"I Am in Pain" As A Political Speech Act: Wittgenstein, Language, and the Discourse of Pain
Bir Politik Söz Edimi Olarak "Acı İçindeyim": Wittgenstein, Dil ve Acı Söylemi

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Abstract

This study argues that the utterance "I am in pain" is not a simple report of an internal sensation but a political speech act whose meaning, force, and consequences emerge through shared linguistic and social practices. Drawing on biomedical, psychological, social, and political approaches, the study conceptualises pain as a multidimensional phenomenon shaped not only by biological mechanisms but also by subjective interpretation, cultural norms, and structures of power. Integrating Wittgenstein's account of language-games with anthropological and sociolinguistic analyses, the study proposes that pain becomes intelligible only when expressed through publicly recognisable criteria, such as cries, metaphors, narratives, or gestures. Linguistic expression is therefore constitutive of pain rather than descriptive: through expression pain acquires a communicative and normative dimension, and without articulation or acknowledgment, it risks becoming socially or politically erased. Building on speech act theory and the framework of performativity and recognition, the article conceptualises the utterance "I am in pain" as an illocutionary act that demands response, asserts vulnerability, reorganises social relations, and exposes hierarchies of credibility and authority. Because the success of this speech act depends on normative and institutional structures that differentially legitimise speakers, the expression of pain operates as a political intervention that reveals and contests the unequal distribution of visibility, care, and power.

Keywords: Pain, Speech Act, Wittgenstein, Performativity, Political Recognition.

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Öz

Bu çalışma, "Acı çekiyorum" ifadesinin yalnızca içsel bir duyumun aktarımı olmadığını; anlamı, etkisi ve sonuçları ortak dilsel ve toplumsal pratikler içinde ortaya çıkan politik bir söz edimi olduğunu öne sürmektedir. Biyomedikal, psikolojik, sosyal ve politik yaklaşımlardan yararlanarak çalışma, acıyı yalnızca biyolojik mekanizmalarla açıklanamayacak; öznel yorumlama, kültürel normlar ve iktidar yapıları tarafından şekillenen çok boyutlu bir olgu olarak kavramsallaştırmaktadır. Wittgenstein'ın dil oyunları yaklaşımı antropolojik ve sosyodilbilimsel çözümlemelerle birlikte ele alındığında, acının ancak çığlıklar, metaforlar, anlatılar veya jestler gibi kamusal olarak tanınabilir ifade biçimleri aracılığıyla anlaşılır hale geldiği gösterilmektedir. Bu nedenle dilsel ifade acıyı yalnızca betimleyen bir araç değildir; ifade yoluyla acı iletişimsel ve normatif bir boyut kazanır ve ifade edilmediğinde ya da tanınmadığında toplumsal ve siyasal düzeyde görünmez hale gelme riski taşır. Söz edimi kuramı ile edimsellik ve tanınma tartışmalarına dayanarak çalışma, "acı çekiyorum" ifadesini yanıt talep eden, kırılganlığı ortaya koyan, toplumsal ilişkileri yeniden düzenleyen ve güvenilirlik ile otorite hiyerarşilerini görünür kılan bir edimsöz olarak kavramsallaştırmaktadır. Bu söz ediminin başarısı konuşmacıları farklı biçimlerde meşrulaştıran normatif ve kurumsal yapılara bağlı olduğundan, acının ifadesi görünürlük, ilgi ve iktidarın eşitsiz dağılımını açığa çıkaran ve ona meydan okuyan politik bir müdahale olarak işler.

Anahtar Kelimeler: Acı, Söz Edimi/Konuşma Eylemi, Wittgenstein, Edimsellik, Politik Tanınma.

INTRODUCTION

Pain is one of the fundamental aspects of being human as it is experienced by all individuals, yet it is also one of the hardest things to talk about. While it is inherently personal and affective in its nature, it acquires meaning when it enters the domain of language. Pain is not simply a private, internal phenomenon to which we assign a label; it is a reality whose comprehension relies on shared modes of existence and shared linguistic practices. Wittgenstein states in *Philosophical Investigations*, "the meaning of a word is its use in the language" (1986, §43). Consequently, the meaning of "pain" is not discovered by introspection but is formed by what individuals say and do within certain linguistic contexts. This understanding has significant ramifications for political philosophy. If the statement "I am in pain" is not a straightforward expression of an internal state but rather a socially constructed speech act, then the acknowledgement, rejection, or alteration of suffering is intrinsically political.

Pain does not simply occur within a body; it circulates, becomes visible, and acquires meaning through discursive practices (Foucault, 1972; Wittgenstein, 1986, §43). Certain types of pain are intensified and politicised, others are silenced or dismissed (Butler, 2009; Scarry, 1985). Therefore, pain is not something just experienced, it is regulated. Pain is politically significant since who is permitted to express pain and whose pain is to be acknowledged is a choice. Structural inequalities shape the credibility accorded to speakers and legitimacy of their pain claims (Fricker, 2007, pp. 17-29), so that pain acknowledgement is never evenly distributed: political regimes create hierarchies that determine whose pain counts, whose deaths are significant, whose grief is publicly accepted

and whose suffering is embedded in social and political narratives so that stories of victimhood or heroism is created (Butler, 2009, pp. 1-32).

This study mainly claims that pain must be understood as a discursive construct with its political dimensions that emerges through the act of enunciation. Saying "I am in pain" is not just a way to describe how you feel; it is also a way of participating in what Wittgenstein calls a "language-game" (Wittgenstein, 1986, §§7, 23, 43), a socially shared practice that defines what pain is, how it looks, and what moral or political claims it makes. In other words, "I am in pain" is not just an epistemic statement, not a declaration of knowledge; it is also a political event.

