and grieving that pain, even if it is also true that pain and grieving are themselves contextual and multifarious. We are always caught in a space of violence, in an ethics of decision whose consequences cannot be entirely calculated or managed, even when our goals are to minimize or oppose the violence that causes the pain. The circulation of this imagery as symbolic of the War on Terror is to dismiss both the specificities of the bodies in pain that are produced through the War on Terror, and the specificities of the War on Terror itself, which is a project with multiple – and equally unacceptable – violences.

Again, this is not to deny that there is an imperative to convey the fact and the content and the consequences of violence on particular bodies. Indeed, bodies in pain speak in the vocative case of language, and they demand both response and accounting. The ability to engage in oppositional politics in the context of the war, or disaster is crucially important, and so I do not wish to argue in favour of iconoclasm, but to rather engage in the relatively modest enterprise of inquiring into *how, why* and *with what effects* we are employing these aesthetic technologies in our resistance efforts, and to ask ourselves what our answers might mean for others. This requires us to interrogate *ourselves* as both producers and consumers of this imagery. Our continuing reliance on imagery to impart an account of events - to identify the ethics either contained or called for in the image - is part of the process through which we deny our own presence in the reading and circulation of these images. In the erasure of ourselves as the authors of both the images and the readings, we are simultaneously engaged in an erasure of those who appear in the images themselves. In the process, there is a fetishization taking place - a pornography.

Is it prudent, thoughtful or reserved the use of imagery or, conversely, its refusal? I want to consider the possibility that there is, in fact, no necessary insurmountable gulf between the one who experiences pain and the one who witnesses it. Rather, it is our increasingly sole reliance on imagery that helps to widen and confirm that disconnect. To think ethically is not only to think about the experience of the body in pain, but also to consider the possibilities for accessing and responding to that pain differently. The point here is that if we are always already fundamentally occupied by the other – by the other's desire, the other's pain, the other's grief - then the process of differentiation between ourselves and others becomes extremely murky. Indeed, the risk is that the distinction becomes meaningless. Other people's

violence becomes our own. Why, then, should we not understand the pain of others in some way, in some measure, as our own? I am aware of the danger that, in this paradigm, the pain of the tortured body becomes everyone's, and by extension, no one's. But, the point is not to reach a place from which we can no longer respond, or to reach a place where we can respond with a perfect ethicality (this is impossible). Rather, what is at stake here is the recognition that we must *both* convey the material reality of bodies in pain *and* seek to avoid relegation of that pain to other bodies in ways that cut off the possibilities for ethical response. It is to refocus our attention on the question of pain itself; of the ways in which it is inscribed and experienced; of the ways in which we seek to represent it; of the ways in which we think we might best access it; and, by extension, of the ways in which we might consider our uses of imagery and our range of options for response.

III.3. Yuri Kozyrev: Aestheticization of the pain of others in war

You're right. I'm a photojournalist. I collect images of wars, of hunger and its ghosts, of natural disasters and terrible misfortunes. You can think of me as a witness.

José Eduardo Agualusa

Engaging with the literature on visual representations of human suffering, being a witness, and trauma, the current section analyzes the photography of Yuri Kozyrev and explores the conditions in which photography can succeed in disrupting stereotypical political interpretations in connection with the atrocity and collective pain and suffering. Art photography, it is argued, may help transform viewers from consuming spectators into participant witnesses who self-critically reflect upon their own subject positions in relation to the conditions depicted in the image while simultaneously being aware that an adequate response to the image is not possible. By discussing photography of war, the section acknowledges the unrepresentability of it; by focusing on *visual* representations, it reflects the extent to which political space is nowadays constituted by means of images; it contributes to the “process of self-examination” demanded by Kofi Annan regarding the ways “we collectively remember the tragedy” (Annan, 2004).

