

Emotional Pain and Suffering Overtime: A Review

Meghna Sandhir

Junior Research Fellow, Anthropological Survey of India, Eastern Regional Centre, Kolkata, India

Abstract: Pain, it stays, it is perceived in the mind and echoes in the body! But it stays. Pain experiences are considered and stimulated to differently by different people; it is used conceptually to define the subjective experience entitled to a particular human. It encompasses the beliefs, meanings and understandings lead by the society. Pain as is described by many has a definitional controversy; it is defined as a feeling, a symptom, a reaction, or may be an emotion. There seem to be different patterns in reacting to pain, depending on situations and circumstances. The major influence is that of culture. Mark Zborowski remarked how physical sensation of pain is often interpreted differently by members of different cultures. The following essay elaborately talks of how time plays its effortless and sometimes not so effortless spree on the emotions and suffering that one experiences. To concisely present the concept of pain, the main role of the below discussion is to deconstruct/reconstruct the objectivity of pain, what about emotional pain and suffering can we conclude? to explore life's varied losses in a manner...more about embracing than bracing against...? What if we trust that the dark nights of our souls are essential to our growth, that spiritual maturity cannot be attained without them? In this lifelong journey, we will carry emotional pain and suffering. This is a given. But carrying emotional pain and suffering can lead to transformation. And that is good news.

I. INTRODUCTION

“Following Wittgenstein, this manner of conceptualizing the puzzle of pain frees us from thinking that statements about pain are in the nature of questions about certainty or doubt over our own pain or that of others. Instead, we begin to think of pain as acknowledgment and recognition; denial of the other's pain is not about the failings of the intellect but the failings of the spirit. In the register of the imaginary, the pain of the other not only asks for a home in language, but also seeks a home in the body” (Das, 2007:57).

Chronic pain is multifactorial, a compilation of interplaying factors, a pattern of the mind and a replay of a cognitive framework. In this essay we attempt to comprehend the sufferer's world, moving beyond the notion of acute and chronic physical pain and concentrating on mental pain and suffering. It is often observed that individuals often merge the two while narrating their disease, and do not openly consider sharing their experience. Medicine as a social institution throughout human history has focused on understanding the experiences of suffering (overwhelming somatic pain or disease and its anticipation and other types of serious distress resulting in the socio-moral framework) and facilitating healing (building significance and value for one's experiences in the face of suffering). (Priya, 2012:211-213).

The period of the 1960-1970 is marked by an interpretive turn in social sciences, the seeds of such a paradigm shift in medicine and in the study of health and illness experiences in social sciences were sown by scholars such as Leon Eisenberg, Arthur Kleinman and George L. Engel. While Eisenberg (1977) focused on the need to study the socio-culturally contextualized experiences of illness, Kleinman (1973) drew our attention to the need to “conceive of medical systems as existing within and themselves shaping a socially and culturally constructed space” in line with Berger and Luckmann's (1967) thesis of reality as social construction. During the same period, Engel (1977) proposed a biopsychosocial model as a viable alternative for the reductionist biomedical model (Priya, 2012:211-213).

With the help of a critical review of literature on the phenomena of human suffering and healing, this chapter is an attempt to highlight how the assumptions of social constructionist paradigm provide a theoretical foundation for a meaningful understanding of such human experience in their varied contexts.

II. METHODOLOGY

For the following research the results were based on qualitative methods of research. Under this broad umbrella term fall a plethora of techniques and philosophies that allow to examine people's experiences in depth using various data collection methods such as in-depth-interviews, focus group discussions, observation and case studies. The people were interviewed in their natural settings, and observations were made using visual methods and content analysis.

The focus of the study was to follow the interpretive approach and deduce what and how an individual brings meaning and to the various explanations in the concept of pain. It helped in the observing a certain pattern in the use of figurative speech and use of metaphors and gestures when talking about pain. In order to get clearer results the narratives were divided into broader categories and certain repetitive words and gestures were highlighted. These highlighted patterns were then verified and conferred with available data and research online to provide an insight.

The aim of the study was to seek the emic perspectives or the inside perspective of an individual keeping them in the societal setup and understanding the meaning that they attach to their social customs and values.

Emotion

Feeling of bodily change is the emotion for William James (1884); for the psychologist Nico Frijda (2004), it's the "action tendency"; and for the philosopher Robert Solomon (1993), emotion is the judgement; through the multiple ways of facial expression, semantic structure, and discourse that make similar claims of understanding and differing interpretations. Defining can't get rid of the problem by putting all the parts together, because the parts can only be contingently related; some parts may be more essential than others and, of course, feelings, judgments, action programs, scenarios, and facial expressions are not emotional. So how do you say who you are? (Beatty; 2014:545).

Freud (1990) suggests that a holistic view of the body requires it to be studied as a living, acting entity (Denny, 2018: 126). The concept of understanding or defining emotions is undervalued in research, as mentioned earlier these could be the very reason for a person showing symptoms of pain and suffering.

Emotions and feelings, while words and meanings are public, are private and inward; while ideas can be translated and interpreted, emotions cannot. On the contrary, it is precisely emotional terms and concepts that we use to refer to experiences that cannot be classified in this manner and that involve meaning and sensation, mind and body, culture and biology inherently.