Sensation-terms acquire meaning only if they are used in shared linguistic practices (Wittgenstein, 1986, §290). Pain, then, is inseparable from the discourse, it is accepted as a reality only when it is expressed. Expressing pain is constitutive of the experience itself because only through language, parts of pain are formed (Waddie, 1996, p. 870). This means that we come to believe that someone is in pain not through private introspection but through linguistic cues. The capacity to express these cues is shaped by institutional, cultural, and ideological forces. Thus, silencing pain functions as a mechanism of political erasure. In this study, pain is not only discussed as a biomedical experience but as a multidimensional phenomenon that encompasses not only physiological but also mental and social suffering. All these dimensions could be caused, made worse, or shaped by political forces and whose articulation is itself a political act. It is not limited to war, torture, or collective trauma, but also includes everyday experiences of exclusion, discrimination, and dispossession that stay unrecognised until expressed.

Therefore, when pain enters the discourse and challenges the structures that would ignore it, it becomes a political act. The utterance "I am in pain" exemplifies this dynamic. This utterance performs several functions simultaneously:

1. It claims a first-person authority based not on introspective certainty but on language patterns that are accepted by society.

2. It demands recognition, which means that others must respond, care, or acknowledge the pain.

3. It challenges power, especially when the speaker is from a group that is often ignored and whose pain is often silenced.

4. It declares that the speaker is a political being who has the right to be seen.

These statements function as what is called "performative speech act" (Austin, 1962, p. 12) because they do not merely describe the reality but transform it. When someone says something about pain, when they claim they are in pain, then this pain becomes a reality for everyone else. We simply cannot ignore or say no, you are not in pain, when someone comes and says they are in pain. We accept the fact that they do experience pain, and this requires us to do something about it. This challenges the common assumption of pain is purely a personal, epistemically private experience. Rather, pain is publicly constituted and politically mediated through language. If a person cannot express pain, or if one's expression is ignored, then that pain becomes socially and politically invisible. To develop such a claim, this study will proceed in three main sections: the next section will examine what pain is by drawing on biomedical, psychological, social, and political accounts, and will argue that pain is a multidimensional phenomenon whose recognition and meaning are

mediated through language rather than exhausted by bodily sensation. Second, Wittgenstein's philosophy of language and subsequent work on pain expression will be analysed to argue that "I am in pain" belongs to a public language-game: pain is constituted, negotiated, and sometimes denied within shared forms of life, linguistic practices, and cultural narratives. Third, the study will bring this conceptual and linguistic groundwork into dialogue with speech act theory, arguing that "I am in pain" functions as a political speech act whose illocutionary force and success depend on power-laden structures of recognition, credibility, and institutional response with the conclusion drawing together these strands to propose that the discourse of pain is not a secondary reflection on a pre-given experience but a primary site in which political relations are enacted, contested, and transformed.

1. METHODOLOGY

This article employs a normative and conceptual methodology[1] grounded in philosophy of language and political theory. Rather than proceeding through empirical observation or case-based investigation, it engages systematic conceptual clarification and critical analysis. The objective is to clarify, reconstruct, and critically analyse a conceptual phenomenon, namely, pain, as it operates within linguistic, social, and political frameworks.

This study proceeds through conceptual analysis, a method central to normative political theory and philosophy. Conceptual analysis seeks to examine meanings, conditions, and implications of key concepts rather than to measure their empirical distribution. This approach is particularly appropriate where the object of inquiry, such as pain, recognition, or speech, cannot be adequately captured through isolated cases or measurable variables, but must instead be understood through its normative structure, linguistic conditions, and social consequences.

Methodologically, this article integrates three interrelated approaches. First, it draws on philosophical analysis, particularly Wittgenstein's account of language-games (1986) and the critique of private language, to argue that pain cannot be understood meaningful apart from the shared criteria that govern its use. The emphasis is not on denying inner experience, but on showing that sensation-terms acquire intelligibility only within publicly accessible practices. This provides the conceptual basis for treating pain as a linguistic and social phenomenon rather than an isolated subjective experience.

Second, this study employs speech act theory, as developed by J. L. Austin (1962) and John Searle (1969), to analyse the utterance "I am in pain" as a performative act rather than a descriptive report. This framework allows the article to examine the illocutionary and perlocutionary

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[1] Normative and conceptual analysis constitutes a long-established and methodologically rigorous tradition in social and political theory, particularly within critical theory and interpretive social science. See Raymond A. Morrow and David D. Brown (1994), *Critical Theory and Methodology*, where the authors explicitly distinguish normative–theoretical inquiry from positivist and empiricist models of research and defend its epistemic legitimacy. See also David Miller (2013), "Political Philosophy for Earthlings"; Jürgen Habermas (1972), *Knowledge and Human Interests*; Charles Taylor (1971), "Interpretation and the Sciences of Man"; Sally Haslanger (2005), "What Are We Talking About?"; and Gary Goertz (1953), *Social Science Concepts: A User's Guide* for further discussions of conceptual analysis as a core method in normative social and political inquiry.

dimensions of pain expression, focusing on how such utterances generate normative expectations, demand responses, and reorganise social relations.

