

Situating the Reader of the Illness Essay, within the Illness Essay

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Abstract

This article examines Eula Biss' essay "The Pain Scale" (2005) in relation to Donna Haraway's notion of situated knowledge. Biss begins and ends with an observational point zero—no pain as a supposedly neutral baseline—contrasting the pain scale with other numerical and descriptive measures, as well as the fragmented, language-defying realities of pain. And yet, subjectivity is

not the enemy of quantification in this essay. This article approaches Biss' text through the autotheoretical essay as a mode of interaction between both, exploring how the interaction between partial perspectives on chronic pain present the subject as both knowing and known, thereby investigating how this positioning shapes the individual's self-experience of pain.

“Pain, however, is no story in itself”
—Ocean Vuong, *On Earth We're Briefly Gorgeous* (2019)

“How to see? Where to see from? What limits to vision? What to see for? Whom to see with? Who gets to have more than one point of view? Who gets blinded? Who wears blinders? Who interprets the visual field?” (Haraway 587). Drawn from Donna Haraway’s foundational essay “Situated Knowledges: The Science Question in Feminism and the Privilege of Partial Perspective,” these questions introduce Haraway’s central use of the metaphor of vision to argue how knowledge claims are never neutral, never unmediated, always partial, produced by someone, somewhere: “The knowing self is partial in all its guises,” Haraway writes, “never finished, whole, simply there and original,” (586). If any set of questions could be said to underlie Eula Biss’ essay “The Pain Scale,” it would be Haraway’s. In her essay, Biss not only draws attention to how, where, and under what conditions certain forms of knowledge come into being, but also to how specific sites of knowledge shape the ways pain and illness are validated and legitimized—not only by others but also by the self.

With “The Pain Scale,” originally published in *Seneca Review* in 2005 and since then predominantly circulating online, Biss writes about being repeatedly asked to rate her pain on a zero to ten scale; a practice that enabled many health practitioners to trace the evolution of her pain’s intensity and informs the composition of her essay. Biss structures her text by adopting the Numerical Rating Pain Scale, with each section of the essay marked by a numerical symbol on the scale, starting from “zero” or “no pain” (Biss 5). From there, the author reflects upon a period of extensive medical consultation aimed at assessing her chronic pain. Biss grounds her inquiry in personal observation, with the essayistic ‘I’ exploring these experiences from a variety of vantage points, supported by an extensive use of references and citations.

Biss’ essay originated as an account of her chronic pain but developed into a reflection on how that pain is shaped, mediated, and evaluated within medical contexts. She does so by placing the pain scale not only

against the fragmented, language-resistant, and complex bodily realities of pain, but also alongside other numerical and descriptive systems. Crucially, Biss shows that the kinds of knowledge embedded in the pain scale reveal the conditions of their own production, holding them accountable for the truths they seek to establish. In Biss' essay, subjectivity is not set in opposition to quantification. Drawing on Haraway's notion of *situated knowledges*, I examine how the essay itself becomes a site of negotiation, staging interactions between embodied subjectivity and mediated perception, in order to assess medical categorization through its individual impact.

First, I will examine how "The Pain Scale" both adopts and dismantles the numerical logic through which her pain is interrogated. Specifically, I consider how the author, through the essay form, engages with the epistemic demands of the pain scale, turning the scale itself into an object of inquiry. Then, I place this inquiry alongside Haraway's *situated knowledges*, as Biss' text highlights various ways of 'knowing pain' and the ethical responsibility that emerges from their encounter. The text performs this primarily through extensive intertextual reference, which, I argue, by drawing on Lauren Fournier's work on autotheory, also positions the reader as one such point of reference: a partial, embodied perspective that affirms lived experience as an indispensable form of knowing. Biss' essay ultimately performs what it theorizes: an embodied mode of knowing that implicates the reader as a thinking-with subject rather than an external observer.

The Body Measured

In 2020, the International Association for the Study of Pain introduced a revised definition of pain, describing it as "an unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage" (quoted in Altschuler and Contantinesco 148). The added clause on resemblance was meant to capture the social and psychological dimensions of pain, its varied forms of expression, and cases that cannot be localized through standard examination (Altschuler and Contantinesco 143). Absent from the earlier definition, this expansion—though criticized as insufficient—better

accounts for chronic pain not linked to “actual or potential tissue damage” and avoids suggesting that pain must be witnessed or verbalized to be acknowledged (Altschuler and Contantinesco 143). Chronic pain is often framed by its ambiguity, its mysteriousness, and even invisibility. “The Pain Scale” initially appears to respond to the challenges inherent in reporting complex chronic pain and the processes through which patients’ experiences are acknowledged or legitimized.

