The Relationship between Consciousness and Unconscious Processes: A Psychoanalytic Perspective

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 Abstract

 The author argues for the inclusion of psychoanalytic data in studies of consciousness and unconscious states. Contrary to common assumptions, contemporary psychoanalysis does not propose a competing scientific theory, but represents a specific form of practice involving an intersubjective dialogue. Although analytic schools advance competing theories, their concepts derive from attempts to explain common clinical phenomena of practice. Three areas for exploration are suggested: the concept of unconscious motivation, the fluctuationg border between conscious and unconscious motives and desires, and the centrality of language for reflective, intentional states.

 In this paper, I argue for the relevance of psychoanalytic observations for understanding the relationship between consciousness and unconscious processes. Psychoanalysis relies on both concepts, closely linked in practice, and has as its traditional purpose to expand conscious self-knowledge and the range of personal choice. With few exceptions, however, research on consciousness mostly neglects the psychoanalytic literature for a mixture of partially valid empirical and conceptual reasons. Cognitive neuroscience has explored aspects of what psychoanalysis traditionally considers unconscious motives, while generally rejecting its theories, but tends to neglect the affectively charged and significant personal issues at stake clinically. Moreover, contrary to the common conception (and Freud's early ambitions), contemporary psychoanalysis does not advance a competing scientific theory of mind but consists of a set of observations and practices. Its concepts have been derived principally from the problems raised by clinical experience. Nonetheless, psychoanalytic practice offers advantages over experiments or introspection for understanding mental life. I focus on three principal areas: unconscious motivation, the fluctuating border between conscious and unconscious, and the centrality of language for reflective, intentional states.

Unconscious motivation:

 By way of brief review, Freud's fundamental thesis held that conscious mental life begins in unconscious processes that go through a series of elaborations and revisions before reaching consciousness. This might now be considered a truism. Of course, he believed that these processes were in the first place organic events. Yet because they occur in continuity with consciousness and, at a certain point, involve psychological considerations like motives, intentions, and meanings, Freud found it artificial to reduce the unconscious to physical terms. His summary of this perspective merits being recalled:

"If anyone possessing that knowledge nevertheless holds to the conviction which equates the conscious and the psychical and consequently denies the unconscious the attribute of being psychical, no objection can, of course, be made, except that such a distinction turns out to be highly unpractical. For it is easy to describe the unconscious and to follow its developments if it is approached from the direction of its relation to the conscious, with which it has so much in common. On the other hand, there still seems no possibility of approaching it from the direction of physical events. So that it is bound to remain a matter for psychological study." Freud, S. (1913, p.178).

 Freud did not attempt to explain the phenomenon of consciousness, which he characterized as "inexplicable" (1925, p. 227) and "a fact without parallel, which defies all explanation or description" (1938, p. 157). He considered consciousness a kind of sensory or perceptual organ evolved for registering external and, especially, internal events (1933). Because these events cannot be directly observed, Freud proposed a theory of unconscious drives and fears activating the mental system. In this paper, I focus on the observational data that suggests unconscious processes, not Freudian theories of "the unconscious."

 The clinical method Freud developed combines two aspects: attentive listening to an analysand's flow of speech and encouraging the expression of fleeting images, feelings, and thoughts that would ordinarily be ignored as distractions. Although this method necessarily implies general concepts, its principles can be cast much more simply than his elaborate metapsychology[[1]](#footnote-1). The goals include expanded self-awareness of personal motivations and conflicts, freer expression of thoughts and feelings, and wider choices of behavior. Examples of all three outcomes are common in psychotherapeutic work. For example, a client recognizes a repetitive pattern to her relationships; memories that she has described blandly become charged with intense, destabilizing emotions; and she makes decisions about work and relationships with which she has been struggling for years. Something about the psychoanalytic process often leads to these results, which have been described for many years. Probably, the help of other disciplines will be necessary to advance our understanding of how they occur.

 The major change in analytic practice over the past thirty years has been a heightened attention to the process of the two-person exchange itself. Although clinicians remain focused on what clients say and do, they have learned to attend more closely to their own role in what transpires in sessions and to use their thoughts and feelings as sources of guidance. In fact, clinical psychoanalysis deserves to be redefined as an interactive, intersubjective process (rather than a medical model of treatment)[[2]](#footnote-2). The analysand's more or less spontaneous speech emerges in what Baranger and Baranger (2008) called a "bipersonal field." This newer perspective suggests that what becomes available to conscious ownership varies according to context and relational factors. Although each case is therefore unique, the content includes some standard elements, like concerns about personal identity, gender and sexuality; feelings about the analyst (and the analyst's towards his patient); meanings and memories of past relationships; and wishful fantasies. Unfortunately, the different vocabularies of competing analytic schools contribute to obscuring this common basis in practice.

