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WHAT IS DOLOROLOGY?

Who is embodied, and how, and what is served by the sensual turn?

—Lauren Berlant, “Critical Inquiry, Affirmative Culture”

In October 1852, one of the chief medical authorities in the emerging field of clinical obstetrics, Dr. James Young Simpson, wrote a ferocious letter to his London colleague Dr. Henry Ramsbotham. Simpson, the first medical professional to administer anesthetic agents in childbirth, made a comparison between the agonies of labor pain and those of corporeal punishment of slaves in order to convince his doubtful critic of the benefits of etherization. His comparative argument elucidates how pain in marginal bodies took on social and political meanings in the nineteenth century:

I wonder that you and Dr Lee should still persist in asking your patients to shriek and suffer in deference merely to your professional prejudices. Yesterday I was reading a letter from Dr Howe describing a public slave-whipping scene in New Orleans where a poor shrieking girl had a series of horrid lashes inflicted to serve merely the temper and prejudices of her master. And while the doctor gave a most heartrending account of her agonies he adds that what struck him as worst of all was all the other masters maintaining that this inhuman and cruel practice of theirs was the only safe practice with slaves, just as on equally untenable grounds you will . . . maintain that the shrieking of patients in labour is the only safe practice for them. To my mind and heart, the one doctrine does not appear less shocking at this time of day than does the other. (quoted in Waserman 1980, 160)

The comparison of labor pain and the pain of being tortured intends to advertise the etherization of women during parturition, which in Simpson's context meant the alleviation of pain in white and upper-class female bodies. Evoking this pain together with the suffering of black women under the yoke of American chattel slavery weds both types of pain in one humanitarian perspective.¹ Corporeal pain for Simpson signifies "untenable" and "inhuman" practices, whether these are the physical abuses of black bodies in enslavement or the medical neglect of female bodies suffering from birth-pain. Both bodies in pain equally affect the sensibilities of the humanitarian and compassionate subject. Thus, they are also aligned and evaluated in a comparative relation: torture causes pain in black bodies *like* childbirth does in female bodies. This comparative recognition of pain further compels the white male doctor to the same compassionate response, and he is poised to rescue both marginalized bodies from their agonies in the name of medical and social progress. Simpson exemplifies a humanitarian subject engaging with the pain felt by other bodies: this subject recognizes, articulates, evaluates, and alleviates the shocking pain in different bodies as the object of politics. With "mind and heart," the medical professional as politicized citizen compassionately *feels with* marginal bodies, forcefully articulates their pain, identifies its cause, and administers the right social and medical remedies—be it abolitionism or etherization. The passage frames anesthesia for women and the emancipation of slaves as part of the same liberating project—the recognition, articulation, comparison/differentiation, and alleviation of unspeakable pain in marginal bodies. Moreover, Simpson's claim to a compassionate sensibility makes clear that the capacity to "feel with" and "deal with" pain in other bodies resides primarily with white male experts.

The central argument of *American Dolorologies* asserts that Simpson's recognition of pain in white and black female bodies exemplifies a complex discursive logistics that pervades scientific and social discourses on the body, difference, and the political throughout the nineteenth century. This logistics produces differences in subjects by showing how their bodies are differently capable of painful affect and in need of rescue through compassion. Bodies and subjects are constructed as their relative pain of oppression and violation is recognized and discursively defined. Speaking on behalf of hurting bodies, this compassionate discourse articulates the pain of racialized and gendered bodies which can only shriek in inhuman agony and therefore "fail" to speak for themselves. In this act of compassionate recognition (or, as we will see, negation), the sufferings of different bodies are rendered comparable and as such speak to the nature of differences between subjects. Aligning labor and torture with race and gender differences, it further collapses naturalizing and politicizing views of pain into each other. Consequently, this humanitarian discourse crucially defines the

cultural meanings and causes of suffering and thus prescribes the potential remedies that will restore the damaged humanity—as freedom from hurt—of the *body in pain*.²

This book proposes that the discursive evocation of pain negotiates the social meanings of race and gender in American modernity on the level of corporeal materiality: pain acts as discursive currency to produce racialized and gendered bodies, even as it is evoked to argue their social and political inclusion. I will call these strategic mobilizations of pain *dolorologies*. The term borrows from anesthesiologist John Bonica's definition of "dolorology [as] the scientific study of pain" (1954, 23). In my usage, *dolorology* means the racialized and gendered encodings, symbolic meanings, material effects, and political functions of pain in North America. Dolorology denotes the discursive evocation of pain as it executes an alignment of bodies, their hierarchization, and the naturalizing, politicizing, and symbolic effects of this turn to the affective dimensions of subjects. *American Dolorologies* analyzes discursive agencies and operations that construct and negotiate subjects through bodily pain. It investigates the regulation of bodies in pain as they are recognized as socially and politically meaningful, and which bodily experiences are not recognized and abjected. It asks how pain is mobilized to inscribe racial and gender difference into bodies, and how this evocation is at the same time instrumental to liberal projects.

