

Therapeutic significance of aestheticisation of affect in the psychosomatics of personality development

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Abstract

Both in the physiotherapeutic practice and artistic activity-based therapy, apart from purely somatic disorders, we often encounter the impairment of mentalizing abilities. Patients cannot express their sensations, feelings, or affects. As evidenced by the psychoanalytical theory developed on the basis of a substantial clinical material, this can lead to psychosomatic disorders. Their treatment, involving activities and methods that help reinforce the patient's ability to aesthetically experience their own psychophysicality as a harmoniously connected unity, turns out to be extremely useful. It is thanks to art and aesthetic experiences that we gain access to these aspects of our psychophysical condition, which are unaccounted for by abstract analysis. Our aesthetic experience reveals mainly the unconscious and affective components of our life attitude. Moreover, these kinds of experiences allow us not only to recognize our psychosomatic conditions as well as problems that we experience, but also to effectively and somaesthetically work with them. The art-based therapy and artistic activities allow the harmonizing experience of unity of the emotional and physical with the intellectual and symbolic, and thus open up the opportunity to regain a deep sense of meaningfulness.

Key words: aesthetic experience, somaesthetics, body, psychoanalysis, affect, mentalization, symbol

Introduction

Let us assume the fundamental difference between a physiotherapeutic and psychoanalytic way of understanding bodily symptoms as a starting point in our considerations. The same physical symptom may lead to extremely different research frameworks. However, one should emphasize that despite their differences, some situations may require reference to both approaches in order to later ascertain which one results in therapeutic success.

For most physiotherapists, all somatic symptoms arise primarily owing to physical causes. The specific symptom must, therefore, subside and finally disappear together with the manifested disease as its naturally conditioning cause. In this way, these naturally established cause-effect relations reveal no symbolism, except for the organism's principles of biological functioning. A problem arises when under the surface of seemingly unambiguous symptoms we find no organic ground, no natural reasons for their occurrence. Then, the effect turns into affect. What we previously took as a mere consequence of certain physical disorders turns out to be a symbolic message encoded in the body.

Should such a critical situation occur, the patient's fate depends on the physiotherapist's proper response – how far will he or she be willing to go beyond the rigid framework of their profession? Given how easy it is to be tempted to routinely resort to already proven and tested methods and means, the ability to admit one's own helplessness in the face of 'well-known' symptoms requires a proper broadening of one's theoretical horizons. Of course, the point is not to turn a physiotherapist into a psychoanalyst but to open their eyes to

the idea that sometimes symptoms, seemingly requiring their intervention, really operate on rules that evade their professional expertise, which is based on purely corporeal determination. We are confronted, thus, with an increased activity of the unconscious that manifests its morbid patterns through body expressions. A physiotherapist capable of critical self-reflection will be much less prone to the risk of misdiagnosis and, if necessary, should be able to make a decision to radically redirect the therapeutic process by, for example, referring the patient to a psychoanalyst.

The treatment of psychosomatic disorders does not imply total replacement of the physiotherapist's office with the proverbial psychoanalyst's couch. On the contrary, it often turns out that the so-called therapy through speech is not enough and that the body should also be subjected to psychoanalysis and mental reconfiguration. The affective symptoms of mental disorders will not be effectively reworked without engaging the patient's bodily attitude and sensitivity. In some cases, the most optimal treatment involves close cooperation between a physiotherapist and psychoanalyst. Only their mutual consultation will enable a more accurate diagnosis and provide a more adequate selection of therapeutic strategies, in which the somatic and psychological will form a coherent whole. Otherwise, the physiotherapist and psychoanalyst mould the patient into two independent and non-matching psychophysical personalities, which, of course, should not be the case.

To a large extent, both the physiotherapist and psychoanalyst should confront the problem of correct mentalization; patients unable to express their sensations, feelings, and affects make up the majority of their office cases. We will dwell

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on the issue of mentalization later; for the time being, however, let us just remember that failed mentalization is the manifestation and cause of a growing split, and thus also an impairment of the body awareness, language skills, and the ability to think symbolically [1, 2].

The easiest and most effective way to restore the psychosomatic harmony is aesthetic experience. It provides the suffering subject with the opportunity to regain the mind-body integration. Hence, the following part of the article will deal with the essential role of art and aesthetic experience in the therapies that aim at restoring sensual, emotional, and intellectual balance. Particularly, occupational therapists who rely mainly on aesthetic and artistic activities possess the knowledge, based on their therapeutic experience, of how indispensable it is for the patient's health to treat them through the prism of their aesthetically harmonized mind-body unity.