When we talk of emotion, some may call it a sense, some a bodily feeling but the truth lies in the fact that it may counter the mental from the physical; yet they stand united. Neha Sharma (29) a mother of two and a housewife; while working on the field, she met an accident. In that accident she got a twisted ankle. At the spur of the time she felt nothing; it was until night when she wended the day's chores and settled in her bed, she felt stiffness in her left leg. Being preoccupied with her 9 year olds high fever and repeated denial for eating one of his favourite dishes, and the responsibility of the rest of the members in the house she did not bother about her swollen left leg. After a week at a doctor's appointment she was diagnosed with a major fracture in the left ankle, following which she was on bed rest for 2 months. Yet occupied with the only thought of how would things function if she won't be working the day and preparing meals for each one of them.

All through this time, the pain that the fracture inflicted wasn't felt by Neha, as she was more into caring for her son and her family. This feeling or the avoidance or ignorance of pain is a meaningful representation of how circumstances and relationships dealt with shaping our reaction to an action. The part highlights how a pain that could not let her stand for that very second she realised it was swollen, yet the counter feeling of what her son felt and was dealing with pain, held her strong and put herself at the backseat. The pain put on the backseat was not just a result of how she emotionally felt about her family and her dearest son; but also the fact of how a society rewards a woman for always keeping her family

above herself and continues to survive even in dilapidated ruins of the traditions.

To offer a straightforward instance: what we describe as a sensation of flutter in the stomach can be anxiety about a public lecture or the outcome of an unfortunate dinner or it can be some awful mixture of the two. But if dinner is the only factor concerned, we will not call that feeling the sensation of anxiety: to call an experience anxiety, or anger, or happy excitement, it must be connected with a sequence of culturally specified meanings that go far beyond the digestive. At the same time, neither a definition of anxiety nor an appraisal of an anxiety-provoking situation is the same thing as being anxious: to be anxious is to have a feeling associated with a meaning. The philosopher Moreland Perkins (1966, 1972) suggested this view expresses emotion as a type of judgement, which refuses to assimilate emotion either to pure sensation or to pure cultural cognition, to feeling or meaning. The main idea is that much of our action 'says something'. From this view, emotion including emotions, emotions, motivation, expression, and their representations are seen as the result of social building through the socialization of an individual and his or her ongoing experience in a specific socio-cultural context. Emotion is seen as a product of culture. For many researchers like Marcus and Fischer (1986) emotion plays a key role in the construction of the self. The concept of the person, self and emotion according to them are a means of seeking a more veritable cultural domain. Margot Lyon in her paper "*Missing Emotions: The Limitations of Cultural Constructionism in the study of Emotion*" (1995) states that for Rosaldo, and for others concerned with its cultural building, emotion is understood as part of an internal, and implicit, psychological, existence that is both created by culture and subjected to social impact that operates on the person, whatever finer distinctions it may have. Affects are, Rosaldo says, "cognitions or, perhaps more aptly, interpretations-always culturally informed, in which the actor discovers immediate involvement of body, self and identity" (1984:141). The study of emotion can provide an expanded understanding of the place of the body in society through a consideration of the agency of the body. Emotion has a central role in bodily agency, for by it links the somatic and the communicative aspects of being and thus includes bodily as well as social and cultural domains. For it connects the somatic and the communicative elements of being and therefore involves both the body and the social and cultural domains. The body is the means by which we experience the world and actively apprehend it (Ponty, 1962); we know the world and act within it through its agency. This "being-in - the-world," this grounding in reality, is fundamentally linked to the material aspect of our bodies (Lyon, 1995:244-263).

As stated already; "Most would agree, however, on the truisms that all humans have the potential to live emotionally similar lives and that at least the emotional surfaces of other's lives may appear different to the outside observer. The

longstanding antagonism between individual and social approaches to understanding the person has been both bridged and continued in recent research on emotion and culture. The individual remains the ultimate seat of emotion in both evolutionary and psychodynamic approaches, confronting a social and cultural pattern into or against which the emotions are placed. This same schism, which is also maintained by British social anthropology and symbolic culture, makes necessary a distinction between emotion, defined as private feelings that are usually not culturally motivated or socially articulated, and sentiment, defined as socially articulated symbols and behavioural expectations. From this perspective, cultural views about appropriate emotions "do not control the feelings of the individual, which are sovereign". Others downplay the importance or utility of a distinction between a psychological and a social analysis of emotion" (White, 1986:405-436).

The anthropological interest in emotions has increased significantly in the last 30 years, as shown in numerous reviews and edited volumes, paralleling an increased interest in the body as a category of analysis. Most stress on Western medicine and its emphasis on pain and emotional body symptoms. Mart, challenged emotions' "universality." Extensive scholarship and several ethnographies given some exceptional examinations of the cross-cultural meanings, constructs, and "translatability" of emotional terms; emotions and their connection to personality, social relationships, and agency; and the socio-political dimensions of emotions (Tapias, 2006:399-415).