James Young Simpson's invocation of pain, difference, and compassion is in no way a singular occurrence, but rather testifies to a pervasive discourse of pain, which this book will trace from 1750 to the late nineteenth century. Simpson's alignment of labor pain and torture, race and gender, and abolitionism and anesthesia indicates that this discourse is neither uniformly compassionate and inclusionary, nor is it exclusively concerned with "natural" pain or biological difference. The discourse of pain I call *dolorology* rather designates a fundamentally ambiguous site where liberal forms of recognizing marginalized suffering are conflated with biologizing circumscriptions of marginal bodies. At the core of *dolorology* are these ambivalent views of the suffering body in American modernity, and the diverse clusters of discourse partaking in them: medicalization, comparative sciences, abolitionism, inclusionary politics, theories of feeling and affect, etc. *Dolorology* demarcates a logistical arrangement and constellation of these diverse strains, rather than a unified politics or "culture of pain" (Morris 1991). Pain is a site of cultural negotiation of what bodies and traumatic experiences mean in various registers of knowledge and how these meanings are or are not relevant to the political value of subjects. In order to grasp these both conflicting and collaborating politics of the body in pain, I situate *dolorology* between two crucial epistemic transformations that characterize modernity: sentimentalism and biopolitics. *Dolorology* is an organizing mechanism that governs the

distribution of meanings between the compassionate recognition of subjects and the scientific objectification of bodies. It functions as a relay between the sentimental and the biopolitical circumscription of politics. It defines the meanings of suffering in different bodies and how these matter to the nation, science, and constructions of race and gender. As these two registers of discourse extend their grasp on the embodied subject, pain is mustered as the exchange value between affective recognition of suffering and the scientific classification of the body feeling pain.

Both strains—sentimentalism and biopolitics—are vital components of American modernity that have frequently been viewed as opposing forces seizing on the interpretative value of bodies in the nineteenth century. While sentimentalist modes (such as the stylistic conventions of the slave narrative) have been associated with an inclusionary politics, aiming to register diverse sufferings of marginalized groups, the scientific gaze on the body has been identified as one of the central agencies that organizes and biologizes racial and gender difference in modernity. Within the perspective of dolorology, both orders of discourse (and paradigms of interpretation) intersect in their access to pain, the negotiation of its meaning for politics and scientific classification. This so far seldom acknowledged “collaboration” between sentimentalism and biopolitics is exhibited *in nuce* in Simpson’s comparative view of torture and childbirth and their association with racialized and gendered bodies, as the following introduction of the two terms will elucidate.

SENTIMENTALISM AND PAIN

Simpson’s urgent call for humanitarian action—invoking “heart-rending,” “cruel,” “untenable” qualities of pain—is exemplary for the conventions of sentimental discourse. His language of pain is inextricably bound up within an “aesthetic ideology of the sentimental” (Woodward 2004, 72), the grounding of politics in affect and the egalitarian project of American modernity it supplements. In order to construct itself as the emancipation of all subjects from violent oppression and exclusion, American egalitarianism narrates itself through the suffering and pain of excluded and oppressed bodies. Its sentimental rhetoric promises the alleviation of suffering: through compassionate recognition by, sentimental representation within, and affective inclusion into the national body. America as the project of universal equality for all subjects in this view is understood as the project of a complete recognition and alleviation of suffering, or what Debra Walker King polemically calls a “pain-free society” (2008, 27). The national promise of pain-freedom for all citizens is reflected in the plethora of narrations of suffering (and redemption) in American culture that ranges

from early-republic jeremiads to antebellum captivity and slave narratives to contemporary trauma narrative, minority testimonies,³ and the various conservative backlashes against these.⁴ As Lauren Berlant concisely argues, much of American culture and discourse (both popular and critical) is thus working with an “alphabet of . . . pain” (2000, 33) that tries to register and represent the forms of exclusion and oppression that are continuously produced in liberal democracies.