Through art and aesthetic experiences, we gain access to those aspects of the psychophysical condition that evade abstract analysis. The aesthetic experience clearly reveals the unconscious, affective components of our life attitude. Moreover, these kinds of experiences allow us not only to recognize our psychosomatic illnesses and problems, but also to effectively and somaesthetically rework them. The art-based therapy and artistic activities enable the harmonious reliving of the emotional and physical with the intellectual and symbolic – providing the opportunity to regain the deep sense of meaningfulness [3].

Mirroring and mentalizing affect – the symbolic nature of body

An individual's proper psychosomatic development requires mirroring of their body behaviour in the sensual reactions of the closest ones. 'Mirroring' means that the important figures from the growing individual's surrounding help them understand the meaning of their own affects and feelings. Naturally, from the very beginning of our lives, parents usually constitute the important 'Others' by teaching us how to interpret the all-encompassing sensations. For example, when a child is always fed in response to its crying, its previously unspecified discomfort turns into a recognizable and expressible feeling of hunger. It is the unambiguous reaction of the caregiver that provides the unifying meaning to these otherwise disturbing impressions.

While describing his mechanism of the primordial understanding of his own emotions and feelings, Jacques Lacan emphasized its retroactive character and the fact that the meanings of these experiences were created retrospectively and mainly owing to the 'great Others.' Even assuming that natural factors also determine the content of our affects – not only their cultural and symbolic weight, as Lacan saw it – it is difficult to deny the fact that this retroactive determinism exerts a great impact on what we understand as our own emotions and feelings. That is why it is so important for the functioning of the future 'Self' whether their mirroring caregivers adequately interpret their body behaviour. Otherwise, when discrepancies between the two sides preserve, the resulting series of unsuccessful attempts at establishing contact may contribute to a drastic deterioration in the child as well as, to a certain extent, in the caregiver in the ability to feel and understand oneself.

Very intense communication takes place between parents and their child long before it acquires appropriate language competences. In the formulation of Shai and Fonagy [4], this 'Parental Embodied Mentalizing (PEM) refers to the

parental capacity to (1) implicitly, and not necessarily consciously, conceive, comprehend, and extrapolate the infant's mental states (such as wishes, desires, or preferences) from the infant's whole body kinaesthetic expressions, and changes in the body movement and posture and (2) adjust their own kinaesthetic patterns accordingly. Importantly, and reflecting a relational perspective, the parental kinaesthetic behaviours are not considered in isolation, but always in reference to those of the infant' (p. 193).

Without these sensual, often unaware, suggestions, hints, and reactions to reciprocal interactions, we would never be sure of our feelings or able to define them. This defining or co-defining of our experiences and expressions by 'Others' makes it possible to mentalize those incomprehensible and therefore traumatizing and alienating experiences occurring within our bodies.

The need to mirror is so primordial and overwhelming that it is successfully satisfied even without reflecting looks and is beyond the immediate closeness of touch. In the 'Primary Intersubjectivity' video by Colwyn Trevarthen, a psychobiologist, we can see how a mother and her baby mirror each other despite the lack of visual and tactile contact between them. 'Instead the intonation of the mother's singing voice is reflected in the movements of the baby's arms. The baby's arm movements are exactly attuned to the mother's voice. The baby's arm movements, like those of a conductor, vibrate with the music and the pulse is shared' [5, p. 34]. Maurice Merleau-Ponty mentions infants who have been observed, only 42 minutes after their birth, to imitate 'Others' by poking out their tongue, even though, strictly speaking, the baby does not know where its tongue is relative to its body (it has no awareness of its own body, no body image). And, yet, it has everything it needs to properly express and act, and consequently experience the body of the 'Other.' It finally finds a way to itself, its tongue – a physical organ, and, as a result, to the symbolic language and ability to speak. As Merleau-Ponty would say, 'the infant at first lives and feels in the facial and bodily gestures of the other' [6, p. 133].

The formulation of a separate 'Self' is accomplished by integrating the bodily experience in symbolic and metaphorical thinking. If a child is not mirrored by the caregiver owing to their indifference (e.g. mother in postpartum depression) or receives a contradictory feedback ('Are you cold? Really? But everyone here feels hot'), it will not be able to make a sensible whole of its affects. Consequently, it will experience problems with 'inventing' or designing itself into a coherent identity.

