

“Be Patient, Dear Mother...Wait For Me”: The Neo-Infirmity Film, Female Illness and Contemporary Cinema

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Contemporary filmgoers asked to recount memorable scenes in such popular films as Superman Returns (2006) and Spider-Man (2002) may point to iconic moments of spectacular action or romantic fantasy. Probably few will vividly recall that both films include key scenes in which lead characters encounter elderly women hospitalized or on their deathbeds. The scenes do not appear in pre-release trailers or other promotional materials, and viewers may regard them as merely expository or transitional moments between episodes of action, comedy or romance. Those holding tickets for the chick flick of the moment might anticipate such scenes, but viewers of mainstream action blockbusters may be struck by the apparent violation of generic expectations. Whether generic fields are regarded as industrial, textual, or audience constructs, women's hospital-bed scenes do not constitute part of the understood frameworks for “action” genres or for other generic discourses such as comedy or science fiction. Yet an ever-growing number of popular films incorporate episodes of women characters debilitated by illness or injury. For ease of argumentation, I categorize these works as neo-infirmity films, using the term to suggest differences from those films explicitly apprehensible as deathbed melodramas, those films that make a protagonist's terminal illness a principal plotline. Deathbed or hospital-bed scenes recur in unexpected generic territory partly as a consequence of exceptional narrative strategies. Numerous contemporary films make such scenes essential to their narrative progression. In addition, the scenes benefit from particular aesthetic situations, their flat or somber imagery implicitly rewarding the return to a more vibrant aesthetic in subsequent scenes. Operating at the intersection of melodrama and realism, the scenes are instrumental as well in staging contemporary cinema's gender politics.¹

Outside the narrow space of deathbed melodrama, the bedridden-woman scene tends to bookend or catalyze narrative action. Superman Returns opens with a deathbed scene featuring an elderly woman who leaves her vast wealth to the nefarious Lex Luthor. Spider-Man includes a scene in which the hero's aunt is hospitalized after being terrorized by the nefarious Green Goblin. Miami Vice (2006) and Collateral (2004), both directed by Michael Mann, include key scenes in which male protagonists visit hospitalized women, then shift into action. Even the child-friendly science-fiction epic Star Wars: Episode III—Revenge of the Sith (2005) takes on the neo-infirmary mantle, climaxing with a deathbed scene and pan-galactic funeral procession. Why have such scenes proliferated in contemporary cinema, and in what ways are they legible? Do they recuperate tired anti-feminist tropes or demarcate original spaces of female authority? In what follows, I argue that women's deathbed and hospital-bed scenes in contemporary cinema validate anew the maternal role and the figure of the mother, transporting the woman-centered discursive space of melodrama into narrative terrain often hostile to women's presence. Through this relocation, the films emphasize her importance to sons in particular (and less often to daughters, husbands, and the larger family unit). Many such scenes simultaneously undermine women's agency, reducing mothers to principally symbolic, literally immobile roles. The texts I analyze here treat mothers with both reverence and scorn. For a wider view, I also draw on representations of debilitated women who are not mothers or wives. Ailing women become catalysts for male psychological transformation occurring through grief, action, or both in combination. Feminist scholars have searched exhaustively for signs of female agency in popular cinema's representation and reception, finding films that depict women in straightforwardly retrograde or progressive manners, or in curious fusions, all addressing viewers in complex ways. Contemporary cinema gives us hypersexual action heroines, ditzy but assertive teen girls, and diabolical women professionals, figures all demanding dynamic viewing positions. The

rejuvenated female-illness scene and subplot elicits equally complex responses. In all, such scenes speak to continued ambivalence surrounding women's representation in popular cinema, and to continued patrolling of the boundaries of female power.

This essay seeks to understand a particular narrative and aesthetic feature in a range of film and video texts. I compare selected texts from contemporary Hollywood cinema, alongside three parallel discourses that also deploy melodramatic modes of articulation: nonfiction amateur video as relayed via television news programs, international art cinema, and U.S. independent cinema. Through this comparison, I argue for homologies across multiple fields of textual production. No critical approach, however rigorous, can account for all aspects of industrial production, cultural situation and reception practice. Still, a comparative approach can call attention to moments of intense, and intensely gendered, emotion in popular Hollywood cinema and the parallel media discourses with which it shares space in diverse reception communities.