Third, the analysis is situated within normative political theory, drawing on theorists of power, recognition, and performativity. From this perspective, this study examines how the success or failure of pain expressions depends on social authorization, institutional norms, and hierarchies of credibility. In doing so, it proposes that the expression of pain operates as a political intervention, while concentrating on analysing the normative and institutional conditions under which pain claims become intelligible, actionable, or dismissible within specific social contexts.

This methodological approach aims to theoretically reconceptualise pain as a political speech act, clarifying the linguistic, normative, and institutional conditions under which pain claims become intelligible and socially consequential. In doing so, this article offers a normative framework that can subsequently inform empirical research, case studies, or policy analysis. Such a framework is intended to complement, rather than replace, empirical inquiry by providing conceptual tools that may inform future case studies, empirical research, or policy analysis.

2. WHAT IS PAIN: MULTIDIMENSIONALITY, EXPRESSION, AND THE ROLE OF LANGUAGE

In biomedical approaches, pain is widely assumed as an immediate sensory experience that happens in the body (Melzack, 1975; IASP, 2020). It is convenient to assume so, since the main issue about the pain is to standardize it for treatment purposes. A doctor would not care about how a mother with a broken arm would take care of her baby, he would just focus on treating the pain and fracture in her arm with a pill and a cast. But wouldn't a broken arm of a mother with a baby, a broken arm of an old man living alone, a broken arm of a boy who does not have any responsibility, or a broken arm of an athlete right before a competition be different experiences of pain? Or just because it is measurable and has a bodily proof, a broken arm would be considered as pain while a mother's broken heart over a loss of child is not? Recent interdisciplinary research in medicine, psychology, social sciences, and philosophy has increasingly emphasised that pain is not only a sensory experience with a bodily proof, but it is a multidimensional phenomenon shaped not only by biological processes, but also by subjective interpretation, social relations, cultural norms, and political structures (Melzack, 1999; Sturgeon & Zautra, 2016). This study too posits that pain cannot fully be constrained within biomedical or psychological paradigms alone, it is not just a bodily, private, and incidental experience. Pain should be conceptualised with its multidimensionality encompassing its physiological, psychological, social, and political dimensions and language plays an essential mediating role in transforming personal suffering into a publicly meaningful and politically consequential act. This section will delve into the pain's multidimensional structure and the language's role in its expression.

2.1. Pain Being a Biomedical, Psychological, Social and Political Experience

Within medicine and physiology, pain is approached as an objective sensory event that can be detected, measured, and classified using empirical evidence. Central to this understanding is the International Association for the Study of Pain (IASP) definition which was first defined in 1979 and

recently revised in 2020 with considering not only *sensory* but *emotional* and not only *actual* but also *possible* tissue damage: "An unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage" (IASP Task Force, 1979; Raja et al., 2020). This definition is widely accepted as it is useful to standardize understandings of pain across the medical field and doctor-patient communication. It aims to advance research, standardise terminology, guide clinical practices, and improve patient care. It also emphasises pain relief through pharmacological and interventional methods such as opioids, nerve blocks, and physical therapy (Wallace & Staats, 2005, pp. 87–104, 145–158, 245–258).

Categorising pain biomedically is useful and necessary indeed, so that it makes it possible to diagnose a bodily problem such as injury or illness, since pain works as a system signalling something is amiss and requires attention (Brand & Yancey, 1997, pp. 19-37; Klein, 2007, pp. 55-67; Hall, 2008 pp. 595-610; Schleifer, 2014, pp. 27-43), it is not without limitations. First of all, beyond pain experiences that are psychological, social, or political, even in the biomedical field not all illnesses are accompanied by pain, and not all pain indicates an underlying illness; conditions such as chronic or phantom limb pain often persist without any clear physiological cause (van Wilgen & Keizer, 2012, pp. 2–4). Secondly, this biomedical approach overlooks the perceptual and evaluative processes through which individuals make sense of their pain since pain's meaning is shaped by cultural interpretations, social norms, and ethical frameworks (Bourke, 2014, pp. 7-19). In this sense, pain can sometimes be motivational or even pleasant, for example in going to the gym or in certain religious practices. (Bain, 2011, pp. 45–62). Therefore, the same physiological stimulus may produce different experiences of pain and call for different approaches, depending on individuals' emotional state, past experiences, social and cultural norms, and the time and society in which they live. The biomedical model then, struggles particularly with capturing the meaning of pain: how it is interpreted, communicated, and shaped by cultural, social, and political experiences. Pain resists pure objectification because the body does not represent it in the way language represents thoughts (Scarry, 1985, pp. 3-30).

While essential, this perspective must be accompanied by approaches that account for the missing dimensions of pain. Psychological approaches shift the focus from the observable body to the felt, lived, and interpreted qualities of suffering. They define pain through individual perceptions or through society's relation with pain perception, emphasising that the significance of pain lies not in the sensation itself but in how we as individuals or society experience it. In this sense, pain is understood as intertwined with stress, anxiety, depression, and mental well-being (Cassell, 1982, pp. 639–640; Merskey, 1991, pp. 150–152; Biro, 2010, pp. 24–57). A mother's pain over the loss of a child, then, would be considered as a deep, long-term pain rather than a simple bodily injury that would go away in a couple of months. This view shows that pain experience is inseparable from interpretation, context, and meaning-making. And pain experience envelops the entire being, it is a whole self-condition rather than a sensory experience that affects a part of a body since individuals express pain by saying "I am in pain" rather than "my hand hurts" or "my hand is in pain" (Rey, 1998, pp. 174-185). These observations are foundational for understanding the linguistic and expressive dimension of pain that matters socially and politically.

