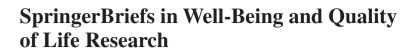
Ronald E. Anderson

Human Suffering and Quality of Life Conceptualizing Stories and Statistics





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Human Suffering and Quality of Life

Conceptualizing Stories and Statistics



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Preface

The original intent of this little book is to take on four very big challenges: (1) a framework that makes it easier to think about suffering and measure it, (2) a compilation of available data on how much suffering exists in the world, (3) rationales for why people should become more aware of the vast volume of severe suffering around the world, and (4) justification for giving higher priority to the reduction of suffering in our personal, state, and global policy objectives. With these goals, you should not be surprised that the book looks at suffering from many different angles.

After 40 years of teaching sociology and research strategies at the University of Minnesota, I retired in order to just do research, travel, and volunteer work. Making this major life change forced me to confront questions of meaning, especially: What makes life worth living? What is the meaning of suffering? What can one do in later life to optimally contribute to ultimate concerns of human beings? My first major conclusion was that compassion is most needed to secure the human race. But after focusing on compassion for several years, I came to realize that the efficacy of compassion is constrained by the huge supply of suffering in the world, which only seems to be expanding.

When I started reading what others had learned about suffering, I discovered a void of knowledge and concluded that doing pioneering research on suffering would be the best way I could use my talents and experience. It has been exciting to discover some elements of suffering, which are as old as human consciousness itself.

This brief book of about 125 pages, follows the structure and format of all SpringerBriefs, of which there are thousands. In the SpringerBrief model, each chapter is like a separate article with its own abstract, keywords, footnotes, and references. This requirement, I believe, is a good one because it forces the author to make each chapter convey a complete statement of its own, but at the same time makes the chapters flow together so that the entire set is an integral whole.

The first chapter begins by explicitly defining some very different types of suffering from which a taxonomy emerged. People think about suffering in very different ways, depending upon their backgrounds in religion, local culture, and unique personal experiences. Chapter 1 discusses eight 'frames for suffering' and Chap. 2 supplies stories for each way of thinking about suffering. How suffering shapes peoples' quality of life becomes clearer through these stories.

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Statistics offer only fleeting glimpses of the distress and agony suffered by some in the course of everyday life. But in Chap. 3, you will see how our taxonomy of suffering helps organize and add meaning to statistics on the health of American adults. People react differently to suffering, depending upon whether it is primarily pain, depression, anxiety, grief, existential suffering, or social suffering.

Before you read in Chap. 3 how many American adults live with extreme suffering, guess the percentage. Of course, it depends on how one defines 'extreme,' but reflects on the question before and after digesting the statistics.

Another important question is how much extreme suffering affects people's quality of life (QOL). The answer may surprise you. Finding so much suffering in a contemporary, affluent society raises the possibility that affluence itself, through lifestyles and beliefs produces types of suffering not typically found in poverty stricken nations.

Chapter 4 shifts to a global perspective and offers pioneering indicators for both subjective and objective suffering country by country. Besides ranking countries by their degree of suffering, the chapter notes how social support networks seem to help people living in different cultures cope with suffering more easily.

Alternative approaches to the alleviation of suffering depend upon the type of suffering, but all types need to be addressed on both the individual and institutional levels. Data comparing nations as well as states in Chap. 5 show the misalignment between suffering and available care resources that may help relieve those who suffer. A major finding is that global inequality is a major cause of suffering and widens gaps in care for those who suffer.

Working toward ending needless suffering is both a personal value and a public good that offers hope to those who suffer now or in the future. Chapter 6 reviews the ethical grounds for alleviating suffering. It also discusses strategies for relief of suffering and notes how the relief of suffering has to be both an individual and a collective effort. Recommendations are offered for incorporating the relief of suffering more fully into social policy for development as well as for individual decision-making.

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Chapter 1 Conceptualizing Human Pain and Suffering

When we suffer, our quality of life declines—it is an intuitive idea. What is not so obvious, however, is that by intertwining suffering and quality of life in our *thinking*, we can better understand and cope with suffering (whether our own or others'). To begin pulling these concepts together, I highlight relevant social scientific literature and suggest eight frames or ways of thinking about and investigating human suffering. In later chapters, I will have examples from stories about suffering and statistics showing the spread of suffering, both national and global.

1.1 The Suffering Concept

Imagine yourself undergoing major surgery 200 years ago. While some cultures had used pain-relieving herbs and other natural substances for millennia, you are in Europe or America, where such palliatives are not yet used. You will not be given anesthesia (beyond, perhaps, some alcohol). Essentially, you are facing torture. This is what happened to Frances Burney, a wealthy English writer living in France in 1810. She left a vivid story of suffering as she described six surgeons' work to remove her breast tumor. Journal entries of her unimaginable pain have been described by Dormandy (2006) and preserved by Hemlow (1975). Her pain, unchecked by any anesthesia, sears the page:

When the dreadful steel was plunged into my breast, I released an unremitting scream.... I felt the knife rackling against the breast bone, scraping it while I remained in torture.... When I opened my eyes I saw the good Dr. Larrey, pale nearly as myself, his face streaked with blood, and depicting grief, apprehension and almost horror (Hemlow 1975).

Burney's recollection is a monument to the raw pain and suffering of both patients and doctors. The doctor's suffering, resulting from compassion, attests to the reality of collective—or social—suffering.