 Freud's central idea addressed the limits of conscious knowledge, expressed by Jacques Lacan in his famous metaphor of consciousness as an "incomplete text." Thinking specifically about clinical psychoanalysis, Lacan observed that while a lot of information may be available to conscious awareness, the subject cannot explain the phenomena in question, which imply matters of which he is unaware. Human beings lack explanations for many of their behaviors- psychiatric symptoms being a prime example- except in obviously fabricated ways. Moreover a clinician typically encounters gaps, inconsistencies, and avoidances in the narrative content of sessions or he notices things of which the analysand is unaware. This basic argument for the necessity of looking outside consciousness for the sources of mental states is widely accepted. Cognitive psychologists speak similarly about dispositions to act or to express feelings or beliefs as unconscious properties of persons, but psychoanalysis finds that they remain unconscious for reasons related to the life history of the subject. For example, psychoanalysis advances the concept of defense mechanisms that interfere with awareness of unconscious motives to preserve self esteem or avoid negative affects like guilt or shame., and these constructs have been studied empirically (Vaillant, G., Bond, M., & Vaillant C., 1994).

 Operational definitions of defense mechanisms allows them to be identified by researchers with clinically observable phenomena, but the underlying theory of unconscious censorship presents conceptual problems. The seldom acknowledged mathematical approach of Suppes and Warren (1975) replaced Freud's theory of repressed impulses and wishes with a model of unconscious propositions that undergo transformations to produce their conscious product. The propositions are generated by events or memories of events that lack linguistic form and can be stated in the form of an actor acting on an object. More recently, Georgieff (2010) similarly proposed replacing the psychoanalytic concept of the drive with a theory of action, potentially shared with cognitive neuroscience. These approaches deal with the problem of unconscious intentions by portraying action propositions and their transformations as pre-symbolic processes, having to do with physiologic activations. They thereby suggest a form of determinism lacking the dynamic element of emotional conflict that is so striking clinically, which seems to relegate the conscious subject to a secondary or even superfluous role. On the other hand, Bazan argues that Shevrin's neuroscience research, using a subliminal priming strategy, supports the concept of a dynamic unconscious defending against impulses (Bazan, 2017). Of course, defenses can be called "mechanisms" only as a metaphor for complex underlying processes that regulate conscious knowledge. The important element for psychoanalysis involves personal meanings of experience, rather than neurophysiologic processes.

 A well-known example of unconscious motivation concerns the puzzling phenomenon of post-hypnotic suggestion, initially raised by Freud, for which many subsequent explanations have been attempted (Kihlstrom, 2014). Experiments have demonstrated the paradoxical nature of hypnotic states, which in some ways suggest a dual or dissociated consciousness. Orne (1959) showed that subjects can remain aware of the suggestions of the hypnotist, but still follow them- what he called "trance logic." Kihlstrom discusses interpretations of this phenomenon as indicating delusions. Likewise, the paradoxical neurological state of "blind awareness" is similar to many everyday phenomena in which consciousness is split off from apparently unconscious knowledge or beliefs. In ordinary life, superstitions may be disbelieved but still acted on; a person may consciously repudiate but repeat troublesome behaviors, and the classic Freudian parapraxes (like forgetting important matters) suggest conflicting motivations outside awareness. Psychoanalytic concepts of unconscious wishes distorting conscious experience have been widely discussed and criticized, notably by Sartre and Wittgenstein (see Pears, 1982). Others accept the existence of conscious distortions but seek more viable scientific explanations. Billon (2017), for example, proposes a version of dissociation to explain defensive or symptomatic phenomena, hypothesizing the existence of two simultaneous conscious states not in mutual contact. Freud himself employed the term in relation to defense mechanisms he described as "dissociation dynamically caused" (2013, p 207), and later wrote that the defense of repression is caused by anxiety (1936). The now-familiar notion of a dissociated state of consciousness (for example, after traumatic experiences) resembles the capacity for intentional forgetting studied by cognitive psychologists. Research demonstrates the success of subjects to persuade themselves to forget something (although the content of the studies seems trivial compared to traumatic memories). The notion of non-communicating "selves" along a spectrum of dissociative states may offer an alternative model to the Freudian dynamic unconscious, but presents its own problems. What keeps the selves dissociated, for instance, and does the logic lead to a version of multiple personalities in every subject? Fayaerts and Vanheule (2016) offer the hypothesis that descriptively "unconscious" wishes may be known in a third person sense, as one might know another's motivations, but not experienced in the first person sense. A subject might be convinced to accept intellectually the presence of an unconscious desire in the form of an action proposition, for example, but would not subjectively own it. Understanding the paradoxical phenomena associated with theories of dissociation seems once again to require a concept of motivated unconscious rejection (defense) unavailable to first person access.

