

## 9 **Frames of dementia, grieving otherwise in *The Father*, *Relic* and *Supernova***

### Representing dementia in recent film

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In a particularly affecting moment in the 2021 BBC/BFI film *Supernova*, Tusker, a writer contemplating ending his life following a diagnosis of dementia, comments that his partner (Sam) is suffering, because ‘you’re not supposed to mourn someone while they’re still alive’. He goes on to announce sardonically that ‘he must be because I am’. This scene does a lot of work in the film’s elaboration of the ethics of ending one’s own life when faced with a diagnosis of ‘dementia’, and I start here because the film’s focus on attempting, however imperfectly, to reflect on the experiences of living and dying with dementia from the perspective of the person with the condition (rather than those around them) might, at least initially, be understood, even applauded, as a characteristic of some of the more recent portrayals of dementia on film. These lines also establish one of the mainstays of critical commentary on the three films I discuss here – namely the idea that the condition is especially traumatising in its upsetting of the proper chronologies of grief. The focus on ‘grieving for the living’, which enacts a failure of recognition of the validity of the life that is evidently ongoing, is a trope only too familiar to critical accounts of dementia across the social sciences and the humanities. The equation of a dementia diagnosis as heralding the advent of an inevitable ‘social’ or ‘living death’ of the subject has been a feature of the ways that dementia is culturally and socially imagined, storied, and reproduced revealing, as Hannah Zeilig has pointed out, the ‘underlying assumptions that infuse the political, social, and medical narratives that are told about these conditions’ (Zeilig, 2014, see also Peel, 2014).

This chapter is not an exhaustive account of dementia on film, rather I am concerned here to note some recent iterations of the representation of dementia in mainstream narrative film, and to question whether these are evidence of new patterns of critical awareness emerging over the dilemmas of representation that dementia poses. In recent years, the number of ‘critically acclaimed’ films in Europe, the UK and the US about dementia has continued to flourish. There was perhaps evidence of the ‘zeitgeist’ nature of the condition in the first decades of the 21st century (Parker et al., 2021). Rather than attempting to tackle the breadth of this cultural production<sup>1</sup> which includes a range of types of films, from fiction to documentary to

workshops organised by and for people who have dementia, this chapter will analyse just three films, all released in the UK in 2020–2021: *The Father* (Dir. Florian Zeller), *Relic* (Dir. Natalie Erika James) and *Supernova* (Dir. Harry MacQueen). Whilst they are all English language ‘mainstream’ narrative feature films, they differ in important ways. Two are set in the UK and one is set in Australia and, more significantly, they cover a range of genres, from the family melodrama to horror. Such genre differences produce a wide range of ‘feeling tones’ (Ngai, 2007), with the potential to elicit a range of affective responses in the viewer. The circulation of these ‘public feelings’ (Berlant, 2011) may, in turn, have an impact on how the condition is understood culturally, socially and politically. But how far do these recent films challenge the problems that have already been identified as key questions for thinking through representations of this condition? (Or, more accurately, range of conditions.) Namely, the dangers of entrenching stigma, fear and denial and the production of ‘epistemic injustice’ (Capstick et al., 2015,) that ultimately dehumanises and renders abject the character (and, by implication, anyone else) who is identified with dementia?

These films raise a range of potentially productive issues for critical accounts of the portrayals of dementia on film. For example, has the perspectival shift, widely reported in press reactions to *The Father*, answered the critique of cinema that it has too often focused on the traumas of the caregiver and failed to attempt to represent the embodied experiences of those with dementia? (Basting, 2009, Chivers, 2011, Swinnen, 2012) If so, to what extent does this shift reflect a more progressive cultural narrative? Does *Supernova*’s elegy for a same-sex couple’s relationship in the wake of dementia rearticulate the gendered dimensions of dementia and care that have interested critics or does it merely provide a homonormative gloss on what is essentially a powerfully ‘affecting’ argument for self-annihilation? And, finally, what shape does the cultural imaginary of dementia take in *Relic* when dementia is inflected through the horror genre? What might this offer to critical accounts concerned with questions of personhood and the ethics of representation? Whilst there is not enough space here to consider all these questions in detail, this chapter takes the opportunity afforded by this cluster of films all released within a year of each other to produce a ‘snapshot’ of the range of mainstream representations currently circulating in the light of some contemporary critical approaches to the representation of dementia on film.

