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OBJECT-SUBJECT-SUPERJECT: THE BEAUTY OF MIND

Abstract. To be interior in interactions or to be exterior in intraactions: how can we sense nature if we can't even sense ourselves as objects? In this case we can be considered as autistic people and we must be living in a closed universe without "Nature". We can express beauty of ourselves only if we can reflect to our mind, in itself. After this acting in process the World will be open for us.

Is it possible?

This mutual paradox is objectively measurable with a new test experiment. It represents the superject above the subject and object: the thing "Who" is able sense beauty as it surrounds us.

The spontaneity is at the same time constant and changing: if we are able to act out the Whiteheadian universality of the process whilst seeing ourselves from above then there is no contradiction between the happening and the experiencing of the process.

The Whiteheadian Philosophy could be a model of Ferenczian practice in interactive mutual Psychoanalysis, but the heterodox Psychoanalysis could provide practical Psychological background for Whiteheadian Theory.

Beauty is an acting in process of our mind opening from itself to ourselves, therefore the intraactive elements become interactive things. Ourselves reflected to our World is the "Eternal Other": The Psychological source of Aesthetics is the Psychology of Whiteheadian "superject".

Keywords: *Emotional autism, Cognitive autism, Interactive Deficit autism, Excited autism, Stereotypic autism*

Introduction. The Whiteheadian Philosophy could be a model of Ferenczian practice in interactive mutual psychoanalysis, but the heterodox psychoanalysis could provide practical psychological background for Whiteheadian theory – demonstrated by psychometry of autisms.

The Szondi testing, the most frequently applied purely psychoanalytical model, fulfils none of them: neither is the feedback of empiricism open in the test model, nor can empiricism become independent of the test model... (Cain... and Moses..., pp. 195-205).

The Rorschach testing lacks a specific analytical testing principle, it is much more of an analogous model, being analogous in its process (Mérei, 2002, pp. 24-27). Does the Rorschach test have a background domain (what the blots mean in themselves), or does the Szondi test have an empirically

confirmable domain from the specific testing? Neither does... Or rather, neither has an open variable possibility where projection reacts on theory.

This is the purpose for which I elaborate a new model:

How the Rorschach test's analogous freedom and the Szondi test's theoretical closedness can be compatible with individual testing?

1. If a projective test can solve the problem of open dissipation (Ervin László, pp.179-183), i.e., it can raise the problem from the interaction, but the problem raises the interaction – à la postmodern (Lyotard, 1993, p. 24) – then we get a new system psychology.

At the same time, such a construction will build up a personality psychology from the social relation, and the personality psychology will raise questions concerning the basic social psychological interactions, their intraactive internal backgrounds, and vice versa... Thus personality can be built up from the social act, as well as the other way round, while it is also possible to ask questions vice versa, in both ways, so the two categories are equipotential in our system.

To do so:

Because if I confront the test subject with a part of itself that can't be seen in the superject but is actually him/her, than the practice of the experience of the universal self will under-or overcome all the games between the subject and the superject.

A: it must fulfil the distinction and integration between the individual's inter/intraaction and personality structure... How can it do that?

B: we try to build up the Rorschach blot as the method of the background projection and its underlying general contents, first on a theoretical basis, later on an inductive basis, so the connection of the inductive basis and the theory can be continuously turned into each other, by which I mean the personality theory built up on the empirical basis of the social psychological act. The empirical basis has no social psychological basis and definitely no personality psychological basis any more: this will be the interactive personality testing.

That is, I include a broadly processed system of psychoanalytical nature in the "blot methodology", but the factors are not selected by means of the classic psychoanalysis, but a general interactive category scheme... and this is shaped further by means of falsification, i.e.:

I ask a question that carries a multiseptic projectional basis in itself; while the basic type of the set of projective answers is unambiguously defined by the question, so the problem can be described. Here I explore e.g. lamenting in general, not differentiating between its types; instead I do so in a wider, empirical, non-projective way of raising the question. It will not be the "blot" itself, but the specifically described test content of the projective question.

A: I can empirically define the background content of the projection.

B: This set of empirical results itself will be the background theory of the projection.

C: I can compare it with the psychoanalytical background principles of projective questions.