What is more, all unintegrated affects not controlled by clearly defined meanings and words will become stronger over time, leading to destructive and self-destructive behaviours. Their destructive power will be turned to the body itself as a directly perceived cause of the fear-evoking confusion.

An unmentalized affect, which finds no outlet in words, can change the body into an involuntary tool of metaphorical expression. We observe this when patients' symptoms manifest unexpectedly without any particular physical reasons – they appear as if they are trying to speak for us.

Psychoanalysis drew its first inspirations from the discovery of the bodily symbolism. Freud's change in the approach to the aetiology of neurosis was caused, among many others, by one patient, a young lady, poet, who, because of her inclination for symbolic expression, led him into the discovery of non-neurological, mental reasons for her condition. To the surprise of the researcher, the patient's body, unresponsive to classical, typically medical physiotherapy, acted like a kind of sensual screen displaying the messages of the unconscious, in which the content repressed by conscious-

ness resurfaced in the form of somatic symptoms – metaphors. The neurotic patient also complained, among other symptoms, about a penetrating pain in her foot. As in other cases, Freud could not determine any physical causes of the condition. Only a detailed reconstruction of the circumstances in which the pain appeared revealed that it started when the woman was entering the dining room in an exclusive sanatorium for the first time. She felt insecure because of her lower social position and so at the sight of all the elegant guests she began to limp. As if confused, she felt ‘unequal’ with respect to them.

This and a number of other cases of hysterical conversions described by Freud prove the evident impact of symbolic thinking on body; seemingly abstract ideas can clearly change and transform somatic impressions and functions. There can be no absolute separation of the mental from the physical.

This is how psychoanalysis began and why it is still developing the so-called therapy through speech – quite often taking the form of a conversation with a body in ‘telling’ pain. Telling, even through silence, when aphasia results not from physical reasons but from psychological ones, when the individual has completely lost the sense of meaning and, hence, the need to communicate.

Generally, when body is controlled by non-meaningful affects, the task of the psychotherapist is to help the patient effectively articulate them. It is important to note that it requires speaking out loud, not just silent mental verbalisations. The body should fully experience the spoken content, relate to it with its every fibre and movement to accept the symbolic meanings as its own truth: the word must become flesh. It is also crucial that mentalization of the affect be supported by the affirmation of the ‘Other.’ Only after the mirrored confirmation can the disturbing symptom transform into a symbolically recognized meaning, freeing the body from the too burdening role of a stuttering ‘ventriloquist.’

We are particularly vulnerable to confusion during our adolescence as we are impacted by symbolically undefined affects. At this stage, an adolescent is exposed to a difficult puzzle of reconciling completely contradictory ways of experiencing their psychophysicality. Not so long ago, this individual emerged in the sensual environment experiencing their existence as an uncoordinated, vibrating ‘body-in-pieces’ with very limited efficiency, doomed to the mercy of ‘Others.’ Only in the ‘mirror phase,’ as indicated by Jacques Lacan, more or less between the age of three and five, a fascination awakens in a child – fascination with the ideal of an all-powerful, autonomous body – suggested to it by the social environment. This ideal helps the child get out of the unusually long period of dependency in life. Every animal other than human quickly learns how to stand on their own feet, literally and metaphorically. Modern culture extends the period of childhood helplessness even more. All this results in the creation of a complicated system of the inter-subjective, and more precisely, inter-bodily-subjective relations that we call society.

The child learns to experience itself as a bodily-grounded independence and self-control with the establishment of traumatic boundaries of its body through repulsion – ‘re-jecting’ everything that is not me but a distinct ‘sub-ject’ (Julia Kristeva), as well as with the transition through the ‘mirror phase’ (Jacques Lacan) and the positive solution of the Oedipus complex (Sigmund Freud), when the psychophysical separation from the mother’s body and following in father’s footsteps symbolize the laws and prohibitions applicable in a given culture.

However, while in puberty, the triumphal sense of one’s own bodily unity collides with the sudden and powerful eruption of sexual excitement. ‘Strange’ and amazing impressions tend to confuse an individual, who fails to understand and rationally explain them, questioning, at the same time, the strength and authenticity of their identity. Sometimes this sensual horror bears resemblance to an ‘horror film’; teenage patients often declare that they feel as if they have been victims of ‘body snatchers.’ Such a young person does not know what real reality is: a bodily-suggested and frequently confirmed substantiveness and omnipotence, or maybe the de-fragmented ‘body-in-pieces’ experienced in the moments of crisis, giving rise to a false, disassembled personality, impossible to integrate?