Interrogation of these recurring emotion-prompting moments can also generate insights into the cultural work done by filmic representation. Numerous critical tools contribute to this analysis. Attention to *mise-en-scène*, cinematography and editing provides a map of representations and a guide to specific films' formal strategies for engaging viewers. Consideration of narrative codes within and across films shows how texts situate deathbed scenes to do particular thematic and ideological work. Finally, genre scholarship attunes us to texts' consistent deployment of the discursive strategies of which genres constitute a part. While Hollywood studio productions provide the foundations for the neo-infirmity film, I incorporate the Terri Schiavo case to demonstrate a parallel aesthetic in nonfiction media, while studies of Mother and Son (*Mat i syn*, 1997) and Safe (1995) indicate ways contemporary films outside established Hollywood frameworks powerfully represent women's illness and death. Female-infirmity scenes reproduce or interrogate particular

cultural logics across disparate production and reception contexts throughout the developed world. Within a wide discursive space, the texts studied here stage narrow, highly gendered conflicts of agency and signification.

Terri Schiavo and the Right to Be Seen Dying

In early 2005, images of brain-damaged hospital patient Terri Schiavo appeared in heavy rotation on U.S. television. Schiavo, who was in a vegetative state for over fifteen years before her death at age 41, was the focus of an intensely public legal battle. Amid coverage of press conferences called by government officials, lawyers, and Schiavo's parents, news stations repeatedly aired video footage (shot by parents Bob and Mary Schneider in 2001 and 2002) of the awake but largely unresponsive Schiavo lying in a hospital bed or being massaged by nurses. Television coverage often combined the video footage with 1980s still photographs of a smiling, attractive, healthy Schiavo, reminding viewers of her tragic decline.² Schiavo's body, out of her control even before media reproduced her image, represented the prospect of death as vividly as any recent media image, fiction or nonfiction. The image's use was fundamentally exploitative, yet like most exploitation was significant in manifold ways. Schiavo's image could mobilize viewers' senses of their own social identities and family relationships. Institutional discourses and figures—from journalism, medicine, government and law—mediated the depiction of Schiavo's body. Moreover, an implicit, sentimental rhetoric of reverence for human life undergirded the spectacle of suffering. For example, even as CNN and other channels used the home-video footage in teasers for upcoming stories, a CNN reporter (Bill Hemmer on Wolf Blitzer Reports, 2005) referred to the Schiavo legal battle as “an emotional and controversial case,” acknowledging moral and ethical positions if not explicitly adopting any.

The death of loved ones and relatives is a human experience shared across cultures, yet its representation can engender anxiety for producers and receivers. Broadcasters and

media commentators' presumed compassion helped legitimate Schiavo's representation; lacking demonstrable evidence of such sentiment, viewers could regard the coverage as crassly exploitative. Such images also gain legitimacy through their location within social systems that ritualize displays of illness, suffering and death as means to grapple with the impact of those conditions. Elisabeth Bronfen (2000, p. xv) observes that "[d]eath is a solitary, highly individual and incommunicable event, perhaps the most private and intimate moment in the life cycle of the human subject," but also that "dying, burial and commemoration are always also public matters. [...] [D]eath [...] is conceived as a wound to the community at large and a threatening signal of its own impermanence." Elsewhere, Bronfen and Sarah Webster Goodwin (1993, p. 16) note that "[d]eathbed and mourning rituals help a given family or society to confirm its structures, both social and ideological." Widely disseminated and highly mediated, the Schiavo videos constitute part of these social rituals. The case's many commentators, often shown in split-screen images alongside the years-old footage of Schiavo, repositioned the individual narrative within legal, philosophical, and spiritual debates.

Given the case's strong presence in mainstream media, it seems both appropriate and chilling that a film viewing avowedly prompted Schiavo to express a desire not to live in a vegetative state. CNN ("Schiavo Case," 2005) reported that "[Michael Schiavo] and his attorney said Terri made it clear [...] that she would not want to live in such a condition [...] They said she once made the comment to her best friend after seeing a movie in which a character was in such a state." Like the televisually framed images of Schiavo, fiction film mediates the process of dying, enabling tangible emotional responses to staged rather than lived suffering. And just as news programming located the Schiavo videos amid disparate television content—advertising, sports and entertainment news, and other material not invoking life-and-death struggles—so contemporary films can present images of female

incapacity in both familiar and unexpected contexts.