Sentimental discourse in America in this view does not merely specify a literary genre. Initially dismissed by cultural scholars as a vulgar mode of literary discourse, associated with the domestic, corporeality and anti-intellectualism,⁵ sentimentalism has, since Jane Tompkins’s study *Sensational Designs* (1985), been reevaluated as a “national project about imagining the nation’s bodies and the national body” (Samuels 1992, 3).⁶ In Tompkins’s wake, the sentimental evocation of emotion, suffering, and bodily states of exception has been described in terms of a “liberating method” of literary and political discourse that is firmly attached to the idea of American democratic culture. Phil Fisher calls sentimentalism “a politically radical technique, training new forms of feeling” that enables the representation and inclusion of marginalized subjects: “[T]he weak and helpless within society gain by means of sentimental experience full representation through the central moral category of compassion” (Fisher 1985, 17). Saidya Hartman, writing on the sentimental techniques of abolitionist writing, contrastingly stresses sentiment’s complicity with white hegemony. Sentimental modes supplement the judiciary and cultural exclusion of subjects precisely by focusing primarily on the body and thereby precluding the political representation of marginalized subjectivities: “[S]entiment facilitated subjection, domination, and terror precisely by preying upon the flesh, the heart, the soul” (1997, 5).

These ambivalent evaluations of sentimentalism’s focus on the body’s affective and painful states indicate the double movement carried out by the discursive mobilization of pain, namely, to speak the body in specifically empowering and simultaneously hurting, naturalizing, and abjecting ways. Karen Sánchez-Eppler’s *Touching Liberty* argues that sentimentalism crucially prescribes the forms of embodiment and humanity available to subjects through the (potentially) empowering recognition of their suffering. Writing on the sentimental formulas of nineteenth century abolitionism, she argues: “[T]he physical oppression and the juridical exclusion of black . . . bodies gives rise to a political movement and a literature that strive . . . to speak the body, but that in so representing the body . . . exploit and limit it” (1997, 8).

American Dolorologies traces this dialectical currency of “bodies in pain” in sentimental discourse and its prescriptive effects for the discursive representation of embodied subjects. It charts the ways in which discourses

that seek to recognize pain and enact compassionate inclusion at the same time violently construct and determine the social, political, and national significance (or insignificance) of different bodies. This understanding of the corporeal underpinnings of processes of subjection resonates with a recent body of scholarly work that has significantly reframed American culture's contemporary preoccupation with pain, feeling, and compassion. The terms "trauma culture" (Berlant 2001; Kaplan 2005), "wound culture" (Seltzer 1998), "culture of compassion" (Berlant 2004a), or "testimonial culture" (Ahmed and Stacey 2001) have emerged as critical monikers to describe a link between subjectivity and pain, and the public sphere in which these traumatic subjects are publicized. Linda Williams argues concisely that "pain [has been advanced] as the true core of personhood and political collectivity" (2001, 43). These works inspire my approach to pain as a historical artifact. While "the contemporary subject is achieved through a proximity to trauma" (Ahmed and Stacey 2001, 4), the discourse of pain and trauma as subject making also evoke modern genealogies of the body. Historical perspectives on contemporary notions of identity, trauma, and the public sphere have so far rarely been acknowledged or consistently researched. In Lauren Berlant's extensive work on democracy, liberalism and sentimental displays of compassion and their imbrication with questions of race and gender, she dubs this nexus as the discourse of "national sentimentality." The history of this complex is coextensive with the history of American liberal society: "[National sentimentality is] a liberal rhetoric of promise historically entitled in the United States, which avows that a nation can best be built across fields of social difference through channels of affective identification and empathy" (2000, 34). The concept therefore denotes a historically deep structure of social representation that assembles the intelligibility and political agency of subjects via their relative capacity for "having" and "feeling with" pain. Berlant highlights that sentimental evocations of "bodies in pain" are thus always connected to the privileging of certain bodies and subjects, and the dismissal, distortion, and pathologization of others:

[Sentimentalism's] core pedagogy has been to develop a notion of social obligation based on the citizen's capacity for suffering and trauma. This structure has been deployed mainly among the culturally privileged to humanize those subjects who have been excluded. . . . But . . . the humanization strategies of sentimentality always traffic in cliché, the reproduction of a person as a thing, and thus indulge in the confirmation of the marginal subject's embodiment of *inhumanity* on the way to providing the privileged with heroic occasions of recognition, rescue, and inclusion. (2008, 35)

Sentimentalism, though arguing on behalf of the recognition and inclusion of subaltern bodies, is thus situated within hegemonic systems of differentiation and objectification: it always potentially reiterates and reinscribes the hierarchies of race and gender.⁷ Moreover, the discursive seizure of pain—as a deeply corporeal phenomenon—enables the reaffirmation of difference in the “ontological” and “natural” domains. The recognition and evocation of pain as a political discourse of humanization thus produces *corporealized* subjects that can be both included on behalf of their pain and marginalized through the differences confirmed by this pain. Emphasizing this fundamental ambivalence of humanizing discourses, *American Dolorologies* is situated in proximity to Judith Butler’s notion of “vulnerability,” which seeks to conceptualize the discursive construction of a body’s capacity to be violated and addresses the question how violation is made recognizable and meaningful. “Vulnerability” for Butler fundamentally shapes the discursive construction of what it *means* to be human:

A vulnerability must be perceived and recognized . . . and there is no guarantee that this will happen. Not only is there always the possibility that a vulnerability will not be recognized and that it will be constituted as the “unrecognizable,” but when a vulnerability is recognized, that recognition has the power to change the meaning and structure of the vulnerability itself. In this sense, if vulnerability is one precondition for humanization, and humanization takes place differently through *variable norms of recognition*, then it follows that vulnerability is fundamentally dependent on existing norms of recognition if it is to be attributed to any human subject. (2004b, 43; my italics)

In other words, the capacity to be wounded and violated, and thus to emerge as a subject of humanity (and humanitarian sentiment) depends on and is shaped by the norms of recognition. Sentimental displays of suffering in this view are materializations of racial and gendered difference, though sentimental discourse articulates them against the limiting, exclusionary, and violent effects of these categories.

American Dolorologies seeks to supplement the wide-ranging cultural and philosophical perspectives on this problematic with a historical inquiry into pain as a discourse. Like Berlant and others,⁸ I argue that the genealogy of the complex interrelation between sentimentalism, humanity, social norms of recognition, and the body is coextensive and interdependent with the emergence of American democratic culture. This historical backdrop suggests not only sentimental modes of discourse as a crucial historical

context for the emergence of dolorologies, but, further, a second epistemic shift relevant to the mobilization of “bodies in pain”: this shift is framed by the Foucauldian concept and genealogy of biopolitics, and deployed mainly in biologizing, objectifying, and naturalizing discourses on the body, for example, the emergent life sciences of the eighteenth and nineteenth century. To my mind, most of the aforementioned authors do not explicitly acknowledge the biopolitical dimensions of sentimentalism.⁹ This book seeks to establish this important connection between the political and sentimental discourses in the modern period, and the simultaneous biopolitical evocation of the body in scientific knowledge production during the same era.

PAIN AND BIOPOLITICS

Coming back to Simpson’s letter, the biopolitical context is evident: his recognition of marginal pain takes place within a larger movement of the medicalization of reproduction. Simpson’s argument about childbirth and anesthesia is situated within the professionalization of medicine and the emergence of clinical knowledge in disciplinary fields such as obstetrics and gynecology. His evocation of birthpain in white women¹⁰ in this view takes place on the advent of scientific regimes that subject reproduction and the female body to increased medical and social observation, management, and control. Obstetrics and gynecology in the nineteenth century organize “reproductivity as a biopolitical substance” (Deutscher 2008, 56): medical experts increasingly discuss female bodies with regard to notions of fertility, the health or degeneration of populations, and as indexes of racial purity. Simpson’s argument about pain in childbirth is, I argue, part of a discourse paving the way for late-nineteenth-century ideas on population management in relation to eugenicist ideas of the racial composition of the nation.

Obstetrics as a discourse is exemplary for the production of populations as biological entities, which Michel Foucault has described as the central task of biopolitics. The objectifying circumscriptions of bodies and their pain deployed within these fields of scientific knowledge production is part of what his later work identified as a new technology of power aimed at governing the human as a form of biological life. The biopolitical mode of power focuses less on the disciplining and surveillance of individual bodies than on the governing of populations as biological forms of life:

[W]e see something new emerging in the second half of the eighteenth century: a new technology of power [that] does not exclude disciplinary technology, but it does dovetail into it, integrate it, modify it to some extent, and above all, use it by sort of infiltrating it, embedding itself in existing disciplinary techniques. . . . Unlike

discipline, which is addressed to bodies, the new nondisciplinary power is applied not to man-as-body but to the living man, to man-as-living-being; ultimately, if you like, to *man-as-species*. [It] is addressed to a multiplicity of men [presenting] a global mass that is affected by overall processes characteristic of birth, death, production, illness, and so on. [This] seizure of power is not individualizing but, if you like, *massifying*. . . . After the anatomo-politics of the human body established in the course of the eighteenth century we have, at the end of that century, the emergence of something . . . I would call a “biopolitics” of the human race. (Foucault 1997, 242–43; my italics)

The concept of biopolitics aims at grasping those technologies of power that not so much exert discipline on individual bodies, but differentiate and comprise bodies and subjects into populations. Contrary to his earlier texts,¹¹ Foucault’s genealogy of biopolitics has explicitly acknowledged the crucial function of categories of difference within power regimes. As he argues on the figuration¹² of racism, which emerges in the eighteenth century, these axes enable to establish the state as an assemblage of racially differentiated populations. Power seizes on these by observing, measuring, and managing their composition, degeneration, mixture, purity, etc. With the “emergence of biopolitics,” Foucault writes,

