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Storaged

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To whom it may concern,

The reflexive essay supplementing the creative work *Storaged* is a case study of the novel's narrator. This is written from the perspective of a fictional psychologist who is examining the character in great depth. One component of this case study includes the history of the narrator and, as such, the psychologist would have had to conduct research into the character's past. In creating this past, I have had to also fabricate fictional sources (e-mails, telephone calls, and reports) from which this psychologist would have drawn the relevant information.

Any information regarding actual psychological disorders and tests is factual and comes by way of valid sources which are mentioned in the reference list at the end of the reflexive essay.

A Case Study of the Narrator from *Storaged*

By way of introduction, my name is Heinrich Geelhoed and I am one of the psychologists stationed at Edenlea Mental Health Clinic. I have been resident in this position for ten years now and, throughout the course of my career here I have handled a variety of patients.

Across these individuals I have seen diagnoses spanning the spectrum of psychological disorder and, as such, I feel that I am well placed to discuss the narrator of *Storaged*.

Whilst I have done a multitude of case studies, never before have I been asked to do one for a fictional character. It is an odd request but one I was definitely willing to entertain. Having read through the work I can obviously see the merits for doing one. It should serve to illustrate the various intersects in the text, those points where psychology and storytelling meet.

The case study which follows was commissioned by Mr. Bowman in furtherance to, and as a supplement for, the creative work *Storaged*. Through a definition, the purpose of this case study can be highlighted:

> "A case study can be defined as "a study of an individual unit, as a person, family, or social group, usually emphasizing developmental issues and relationships with the environment."
>
> (Case Study, n.d.)

Now, whilst the main purpose here is to explore the narrator's character and perform an assessment of him, an offshoot of this is that it will also illuminate aspects of his character which are *not* present in the work itself.

For the majority of this case study you will see that I have either redacted or anonymized any identifying details of those individuals who have contributed to it. This has been done in an effort to maintain confidentiality. Those names which *do* appear have had their respective permissions obtained.

To begin, we will look at a concise summary of *Storaged* which will, I believe, serve as a brief introduction to the narrator and the experience(s) which he has undergone.

Précis

Arriving at a self-storage lot, the narrator of *Storaged* takes over the managing thereof. At the outset, his reasons for being at this lot as well as his motivation behind managing it are unclear. Over the course of around six days, a variety of happenings – some commonplace, others less so – serve as a framing device for what essentially becomes the narrator's retelling of his own personal story. Through these various happenings as well as his conversations with those individuals who frequent the lot, further information which the narrator has effectively kept secret is revealed to the reader.

Whilst the uncanniness of certain of these experiences is apparent, the narrator's interpretation of each and then his subsequent resolution thereof helps demonstrate who he is as an individual. Ultimately, the trajectory of *Storaged* is one of climbing towards a revelatory moment – the novel's conclusion – though 'traces' of this revelation do become scattered throughout the work as the narrator progresses through each experience or encounter.

Preface

Whilst I am cognizant of the narrator's past and the incredible trauma which occurred in it, the man's decision *not* to share this information until the very tail-end of his account, does not come as a surprise. Besides the fact that he clearly has trouble dealing with the event, I would venture that he also believes that sharing this information with others might prejudice them towards him. The control over informational flow which the narrator exerts, is an attempt at self-preservation.

Front-loading *Storaged* with a concise description of his past would run counter to the narrator's intentions as a storyteller. If this information were delivered outright, the narrator's reason for coming to the lot comes in tow. From this the reader might surmise, because of the trauma associated with this past event, that the narrator is actively fleeing from it. The lot's 'purpose', that of serving the narrator as an escape, would then be readily available to the reader. Choosing to obscure the facts instead, the secret which the narrator keeps is instead inadvertently drip-fed to the reader throughout the work.

Ultimately, this becomes a 'reveal', a punch to the gut at the very end of his account. For the narrator though, it is an expulsion, the truth coming out and I firmly believe that his intention here was never malign – to 'hit' the reader in this fashion. He simply reached a point where he could no longer manage himself or his feelings. This will be discussed in greater detail when I touch on the notion of catharsis.

I believe firmly that the narrator *isn't* an actively cryptic character. He does not intend to be the way he is. Rather, the 'secrecy' which he demonstrates is simply a by-product of what has happened to him over the course of his life. That this secrecy contributes to his storytelling is a happy accident.

The conclusions one could reach had the narrator's past been revealed from the beginning are the very reason he has elected to keep secret. A person fleeing this kind of past can be understood as having trouble dealing with it and, if the lot is set to serve the narrator as a hideout, we can infer that there is something worth hiding from, something which has the potential to follow him even.

Knowing this truth also means that any of the oddities which the narrator displays – silences, faltering memory, aversion to certain situations, distractedness – can now be understood as stemming *from* this past. *Who* the narrator is would come from what has happened to him.

The abovementioned behaviours, when viewed in isolation (as, essentially, the narrator presents them to his reader), would not seem 'sinister'. In more rigorous language, would not seem 'symptomatic of' any particular psychological disorder. However, when coupled with the knowledge of this man's past, these could be considered precursors. Without this information though, we are

instead presented with an individual who appears to be just slightly odd which makes for decent reading.

I believe that 'telling a good story' or being a good storyteller, is the narrator's primary goal in this account. As such, front-loading his 'story' with his past would have led to these various conclusions, all of which, by virtue of *how* they were reached would likely be considered 'bad' by him. My belief is that the narrator *wants* to be known, yes, but not through past events. His coming to the lot is a fresh start and his choice to conceal information is important.

The narrator of *Storaged* has come somewhere new to be someone new.

Without revealing his past, the narrator appears *without* an explicit backstory, simply arriving one day and running the place. From a storytelling as well as a psychological perspective, this raises two questions:

1.) who was this man before coming to the lot?

2.) why has he come to the lot?

Any information which might help answer these questions *is* given to the reader, albeit in a piecemeal fashion. With regards to his traumatic past, this always appears to be revealed accidentally. Typically, this takes the form of omissions, avoidances, and almosts-interrupted. My explanation for each is as follows:

- omissions –

> "Sometimes memories can be bad, you know?"
>
> (*Storaged*, p. 105)

> I thought about my past, my inability to de– to tal– to co– to do anything with it.
>
> (ibid., p. 144)

> I knew, did know, would always know– I shook my head, tried to free myself from my feelings […]
>
> (ibid., p. 207)

Largely involuntary on the narrator's part, omissions are those instances where something is 'left out' – an action, additional information, the answer to a question. Whilst the narrator does 'show' the reader these absences he is, I am certain, unaware of both having created them as well as recorded them.

- avoidances –

Any mails subjected with words like 'please respond to me', 'we're worried about you', or 'I just want to talk' were deemed personal, inappropriate for business hours and, as such, were ignored.

(*Storaged*, p. 71.)

"You didn't have much going on back there, I take it?"
She [Walker] looked at me expectantly, but I had nothing further to say.

(ibid., p. 87)

Avoidances are those moments where the narrator actively avoids doing or saying something. Through a description of *what* is being avoided as well as (sometimes) the negative emotions which he associates with this, it is plain to see that the narrator consciously and, more importantly, voluntarily avoids specific situations, feelings, or behaviours.

- almosts-interrupted –

"Parents don't just go forgetting their kids." I chuckled briefly, thought on this and then relaxed. "We don't–"

(ibid., p. 203)

"You don't have kids, do you?"
I… shook my head.

(ibid., p. 97-98)

These include instances of the narrator interrupting himself. Either in the middle of a sentence, a thought, or an action, the narrator will cut himself off, demonstrating aversion to revealing the past by natural means. Unconsciously and, more importantly, organically, the narrator begins a reveal and, in the moment when he catches himself doing so, he corrects this by cutting himself off.

Through these occurrences, what is made clear to the reader is the narrator's apparent unwillingness to share his past. What results is that the reader is left to piece together the narrator's past and what exactly his motives are.

Now, with regards to the why question surrounding the lot, the narrator *is* more forthcoming in terms of information. Noticeably, this seems to be voluntary though. Whilst there are concrete reasons behind the previous owner's absence, his connection to her, and the position 'left' due to her absence, the narrator reveals this only after prompting. From my reading of him it is clear to see

that the man is a reactive individual, happy to explain the situation but *only* when somebody requests it of him.

When the why question surrounding the lot has a satisfactory answer, the need for an answer to that first question, that of *who* the narrator is, 'eases' somewhat. Essentially, his motives for coming to the lot (at least some of them) have been made more explicit. The reader can then begin to assume that the narrator feels a familial responsibility or that he wishes to investigate his estranged aunt further.

Satisfying the second question, giving an understanding of the present (albeit a fairly incomplete one) is enough to waylay the reader from demanding the narrator's past. It is an unexpected consequence but, ultimately, one that serves him. The writing serves to distract us from this *who* question for the time being.

Having reached the end of *Storaged*, I have waded through the narrator's reveal and, rather than his past coming as an outright surprise, it was instead a revelation, not so much an 'ah!', as an 'ah, I thought as much'. Unconsciously, because of the flow of information throughout the novel, what we were told, we knew.

Regardless, it is a huge reveal on the narrator's part. Essentially, he has compressed his entire past into the last few pages of his account and, whilst this unburdening may come across as heavy-handed, it *is* what he wanted it to be, I believe. This sort of offloading, notably all-in-one-place, whilst incredibly expositional (in writing terms) *is* actually an expected response from a psychological perspective. For individuals dealing with grief feelings or who are in the aftermath of a traumatic incident, this behaviour *does* occur. Essentially reaching a tipping point the individual unburdens themselves in a cathartic manner. Defined in psychiatric terms as:

> "[a] discharge of pent-up emotions so as to result in the alleviation of symptoms or the permanent relief of the condition"
>
> (Catharsis, n.d.),

one can clearly see the 'outpouring' attached to this action. Of further interest would be the non-medical definition thereof:

> "the purging of the emotions or relieving of emotional tensions, especially through certain kinds of art, as tragedy or music"
>
> (ibid., n.d.).