D: Finally, I can prove or refute the psychoanalytical premise, while at the same time I test from the psychoanalytical theory (I can do so by my factors being completely open in terms of their meanings, in semantics...).

E: In terms of methodology, psychology theory, and philosophy of

science, it means the self-unity of empiricism and deduction, in its own organic process dynamics, in its self-controlled, spontaneous cycle...

The dynamic feature appears only as a category system, but as a new school, taking Neo-Freudianism only as a theoretical basis, while I elaborate a completely independent and new system, which can raise questions about inter- and intraaction (Bálint, 1979, p. 159; Klein, pp. 165-187).

Let's see the basic structure, replacing the blots with the theoretical structure, which can be confirmed empirically in the system below:

2. The construction principles of the test (The exact elaboration of the test categories is by Dr. Antal Bugán):

a) Relation categories

Now let's see how I can describe the internal feedbacks of the intra- and interaction with four dynamic categories.

A) Category:

INTRAMORPH

A previous experience induced by the interaction.

B) Category

INTERMORPH

A new experience in the interaction.

And there are two transitional categories between the inter- and intramorph:

C) Category

HOMOMORPH

The connection between the intramorph experience and the new, direct interaction: i.e., the previous experience appears in the interaction.

This is the dominance of the intramorph over the intermorph.

D) Category

HETEROMORPH

A given interactive experience created in a given process (this is what is always different, depending on the given process).

This is the dominance of the intermorph over the intramorph.

These are dynamics-based categories, but ones based on their distinct relations: relation categories of the "basic" interactive construction.

b) Internal dynamics of personality categories

Starting from an internal focus, we immediately get two categories: one is narcissism, the other is self-power.

Narcissism exists in itself, as it can only focus on its own closed intramorphness...

Its dichotomous counterpart is self-power. If it is intensive, the self can, for example, be interactively open about itself.

At the same time, these are dichotomies, rather than necessarily opposites. Their internal, inverse or complementary dynamics can be described from the empirical pattern.

A1: narcissism A2: self-power

But there is not only a dichotomous basic structure, but also a thematic semantic extension (from A1,2 follows B1,2, then C, D, E the same way).

At B, the next semantic level, I measure the object selection of A1,2:

B1: A philobat, who cannot bind an object in his intraactivity

B2: interactively projects himself onto the object: has transference

This inter- and intraaction is always present in human relationships, so it can be confirmed, while it is a deductive background principle as well...

And now, let's build another meaning on B1,2: the indirect relationship with the object (what the object represents towards me interactively, and what I represent towards the object intraactively), all this projected on B1,2:

C1: self-giving C2: impulsive (a similarly open stratification)

Now it isn't only directed at an object in D1,2, but it generally applies to the object relations of the individual.

D1: tolerant D2: exploitative

And this is what the general object relation of the general object selection is built on:

E1: empathetic E2: lamenting

At the same time, as shown above, someone with a narcissistic orientation can be lamenting, just like one affected by transference, see the combinations... Even these personality cycles are stratified by the internal empirical-deductive semantic structures of the intra/interaction.

The question has been put into focus recently: is the Whiteheadian process (Whitehead, 1978) reproducible e.g. in an inter- and intraactive narrative testmeasuring situation?

These are the relations of our test experiment under development, "IPPD" ("Interpersonal Personality Diagnostic Test") is intended to explore.

The "IPPD" ("Interpersonal Personality Diagnostics") test experiment could unify the measurement principals of projective psychological tests with the information technological digitization of question answer tests, thus its automatization potential is rather significant. However, the background of this test experiment is based on psychodynamic principals, so even after validation it can preserve its early 20th century way of psychologization in a good sense, even as a complex personality test completed with children and adult clinical dimensions. A separate application can be developed from the system of testology for the Autism Spectrum Disorder ("ASD"). It could also become a complex measurement tool for the human sexus. Its most important disciplinary novelty is that it is capable to form images of personality psychology from interactive social psychological situations, and vice versa.

If the Ferenczian "mutual analysis" is a kind of transference-countertransference which represents the projection of emotions by one's own unconscious contents, and in a "chronic" case, emotional dependence, we can provide the intra- and interactive dynamics of all these:

Intramorph patient – intermorph analyst: the patient doesn't reveal himself, and he leaves it to the analyst, but:

Intramorph analyst – intermorph patient: the patient reveals himself, but his analyst is not responsive.