The only way to overcome the impasse is to possess clearly formulated knowledge on this subject matter. The question is – where to look for its sources, and where to find a mentor?

Ideally, parents and schools should spread the healing knowledge. Unfortunately, sexual education classes at school are still a pretext for ideological abuse rather than an opportunity to support one’s healthy psychophysical development. Parents also fail – seduced by the myth of self-creation, devoted to pursuing their careers. The children left behind are relatively quick to find other educators. Today, the virtual world provides them with the whole range of idols, patient advisors, and comforters.

Aestheticization of affects: virtually alienated pseudo-body and the realistically embodying experiencing of art

The anxiety caused by psychosomatic perturbations of adolescence makes many teenagers escape reality; the natural world of sensual perception seems unbearable to them. The feeling of bizarre alienation within the body and disturbing affects encourage them to seek refuge in a disembodied cyberspace, where the embarrassing physicality and ‘suspicious’ history of one’s own body get repressed.

‘Cyberspace defies the history, the transience, and indeed the very physicality of the body. Virtual space can be used to effectively suspend the history of the subject, and hence the link to the anchor of the past is eroded, especially as it is recorded in the body. Multiple identities can be adopted and discarded at will. We have, effectively, the creation of what Raulot [...] has referred to as “floating identities.” This could conceivably have some constructive uses if more positive experience of a “new” self in cyberspace can be integrated with life “offline” [...]. But where this kind of integration is not possible, the potential for pathological splitting is considerable’ [7, p. 59–60].

The participants in cyberspace easily achieve their bodily ideal by creating avatars, which they then with impunity and premeditation offer ‘Others’ as a false image of themselves. They gain free access to everyone effortlessly by clicking an appropriate icon. They choose the person they are interested in, determine the time of access (at the end of the day you can always log out), and manipulate their own ‘Others’ more than it would be possible in the real, e.g. by enlarging or reducing the screen character, however maintaining their unavailability at the same time. The ‘Other’ becomes a narcissistic supplement; it is like a mother fulfilling their every whim. And just like an overprotective mother, the virtual environment intensifies and deepens the perverse lack of restraint or psychopathic aversion to any subordination. Growing at an alarming rate, the number of people who cannot cope

with the harsh fabric of the 'real' is closely related to the intense and prolonged stay in the virtual space-time. The delayed returns from the digital world conclude in a painful fall on the hard ground of the real life. As a result, a discouraged individual gets into a vicious circle – every time they try to escape reality, they come back to it experiencing more and more powerful alienation in it. Facing the choice between the real identity (full of cracks and tensions, requiring a lot of flexibility and sometimes, quite opposite, stiffness and hardness) and the virtual identity (smoothly tailored according to capricious whims, closely fitting the imagined 'Self'), the cybernaut will choose the latter one, seemingly simpler. It seems that only digitally induced atrophy of common sense allows one to believe in the possibility of complete isolation from the world of 'dirty' matter, unsterilized through digital processing.

'When we compulsively manipulate our embodied experience, and hence the representation of our bodies in our minds, say via virtual technologies, or by modifying the surface of our bodies via cosmetic surgery or tattoos [...], we are searching for more or less adaptive ways of managing the otherness inscribed in our bodies' [8, p. 22].

In her recent book, Lemma [8] reports a story of Jane, a teenage patient who insistently demanded a surgical change of sex. In a nutshell – Lemma's psychoanalytic intervention saved the emotionally confused girl from the surgical knife. The idea of changing sex was suggested to Jane by the online media. Overwhelmed by the signals of her body going through the revolution of sexual maturation and confused by various blogs and forums, she concluded that her somatic anxiety stemmed from a sexual dilemma – her biological sex did not correspond to her deep, sometimes unaware, self-identity. The Internet provided her with an instant 'mirroring' – ready to use, superficial, and therefore very harmful identification. Consequently, the insecure girl felt a fundamentally untrue, though overwhelming, desire to become a man.

In this case, in order to find the right solution it was just enough to adequately mirror Jane's affects. Through carefully conducted analysis, as well as insightful and attentive psychophysical mirroring of Jane's emotions, Lemma made her patient understand that the feeling of strength, sufficient to successfully turn the temporary perturbations of adolescence into her own future development, was all she needed. At the time of admission to the therapy, Jane was functioning in the online community as a man, using a male nickname and male avatar. Upon finishing her therapy, she gave up the false masculine identity and began presenting herself as a decisive, confident young woman, proudly displaying her graphic avatar of a young and athletic girl with a fit body. Thus, thanks to the in-depth mentalization and aesthetical physical mirroring of the patient's body signals and behaviour by the therapist, the adolescent personality found its way out of the physiological, hormonal stage of storm and stress onto the path of psychophysical development that involves attributing affects with appropriate symbolic meanings.