Sadly, the above definition is linked to the outdated and unscientific 'cathartic theory' which once held that viewing art or media which was inherently tragic, violent, or otherwise intensely emotional, would help with purging corresponding emotions. The viewer would expunge their own emotions vicariously. I would posit, however, that after a slight alteration – 'especially through [the creation of] certain kinds of art' – this definition might once more hold water. No now longer achieved vicariously, a first-hand creative exercise can result in this release.

This altered definition highlights the (perhaps unintended) purpose *Storaged* serves its narrator, that of being a vehicle for unloading intense feelings. This emotional purgation, the

creative cathartic response, can be viewed as a form of coping mechanism as it ultimately relieves the narrator.

In terms of information, whilst *Storaged* does give us some of the narrator, it by no means gives us all of him. From the above, it is plain to see that there are extensive 'gaps' in the narrator's backstory. Largely these are concealed through his storytelling and language use. To populate these empty areas then, is the aim of this case study. It will do this by including:

a.) the narrator's history – those events leading up to his arrival on the lot (detailing the traumatic incident as well as his behaviour thereafter). This history is a composite account, created from a combination of news articles and e-mail correspondence with individuals from the narrator's past.

b.) an assessment of the narrator's wellbeing prior to his arrival on the lot, extrapolated from the abovementioned history.

Nested within this assessment is a differential diagnosis of the narrator based on both the history and the assessment. This is an attempt at explaining any symptoms which he does display during the account in *Storaged*.

c.) a prognosis – effectively the 'best' way forward for him, as prescribed by someone who understands his situation.[1]

For our purposes, I would like to begin with definitions of the above terms.

> (Case) History: "all the relevant information or material gathered about an individual, family, group, etc., and arranged so as to serve as an organized record and have analytic value for a social worker, student, or the like"
>
> (Case History, n.d.)

> Differential diagnosis: "[the] determination of which one of two or more diseases with similar symptoms is the one from which the patient is suffering"
>
> (Differential Diagnosis, n.d.)

> Prognosis: "a forecasting of the probable course and outcome of a disease, especially of the chances of recovery"
>
> (Prognosis, n.d.)

[1] Sadly, whilst a prescription *can* be made, it should be borne in mind that the likelihood of it being adhered to is another matter entirely.

History

Information regarding the narrator's history is elusive. Primary-source testimony (beyond the 'summative' end in *Storaged)* is effectively nonexistent. As a result, the notes which follow are an amalgamation of information gathered from various secondary sources. These were created by way of interviewing co-workers, a caregiver, and friends, either face-to-face, via electronic mail, or telephonically. In terms of a timeline I was able to plot five months of activity (six when including the month preceding the incident).

The narrator's past is integral to this study as it can help us understand the reason behind the man's thoughts, emotions, and the motives behind his actions in the present moment, all of which helps us predict a potential way forward for him.

Historically, what *did* occur in the narrator's past was a motor vehicle accident. Public records, accessible online in the form of news articles; hospital and medical records; and obituaries, all describe a car crash involving a family of three. This accident resulted in the death of two individuals. The survivor would go on to become the narrator of *Storaged*.

A 'composite' event based on these sources outlines the accident as the end-product of a series of unfortunate events which culminated in the vehicle leaving the road at speed, careering down a hill and crashing into a ravine. It is understood that, whilst emergency response *was* quick to arrive – on-scene within an estimated fifteen minutes (accident report, 27.02.17, #LT001) – the child in the car was already deceased by this time. His mother (the narrator's wife), though successfully removed from the vehicle through the use of the jaws of life, would later die on-scene regardless of attempts made to resuscitate her (accident report, 27.02.17, #LT001). The narrator – unconscious, believed comatose due to head trauma – was airlifted to a nearby hospital where he would recover over the course of the next two months.

The mention of head trauma is something I first hypothesized could be potentially linked to the memory-related impairment that the narrator demonstrates in *Storaged*. Theorized only, this connection is inferred by various individuals who knew the narrator both before and after the accident, each of whom were able to give a 'then-versus-now' account of him.[2]

Further details important in the understanding of the accident are as follows:

- All passengers involved were wearing seatbelts, all of which were in working order (accident report, 27.02.17, #LT001).
- All airbags deployed successfully and, as expected, the vehicle's 'crumple zones' reacted accordingly (insurance report, 10.03.17, LT/01).
- The car was in fine working order, would pass an inspection, and could be deemed roadworthy.[3]
- The driver *did* apply brakes prior to the initial collision (with the guard-rail) as evidenced by skid marks on the road (accident report, 27.02.17, #LT001).

[2] Ultimately, any confirmation of impairment due to head trauma would have to come following a definitive scan - either MRI or fMRI.

[3] After the accident this vehicle was written off and summarily destroyed (insurance report, 10.03.17, LT/01).

- The wife was driving at the time and she was *not* impaired in any way (accident report, 02.03.17, #LT003).[4]

After ascertaining the details of the hospital that the narrator was transferred to, I was able to reach out to and make contact with the trauma counsellor assigned to him throughout the course of his stay there. The correspondence between us helped grant me an understanding of his time there. A paraphrased summary of his 'arrival' is as follows:

> Whilst he *wasn't* in a comatose state, he wasn't *compos mentis* either. Three days after arriving at the hospital, he awoke 'fully'; two days after that, he was able to speak again. The questions he asked indicated that his recall of the event was limited at best.
>
> (J. Douglas, personal communication #1, October 8, 2017)

This limited recall is a clear indication of gaps in the narrator's memory. Further information from Ms. Douglas – the caregiver assigned to the narrator – indicates that "he [the narrator] seemed accepting of what had occurred [the event] and was aware of the deaths of his family members" (ibid.) but that there was also "a marked numbness and bluntness to his responses" (ibid.). This behaviour is quite characteristic of an individual who has recently undergone a severe trauma.

On the 7th day of his recovery, the narrator was let out of his hospital on a day-pass so as to attend a twinned funeral. From Ms. Douglas' correspondence:

> "[T]he mother-son funeral was decided on and organized [sic] by her parents. Whilst able to attend, the patient was, because of hospital policy and due to his ongoing recovery, made to use a wheelchair. I volunteered to attend with him on this day (which he accepted).
>
> The funeral… was a funeral, nothing untowards [sic] happened. Worth noting is the fact that the patient lapsed into silence the morning of and then remained silent throughout the funeral. In fact, during the entirety of the day's procedings [sic] he said nothing."
>
> (J. Douglas, personal communication #2, October 10, 2017)

Hospital visitation records which Ms. Douglas shared with me, show that the narrator's mother-in-law *did* visit multiple times during the remainder of his hospital stay, though what actually transpired during these meetings is unknown. Whilst I have tried contacting both her and the narrator's father-in-law, I have not as yet heard back from either of them. Ms. Douglas is also unable to shed further light on these meetings.

[4] An autopsy would later corroborate this fact.

A summary of Ms. Douglas' final notes and thoughts (which I have tried to 'headline' in terms of potential symptoms) is as follows:

- On distractedness – "[the patient] spends a considerable amount of time deep in thought, sometimes staring off into space for an hour, if not more…"
- On time loss – "[I] had to remind him *again* [emphasis added] what day it was."
- On dream disturbance – "[I] was on-call luckily, so when he woke up thrasing [sic] and fighting *again* [emphasis added], I was there to help calm him down. I always wondered what his dreams were of/about but whenever I asked him he was quick to tell me that he couldn't remember (though I have my doubts about this…)"
- On irritable behaviour – "[the patient] isn't always forthcoming with information, often requiring multiple questions on the same subject. His response to this 'prodding' is often irritable, angry (but contained) outbursts."
- On diminished interested/participation – "[the patient] has to be encouraged, often multiple times, to perform even the simplest of tasks. It doesn't seem as if he's able initiate his own actions."
- On hygiene maintenance – "[he] will often need to be reminded of his hygiene, sometimes multiple times. I cannot write this off to simple forgetfulness."
- On his future – "the closer we come to his discharge, the less likely it seems that he will be adequatly (sic) prepared for it."

(J. Douglas, personal communication #3, October 11, 2017)

The narrator's return home was seemingly uneventful. From secondary-source testimony – a phone call with one of the narrator's neighbors (also, serendipitously, one of his co-workers) – the man came home and "really just got on with it, came back from the shops with foods to stock his cupboards and then just started showing up to work the next day" (X. Banda, personal communication #2, October 15, 2017). What was noted (and also verified by multiple co-workers) was a marked change in his day-to-day behaviour. Once chatty, amicable and approachable, he had now quietened significantly and, in conversation, his responses were "labored and short, like he didn't want to talk at all" (J. Patchett, personal communication, October 16, 2017). Once the sort of individual to volunteer information, ask questions or initiate 'office banter', the narrator had become withdrawn and, by some accounts, quite intense.

There are multiple recorded instances of him demonstrating 'detachment' at work (though 'isolation' might be the better word here): "[He] just stares off into space, you can't talk to him or nothing" and "he is noticeably *not* okay, people here see that, see how he just sticks by himself, how he avoids" (B. Johnson, personal communication #1, November 01, 2017). There is also exactly one instance of combative behaviour – what essentially boils down to a shouting match – which occurred between him and another co-worker. This resulted in a severe reprimand and two days paid leave.