Locating Female Illness in Popular Film and Television

Terminal-illness melodramas can elicit polar responses from viewers: either immersion in or disavowal of a fictional characters' suffering, though often the responses conjoin. Melodramas erect structures of feeling even as they point to exits from those structures, exits marked by recognizable star personas, histrionic performance, stylized images and sound, and the fiction-film frame generally. Neo-infirmary films relocate illness and death but still repeatedly call on the generic markers of deathbed melodrama (insofar as producers and audiences recognize such a subgenre).³ Some explicitly represent dying mothers, others deploy surrogate mother figures, and some include dramatic hospital-bed scenes without mandating the afflicted women's eventual deaths. For simplicity's sake, I will refer broadly to mothers and deathbed scenes even when some films' narratives deviate somewhat from these specific relationships and events (i.e. even if the texts do not subsequently kill off these women). Images of bedridden women convey female infirmity, powerlessness, and the threat of death whatever becomes of the ailing figure later.

In her extensive work on death and representation, Bronfen observes that "[t]he aesthetic representation of death lets us repress our knowledge of the reality of death precisely because here death occurs at someone else's body and as an image" (1992, x, italics in original). Transporting Bronfen's arguments to contemporary media, we can see how television news and dramas use particular narrative devices to frame representations of death. Serial television dramas repeatedly narrate and thus make comprehensible the workings of social institutions—law, government, the police, medicine—that routinely exercise power over social bodies. Fictionalized representation of death has long been a staple of network-television hospital dramas such as St. Elsewhere and E/R. Those programs' serial formats accommodate viewers' long-term investments in the subject of medical care. However, such

programs typically maintain a narrative focus on care providers rather than the ill or dying. As Jason Jacobs (2003, p. 94, p. 116) observes, television hospital patients tend to function as catalysts for development of physician characters. With periodic exceptions, hospital series foreground continuing characters' subjectivities, not those of a revolving casts of patients. When hospital-bed scenes occur, they tend to focus on the care providers' responses to patients rather than on the patients themselves.

Fiction films historically have not emphasized the workings of social institutions to the same degree as television. Popular cinema has profited more from locating death in generic frameworks—in particular, those of action, war, and historical films; and less often in maternal and family melodrama—than from situating it in non-violent, realist representation. Hollywood films in particular have preferred spectacular, violent death to somber deathbed scenes or other avowedly realist depictions of the terminal stages of life. However, neo-infirmity films can include deathbed or hospital-bed scenes alongside spectacular action. Through this repositioning, the films enable viewers to confront their own understandings of the social protocols of illness and death. They reenact the mental trauma of bearing witness to familial suffering but negotiate that trauma through the parameters of film narrative and genre.

Outside films set amid the medical profession,⁴ cinematic hospital-bed or deathbed scenes typically focus on the victim of illness, often as part of a melodramatic plot. Films treating female infirmity tend to leaven narrative emphasis on death and dying with other conflicts, especially family quarrels or battles with legal and medical institutions. In classical Hollywood melodrama, the deathbed scene can also drive a protagonist's subsequent transformation. In Now, Voyager (1942), Bette Davis's Charlotte Vale successfully redefines herself following her domineering mother's death. In The Scarlet Empress (1934), Marlene Dietrich's Catherine of Russia rises to power after the death of her controlling mother-in-law,

the Empress. Deathbed scenes can also provide the climax of a dolorous-romance narrative, as in the post-classical Love Story (1970). In female-friendship films, death frequently supplies closure. In films such as Beaches (1988), women are free to befriend other women as long as one of them is destined to die. Most frequently, deathbed scenes mobilize cinematic discourses surrounding family. In Soul Food (1997), for example, a matriarch's hospitalization sets in motion a series of family crises and reconciliations. Linkages of death and family occur in films outside Hollywood as well: to produce its innovative matrilineal narrative, the Dutch film Antonia's Line (1995) stages a series of deathbed scenes.