[R]acism is inscribed as the basic mechanism of power, as it is exercised in modern States. . . . It is primarily a way of introducing a break into the domain of life that is under power’s control: the break between what must live and what must die. The appearance within the biological continuum of the human race or races, distinction among races, the hierarchy of races . . . all this is a way of fragmenting the field of the biological that power controls. It is a way of separating out the groups that exist within a population. It is, in short, a way of establishing a biological type caesura within a population that appears to be a biological domain. This will allow power to treat that population as a mixture of races, or to be more accurate, to treat the species, to subdivide the species it controls, into the subspecies known, precisely, as races. That is the first function of racism: to fragment, to create caesuras within the biological continuum addressed by biopower. (1997, 254–55)

The discourse of dolorology enacts this caesura by constructing racialized and gendered bodies. It differentiates and compares their relative capacities for pain and distributes different entitlements to socially significant

suffering on behalf of this capacity. As Simpson's quote indicates, it does so by evoking a highly individualizing recognition of pain (e.g., the anonymous slave girl's "personal" story). However, the "body in pain" within dolorology always signifies a collective of bodies among others, which are differentiated or aligned with each other by their access to pain. While thus producing seemingly personal narratives of suffering and compassion, these are made intelligible primarily as speaking for a socially suffering group. Simpson's broad generalization of birthpain and slave pain and their comparison illustrates how pain fragments the broad field of traumatic experience in liberal societies and establishes prototypical "bodies in pain": the slave girl's pain can, for instance, be recognized as the pain of "slavery," of "womanhood," or of "black femininity." The corporeal body therefore metonymically embodies different populations constructed via their simultaneous political suffering and natural/biological pain. By determining which racial and gendered *bodies* feel which pain, and relating this to the social and political entitlements of generalized populations, dolorology enables the collapse of biological and political discourses into each other. Or, as Foucault puts it, "biological existence [is] reflected in political existence" (1990, 143), which is to say that political entitlements are negotiated in biological and biologizing terms, and biological circumscriptions of pain in bodies work to regulate how subjects are recognized as suffering within the political domain.

This imbrication of politics with the biological in modernity has been critically elucidated by feminist and critical race studies for at least two decades. These bodies of scholarship, investigating the scientific undergirdings of racism and sexism, crucially inform my approach and archive. Londa Schiebinger argues that the life sciences¹³ and their projection of bodies onto the objectifying categories of gender and race function as a necessary countermeasure to the modern discourse of egalitarianism beginning in the late eighteenth century. The knowledge production on biological difference poses a regulatory strategy within liberalism to contain the threat of empowering movements: "[W]ithin the republican framework, an appeal to natural rights could be countered only by proof of natural inequalities" (Schiebinger 2004, 143). The shift to biopolitics is therefore crucial to the emergence of democratic and liberal rule in Western societies and the stabilization of hegemonic notions of the universal subject of democracy as white and male. Biopolitics in this reading is instrumental in the exploitation and exclusion of bodies and subjects via racializing and gendering differentiation within democratic systems. The rise of scientific medicine, anthropometry (physiology, phrenology, comparative anatomy, etc.), Darwinism, and countless other disciplines of scientific knowledge production projects bodies and populations onto racial and gendered strata. These knowledges ontologize and naturalize those differences the political sea change explained to be abolished

and thus materially enabled the continuation of systems of enslavement,¹⁴ the ideology of separate spheres, political disenfranchisement, and violent oppression within liberal democracy.

American Dolorologies locates the biopolitical meanings of pain mainly in the scientific, medical, and generally objectifying discourses that construct the “truth” of bodies and their differences through practices of surveillance, measurement, and comparison.¹⁵ The emerging life sciences and their attending paradigms of “scientific racism” and “scientific sexism”¹⁶ categorize and naturalize bodies and their potential ranges of experience and pain. Biopolitics thus shapes to a large extent ideas of public bodies, their differences and political meanings, and represents a crucial part of the project of fashioning distinctive American bodies with recourse to the question of whose pain carries which meaning. The book traces the genealogy of these body-producing knowledges and their interaction with sentimental and political discourses. It maps how these evoke pain and taxonomies of pain-capacities as a vital relay over which the meanings and privileges of bodies and subjects are negotiated. The scientific debates on the use of anesthesia in childbirth around 1845 are a case in point, for they negotiate the meanings of, expertise on, and capacities to have pain along the lines of gender and race. Pain is measured, aligned with racially infused physiological differences, degrees of civilization and thus humanity. This nexus enables scientific discourse to simultaneously speak on behalf of the (suffering) body, evaluate its meaning for science and democracy, and link its performativity to an “inner truth” of race and gender. Further, these medical discourses demonstrate that these notions of the body in the nineteenth century are part of a widely received popular knowledge that underwrites literary, political, and other cultural texts. In this view, scientific articulations of pain are not separate from popular, political, and sentimental discourses, but rather amalgamate with these to form *American Dolorologies*.