Further workplace occurrences (verified via communication with staff members as well as incident slips which the HR department generated for their records) can be categorized in the following ways:

- Hygiene and cleanliness issues – "{REDACTED} was queried regarding his noticeable lack of cleanliness. This was brought to the attention of HR after a fellow co-worker complained about a pervasive smell."

  (J. Samuels, Tergo HR Incident Slip #204, June 5 2017)

- Inattention to appearance – "he [the narrator] just didn't seem to care. Wasn't taking care of himself. Hair was a mess, pants falling down all the time… One day when he came in, his shirt was butoned [sic] up wrong."

  (J. Patchett, personal communication, October 16, 2017)

- Sleep disturbances – "{REDACTED} was cautioned regarding repeated patterns of sleeping during work hours and is often found doing so at his desk. During lunch breaks (though it hasn't been reported officially), it is believed that he uses the time to sleep somewhere."

  (J. Samuels, Tergo HR Incident Slip #211, July 17, 2017)

- Lack of concentration and distractedness – "sometimes [it] was just like he wasn't there, you know? At work but not really… present. He'd just stare, like really *stare* into the middle distance… I'd just get on with my work and then look up from what I was doing [and] I swear he hadn't moved, hadn't even blinked."

  (B. Johnson, personal communication #2, November 05, 2017)

- Timekeeping – "{REDACTED} is consistently late for work and, as such, has received multiple cautions. Whilst he has volunteered to stay after hours, he has agreed to a contract which stipulates his working hours and should adhere to same."

  (J. Samuels, Tergo HR Incident Slip #206, June 15, 2017)

- Appetite and eating – "{REDACTED} was cautioned for working through his lunch hour, subsequently when he began taking his breaks once more, he wasn't observed to be eating."

  (J. Samuels, Tergo HR Incident Slip #208, July 05, 2017)

- Depressed mood – "he [the narrator] wasn't ever cheerfull [sic] after that. It's understandable. We all know why that is… but you could see the guy was unhappy, was… I dunno [sic]… more than that. He always looked like he was close to tears, like anything might set him off."

  (B. Johnson, personal communication #2, November 05, 2017)

This pattern of behaviour (which notably worsened over its course) is reported (by the narrator's team lead) up until his final day at work:

> "[He] kept coming in, just kept coming in, so obviously he kept getting paid… I mean, he wasn't getting better or anything, you could see that, but he was there… at his desk, every ddamn [sic] day. Wasn't the same guy though, never the same. *Obviously.* Last day [of] September, that was the last time I saw him. Just never showed up after that. […] One of the guys here thinks he moved, said he saw a [moving] van outside the guy's place. No idea where he went though…"
>
> (C. Simmons, personal communication #3, October 29, 2017)

This, then, would have been the narrator's departure for the lot and, if the timeline serves, he left work and travelled *to* the lot that same day.[5] This would mean that *Storaged* 'begins' a short while after his arrival. The moving van would arrive the next day (Saturday) to collect his possessions for delivery at the lot later on that same day.[6]

Whilst some consideration was given to his abrupt disappearance from the workplace, after a week's worth of waiting for information regarding his whereabouts, the narrator was fired due to his continued (and unexplained) absence (C. Simmons, personal communication #3, October 29, 2017).

Concluding this history, it is unknown whether, at any point following the incident and his subsequent return to work, the narrator underwent any kind of formal counselling. There are indications in *Storaged* which I believe signal 'yes' but I have not, as yet, been able to officially confirm this via professional records.

The narrator mentions, multiple times, these little 'teachings' which, in my opinion are the result of having encountered a psychologist. Scattered throughout the narrator's account are what appear to be instructions based around establishing routines (a form of coping mechanism). Consider the following (italics are my own):

> *I'd been told* that things in series were safer.
>
> (*Storaged*, p. 30)

> *I'd been told* to do this sort of thing, to make these little 'plans'.
>
> (*Storaged*, p. 36)

> Lists, routines, events occurring in something resembling a sequence, these were supposed to put a person at ease, were supposed to make things feel manageable. *I'd been told* they'd make my life easier.
>
> (ibid., p. 48)

[5] I mention this only for timekeeping purposes. Wherever the narrator *went* is, theoretically, only a few hours from his home.

[6] The timeline here is somewhat 'difficult'. I cannot fathom a complete 'move' taking place in the span of a single day.

Whilst these moments clearly hint at the narrator having attended sessions of some sort (and even having learnt something from them), I doubt whether this process was followed through to completion, rather he appears to have memorized these little 'mantras' and then moved on.

Assessment

Obviously I *cannot* provide a complete picture of the narrator's mental health (I would need to have first-hand access to him to do so), I can, using witness testimony; a thorough reading of the account in *Storaged*; and my own experience, at least form a fair approximation of what exactly he may be experiencing.

Sadly, the account in *Storaged* is as close as one is likely to get to the narrator as a person.

A top-line summary of my findings (explained in greater detail below) is as follows:

1.) following the incident, the narrator's recovery, and his return home *and* to the working world, what I initially considered to be a showing of Acute Stress Disorder, I would later change to, because of course length, a diagnosis of Posttraumatic Stress Disorder (hereafter PTSD).

2.) In the midst of this PTSD and, largely based on the testimony of those in his work environment, I would venture that the narrator suffered a Major Depressive Episode (hereafter MDE). Whilst there are 'traces' of this episode in *Storaged*, I feel this is largely demonstrated prior to his departure to the lot.

3.) Whilst the narrator does display multiple 'oddities', none amongst these are, I feel, compelling enough to warrant a full-blown diagnosis. As a differential diagnosis (pending, obviously, further information) and stemming from the various symptom 'constellations' which he displays, I would venture giving consideration to the following: a.) Schizophreniform Disorder; b.) Obsessive-Compulsive Disorder; and/or c.) Dissociative Amnesia.

As is to be expected following this kind of ordeal, the narrator has manifested a variety of symptoms, all of which are indicative of disorder. However, without further, lengthier, and more rigorous contact with and study of him, I cannot hazard anything beyond the above. I will do my best to illustrate how each of the above is demonstrated not only through those symptoms seen in the text but also through the various mechanics of storytelling and language use which the narrator employs in *Storaged*.

1.) Acute Stress Disorder vs. Posttraumatic Stress Disorder

My initial diagnosis was one of Acute Stress Disorder. The criteria for this diagnosis as outlined in the DSM-5 are similar to those seen in PTSD. However, because of the course length (that is, longer than 1 month), I altered this *to* PTSD. Individuals suffering from Acute Stress Disorder experience a disturbance duration of between 3 days to 1 month following trauma exposure (APA, 2013, p. 281) and what with the narrator displaying symptoms well beyond 6 months, PTSD *was* the diagnosis to make.

Of interest, the following:

> "Approximately half of individuals who eventually develop PTSD initially present with acute stress disorder. Symptom worsening during the initial month can occur, often as a result of ongoing life stressors or further traumatic events."
>
> (APA, 2013, p. 284)

Whilst further traumatic events might *not* have occurred, I am fairly certain that the narrator's time spent in hospital; the funeral and the 'state' in which he attended same; as well as his reintegration back into the working world (and, by extension, society) all played significant roles in maintaining as well as worsening his symptoms.

For the PTSD diagnosis, we start with the narrator having directly experienced the traumatic event. Beyond this I might venture that he experienced "repeated exposure to aversive details of the traumatic event(s)" (ibid., p. 271) which would have occurred during his knowledge-gathering in hospital. Following any question, he would have had to experience the harsh details of this event.

The narrator also displays the sort of 'intrusion symptoms' one associates with PTSD. From Ms. Douglas' notes above, I extrapolated that he experienced "recurrent distressing dreams" (ibid., p. 271). Here, I take Ms. Douglas' mention of 'again' as an indication of frequency. Further, the narrator's unwillingness to talk about these dreams serves as an indication of their content.

Similarly, the narrator also undergoes involuntary recall related to the event. We see these moments demonstrated in *Storaged*. These moments are subsequently followed by the narrator's attempts to avoid them. A list would be as follows:

- His apparent aversion and reactive hang-up when talking to Rheese when she calls him whilst she is driving (*Storaged*, p. 173). My impression here is that the narrator makes a connection between accidents and driving whilst on the cell phone.

- After finding the lost boy, the narrator 'avoids' during their conversation:

> "We don't–"
> I paused.
> Backtracked.
> Withdrew.
> "Parents don't forget their kids," I said.
>
> (*Storaged*, p. 203)

This, effectively, is the narrator removing himself from the 'parent' group.

- Following a near-intrusion moment, he orders the boy to walk behind him:

> He [the boy] smiled, laughed, reminded me of–
> "Don't walk near me," I said. "Walk just there, *behind* me."
> (*Storaged*, p. 204)

This reminder is too much for the narrator and, as such, he orders the boy out of sight - a symbolic 'putting the past behind you'.

- When the narrator begins discussing model cars with Rheese (ibid., p. 171) he is, I think, recalling a memory. He mentions mimicking someone and then parrots a phrase but, as with his other recalls, he starts this before realising *where* exactly it has come from. When his voice cracks, we realise that what he has repeated has affected him. "I'm talking… too much." (ibid., p. 171) is how he terminates this moment.

Whilst these recurrences *are* present, the narrator does his best to avert the psychic trauma that may arise from them. We can also assume that he has some form of physiological reactions to these recurrences (sweating, itchiness, headaches) though these might have to be inferred from the narrator's writing as, due to the negative feelings associated with these moments, it is likely that he would have chosen to hide these from the reader.