Recent studies begin to recognise pain's entanglement with broader social and cultural contexts (Melzack, 1975) and begin to discuss pain's social dimensions and tried to define pain on the basis of exclusion, loneliness, rejection, marginalisation, or interpersonal conflicts (MacDonald & Jensen-Campbell, 2011, pp. 237-241; MacDonald, Kingsbury & Shaw, 2005, pp. 77-90; MacDonald & Leary, 2005, pp. 202-215; Eisenberger, 2015, pp. 601-629). It is described as a powerful threat to well-being, similar to the evolutionary role of physical pain, as social pain serves as an adaptive function for individuals to signal social threats to survival within a society, and for the society collectively (Sturgeon & Zautra, 2016, pp. 64-66).

Pain is not confined to the body, it is not limited to bodily injury; rather, it transcends the body and resides in institutions, relationships, and societies. This study advocates for the multidimensional view integrating biomedical, psychological, and social dimensions, argues that suffering cannot be understood solely as a sensory event, nor solely as a mental state, and takes pain as something that is produced, distributed, and legitimised by social norms, cultural expectations, and political arrangements that determine who suffers, whose pain is recognised, and whose pain is ignored (Scarry, 1985, pp. 3-30). Structural inequalities, discriminatory policies, and failures of public institutions generate uneven distributions of pain across society, particularly affecting marginalised groups and minorities (Bourke, 2014, pp. 7–19; Biro, 2010, pp. 79–96).

Pain circulates socially, shaping collective emotions and political attachments while politics define which bodies matter and which grievances are recognised (Ahmed, 2014, pp. 1-19; Butler, 2009). How communities remember, mourn, or silence trauma is regulated by political regimes, social norms and culture (Zembylas, 2007). Pain in this sense is not independent from politics because it requires meaning within the fields of public intelligibility and for pain to be real and acknowledged, and therefore for it to enter the fields of public indelibility, it needs to be expressed linguistically.

2.2. The Role of Language in the Expression of Pain

People do not simply feel, they name what they feel. The moment a person says "I am in pain", it means that they use socially and culturally mediated linguistic conventions that frame pain as a state of being. Across all dimensions, biomedical, psychological, and social, pain becomes meaningful only when it is articulated. In the medical field, pain must be expressed and described to be treated; if we do not talk about our pain to the doctor, we will not get the proper medication. In the psychological field, pain exists through interpretation; the definition depends on how we express our pain and how others perceive it. In social contexts, pain gains meaning and power through recognition; we may express our pain, but it is only real if it is not silenced or marginalised.

A notable study arguing that "pain is an opinion" (Ramachandran & Blakeslee, 1998, p. 44), shows that pain is not merely a neurophysiological evaluation, or something that is only felt, but rather a discursively mediated interpretative judgment, underscoring the fact that pain becomes meaningful only when placed within shared linguistic structures. Pain becomes intelligible when speakers use language to put pain experiences into communicable categories. Yet, in its nature, pain resists language, it is most intensely felt but most difficult to express of all human experiences because it actively destroys language (Scarry, 1985, p. 4). This means that extreme suffering may put

a person in a state where words fail, dissolve, or lose referential stability. This resistance to language makes pain isolating because it cannot be easily articulated or shared, it pulls the person who is in pain inwards and separates them from the linguistic world. But this view immediately calls for a counterpoint: while pain resists language, it also presses for expression as human beings constantly attempt to translate pain into word, metaphors, cries, narratives, and social forms (p. 5). When a sufferer says "I am in pain", or use culturally available metaphors such as burning, stabbing, or drilling for example, or simply cry and show bodily signs of pain, then pain becomes communicable.

Pain may be experienced as separating the person from the shared linguistic world, particularly in cases of intense suffering that resist articulation (Scarry, 1985, p. 4) but the act of expression restores the communication. Language, then, not necessarily always in the form of speech, plays a crucial role in expressing and understanding pain (McCaffery & Pasero, 1999, p. 17). Pain may not always have visible proofs like in cases of an injury or bleeding for example, so it must be articulated and when this happens, it is simply accepted that "pain is whatever the experiencing person says it is, existing whenever and wherever they say it does" (McCaffery 1968, p. 95). This principle does not imply epistemic privacy but rather establishes a normative rule within medical discourse that grants authority to the speaker's declaration.

Nonverbal cues, such as facial expressions or body language provide additional insight into the pain experience (Kunz et al., 2020). These cues highlight the relational aspect of pain, as observers interpret and react to another's pain, creating a dynamic interaction of empathy, caregiving, and social connection. Beyond their expressive function, such cues and metaphors also operate as conceptual frameworks that structure how sensations are perceived (Lakoff & Johnson, 1980). Across different societies, the classification and naming of pain vary, meaning that the same stimulus, same feeling can be interpreted differently, based on cultural-linguistic schemas (Zborowski, 1952). This linguistic dimension of pain expression also anticipates Austin's insight that utterances do not merely describe experiences but can perform actions within social interactions (Austin, 1962).

Taken together, this section has argued that pain cannot be understood merely as a bodily sensation or epistemically private state. Rather, it must be understood as a multidimensional phenomenon whose meaning, recognition, and expression are mediated through language. Pain is shaped by interpretation, history, cultural and social and institutional norms. Language provides the conceptual categories through which sensations are interpreted as pain, and the social and political criteria that determine which expressions are treated as credible while others are marginalised or silenced.