Born in 1963, in Moscow, Yuri Kozyrev is a Russian war photographer. Kozyrev is based in Moscow, but spent an extended time in Baghdad for *Time*. As a photojournalist for the past 25

years, Yuri Kozyrev has witnessed many world-changing events. He started his career documenting the collapse of the Soviet Union, the last empire of our modern times, capturing the rapid changes in the former USSR for the *LA Times* during the 90's. In 2001 Kozyrev started to cover international news. He was on the scene in Afghanistan after September 11, 2001, and lived in Baghdad, Iraq, between 2002 and 2009, arriving before the war. During those Iraqi years, he was a contract photographer for *Time Magazine* and travelled all over the country photographing different sides of the conflict. Since the beginning of 2011, Kozyrev has been photographing the uprising and the aftermaths in Bahrain, Yemen, Tunisia and especially Egypt and Libya. He has received numerous honors for his photography, including several World Press Photo, the OPC's Oliver Rebbot Award and the ICP Infinity Award for Photojournalism and in 2008 he received the Frontline Club Award for his extensive coverage of the Iraq war.

His extensive body of work documenting the "Arab Revolutions" received wide industry recognition. "On Revolution Road"- on the revolts in Egypt, Bahrain, Yemen and Libya made for *Time Magazine* won the 2011 Visa d'Or News at the International Festival of Photojournalism Visa pour l'Image. In 2012 his work was awarded at the World Press Photo Contest and he was named the 2011 Photographer of the Year in the Pictures of the Year International Competition. Kozyrev work has been widely exhibited. Some of his more recent exhibitions are "Russie", a unique showcase of work from Russia exhibited together with Stanley Greene in Paris at La Maison de la Photographie "Robert Doisneau" and the group exhibition "Révolutions Arabes" curated by Alain Mingam.

After 2011, when Yuri Kozyrev traveled to seven countries covering protests and uprisings for *Time*, including Egypt, Bahrain, Libya, Yemen, Russia, Greece and Tunisia, writes about the remarkable experience as a witness and what all the revolutions have in common: "It's unique that I've been able to cover all these uprisings and revolutions during the year. I'm lucky- it's incredibly complicated to understand where you need to go when you're on the ground, and I was lucky to have a lot of help. The protests were well under way when I got to Tahrir Square in late January, and their size and scope took my breath away: in two decades of covering the Middle East, I had never encountered anything like this. There was huge fighting between the pro-government supports and revolutionaries. Some of the journalists were beaten. Some of them lost their cameras. They kicked me out, but I managed to get back in the next morning. I saw a lot of families- not just young men or revolutionaries- and

everyone was helping each other, praying together. It was a great time. Everybody was waiting for Mubarak to make the right decision, and suddenly it happened. And it was so emotional: people crying, shouting, screaming...it was incredible. The next morning, it was

Yuri Kozyrev: from the serie *On the Road to Revolution*



over. The army was kicking everyone out. They weren't friendly—there was a feeling of 'You got what you wanted. Now, get out.' Of all the revolutions I covered, Egypt was the most special." (*Time*, December 14, 2011). The story of Egypt is the story of crowds. Until January 2011, its politics were the sterile, servile sort enforced by one-party states. But Tahrir Square changed that, and public affairs have refused to move indoors since. What Yuri Kozyrev has captured in these photos is the abrupt, almost neck-snapping changes that exploded in Cairo's public spaces. First the city erupted in rejoicing in the hours after the Egyptian military removed President Mohamed Morsi from office July 3, his one-year tenure eclipsed by the most massive public demonstrations in the nation's history three days earlier. Now tens of thousands surged into Tahrir to cheer, bathed in the glow of fireworks and the green laser pointers sold in the square like corn on the cob. Thousands more piled into cars and honked their way through the streets of the capital in the kind of celebration normally seen after a World Cup final.

Afghanistan's transition out of war is not shaping up to be very peaceful. Every day seems to bring another militant attack and more civilian lives lost as Afghan forces struggle to take over security ahead of the pullout of most foreign troops next year. Powerful women are being targeted with violence and kidnapping in parts of the country that are slipping back under Taliban control, and no one is quite sure what will happen come elections next spring, when long-time leader President Hamid Karzai has said he will step down from power.