Another point worth noting would be the narrator's demonstration of "distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event" (APA, 2013, p. 271). This distress is noticeable when he encounters the ship in a bottle (*Storaged*, p. 33) or those troubling thoughts which prompt him to work on his database (prior to Pepper arriving) (ibid., p. 116). These events all 'overwhelm' him and, as such, he responds through either avoidance or escape. Even the writing becomes overwhelming in these moments as demonstrated in lengthy run-on sentences or interruption through the use of m-dashes.

The narrator's avoidance is important. A key symptom of PTSD, this man avoids or, at the very least, *tries* to avoid "distressing memories, thoughts, or feelings" (APA, 2013, p. 271) *as well as* "external reminders (people, places, conversations, activities, objects, situations)" (ibid.) which would result in similar recall. The most blatant avoidance here would be this massive 'move', the life upheaval which sets *Storaged* in motion. As readers we are made aware of the move but not *why* it took place and though this reason isn't present in the writing, reading between the lines grants us this insight.

The narrator does, I feel, experience "persistent, distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame himself/herself or others."

(APA, 2013, p. 272-3). This is brought to the reader's attention when, during the novel's conclusory 'reveal', the narrator appears to shoulder the blame for the events which transpired:

> "Because I was the only one left, the blame was left to me."
>
> (*Storaged*, p. 215)

Another important symptom is the narrator's demonstration of diminished interest regarding or participation in significant day-to-day activities (APA, 2013). This is corroborated by the accounts of his co-workers (see above examples regarding 'self-care', 'hygiene and cleanliness', 'time-keeping') and in places throughout *Storaged* – the completion of the database, wandering, distractedness.

Along with this diminished interest come the twin symptoms of detachment or estrangement (ibid.). This detachment, exhibited both emotionally and physically in *Storaged*, is a result of the trauma experienced and, I would venture in this particular case, a means by which the narrator attempts to cope *with* same. Detachment is a form of escapism, as is estrangement.[7]

In terms of the sort of differences one expects to see regarding a person's arousal and reactivity, the narrator exhibits the following (APA, 2013, p. 273):

- "irritable behaviour and angry outbursts" – this behaviour is seen clearly during the reading of the script which the narrator finds (*Storaged*, p. 31-34). He addresses, in turns, the manuscript, the characters therein, and the dog, each with varying levels of verbosity. Interesting from a writing perspective, worrying from a psychological one.
- "reckless or self-destructive behaviour" – 'abandoning' his old life and moving to the lot is considerably reckless. Further, I would submit that, the isolation experienced whilst on the lot's premises and his unguided wandering should be considered similarly.
- "exaggerated startle response" – usually demonstrated when the dog 'interrupts' his moments deep in thought, the narrator tends to overreact in terms of his fright responses.
- "problems with concentration" – staying focused is an uphill struggle for the narrator. There are multiple occurrences in *Storaged* where he is either distracted before or during a task. Even in conversation he tends to 'wander off' mentally.

Also demonstrated in showings of PTSD are both Depersonalization and Derealization. Though a closer critique of the narrator's actions would be necessary to pin either of these diagnoses down,

[7] Interestingly enough, whilst the narrator *can* recognize the estrangement 'behaviour' (in his aunt), he seems unable to diagnose his own behaviour (leaving home, non-communication) as being similar.

from my reading it would appear that either, if not both, of these *could* be possible. The definitions alone should be enough to convey my reasoning behind this.[8]

> "Depersonalization [includes] experiences of unreality, detachment, or being an outside observer with respect to one's thoughts, feelings, sensations, body, or actions (e.g., perceptual alterations, distorted sense of time, unreal or absent self, emotional and/or physical numbing)."
>
> (APA, 2013, p. 302)

> "Derealization [includes] experiences of unreality or detachment with respect to surroundings (e.g., individuals or objects are experienced as unreal, dreamlike, foggy, lifeless, or visually distorted)."
>
> (ibid.)

Closing this section, I believe that special attention should be given to the fact that Posttraumatic Stress Disorder "is associated with suicidal ideation and suicide attempts, and […] individuals with [suicidal] ideation [might] eventually make a suicide plan or actually attempt suicide" (ibid., p. 277). Whilst there is no explicit mention of this in either the second-hand testimony I have received or in *Storaged* itself, it is still something that individuals around the narrator should be cognizant of. My only reason for mentioning this point (and it might be considered a 'stretch') is the following from the narrator's account:

> "The dead are inviolable and, for that reason, they're enviable."
>
> (*Storaged*, p. 215)

2.) Major Depressive Episode

In my diagnosis of the narrator's Major Depressive Episode I had to rely heavily on second-hand testimony. His observed behaviour in the workplace, recorded and relayed to me by various of his co-workers there, when coupled with some of the 'remnant' behaviours demonstrated in *Storaged* was enough to satisfy this diagnosis.

Now whilst there might be instances of normal functioning, attaining and, more importantly, maintaining this normalcy requires a greatly increased effort.[9] Perhaps the narrator was able to feign this behaviour at the outset but, as time progressed, this deteriorated markedly, something which his co-workers (and HR staff) were able to detect.

When assigning a Major Depressive Episode diagnosis, we look for symptoms which have been present for "the same 2-week period and [which] represent a change from previous

[8] Both depersonalization and derealization will be touched on in greater detail later in this differential diagnosis. Sadly, this pair of symptoms can be present in a variety of psychological disorders.

[9] This kind of normalcy is usually demonstrated in those individuals suffering from less severe episodes (APA, 2013, p. 163).

functioning" (APA, 2013, p. 162). As mentioned previously, those in close contact with the narrator were able to help construct this before-and-after impression.

Those depressive symptoms (ibid., p. 125) which I was able to extrapolate from the materials available to me, include:

- A persistent depressed mood which is seen daily, all throughout the day. Observed by his co-workers, this depressed mood is demonstrated in the following: "[he] always seems close to tears, you know?" (B. Johnson, personal communication #2, November 05, 2017) and "[he] sounds sad, croaky… You can hear it in his voice" (ibid.).
- Noticeable weight loss – "wasting away… like he was just disappearing, you know? You could see it because his pants started to just hang off him…" (B. Johnson, personal communication #3, November 06, 2017). There was also a decrease in appetite – a result of skipping the lunch hour – gathered by HR (J. Samuels, Tergo HR Incident Slip #208, July 05, 2017).
- Descriptions of the narrator's sloth-like behaviour, his slow-moving and lacking response times, and, occasionally, his jittering (B. Johnson, personal communication #3, November 06, 2017) all point to the agitation and retardation the majorly depressed exhibit. These behaviours were reported by a variety of sources.
- Yoked together with this would be fatigue and energy loss (J. Samuels, Tergo HR Incident Slip #211, July 17, 2017). There are frequent mentions of "{REDACTED} repeatedly sleeping during work hours" (ibid.) or "you know, being close to dozing off? That head-bobing [sic] thing people do" (X. Banda, personal communication #2, October 15, 2017).
- Handled in the same incident slip the narrator's tardiness (likely a result of the above) meant that he was coming in to work later (J. Samuels, Tergo HR Incident Slip #211, July 17, 2017). This resulted in multiple warnings.
- A combination of all of the above symptoms, likely resulted in the narrator's crippled attention span and inability to concentrate on important tasks. (J. Samuels, Tergo HR Incident Slip #212, July 19, 2017)

Ultimately, what drives the point home here, is the following from the DSM-5:

> "[S]ymptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning."
>
> (APA, 2013, p. 125)

When considering a timeline from the above HR slips, I was able to discern that whilst the narrator's behaviour may have been 'atypical' during his first month back at work, it would appear that this went unnoticed (by HR, at least) until slip #204 dated 5 June.

Whilst certain of these MDE symptoms can also be seen during the narrator's time on the lot, only one of them could be considered unique. That is, inappropriate guilt, and although we only 'see' this demonstrated towards the novel's conclusion, I would venture that the narrator has this

sort of thinking at the back of his mind at most times of the day. There is a reason he conceals the truth from his reader.

Based upon the above as well as a holistic reading of the materials related to the narrator's work 'life', my impression is that, because of this outward-facing depression, he was fast approaching some form of workplace intervention. Whilst I do not know the structures in place there (perhaps support *might* have been offered him), I do believe that 'playing hardball' would have eventually been ordered as a means of helping him. In my opinion, mandatory counselling (made 'mandatory' due to the potential threat of job loss) could have served the narrator relatively well.[10]

If, however, this sort of route wasn't an option, the chances of the narrator being terminated would have been very high. I would not like to venture what would have become of him had the opportunity to come to the lot *not* presented itself.

It is my belief that this Major Depressive Episode, as well as the narrator's feelings, thoughts, and behaviours during its course, all played an integral role in the development of the various symptoms around which I have based my differential diagnosis. These manifested symptoms, those outward displays present on the page and available to his reader, are, I think, a result of his attempts to cope with his experiences. They are the end-product of him trying to handle his massive change of life, the repression of his grief, the depressive episode and, following his arrival on the lot, the oddities which he encounters there.

3.) Differential Diagnosis

This differential diagnosis is, sadly, a large one. Whilst I would have liked to better pinpoint what exactly the narrator might be dealing with, I can only venture so far with the resources available. I have tried my best to provide justification for my assertions and, hopefully, will end up creating something which, to another professional, might serve as a suitable springboard into a fuller, more comprehensive diagnosis.

For this portion of my case study, I would like to work on the assumption that the narrator has cleared (obviously to the best of his ability) the aforementioned Major Depressive Episode.[11] To my mind (and evidenced in *Storaged*), the narrator's arrival on the lot is a new lease on life for him and he acts accordingly. He is, however, trying to 'sweep under the carpet' so much psychic trauma that it simply *must* show itself in some other aspect of his observable (as well as mental) behaviour. Along with the symptoms comprising this differential diagnosis, there are what I would call 'remnant' symptoms from the MDE which surface occasionally.