For any critical account of dementia, an analysis of how narratives and images of the condition circulate is crucial. E. Ann Kaplan and Sally Chivers have succinctly summed up many of the issues raised over time about how dementia is represented. They argue, in their discussion of age panic in media discourses on dementia and care, that ‘overwhelmingly negative images’ are foremost, and these images, in turn, generate a range of ‘powerful affects’ in which fear dominates. The images are medicalising, ageist, highly racialised and socially limited often featuring care given to class

privileged subjects by ‘heroic family members’ whilst ‘racialised care workers’ are ‘backgrounded’. Kaplan and Chivers argue that the negative ways that Alzheimer’s disease is ‘visualised and conceptualised’ have crucially important implications for practice and that improving care is dependent on recognising and challenging the meanings generated in cultural understandings of the disease. They conclude that critical analyses of the discourses surrounding dementia are therefore vital (Kaplan and Chivers, 2018).

Readings of cultural representations are an important aspect of a critical engagement with dementia because engaging with such representations enables both reflection on existing, circulating understandings of the condition and also an opportunity for interrogation of and challenge to these understandings. Representations are powerful agents in the world, often responsible for normalising and reinforcing dominant, negative, understandings of and attitudes towards ‘otherised’ people, including those with dementia. However, they are also complex and can operate in contradictory ways, challenging viewers to rethink their assumptions. Critical responses to dementia, and dementia studies as a field which seeks to challenge socially damaging understandings and to rethink the meanings generated around the condition, therefore need to engage with the ‘powerful affects’ generated through media representations and framings.

### **Frames of dementia, when is life greivable?**

Before offering my own brief readings of these films, I want to return to the idea of ‘grieving for the living’ with which I began. One instantly notable aspect of the critical reception of these films was the emphasis laid on this notion. Many have noted that this is a consistent feature of public and media discourses on what it is like to negotiate the condition as a family member, loved one or carer. Mark Kermode reviewing *Relic* for *The Guardian* quotes the director of the film as explaining the film’s concern to show ‘the true terrors’ of ‘grieving for the loss of someone while they’re still alive’ (Kermode, 2020, NP). Peter Bradshaw echoed the sentiment in his review of *The Father*, where he finishes his piece with the same sentiment almost word for word: ‘It is a film about grief and what it means to grieve for someone who is still alive’ (Bradshaw, 2021, NP).

In framing dementia in terms of a temporal dysfunction in the processes of grieving the texts, and their reception, stress how loss functions as a structure in the narration of dementia. I have argued elsewhere that it is possible, often in unexpected quarters, to find popular narratives of dementia that complicate this and indeed offer much more nuanced accounts of *living* with dementia (Wearing, 2013, 2015, 2017). Nonetheless, the idea that the person with dementia is to be grieved for because they’ve been, euphemistically speaking, ‘lost’ whilst actually still alive is a powerful instance of dominant narratives of dementia that suggest it resembles a zombie-like state of living death (Behuniak, 2011). At the same time, it raises a series of

ethical questions about the status of the person that remains, and is familiar in critical accounts of the social and cultural construction of dementia. My specific concerns here, however, focus on the perhaps slightly less familiar questions raised by the notions of grief and its relationship to recognition, and are influenced by Judith Butler's reflections on the powers of mourning and violence (2004, 2009). Mourning, it is argued, operates by designating some lives as more grievable than others and thus differentially allocates the status of human according to norms and frames, assigning value through discursive and cultural means.<sup>2</sup>

Butler's work, in asking 'when is life grievable?', illuminates the processes of exclusion and differentiation, of casting some lives as liveable and others as abject through a mediation on whether life is grievable and by extension how 'power functions differentially, to target and manage certain populations, to de-realise the humanity of subjects' (Butler, 2004, p. 68). Suggestively (given the metaphorical link Zeilig (2014) notes between dementia and the stealthy dangers of 'terrorism'), Butler points out how the US's opponents in the 'War on Terror' are figured as 'spectrally human, the deconstituted' (p. 91), placed outside of the conceptualisation of the human and through their 'ungrievability' linked to their status as 'like' the mentally ill.

