

AMNESIA IN *BEFORE I GO TO SLEEP* NOVEL BY S. J. WATSON

**Wildan Baihaqi Yusuf At Taba'**

English Department  
Universitas 17 Agustus 1945 Surabaya  
danbaihaqiysf@gmail.com

**Anik Cahyaning Rahayu**

English Department  
Universitas 17 Agustus 1945 Surabaya  
anikcahyaning@untag-sby.ac.id

**ABSTRACT**

This study explores the symptoms, causes, and impacts of Christine Lucas's amnesia as depicted in *Before I Go to Sleep* novel by S. J. Watson, using a psychological approach and descriptive qualitative method. Employing Rajesh Kumar's theory of amnesia, the study focuses on amnesia linked to psychological problems. Christine exhibits four key symptoms: anterograde symptom, where she cannot form new memories and wakes up daily with no recollection of recent events; retrograde symptom, where she forgets her adult life and retains only childhood memories; confabulation symptom, where she fills memory gaps with imagined or false memories; and disorientation symptom, where she is confused about her identity and surroundings each morning. Her condition results from head injuries and oxygen deprivation caused by a violent assault and subsequent coma. The impacts of her amnesia are profound, including a loss of identity, as she struggles with her roles as a wife and mother; strained relationships, culminating in her husband divorcing her despite his love; and difficulty distinguishing between reality and fantasy, particularly during episodes of confabulation. The findings highlight how Christine's memory loss fundamentally shapes her life and identity, underscoring the deep psychological and relational consequences of her condition.

**Keywords:** *amnesia, symptoms, loss of identity, disorientation, head injuries.*

**A. INTRODUCTION**

Imagine a woman who wakes up one morning and she has no idea who she is. She does not know her name, her age, her family, all gone. For example she still can recognize her friends for instance but she cannot remember their names. This uncomfortable feeling is called amnesia, a condition where memories become elusive, and the past feels like a puzzle with missing pieces. Amnesia is defined as the loss of long-term memory brought on by illness, physical trauma, or psychological stress (Spielman et al., 2020).

Amnesia can affect memory loss in different ways. Sometimes, people might only forget things that happened recently. Other times, they might lose big chunks of their life's memories. Some types of amnesia might go away, but others can last a long time or even be permanent. Amnesia is inability to remember

certain information or events. It often results of head injuries, which can lead to significant memory loss. According to Kumar et al. (2013), amnesia is a significant memory loss usually caused by a brain injury or exposure to a toxic substance that harms the brain. Amnesia sufferers have a severe inability to recall past experiences and previously learnt information, and they may also have trouble making new memories and picking up new abilities.

Amnesia does not happen in real life only, but also appears in literary works, because literary works is the creative works that picture the human life. According to (Meyer, 2018) literature allows the readers, to connect with the minds and hearts of people from different eras and backgrounds. It means that literature has always been our reflection especially human life. It shows us characters and stories that feel so real, like they could be our friends or family. Authors use these stories to explore the ups and downs of being human, from the tough choices we face to the big emotions we feel. By reading these stories, we can see ourselves in the characters and understand the things that make us tick.

Amnesia in literature often uses as a way to explore themes like identity, memory and the weakness of human mind. Unlike the clinical definition, which focuses on the medical aspects of memory loss, amnesia in literature is often portrays human emotion, personal experiences, and questions about life. In accordance with (Tougaw, 2021), amnesia is often portrayed as global transient amnesia, where a person temporarily loses all memory. It is commonly used as a clichéd plot device in literature, film, and television, exaggerating and dramatizing severe memory loss. Amnesia then often becomes the theme of literary works. One of the novels which tells us about a character who suffers from amnesia is *Before I go to sleep* by Steve John Watson.

Amnesia can be seen in Christine Lucas as the main character in the novel. Christine suffers from amnesia and loses her memory every time while sleeping. Each morning, she wakes up without knowing her past or her identity, and she relies on Ben, her fake husband. With the support of a doctor experienced in amnesia, her memory loss turns into a tool for discovering the truths of her past and her relationship as she starts writing and keeping a journal to record her thoughts and memories and how she deals with her amnesia. This research mainly talks about Christine's amnesia throughout the novel. The problem focuses on the symptoms of Christine's amnesia, the cause of her amnesia, and the impact of her amnesia on her life.