[10] As mentioned earlier, this man *is* a reactive individual. The likelihood of him seeking counseling on his own (or any form of help, for that matter) is incredibly slim.

[11] What with all the distractions which occur during *Storaged*, there simply does not seem to be enough time for narrator to dwell on his depressed feelings.

I have listed my prospective diagnoses in order of their severity – from most to least severe – and, further, in the order I would like to see them eliminated.

3a.) Schizophreniform Disorder

Whilst the symptoms associated with Schizophreniform Disorder and Schizophrenia are similar, I have, due to course length, opted for the former as "the total duration of the illness [Schizophreniform Disorder], including prodromal, active, and residual phases, is at least 1 month but less than 6 months" (APA, 2013, p. 97). What with *Storaged* only covering the events of around a week as well as only having access to second-hand testimony regarding the months preceding this account, Schizophreniform Disorder is the 'safer' diagnosis here. However, in a similar manner to an Acute Stress Disorder diagnosis eventually morphing into one of PTSD, Schizophreniform Disorder itself can be seen as a precursor as "two-thirds of individuals [with Schizophreniform Disorder] will eventually receive a diagnosis of schizophrenia or schizoaffective disorder" (ibid., p. 98).

I gave consideration to this disorder based upon my first reading of *Storaged*. All throughout I couldn't find my way past certain of the happenings on the lot or the explanations which the narrator gives for them. At times I was in complete disbelief.

It was because of this feeling that I started scribbling notes on Schizophreniform Disorder for I feared that there were elements in the narrator's account that simply hadn't happened. These I believe may have been hallucinations on his part.[12] A definition of hallucinations is as follows:

> "Hallucinations are perception-like experiences that occur without an external stimulus. They are vivid and clear, with the full force and impact of normal perceptions, and not under voluntary control."
>
> (ibid., p. 87)

And, whilst we largely have access to what the narrator 'sees' in *Storaged*, there are also those instances where we are told about those things he has heard. I make this distinction because it is widely known that auditory hallucinations are associated with the schizophrenia cluster of disorders (ibid., p. 87). There is an uncertainty to the entire situation unfolding in *Storaged*, an uncanny unlikeliness that permeates the work. Largely, I feel that this is a result of *how* the narrator relates his story and the quirks with which he does so.

As I have mentioned, my first reading of this account left me in doubt of certain occurrences. I was given the impression that some of characters therein were not real at all, instead they were hallucinations which the narrator underwent.

A perfect example of this would be the child. This individual seems to 'appear' during the narrator's sign painting and then subsequently vanishes with the narrator even highlighting this moment: "And there I saw a tricycle but no child." (*Storaged*, p. 76).[13] The aforementioned tricycle that this child leaves behind, which the narrator assures himself (and, by extension, the reader) is

[12] Which isn't to say that they were necessarily lies. His experience of these events would have been 'true' for him.

[13] Also of interest is the notion that this moment also distracts him from his task, splitting his attention.

stored safely in a locker, *isn't* there when Walker demands to see it. She even questions the narrator's recall of the entire event, which leads to anger on the narrator's part. It makes for good storytelling, but bad psychological evaluation.

Similarly, the events which unfold when Terry and the narrator discover Rheese in the 'love nest', too, are so unlikely-seeming that writing them off as a hallucination appears to be the best way forward. The encounter is almost farcical in its presentation.

My conclusion in this regard is that the narrator simply exaggerates his experience. He increases the drama because, at his core, he is a storyteller. From this and what with him using creative license, sections of his account, on first reading, can seem quite fanciful. With the first-person nature of the narration in *Storaged* this problem is inherent. We are at the narrator's mercy as to what we see and do not see, meaning exaggeration is a possibility. Ultimately, the narrator's 'truth' becomes our truth.

A further symptom of Schizophreniform Disorder is that of disorganized thinking which appears most noticeably in an individual's speech. This is demonstrated by "switch[ing] from one topic to another (derailment or loose associations) [as well as] answers to questions […] obliquely related or completely unrelated (tangentiality)" (APA, 2013, p. 88). In its most severe form disorganized thinking severely impairs the individual's ability to communicate. However, in the narrator's case, an appearance which I might term 'mild', there are only a few examples which are worth noting:

> "I watched a detective show once," I said.
>
> (*Storaged*, p. 15)

In this instance, it eventually becomes clear that the narrator is looking for Walker to talk him through the work she is doing. It is somewhat peculiar that he does not complete this thought but, what is more worrying, is that this moment occurs whilst the pair are in the presence of a dead body.

> "The word 'abracadabra' roughly translates to 'I create as I speak'," I said. "Did you know that?"
>
> (ibid., p. 62)

Having located a hidden door, rather than relay this information to Walker, the narrator inserts this piece of trivia.

> "Same for Labradors though. I mean, we're nowhere near Canada." I paused, waited for a response. "That's where Labrador is."
>
> (*Storaged*, p. 137)

Similar to the above, in the midst of a quite heated discussion with an as yet unknown individual, the narrator divulges this information.

I would not be averse to writing this symptom off completely but, as the DSM puts it:

> "Less severe [instances of] disorganized thinking or speech may occur during the prodromal and residual periods of schizophrenia."
>
> (APA, 2013, p. 87)

The narrator does have a noticeably 'odd' way of speaking. His language use, word choice, syntax and even the places where he employs pauses demonstrate a very different manner of communicating. By extension, this speech is likely a reflection of his thinking.

This could perhaps 'slip' past the reader, though only if the narrator was the sole speaker in *Storaged*. Alongside other talkers though, the narrator's speech quirks become far more noticeable. And whilst it might not be fair to call his speech 'disorganized', it could be worth giving consideration to the fact that it is so overly organized that the same result has been achieved.

Whilst this disorganized thinking and speech is somewhat troubling from a psychological perspective, the distinctive speech pattern it results in is wonderfully nuanced in terms of storytelling. It makes for interesting reading and is a clear demonstration of the narrator impressing himself on the work. I would also venture that because of the narrator's other quirks, his speech simply comes across as innocuous.

Another negative symptom which the narrator displays is that of diminished emotional expression. The 'diminishing' occurring here relates to a noticeable reduction in emotional expression (specifically in the facial area), body language output, eye contact and intonation (pitching, etc…) in speech (ibid., p. 88).

What I find most interesting in this regard is that whilst the narrator *does* demonstrate this sort of behaviour in places, he also seems to notice these occurrences and, afterwards, even tries to correct them. He voluntarily supplements conversations with gestures he believes might be necessary. He seems to perform facial expressions when the appropriate moment arises.

Further, there is even a seeming incredulity which the narrator displays when it comes to the use of body language by other individuals. His thoughts on the subject illustrate this particular point:

> "People always seemed to do that. Just gesture meaninglessly. When it's clearly not needed, they'll perform these non-verbal duplications. Filler stuff."
>
> (*Storaged*, p. 43)

Again, a demonstration of his being critical of others but, once more, overlooking himself. Further, the kinds of gestures which the narrator is referring to here are likely not always mentioned in most fiction texts, yet he has taken the time to 'call them out' in his roundabout manner.

Avolition and asociality are also twin symptoms which should both be scrutinised in the narrator's case. Avolition: "[the] decrease in motivated self-initiated purposeful activities" (APA, 2013, p. 88) and asociality: "the apparent lack of interest in social interactions" (ibid.) often appear in tandem, each feeding the other.

There are many things in need of doing around the lot. The narrator tells us as much, yes, but as readers we can also assume various maintenance issues have cropped up during Priscylla's three-month absence. Managing the place comes with its responsibilities, all of which the narrator seems only too ready and willing to shirk – a likely result of his avolition.

My thoughts surrounding the asociality thread are linked largely to the narrator's behaviour *prior* to his arrival on the lot. From testimony of co-workers a picture is painted of the narrator in which he 'once was'. He *once was* a talker; he *once was* a question-asker; and so on and so forth.

On the lot, the narrator *is* faced with multiple social situations. These are, it seems, unavoidable, a 'part of the job', one might say. Now, whilst this might seem counterintuitive when bearing the above in mind, I would like to venture the following as counters:

1.) the narrator never once leaves the lot and,

2.) throughout his time there, he never bothers to call, mail, or in any way contact *anyone* from his 'past' life. He simply does not seek out this social interaction.

Furthermore, whilst he may not necessarily avoid interactions on the lot, he does demonstrate a disinterestedness in speaking. Typically, avolition leads to "limited opportunities for social interactions" (APA, 2013, p. 88) and, whilst *Storaged* is packed with these kinds of interactions, there is much of the narrator's time which simply *isn't* accounted for. My fear is that during this downtime (and yet another indicator of avolition) is that he might be "sit[ting] for long periods of time and show[ing] little interest in participating in work or social activities" (APA, 2013, p. 88).[14]

As above with my diagnosis of PTSD, it is known that Schizophreniform Disorder sufferers might also demonstrate moments of depersonalization and derealization (APA, 2013, p.101). The examples below highlight 'outside-observer' behaviour, detachment, and unreality. All of which is demonstrated by the narrator's tendency to refer to himself as 'myself'.

"At just after ten o' clock I had managed to misplace myself."

(*Storaged,* p. 1)

[14] That being said, I have *not* been able to account for the time the narrator would have needed to write his account. There is a possibility that his downtime might have actually been writing time.

"I didn't feel myself."

(*Storaged*, p. 137)

"The situation being what it was and, myself being in it, I considered what someone else might do in a similar position. Being who I was meant I was of no use to me."