The terrorists are *like* the mentally ill because their mind set is unfathomable, because they are outside of reason, because they are outside of 'civilisation', if we understand that term to be the catchword of a self-defined Western perspective that considers itself bound to certain versions of rationality and the claims that arise from them.

(2004, p. 72)

Whilst Butler is concerned here with the effects of state power enacted on Otherised populations, this is provocative for considering the ways that dehumanisation works in relation to (as Butler terms it) 'the mentally ill', who are by inference **already** designated as the 'spectrally human' in this analysis. Moreover, the links Butler makes to the question of grievability here are also worth pursuing since the specific attachment to the formulae 'grieving for the living' in relation to dementia does not deny that the life is grievable; rather, it confirms that the grief is firmly attached to the subject **but** only on condition that the subject remains recognisable as a subject of recollection. Hence, in these films the stress is given on whether the character recognises or importantly 'will recognise' in the future a loved one or carer. This constitutes an ironic contrast with the sense of recognition that Butler refers to, where it involves a much fuller cognisance of the 'ethical call' that recognition *of* rather than *by* the other affords. In *Frames of War*, Butler pursues this question of recognition via the philosopher Levinas to consider the ways in which the critical imperative is to learn to read the 'frames' that establish the 'norms' that encompass the human. The human in this analysis is always a contested category and one that needs to be

constantly negotiated through the framings which operate as gatekeepers to who is included and excluded. The human is understood as ‘a value and a morphology that may be allocated and retracted, aggrandized, personified, degraded and disavowed, elevated and affirmed’ (2009, p. 76). Tellingly in relation to thinking about film and visual media, Butler suggests:

If as ...Levinas claims, it is the face of the other that demands from us an ethical response, then it would seem that the norms that allocate who is and who is not human arrive in visual form. These norms work to *give face* and to *efface*. Accordingly, our capacity to respond with outrage, opposition and critique will depend in part on how the differential norm of the human is communicated through visual and discursive frames. There are ways of framing that will bring the human in to view in its frailty and precariousness, that will allow it to stand for the value and dignity of human life, to react with outrage when lives are degraded or eviscerated without regard for their value as lives. And there are the frames that foreclose responsiveness.

(2009, p. 77)

In this chapter I am interested in thinking with Butler’s work to consider how recent films and the discourses within them ‘frame’ dementia and the lives of people who have it, paying particular attention to the cultural politics of mourning and grievability. It is difficult to ignore the politics of mourning in these films and the commentary on them; Butler’s work highlights the question of *when* life is grievable and how the temporality of this relates to the conceptualisation of life as considered liveable. Examining ideas around appropriate modes and times of mourning raises questions that have been important for critical accounts of dementia, which, like Butler, have considered the processes of abjection and dehumanisation (see also Chapter 11 in this volume). For example, the ‘ableism and sanism’ that ‘work in concert with each other, abjecting bodies as less than’ (Thornycroft, 2020, p. 92), which, as Shakespeare, Zeilig and Mittler point out, limits the ‘articulation of the rights of people with dementia and thus their ability to retain their humanity to the ends of their lives’ (2019, p. 10).

### *Supernova, elegy for the living*

As indicated at the outset of this chapter, *Tusker* is living, to use Sarah Lachlan Jain’s expression in ‘Prognosis Time’ (Jain, 2007, see also Puar, 2009). Having received a diagnosis of dementia, the film follows *Tusker* and his partner Sam, as they take what is revealed as a very final road trip together. Sam learns on the journey that *Tusker* is planning to end his life as a result of his diagnosis. The film follows the genre conventions of both the family melodrama and the road trip. *Tusker* and Sam wrestle with the decision that *Tusker* has taken to kill himself, having gathered family and

friends for a final party and having found a suitably beautiful and deserted cottage away from their shared home in which to die. Sam is a concert pianist, and the film ends with his performance of Elgar's *Samut D'Amour*, as if the film has not already sufficiently firmly set its tone as one of elegy and grief. Indeed, the film's tone is dominated by memorialising and elegy; the pair are returning to places that have significance for them, the landscape of the lake district literally enabling reflection on the permanence of the view over the inexorable changes that are occurring in Tusker.