As might be expected, many films that depict female illness withhold physical symptoms. In Last Holiday (2006), for example, Queen Latifah's protagonist uses a terminal-illness diagnosis as an opportunity to vacation in Prague, eat lavishly, and deploy the boisterous Queen Latifah persona. The film's denouement—she's been misdiagnosed—retroactively explains the absence of physical symptoms. The earlier Stepmom (1998) similarly delivers a terminal-cancer diagnosis to one of its protagonists, a mother played by Susan Sarandon. Post-diagnosis, she plays with her children and cultivates a friendship with her ex-husband's new wife, played by Julia Roberts. She is never hospitalized, nor do physical symptoms appear; in the final freeze-frame, she looks a trifle thin. One True Thing (1998) does show the physical deterioration of Meryl Streep's protagonist after she develops cancer; the narrative's final turn to a legal battle over assisted suicide helps manage the emotional drama. As in the Schiavo case, this film displaces inconsolable psychological and emotional conflicts into more manageable conflicts with institutions. Two Weeks (2006) also focuses on the dying days of a cancer-afflicted mother (played by Sally Field), but inserts periodic interview monologues showing her in good health.

Popular cinema's figurations of death regularly enter the domain of melodrama, whether the term designates a genre or a larger discourse. One might be tempted to define the

deathbed melodrama as a discrete subgenre, characterized by particular production and marketing strategies, textual operations, and reception practices. While promising in some respects, such an approach artificially restricts contemporary moving-image media's extensive traffic in images of dying and illness. Alternately, one can approach genre through concepts of discourse and modality, which contribute to nuanced models of melodrama's features and operations. James Naremore for example, argues for genres not as compendiums of individual films (or "artifacts") but as discourses, "a loose, evolving system of arguments and readings that helps to shape commercial strategies and aesthetic ideologies" (1998, p. 11). Deathbed scenes can thus be seen to comprise part of melodrama's broadly functioning discursive space. Deathbed scenes also accord with claims for melodrama as a mode, advanced in particular by Christine Gledhill and Linda Williams. Williams (2000, p. 229) defines melodrama as "a specific mode of aesthetic articulation adaptable across a range of genres, across decades, and across national cultures." Similarly, Gledhill (1998, p. 42) argues for melodrama as "the fundamental mode of popular American moving pictures. [...] If emotional and moral registers are sounded, [...] then the operative mode is melodrama." Coupled with historical scholarship identifying Hollywood's longstanding designation of avowedly male-centered crime and war films as melodramas (Neale 1993, Gledhill 1987), melodrama can be understood as a highly mobile discourse. Linking the propositions of Neale, Williams and Gledhill, I argue that melodrama comprises a set of transcultural discourses, which coalesce into a mode of aesthetic articulation deployed across diverse media texts. Melodrama provides an overarching framework for discrete genres (such as the male-dominated action film), and is also manifest in discrete moments within films that exhibit few other links to melodramatic discourse (e.g. films in the emotionally colder space of the male thriller). Through deathbed or hospital-bed scenes, melodramatic discourses can be literally embedded into films as diverse as popular science-fiction and fantasy

blockbusters, comedies, horror films, and even art-cinema exercises. Given cinema's continued ability to sanction or proscribe social behavior, proliferating deathbed scenes can enable and disable women's agency in historical reality.

Aesthetics of the Contemporary Deathbed Scene

Gender roles and representations are central to the discursive space of melodrama, and deathbed scenes across film history articulate gender codes in significant ways. Tropes of contemporary Hollywood are nicely encapsulated near the end of Star Wars: Episode III—Revenge of the Sith, in the statement of a robot medic attending the long-anticipated death of Padmé, the trilogy's sole female character: "For reasons we can't explain, we are losing her. We don't know why. She has lost the will to live." In popular cinema, women still become ill and die so regularly that narrative explanations are scarcely necessary (and in this case, the explanation is both redundant and contradictory). Defined in terms of frailty, immobility, and powerlessness, death is often connotatively linked to femininity, as Bronfen, Hélène Cixous and others have argued (Bronfen 1992; Cixous cited in Goodwin & Bronfen 1993, p. 5). Hence the abominability of male suffering, and the apparent normalcy of female affliction. Dying patriarchs—for example, those of Magnolia (1999) and Big Fish (2003)—often evoke gravitas and carry narrative and thematic weight far out of proportion to screen time and plot exigencies.⁵ The dying mother, on the other hand, often functions as an object of viewer antipathy rather than fascination, revulsion rather than respect. For instance, the U.S. independent film Igby Goes Down (2002) opens with a mother's deathbed scene, played for cruel comedy (she attempts assisted suicide but fails) rather than viewer sympathy. Throughout the film, this bedridden mother (Susan Sarandon) engineers a protracted suicide attempt, which supplies the key justification for her family's myriad dysfunctions. Her eventual death supplies the film's dramatic climax—after assisting her suicide, the protagonist, Igby, clutches his dead mother's hand and breaks into tears—but in its wake the

