

SYMPTOMATIC ARCHITECTURES. SPATIAL ASPECTS OF DIGITAL EXPERIENCE.

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The research attempts to introduce a series of conceptual analogies that describe the spatial qualities of cyberspace through the mental state of its users. This happens through the introduction of some altered kinds of architectures; some architectonic scenarios that are referred as 'symptomatic' architectures, since they are discovered through a process of diagnosis of the mental and psychological experiences of the internet user.

Call It Space

When, in the course of a digital era, the term 'cyberspace' is infiltrated through continuous technological scenarios, space is no longer seen as the mere background of events. It becomes the foreground of every single human experience of ubiquitous digitality – an aspect of 'life processing' mechanism inherent in each computer generated/mediated environment.

Space, not in its physicality – materiality is attempted to be traversed – but in its contingent aspects of its abstract forms; call it imaginary – call it mental – call it digital – call it space born out of noetic ingredients mixed together in a synthetic recipe of personal, electronic experience; experiential referents of oneself's head-on collisions with cyberspatial promises – or premises – born out of contemporary reality.

And then, experience is binary distilled, imagination blown up and space germinated. Spatial sprouting is taking place in the totality of personal mental functions, in the unnamable morphing of thoughts, actions and translations. All amalgamated into the digital environment as multiple shades of sole inhabitations; inhabitations of divergent personas, disordered players, inertially echoic avatars and telepresent 'switch-on switch-off' lives.

Symptoms Elicited

These situations, these parts-of-the-whole, as bi(y)t(e)s of information, either code generated or humanely derivative, constitute the symptoms of digital experience. Symptoms to be felt, lived and catapulted into the process of intimate space translation.

Spatial experience is a symptom – what is given to the 'observer,' what is manifested and constituted as an essential phenomenon. Its principles are not ones of sovereignty and termination, since its nature refers to the single, but not absolute, formation of a disorder abstract. Symptom is a piece of an incomplete pathology, an unfulfilled actualization of a solid state. It constitutes an inseparable relationship, "a primary stratum of the indissociably signifier and signified." [1] This connection between 'symptom and disorder,' as the diptych 'experience and digital space,' indicates the signaling and translation of what exists, but not the absolute depiction. Digital experience is like a symptom, a mental phenomenon outlining a kind of space which will become uniquely personal and noetically invented.

Improvising Pathologies

Digital space evokes fragmentation and fluidity, thus, fragments constitute the compositional elements of contemporary, cyberspatial endeavor. Mental qualities become the playground field of digital experience, due to the challenging immateriality of space. Therefore, space is correspondingly constructed parallel to the composition of individual mental states – states altered, distorted, and inspiringly disrupted, as if parts of a dis-incriminated pathology.

Thus, the symptom is not the pathology itself, in the same way that “the map is not the territory.” [2] Symptom is a form of mental representation of an event, a phenomenon inherent in a unique spatial narrative. Only a set of symptoms can potentially constitute a disorder, therefore digital experience can be regarded as a natural and dynamic, mental state.

CorpoRealize

Each symptomatic indicator is a signifying spatial phenomenon. It is enticed by multiple scenarios, brought to life, and then, is manifested as a phenomenon waiting to be ‘realized.’ But every symptom is a form of space realization, which in terms of digital immateriality can become the corpus of the disembodied mind; or the notion of the absent body that is re-present-ed through this altered state of consciousness. “In every symptom, there is, so to speak, the whisper of a direction, the hint of a path;” [3] this ‘direction driven’ report composes a kind of diagnostic awareness, that discloses a mentally constructed space; a fragmented, and rather demystified, space – a symptomatic architecture.

Dis + Sociare

The digital observer must invent a new, altered diagnostic tool [4] – a handbook of the mental, symptom-like, digital phenomena. Symptoms are juxtaposed to self scenarios in digital environments, both filtered through spatiality issues and architectural derivatives.