John Leavitt (1996:405-436) states:

"I therefore begin by bracketing "emotions" as Western cultural categories that may-but do not necessarily-overlap with the semantic fields of categories used in other societies. My initial goal is not to say what an emotion is, but rather what "we"-defined roughly, for the purposes of this article, as Western and Western-trained social scientists-ordinarily mean when we talk and think about emotions, and so what categories of other cultures we tend to "recognize" as emotions rather than as something else. What is so "recognized," it seems to me as it did to Perkins, consists of experiences that involve both meaning and feeling, both mind and body and that therefore crosscut divisions that continue to mark theoretical thought. Cultural bracketing still allows us to consider some models of emotions as better than others in that they respect the specific complexity of what we usually mean by emotion terms and concepts instead of reducing them to something else."

While anthropologists have developed models in their role as theorists that assimilate emotion to either sensation or significance, anthropologists continue to depend on the assumptions of daily use as practicing ethnographers. While it

runs counter to latest years' receptivity, this may not be a poor thing.

The essence of a constructionist strategy is the concept that the brain builds mental states such as feelings, body states, and ideas during every time of waking life by generating located conceptualizations that combine three sources of stimuli: sensory stimulation from outside the skin (the exteroceptive sensory array of light and vibrations and chemicals, etc.), sensory signals from within the body (somatovisceral stimulation, also known as the interoceptive sensory array or 'inner environment') and previous experience (also known as memory or category understanding that the brain makes accessible in portion by reactivating sensory and motor neurons). These three sources—sensations from the world, sensations from the body, and prior experience - are continually available and the brain networks that process them might be thought of as part of the basic ingredients that form all mental life. Different "recipes" (the combination and weighting of the ingredients) are hypothesized to produce the myriad mental events that people give commonsense names (i.e., "emotions," "cognitions," and "perceptions"). From this perspective, mental categories such as emotions, cognitions, and perceptions are populated by a diverse set of instances that are events to explain, not specific causal processes linked to specific brain regions or networks (Oosterwijk,*et.al.*; 2012). Emotion terms are used in everyday discourse to indicate experiences that involve both meaning and feeling, both mind and body. Most attempts to theorize emotions, however, tend to reduce them to one side or the other of these dichotomies; anthropology is divided between views of the emotions as primarily biological and as primarily sociocultural in nature.

Emotions are undervalued in their interpretations; they cannot be described as something with a fixed significance, because the research of the language used to define them, body gestures and multiple unique vocabulary is a significant way of understanding feelings. As Harre pointed out, instead of asking the question, "What is anger?" we would do well to begin by asking, "How is the word 'anger', and other expressions that cluster around it, actually used in this or that cultural milieu and type of episode?" The results may be startling. Unravelling the basis of use will lead us deep into the heart of emotion theory and bring a sophistication that has sadly been lacking to the subsequent empirical work, including the study of the physiology of emotions. The first step towards a more sophisticated theory will be to demonstrate how research needs to give priority to obtaining a proper understanding of how different vocabulary of emotions is unravelling (Wierzbicka, 1992:539-581).

Suffering

Suffering is one of the oldest human reaction but we still know too less about it. Elizabeth O'Conner writes: The sick in their suffering are closer to what is real. They see the things that really matter and are for a time in possession of different values. Sometimes they say out loud, When I am well I will

use my life to.... The difficulty is that the sick in bed do not have the power to do what they think about, and when they are well again... they have forgotten.... As it is, we often have learned very little and so are destined to suffer in the same ways again (Copp, 1990:35-39).

Narratives are the best possible way of understanding ones suffering in one's own words, some make it sound as an elaborative tale of conquer and some as a transformational journey that was slow, and for some it's still going. Rakesh Bhatia a resident of rural Shimla, with a family of four...a wife and two children, he does farming and is a musician. Having lost his father when he was fifteen he has seen things going up side down for him and his mother. His mother once a housewife, now started working as household help and was looked down at. That's when a not so small son felt the need to cover for his mother and started working at an early age. After his father died, his mother was the only guide to him; having lost his mother eight months back had him in shock. There was no realisation of the fact that she was gone. Later he started to isolate himself in to oblivion, being angry and unsupportive of one's sympathy he would try being rigid. Hiding his emotions, up with a stretch on a grin on his face...his hands fiddle to say that a man cannot remorse as loud, the society won't let me be. For me to survive, the sorrow would have to be kept inside burning and I will have to burn on a daily basis. He being a nirankar follower and a musician united his soul in devotion and chanting of the almighty, the pravachans in the nirankari satsang kept him from going astray. It was like the light at the end of the tunnel, that brought him from not accepting the reality, to acceptance to letting it go.