## **B. METHODS**

This researcher uses descriptive qualitative method which aims to answer the statement of the problem. According to (Leavy, 2017) Qualitative research involves gathering, analysing, and interpreting detailed narrative and visual data to understand a specific phenomenon more deeply. In this study the researcher also uses psychological approach because amnesia relates to psychological problem. As (Coon & Mitterere, 2021) stated that psychology explore human social behaviour such as reasoning, problem solving, memory, attitudes, conformity, friendship, and any other mental processes relate to human behaviour. This approach aims to understand and explain human behaviour, memory,

cognition, emotion and development through the analysis of literary works. The psychological approach helps in understanding human condition through literary works with detailed research.

#### **Data Source**

The main data are taken from the novel *Before I go to sleep*. The novel was written by S. J. Watson and it has 368 pages as data source. The data are in form of words, phrase, sentences or group of sentences which relate to the topic of analysis, Christine's amnesia, and which are taken from the novel.

### **C. THEORETICAL REVIEW**

#### **1. Concept of Amnesia**

Amnesia is a memory disorder that makes it difficult to remember the past or create new memories. Numerous things, including neurological disorders, stroke, brain injury, and some drugs, can cause to it. According to (Kumar et al., 2013) amnesia is a significant memory loss usually caused by a brain injury or exposure to a toxic substance that harms the brain. Furthermore, memory loss may be brought on by an emotional or stressful experience, shock, disease, or occasionally anaesthesia. While some amnesiacs are moderate and perhaps reversible, others are severe and irreversible. The way and which area of the brain is impacted and injured determine how severe the amnesia is. Both men and women can be impacted. At any age, it can happen.

#### **2. Symptoms of Amnesia**

(Kumar et al., 2013) stated that there are 2 common symptoms of amnesia which appears:

##### **a. Retrograde Symptom**

People with Retrograde Symptom can't remember events from their past, like childhood memories or recent experiences. It is as if a part of their life has been erased. This symptom of amnesia often occurs after a traumatic event like a car accident or a severe head injury. Head injuries can harm brain regions, particularly those associated with episodic memory, such as the hippocampus and the middle temporal lobes, which store memories and render them unavailable. It is like losing a valuable book that one can't replace. While they might struggle with the past, people with retrograde amnesia can still form new memories and learn new things. It is like starting a new chapter in their life, even though they might feel disconnected from the chapters that came before.

##### **b. Anterograde Symptom**

Someone who suffers from Anterograde symptom, struggle to create and hold onto new memories, even simple ones like what they had for breakfast or who they saw earlier in the day. The symptoms often results from damage to parts of the brain like the hippocampus, fornix, or mammillary bodies, which are crucial for forming and storing new memories. It's like having a faulty camera that can't capture new images. While they might have trouble remembering the present, people with anterograde amnesia can often recall events from their past clearly.

Their long-term memories are intact, but their short-term memory is impaired.

Apart from 2 symptoms that are explained before as the commonly symptoms, there is another symptom of amnesia that appears in human behaviour includes:

**a. Confabulation or False Memories**

False memories can be either completely fake or based on real memories that have been misremembered or misplaced in time. This latter phenomenon is known as confabulation, which is a symptom of certain memory disorders. In confabulation, individuals create imaginary stories to fill in gaps in their memory.

**b. Neurological Problems**

It involves problems with the neurological system, which affects our senses, thoughts, and movements. Uncoordinated movements, tremors, or seizures are examples of neurological disorders.

**c. Confusion or Disorientation**

Someone who is disoriented or confused might feel lost or unsure of themselves. They may not know where they are, who they are, or even what day it is. It is like feeling like you're in a fog and can't see clearly.

**3. Causes of Amnesia**

The primary cause of amnesia is brain damage, either from physical trauma or exposure to toxic substances that impact the brain. In addition to head injuries being a primary cause of amnesia, Kumar et al. (2013) identify other contributing factors, including:

**a. Degenerative Brain**

For example Alzheimer and Dementia can cause amnesia by progressively damaging the brain regions responsible for memory, cognition, and information processing. The brain's capacity to store, retrieve, and create new memories is hampered by several disorders, which cause the progressive death of brain cells (neurones) and the disintegration of synaptic connections.

**b. Oxygen Deprivation**

When the brain doesn't get enough oxygen, it could be the reason to memory loss (amnesia). This is often caused by events like a heart attack, difficulty breathing, or a serious injury. Insufficient oxygen can harm areas of the brain crucial for memory, such as the hippocampus. The severity of memory loss depends on how long the brain was deprived of oxygen and how much damage occurred. In some cases, memory function may improve over time, but in others, the damage may be permanent.