Tusker's plan to end his life is a demonstration of his relentless commitment to a defence of his autonomy but it is also presented as a sign of his love and commitment to his partner, and what the caring role would mean for him. Sam's resistance to the suicide takes the form of both an acknowledgement of his own fear for the future and a refusal to enter into the debate: 'we're going to pretend this never happened', he insists, and 'we are not having this conversation', and whilst he claims he will care until the end, the outcome of their argument is never really in any doubt. The film increasingly frames Tusker as an isolated figure, pictured at one point alone in the very background of the frame, when he has 'wandered' down a lane panicking Sam. Despite being both materially comfortable and in a loving and supportive relationship, Tusker offers an eloquent defence of his right to die at the time of his choosing, whilst he is still able to recognise himself and his partner. Prognosis time here is time marked by dread, knowing the inevitability of the progress of the condition and that as Tusker puts it: 'there will be a time when I'll forget who is doing the forgetting'. Tusker is preoccupied by the imminent loss of what he considers to be his self; he declares both that the self is already fading, that he 'just looks like him', and that he is determined to 'be remembered for who I was not for who I'm about to become'. Ending his life before this fate literally worse than death occurs is, he says, 'the only thing I can control'.

The film then conforms to Anne Basting's 'tightly told tragedy' (2009), which she identified as typical of the ways that narrative feature films often story the condition. Such stories, it has been suggested, do nothing to challenge the stigma and fear surrounding the condition. Indeed, one might go further and suggest that the eloquence with which Tusker argues for his own annihilation, the beautiful backdrop against which he chooses to die, and the love and compassion with which he is surrounded render any other possible outcome unthinkable and intolerable, or, as Butler puts it, foreclosed. It is particularly significant that the scenes which end the film take place away from the couple's real home, their domestic space. The fantasy that is enacted here is one in which a retreat from the domestic space of relationality and care is represented as not only possible but commendable; Tusker literally finds a place to die that will obfuscate the need for care. In having Tusker articulate his desire to die, the film establishes the lucidity of the subject who is able to apprehend their own 'social death'. The implications of this are clear: this is a person whose ability to clearly see his own

diminishment through progressive incapacity and to grieve for themselves makes sense of the decision to end his own life before what remains of his autonomy is lost forever. It is all the more moving because it is delivered with a certain knowing archness – the formulae of grieving for the living generally stress the pain and loss for the person ‘left behind’, usually in cinema the partner or child. In this film, however the expectation that the central focus of the narrative will be that of the person who has not been diagnosed with dementia is interrupted – and the narrative stays with the couple who are *both* ‘grieving for the living’. This scene and the film more generally are both moving and troubling. In all the films I look at here, considerable screen time, attention and care are taken to register, even honour, however imperfectly, the experience of dementia of the person who has it as well as those that love them, but whether this attempt actually shifts the representations to a more critical analysis of the ways that dementia narratives operate to instil dread, horror and fear of the condition remains highly questionable.

Further, the living or social death that is understood here as particular to those with dementia has been challenged by Michael Banner (2013) who argues that assisted dying or euthanasia arguments are constructed as if the social has no material effect on the questions raised by ‘late modern dying’. Specifically, the horror of social death imagined as specific to dementia in general and Alzheimer’s in particular, Banner argues, is actually on a spectrum with ‘long dying’, which is much more typical for many, even most – with or without dementia – also include elements of such a social death. Extended and extensive isolation is common for the majority of the population who do not have economic and social capital.<sup>3</sup> Banner suggests that, given the links between social conditions and the losses of selfhood that accompany the end of life in a range of circumstances, it is crucial to track the specific aspects of selfhood and subjectivity that are at risk for those who are dying with Alzheimer’s. This in turn would enable a better understanding of how practices of care and sociality might compound or ameliorate the experience. Careful study of people’s lived experience, such as that enabled by ethnographic methods in social anthropology, he suggests, is needed in order to gain insights which would enable ethical practices. He calls attention in this discussion to the question of the ‘horror’ of dementia and the loss of care practices for the dying, which have accompanied increased longevity in the population at large.