Whereas, for Anil Arora life was still a struggle, he is in debt with insecurities from the past on a look out for an ear, pouring it once a while gives me the strength to get along with the unexpressed and unfiltered for until next time. Having lost his father and mother to cancer in his arms...listening to their last wishes he has been devastated. No family and friend came forth to help him then he was all alone. Time threw in a lot at him, the definition of time for him is not counted in hours or months but by the changes or trysts he has met in his life. From being the youngest and the most carefree offspring to his parents to having come to point where he takes a major turn in life by abandoning his life for his dream of becoming an actor. He later reconciles with his family and amends ties with his father, well as soft as a mother could be he was embraced with open arms. Only later his mother was diagnosed with cancer, he would bathe her and dress her up like a beautiful young woman in radiant clad clothes for her to feel good. He was guilty of having given his parents so much trouble and as a repay he was with them until their last. But even today when he narrates it he has some unhealed wounds, regrets about the decisions he made. But he reconciled in love, he found his insecurities fading when he fell in love with a woman of his village and started his own family. But he

doesn't share much with his kids and wife as he wants to keep his emotions buried forever.

This one's a girl sitting near a road with her family all lost in remorse. She had lost her mother a week ago. She was hospitalised for a long time now, but they were living up to the end of the bargain to save her. But she survived no more.

"The doctors are to blame; they did not diagnose and treat her well until it was late." She said. Scattered hair, no slippers on; she could not accept the fact that her mother was no more. There was a feeling of hollow. Dangling between the past and the present (here time is measured by the presence and absence of her mother in her life). It was almost near diwali when it happened; she was in the hospital all this time by her side. Now that she is no more, diwali to her seems nothing with enlightenment, lights and prosperity; but is remorseful, something that reminds her of how her only light, her support wasn't there. Yet she consoles herself, staring at her kids play exclaiming how life goes on. "The one who had to go has gone, leaving me behind. How I wish I could have left too, but for the coming future I have to move on and continue to survive."

The word suffering is used by design. Suffering is the state of anguish of one who bears pain, injury, or loss. Patients react to pain in multiple ways some feel it in emotions whereas others deeply express it as a personified character.

Anticipations, some patients stated that suffering, the response to pain, seemed to begin even before the pain and included many anticipatory fears that sometimes were even more acute than the eventual pain. These patients were concerned about pain: its consequences, the experience, the memory, the anticipation, the inconvenience, its implications, and the time frame it represented-both the duration of excruciating pain and their altered perceptions of time (sometimes called psychological time). Thus the fear of suffering creates havoc in a sufferer's mind and causes him to enter a domain of psychological time (refers to a sense of the passage of "T" and temporal experiences related to succession, duration, simultaneity, pace and the order of perceived external and internal events.). One understands suffering better when he digs deeper in to understanding of the emic perspective of the one that suffers.

Following a different path, we can find many ethnographic examples of the distinction between subjective experience and the subjectivisation of experience. I will borrow one example from Das, who discusses a case of men facing the loss of a child (Das 2015; see also Das et al. 2012). In summary: she explains that women in India seem to have access to a vocabulary to express the loss of children. The existence of such a vocabulary, she explains, is partly an expression of the value placed on motherhood and partly reflects the fact that genres of lamentation for women allow pain, grief, or mourning to be publicly expressed. One might say that the subjective suffering finds a possible subjectivisation as the

individual's experience of the loss of a child can be projected into existing 'patterns' that recognize or provide a standing language for women's emotions. A similar vocabulary for men's suffering does not exist for Hindu men. There is no way for men to subjectivise this experience of loss in terms of suffering that can be publicly or inter-subjectively expressed. Does it mean that men don't suffer from the death of a child because they don't have the vocabulary to express their emotions? We don't know and cannot know. Some men might suffer; some others might not suffer. Following Marcel Mauss (1927), we can only say that in the absence of a local vocabulary of suffering, we have no way of knowing if some men suffer or not. From an anthropological perspective the question is, therefore: how do some men find ways to express their suffering without the availability of a standing language of suffering? The lack of a vocabulary and related lack of expression for the subjective experience of men confronted with the loss of a child might itself be regarded as a possible subjectivisation of this experience, but it might not be the only one. Other expressions may be found outside the standing languages of suffering (Retchman; 2017:130-142).

Suffering is universal. Although its form and duration are varied, no one is immune. Medicine, nursing, sociology, psychology, and theology all provide approaches for management. Whether the precursor is physical pain or social distress, suffering is an individualized, subjective, and complex experience involving an intensely negative meaning for an event or a perceived threat (Rodgers and Cowles 1997). Yet, suffering is neither a reimbursable diagnosis nor a fundable research topic because it is considered normal (Morse, 2003). Despite its universal and normal nature, suffering calls forth a need for appropriate responses from family, friends, and rituals through which suffering may be eased. We ache seeing our loved ones suffer yet grow weary with protracted suffering and may even question its validity. This dilemma creates "double suffering," i.e., being denied one's suffering by family, friends, caregivers, even oneself, but still suffering (Arman and Rehnsfeldt, 2006). Social isolation may result as the sufferer fears and perceives social degradation and alienation, thus inhibiting motivation top. This social isolation provides an opportunity to journey within and discover ourselves more deeply and more fully (Barrett, 1999).

Suffering Overtime

"Time is what keeps the light from reaching us. There is no greater obstacle to God than time: and not only time but temporalities, not only temporal things but temporal affections, not only temporal affections but the very taint and smell of time." – *Meister Eckhart*

From the above discussion one can conclude that the concept of individuality given by Malinowski; how he processes the 'I' in every person influences ones behaviour and interpretation of things. The following case elaborated above is insightful of the fact of how differently an individual

interests himself into thinking unique thoughts about a similar happening with passing time.