(ibid., p. 187)

The phrase 'I found myself' or variations thereof (asterisked) appears multiple times within *Storaged* (pp. 4, 14, 24*, 31, 38, 67, 72, 74, 110, 188, 189, 195*, 203*). In isolation, this turn of phrase seems unimportant – simply another quirk of this individual – however, due to its frequency, this becomes something worth scrutinising. There is an element of 'removal' here which the narrator demonstrates. Whenever I see the word 'myself' employed, it is as if the narrator externally witnesses himself doing something, a worrying exteriority.

There is also this sense that if the narrator 'finds' himself doing X-Y-Z behaviour then where was he located *prior* to this moment?

Further examples include:

Eventually, I lost track of myself, of where I'd come from.

(ibid., p. 189)

I thought about dominoes and saw myself standing at the unfortunate end of a lengthy sequence of them.

(ibid., p. 49)

Despondency was setting in and I could feel myself getting lost, slipping.

(ibid., p. 51)

I was at the edge of myself [with anger] and the chance of me giving the bottle a good shake was heightened.

(ibid., p. 52)

Other instances of this behaviour include the narrator telling himself information and instructions; seeing himself doing something or being somewhere; or feeling himself undergoing certain emotions or experiences.

These convoluted action explanations point to a 'distance' which the narrator appears to have achieved from his own self. This results in a first-person narrative which has a slight over-the-shoulder feel because of the: 'I' verb 'myself' writing formula that the narrator employs. Ultimately, 'I found myself' could just have been 'I was in the locker'; 'lost track of myself' become 'I was lost'. This language almost seems to demonstrate an indefinite-ness to the narrator's behaviour. Again, an interesting quirk of this writing style; a potential identifier of psychological disorder.

This self-loss which the narrator demonstrates is worrying as it sometimes leads to him entering potentially dangerous situations: "Following this came the realisation that I had my hand in

the dog's mouth." (*Storaged*, p.190). Whilst it does create a tense moment from a storytelling perspective, it is troubling to think that the narrator can be unaware of himself to this extent.

Another point of interest would be the memory impairment one typically sees with this disorder. This "[includes] decrements in declarative memory, working memory, language function, and other executive functions, as well as slower processing speed" (APA, 2013, p. 101). Throughout *Storaged*, we are given the impression that the narrator is largely 'in control' of his own memory. Even at the end, when he refers to his memories of the past, he says "I'd hidden everything from myself" (*Storaged*, p. 212), almost taking ownership over this process. However, when faced with the inability to recall his memories, he sometimes undergoes considerable distress. His apparent 'need' to place himself in one of Elizabeth's photographs (*Storaged*, p. 101-103) is an activity which reads like mental scrabbling. He appears to notice these 'spaces' in his memory and, impulsively almost, he acts to fills them. This results in a desperate desire to 'make right', to *be* there and, when he cannot satisfy this desire, his course of action is to destroy the photograph itself.

Also worth noting in the Schizophreniform Disorder diagnosis are "deficits in the ability to infer the intentions of other people [as well as] attend[ing] to and then interpret[ing] irrelevant events or stimuli as meaningful" (APA, 2013, p. 101). The narrator demonstrates a clear intention-blindness, frequently failing to understand *why* people around him do the things they do. Whilst he does make attempts to grasp the reasoning behind these moments, he largely ends up writing them off as being odd behaviours:

> "People always seemed to do that. Just gesture meaninglessly. When it's clearly *not* needed, they'll perform these non-verbal duplications. Filler stuff. The physical movement for 'um', the hand gesture for 'er'."
>
> (*Storaged*, p. 43).

What the narrator 'confesses' to here is a misunderstanding of basic body language. Rather than acknowledge the fact that these movements strengthen communication, he instead finds frustration in them. If a person's use of body language is an unconscious attempt at strengthening their communication, the narrator misses this fact completely.

What makes this important is the fact that readers of first-person narratives 'rely' on their respective narrators to act as guides – at least to some extent. There is a degree of reliance upon the narrator to do some of the interpretation work surrounding gestures and emotions which other characters may exhibit or explaining them in enough detail so as to convey their meaning without doubt.

Similarly, the narrator's encounter with the unnamed individual (ibid., p. 132-138) satisfies a diagnosis of this intention-blindness. Whilst it isn't explicitly stated (likely because the narrator himself does not know), this man *is* the missing child's father. Having recently met with Terry, the narrator ends up mistaking this individual for a thug trying to track the man down. Now, whilst there are clear indications of *who* this person is: Walker's earlier mention of the child's father being "a bit of an amateur detective" (ibid., p. 61); the man's multiple questions, one of which even *includes* cars

speeding on the road outside the lot (*Storaged*, p. 134); and the emotion displayed towards the end of this encounter, the repetition of the "where is he?" question (ibid., p. 138), the narrator completely fails to realize who this individual is. Whilst this in itself is shocking to read, what compounds this feeling further is the fact that the narrator does not realize that this individual is likely carrying a firearm (or miming same):

> "I watched him fumbling with his coat, the fluster with which he did it. […] Whatever he'd found within his coat wouldn't come out, his hand jerked back and forth, made attempts to remove it, but to no avail."
>
> (ibid., p. 137-138)

There is also a moment in this encounter where the narrator refers to his own attention span (and its failing): "There were a lot of questions coming. More than I was used to and I could feel my attention slipping. I tried my best to hold focus" (ibid., p. 135). Further, a noticeable tangential moment (one of the indicators of disorganized thinking) when he tries to insert a fact concerning the link between Labrador dogs and Labrador, Canada (*Storaged*, p. 137). The situation does not call for this sort of 'sharing' but the narrator cannot seem to help himself.

Whilst there is a 'beauty' to this moment from a storytelling perspective – that of an opportunity for the reader to discover this person's identity before the narrator himself – it does not bode well for this individual's mental health.

Sadly, I fear that if I linger on this particular disorder for too long, I will likely find more examples to satisfy its diagnosis. Rather, it would serve our purposes better for me to press on with my other findings.

3b.) Obsessive-Compulsive Disorder

> "OCD is characterized by the presence of obsessions and/or compulsions. Obsessions are recurrent and persistent thoughts, urges, or images that are experienced as intrusive and unwanted, whereas compulsions are repetitive behaviors or mental acts that an individual feels driven to perform in response to an obsession."
>
> (APA, 2013, p. 235)

Now, whilst the narrator does not draw much attention to either obsessions or compulsions in his account of events, I still feel that this is a disorder worth giving attention to. Obviously the number of obsessions as well as the frequency of resulting compulsive actions is important when looking at any of the disorders within the OCD constellation, however, because the narrator tells his own story, the likelihood of seeing all, if any, of the above is made particularly difficult. Thus, we have to scrutinize his language.

What I have elected to do, then, is highlight those instances in his account which might warrant further investigation. These examples, I believe, appear to have the hallmarks of obsessive-compulsive behaviour. Namely, "repetitive behaviors or mental acts that the individual feels driven

to perform in response to an obsession" (APA, 2013, p. 237) and "[these] behaviors or mental acts are aimed at preventing or reducing anxiety or distress." (ibid., p. 237). This one-two sequence, the distress of obsession coupled with the relief of satisfying the compulsion stemming therefrom, is seen frequently throughout *Storaged*.

When unable to satisfy his desires, we do get a hint of the frustration which the narrator faces. Typically, when faced with any situation where he *cannot* perform the 'corrective' behaviour, he will either flee or make an attempt to distract himself. From the text, please consider the following examples:

- On reaching the unexpected 'end' of the manuscript (*Storaged*, p. 34-35), the narrator experiences negative feelings surrounding this 'imperfection' and, so, begins a monologue detailing why these kinds of things *shouldn't* happen. He then goes 'internal' and unpacks a flurry of thoughts.

- The bed seen in Rheese's locker is another difficulty which the narrator faces: "I saw the bed and, unmade as it was, heard it crying out for my attention. Even though it disgusted me greatly, it *deserved* [emphasis added] to be made" (*Storaged*, p. 170).[15] The narrator know he cannot touch the bed, likely assuming this will bother Rheese and, as such, his reaction is to instead dive deeper into his conversation with her, an attempt at distracting himself.

- When 'Stubbs' and 'Stringbean' visit the premises to collect the corpse, the narrator must turn on the light in the locker. Whilst the switch-flicking he does here isn't 'severe', what is interesting is the narrator's need to tell the reader about it.

> I flicked the switch up and down.
> And then up.
> And then down again.
>
> (*Storaged*, p. 24)

- In the tool shed, after reading the words 'new and improved' on the drill's box, the narrator's mind wanders into 'unwanted' territory. Again, in a moment centering around perfectionism, he simply cannot overlook the mutual exclusivity of the phrase on the box. Interesting here (unless he's being hyperbolic) is the somatic response "And it made me itch" (ibid., p. 39) *before* he tries to chase away his thoughts.

- The exchange regarding the move's inventory and the spelling errors which it contains is another big bother for the narrator. He has to "recover" (ibid., p. 45) from what he sees (implying a definite stress here) and when he is told that spelling does not matter he has to reassure himself

[15] This 'heard it crying out' is, one assumes, a bit of creative license on the part of the narrator. Hopefully he is just personifying the bed rather than actually hearing it.

(albeit internally) that it does – "It *mattered*. Of course it did" (*Storaged*, p. 45). Whilst this reaction can read as humorous, in the light of the narrator's past it is somewhat more sinister.

- The narrator's desire to complete the questionnaire he finds also stuck out for me. Whilst his need to do so seems trivial, he actually appears to identify an 'urge', linking it to an earlier part of his day: "probably due to the earlier bout of fervent form-filling" (ibid., p. 71).