In *Supernova*, though it seems too obvious to even note, the equation of the loss of cognition and memory equating to the total loss of selfhood that Tusker, ironically, manages so effectively to communicate has been challenged by those working with people with dementia. For example, Pia Kontos (2004) has advocated for an ‘alternative vision’ to the ‘assumed loss of selfhood in the current construction of Alzheimer’s disease’ through a reconceptualisation of selfhood as ‘embodied and reproduced through our practical and corporeal actions’ (p. 846). The possibility of something meaningful continuing to exist between Tusker and Sam, perhaps through



practices of care, and the possibility of, however altered, forms of subjectivity and selfhood surviving cognitive decline and increased incapacity and debility remain outside the film's field of intelligibility, outside the frame. The point here is not to claim that Tusker's insistence on exercising his agency and 'choice' whilst he still can is ethically wrong or incomprehensible; it is demonstrably rational within the framing offered. Rather it is to think about how this figuration of dementia sits alongside a pattern of representation within which *only* this course of action makes any sense.

### **'There's something doesn't make sense about this': The domestic uncanny<sup>4</sup> in *The Father***

If *Supernova* literally cannot imagine a future which would involve the actual practice of care for its central loving couple and instead provides the protagonist with a beautiful place and an appropriate time to die, *The Father* is far more interested in the practices and practicalities of caring and living with dementia. The tone of *Supernova* is elegiac and mournful, and it encourages the viewer to take solace from the sadness of its story in its expressions of love and tenderness and in its evocation of beautiful landscapes and classical music. However, the tone of *The Father* is quite different. Predominantly marked by the 'ugly feelings' (Ngai, 2009) of anxiety and dislocation, *The Father*, as many reviewers noted, subjects the viewer to an unrelentingly confusing and disorienting worldview, where the spectator repeatedly shares with the protagonist, Anthony, what appear to be certainties as to where and when we are, only to have these certainties whipped away in vertiginous betrayals of the norms of narration and cinematic time, space and conventional editing.

The opening of the film can serve as an example of how the film repeatedly sets up the viewer's alignment with the perspective of Anthony, and all that this restricted narration will induce, but without signalling this, leaving the viewer unsure and unsettled. The opening credits and opening scene are of a woman striding down a street of mansion blocks (situating the milieu of the film as that of well-heeled, wealthy London). Over these images is a soundtrack of classical music with insistent, staccato strings, which builds to an operatic aria that seems to be building to some kind of dramatic climax. We cut to the interior, the hall of a mansion flat with a large front door centre frame through which the woman enters calling 'Dad, it's me', the operatic score keeps building, the woman enters a room where she says, somewhat exasperatedly, 'there you are'. The man who has been sitting with headphones takes them off and the audience realise that the anxiety inducing soundtrack is not signalling the imminent dramatic expose of, perhaps, a dead body (it's not that film, though the Morse-like invocation of opera might be preparing viewers for something of the sort), rather the music is being played by the man himself through his headphones, 'what are you doing here?' He asks. In the ensuing scene they argue about how



he's behaved towards a carer and whether the carer has stolen his watch. The awareness that we have been experiencing Anthony's sensations via the music foreshadows how the film will continue throughout to disorientate the viewer. This is achieved primarily by changes in the décor of the flat; it takes some time to understand that what seem to be the usual flashback structures of cinematic representations of time passing and actual memory are not this at all but are instead instances of Anthony's experiences of reality where 'doubles' of his family are found, 'new' characters appear, a son in law, a carer, who patiently or impatiently try to correct his understanding or behaviour. Doors, windows, fireplaces and corridors unexpectedly alter, whilst remaining uncannily familiar. Indeed, Freud's rendering of the 'uncanny' as, famously in German, the 'unhomely' or *unheimlich* is highly resonant here, because for Freud, ultimately, it is the proximity, the 'likeness' to what is familiar whilst remaining strange that induces the sensation of the uncanny. Anthony's experiences and by extension the viewer's are resonant of Freud's descriptions, as in the characters appearing as 'doubles'. At the beginning of his essay Freud seems to dismiss the idea that 'intellectual uncertainty' is necessarily constitutive of the uncanny, though he later admits not only that it may be but also that it is in contemplating another's altered state that may induce sensations of the uncanny (which has implications of the affective force of representations of dementia which, as so many reviewers note, 'haunt'). He is interested, too, in the way the uncanny is related to 'something repressed that recurs' and in the negotiation of spaces which are both familiar and strange:

An involuntary return to the same situation, but which differ radically from it in other respects, also result in the same feeling of helplessness and of something uncanny ...Or when one wanders about in a dark, strange room, looking for a door or the electric switch, and collides for the hundredth time with the same piece of furniture.