Yuri Kozvrev: *Ali Abbas*

War photography is the new war poetry. “What passing-bells for those who die as cattle?” (Owen, 1963, p. 44). The classic war photographers have all been portrait photographers *in extremis*. They sought the whites of the eyes, and tried to fathom what they found there. The original war poets did something very similar. Wilfred Owen wrote to his mother of the “very strange look” he had seen on soldiers’ faces at Étaples in 1917: “... an incomprehensible look, which a man will never see in England. ... It was not despair or terror, it was more terrible than terror, for it was a blindfold look, without expression, like a dead rabbit’s. It will never be painted, and no actor will ever seize it. And to describe it, I think I must go back and be with them” (Owen, 1967, p. 521). The problem of the communicability or incommunicability

of suffering is nested in atrocity of all sorts, and irreducibly in war. “Wasn’t it noticeable at the end of the war that men who returned from the battlefield had grown silent - not richer but poorer in communicable experience?” (Benjamin, 2002, p.143-144). Walter Benjamin’s observation of the First World War could apply to any war. The photographer is normally said to take a portrait. Portraits from the battlefield are not so much taken as frozen, as if wrung from the very soul of the subject. The look was seized, not by an actor, but by the camera. Once it had been captured on film, once it had been exposed, it could be seen, that is to say apprehended, as if for the first time. “Photography is naïvely believed to reproduce visual reality”, Janet Malcolm (2008) has observed, “but in fact the images our eyes take in and the images the camera delivers are not the same. Taking a picture is a transformative act”.



Yuri Kozyrev: from the serie *On the Road to Revolution*

The so called portraits taken by Kozyrev on the battlefield are just striking. The look is blank, then, but revealing. The faces tell true. Telling, however, is not the only work it is doing. It is also asking. The faces ask something - demand something - something more than pity. For the survivors of the unsurpassable, pity will not suffice. The pre-eminent philosopher of the face-as-demand is Emmanuel Levinas. For Levinas, “the face is a fundamental event” (Levinas, quoted in Wright 1988, p. 168-169). As that oracular announcement might suggest, what Levinas calls “the face” is not to be understood literally, or even metaphorically, but

poetically. Strictly speaking, it is a rhetorical figure. Thus, in one characteristic formulation, “the face is a hand in search of recompense, an open hand. That is, it needs something. It is going to ask you for something” (Levinas, quoted in Wright 1988, p. 168-169). It has been suggested that the face in Kozyrev’s photographs, raises the unspoken question, “How can this be? Or, more transgressively: “Are we allowed to view what is being exposed?” (Levi Strauss, 2003, p. 7). Levinas insists on going further. For him, the face is a demand - a demand, not a question - which calls for an ethical response. From these premises he develops a number of suggestive ideas. In considering the face, he weighs its resources: “There are these two strange things in the face: its extreme frailty - the fact of being without means - and, on the other hand, there is authority. It is as if God spoke through the face. ... The face, then, is not the colour of the eyes, the shape of the nose, the ruddiness of the cheek” (Levinas, 1996, p. 167). The face may be a face - a human face - but it may also be another part of the body, perhaps even a body part. In *Life and Fate*, as Levinas saw it, the face is the back, or the nape of the neck. “Grossman isn’t saying that the nape is the face”, he explained in one interview, “but that all the weakness, all the mortality, all the naked and disarmed mortality of the other can be read from it” (Levinas, 2006, p. 201). In his own work, Levinas (1996, p. 167) underlined the moral of the story: “The face as the extreme precariousness of the other. Peace as awareness to the precariousness of the other”.