**c. Alcohol Use**

Korsakoff's syndrome, often caused by prolonged alcohol consumption, can result in severe anterograde and retrograde amnesia. This condition results from damage to the diencephalon and is closely linked to thiamine deficiency, which alcohol exacerbates.

**d. Trauma, Stress**

Dissociative amnesia, a disorder in which the patient is unable to recall important personal details or experiences, can be brought on by stress, sadness, or extreme trauma. Patient whose suffer depression, stress or trauma usually can't handle the overwhelmed feelings or emotions that cost them to amnesia. For example, people with Post-Traumatic Stress Disorder (PTSD) might have memory gaps because emotional trauma makes it harder for the brain to store memories properly.

**D. RESULTS AND DISCUSSION**

**1. Symptoms of Christine's Amnesia**

**a. Anterograde Symptom**

The first symptom of amnesia that Christine Lucas, as the main character, experiences is anterograde symptom. This symptom makes her unable to form new memories. Every day she wakes up with no recollection of recent events, including the previous day. Her memory doesn't last beyond 24 hours, so every night when she sleeps, her memory is wiped clean., so she cannot retain or form new memories. This symptom first appears when she wakes up in the morning. When she wakes up she didn't know anything surrounding her.

“The bedroom is strange, unfamiliar ..... I don't know how I'm going to get home. (Watson 2012:3)

The quotation shows that Christine wakes up every morning without knowing the recent events, such as where she is. This inability to form new memories after each day is a sign of anterograde symptom, forcing her to start each day disoriented and unaware of her current life. This symptom repeated every day while she woke up in the morning. The quotation that follows below also illustrates this.

“This morning, ..... I woke with him lying next to me. A stranger, again..... My mind felt scooped out, hollow, but then words floated to the surface... (Watson 2012:137)

Quotation above also shows that every morning when she wakes up, she feels strange and unfamiliar, not knowing where she is, who she is, or how she gets there. This explains that she has experienced anterograde symptoms repeated every morning. This fact aligns with the theory proposed by (Kumar et al., 2013) that anterograde symptom describes the inability to form new memories subsequent to the onset of memory impairment as seen in Christine life in the quotation above.

**b. Retrograde Symptom**

The second symptom that Christine experiences is a retrograde symptom. This symptom leaves her unable to remember or recall past events. Usually, people with this symptom forget the whole past of their lives, but it is quite different from Christine has experienced. After the accident that triggers this symptom, she only forgets her adult life and the life afterwards, while her childhood memories stay with her. She still can remember or recall her mother where she has hidden the money and then her father's death, she can even remember her childhood home.

This symptom first appears again when she goes to the bedroom after waking up in the morning. She sees a lot of a photograph taped to the wall and the mirror in the bathroom and chooses it at random. On the photo, there is a note says "*Christine*." After reading the note, she feels familiar with the name, and she believes that the woman in the picture is herself. It shows that Christine can't even remember her name or her personal details. She is unsure of what her name is, which means she has the retrograde symptom. This can be seen on the quotation below.

..... *Christine*, it says, ..... a photograph of me – this new me, this old me..... next to a man. The name seems familiar, but only distantly ..... (Watson 2012:5)

This symptom appears again when she meets her husband in the morning. She can't remember her husband, the man who wakes up beside her this morning. This quotation below proves the fact.

".....'Who are you?' 'I'm your husband,' he says. .... 'We've been married for years.' 'What do you mean?' I say. .... "'Married for years'?" What do you mean?" ".....(Watson 2012:6)

In the quotation above, her husband attempts to remind her that he is the one she has been married to for years, but she becomes frightened and panics. This shows that Christine doesn't remember her personal details for example who is her husband. This fact means that she has this symptom by not remembering her husband anymore. This is also in accordance with what (Kumar et al., 2013) states that retrograde symptoms involves an inability to recall past event.

### c. **Confabulation or False Memories**

Christine also experiences symptom confabulation or fake memories. This symptom leaves her to invent false memories in which the memories never happens. This happens when she fills in gaps in her memory with imagined details or believes stories that aren't accurate. This symptom firstly happens when she has been told by her husband that their child has died in Afghanistan while serving for the country as an army. From that moment, she begins to invent memories about the details of Adam's death, such as seeing Adam bleeding because of the bomb on the roadside. The quotation below shows that Christine experiences a confabulation or fake memories. In reality, her son is still alive, living in Birmingham with his wife .She has been lied to by her husband who turned out to be her affair in the past.