(Freud, 1919, p. 237)

In *The Father's* interiors, we are repeatedly 'involuntarily returned' to the same situation with radical differences: kitchen cabinets are replaced seemingly randomly, a beloved picture is above a fireplace until it isn't, tables and layouts shift, and finally doors open onto entirely new spaces. From the hall we have become familiar with, we are taken through a door which opens onto a hospital ward where Anthony's 'other' daughter is hooked up to machines, and Anthony momentarily has to re-reckon with the grief of her death. Finally, the space 'resolves' one last time into that of another kind of 'home'. The film ends with Anthony in a care home, left overwhelmed by confusion and grief, not only for his daughter but also for himself: 'what about me, who exactly am I?' he asks and the audiences 'confusions' are resolved, with the devastating insight that he is entirely at the mercy of the

figures of nurses who, it is intimated have, or may at any time, subject him to abuse.

In this reading of *The Father*, I've tried to account for the disorientating 'uncanny' experience of watching the film through an interpretation which mirrors the film's devices for offering a perspective on dementia which attempts to imaginatively reproduce experiences of the condition. In his review of the film Peter Bradshaw rightly notes that 'the universe is gaslighting Anthony with these people' and that in so doing it produces 'genuine fear' akin to watching a traditional horror film. The review in the *New York Times* also likens the experience as 'shockingly close to horror'. As so many have noted, when fear is the dominant affect associated with dementia, the social and cultural implications are concerning (Low and Purwaningrum, 2020) but does this film's stress on Anthony's complex ongoing humanity and vulnerability, briefly experienced, in however mediated a form, by the audience, complicate the negativity of the representation? How distinct is this from *Supernova*'s framing of dementia as the unliveable life?

### **Body horrors: Care, relationality and ethical responsiveness in *Relic***

If *The Father* was read as 'shockingly close' to horror, *Relic*, the final film under consideration here, is a genuine horror film, complete with traditional horror tropes such as spooky woods with intimations of flyblown corpses, supernatural manifestations in a house that seems determined to entrap its inhabitants within its shifting walls and a black mould-like growth which appears to infect not only the house but also the three generations of women who are struggling to exist within it, and, intermittently, to escape from it. The eldest of the three women, Edna, the grandmother figure, has dementia, and the film starts with her daughter Kay and granddaughter Sam returning to the family home because she has gone missing. During the course of the film the horrors of the house and what is happening to the grandmother are gradually revealed, as the younger women attempt to care for her and to persuade her to leave. The film ends with the house and its ambiguous mould-like substance 'winning', keeping the three women within its walls, with ambiguous effects.

David Thomson has noted that *Relic* was one amongst a rash of dementia-themed horror films in the last few years, and he questions their cultural function, 'maybe the genre metaphor is a way of not going deeper in human examination that's where my worry surfaces – that horror can be a strategy for diverting proper fear' (Thomson, 2020, p. 40). This 'proper fear' refers to the failures of taking responsibility for upholding 'decency' to others in our 'refusal to face reality' (p. 41), not least in the politics of immigration in the US that Thomson goes on to discuss. The implication is also, however, that the genre uses horror tropes to distract the viewer from dementia and

death. Fear is invoked but only as a distraction. This perspective contrasts with many of the critical accounts of dementia narratives where the concern is that eliciting fear in relation to dementia produces epistemic injustices to people with the condition and stigmatises them and their carers. Nonetheless, Thomson's comments do alert us to think further about what these screen horrors are screening from view and what, conversely, a reparative (Sedgwick, 2002) reading of *Relic* might offer.