For those of us living in an era of high-quality anesthetics and laser surgery, Burney's agony reads like primitive depictions of hell. Through her words, we empathize. Yet as you read this sentence, millions of people suffer in dark corners of the globe, just as millions have in the past, and, potentially, millions will in the future (Amato 1990). Every day, our fellow human beings face torture, rape, and excruciating trauma (Bourdieu et al. 2000; Dormandy 2006; Trachtenberg 2008; Vollman 2005).

Now, not all pain and suffering is extreme, bordering on the unbearable. Pain and suffering range from the infinitesimal to the unimaginably excruciating. And both pain and suffering may last seconds or lifetimes. They may be fleeting or chronic.

Pain and suffering may also be individual or social. Often we cut a finger, occasionally a friend dies, but such suffering is not distributed evenly across social strata, much less the globe (Anderson 2011, 2012; Bock 2011; Diener et al. 2009). While severe suffering from violence and injury occur more often in the Global South, particularly in pockets of poverty, studies in western societies generally conclude that at least 20 % of adults suffer from chronic pain, the reoccurrence of severe pain over several months or longer (Breivik et al. 2006; Chabal 2009; Collier 2007; Nagappan 2005; Kleinman 2009a; b; 2011). Suffering is pervasive, if not always shared.

In this book, the word 'suffering' will be used as an all-inclusive term, subsuming pain. However, Table 1.1, which identifies three categories of suffering and provides a brief entry of descriptors for each, categorizes pain as separate from other types of suffering. Our language is filled with words that imply affective or emotional responses to events or objects that result in negative feelings, many of which are listed in Table 1.1. For example, grief as a type of suffering is viewed by Charmaz and Jilligan (2006) as a composite of many emotions and cognitions including fear and sorrow.

In the spirit of Cassel (2004) and Chapman and Volinn (2005), who defined suffering as perceived threat or damage to a sense of self, here suffering is defined as distress resulting from threat or damage to one's body or self-identity. Suffering can vary in intensity, duration, awareness and source. Physical suffering is the subset of distress resulting from threat or damage to one's physical being, whereas mental suffering is distress perceived as originating in one's cognitive or affective self-identity. Self-identity is the set of characteristics and their meanings observed when one looks at oneself.

Physical suffering is equated with pain, even though it often co-occurs with mental suffering (Black 2005; Carr et al. 2005; Livingston 1998; Morris 2002; Wilson et al. 2009), while mental suffering includes cognitive suffering (thoughts that produce suffering) and emotional suffering (Francis 2006).

For present purposes, social suffering is defined as suffering whose sources are social collectivities and/or social institutions. Social suffering, which will be discussed at much greater length in the next section, differs in that it refers to the social contexts that shape the suffering of both individuals and collectivities. Social suffering typically co-occurs with other types of suffering, results from social forces, and results in social change (Das et al. 2001; Farmer 1997; Kleinman 1988;

| Suffering type | Words for suffering | | |
|---------------------------|---|--|--|
| Physical suffering (Pain) | Agony, discomfort, excruciation, hurt, incapacitation, torture, torment, soreness, acute pain, chronic pain, extreme pain, excruciating pain, unimaginable pain | | |
| Mental suffering | Anguish, angst, anxiety, addiction, distress, troubled, craving, post-traumatic stress disorder, compulsive disorder, loss, mourning, grief, sadness, disgust, irritation, anger, rage, hate, contempt, jealousy, envy, frustration, heartbreak, fear, panic, horror, indignation, shame, guilt, remorse, regret, resentment, repentance, embarrassment, humiliation, boredom, apathy, confusion, disappointment, hopelessness, doubt, emptiness, homesickness, loneliness, rejection, pity, self-pity, nervousness, restlessness, minor depression, chronic depression, severe depression, hopelessness, selfworthlessness, spiritual confusion, purposelessness, other types of loss of meaning | | |
| Social suffering | Social exclusion, discrimination, ostracized, persecution, incapacitation, disability, shame (self-ostracized), distrust, relative deprivation, subjugation, atrocity, homelessness, unemployment, social rejection, discrimination, bullied, disability, blindness, deafness, bedridden, hunger, war, civil violence, survival risk factors | | |

Table 1.1 Words associated with common types of suffering

Kleinman et al. 1997; Nordgren et al. 2011; Wilkinson 2005a). Genocide, battle-field slaughters, and lynching are well-known examples. Research on social suffering has uncovered that those affected by such dreadful events suffer in part from a devastating loss of their identity as human beings (Bourdieu et al. 2000; Kleinman et al. 1997; Wilkinson 2005a, b).

Existential suffering (later combined with mental suffering) is the result of struggles with the meaning of one's existence (Langle 2008). This may seem like a lofty idea, but you might think of it as a struggle in which you question the meaning of your life (or life itself). A common course of existential suffering is confrontation with death and other threats to one's existence. Williams (2004) interviewed low-income cancer victims receiving end of life care. In many instances, the patients' suffering was compounded by wondering how their impending death could square with their beliefs about life's meaning. On top of that, some felt left out or treated as non-persons as death approached. Here is how a 42-year-old man described the experience:

People talk as if you're not there. One of mother's friends died of cancer last week, and people around me were talking all about the funeral, like they didn't even think it might bother me. It gets to me and makes me feel my life isn't worth anything compared to theirs (Williams 2004).

This narrative demonstrates how social and existential suffering may occur together, amplifying the degree of tragedy and suffering.