Intramorph patient – intramorph analyst: no trust is built, therefore no transference or countertransference exists.

AND FINALLY:

Intermorph patient – intermorph analyst: the opportunity of a full mutual analysis.

These are only simple relation categories: let's consider complex homomorph and heteromorph relation categories, each with 5 factors and, within them, two poles: e.g. A1, A2, B1 etc.

Let me show only two extremes: e.g. a lamenting patient and an empathetic analyst – it is a one-way analysis; but if both the patient and the analyst have transference, it is an opportunity for a complex mutual analysis (Cabré, 1998).

From the types, one can measure the process outcome of the analysis and indicate the empathetic results. In fact, it is worth paying attention e.g. to a possible “lamenting transference” on behalf of the patient, which is a blackmailing potential towards the analyst in case of a mutual analysis... Then it may be worth actually closing the analysis – which, I will venture, is often necessary, especially in mutual analysis.

It could be a way to continue Ferenczi’s oeuvre – maybe finding an answer to problems whose solutions Ferenczi couldn’t live to see. Maybe.

The conclusion of this test-game is that the subject playing with the real process – the superject – this is the natural human condition. The honest revelation of the superject however excludes the above position in our test questions.

The purpose of our article is to develop such a biologic psychiatric therapy.

Formulation of the main material. Thus the post-modern science gains a particular position: it realises the disappearance of the metaphysics in the new process eighty years after Whitehead. This recognition itself creates the metaphysics – the question goes and still the question remains. In our psychosocial game the superject is the psychiatry, but we are the subjects like autistic children in process: this is a socialpsychiatric “liberator” game for the really ill children in “reality”.

In our paper we would like to manifest the discourse of a Whiteheadian approach in practical clinical psychology, especially in testing interactive deficit situations e.g. autisms. We wish to dedicate our work for Whiteheadian interpretation of this narrative science.

It is common to address autistic disorder as “pervasive” or “comprehensive” ontogenetic disorders because they affect all areas of adolescent psychological development negatively. But as the expression itself suggests the truth is that we are not directly aware of the specific disorders. As it will turn out we cannot deal with autism as a complex disorder, we should rather use the term in plural i.e. autisms and autistic disorders (Nelson, 1995, pp. 72-73; Berkow, 1994, p. 2267-2268).

In my lecture I would like to point out the Asperger syndrome, because this autistic personality disorder has a so-called “acting out” between the process of “subject superior”, (in Whiteheadian philosophy it’s the “superject” (Whitehead, 1978)) and that of the “subject interior” which means the personality’s reality in the human psychological integrity. The superject dominates the person who has a schisis between its social and the own personal integrity. The individual psychological processes are under the superior reality. But the superior reality is the patient’s stronger psychoentity above the own personality. Reality versus psychological continuity – psychodynamic process contra social reality – metaphysical supremacy contra psychological process of the emotional interiorization: “out” inside of the own personality, but not “out” from personality. “Psychopathy, not psychosis” – as was said by Hans Asperger immigrant Austrian pediatrician. But we haven’t really got a psychoanalytical model for this syndrome, so we cannot make analytical

therapy for an analytical intellectual disorder form.

The Asperger syndrome (AS) has been in use as a diagnostic criterion since 1944; it was called then “Autistic psychopathy”. It only got the name Asperger syndrome referring to the first diagnostician from Lorna Wing psychiatrist and from her psychoanalyst colleagues in 1981. After all it was only involved in the official system of DSM-IV (DSM, 1999, pp. 41-69) as a unique syndrome in 1994 and it is still much debated etiologically and from other aspects.

It is interesting and its importance will be emphasized later that the male versus female occurrence rate is 6:1 (Wing, 1981, pp. 129-137), and it does not show symptoms in early childhood while other autisms do so. Its real occurrence is frequently met after the age of six. Even today it is considered by clinical child psychologists as a child psychopathy and no etiologic relation is seen between psychotic and neurodegenerative autisms. The fact that the IQ of children with AS is usually outstandingly high – often exceeds the value 140 – provides further support of this idea. We are going to point out that the classification spread in the ‘90s was totally wrong by saying that this is a mild form of autisms (DSM, 1999; Nelson, 2002) as opposed to the seriously retarded Kanner’s syndrome which was considered as a severe form of autism in this old classification. After 1994 we cannot even talk about such a division.