Eve Sedgwick uses the term 'reparative reading' to counter the tendency, or even orthodoxy, in critical thinking to indulge in 'paranoid' responses to culture. Paranoid readings are predicated on revealing supposedly hidden truths of harms, as if exposure and suspicion are enough to counter a political reality where such aggression is often far from hidden. Reparative readings and impulses stem from a desire that is 'additive and accretive...it wants to confer plenitude on an object that will then have resources to offer' (Sedgwick, 2002, p. 149). For marginalised groups, this is particularly crucial, in order that they may be able to 'extract sustenance from the objects of culture – even of a culture whose avowed desire has often been not to sustain them' (pp. 150–151). Offering a 'reparative' reading of the films that depict dementia therefore includes the recognition that the lives of people with the condition are not 'sustained' by existing social formations and cultural production but hopes that critical engagement can also entail elements of reparation.<sup>5</sup> Such an orientation also follows Lisa Folkmarson Käll's lead. Käll suggests that the act of 'productive reading' of films is 'not only possible but also of significant importance for rethinking conceptualizations of Alzheimer's disease and other conditions of dementia as leading to a loss of selfhood and identity' (2015, p. 269). She reminds us that

cultural representations are not in any way simply given for a neutral spectator. Instead, they are continuously reproduced through perception, interpretation and analysis. Not only how characters with Alzheimer's disease are depicted but also how these characters are perceived and interpreted will matter for the ways in which stereotypical views of persons with Alzheimer's disease are reinforced, challenged, and transformed.

(pp. 269–270)

Käll's discussion of two films about dementia, *Away from Her* and *En Sång För Martin*, is concerned with bringing 'to light how a constitutive intercorporeal connection between embodied subjects forms individual expressions and ways of being in the world'. A graphic and frightening horror film might not seem likely ground for a similar expression of 'constitutive intercorporeal connection' but I want to suggest that *Relic*'s concerns with the relations between carers and cared for, and generations closely related to embodied and radically altering subjects does, like the films Käll considers, 'offer encounters with existential and ethical dilemmas that do not afford

easy solutions but instead demonstrate the continuously unfinished task of reflection, questioning and re-evaluation' (Käll, 2015, p. 270).

Unlike the realist dramas *Supernova* and *The Father*, and indeed the films Käll analyses, in *Relic* the fear is the point. The horror genre confronts dread and makes it explicit, enabling in this case, I suggest, an opportunity for reflection on questions of care, relationality and ethical responsiveness. In *Relic* the house, which behaves as a living, if decaying, breathing thing, is a domestic space encompassing memories not only of a family's growth but also of its traumatic relationship to past failings of care, generational hauntings of neglect. The house includes a stained-glass window, preserved from another property, in the vicinity, in which, it would seem, a relative was left to die alone and uncared for. More recently, Edna, or perhaps the house, appears to have been responsible for the entrapment of another vulnerable subject, Jamie, a neighbour who has Down's syndrome (a helpful reminder that other groups are subject to the stigmatisations and aggressive projections of others due to their cognitive differences<sup>6</sup>). Some form of retribution for this failing seems to be enacted here when the house and the growths of black hair like 'mould' spread through walls and into Edna and, eventually, her daughter and granddaughter.

One reading of the film might note the 'monsterisation' of the grandmother, whose dementia is represented as 'contagious', thus reproducing precisely those harmful and stigmatising tropes so often reproduced in representations. However, another reading is possible. Perhaps more telling than the Alice in Wonderland-like shrinking of walls which entrap the younger generation 'with' the grandmother (which might be conventionally read as a crude and cruel 'allegory' of what it means to care for someone) is the final scene of the film where, despite the terrifying horrors they have lived through in the house, the younger women choose to stay and care for what is left of their mother/grandmother. In this final scene, layers of encrusted gore are carefully and lovingly removed by Kay from her mother's body, and she is gradually revealed as an entirely altered being, almost a new-born, clean and 'new' a child-like or perhaps alien-like being, 'unrecognisable' perhaps but still responded and related to, 'I can't leave her' insists Kay, and her daughter also cannot leave her own mother. The soundscape here is of an eerie wheezing, almost but not a death rattle. Kay and her daughter lay down with 'relic', three generations of women repudiating the legacy of abandonment and neglect.

### **Conclusion: New directions or more of the same?**

Critical analysis of film reveals the cultural meanings which accrue to the various conditions that make up the term 'dementia'. Tracking even subtle shifts in the ways that the condition is imagined is an important part of a wider critical project to interrogate understandings of the term, and the ways that it can operate in stigmatising, and ultimately dehumanising, ways.