Accordingly, the utterance "I am in pain" is not a simple report of bodily well-being, or an inner state of feeling. Once articulated within a shared discursive space, pain becomes publicly real, morally charged, and politically consequential. In this sense, the expression or silencing of pain is itself a political act, that can either reproduce or challenge the existing hierarchies of visibility, vulnerability, and care. Following section therefore turns to Wittgenstein's philosophy of language and subsequent accounts of pain expression to deepen this argument to argue how "I am in pain" functions as a public language-game and becomes a political speech act.

3. WITTGENSTEIN, LANGUAGE, AND THE PUBLIC LIFE OF PAIN

Wittgenstein's philosophy of language provides an essential starting point for understanding why pain cannot be conceptualised as a merely private sensation but must be situated within shared linguistic practices. In *Philosophical Investigations* (1986), he argues that the meaning of words emerges from their use within public language-games (§43), including sensation-terms such as "pain". His private language argument shows that a term referring to a purely inner, incommunicable state would lack criteria of correctness and thus could not meaningfully function as language (§§243–244). Accordingly, the utterance "I am in pain" does not report an introspectively apprehended private object but participates in a socially instituted practice of expressing and recognising suffering.

Wittgenstein emphasises that only a living human being, who is embedded in practices, forms of life, and shared criteria, can say that it has sensations, sees, or is conscious or unconscious (§244). Sensation-language presupposes participation in forms of life, shared criteria, and embodied practices. Pain is therefore not accessed through inner observation alone but through publicly intelligible modes of expression, including words, cries, gestures, and patterned forms of behaviour. If pain were conceived as entirely internal and disconnected from any shared criteria, there would be no standard by which its correct or incorrect use could be assessed. In that case, the term would fail to operate within language.

A crucial implication of Wittgenstein's analysis is that the expression of pain is not a neutral a descriptive act. He warns against the assumption that language primarily represents of inner mental content; instead, pain expressions serve diverse functions that include appealing for help, signalling distress, demanding recognition, or altering the dynamics of interaction (§304). Consequently, the utterance "I am in pain" gains meaning only because it belongs to a form of life in which expressions of suffering through either words, cries, gestures, or grimaces, are publicly recognisable and socially validated. In this view, pain is inseparable from its expression: it is not first felt and then described; rather, expression is internal to the experience itself.

Wittgenstein's work opens the way for subsequent studies to explore pain's relationship to language, examining how it becomes socially meaningful, how its legitimacy is negotiated, and how its articulation shapes interpersonal and institutional responses. Building on these insights, Konrad Ehlich argues that pain is "primarily an interactional phenomenon, not a solipsistic sensation" (1985, p. 180). In most cases, experienced pain is expressed, and it is this expression that renders it accessible to others. Ehlich identifies that pain exists linguistically through at least three modes: crying and groaning, interjections, and narrative or descriptive accounts (pp. 181–184).

Crying and groaning occupy a boundary between instinctive behaviour and communicative signalling, functioning as symptoms that directly solicit attention and care (p. 181). Interjections such as "ow" or "ouch" belong to what Ehlich calls the "expeditive field" of language, expressions designed to steer the hearer's mental and behavioural response (pp. 182–183). Pain descriptions, by contrast, require complex linguistic and cognitive processing, enabling the sufferer to translate bodily sensation into symbolic and deictic fields of language (pp. 183–184). Ehlich's typology thus proposes that pain is embedded in communicative structures that presuppose shared practices of recognition, interpretation, and response.

A similar line of analysis appears in Mihai Ometita's chapter "Pain and Space" (2018), which argues that linguistic forms construct the space of pain. Ometita maintains that pain reorganises the sufferer's experiential world and that this reorganisation is graspable primarily through spatial metaphors, such as pressing, pulling, radiating, and stabbing, which constitute a learned "topography of suffering" (pp. 102–106). These metaphors do not merely describe pain; they render its phenomenology communicable and structurally shareable.

Mark D. Sullivan (1995) likewise emphasises that pain talk functions as a "moral discourse" through which individuals position themselves within relations of responsibility and care. His analysis shows that linguistic expressions of pain invariably carry implicit normative claims, such as requests for help, demands for recognition, or assertions of vulnerability.

Anthropological studies further support these linguistic analyses by situating pain expression within broader social works. Directly influenced by Wittgenstein, Veena Das's essay "Wittgenstein and Anthropology" argues that pain gestures and pain words are intelligible only within "forms of life" that establish their criteria of use. When these forms disrupted, such as in contexts of extreme violence, suffering may become "unsayable", pushing expressions of pain beyond the limits of shared language (1998, pp. 181–182). This observation reinforces Ehlich's claim that pain expression presupposes a functioning social world: where shared criteria collapse, the communicative conditions for articulating pain are undermined.

Similarly, Horacio Fabrega's anthropological work demonstrates that cultures vary significantly in how they classify, name, and respond to pain. Pain vocabularies differ in granularity, metaphorical range, and moral connotations, such that "the same bodily stimulus may yield radically different pain experiences depending on the linguistic and cultural schemas through which it is interpreted" (Fabrega, 1976, pp. 168–170). Bailey's (1976) sociolinguistic fieldwork likewise shows that cultural groups differ in metaphoric resources used for describing pain—some emphasising burning metaphors, others use pressure, coldness, or spiritual disturbance (pp. 153–156). These findings indicate that pain is not merely felt but learned, categorised, and rendered intelligible through the culturally specific linguistic repertoires available to speakers. These analyses converge with work of Wilson, Williams and Butler (2009, pp. 55-65) which argue that pain is fundamentally "co-constructed through interactional negotiation". In any given encounter, speakers and listeners jointly stabilise what counts as pain, how it is interpreted, and what response it warrants.