Although physicians reassure Biss that “this is not in [her] head,” statements such as “we have reason to believe that you are in pain, even if there is no physical evidence for it,” prompted the author to question the very grounds on which her pain is legitimized (20-21). She does so by reconfiguring the Numerical Rating Scale (NRS), a standard self-reporting tool for monitoring pain intensity (McCaffery and Pasero 59). A key characteristic of the NRS is that the anchor points—zero and ten—provide a conceptual framework that defines the numbers in between; it is up to the individual to assess their pain along a continuum between ‘no pain’ and ‘the worst pain imaginable.’ The NRS may be used both verbally and visually and is often described as a highly practical and effective pain measurement tool (McCaffery and Pasero 59). Moreover, much like temperature, a measurable indicator of fever, the patient’s subjective report of pain is routinely charted alongside other ostensibly objective parameters at the bedside (Noble et al. 20). Because answers on a pain scale may determine whether treatments like physiotherapy are approved by insurers, Susannah Mintz states in her work on Biss’ essay that some level of strategic calculation appears unavoidable, highlighting how much is at stake beneath the seemingly straightforward clarity of the numbers themselves (248). Biss captures this tension by reproducing the numbers exactly as they appear on a pain scale in practice. The author advances sequentially through each numeral, each section opening with the printed number itself, visually framed by arrows indicating both its predecessor and successor. The numbers form a system of mutual reference, an internal logic, and yet the scale is simultaneously dismantled. They are treated in isolation, and interwoven with personal experiences, philosophical frameworks, and references to other pain scales and measurement systems—from the Beaufort scale, to Forslund’s Alternative

Positional Number System, and the Celsius, Fahrenheit, and Kelvin temperature scales, references to Dante's *Inferno*, and statements by the American Pain Foundation. It is in fact the supposed clarity of the pain scale that confronts Biss with a central dilemma: "Pain presents a unique problem in terms of measurement, and a unique cruelty in terms of suffering—it is entirely subjective" (12). However, she had previously not considered that "the fact that [she] believed [herself] to be in pain was not reason enough to assure [her] surroundings of it," which may well be the fertile ground from which her suffering grows (Biss 21). At the heart of this tension lies the pain scale itself, which Biss pointedly calls "My Proof"—and yet, the text intimates that the pain scale serves as validation for everything except the very thing it claims to measure: 'her' pain (14).

As "proof," Biss' pain scale is in fact both measurement and narration—a testimony that remains valid even as it interrogates the grounds of its own legitimacy. This paradox stems from the very logic of the scale: pain measures such as the NRS are not strictly designed to objectify or generalize pain (McCaffery and Pasero 58). Instead, they depend heavily on subjectively inflected anchor points, reference markers rooted in memory and imagination, which ask the individual to envision either 'no pain' or 'the worst pain imaginable.' While the pain scale draws upon the specificity of embodied perception, it ultimately funnels these experiences into a single number—arbitrary, abstract, and curiously detached from the very body it claims to measure. As Biss notes, "the sensations of [her] own body may be the only subject on which [she is] qualified to claim expertise," but she immediately questions this expertise: "Sad and terrible, then, how little I know" (9). The very openness and clarity ascribed to the pain scale, rather than offering resolution, propel her into a Montaignean inquiry: What do I know? What can I bring into view?

Essaying Pain

Illness narratives have taken on a prominent role in autobiographical writing since the 1980s (Vickers 388). Within this broader field, the illness essay occupies a distinctive position (Jurecic 4). Ann Jurecic has argued that "It's time for critics to pay attention to the illness essay," noting that

the genre's meandering and flexible form offers unique insights into lived experiences of illness, pain, and dying (4). Scholars describe the genre as one that resists the constraints of a conventional narrative arc and operates as a transgressive space in which authors can negotiate complex relationships with their readers (Jurecic 11-12). Because of its exploratory and open-ended nature, the illness essay is often considered both particularly well-suited and effective for grappling with the representational challenges of articulating pain and illness (Mintz 243). Biss herself, in conversation with essayist Helen Rubenstein, included in John D'Agata's anthology *We Might as Well Call It the Lyric Essay*, underscores this connection, emphasizing that the qualities of the essay form are inseparable from her attempt to write about chronic pain.