Countering these tendencies requires a critical approach which is attentive to the work that representation does in ‘framing’ dementia and the human subjects connected to it. The three films I have analysed here do signal a shift towards a perspective that puts the person with the condition rather than their partner or family at the centre. They highlight the specific form of vulnerability that the condition produces, and they stress the need to find accommodations with a common circumstance of life. However, they also reproduce longstanding tropes that equate the loss of memory with a catastrophic loss of selfhood and autonomy. Films about people who have dementia matter because they participate in, reproduce and challenge public understandings and feelings about the condition and its effects on those who live with it.

The three films here offer a variety of perspectives on the condition and the ethical questions its representation raises in terms of recognition, responsibility and understandings of subjectivity. In *Supernova*, the melancholic attachment to the sovereign self, autonomous and relentlessly rational, envisages relationality as circumscribed to literal self-sacrifice and provides a fantasy of the good death which literally cannot include or envisage the ravages of the condition. Whilst within the framing of the film this is, of course, entirely intelligible, like Michael Haneke’s *Amour* its equation of love with death raises difficult questions over the recognition of life in ‘prognosis time’. Tusker’s articulate defence of his right to control the timing of his death and the loss of the self he is grieving is hard to resist. Not least because Sam has no vocabulary with which to counter this claim to autonomy, given his own fears that he won’t be able to cope with the care required and that indeed his own selfhood is at risk. In the logic of their understandings of their subjectivity there does indeed seem no viable option to recognise a value in continuing a life beyond memory, no concept of living and staying in the present is available to either character. Most disturbingly the film offers the compensatory fairy tale sop of conceptualising death as offering eternal life as stardust (hence the title of the film).

*The Father*, by contrast, refuses any such compensatory schema and instead, for much of the film, ‘gaslights’ the viewer into experiences which are designed to put the spectator into Anthony’s psychological state, to experience with him the dislocations and traumas of living with dementia. Whilst this film conforms to many of the most fear-inducing capacities of representations of people with dementia, the film’s insistence on maintaining its focus on Anthony, rather than his daughter, and the emphasis that is placed on his perspective and vulnerability opens up space to think through the specific forms of vulnerability and violence that some people with dementia are subject to – not least because of the dehumanising tropes with which the condition is so often associated.

Finally, *Relic* uses the most evidently grotesque and disgusting imagery to, ironically, tell a tale of redemption, care and shared vulnerability. One way to consider these films might be to consider how someone newly

diagnosed with dementia or someone caring for someone newly diagnosed might respond. In what ways do these representations lift the ‘heavy weight of negative cultural representations [which] clouds the collective vision of the person living with dementia’? (Shakespeare et al., 2019). Whilst I have endeavoured here to offer reparative or positive readings of these films, these questions remain both pertinent and fraught.

## Notes

- 1 I’m using the term ‘mainstream’ quite loosely here to describe films which are both commercially oriented and widely screened in cinemas and across major streaming platforms and reviewed in both broadsheet newspapers and specialist film journals and which don’t announce themselves as ‘oppositional’ or ‘activist’ cinema.
- 2 It is important to note that these reflections, particularly in *Precarious Life* and *Frames of War*, come out of the context of the US’s post-9/11 wars. Butler’s concern is with the ways in which the US’s targets and detained subjects are, through the suspension of their status as legal subjects, conceptualised as outside of the norms of the human. As such the work is concerned with the operations of state power in the management of otherised peoples and populations. The racialised and cultural contours of these arguments are key and I am cognizant of the dangers of suggesting that representations of the privileged white subjects who dominate the films I am concerned with here are directly comparable to the victims of the US in Abu Ghraib or Guantanamo Bay.
- 3 This economic reality is provocative when considering how many of the films about dementia in the US and the UK feature highly educated, middle-class well off protagonists. Sam and Tusker in *Supernova* and Anthony in *The Father* are typical in this regard.
- 4 I’m indebted to Amber Jacobs for this term which she used when curating a series of film screenings which had the domestic uncanny as a highly generative theme.
- 5 See also Heather Love (2010).
- 6 See Shakespeare et al. (2019) for a discussion of the links between struggles for rights for people with learning disabilities and those with dementia. For an exploration of the necessary re-evaluation of ‘slow life’ in relation to people with learning disabilities see Hickey-Moody (2015).

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