Nicola Waddie's influential article "Language and Pain Expression" (1996) advances this argument further by contending that linguistic expressions of pain are not mere descriptions but components of the pain experience itself. She writes: "The language therefore is not used to describe the pain experience but forms part of that pain" (p. 871), suggesting that articulation participates in constituting pain as a socially intelligible phenomenon. When someone says "I am in pain," they are not reporting an internal fact but performing an act that brings the pain into the social world. The utterance is constitutive, not referential: it does not point to a pre-linguistic entity but enacts the experience as socially and relationally real. On this account, silence, suppression, or disbelief does not merely misinterpret pain; it annihilates it at the social level. The inability to articulate pain, or the refusal of others to acknowledge it, renders pain politically invisible. This aligns with

Wittgenstein's view that sensation-terms require public criteria for meaningful use and resonates with contemporary analyses of hermeneutical injustice (Fricker, 2007).

4. PAIN AND POLITICAL SPEECH ACT

Pain, as a multidimensional phenomenon shaped by biological, psychological, social, and cultural forces, gains political significance when examined through its linguistic articulation. Pain is not only felt; it is declared, claimed, and asserted within a shared discursive field. Speech act theory provides analytic tools for understanding this shift from sensation to social action. Building on the work of Austin, Searle, Wittgenstein, and contemporary theorists of power and recognition, this section argues that the utterance "I am in pain" does not simply describe an inner state but performs an action that reconfigures social relations, demands acknowledgement, and generates normative expectations. Crucially, the force and success of this speech act depend on cultural scripts, institutional norms, and political structures that determine whose suffering recognised is credible, intelligible, and actionable. By examining how speech acts function and how expressions of pain operate within such power-laden contexts, this section argues that articulating pain constitutes participation in a political practice that reveals and contests the distribution of authority, vulnerability, and recognition in the social world.

4.1. What is a Speech Act

The concept of a speech act was developed most clearly by J. L. Austin in *How to Do Things with Words* (1962) and later expanded by John Searle (1969). A speech act is a linguistic utterance that does not merely describe a state of affairs but performs an action in the very act of being spoken (Austin, 1962, pp. 5-6). Ordinary language contains many utterances that do not simply report facts but instead perform actions, such as promising, apologising, warning, or commanding. Speech therefore has a performative dimension: "to say something is to do something; or in saying something we do something" (p. 12). Speech can thus bring changes in the social world precisely through being spoken. Saying "I apologise", "I promise", or "I declare you married" does not report an act but enacts it. Words' significance, then, lies not in what they state, but in what they do. Accordingly, they are always conditioned by power, authority, and social convention.

Austin distinguishes three interconnected levels present in every utterance (pp. 94-108):

1. Locutionary act: the act of producing meaningful linguistic expressions (the literal content of the sentence),

2. Illocutionary act: the act performed in saying something (such as promising, warning, ordering, asserting, or requesting),

3. Perlocutionary act: the act performed by saying something, in terms of its effects on listeners (such as persuading, alarming, comforting, or provoking action).

Among these, the illocutionary act is central as it expresses the force of the utterance, which is the social function or normative claim embedded in speaking. Illocutionary acts succeed only when certain *felicity* conditions are met; that is, the social and institutional context must permit the act to take effect (pp. 14-15).

Searle (1969) later expanded Austin's framework by emphasising that speech acts are governed by social rules, expectations, and shared background understandings. Speaking a language, he

writes, is "engaging in a rule-governed form of behaviour" (p. 22). A speech act functions only if there are communal conventions that give force to the utterance; speech acts are therefore public, rather than private. This directly links the theory to Wittgenstein's claim that meaning requires shared criteria and forms of life.

Building on Austin, Searle distinguishes three fundamental acts involved in any utterance (1969, pp. 22-24):

1. Utterance acts: the act of producing sounds, words, and sentences,

2. Propositional acts: the act of reference and predication,

3. Illocutionary acts: the act of asserting, requesting, promising, or warning.

Searle further explains that illocutionary acts rely on socially shared constitutive rules, rules that do not merely regulate behaviour but create the very possibility of performing the act. His well-known formulation is that such rules take the general form: "X counts as Y in context C" (1969, p. 35). For example, uttering "I promise" under the appropriate conditions counts as the act of promising. There can be no promising without the linguistic and social rules that constitute what a promise is. Unlike natural behaviours such as fishing or cooking, which rely only on causal mechanisms, illocutionary acts exist only within socially shared normative frameworks. Illocutionary acts "could not be performed unless language allowed the possibility of their performance" (pp. 38). Searle also distinguishes the illocutionary force and propositional content: the former is indicated by grammatical mood, intonation, or performative verbs, while the latter refers to the semantic content of what is said (pp. 29-31). From this perspective, that utterance "I am in pain" cannot be understood merely as a semantic description; it constitutes a normative social action with practical consequences.

Most crucially, speech acts do not derive their force from the speaker alone but operate within contexts of power, authority, and recognition. As Butler argues (1997, pp. 1–7), speech acts are never neutral: they can injure, legitimise, subordinate, or empower depending on who speaks, who listens, and which institutional frameworks regulate the effects of the utterance (p. 20). For a speech act to succeed, the speaker must be recognisable within existing structures of authority (p. 41). In contexts where certain speakers, such as women, racialised subjects, disabled persons, or migrants,are routinely discredited, their performatives may be weakened or nullified. Applied to pain, this means that whose suffering is acknowledged, believed, or treated as authoritative is not a neutral matter but a political effect. Moreover, speech binds individuals into normative expectations: when someone reports pain, the listener is not a passive observer but becomes implicated in moral obligations, such as care, protection, or at minimum, acknowledgment (p. 49).