In one of the case study, where Ramesh is shattered by the demise of his mother initially could not talk and went into isolation. It is the fact that our brain gives negative feedback and the body starts to retract accordingly. For him society was a place where he could not genuinely present his grief, may be because he was a man. Weber used a term *verstehen*, this is translated as the empathetic understanding of human action; attempting to understand it from the point of view of the actor (Denny; 2018: 32). When he looks back at time he finds himself to be a changed person; more calm and responsible, and as per before an avid listener. This was one factor that was seen common in all. All the narratives saw a point where the informant called himself to be an improved being. This state's true according to the interpretive theorists who focus on human interaction, and the influence on an individual's behaviour of the reactions of those around them.

Similarly in the case study where the mother of the girl had died a week ago, she is at a stage in her life where her stances devoid any belief in the ultimate or supreme. She feeds ignorance and avoidance to the facts of religion and calls all of it hypothetical assumptions.

As far as the mother is concerned, Neha Sharma is in a role where society has attached undivided love and symbolised that bond to be that of care and selflessness. According to Erving Goffman; He engages his theory true to the saying "All the world's a stage" from the Shakespeare play; he views people as playing roles, negotiating with each others, generally behaving as if in a theatrical. He describes that we all have various parts in the play and different ideas as to how to act each role. This decision of how to play the part and where to act when varies individual to individual.

For Michon, the experience of time is the conscious product of processes that enable organisms to cope with the sequential contingencies of reality. The subjectivity of time is inseparable from the factor of measurement. Both Jackson and Michon acknowledge that their positions are consistent with the view advanced many years ago by the philosopher Guyau (1890/1988):

"Time is not a condition, but rather a simple product of consciousness. It is not an a priori form that we impose on phenomena; it is a set of relationships that experience establishes among them. Time as I see it, is nothing but a kind of systematic tendency, an organization of mental representations. And memory is nothing but the art of evoking and organizing these representations. Time, initially, is no more intrinsic to our mind than it is to an hourglass (pp. 145). Time, however, is a slippery entity, sensitive to the conditions under which it is measured" (Allan; 1992:140-145).

Virginia Woolf wrote in Orlando - "An hour, once it lodges in the queer element of the human spirit, may be stretched to fifty or a hundred times its clock length; on the other hand, an hour may be accurately represented by the timepiece of the mind by one second." The best example of it is that 2-hour long meeting that one has to attend on a Monday morning seems far longer than 2 hours at the movies. Another example is that years seem to pass much more quickly in adulthood than in childhood. Both these experiences are aspects of psychological time: the subjective time that is more or less independent of objective time. (Cohen; 1964:116-125).

Jones suggests that we should look at ways in which distinctive time relationships work within intact events. She exemplifies two kinds of relative time and attempts to show how various models of time that capture these relationships. One kind of relative time involves time change relative to space. This is the time of velocity, flow fields, and generally motional properties of events. The second kind of relative time involves one time change relative to another. This is the essence of relative timing and generally rhythmic properties of events. She explains Garden Variety time as the everyday time. It is the time of music, patterns of speech, motion and bodily gestures that must be emphasised during this hour. Many theorists aim at studying the movement and timing aiming to specify the control of movement production. Keeping their argument, information processing theorists say that the control of time is managed in temporal codes stored in motor programs in the centre. Proponents of the ecological approach to perception and action, argue that time is not directly controlled by movement; rather it is an emergent property of the dynamic behaviour of the neuromotor system. No single mechanism can account for timing behaviour there are multiple factors that influence it, such as task to be performed, stage of learning etc. (Allan; 1992:140-145).

In old times men regarded time as expressing power, opportunity and plenitude. Then ancient Greeks had two words for time; Chronos and Kairos. Chronos refers to sequential time, while the latter signifies a proper time for action. "Kairos," now in the Turin Museum: it shows a man with wings on his shoulders and feet carrying scales balanced on a knife-edge; also shown are the wheel of fortune and a forelock by which opportunity could be seized. An Iranian representation is Aion, a symbol of eternal and inexhaustible creativeness. Aion is a winged figure with the head and claws of a lion, wound around by a snake and holding a key in each hand. A variation on this theme is the Orphic god Phanes, a winged youth surrounded by signs of the zodiac. These were gradually replaced by the hour glass, scythe and the crutches; it was later that the studies of the psychology of time bring up the topic of biological clocks (Cohen; 1964:116-125). Not much work has been done on the understanding of time. The very first study on biological time was done by a French psychologist Henri Pieron. According to his suggestion a relationship exist between physiological processes and increased body temperature. A lower body temperature makes

psychological time seem to pass slowly. His student Marcel Francois tested the hypothesis to test.

"Less open to doubt is the claim that the apparent duration of a brief interval is influenced by the intensity of the stimuli that delimit it. The more intense the stimuli are, the shorter the interval seems to be, at least when the stimuli are auditory. A reverse effect occurs, however, if the interval is delimited by a continuous stimulus and the subject is asked to compare two equal intervals made up of stimuli of unequal intensity. The interval with the more intense sound seems to last longer than the interval with the less intense sound." (Cohen; 1964:116-125).