One soldier survived. Adam and one other didn't.'  
..... 'Did he die straight away? Did he suffer?'  
Ben sighed. 'No,' he said, after a moment.  
.....I saw Adam bleeding to death by a roadside..... (Watson 2012:113)

This symptom appears again when she believes in Mike's explanation who claims to be her husband. He tells about what causes her memory to lose. He tells her about the car accident, on icy December when she is on her way to home. He says that the car hits her and causes her broken leg, arm and collarbone.

“..... We don’t know if you were crossing the road at the time or if the car that hit you mounted the pavement, but either way you must have gone over the bonnet..... (Watson 2012:54)

After hearing the explanation, she begins to invent false memories. She believes that her memory is caused by a car accident, hit-and-run. Even though she has no clear recollection of the accident, she begins to remember fragmented, invented details about how it feels when she gets hit by a car. These details are brain’s attempt to make sense of the story she has been told, but the truth is there is no car accident. This also align with what (Kumar et al., 2013) states that confabulation is false memories or information to fill gaps in memory.

#### **d. Disorientation or Confusion**

Another symptom that Christine also experiences is confusion or disorientation. This symptom makes her unable to process, organize or retrieve the information through memory. Each morning she feels confused, uncertain about her identity. This sense of disorientation or confusion is repeated and becomes a constant struggle to put together her reality. This can be seen when she sees her reflection on the mirror. Whenever she looks her body, she feels that her body is not her own. The wrinkle skin on her hand, the unpolished nails and all of her body part seems alien to her. She always feels younger than she is, and she begins questioning about her identity. This symptom can be seen in the following quotation.

“.....The hand gripping the soap does not look like mine..... like the man in the bed I have just left,....”(Watson 2012:4)

The quotation shows that Christine experiences a confusion or disorientation about her identity. She always thinks that she is younger than she looks, especially her face appearance. Her hair lacks volume and is much shorter than she believes it to be. Despite everything else that she sees, the body and the face are hers. The person that in the mirror is Christine herself, but she thinks that the person is more than twenty years old. This symptom also can be seen in the following quotation below.

“The face I see looking back at me is not my own..... I can see that they are mine. The person in the mirror is me, but I am twenty years too old.....” (Watson 2012:5)

The quotation also shows that Christine has this symptom, which makes her with unsure about who she is. She is shocked by her face staring back at her in the mirror, which doesn’t match at her thought. This situation reflects her confusion to recognize her physical appearances which lead further to her confusion about her identity. This symptom in accordance with what (Kumar et al., 2013) states that disorientation or confusion develops feeling of lost or unsure of themselves.

## **2. Causes of Christine’s Amnesia**

The first cause of Christine’s amnesia is head injuries. She gets hit so many times in her head that cause her memory problem. Years ago, before suffering from amnesia, she has a perfect family, with Ben and their son, Adam. It is nice at the beginning but, after she has Adam for a long time, the excitement goes off. She begins to be stressful and scared of failure as a writer. She thinks she can’t write anymore or she is never able to write a novel anymore. Christine and her

husband then have lots of argument and then she calls Claire, her best friend at university. She helps her by taking care of Adam and suggests her to go to Café to give her space to write again. It turns that she sees someone and she has an affair with an attractive and nice man. His name is Mike. As the time goes by, she regrets for cheating on her husband and want to end this affairs with Mike. However, that doesn't work out, Mike can't accept the decision. He feels betrayed and abandoned and his obsession with her turns into anger. This rejection fuels his desire to control her. Mike becomes emotional and believes she will leave her husband for him. However, the situation changes into a violent assault. During the argument, Mike attacks Christine after their breakup, intending to win her back. Mike attacks her physically by hit her on the head and causing a brain injury. This injury leads to Christine's memory loss. This can be seen in the quotation below.

“My head slams into the floor. Once, twice, a third time. .... A buzzing in my ears, .....

..... His hand is round my throat, and I cannot breathe. ....(Watson 2012:198)

The quotation shows what Christine remembers about the night she loses her memory in the hotel room. This flash of memory shows that Christine being hit many times, not only once but three times in a row. Her head also slams into the floor and start buzzing in her ears. She feels that she can't breathe as it someone's hand is choking around her throat then, the memories are gone.