A speech act, therefore, participates in broader social and political structures by shaping relations of obligation, vulnerability, and authority. It is not merely a passive statement but an intervention in the world: an act that creates social facts, demands responses, and establishes relations between speakers and listeners. Even the simplest speech act can therefore be understood as politically consequential insofar as it redistributes responsibility and recognition within a social interaction.

This framework provides the basis for understanding why the utterance "I am in pain" is not a simple descriptive statement about a subjective sensation but an illocutionary act that claims authority, solicits response, and enters a field of recognition structured by political and institutional norms.

4.2. "I am in Pain" as a Political Speech Act

Speech acts are linguistic utterances that do not merely describe reality but transform it. The statement "I am in pain" provides a clear example. Although it appears, at first glance, to be a simple report of an internal sensation, its force and function extend far beyond locutionary content. When someone says "I am in pain," they do not merely state a fact; they perform a complex illocutionary act that demands recognition, elicits a response, and reshapes the interactional context. The criteria for what counts as pain are therefore not internal objects but socially recognised patterns of expression, such as cries, gestures, tone, and behaviour. The meaning of "I am in pain" depends on the norms and practices into which it is integrated: the significance of the utterance is not discovered through introspection but determined by what individuals do and expect within a linguistic community.

Understanding "I am in pain" as a speech act already reveals its performative force. Its political nature becomes visible once we consider how the expression of pain is embedded within structures of recognition, credibility, and power. Pain is not merely an internal sensation waiting to be reported; it is a socially and linguistically mediated phenomenon whose legitimacy is negotiated within discursive fields. The utterance "I am in pain" therefore functions not only as a reference to experience but also as a form of demand. This study further argues that these demands operate within hierarchies of authority, institutions, and social norms, thereby rendering this speech act inherently political.

Analysed through Austin's tripartite framework (1962, pp. 94–108), the locutionary content of "I am in pain" refers to the experience of suffering. Yet its illocutionary force is far richer. The utterance functions as a request for help, a claim of vulnerability, an assertion of authority over one's own body, and a demand for acknowledgement. Pain expressions "are performative: they are utterances that do things, such as change the interaction or situation between the parties" (Duncan, 2019, pp. 285–287). Such expressions constitute acts of self-disclosure that bind others to normative expectations, including care, attention, and moral responsibility. Pain-talk "initiates activities and reinforces obligations" within a relationship (p. 299), making it a fundamentally relational and normative act rather than a neutral report. Its perlocutionary effects may include prompting action, reorganising social relations, generating empathy, or compelling intervention. In this sense, the

utterance performs an act in the social world: it alters the obligations of others and reconfigures the moral landscape of the situation.

These dynamics presuppose that pain expressions are intelligible only within established language-games (Duncan, 2019, pp. 289–290). To say "I am in pain" is therefore to participate in a shared social practice in which such expressions are expected to elicit recognition, trust, and response. Pain becomes socially real only when it is articulated in culturally and socially intelligible forms. If an expression fails to conform to what a community recognises as a legitimate display of pain, the utterance risks being dismissed, doubted, or categorised as unintelligible. Individuals must therefore adopt institutionally and culturally sanctioned modes of expression for their suffering to be acknowledged, even in the medical field (Carel, 2016, pp. 11–19).

When individuals lack adequate linguistic or conceptual resources to articulate their experiences, their suffering may become unintelligible to others and thus socially erased, a condition described as hermeneutical injustice (Fricker, 2007). Communities provide "local moral worlds" that shape which forms of suffering can be recognised as symptoms (Kleinman, 1988). Pain becomes intelligible only through culturally authorised narratives that structure how suffering can be expressed (Good, 1994). Cultures also establish hierarchical distinctions between dignified and undignified forms of pain expression, producing what Morris (1991) describes as a politics of credibility surrounding suffering. In this framework, "I am in pain" is never a neutral statement. To utter it is to navigate a complex field of social meanings and power relations.

Speech acts are always embedded in relations of power: some succeed because the speaker is socially authorised, while others fail because the speaker lacks credibility or legitimacy (Butler, 1997). Applied to pain, emotions circulate through social spaces and accumulate affective and political value as they "stick" to certain bodies (Ahmed, 2014). Pain may thus become a marker of inequality when its expression reinforces or challenges dominant norms about whose suffering matters. Pain and trauma are also mediated within "emotional regimes" that regulate collective memory, reconciliation, and inclusion, thereby shaping which forms of suffering can be publicly acknowledged (Zembylas, 2007).

Pain may also be weaponised by political power. Scarry (1985) shows how pain's capacity to destroy language becomes a mechanism of domination in contexts of torture and state violence. Institutions have long controlled how pain is classified, believed, and responded to, demonstrating the extent to which suffering is shaped by political forces. Pain expressions may be authenticated or denied through institutional norms (Craig, 2009), and pain remains socially inert until it is articulated, placing linguistic expression at the centre of the political life of suffering (Biro, 2010).

Assessments of pain credibility are also shaped by biases relating to gender, race, age, and social status. As Duncan notes, "judgements about the patient's authenticity (…) are influenced by superficial characteristics" (2019, pp. 288–289). The intelligibility and believability of pain are therefore political matters. Some bodies' expressions are heard and acted upon, while others are discounted or dismissed. The utterance "I am in pain" thus functions differently depending on who speaks, who listens, and which institutional frameworks regulate recognition. A child, a refugee, an inmate, a woman experiencing obstetric violence, or a member of a stigmatised minority may find

their expressions of pain doubted or minimised. These dynamics reveal that pain is not only linguistic but political.