PAIN AND SPEAKING

Apart from these historical frames, which will be investigated in the following chapters, my analysis of the discursive mobilization of pain further implies a crucial epistemological consideration that speaks to contemporary theoretical and political constellations. While *American Dolorologies* primarily proposes a historicizing genealogy to present-day diagnoses such as “wound culture” or “trauma culture,” the ambivalences of pain’s evocation also partakes in debates that surround late modern narratives of pain and their political deployment. One crucial aspect concerns the ongoing identification of painful experience with the “nondiscursive”—what Elaine Scarry in her classic book *The Body in Pain* has called pain’s “unspeakability” (1985,

4).¹⁷ As pointed out in relation to James Young Simpson's compassionate recognition of slave pain and female pain, sentimental discourse installs a fundamental discontinuity between "being in pain" and "speaking" it: the sympathetic doctor articulates an experience, which those suffering can only utter in "shrieking." Pain, in other words, is discursively mobilized *on behalf of bodies* that are constructed as *unable to speak* their pain. Humanitarian discourse in other words risks to affirm the speechlessness of those suffering under its exclusionary mechanisms precisely through the discursive articulation of unspeakable pain in "other bodies." The articulation and recognition of pain and suffering within the intimate public sphere therefore is not tantamount to the oppressed subject's emancipation from it, as Lauren Berlant's polemic points out: "[T]he recognition by the dominant culture of certain sites of publicized subaltern suffering is frequently (mis)taken as a big step toward the amelioration of that suffering. It is a baby step, if that" (2000, 33).

Recognition, I propose, is rather a double-edged process of "promise and damage" (Seitler 2003, 83) within discourse itself—a rhetorical maneuver that *simultaneously* constructs pain as an "exceptional" and "unspeakable" phenomenon changing the rules of discourse toward inclusion, and reinscribes the norms of recognition, experience, and the intelligibility of bodies and subjects. This perspective takes up contemporary criticism of the problematic linkage of minority discourses with narratives of trauma and the representational and political dilemmas arising from this connection. Feminist scholars¹⁸ have diagnosed and criticized this nexus—termed by some as the victimology-tradition of feminism¹⁹—and its function within late modern cultural economies. All detect a fundamental ambivalence that emerges when identities and their claims to social recognition are predominantly depending on a "logics of pain" (Bell 2000, 60). Especially Wendy Brown's influential *States of Injury* (1995) has explored the nexus of pain and subjectivity as the central problem of contemporary identity politics. In her argument, minority discourses and the hegemonic institutions recognizing them increasingly pursue a "moralizing politics" that aims at

developing a righteous critique of power from the perspective of the injured [and thus] delimits a specific site of blame for suffering by constituting sovereign subjects and events as responsible for the "injury" of social subordination. It fixes the identities of the injured and the injuring as social positions. (Brown 1995, 27)

Both marginalized and hegemonic discourses therefore rely on the politicization of personal experiences of pain, a strategy that for Brown leads to a problematic "wounded attachment" within identitarian discourse, an

equation of identity and trauma: “Politicized identity . . . enunciates itself, makes claims for itself, only by entrenching, restating, dramatizing, and *inscribing* pain in its politics. . . . a politics of recrimination that seeks to avenge the hurt even while it reaffirms it, discursively codifies it” (ibid., 74; my italics). Claims to pain not only may intervene in hegemonic discourse (and thus empower the project of identity politics), but also produce subjectivities that are identified, normalized, and ultimately marginalized through that pain.²⁰ While this dialectic is crucial to the historical mobilizations of pain within sentimental discourse,²¹ Brown’s observation on the “discursive codification” happening in testimonies of hurt, pain, and suffering points to a mechanism intrinsic to the performative process of articulating pain. As she argues on narratives of painful experience articulated within various strands of feminism, these always evoke a particular notion of the body that is “nondiscursive”: “Within the confessional frame, even when social construction is adopted as method . . . ‘feelings’ and ‘experiences’ acquire a status that is politically if not ontologically essentialist—beyond hermeneutics” (ibid., 42). While the evocation of pain as something beyond discourse or hermeneutics poses an intricate problematic to antiessentialist politics,²² the same mechanism—the mobilization of pain as nondiscursive—interests my project as a crucial discursive maneuver within *hegemonic* recognitions of pain in marginalized bodies.