This cause also can be seen in Christine's forehead. In Christine's forehead, there is a bruise, which is not quite faded yet. The bruise that appears on Christine's forehead is the result of the hit that she receives the day before she realizes who has done this to her. This shows that she gets hit many times that leaves a mark on her head which can cause her amnesia, as seen in the quotation below.

“I noticed the blotches on my skin, a discoloration on my forehead that looked like a bruise that had not quite faded.....(Watson 2012:15)

The quotation shows that Christine sees for herself that there is a bruise on her forehead but she feels normal and no worried about it. She even covers it up with the makeup that she finds on the dressing table.

Christine also experiences oxygen deprivation while she is in a coma. Before she is in a coma, she is found in pretty bad condition. She is discovered with confuses, no identification at all and has no memory of what has happened to her. She is found in a blanket wrapping her body and blood all over her. The police identify that Christine has been mugged by group of people, but nobody is arrested. No witnesses and no body see her before, so nobody gets arrested then a stranger finds her and calls the ambulance to bring her to the hospital because she has internal bleeding and need emergency surgery. After she taken to the hospital, the doctor begins to do the operation and it is successful but there is secondary effect. There is difficulty especially dealing with stabilizes her blood pressure, which leads her to coma. Afterwards, she gains consciousness, but she doesn't remember anything, since her memories are gone. The doctor in that hospital thinks that her memory loses in temporary due to the combination of head injuries and anoxia, but apparently her memory loss continues. This is also in line with



Kumar's (2013: 35) statement that a lack of oxygen damages brain areas crucial for memory, as seen when Christine experiences brain poisoning.

The following quotation proves the facts that she has oxygen deprivation

.... I'm sorry,' I said. 'Anoxia?' I had stumbled over the word.

'Sorry,' he said. 'Oxygen deprivation.'.....

You had symptoms of a severe lack of oxygen to the brain.".....(Watson 2012:179).

### **3. The Impacts of Christine's Amnesia**

Christine's inability to remember the past makes her disconnected from her own identity. Each day she wakes up with no memory of who she is and how she ends up like this, making it as a stranger in her own life. Every time she wakes up, she feels that her body does not belong to her and she always thinks that she live on her twenties so that she always thinks in the wrong body. Because of her amnesia, she doesn't know whether this is her life or someone else's. This impact can be seen in the quotation below.

"The face I see looking back at me is not my own. .... I can see that they are mine. The person in the mirror is me, but I am twenty years too old.....(Watson 2012:5)

The quotation shows that Christine gets an impact of her amnesia. She loses her identity and she doesn't know who she is. For everything she sees is strange and unfamiliar to her. She doesn't know her truly is until she reads a journal that contains the truth of her life. Piece by piece she reads her journal to trigger back her memory. She also can't remember her son and this makes her erases her identity as her mother. That is the impact of her amnesia to her life, as seen in the following quotation below.

"I tried to remember my son, tried to see myself kneeling in front of him with an elasticated tie, or combing his hair, or wiping dried blood from a grazed knee. Nothing came. .... my mother's, but otherwise he could have been a stranger."(Watson 2012:118)

From the quotation, it is shown that Christine loses her identity as her mother due to her amnesia. She tries to remember her son by doing a motherhood thing such as combing hair, wiping blood after falling from bicycle, but she cannot remember any memories dealing with her son, so she loses her role as a mother.

Christine can't remember some important life events, such as her marriage and her friendships. The impact of her amnesia makes her relationship broken, especially with her family. After she gains consciousness from her coma and the recovery is going well, she goes home with her family but her memories are at their worst. Couple days later, she is difficult to handle. She becomes hysterical for a couple of times so she is being moved to general ward for few months. In general ward, she claims that the doctors are conspiring again her and she keeps trying to escape. For her safety and others, she is being transfered to Psychiatric ward because she lashes everyone out. She also grabs Adam, runs to the door to rescue him. She does it every time when Ben and Adam visit her in Psychiatric ward, because she always thinks that Adam has been taken away from her when he is a baby. She also starts accusing her real husband, Ben of cheating with

another woman and raising her son without her knowledge. This fact can be seen in following quotation.