Suffering and time are deeply related aspect. Landon (1989), in her essay explains six varieties of pain in the discourse of suffering;

- Unendurable pain - it is the intense, continuous pain that could be psychic or physical. The psychic pain inflicts palpitations and bodily symptoms. The pain obliterates the past and the future by its severity; leaving the sufferer trapped in the now of the pain. It ceases any functioning and person becomes more of a machine. Death is the only escape from such pain.
- Dependable pain - it is a kind that is manageable by the efforts of the sufferer of getting proper medication. This creates a continuum,

Pain ----- Relief ----- Dread ----- intensified pain

The pace of relief shadows the pace of the pain.

- Unreliable pain - it originates by anxiety. It the pain that is likely to occur irregularly at any time as attacks.
- The psychic pain - begins to overpower physical pain. Thus, anxiety is identified as a trigger for the attacks. The patients in order to overcome such anxieties may resort to magic and other traditional healing practices.

She stated:

"The magic and the myths help create a space of relief, however illusory, from the fear of pain if not from the pain itself. The anxiety must be managed because the physical condition cannot be; a dependable technology does not exist. Time is measured by the length of time between attacks of physical symptoms, the physical relief that coincides with the experience of the psychic pain of anxiety. A longer span between attacks coincides with an increase in both the duration and the intensity of the anxiety. The longer since an attack, the sufferer reasons, the more likely one is near. The continuum of unreliable pain is attack - > relief - ► anxiety - ► fear - ► attack. Examination of this continuum reveals that over time, if the fear becomes

unbearable, then the physical symptoms could be a relief from psychic suffering. The continuum of unreliable pain always threatens to become circular and self-propelling." (Landon; 1989:75-89)

- *Guilty pain* - it implies to the fact that human beings are obliged to cater to the future needs when enjoying the present. It is situation where a pressure is created on a person to abide by the social moral responsibilities. It occurs when there is delay in between the cause and the effect. This category includes psychological compulsions and emotional outbursts that result in remorse and shame when the sufferer or those around believe that the outbursts could have been prevented by self-control. This generally is resulted when someone is of the belief or blames oneself for the suffering of the other. It is intensified by regret, the thoughts provoked by the memory of the past and unacknowledged future.
- *Catastrophic pain* - it results from the unexpected life changing events such that the life of the sufferer is defined by this event. The trauma is so intense that the time is marked by the event. The individual's life is organized around and about the event, stating life as before and after the event.

As stated:

"Time may be measured in a similar fashion by an unexpected cure: a transplant, the regaining of sight, coming out of a coma, or finally conceiving a child after many years of trying. In either case, the person, family, or community believes that something absolutely essential has occurred and that they/he/she will never be the same as before. People may, in fact, remark, "She has never been the same since ..." or "You wouldn't know that he was the same person." Time has developed a rift, a discontinuity, and the individual's life has become two lives".

The suffering of catastrophic pain is so intense that, even though it has been endured, it has burned a hole in the continuum of the sufferer's life. Such suffering utterly disrupts the continuity of the life story, and the only healing is to begin a new story.

Unlike the sufferer of unendurable pain, the individual facing expected pain and degeneration must live in the now because tomorrow may be worse than today, it may even be the same, but it will never be better. Time is the only barrier between the sufferer and loss. The present moment is not to be escaped, but is to be savoured as a refuge. The experience of time is bounded by guilt on the one hand and urgency on the other. "Why did I? Why didn't I?" gives way to, "I must, I must, and soon!" The sufferer of expected pain does not live in time but on it."

The above varieties of pain illuminated by Landon (1989); show particular impact on the sufferer's experience of time. Every individual has a different tendency of making sense of life and its happenings, though each of that depends upon the understanding of time that is available for reflection. Reflection on pain as a physical sensation and a psychic response gives it a larger expression. Time can be then used to transform pain and restore the autonomy of the sufferer. Pain teaches a person the key to sustenance of life.

The fact that time acts as a reflective mirror it brings with it, a set of insecurities. It suggests a pattern. As discussed earlier our mind formulates the process of our reaction to any action; called cognitive maps. These maps are ignited when a similar situation dawns at the respondent. For instance in an interview the interviewee was an addict; it was result of the kind of peer and job profile he had. The only way of growing and earning incentives from his then career put him at the verge of alcoholism. He met an accident a few years back that caused damage to his brain, his actions became worse. He was admitted to a rehabilitation centre and was talked his way out. After all these years he is still on medication. He is an ardent believer in karma and celestial movements affecting our lives. He understands that his past was a result of planet Saturn being in his first house, pertaining, he was bound to take reckless decisions as god made him do it. Well time might have healed a part of him, but the ghost of his past habits and treatments still drives him. he explains that there is another onset of Saturn being in my house in the coming years, preparing for the worst he puts it in such a way that "the planetary motion of my past had eaten me wholly making me an addict, I am afraid of the futuristic movements eating my son away!." We see a reflection of his deeds being shadowed down to his offspring.