Pain is mustered, as Simpson’s performative invocation of the shrieking victims of “white terror” and “female nature” reveals, as a quasi-ontological dimension of experience that is able to cast a universalizing bond between all feeling subjects. This humanitarian performative simultaneously justifies that a white male subject can—under the guise of compassion—speak for the experiences of marginal subjects and bodies. The compassionate recognition of marginal suffering by agents of the dominant culture therefore deals in the construction of pain as a universal affect enabling the sympathetic communication between bodies and subjects. In order to function as the relay enabling compassionate cross-identification via strata of difference, pain is figured as that which is excluded by or exceptional to discourse—i.e., unspeakable. Pain, bodily agony, and the affective experience of violation thus come to figure as indices of a “bottom-line humanity.” It is precisely on behalf of this humanism that hegemonic discourse justifies its evocations of pain, defends the racial and gendered logistics it enacts, and reinforces the privileges of speaking realized by its recognition.

As a project investigating the discursive enlistment of pain for negotiations in the political domain, *American Dolorologies* is vitally interested in these historical, political, and epistemological modalities of *speaking pain*. How and by whom is pain spoken when the subject in pain cannot speak? How does pain enter discourse, and thus emerge as objectified, its source

identified, its remedy obvious, its agony almost overcome? In other words, which subject positions “master” whose pain through language and how does this mastery work? How does pain and its speakability relate to different subject positions, the power relations between them, and their respective histories and genealogies? These questions decidedly refuse to circumscribe an ontology of pain, but rather illuminate its powerful *discursive currency* as a rhetoric of “universal true feeling” (Berlant 2000, 34) that stabilizes hegemonic norms of recognition.

CHAPTERS

This book analyzes three historical junctures of biopolitical and sentimental discourse, covered in chapters 2, 3, and 4, which address the emergence of *American Dolorologies* within three fields: the establishment of modern aesthetics, exemplified by Edmund Burke’s treatise on the sublime (1757); the introduction of anesthesia into modern medicine (1846), illustrated by debates surrounding the question of birthpain, race, and medical compassion; finally, the photographic articulation of pain in black American bodies that emerge before, during, and after the abolition of institutionalized slavery in America (1865). These genealogical forays are concluded by a reflection on contemporary articulations of pain in cultural discourses.

As the first part into the historical investigation of this discursive constellation, chapter 2 discusses Edmund Burke’s aesthetic theory in *Enquiry into the Sublime and the Beautiful* (1757). Burke’s text performs the shift from a monarchical system of aesthetics (as decorum) to an aesthetics that legitimizes the bourgeois subject as the agent of democratic politics. As a text vitally thinking about pain in both political and physiological terms, this prominent example of the Scottish Enlightenment serves as a privileged entry into both the philosophical origins of sentimental discourse and to early formulations of biopolitical knowledge. Burke’s *Enquiry* brings the two fields of the biological and political together: it frames aesthetic sensibility in physiological, that is, material terms—a linkage that is achieved by coupling aesthetic perception with muscular action, and—crucially—pain. Burke’s is as much a text on physiological differences of human bodies, health, as it is on the bourgeois capacity to know. It presents both a microphysics of the white bourgeois body, differentiated by gender and, to a lesser extent, race, that is interested in the physiological processes of perception; and a treatise on sensitivity, feeling, and compassion as necessary ingredients for the universal, democratic subject. Burke links the two fields—sensibility and the biological—in crucial ways and precedes the later American discourses that evoke pain both in biological/scientific and sentimental/political terms. The formation of the universal subject within aesthetics—i.e., the bourgeois

subject as producer of knowledge—decisively employs a dolorology that links this subject of knowledge to a gendered and racialized corporeality.

Chapter 3 follows the gender and racial performances of Burke by discussing pain's function in the formation of professional medicine in the first half of the nineteenth century. Taking the rise of clinical obstetrics as example, pain emerges as a crucial discursive site over which this process is negotiated in several ways. Burke's model of painful knowledge production informs the practices and performances of male medical (and scientific) professionals of that era, linking a particular performativity of pain to privileges of knowledge production, white masculinity, and medical authority. These masculine modes of pain are contrasted with an analysis of the debate around the medical, political, and biological meanings of female birthpain. In 1846, the introduction of ether anesthesia into medical (especially obstetric) practice gave rise to a discussion around the causes, uses, and remedies of pain during parturition. This medical framing of female pain as pathology enabled the figuration of the "overcivilized nervous [white] female," which is juxtaposed against a painless and primitive black femininity. The debates of white male experts around birthpain in this view install a *comparative dolorology* that distributes different levels of sensitivity to pain across different bodies and thus crucially negotiates the meanings of gender, civilization, and race via the relay of bodily pain. These biopolitical circumscriptions of the "female body in pain" are popularized in birth manuals for women, published in the second half of the nineteenth century. These texts transform the scientific dolorology—linking capacities for pain to notions of civilization, race, and gender—into modes of self-conduct and self-surveillance for white women within a populationist framework. As the United States during that time experienced an unprecedented influx of immigration, I argue, these manuals increasingly construct pain as speaking to the health of white women, and therefore the racial integrity and purity of the white nation. These texts produce what I call "governmental scripts" regulating the norms of self-conduct by which white women are designated as purveyors of racial health and, ultimately, agents of a eugenics from below.