Personal experiences with pain and more memory-based narratives, "brought [her] to the essay" in the first place, Biss mentions, because "writing about it directly was not offering [her] any insights" (D'Agata 15). In the interview, Biss explains that she first conceived of the essay as a series of diary-like fragments, envisioning it as a more narrative, memory-driven text (D'Agata 15). However, narrative based literary forms seemed to her to "privilege the story of [her] personal experience with pain" over others (D'Agata 15). It was only later, when she recognized the literary potential in utilitarian forms such as lists and recipes—and more specifically, the enumeration of the individual components of the pain scale—that she was able to "elevate" her experience from its intimate, clinical context and give it a literary function (D'Agata 17). Typically, essays do not present a conclusive narrative in which facts and values are arranged towards a decisive conclusion. The sequence of the pain scale, together with the literary additions below, makes perceptible a movement from the assertive question of location ("Where am I?") toward a subjective, ever-recurring positioning that emerges from that question ("What does it mean for me to be here?"). The author initiates this line of thought explicitly at 'point zero,' or the absence of pain.

Assaying 'No Pain'

Biss begins and ends her essay with the necessity of a conceptual point zero—'no pain'—as a supposedly neutral baseline from which to measure

pain intensity as experienced by patients over time: “I’m not a mathematician. I’m sitting in a hospital trying to measure my pain on a scale from zero to ten. For this purpose, I need a zero” (Biss 5). However, in “The Pain Scale,” zero/‘no pain’ emerges as a paradoxical locus: simultaneously absolute in its defining power, yet surprisingly easy to question. From the outset, the essay underscores how the points of the pain scale are relative, subject to doubt, and reconfigured through their own reuse. At “0,” Biss recalls that the Celsius scale, for example, defines zero as the freezing point of water; yet Anders Celsius—who introduced the scale in 1741—originally assigned zero to the boiling point of water, and one hundred to freezing (Biss 6). The pain scale consistently asks for specific points in a person’s knowledge of their pain—remembering ‘no pain,’ and imagining ‘the worst pain,’ both reference points to which the author, as she writes, cannot relate (Biss 18).

The section “←2→” expands this thought, by evoking reflections on a striking array of dualisms—mind and body, “her one and her two,” the “adulterous lovers in Dante’s second circle of hell” (Biss 9) and force two on the Beaufort scale—which collectively form an associative web linking “wind” and “pain,” both described as “difficult to capture” (Biss 10). With that comparison in mind, we go to “←3→,” in which the author writes that “determining the intensity of [her] own pain is a blind calculation” (Biss 11). The author cannot recall the last time she felt ‘no pain’ (Biss 18). Biss’ pain orbits in and around the pain scale. Its chronicity is not accounted for within the measuring tool, as it measures only “the intensity of pain, not the duration” of it (Biss 19). Without “marks” on her body, without “swelling” or a “terrible tumor;”—“the X-Rays revealed nothing”—the blindness of the calculation lies, however, not only in the invisibility of pain, but also in the fact that the very instrument meant to quantify pain, the pain scale, is itself blind to it (Biss 14). ‘No pain’ in Biss’ essay appears both as the absence of visible pain and as a standard—a zero point—that the author cannot meet.

Questioning who looks, from where, and in what manner emerges as a central dynamic in the text: in Section “←4→,” Biss turns to the Wong-Baker Pain Scale, a visual series of faces ranging from least to most pain, originally designed to help young children rate their pain (Biss 13).

The author then shifts to the memory of the front page of a newspaper, depicting a man in emotional anguish, which in turn prompts her to describe two further images of people in pain whose faces are obscured: “No face, no pain?” she asks (Biss 13-14). The notion that pain could be deemed non-existent because it is not visually available is here carried to its extreme.

As previously stated, the pain scale’s anchors are meaningful through their connection to memory and imagination. Building on this logic, and given the lack of recollection of painlessness and the abstract concept of the worst imaginable pain, Biss proposes that what she is able to do is ask her body “to imagine the pain it feels as something else” (18). After all, the worst pain could be anything: “being stabbed in the eye with a spoon,” “whipped with nettles,” or “buried under sharp rocks” (Biss 11). However, each comparison partially aligns with, yet remains distinct from, “my own pain [...] my pain [...] my pain” (Biss 33), “an extraordinary pain,” “my pain,” and “the pain I already feel” (Biss 30-31; see Mintz 255).