“..... you didn’t recognize me. You became hysterical. You grabbed Adam when I wasn’t looking and ran to the door. .... He started being really frightened of you.” (Watson 2012:273-274)

If she doesn’t see Adam, she is happy and calm. From that moment, her real husband, Ben decides that leaving her in Psychiatric ward is the best option for her. He thinks that this is a place where she belongs, so he leaves her in that place. On the other hand, he also has to take care of his son and he has to work to get money for their lives. This is the impact of Christine’s amnesia. She loses her perfect family separated for years. This is for their own goodness. Ben and her son have to keep going on their lives and Christine finds the place where she belongs to. Despite the decision to leave, Ben’s letter shows that he still loves Christine deeply.

Another impact of Christine’s amnesia to her life is her difficulty to distinguish between what is real and what is not. This impact makes her tough to differentiate either reality or fantasy. It happens many times, especially when she experiences a confabulation. Every time she experiences confabulation, she find difficulty to distinguish between real or unreal, in particular about who is the man next to her when she wakes up in the morning. She imagines to wakes up with someone called Ed, which is the name of Dr. Nash’s name. This confabulation leads her difficulty to distinguish between real or her imagination, because almost every day she meets Dr. Nash and it makes her subconsciousness goes wrong. This impact can be seen in the following quotation below.

“.....‘I imagined waking up with someone called Ed.’ ..... ‘Christine,’ he said. ‘That’s my name. I’m Ed. Ed Nash.’ ..... ‘That’s my name. I’ve told you that before..... My name is Edmund. Ed.’(Watson 2012:200)

This impact can also be seen when she begins a confabulation again. She has difficulties to differentiate about the truth of the fire in her old house. She begins to imagine that the fire is real and it burn down the old house. However, the reality is that it is a deception from her lover Mike, and that it is an alibi from him to control her memories over and over again.

## **E. CONCLUSIONS**

Christine suffers from severe amnesia caused by head injuries and oxygen deprivation. She exhibits anterograde symptom, which prevents her from forming new memories, making her surroundings feel unfamiliar every day. She also experiences retrograde symptom, erasing all past memories except for a few from her childhood, such as her father’s funeral and memories of her mother. To cope, she uses a journal prescribed by Dr. Nash, reading it each morning to piece together her identity.

In addition to memory loss, Christine experiences confabulation, where she creates false memories, such as imagining her son Adam died in a war or questioning details of the accident that caused her amnesia. She also suffers from disorientation and confusion, feeling uncertain about her identity and perceiving her body as alien, believing she is in her twenties despite being in her forties.

Her amnesia stems from a violent assault by her lover, Mike, after she tried to end their affair. The assault caused brain injuries and internal bleeding, leading to surgery, a coma, and prolonged memory issues. Although initially thought to be temporary, her amnesia persisted.

Christine's memory loss deeply impacts her identity. She struggles with her roles as a wife and mother, unable to reconnect with her husband and son. Her behavior during recovery, including lashing out and accusing her husband of hiding Adam, led to their divorce. Despite loving her, her husband believed leaving was best for her well-being. Christine also struggles to distinguish reality from fantasy, especially during episodes of confabulation, highlighting how memory loss profoundly affects her life and sense of self.

## REFERENCES

- Coon, D., & Mitterere, J. (2021). Introduction To Psychology. In *Introduction To Psychology* (TWELVE, Vol. 1). WADSWORTH. <https://doi.org/10.4324/9781315785134>
- Kumar, R., V, Ramesh., P, Vinod. Kumar., K, Vijay Kumar., & P, Swaminaidu. (2013). *I nternational J ournal of A llied M edical S ciences and C linical R esearch ( IJAMSCR ) A review on amnesia. 1*(1), 34–37.
- Leavy, P. (2017). *Research Design Quantitative, Qualitative, Mixed Methods, Arts-Based, and Community-Based, Participatory Research Approaches*. THE GILFORD PRESS.
- Meyer, J. (2018). What is Literature? A Definition Based on Prototypes. *Work Papers of the Summer Institute of Linguistics, University of North Dakota Session, 41*(1). <https://doi.org/10.31356/silwp.vol41.03>
- Spielman, R. M., Jenkins, J. W., & Lovett, D. M. (2020). *Psychology 2e*. Houston Texas: OpenStax. Rice University
- Tougaw, J. (2021). Amnesia Narratives: Memory, Forgetting, and Identity. *European Journal of American Studies, 16*(4), 0–17. <https://doi.org/10.4000/ejas.17472>
- Watson, S. J. (2012). *BEFORE I GO TO SLEEP*. New York. HarperCollins Publisher