Pain-talk may also contribute to the formation of what Duncan describes as the "legal-political subject" (2019, pp. 297–299). Once expressed, pain becomes a claim that enters institutional circuits—medicine, welfare, human rights, and public policy—where it demands recognition, response, or regulation. In this sense, the utterance "I am in pain" participates in processes of world-making: it compels institutional response, shapes norms of care and justice, and situates the speaker within networks of political obligation.

Therefore, the utterance "I am in pain" cannot be understood as a neutral observation. It is a speech act with moral force, social consequences, and political stakes. The declaration asserts the speaker's presence as a recognisable subject, demands a response within a normative and institutional field, and exposes the hierarchies that determine whose suffering counts as credible. In doing so, it redistributes authority and credibility, imposes moral and social obligations on the listener, and challenges structures that silence or normalise suffering. Through its illocutionary force, the statement transforms private sensation into a publicly recognisable fact, while its perlocutionary effects reshape the social and political field in which it is spoken.

Taken together, these analyses argues that "I am in pain" cannot be treated as a simple description of an inner sensation but must instead be understood as a performative intervention in a field structured by norms, authority, and power. To utter one's pain is to claim visibility as a subject, to call others into relations of responsibility, and to assert a form of agency that challenges the social and political arrangements governing whose suffering is recognised. The success or failure of this speech act depends not simply on the speaker's sincerity but on the interpretive resources, cultural expectations, and institutional frameworks that render certain forms of pain intelligible while silencing others. Because the expression of pain makes suffering publicly real, redistributes obligations, and exposes the hierarchies determining whose voices count, it is inherently political. As Butler argues, "every utterance is a political act, for it intervenes in the social domain of recognition and power" (1997, p. 134). The declaration "I am in pain" therefore participates in ongoing struggles over recognition, legitimacy, and vulnerability, transforming private sensation into public fact and revealing the complex entanglement of language, suffering, and power.

CONCLUSION

This study set out to propose that the utterance "I am in pain" is not a neutral report of an internal sensation but a politically charged speech act whose force, meaning, and consequences emerge through shared linguistic, cultural, and institutional practices. By tracing the phenomenon of pain from its biomedical foundations to its social, linguistic, and political dimensions, the analysis has argued that pain cannot be isolated within the boundaries of private experience. Pain only becomes intelligible, both to oneself and to others, when it enters the public domain of language, where its recognition is shaped by historically sedimented norms, forms of life, and power relations.

The first part of this study conceptualised pain as a multidimensional phenomenon. While biomedical models treat it as an objective sensory event, this perspective proves insufficient to capture its interpretive, relational, and political dimensions. Psychological, social, and political

approaches demonstrate that suffering is produced, distributed, legitimised, or silenced through structural forces. Pain is therefore not merely something individuals experience; it is also something societies organise.

The second part, drawing on Wittgenstein and subsequent linguistic and anthropological scholarship, argued that the expression of pain belongs to a public language game. Rejecting the idea of a purely private language, this analysis argued that pain becomes meaningful only through shared grammatical criteria that allow others to understand and respond. Linguistic expressions of pain—such as cries, metaphors, narratives, or gestures—do not merely represent suffering but help constitute it as a socially real, interactional, and normative phenomenon.

The third part developed the central claim that "I am in pain" functions as a political speech act. Speech act theory argues that the force of this utterance depends not only on its semantic content but also on the social conditions that enable or block its uptake. The declaration of pain illocutionarily demands recognition, asserts authority over one's own body, and imposes obligations on others, while perlocutionarily producing effects such as empathy, intervention, dismissal, or disbelief. Because these expressions operate within systems of inequality, they are unevenly acknowledged: gender norms, racial hierarchies, and institutional biases shape whose pain is recognised as credible or actionable. Pain thus becomes an inherently political category, and its expression or denial functions as a mechanism through which societies distribute attention, care, vulnerability, and legitimacy.

Across these analyses, a consistent theme emerges: pain acquires social reality, intelligibility, and political force only through discourse. The utterance "I am in pain" is not a passive description but an intervention that reshapes social relations, reveals inequalities, and challenges structures of recognition. It brings private suffering into the public realm and thereby asserts the speaker as a political subject entitled to visibility, care, and response. When expressions of pain are silenced, ignored, or rendered unintelligible, the result is not merely personal harm but a form of political erasure.

This study therefore concludes that the discourse of pain is not secondary to the experience of pain but constitutive of it. Speech transforms sensation into a social and political fact. Through language, pain becomes a claim, a demand, a protest, a call for justice, or an assertion of vulnerability in a world where vulnerability is unevenly distributed. To articulate pain is thus to engage in a political practice that both reveals and contests existing hierarchies of recognition and authority.

Understanding "I am in pain" as a political speech act compels a rethinking of pain within political theory, ethics, and social philosophy. Pain must be understood not merely as an affective state but as a performative and world-making force. Future research may examine how pain shapes political identities, mobilises collective action, structures emotional regimes, or becomes entangled with state power, biopolitics, and forms of resistance. What this study establishes is the conceptual groundwork: pain becomes political at the moment of its expression, and understanding its political life requires analysing the linguistic, social, and institutional conditions that allow suffering to be heard, believed, or denied.

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