Amid the network of comparisons, references, and digressions—stretching across past, future, potential, and present instances of pain—Biss’ essay turns all the more attention to how the pain scale itself compels the making of self-narratives and systems of meaning, though, in Biss’ essay this is articulated through the subjunctive: “I would happily cut off a finger at this point, if I could trade the pain of that cut for the endless pain I have now” (Biss 19). The perspective of the pain scale bears little relation to her lived experience of pain, yet it governs how that experience is structured, while appearing to be impartial numbers. From within memories and imagination, Biss looks, and is looked at, navigating a terrain that reimagines the knowledge the pain scale brings forth as an ethical practice of embodied, situated seeing.

Situating the Reader: Autotheoretical Encounters

Just as ‘no pain’ and ‘the worst pain imaginable’ in “The Pain Scale” emerge as unattainable and all-determining abstractions, Haraway exposes the myth of a positionless, transcendent viewpoint—what she terms

the “god-trick”: a view from nowhere, disembodied and context-free (581). Written amid feminist debates on scientific objectivity and epistemology in the 1980s and 1990s, Haraway initially critiques an invisible “they”—male, White—who have historically inflicted harm to an “us,” composed of “the embodied others, who are not allowed *not* to have a body, a finite point of view” (575 emphasis in original). Haraway emphasizes the embodied nature of all vision, seeking to reclaim a sensory system that has historically been mobilized to suggest a disembodied, omniscient gaze—a gaze “from nowhere” that mythically transcends any “marked body” (581). This gaze, Haraway argues, inscribes all other bodies while positioning itself as unmarked, claiming the authority to “see and not be seen,” to “represent while escaping representation” (581). Haraway reclaims vision as an embodied practice, contending that objective knowledge does not arise from detached transcendence but from accountability—that is, from taking responsibility for the situated position from which one observes and knows (590). Through the dual gesture of supplementing the pain scale with lived experiences and associations, while simultaneously visualizing, preserving, and, moreover, exposing its structure, Biss demonstrates how the pain scale structures a radical engagement with one’s own experience, situating both herself and, fundamentally, the pain scale. Yet this process also implicates a reader, as Biss illustrates how the very subjectivity of pain, which reveals its “unique cruelty” in terms of measurement, can simultaneously offer a form of comfort in relation to a reader, another body, another subjectivity (12, 20).

Addressing the reader directly, Biss writes: “I am comforted, oddly, by the possibility that you cannot compare my pain to yours. And, for that reason, cannot prove it insignificant” (20). Although it is already evident that readers are invited to engage with various forms of life writing both reflectively and intellectually, Carl Klaus emphasizes in the introduction of *Essayists on the Essay: Montaigne to our time* that the essay genre distinguishes itself by making such engagement not only possible but central to its very structure; the essay “thinks aloud” and invites the reader to think along (xvi, xxiii-xxiv). In Biss’ essay, this relationship is reciprocal: the author thinks by means of the reader.

Within this statement, it is pain's incommensurability that maintains its significance, even without quantitative validation. Importantly, this does not render the author powerless, as a pain scale might; instead, it demands accountability—from both the author and the reader. Consequently, the reader becomes a site of epistemological engagement—not by claiming equivalence with Biss' pain, but by consciously refraining from such claims. In this refusal lies a radical act of recognition. The reader is directly addressed, made complicit, implicated, and charged with the ethical responsibility to resist appropriation. In the possibility that you cannot “compare my pain to yours,” another's subject position is not just incidental—it is necessary (Biss 20). That the pain scale, as “My proof,” stands so far removed from ‘her pain’ becomes all the more apparent here. In approaching a reader, “my pain” enters into relation with “yours”: it requires neither translation to be validated, nor disembodiment to be understood.