- The narrator's behaviour regarding handshakes (and physical contact in general) could be indicative of a contamination-related fear. The obsession here is cleanliness whilst the compulsion is avoidance of 'contaminated' objects.

  The narrator seems quick to notice the hygiene aspects of any potential encounter: "He stretched out a hand – oily – and I shook it" (ibid., p. 121) and, in the following example, even illustrates the avoidance behaviour he'd like to take:

  > Internally I cringed, but I took the pencil anyway, making a big show of how 'at home' I was when it came to handling it, *even* the chewed bit.
  >
  > (ibid., p. 131)

  From some examples we even get the impression that his past actions were to avoid physical contact completely:

  > He placed a hand on my shoulder – which I didn't shy away from – and leaned closer.
  >
  > (ibid., p. 159)

  Also, whilst there are a variety of handshakes, the narrator does go through with these. It is important to note, however, that all these handshakes appear to be mandatory in nature. For the narrator there appears to be some kind of social contract which he is adherent to. When meeting with Rheese and having to shake her hand, he is both "duty-bound" (*Storaged*, p. 166) and "obliged" (ibid., 171) to do so. When Pepper visits the lot and greets the narrator – "Thrusting his hand towards me… which I shook" (ibid., p. 174) – the use of ellipses in capturing this moment seems to demonstrate a significant pause on the narrator's part, as if he is considering a way out of having to make this contact.

- There are even moments where the narrator identifies his own urges and then resists them: "I wanted to run my hand over a section, just to feel the texture beneath my fingertips... but I didn't." (p.148)

Another point worth noting is that individuals suffering from OCD hold dysfunctional beliefs which can include: a tendency to overestimate threat; intolerance of uncertainty; and the need to control or monitor their thoughts (APA, 2013, p. 238).

For each of the above, there are demonstrable occurrences within the text. Threat overestimation is seen when the narrator mistakes the dog for a wolf (*Storaged*, p. 3). This

"dangerous predator" (*Storaged*, p. 3) as he calls it, immediately gets him thinking about plans of action to help him survive. When his torch dies, the subsequent description, fueled by the narrator's imagination, paints us a compelling (yet horrific) picture and whilst it makes for interesting reading, it *is* an overestimation first and foremost.

The narrator's intolerance regarding uncertainty is demonstrated most clearly when he finds himself lost whilst in pursuit of the dog:

> I had nothing to go on, felt unfamiliar where I was. Out here, where nothing seemed familiar, I felt lost… but in there–
>
> "In *there*," I said, "those are my things. They belong to me, they're… familiar."
>
> I unlocked the door and, as I lifted it upwards, I felt relief at having located myself like this, felt better now that I knew where I was. I'd stabilised myself.
>
> (ibid., p. 192)

Here the narrator's uncertainty stems from not knowing where he is and this being lost results in a need to feel 'found'. This feeling is one which the narrator himself creates by simply heading into a nearby locker. The satisfaction when opening the door in the above quote is three-fold: 'felt relief', 'felt better', and 'I'd stabilised myself'. It is worth noting that "[although] compulsions are not done for pleasure, […] some individuals experience relief from anxiety or distress" (APA, 2013, p. 237).

When it comes to thought control, examples thereof are noticeable throughout the work. The most prominent of these occurs directly after the narrator's call from Rheese (*Storaged*, p. 173). My feeling here is that during this call and likely because he assumes that Rheese is talking on the phone *whilst* driving, that memories of his past and the car accident are brought to the surface. These unwanteds (the italics I have added in the quote below) result in an almost-immediate 'escape' action from him:

> I placed my head in my hands and thought, was *forced* to think, was *forced* to re–
>
> But I *wanted to stop* thinking so I started working on the database.
>
> (ibid., p. 173)

The narrator's odd behaviours should, compulsive or not, be given further consideration. In the same way I think these should be scrutinized, so too should his various avoidant behaviours.

In closing this portion of the differential diagnosis, I think it is important to call out the distinction between Obsessive-Compulsive Disorder and Obsessive-Compulsive *Personality* Disorder as, typically, the two tend to be conflated. There is a definite 'sameness' in their portrayal across various media. Whilst the two do share some similarities, there are enough variances between the two disorders to warrant their different definitions and, should a patient satisfy the conditions, a diagnosis of *both* OCD and OCPD can be made.

As the DSM puts it:

> "Obsessive-compulsive personality disorder is not characterized by intrusive thoughts, images, or urges or by repetitive behaviors that are performed in response to these intrusions; instead, it involves an enduring and pervasive maladaptive pattern of excessive perfectionism and rigid control."
>
> (APA, 2013, p. 242)

3c.) Dissociative Amnesia

The final disorder which I would like to consider falls under the dissociative cluster. Interestingly enough, the test which the narrator finds in the medical locker and then subsequently completes on returning to his office (*Storaged*, p. 72) is, based on the statement – "It is absolutely essential that I do some things in a certain way" (ibid.) – which he reads aloud, actually a psychological test *for* dissociation. This is the Wessex Dissociation Scale (Kennedy, Kennerley, and Pearson, 2004), to be more precise. This test checks both incidence and frequency of dissociative experiences in an individual and, depending on its result, can assist in screening for multiple disorders within the dissociative cluster.

This particular cluster is known for its "disruption of and/or discontinuity in the normal integration of consciousness, memory, identity, emotion, perception, body representation, motor control, and behavior" (APA, 2013, p. 291). Feelings of depersonalization and derealization (first mentioned in section 1 of this assessment) also fall under the purview of the dissociative cluster. Whether appearing singly or in combination these symptoms can be hugely disruptive to an individual's overall functioning.

Now, whilst the narrator *does* tally his score, the missing 'key' is necessary to better explain his results. Sadly, whilst he does do this tallying, he does *not* reveal his final total.[16] His answered test which I assume exists somewhere on the lot would be a great resource if it could be viewed by a qualified professional.

My main reasoning for the inclusion of a disorder from the dissociative spectrum is because these disorders often crop up in the lives of those individuals who have suffered through traumatic incidents. (APA, 2013, p. 291). And, what with PTSD as a precursor, it makes even greater sense.

Now, with a specific focus on the narrator's memory, Dissociative Amnesia is the disorder I would like investigated further. At the heart of this disorder lies "[the] inability to recall autobiographical information" (ibid.). Appearing in various forms, this amnesia is sometimes localized (focusing on a specific event); selective (key details of one particular event); or generalized (a person's identity or history) (ibid.).

As a rule of thumb, the failure to recall demonstrated in Dissociative Amnesia is considered "inconsistent with *normal* (emphasis added) forgetting" (ibid.). I have emphasized the word 'normal'

[16] If my recall serves: if the tallied total, after being divided by 40 (the number of items in the test) is *higher than* 1.9, then the subject warrants further study.

to illustrate the fact that whilst the narrator has an active role in his own forgetting – namely, his attempts at 'burying' his past as a means of forgetting it – this would *not* qualify as normal.

In his account of the events which transpire over those few days on the lot, there are a plethora of memory 'moments' which the narrator demonstrates. Due to the scope of *what* he has trouble remembering, it seems sensible to propose amnesia that is part-localized, part-specific. Interestingly enough, the narrator *does* display the embarrassment and confusion psychologists 'expect' when faced with these symptoms (ibid.). Typically, the narrator's reaction to realising one of these absences of memory is gross overcompensation. He will fabricate entire narratives to fill any 'gaps' he finds.

Consider the following:

The model ship which the narrator is given – found amongst his possessions – *is* his. He reveals this to the reader much later on in the account (*Storaged*, p. 213) and, with his earlier mention of "younger hands" (ibid., p. 51) the likelihood that he oversaw his son building this particular model increases.

When initially handling the ship it is a foreign object, something he simply cannot remember and, when faced with this reality, he begins to more closely scrutinize the object as if attempting to figure out what exactly can be done with it. The more he handles the ship the closer he comes to remembering it and, as demonstrated in one particular moment, his thought of: "*I could never do this sort of thing, not alone"* (ibid., p. 51), I would submit that he is on the verge of recalling this object (either consciously or unconsciously) and, as a form of defense against this painful resurfacing, he begins to belittle the ship itself and its building process. The builder thereof becomes "just some sap" (ibid., p. 52) and, once sufficiently attacked, the narrator then retells the Ship of Theseus in what I believe is an effort to move away from this moment entirely. It is a distraction. It makes for interesting reading but, ultimately, it is an avoidant behaviour on the narrator's part.

Linked to the above, I believe, is the fact that individuals suffering from Dissociative Amnesia tend to "minimize the importance of their memory loss and may become uncomfortable when prompted to address it" (APA, 2013, p. 299). Though the narrator is essentially prompting himself into recalling a memory he cannot access, his reaction of 'minimizing' the ship and, by extension, the memory tied to it, helps him deal with his uncomfortable feelings. As readers we may not 'see' these uncomfortable feelings but the reaction – the narrator's aversion to them – is clear enough. From this, we can make assumptions as to what exactly he might be feeling.

The above is a clear example of an individual dealing with localized amnesia. The minimization of memory loss, the uncomfortable feeling(s), and the subsequent aversion, are all present in the creative work. The narrator's discomfort – though often veiled by his storytelling – is present. What does come to the fore in the writing though are these attempts at minimization.