When we want to recognize our affective feelings and express them in the form of emotions, 'we can do so only with the words that are at our disposal, which are the Other's words – that is, those of a preexisting discourse. When a vague malaise is named, relief always ensues. It must be emphasized that without the Other (as language or discourse), we would not know what we are feeling. Perhaps we must go further still: discourse, in naming affects, manufactures them and isolates them in the obscure mist of lived experience. It does so first of all by linking them to representations of body images, creating a whole set of gestures that allow us to say,

for example, "I'm all choked up" or "I have a lump in my throat," thereby signifying what is unrepresentable. And hasn't it been said that no one would ever fall in love if they had not heard people speak about love?' [9, p. 5–6].

As contemporary neurological researchers of the human nature put it, the mind does not work as a fully self-sufficient brain – like in the famous brain-in-a-vat idea, where the brain itself, without mediating body, creates a complete illusion of reality as a result of direct mechanical and electrical stimulation.

'Evan Thompson [...] provides a nice analogy. Saying that cognition is just in the brain is like saying that flight is inside the wings of a bird. Just as flight doesn't exist if there is only a wing, without the rest of the bird, and without an atmosphere to support the process, and without the precise mode of organism–environment coupling to make it possible (indeed, who would disagree with this?), so cognition doesn't exist if there is just a brain without bodily and worldly factors. "The mind is relational. It's a way of being in relation to the world"' [10, p. 12].

Theorists of the recently dynamically developing idea of enactivism, such as Francisco Varela, Daniel D. Hutto, Erik Myin, or Shaun Gallagher, inspired by the latest discoveries in neurobiology and some aspects of the philosophy of body and aesthetics, convincingly demonstrate the need for a holistic interpretation of the 'body-mind' or, for better balance, 'mind-body' relation. The need becomes especially urgent when we are dealing with the pathological inability to understand oneself and empathically interpret the behaviour of other people. One of the main reasons for this mental and social crisis is that 'the body as a locus of sensory-aesthetic appreciation (aesthesis) and creative self-fashioning fails us more and more often' [11, p. 27].

The necessary condition for the psychology of personal development is intersubjective, intercorporeal mirroring with those important ones from our surrounding: we must mirror ourselves in the otherness of the 'Others,' in their supporting recognition. Their sometimes unfamiliar reality strengthens the feeling of one's identity more than narcissistic recognition by 'Others' like us. We learn more about the similarities that connect us as they become more visible when contrasted with the overwhelmingly perceived differences. Intersubjectively speaking, we transform practically all our lives, re-creating ourselves in relation to various idols. Adolescence is just an extremely intense stage of this ongoing self-creation, enlivened by the providential and encouraging looks of 'Others.'

Originally occupied by parents, the place of the 'Other' can be successfully taken by a psychotherapist. But a work of art may also appear in it as in the aesthetic experience we relive the sensitivity of the 'Other,' connect with the artist's unconscious intimacy embodied in the art piece – their fascinating otherness.

In the aesthetic experience, we relive the otherness of the 'Other.' The otherness of the creator, however, does not stand in the way to achieving satisfaction, but rather constitutes its essential source. 'Becoming one,' we not only experience the meanings with which we willingly identify, but thanks to the artistic expression of the 'Other,' we recognize in their creativity the meanings of all those affects, incomprehensible and traumatic to us, that pose threat to our identity. In this way, we aesthetically tame alienation without destroying otherness, but benefiting from it.

Mentalized body experiences mirrored in 'Others' stimulate the development of a coherent sense of one's own identity. In this sense, art, harmoniously combining bodily affect and symbolic meaning, works just like a caregiver, in which

the child mirrors its expressions. Art allows us to put a name to all those otherwise unmeaningful experiences.

The effectiveness of the aesthetic experience and artistic creativity in the process of mentalization is determined by their ability to evoke in their subject the finely tuned 'mind and body' penetrating stirs, in which one's emotions, feelings, and intelligent reflection are recognized as deeply related to one another. This transforms a contemplative or creative individual into a coherent but flexible self-awareness of 'flesh and blood.'

Cognitive capabilities of art and aesthetics have recently been contrasted visibly with the progressive virtualization of natural body and real sensuality. As opposed to the innate 'analog' body sensations, more and more intense reliving oneself in artificial cyberspace in a phantom pseudo-body introduces the subject into false ecstasy – unlike in the face of aesthetically valuable art, in which the intimate experience of the 'Other' always resists narcissistic projections.