The zero-LORETA 3D EEG examination method (appliedneuroscience.com) could serve as a brand new evolutionist examination, which is much better in localization than any other common EEG-asymmetry examination. fMRI examination that is even better in localizing this function and the corpus callosum MRI on big population can gain great significance; we would like to integrate it by the FDG-PET-MRI examination.

The old and outdated misbelief which says that the childhood autism is a special relapse (shub) of adulthood schizophrenia is absurd and has never even been documented. It is quite obvious that the childhood psychotic autisms (low IQ – often under 75, perinatal neopathia possible) often show a different pathography compared to childhood schizophrenia (relatively high IQ, no perinatal neopathia (Nelson, 2002)). This can be well distinguished Psychopathologically and dynamically from autistic-psychopathy or from borderline syndromes evolving in late childhood (DSM, 1999) which are basically psychopathic with occasional psychotic relapses (shub) as described by modern etiologic models.

In all the DSM classifications traditionally Kanner Syndrome, which we have known since 1943, counts as the childhood psychotic autism (DSM, 1999). It is such a standard autism that its discoverer’s name is not even noted by the DSM-IV (DSM, 1999) but we will see that it is only a type of severe autistic disorder. Mental defectiveness is 100 % in this case, IQ is under 75 and the pervasive disorder can be recognized before the age of three in communication, social behavior and in flexible thinking. Patients often become echolalic, are incapable of communication even on motor level and the stereotypic behavior in psychomotorics. They cannot recognize the personal pronouns and possessive pronouns or invariably repeat them; meaningless, ritual behavior patterns are often. The syndrome’s incidence 3-4/10000 and it is increasing, but the most interesting fact is that the girl : boy rate is 3-4:1 (Nelson, 2002). Unambiguous fallback can be recognized in the above mentioned areas compared to healthy coevals before the age of three while they

produce the abovementioned pathologic symptoms. This fact will be of greater importance later in our methodic.

Unambiguous neurodegenerative reasons for the Kanner Syndrome are unknown (Nelson, 2002).

On the other hand the Rett Syndrome which is recently commonly classified as a type of autistic disorder has an unknown etiology (Nelson, 2002, pp. 1528-1529) but it is unambiguously a neurodegenerative disease, it only appears with girls and its incidence is 1:15000 (Nelson, 2002). Growth seems to be normal until the age of one then the speech and motor skills show a fallback and microcephalia appears. This can cause brain-stem ataxia and minor hand tremor in its early state. Most patients suffering the syndrome produce sigh like breathing with intermitting apneic periods which are accompanied by cyanosis. The stereotypical hand fumbling is very common the spontaneous and aimed hand movement disappears. Interestingly this symptom does not evolve before the age of 2 or 3. Strong epileptiform generalized tonal-clonal seizures emerge at most of the patients in the early period. These can be well treated by antiepileptic drugs though dystrophy and defective weight gain can emerge. The autistic behavior is general which proves to be curious because the initial severe neurologic pathography, which decays, is accompanied by a permanent psychiatric pathography (Nelson, 2002).

Today we know that those children who suffer Kanner – or Rett syndromes become mentally retarded people with defective social skills in their adulthood. We also know that development therapies in childhood or adolescence may evoke improvement; thus the lack of such therapies or their application make a big difference in patients lives. Today the progression cannot be valuably changed by drug application (this will be detailed later on) but the patients do not develop schizoid personality structures their autism become standardized (Nelson, 2002).

It is quite curious to decide what to consider the Rett Syndrome on the basis of classification. The Nelson Textbook of Pediatrics classifies it as “Neurodegenerative disease of various reason” (Nelson, 2002) while DSM-IV classifies it as autism or autistic pathography (DSM, 1999). Clinical child psychologists have only started to discover this syndrome in their field.