film promises relief. At last, the narrative implies, the central male characters may begin to heal the damage their toxic mother has inflicted on them. Igby Goes Down highlights the degree to which deathbed scenes work to neutralize female power, and to efface that neutralization through displays of pathos from the male attendants left alone but sometimes newly autonomous following a mother or loved one's death. Displays of mothers and wives as objects of pathos often tell us more about the male witnesses than about the suffering women. Still, even in this recurrent scheme, divisions of power, and the limits of male power, are recognized.

Close formal analysis will help indicate how particular films situate ill or dying women visually and narratively. Genre films that include hospital-room settings in particular draw from a fairly limited range of aesthetic options. Conventional formal devices are strongly apparent in the Terri Schiavo videos, and these nonfiction texts provide useful points of comparison for fiction-film representations. Aside from the handheld videography and the harsh fluorescent lighting that lends figures a pasty and yellow hue, their form and iconography parallel scenes in deathbed cinema and fiction television. The Schiavo family videos rely on waist-up framings of Terri, with face and arms most prominent, encouraging viewers to study her body language. (The family apparently recorded the scenes as a makeshift diagnostic tool, as they include shots of Terri's father, Bob Schneider, waving his hands across her eyes and clapping next to her ears to elicit physical responses.) Zoom-ins frequently crop the Schneiders out of the scenes, though close-ups of hand-holding appear as well. Occasional long shots show the bare-walled hospital room and medical instruments, imagery that appears in many films as well. Notable across neo-infirmary texts is the presentation of the strongly un-photogenic space of the hospital room, frequently a site for both physical vulnerability (usually women's) and emotional expression (usually men's). Equivalently sterile settings—jail cells, government offices, factories—rarely serve as staging

grounds for combined physical and mental traumas, suggesting the hospital room's, and particularly the deathbed's, suitability for episodes of violation.

Filmed around the same time as the Schiavo videos, the global blockbuster Spider-Man also includes a hospital-bed scene, in which young protagonist Peter Parker comforts his injured aunt May (a surrogate mother for the orphan Peter). Visiting May after her encounter with the Green Goblin, Peter finds her in hysterics, demonstrated by actress Rosemary Harris gesticulating madly while sitting up in bed. Later, a moving camera presents a medium shot of the sitting Peter and the reclining, unconscious May, followed by a close-up of him holding her hand, then a tilt up to Peter's face. The scene shifts to a later time, with Peter and his beloved Mary Jane in conversation, and two cutaways to the resting May appear (also during this scene, another key character appears, dispatching May entirely as a point of interest). As in the Schiavo videos, close framings block out all but the most proximal background elements, creating an intimate space rather than a sterile, functional one. As in many of the films, conclusive attention goes to the attending male rather than to the prostrate woman.

The ailing-woman scene's ability to underscore dilemmas of masculinity helps explain its presence in two films directed by Michael Mann, whose work exclusively stages conflicts among male professionals. Collateral includes a scene in which contract assassin Vincent forces cab driver Max (Jamie Foxx, who also stars in Miami Vice) to visit Max's hospitalized mother, Ida. Ida's naïveté regarding Vincent's presence disempowers her, but the film grants her some agency through her gentle nagging of her son, and through Irma P. Hall's comic performance. Ida appears first in a shot of her hospital room, a relatively large space in which figures remain distant from one another, emphasizing the scene's semipublic, non-intimate nature. To the same end, Max and Ida never touch. The scene uses a series of unbalanced medium shots and close-ups, adapting the highly mobile aesthetic of the film

(shot mostly with a handheld HD video camera) to a more restrained one in which familial interaction might occur. Most shots of Ida show family photos and other images affixed to the wall behind her, personalizing the space and rendering it a site of comfort rather than anxiety. Thematically, the scene adds subtext to Max's character and does not concern his mother; it is also "about" Vincent, thanks to a backstory of the anger he attributes to an unhappy childhood. The scene ends with Max's departure, and the film shifts into a kinetic foot chase, not returning to Ida.