 Motivated unconscious states, Billon (2017) suggests, "are typically affective states that the subject experiences viscerally" even though he is not fully conscious of them. "He can control them impulsively, but not rationally, and repression is thus an impulsive process" (p. 17). Lambie and Marcel (2002), drawing on the cognitive treatments of anger disorders, claim that patients experience a form of anger of which they are not motivationally or rationally conscious. They conclude, "there is every reason to suppose that the same occurs for a range of other emotions." Similar to Billon (p. 16) these would be states that are dissociated from those of which the subject is rationally (reflectively) conscious, but phenomenally-conscious nevertheless, rather than totally unconscious. Feyaerts and Vanheule's (1917) proposal of third person co-consciousness is consistent with this model The subject may "notice" something as an object of awareness without ownership of this state. He can describe in the third person but not claim it as an "I."

 Freud pushed the notion of unconscious determination quite far; he disbelieved in accidents. Although many parapraxes certainly have banal explanations, we know that wishful misinterpretations or selective interpretations of life events are routine and in some respects indicative of a person's character. How people construe their emotional states and speak about them also varies considerably. Pace Merleau-Ponty, subjects may appear angry to others but deny such feelings or claim anger without displaying affect, although effects on behavior may be present. While biological research on core emotions has demonstrated their origin in mid-brain centers, ordinary affects in social life involve complex amalgams of desires and meanings that require higher level processing. Feelings do not translate into concise verbal categories but are expressed idiosyncratically. Beneath what a subject can say about his state of mind lies the realm of what psychoanalysts infer as irrational fears, wishes, and imaginary scenarios unavailable to introspective consciousness, although the clinical setting commonly brings out clear expressions of such contents. Probably this phenomenon has to do with pathways to speech opened up by the relative spontaneity of the analytic situation. Although we may lack a fully convincing theory or explanation for this fluctuating relationship between descriptively unconscious and self-aware motives, putting experience or wishes and fears into words can be a transformational process.

The Linguistic Determination of Self-aware Consciousness.

 The latter observation brings us to the overarching issue of speech and language in constructing conscious states. The phenomenology of variable subjective levels of awareness can be observed in ordinary conversations, but especially in therapeutic dialogues that enhance a freer flow of feelings and ideas. By analogy to infant research paradigms, the nature of the intersubjective field either produces a "dyadic expansion of consciousness" or its closing down (Tronick et al, 1998). Affective arousal may be the mainspring of consciousness (Solms, 2013), but how aspects of feeling states gain access to conscious communication (or not) depends largely on the responses of a dialogic partner and the contextual frame of the conversation. Psychoanalytic training sensitizes students to look for effects of their own (unconscious) messages to patients, who may respond by closing down expressivity or by becoming more open. Clinicians may be unaware of the attitudes they convey by their choices of words or facial expressions. Both participants in the analytic situation operate with fluctuating awareness of the process.

 Current psychoanalytic theory emphasizes the concept of a dynamic subject in dealing with reflective consciousness, so basic to its practice. Without some notion of a subject, the phenomenon of human (non-robotic) consciousness makes no sense. The organisation of subjectivity around themes of personal desire, life history, and important relationships, while involving the body and affective expression, depends on speech. More precisely, the subject is represented by the language he has at his disposition, modulated by feelings and gestures that communicate a range of meanings to another subject. Yet it seems a common error to discuss conscious states without attending to their linguistic and semiotic determinants, as though the subject "uses" speech like a tool to convey his intentions. Speaking of feelings and intentions implies a position as subject, which can be owned or modified in relation to other enunciations, but always within an intersubjective relationship. Psychoanalysis as "the talking cure" can be defined as a dialogic exchange within an unusual, but relatively stable and secure relationship. The subject's assumptions and wishes about himself and the analyst create the dynamic called transference, powered by demands for gratification of wishes or recognition of a preferred self-image from a powerful figure, in the context of expectations of finding answers to puzzles or contradictions in himself. To the extent it succeeds, the relationship enables the analysand to speak about important experiences in a more fluid and inclusive way than in ordinary discourse. Analysts use the expression "making the unconscious conscious," but what is meant operationally involves the ability to express thoughts and feelings previously unavailable to reflective self-awareness. Use of Freud's substantive term "the unconscious" seems mainly an unfortunate holdover. To some extent, failures of acknowledgement of shameful or perverse thoughts suggest Sartre's concept of bad faith, but the range of phenomenal awareness encountered in practice includes broad zones between outright repudiation (denial and disavowal) and distortion (rationalization or projection) (see Pears, 1982, for a critical discussion of Sartre's views). Dreams, for example, can depict overt sexual or violent acts or relatively disguised versions, which in turn may be subjectively owned or resisted. Pure introspection tends to follow familiar narrative pathways, like talking to oneself, while the unpredictability of a speaking relationship results in novelty. Within the intersubjective flow of discourse, new figurations of experience in the form of images, metaphors, or action statements gain expression.