If we typically look at the common or at least psycho-dynamically analogous symptoms, which make it possible at all to consider autisms here, then we can create different dynamic categories:

A: Emotional autism

With the Asperger Syndrome this is shown in the psychopathic scission between systematicness and unsystematicness i.e. a typically convergence dominant emotional function phenomenon.

All this is severely diverged with the Kanner Syndrome i.e. it rejects every convergent function i.e. echolalia, stereotypic psycho motor, defective use of personal pronouns.

This pathological divergence appears as neurodegeneration with the Rett Syndrome patients; this is interesting also because, we do not know what it was before.

B: Cognitive autism

It is obvious here that the cause is convergence predominance with

Asperger patients while Kanner and Rett patients functionally incapable of basic convergences like complex speech, aimed communication motivated movement etc.

C: Interactive Deficit autism

This is obviously A&B

D: Excited autism

It is implied that with Asperger patients the psychopathic emotional range of systematicness – unsystematicness scission can be observed which can later manifest in various acting-out behavior. It must not be confused with adulthood psychopathia not even in methodical sense. It is more common here that the psychopathic excitation is covered by the emotional bizarreness of the extreme intellect.

With the Kanner Syndrome the excitation can be considered as a negative stereotypic psychotic aggression seizure, though we know very little about its etiology because the psychotic status of retardation as opposed to the numerous life story accounts recorded with aspergeroid patients (<http://livewithit.blog.hu>).

Excitation with the Rett Syndrome is neurologically initiated which becomes a chronic psychotic autistic standard status; see above. The emotional and intellectual excitation of both the Kanner and the Rett syndromes show a very divergent feature, in certain cases the convergent intellectual functions cannot even be recognized.

E: Stereotypic autism

See: C&D

Our researchers' discovery

We have said that this is a convergence-divergence balance failure, dominantly “boy-brain breakage” with the Asperger Syndrome, and we have proved psycho-dynamically that the Kanner and even more the Rett syndromes are divergent “girl-brain breakage” or at least they show such pathological brain hemisphere dominance. This is why we suggest applying the above mentioned diagnostic imaging and electrophysiological examinations here as well; results are predicted to be analogous but adverse in meaning. If possible it is worth to expand EQ and SQ tests along with the IQ test and to apply complex convergence-divergence tests, though there seems to be not much chance for this except for with AS patients; not counting the standardized, approved and generally applied IQ tests.

From genetic aspect we know that autisms and autistic syndromes often overlap with the so called “X-Fragile syndrome” (Martin-Bell Syndrome) (Nelson, 2002; <http://www.medterms.com>) the genetic etiology of which we do not know. This scientific case is even more absurd because we cannot undoubtedly identify it with autistic syndromes. We only know that there is such a parallelism, but this is a blurry field both in genetics and child psychiatry, more to that we do not know the exact dynamics of these syndromes in psychology. Neither do we know the genetic origin of premutational X-fragile cases (we have 18 family members for research reasons) or their etiology. We have worked out a specific examination method in our human research plan which can unambiguously falsify the above mentioned phenomena, problems.

We basically know that X chromosome disorders can cause hypothalamus

laesio and since the time of modern diagnostic imaging we also aware that severe hypothalamus laesio (www.gyogyinfok.hu/magyar) and corpus callosum laesio (Bibby, 2008) can be identified with many childhood autism patients. We deal with the relation of these in another chapter.

We can talk about a comprehensive autism research along these complex analogy systems from genetics to psychology. Thought these are scientific analogies within which we can build up a complex research by the above mentioned etiologic, progressive diversification of disorder differences within pervasiveness; with the unique and independent discussion of each specificity.

I do not mention the contemporary pharmacology and our new opportunities since this will be topic of the rest of this tender material. Up to the present day the most accepted and most effective therapy is the cooperation of child psychiatry, clinical child psychology and the special education. There is not even a fully compensating therapy in existence as there is one with adulthood psychosis or psychopathy. Our test can help in this case.

The aim of this article and research is to develop such a biologic psychiatric therapy.

It is clear that complex developing therapy cannot be neglected later either applied our test probe.

Existing with autism is an existence without being sensible to nature. We are able to live without the concept of nature (Whitehead, 1920, pp. 14-19), but only in an outside nature of “our” superject: in nature.