The aforementioned case of a teenager Jane, treated by Lemma, illustrates the danger of the virtualization of body – it confuses an individual, who, uncertain of their identity, attempts to mirror in identifiable templates fed to them generously by the media. The sense of bodily alienation, anxiety associated with the so-called *borderline* and any psychosomatic disorders, present not only in adolescence, if not mirrored in real conditions by real 'Others,' but through medially flattened images of alter-ego, can lead the confused 'Self' astray into psychotic, defensive self-identifications.

Such narcissistic traps vanish in the face of a full-blooded, authentic aesthetic experience. In order to fully experience the psychophysical nature of a work of art, one must open up to what has been expressed in it by the 'Other,' to the sensuality that is a challenge to our psychosomatic schematism. The image and schemata of our body, thus, have the opportunity for unique confrontation and, consequently, a developing transformation. We are dealing here with a profound change resulting in amazing experiences, unprecedented or persistent on the periphery of our self-awareness, without disturbing the core of our personality. Carried away by the rhythm and picturesque nature of the Shakespearean phrase, the reader, though usually self-controlled and confident, relives with Othello their all-encompassing untamed jealousy, unbearable torment. Someone, on the other hand, inclined to quiet and careful reverie, recruited by the orchestra of Beethoven's third symphony, feels their breasts bursting with almost a frenzy of courage and lust for action and becomes as heroic as Bonaparte himself, to whom 'Eroica' was dedicated.

The art's gesticularity, its somatic character is manifested not only in the form of theatrical artistry on theatre stages or in film scenes where various characters are embodied 'as living.' Art, regardless of its type, involves expressing its creator's psychophysical awareness and unawareness alike. Aesthetic experience is a way to experience the world through the prism of the body image and schemata inscribed by the artist in the art work's sensual aura, be it a piece of music, painting, or literature. For this reason, the contemplation of artistic creativity is a sensual encounter with 'Others' and a perfect opportunity for further mentalization and to mirror one's own psychophysicality.

The quasi-aesthetic experience, sterilized and dematerialized by digital media, has a completely different course. For an individual absorbed in the virtual reality, the real time seems to stop and real people cease to exist. The objects of one's desires and drives are now within one click's reach. Any attempts to break one out of this state may trigger extreme

aggression. Thus, virtual reality drastically cripples the understanding and feeling of one's own intimacy and that of 'Others.' When an affect of the real body is not mirrored, the virtual pseudo-body suggests the confused individual a false 'mirror,' leading to a dangerous falsification of identity.

Left to itself only, the body will take its revenge on the haughty reason sooner or later, depriving it of its ability to directly recognize reality. In the first half of the 19th century, Friedrich Schiller warned against disregarding sensuality. He, himself, largely responsible for the exalted idealism raging among his contemporaries, stood up for the neglected, humiliated body in his letters 'On the Aesthetic Education of Man.' According to his vision of man declared there, in opposition to extreme rationalists, the body is not at all a 'prison for the soul,' but the only and irreplaceable source of real contact with reality. Following the ancient Greeks, we should mainly care for the harmonious unity of our psychosomatic existence. The very term 'aesthetics,' the Greek *aisthesis*, includes the concept of sensual sensitivity, bodily ability to acquire knowledge about itself and the world around us.

Therapy based on aesthetic experience in practice proves that symbolism and affectivity can be subject to mutual regulation. The thought, somatically unstable and affectionally unconfirmed, will never be fully convincing. On the other hand, affects demonstrate great flexibility; their plasticity allows assigning various contents, the point being not to let these two complementary dimensions of this sensitive and intelligent existence be separated. Especially now, with the growing pressure of virtualization and cybernetization of the human environment, the subject loosens up, then tangles and finally breaks the psychosomatic ties between himself, the world, and its co-feeling inhabitants. For this reason, experiencing and practicing art are indispensable elements of the treatment aimed at the re-embodiment of a humane man, full of sympathy and empathy, intelligently reacting to the sensual suggestion of his intuition. In aesthetics, *aisthesis* is the strongest thread: from a thoughtfully sensual self-consciousness and from its harmonious alignment, lofty ideas, beautiful deeds, and the happiness of unselfish well-being emerge.

Ethical approval

The conducted research is not related to either human or animal use.

Disclosure statement

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Conflict of interest

The authors state no conflict of interest.

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