Given the emphasis on ‘lived experience’ as a domain of knowledge within the essay, from which the ‘conversations’ with those others—as Mintz terms it—takes shape, the self comes to stand alongside a way of reading, a way of writing and making work (251). This positioning, in which personal experience and critical reflection intersect, resonates with what Lauren Fournier describes as autotheory: a mode of writing in which theory is inseparable from embodied experience and experience itself functions as method. According to Fournier, an “autotheorist”—one who engages with theory alongside lived experience and subjective embodiment—“reads and chooses citations they identify with, or that resonate with their own experience” (149). Rather than standing at a remove from the lived experience, references inhabit its texture, remaining proximate and answerable to it. In her work on autotheory, Fournier describes this back-and-forth movement between theorizing lived experience through diverse textual references, such as the ones mentioned above, as “intertextual intimacy” (149). This term captures the tendency to draw parallels between one's own experiences and those of others, by the very act of referencing and citing itself, analogous to Biss' approach and most notably in her invocation of the reader's pain. Biss' articulation of pain is

in fact a matter of negotiation—grounded in a resolute rootedness in the body, hers and the reader’s alike.

Biss’ references are no longer even situated in the margins—let alone in a formal bibliography—but instead refer, side by side, back to the corresponding numbers on the pain scale, upon which and with which they respond as embedded, locatable points of knowledge. They are made responsible and answerable, not by virtue of their traceability through conventional methods (e.g. bibliographical citation), but through their distinct and demonstrable partial positioning. The apparent transparency of the pain scale—its progression from zero to ten, and its promise of comparability—rests, in “The Pain Scale,” on unstable ground. Through the reconfiguration of its anchor points, particularly the conceptual ‘point zero,’ Biss not only confronts the impossibility of measuring pain, but also turns the very act of measurement into an object of inquiry. In this sense, ‘no pain’ becomes both an epistemological and an existential problem: it marks the threshold of what can be imagined, remembered, or expressed, while simultaneously exposing the instability upon which the scale itself depends.

Conclusion

Pain, in Biss’ essay, functions as a node where subjective experience presses against the limits of articulation. The difficulty of expression becomes apparent in the tension between, on the one hand, the intellectualized network of comparisons that mirrors the logic of the scale, and, on the other, the lucid immediacy with which she describes her own pain—felt rather than theorized. “The Pain Scale” thus emerges as a product of both the body that suffers and of the language that seeks to give that suffering form. Through its interplay of citation, introspection, and theoretical reflection, Biss’ essay becomes what Fournier has termed an autotheoretical text: a mode of writing in which lived experience functions as method, and theory is woven into the textures of embodiment. Each of Biss’ references serves not as distant illustration but as a site of intimacy, where the personal becomes epistemological and knowledge becomes affective. Ultimately, “The Pain Scale” measures in order to question, and questions in order to situate. If approaching pain demands

we inhabit its incommensurability rather than tame it into measure, then Biss' essay becomes a space where the body speaks on its own terms.

It is within this dual movement that Biss' essay resonates with Haraway's *situated knowledges*. Haraway's insistence on the embodied nature of all vision provides a framework for understanding how Biss transforms the medical gaze into an act of responsibility, not so much because the pain scale is presented as 'objective,' but because it seems to suppress the body, reducing it to an apparently innocuous numbering. Rejecting a 'view from nowhere,' "The Pain Scale" insists on a 'view from somewhere'—finite, partial, but profoundly generative. Measurement here becomes both a moral and an epistemological act: an acknowledgment that to see, to know, and to describe is always to take a position. In this sense, the relation between measurement and experience in Biss' text mirrors Haraway's critique: what appears opposed was, in fact, entangled.

The essay form, with its inherent tentativeness and reflexivity, allows Biss to explore what can be articulated without assuming closure. As "The Pain Scale" unfolds, its structure reflects the recursive logic of the scale—each number is at once discrete and relational, each reflection both a measurement and a movement. The reader is not merely invited to follow these movements but is enmeshed in the same processes of comparison and constraint that shape the pain scale itself. Yet this reader is addressed not through appropriation of Biss' pain, but through the acknowledgment of their own embodied 'point of view.' Biss renders this relationship ethically charged: reading becomes an act of meaning-making that respects the irreducibility of another's suffering—an ethics that moves in both directions, from author to reader and from reader to author.

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Biography

As a pre-doctoral researcher at the University of Ghent (Comparative Literature), **Luna Dieleman** submitted an FWO-research proposal focusing on affective notions of discomfort in contemporary illness essays. Dieleman developed this project within the context of the interdisciplinary

CHARM-network. Currently, Dieleman is involved in an Erasmus+ project dedicated to researching and disseminating the use of essayistic writing to foster civic engagement and enhance critical and creative thinking skills.