The most complex and multifaceted view of dissociation refers to the act of separating, breaking, disuniting or decomposing; or put simply, the act of removing from association. Digital inhabitation is direct referent of identity formation or role-playing conditions. A bunch of dislocated selves are invented and acted out, transferring characteristics of, both existent and non-existent, personalities. Dissociative space is generated and thus, it is considered on the basis of experience that includes alterations, disruptions or, sometimes, mutations and breakdowns of the individual’s structures concerning memory, perception or consciousness.

This space is discontinuous and divergent – all of these qualities placed as experiential composites of what can be described as an “ocean of leaky selves.” [5] Contrary to the deviant sense of ‘leakage’ and the diffusing quality of the ‘ocean,’ contemporary identity proves a surprisingly congruous outline; all these inconsistencies of self decentralizations and role constructions can formulate the delineation of its whole image, a portrait made of a plethora of selves merged into one and sole (id)entity.

Verge on

Digital encounters include liminality; and liminal encounters include a decision of transference or an unconscious act. Personal sense of flow is sometimes affected by disruptions of perception, that verge on the limits of differentiated states. A whole new space full of inertial qualities is constructed and then, is offered for inhabitation and interaction; a space that lies between two states of consciousness or two ways of existence. Inhabiting a threshold is an essential element of digital experience; a threshold as a bipolar mechanism – one that leaves the biological body behind, while moving towards an immaterial digital environment, or one of departure, while ‘logging out’ towards the physical world. In both ends, experiential fragments are transferred and a threshold mechanism is manifested in the two directions. Inertia acts as a spatial metaphor, and outlines issues of resistant, direction-shifted and perpetually fluctuating space.

Echopraxia

Digital space does not have a shadow, but digital actions do. For every digital event there is the respective cyberspatial echo born out of the individual’s, volitional or not, act; an act, like an echoic ‘praxis,’ resembling the ideo-verbal, psychotic symptom of ‘echopraxia.’ [6] This kind of continuously constructed echoic space consists of all the cybernetic material that constitutes what is called ‘digital shadow’ or ‘footprint’ – the totality of information that is produced and stored in digital space.

Every user is estimated to produce a unique ‘history,’ namely incredible amounts of informational shadow by every single movement in cyberspace. This shadow, just like a kind of electronic dust, gathers up and follows oneself, resembling a ‘hypermnesia disordered’ state – an extended and unusual aggregation of mental elements. An unconscious sum of mental constructions which, combined with the conscious ones (dissociated spaces, de-centered and multi-personal environments, liminal spaces with inertial qualities), brings one back to the importance of the invented self scenarios as spatial mechanisms. Since space is experienced through the individual’s mental phenomena, symptomatic architecture is the erection of structures that either interpret or, conversely, provoke new self scenarios.

Tell the Tale

“One describes a tale best by telling the tale.” [7] If symptomatic architecture is considered as a dynamic diagnostic process of the multiple digital scenarios being experienced, then it can consist of a mixture of observations, evaluations and interpretations that give a hint about space – both as narrative and narrator. It is not the accuracy or solidity of a set of qualities that best describes digital space but the process of ‘telling the story’ – of representing personal experience through symptomatic architectures that tell a tale – one without a nameable ending.

References and Notes:

1. Michel Foucault, *The Birth of the Clinic*, trans. A.M. Sheridan (London: Routledge, 2003), 111.
2. Alfred Korzybski, *Science and Sanity: An Introduction to Non-aristotelean Systems and General Semantics* (Forth Worth, TX: Institute of General Semantics, 1995), 58.
3. Robert Romanyshyn, *Technology as Symptom and Dream* (London: Routledge, 1989), 13.
4. Correspondent to the manual of mental disorders of American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders DSM-IV-TR* (Arlington, VA: American Psychiatric Publishing, Inc., 2000).
5. Margaret Wertheim, *The Pearly Gates of Cyberspace: A History of Space from Dante to the Internet* (New York: W. W. Norton and Co., 1999), 249.
6. *Echopraxia: Repetition/imitation of the movements of others.*
7. Neil Gaiman, *Fragile Things* (New York: Harper, 2010), xix.