Another, and more alarming, memory moment occurs when Rheese returns to the lot after being excommunicated the night before. From my reading of the account, her appearance is made clear to both Terry and the narrator during this encounter, so when he fails to recognize her the following day, it is worrying. She offers multiple cues as to who she is: "I was… uh… here yesterday", "I was in the locker", and "I was *in* the locker last night" (*Storaged*, p. 165), yet the narrator fails to follow-up

on any of these. In all likelihood, the reader recognizes who this is *before* the narrator does. Again, fun for the reader to realize this before him, but worrying that the narrator himself fails to do so.

And although Rheese is quick to query this forgetfulness, the narrator is even quicker to move the conversation away from this and onto her reasons for being there.

Now, whilst amnesia sufferers are usually able to notice their 'lost time' or memory gaps, those individuals with dissociative disorders are largely unaware of their amnesias (APA, 2013). Typically, awareness of this amnesia comes "only when personal identity is lost or when circumstances make these individuals aware that autobiographical information is missing (e.g., when they discover evidence of events they cannot recall or when others tell them or ask them about events they cannot recall)" (APA, 2013, p. 291).

The narrator of *Storaged* falls into a bit of a grey area regarding the above. Information regarding his timekeeping is something which he is in control of, so what the reader knows about his experiences are what he has chosen to share. What may appear as a gap in this individual's memory, may just as likely be a natural gap in the storytelling process – those things we assume are occurring that we do not always need to be told. We cannot assume that because the narrator does not tell us about his ablutions, eating, sleeping, etc… that these things are not happening or that they are 'lost' to him. When considering the difference between these two types of gaps, we have to pay particular attention to other aspects of the character so as to understand their true nature.

I feel that whilst the narrator is aware of his memory issues, he doesn't understand their true extent. He has, I believe, a blanket understanding – that is, 'something is missing' – but he has lost the specificities. The ship is a prime example of this.

Whilst dissociative individuals typically demonstrate an "amnesia for their amnesia" (APA, 2013, p.291), in the case of the narrator, when the story world around him or the characters therein demonstrate this absent past, his awareness of his own faltering memory grows.

Obviously further examples of the narrator's impaired memory exist. It is important to note, however, that what with this being the narrator's account of events, anyone reading through this effectively finds themselves in the same boat as this individual – *unaware of the same things which the narrator himself is unaware of*.

<u>Prognosis</u>

Had the events in the narrator's account culminated *without* the arrival of Walker and the subsequent change to the present tense, I would have had a far more negative impression of the narrator's eventual 'outcome'. If we had simply read the narrator's mammoth recall of the past, his feelings surrounding it, seen then his one-sided discussion with the dog, and then been shown the curtain closing, I would have considered the narrator considerably endangered because "suicidal behavior may be a particular risk when the amnesia remits suddenly and overwhelms the individual with intolerable memories" (APA, 2013, p. 300). This huge reveal, the cathartic unburdening which

the narrator undergoes, brings with it a torrent of emotions and thoughts, which can be both positive and negative. If we do not have some idea of what happens *after* this moment, then the reader is simply left to make assumptions.

Whilst I cannot venture that his time spent on the lot and the various encounters experienced there were what eventually triggered this resurfacing of the past, it is likely that this might be the case. Again, with greater access to this individual, more could be known.

The 'end' of *Storaged*, that is, the narrator's incredible outpouring of not only his self but also what troubles him, I would say bodes well for his future. The immediacy and proximity of Walker *to* the narrator, her willingness to see him and, dare I say, 'check up on him', will prove integral to his eventual mental recovery.[17]

Furthermore, the open-endedness of Walker's return to the lot – an almost 'what happens next' surrounding her intentions behind coming back – is interesting. Intrigued, I am left reading between the lines *for* something more between this pair, as the formation of a new relationship, especially one of this nature, would be a big step for the narrator. It isn't necessarily explicit in the text but it seems to be the case.

Whilst the final moment – the smile shared between these two – is sickeningly 'cute', it is shown to the reader in the manner which the narrator intends it to be. For anyone worried about what might happen to him, this occurrence leaves the narrator leaning towards a more positive outcome, allowing readers a cautious optimism as to his future.

The switch to present tense demonstrated in this last section is stark and seems to point to a renewed sense of enthusiasm from the narrator regarding his past. He has effectively moved *out of* the retelling of these events: that is, his past and the urge to 'escape' from it and, now in the present moment, with it out in the open he can begin to deal with it.

My impression is that the MDE which the narrator suffered through has been, largely, cleared. Regarding the PTSD, it is likely that he will always feel the influence which the past has over him. There can be no 'complete' overcoming of such trauma, no form of forgetting these memories which could be considered 'healthy'. The memories and the feelings surrounding them though, *should* get the processing and attention which they deserve. Thankfully, the way the narrator discusses these seems to indicate a positive attitude towards doing so.

For the differential diagnosis, the abovementioned 'constellations' of symptoms which the narrator displays are, as previously stated, not enough to warrant a complete disorder diagnosis. Due to their inconclusiveness, it is my honest opinion that these should be viewed as 'bad habits' rather than precursors to something more serious.[18] They should be watched, if possible. Overall, my feeling is that, should the narrator continue along the revelatory path he appears to be on, if he has

[17] Considering the importance of this individual and the frisson which this pair exhibits, I find it uncanny that the narrator does not bother naming her.

[18] Unless, of course, further symptoms *do* present themselves either through 'new' evidence or previously unrevealed sources of information.

the continued support of Walker, and if he can perhaps be a bit more 'aware' of himself and his behaviours, he will most likely overcome the grief which he is now facing up to.

By all appearances, it would seem that the narrator *is* aware of what lies ahead of him, both in terms of the grieving process and coming to terms with his past. He acknowledges that not only is this going to be a difficult undertaking, but that there is also a large amount of 'work' to be done. His change in attitude, evidenced by the line: "I thought about my time here, how goalless I'd been and how nonplussed I'd been about it" (*Storaged*, p. 217) signals a before-and-after mindset wherein the narrator appears to *know* that his previous actions were not beneficial to him and, going forward, how he should behave so as to counter this.

If it were possible for me to directly interact with the narrator of *Storaged*, I would offer the following guidance:

- Make earnest attempts to be more aware of your own behaviours as well as of the affect that these have on the people around you.
  How would you feel if somebody behaved in a similar manner as you do, *to* you?

- Feel free to ask for help (though not just in menial tasks), from not only professional sources but also from the various people you encounter.

- Rather than 'acting' your emotions of gestures, let yourself be natural. If you were not going to do something, do not do it. Rather be who you are than have to do the 'upkeep' associated with being somebody else.

- Following from the above, when doing something (any behaviour), I would urge you to consider the 'why' behind your actions. As in, what has motivated you to do this particular thing? Being more aware of your own motives, even for trivial-seeming tasks will help greatly.

- If something does make you feel uncomfortable and puts you in a mindset where you want to avoid it or flee from it, after gaining some distance, consider the following:
  1.) why do I feel this way?
  2.) how can I best deal with these feelings?

- If (and only if) you are feeling up for it, try to make contact with people from your past.

- And, finally, though your past is a painful place, it should, as Walker says, be given the attention it deserves. This might be the sort of healing which unfurls over a long period of time but it *should* be done.

Conclusion

In closing, I hope this report has been not only comprehensive but also informative. It isn't often that a character as multi-layered (or as interesting) as this narrator presents and, thus, I have taken great pleasure in creating a case study exploring him.

As I mentioned, having to create a case study on a fictional character is a first for me but this has been an endeavour I enjoyed. I find the narrator to be an incredibly complex character, one that I would be only too happy to discuss further and, if possible, to 'meet' with in-person if this could be organized.

Should such an opportunity arise, you are more than welcome to contact me using whichever of the means I have provided you.

References

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.

Bowman, D. A. W. (2018). *Storaged*. Unpublished manuscript.

case history. 2018. In Dictionary.com
Retrieved February 15, 2018, from http://www.dictionary.com/browse/case-history

case study. 2018. In *Dictionary.com*
Retrieved February 15, 2018, from http://www.dictionary.com/browse/case-study

catharsis. 2018. In *Dictionary.com*
Retrieved February 15, 2018, from http://www.dictionary.com/browse/catharsis

Deft Insurance, insurance report (2017). 'Information gathered regarding case AL/01'. Johannesburg, South Africa.

differential diagnosis. 2018. In Dictionary.com
Retrieved February 15, 2018, from http://www.dictionary.com/browse/differential-diagnosis

Kennedy, F., Kennerley, H., and Pearson, D. (2004). *Behaviour Therapy and Experimental Psychiatry*. United Kingdom: Routledge.

prognosis. 2018. In Dictionary.com
Retrieved February 15, 2018, from http://www.dictionary.com/browse/prognosis

Samuels, J. (2017). Tergo, HR Incident Slip (Report #204). Johannesburg, South Africa.

Samuels, J. (2017). Tergo, HR Incident Slip (Report #206). Johannesburg, South Africa.

Samuels, J. (2017). Tergo, HR Incident Slip (Report #208). Johannesburg, South Africa.

Samuels, J. (2017). Tergo, HR Incident Slip (Report #211). Johannesburg, South Africa.

Samuels, J. (2017). Tergo, HR Incident Slip (Report #212). Johannesburg, South Africa.

Van Reenen SAPS (2017). 'accident report, 27.02.17' (docket #AXX1). Johannesburg, South Africa.

Van Reenen SAPS (2017). 'accident report, 02.03.17' (docket #AXX3). Johannesburg, South Africa.

A note regarding those 'non-recoverable' sources (e-mails, phone call transcripts, etc…):
I would be more than happy to make these available if needed. Whilst I have pored over these, chances are that a fresh set of eyes may be able to extract more from them. I would have to double-check with each individual whether they're comfortable with these communiques being revealed but I am certain this would not be an issue. Should you need more from me, please do not hesitate to reach out to me.