Chapter 4 traces the racializing effects of articulating pain within a different field: it charts the *comparative dolorology* that aligns black and white male bodies during the Civil War era as their respective pains are visually negotiated in abolitionist photography. The small archive of *photographic abolitionism* projects Robyn Wiegman's observation that "the black body becomes a representational sign for the democratizing process of U.S. culture itself" (1991, 325) onto the visual representation of black and white bodies in pain. Emerging within abolitionist discourse, the photographs reflect the public recognition of devalued pain in black bodies into a politically valid "suffering from slavery." Mostly emerging as propaganda pieces during the

war, these pictures place predominantly the male black body injured by enslavement in competition with other bodies: white soldiers suffering for emancipation and national unity, “white slave children” representing the pain of miscegenation, or racial science’s representations of the black body as biologically inferior. The pictures negotiate the national and racial significance of pain—a comparative dolorology that decidedly regulates how black American subjects are incorporated into the national body after slavery. The photographic transformation of Southern slaves into black American subjects is not only engaged in the liberation and humanization of captive bodies by recognizing and alleviating their pain of enslavement. Moreover, the question of humanization implies integrating black bodies in the regimes of biopolitics that views people as racial populations, whose intermixing needs to be evaluated, managed, and secured.

The concluding coda will revisit the figurations and constellations of race, gender, and “bodies in pain” distilled from the historical chapters in the contemporary sphere. While arguing for the continuity and historical pervasiveness of the dolorological discourses of the nineteenth century, the coda will address further discursive investments into a rhetoric of pain after September 11, 2001. Here, through the construction of the event as *national trauma*—the national body as “in pain”—the relative levels of pain-tolerance and compassionate feeling are redistributed among the figures of the democratic and the terrorist subject. Through a reading of the highly formalist terrorism/torture thriller *Unthinkable*, I argue that the invocation of terrorism impacts on the conventions of national pain in two ways: on the one hand, the discourse on terrorism and torture reiterates and revamps the historical association of subjectivities with levels of pain; on the other, the terrorist poses a new figuration that is constructed as external—exceptional—to the American dolorologies of national sentimentalism and therefore is wielded to legitimize liberal democracy’s new forays into the relentless infliction of pain in “other” bodies and nations.

The guiding question of these discussions is how pain allows for the distribution of gender and racial differences and their corporealization. I focus thus on the exchange of pain between the sentimental and the scientific, their contradictions and collusions, and how both partake in the production of not so much the modern “subject of pain,” but in the materialization of bodies differently capable of pain, suffering, and compassion. Considering the vast and populated landscapes both archives provide, the cursory form of my project is justified. The historical examples I focus on—Burke’s material formulation of the modern, bourgeois subject of aesthetics; the gendered logics of anesthesia; and the photographic recognition of racialized bodies in pain—are exemplary of particular intersections. They do not constitute an extended history of pain. They aim to give clues on the various constella-

tions of bodies in their access to pain—and thus the rhetoric of politically relevant suffering. The historical chapters provide sketches of a genealogy to more contemporary discourses revolving around pain, compassion, and recognition of suffering or vulnerability.

Without trying to relativize the important empowering successes achieved through articulations of pain and social injury, my book aims for a “dialectical history of promise and damage” (Seitler 2003, 83) that sheds light on the ideological forms undergirding the objectivist discourses fueling and the material repercussions resulting from the persistent connection of pain and subjectivity. My historical account of pain, understood in its biopolitical and sentimental uses, therefore concurs with Robyn Wiegman’s remark on the problematic relation between today’s critical, identitarian discourse and its historical precursors. She argues that contemporary political interventions often fail to attend to the continuity between the ideology in the text and our own politics and subject positions. Accordingly, she recommends that the rethinking of historical shapes of Western racial and feminist discourse—and thus the critical arsenal of cultural studies—should be a “vehicle for shifting the frame of reference in such a way that the present can emerge as somehow less familiar, less natural in its categories, its political delineations, and its epistemological foundations” (1995, 202). The examples hint at a genealogy of the systematically and politically powerful evocation of different bodies in pain, a discursive constellation I call *dolorology*. They further aim at defamiliarizing the rhetoric of pain and trauma so common to contemporary cultural productions and democratic discourse.