Kozyrev follows the wars, and the massacres, inspecting the ground and the guilty secrets sown there. At first sight, some of his scenes look almost apocalyptic. These haunting images - “chronotopia” as Norfolk calls them - are meditations on the ethics of response and responsibility. “Art historical references may be intriguing”, he writes in a collection of his photographs of Afghanistan, “but the destruction of Afghanistan is first and foremost a human tragedy in which millions lost their lives. The people killed in these attacks leave almost no record - only the forensic traces survive to tell of the carnage” (Norfolk 2002, p.38). They are his way of saying to the other, buried and unburied, “Here I am.” Still, Kozyrev uses light to create eerie, cinematic, or painterly images. The images are very strong, but the light exposure makes them endurable and less viscerally provoking.



Yuri Kozyrev: Untitled (The Conflict of Osetia)

Conclusions

It was not my intention to present the artworks I analyzed as final answers to many dilemmas one might stumble across when witnessing pain. Rather, I aimed to provide a wider frame for such dilemmas. Art and artistic creativity cannot be expected to simply provide the answer to how to live with pain around us and inside us, but rather to relinquish morally charged viewpoints on pain and open the space for further inquiry.

Nowadays one finds images of pain and violence not only in the domain of art, but also in mass media, often accompanied by an already formed moral assessment. Nevertheless, it was art, not mass media, which seemed to me the best medium to make readers aware of the presence of pain. Art reading involves the process of choosing between various approaches, placing artwork in certain contexts, building strategies and models, specifying points of view, checking and updating one's knowledge with a new vision. Images are substitutes – they are always placed and located in spaces of human use, meanings and values. They correspond not so much to things as to sensations, perceptions and conceptions.

It has been my aim to trace how objects convey meanings and how those meanings are not only mediated, but in large part activated by cultural convention. I have pointed out that even primary reading involves cultural codings. One central deficiency of many definitions in art history is that they convey the assumption that narrative exists in hermetic isolation, that it narrates itself. The artworks on pain presented here undermine that assumption.

I presented different kinds of pain: the result of accident, of illness, of war, or the reflection of a mental state. I looked at the pain inflicted by others or to a certain extent self-induced. The research traces the self-mapping of the body in pain through abandoning the conception of pain evading language: as long as we see pain as an activity of the body only, and language as a function of the mind, pain will continue to resist that language. Instead of falling back on literary metaphors and adjectives to bridge the gap between bodies feeling pain and looking at pain, one might become aware of pain while looking at art presenting bodies in crisis. Catching the represented body in the process of dematerialization, decay and destruction provides deeper knowledge on the concept of suffering. The self in pain undergoes many differentiated stages of being and in-between states of transition. While pain should be taken into account as a major incentive for any transformation the subject may undergo, I have also pointed out how the subject in pain is often ungraspable and fluid, and at the same time how easily that subject can be conceptualized as victimized and marginal.

The argument advanced in the section about collective trauma is simple and without solution: I suggest that the mobilization of violent imagery produces an irresolvable ethical dilemma. There is a necessary and perhaps unavoidable violence in the reproduction and circulation of imagery associated with war, but also an equally urgent imperative to oppose torture and war. We should not, however, dismiss this tension simply because it is unavoidable. Rather, what I advocate here is a consideration of the use of this imagery; a reflection on whether it is indeed always necessary in order to engage in political resistance in the name of ethics. I have argued that the Cartesian imaginary that posits pain as a fundamentally interior phenomenon that is expressed only imperfectly through the instruments of language severely constrains the ways in which we are able to conceive of ethical engagement with the body in pain. Produced in a culture that relies fundamentally on visuality for its political bearings, the image constrains the possibilities for recognizing and responding to the pain of others, and thus returns to us a flattened representation that actually evacuates the image of the one in pain. Images do not speak for themselves – they are made to speak for, by and about *us*. We are asking these bodies to do political work for us, we use the war photos not just means of memory, but even as a purge, a catharsis.

The tension inherent in the Cartesian model of subjectivity asks us to think about the problem of pain differently; it asks us to consider the possibility that pain is not an interior, private state, but a shared and shareable phenomenon that is expressible and accessible in a fully social and intersubjective way. This awareness provides us the opportunity to recognize some of the more pernicious effects of the use of imagery of atrocity.

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