As we have demonstrated the nature of subject: autism appears to be the subject’s superjective object.

Repeated my Thesis: To be interior in interactions or to be exterior in intraactions: how can we sense nature if we can’t even sense ourselves as objects? In this case we can be considered as autistic people and we must be living in a closed universe without “Nature”. We can express beauty of ourselves only if we can reflect to our mind, in itself. After this acting in process the World will be open for us.

It is possible.

Conclusions. Beauty is an acting in process of our mind opening from itself to ourselves, therefore the intraactive elements become interactive things. Ourselves reflected to our World is the “Eternal Other”: The Psychological source of Aesthetics is the Psychology of Whiteheadian “superject”.

We have analysed a Psychological model of “superject phenomenon”. The Psychology of Us and Others as Beauty of Mind, Mind of Beauty. A way of Psychologically based Aesthetics.

Conflict of Interest and other Ethics Statements

The author declare no conflict of interest.

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Лехель САЙМОН

ОБ'ЄКТ-СУБ'ЄКТ-СУПЕРПРОЕКТ: КРАСА РОЗУМУ

Анотація. Бути внутрішньо орієнтованим у взаємодії або бути зовнішньо орієнтованим у взаємодіях: як ми можемо відчутти природу, якщо ми навіть не можемо відчувати себе як об'єкти? У цьому випадку нас можна вважати аутичними людьми, і ми повинні жити в закритому всесвіті без «Природи». Ми можемо висловити красу самих себе, лише якщо зможемо відобразити її у своєму розумі, в собі. Після цього Світ для нас відкриється. Це можливо? Цей взаємний парадокс можна об'єктивно виміряти за допомогою нового тестового експерименту. Він представляє надоб'єкт над суб'єктом і об'єктом: справа в тому, «Хто» здатен відчувати красу, яка нас оточує. Спонтанність водночас є постійною і змінюваною: якщо ми можемо відтворити вайтхедівську універсальність процесу, бачачи себе

згори, тоді немає протиріччя між тим, що відбувається, і переживанням процесу. Філософія Уайтхеда могла б бути моделлю практики Ференца в інтерактивному взаємному психоаналізі, але гетеродоксальний психоаналіз міг би забезпечити практичне психологічне підґрунтя для теорії Уайтхеда. Краса – це дія в процесі відкриття нашого розуму від себе до нас самих, тому інтраактивні елементи стають інтерактивними речами. Ми самі, відображені в нашому Світі, є “Вічним Іншим”: Психологічне джерело естетики – це психологія Вайтхедівського “надоб’єкта”.

Ключові слова: емоційний аутизм, когнітивний аутизм, інтерактивний дефіцитний аутизм, збуджений аутизм, стереотипний аутизм

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SEARCH FOR BEAUTY AND VIVID VALUES IN THE EVERYDAY: VIRGINIA WOOLF AND PROCESS AESTHETICS

Abstract. This article explores the parallels between Virginia Woolf’s aestheticized account of reality in her fiction and Alfred North Whitehead’s process aesthetics that emphasizes the fact that any experience may be classified as aesthetic enjoyment of vivid values. While scholars often associate Woolf with the high modernist aesthetics and formalism, the writer was fascinated by the everyday and the lure of common objects that generate a strong emotional response on the part of the perceiving subject. Especially in her early short stories “The Mark on the Wall” and “Solid Objects”, the main characters manifest a childlike compulsion to explore surrounding objects and the need to penetrate “deeper, away from the surface, with its hard separate facts”. Similarly, in his philosophical system, Whitehead wants to go beyond what we already know about the external world and explore the inner organic relations behind the appearance of a thing, or in Woolf’s words the “pattern behind the cotton wool” of the everyday. In *Science and the Modern World* Whitehead argues that the problem of the modern civilization is the lack of art, experience, and value in the mundane and that it is the artist who should cultivate “the habits of aesthetic apprehension.” Woolf likewise rejects the dichotomy between art in its narrow sense and its broad sense, conceived as the aesthetic enjoyment of reality, and claims in her famous essay “Modern Fiction” that the subject of modern art can be anything and that fiction should translate artistically the impressions of “an ordinary mind on an ordinary day”.

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