To conclude the relationship of pain in time is since age millennium. It is depicted in the use of the words chronology, chromos. It is a depiction of sequential events that occur simultaneously. Thus, time becomes a crucial part while studying pain and suffering. Time is that component in suffering that either enhances or sublimates it. Whereas there are multiple other factors that collectively cause the transformational changes in the suffering.

REFERENCES

- [1] Allan, L. G. (1992). Cognitive Models of Psychological Time by Richard A. Block. *The American Journal of Psychology*, 105 (1), 140- 145.
- [2] Allard, O. (2016, November 28). *Anthropology of Emotion*. Retrieved June 2019, from Oxford Bibliographies: <https://www.oxfordbibliographies.com>.
- [3] Minton, M. E., &Antonen, K. (2013). Carrying the Pain: The Journey from Suffering to Transformation—Perspectives from Shakespearean Tragedy and Pastoral Care. *Journal of religion and health*, 52(2), 467-474.
- [4] Anonymous. (1979). Pain. *International Association of Pain*, 250.
- [5] Barrett, L. F., Mesquita, B., Ochsner, K. N., & Gross, J. J. (2007). The experience of emotion. *Annu. Rev. Psychol.*, 58, 373-403.

- [6] Barnum, B. S. (2006). Why Freud and Jung can't speak: A neurological proposal. *Journal of Religion and Health*, 45(3), 346-358.
- [7] Beatty, A. (2014). Anthropology and emotion. *Journal of the Royal Anthropological Institute*, 20(3), 545-563.
- [8] Bernard, H. R. (2017). *Research methods in anthropology: Qualitative and quantitative approaches*. Rowman & Littlefield.
- [9] Elman, I., & Borsook, D. (2016). Common brain mechanisms of chronic pain and addiction. *Neuron*, 89(1), 11-36.
- [10] Britannica, T. E. (2018, October 17). *renaissance*. Retrieved april 28, 2019, from Encyclopedia Britannica: <https://www.britannica.com/event/Renaissance>
- [11] Brittaniac, T. E. (2018, january 16). *Nirankari*. Retrieved june 10, 2019, from Encyclopedia Britannica, inc.: <https://www.britannica.com/topic/Nirankari>
- [12] Buchbinder, M. (2011). Personhood diagnostics: personal attributes and clinical explanations of pain. *Medical Anthropology Quarterly*, 25(4), 457-478.
- [13] Bushnell, M. C., Čeko, M., & Low, L. A. (2013). Cognitive and emotional control of pain and its disruption in chronic pain. *Nature Reviews Neuroscience*, 14(7), 502.
- [14] Carli, G. (2011). Historical perspective and modern views on pain physiology: from psychogenic pain to hyperalgesic priming. *Archives Italiennes de Biologie*, 149, 175-186.
- [15] Cohen, J. (1964). Psychological time. *Scientific American*, 211(5), 116-125.
- [16] Copp, L. A. (1990). The spectrum of suffering. *The American journal of nursing*, 90(8), 35-39.
- [17] Craig, K. D. (2009). The social communication model of pain. *Canadian Psychology/Psychologie canadienne*, 50(1), 22.
- [18] DAS, V. (2007). *Life and Words. Violence and the descent into the ordinary*. London. *University of California Press-Violence, Gender, and Subjectivity'Annual Review of Anthropology*, 37, 283-299.
- [19] Damasio, A., & Damasio, H. (2006). Minding the body. *Daedalus*, 135(3), 15-22.
- [20] Daniel Murrell, M. (2018, october 31). *Medical News Today*. Retrieved from www.medicalnewstoday.com: <https://www.medicalnewstoday.com/articles/323533.php>
- [21] Daniel Murrell, M. (2018, october 31). *Medical News Today*. Retrieved from www.medicalnewstoday.com: <https://www.medicalnewstoday.com/articles/323533.php>
- [22] Denny, E. (2018). *Pain*. Uk: Polity Press.
- [23] Fradelos, E., Fradelou, G., & Kasidi, E. (2014). Pain: Aspects and treatment in Greek antiquity. *Journal of Medical Sciences and Public Health*, 2(2), 29-36.
- [24] Frank, A. W. (2009). Tricksters and truth tellers: Narrating illness in an age of authenticity and appropriation. *Literature and medicine*, 28(2), 185-199.
- [25] Denk, F., McMahon, S. B., & Tracey, I. (2014). Pain vulnerability: a neurobiological perspective. *Nature neuroscience*, 17(2), 192.
- [26] Gary, H. (2018). Rene Descartes. In E. N. Zalta (Ed.), *The Stanford Encyclopedia of Philosophy*. USA, USA: Metaphysics Research Lab, Stanford University.
- [27] Gatzounis, R., Schrooten, M. G., Crombez, G., & Vlaeyen, J. W. (2012). Operant learning theory in pain and chronic pain rehabilitation. *Current pain and headache reports*, 16(2), 117-126.
- [28] Gerrossa, G. N. (2018, February 12). *History Pain and Pain Management. Research in Medical and Engineering Sciences*.