 These formulations can be restated in semiotic terms. A subject's ability to take first person ownership of emotions or wishes by speaking as "I" depends on access to verbal symbols from a position in relation to others. The conscious subject may try to select words that best express his self-conception; these are the words at his disposition at a given moment. They have been learned or heard from others, especially in formative relationships, but he cannot step outside the framework or structure of signs that define him. An organization of memories, beliefs, and desires organizes his subjective state in interactions with others. This state does not exist as a substantive entity or object, but belongs to a fluctuating field of personal symbols. As noted above, speaking freely and spontaneously to another person tends to disrupt notions of self and other, bringing about other ways of being in relationships. Among other aspects, the subject hears his own words and often proceeds to revise them. Or the interaction evokes potentially disruptive thoughts or emotionsincompatible with a particular subjective state. We can then redefine the term dissociation as a metaphor for a restricted first person access to symbolic representation (not an empirical object susceptible to scientific study).

The Border between Conscious and Unconscious States

 In successful clinical psychoanalysis and related psychotherapies a client gains greater self-awareness, more freedom of thought, and a wider range of options for dealing with experience- an expanded consciousness. By now, the sheer volume of case reports that describe this change process, not to speak of the many empirical studies of treatments, constitutes a unique body of data about the dynamic relationship between conscious and descriptively unconscious states (see Leichsenring, & Rabung, 2008; Research Committee of the American Psychoanalytic Association, 2015; Shedler, 2010). Postulating that descriptively unconscious events consist of neurologic processes or presubjective levels of mental life ignores the personal elements in motivation that play a central role in human affairs. Clinical experience supports the conclusion that most conscious behavior represents compromises enabling the subject to manage conflicting wishes and fears growing out of past life experiences. It seems a dead-end to characterize subjective consciousness as epiphenomenal, a vehicle for actions already determined at some causal level of brain activity. Indeed most of human life depends on conscious awareness and choice. Although we are unable to answer all the thorny philosophical and scientific problems, the human sciences like the psychotherapies cannot very well manage without a concept of the subject. Even out-dated models of behavior modification rely on willing participation and conscious choice. Psychoanalysis goes much further in its aim of moving the frontier between consciousness and dynamically unconscious motives.

 Psychoanalytic concepts like defense mechanisms, intrapsychic conflicts, and warded off impulses for action attempt to explain the dynamics of the fluctuating boundary between conscious and unconscious in the clinical encounter. Unfortunately, in part because of professional boundaries and the over-use of theoretical formulations by clinicians, the resources of psychoanalytic practice have not been adequately mined by researchers from other disciplines. Archives of single cases, for example, provide access to published reports that can be sorted by several variables for quantitative and qualitative analysis (see Kächele et al 2009; Desmet et al 2013; Meganck et al, 2017; Willemson et al 2017). They offer a window onto what actually transpires over time in psychoanalytic therapies. In addition, detailed examples of clinical sequences are regularly published in major peer-reviewed psychoanalytic journals. Recorded treatments have also been studied systematically. The ensemble of these many available sets of data from psychoanalysis provide a unique window on the phenomenology of human consciousness.

Summary:

 Psychoanalysis should be viewed as a clinical practice that has engendered many concepts, but not a scientific theory with pretensions to completeness. Its practice strongly supports the role of unconscious motivation, especially involving forms of affective arousal that may or may not achieve verbal representation (and subjective ownership). Subjects may have knowledge of themselves as an object without the ability to own the content in the first person. Numerous analytic case reports portray evolving relationships between unconscious dispositions and wishes and reflectively aware consciousness at the disposition of the subject. The rationale of using Freud's erroneous metapsychological theories to discredit these many years of observation and research lacks credibility. Integration of psychoanalytic data with neighboring disciplines of neuroscience, semiotics, phenomenology, and cognitive studies may significantly advance clinical and theoretical understanding of conscious and descriptively unconscious processes.

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1. Without ignoring the significant problems of analysts applying different theories to technique, the fundamental situation of a relatively unstructured speaking relationship describes most forms of practice. [↑](#footnote-ref-1)
2. More precisely, psychoanalysis can be defined as a semiotic process- an exchange of signs (Barclay & Kee, 2001). [↑](#footnote-ref-2)