- [29] Goldberg, J. S. (2008). Revisiting the Cartesian model of pain. *Medical hypotheses*, 70(5), 1029-1033.
- [30] Hawthorn, K. (2014, february 24). *Michel Foucault and the examining gaze*. Retrieved april 2019, from kristyahawthorn: <https://kirstyahawthorn.wordpress.com>
- [31] Kumar, K. H., & Elavarasi, P. (2016). Definition of pain and classification of pain disorders. *Journal of Advanced Clinical and Research Insights*, 3(3), 87-90.
- [32] Kahneman, D. (2011). *Inking Fast and Slow. Farrar, Straus and Giroux, New York*.
- [33] Kaplan-Myrth, N. (2007). Interpreting people as they interpret themselves: Narrative in medical anthropology and family medicine. *Canadian Family Physician*, 53(8), 1268-1269.
- [34] Kaur, G. (2015, December 22). *Banished for menstruating: The Indian women isolated while they bleed*. Retrieved 2019, from the guardian: <https://www.theguardian.com/global-development/2015/dec/22/india-menstruation-periods-gaokor-women-isolated>
- [35] Kmietowicz, Z. (2014). Indian parliament votes to increase access to morphine.
- [36] Kushner, H. I. (1997). *Roselyne Rey. The History of Pain*. Translated by Louise Elliott Wallace, JA Cadden, and SW Cadden. Cambridge: Harvard University Press. 1995. Pp. 394. \$39.95.
- [37] Landon, L. H. (1989). Suffering over time: six varieties of pain. *Soundings*, 75-82.
- [38] Lorenz, H. (2009). Ancient Theories of Soul. In *Stanford Encyclopedia of Philosophy*. The Metaphysics Research Lab.
- [39] Lutz, C., & White, G. M. (1986). The anthropology of emotions. *Annual review of anthropology*, 15(1), 405-436.
- [40] Lyon, M. L. (1995). Missing emotion: The limitations of cultural constructionism in the study of emotion. *Cultural anthropology*, 10(2), 244-263
- [41] Morris, D. B. (1991). *The culture of pain*. london: University of california press.
- [42] Navratilova, E., & Porreca, F. (2014). Reward and motivation in pain and pain relief. *Nature neuroscience*, 17(10), 1304.
- [43] Nordbok, A. (1989). *The Illustrated History of Surgery*. New york: Fritzy Dearborn Publishers.
- [44] Nummenmaa, L., Glerean, E., Hari, R., & Hietanen, J. K. (2014). Bodily maps of emotions. *Proceedings of the National Academy of Sciences*, 111(2), 646-651.
- [45] Oosterwijk, S., Lindquist, K. A., Anderson, E., Dautoff, R., Moriguchi, Y., & Barrett, L. F. (2012). States of mind: Emotions, body feelings, and thoughts share distributed neural networks. *NeuroImage*, 62(3), 2110-2128.
- [46] Priya, K. R. (2012). Social constructionist approach to suffering and healing: Juxtaposing Cassell, Gergen and Kleinman. *Psychological Studies*, 57(2), 211-223.
- [47] Rechtman, R. (2017). From an ethnography of the everyday to writing echoes of suffering. *Medicine Anthropology Theory*, 4(3), 130-142.
- [48] Russell, J. A. (1991). Culture and the categorization of emotions. *Psychological bulletin*, 110(3), 426.
- [49] Tapias, M. (2006). Emotions and the intergenerational embodiment of social suffering in rural Bolivia. *Medical Anthropology Quarterly*, 20(3), 399-415.
- [50] Taylor, S. J., Bogdan, R., & DeVault, M. (2015). *Introduction to qualitative research methods: A guidebook and resource*. John Wiley & Sons
- [51] Tracey, I. (2010). Getting the pain, you expect: mechanisms of placebo, nocebo and reappraisal effects in humans. *Nature medicine*, 16(11), 1277.
- [52] Wilson, S. L., Raval, V. V., Salvina, J., Raval, P. H., & Panchal, I. N. (2012). Emotional expression and control in school-age children in India and the United States. *Merrill-Palmer Quarterly (1982-)*, 50-76.
- [53] Waldman, D. S. (2009). *pain review*. kansas, Philadelphia: Saunders.
- [54] Wierzbicka, A. (1992). Defining emotion concepts. *Cognitive science*, 16(4), 539-581.
- [55] Taylor, S. J., Bogdan, R., & DeVault, M. (2015). *Introduction to qualitative research methods: A guidebook and resource*. John Wiley & Sons
- [56] Tracey, I. (2010). Getting the pain, you expect: mechanisms of placebo, nocebo and reappraisal effects in humans. *Nature medicine*, 16(11), 1277.
- [57] Wilson, S. L., Raval, V. V., Salvina, J., Raval, P. H., & Panchal, I. N. (2012). Emotional expression and control in school-age

children in India and the United States. *Merrill-Palmer Quarterly* (1982-), 50-76.

[58] Waldman, D. S. (2009). *pain review*. kansas, Philadelphia: Saunders.

[59] Wierzbicka, A. (1992). Defining emotion concepts. *Cognitive science*, 16(4), 539-581.