Miami Vice, which Mann wrote as well as directed, also uses its ailing-woman scenes to lend psychological depth to its black male lead. During the investigative work of overdressed policemen Crockett and Tubbs, sadistic criminals abduct and brutalize Tubbs' co-worker and love interest, Trudy. She is rescued, but nearly killed in an accompanying explosion, and thus hospitalized for the film's final act. She appears in two hospital-bed scenes, the first a single, fifteen-second close-up shot that includes part of her face and then pans down to foreground medical instruments. Then, in the film's final sequence, views of Crockett's separation from his own love interest (the film's central romantic plot) alternate with shots of Tubbs at Trudy's bedside. The scene begins with a tight close-up of Tubbs holding Trudy's hand, and later, medium close-ups of the worried Tubbs and low-angle close-ups of Trudy's face, shot from the foot and side of her hospital bed. She moves but does not open her eyes, and bandages, tubes and medical equipment are visible around her. The scene ends with an extreme close-up hand-holding shot, with the brand name of Tubbs's expensive watch visible in the frame. (Throughout the film, shots carefully include the logos of many manufacturers, who are acknowledged in the film's credits as well.) Thus, while the film's finale includes a moment of physical intimacy, it also reconstitutes that moment into a showcase for luxury consumer goods, implying that expensive male style need not hinder emotional expression, or vice versa.

In like fashion, a blockbuster film showcasing CGI technology and cartoon heroism may use an elderly woman's death as a comic expository device. The deathbed scene in Superman Returns appears at the outset of the film rather than its emotional climax. It also features a character viewers are not asked to invest in emotionally. Instead, it serves principally thematic and expository functions, demonstrating Lex Luthor's amorality and explaining his return to financial power following defeats in previous Superman films. The scene depicts the elderly Gertrude Vanderworth lying in bed in an ornate setting, attended by a man not identifiable. She appears principally in close-ups, wearing a breathing tube across her face, which is half-obscured by a bedspread. A hand-holding image appears, along with a close-up of her hand as she signs her name to a will benefiting Luthor. The scene's tone is campily dramatic, with a perverse undercurrent (as she speaks the line, "You've shown me pleasures that I've never known," the camera pans down her bed to show a pair of dolls, and below those, two Pomeranians licking each other's snouts). The scene concludes at the dying woman's expense on many levels—showing her gullibility, she loses her estate to the villain as people outside her bedroom door shout "he doesn't love you" and "he's a monster;" and her appearance ends with a close-up of one of the dogs licking her limp hand. As in classical melodramas set in upper-class milieus, the dying matriarch tidily signifies the decadence of the rich. Consistent with the film's overall project, the scene introduces viewers to a world where women's roles are principally symbolic.

Illness scenes insist on the body's weakness and vulnerability, even as they conceal that body from view, through obscuring decoration (gowns, sheets, screens and other bedside or hospital paraphernalia), composition and shot selection. Meanwhile, emphasis on the body's situation in social and familial relationships further mitigates views of that weakened body in isolation. Neo-infirmity films routinely feature bedside meetings of mothers and children. The absence of such views partly contributes to the discomfiting nature of the

Schiavo footage, shot by her parents who appear onscreen only briefly, and of course reversing the more familiar ailing-parent/attending-child dynamic. Nearly all also rely on the visual motif of hand-holding, supplying close-ups that block out a sterile hospital setting. Still, wider shots of that setting typically appear, with high-key lighting and realist mise-en-scène. Though shot choices privilege family interactions and icons of sentiment, few films aestheticize the deathbed setting. Even as the films take up different subjects preceding and following these scenes, they do stage sickbed or deathbed interactions, interactions often with only weak narrative relevance, in alarmingly straightforward ways.

Who's Sorry Now? Female Infirmity, Male Pathos

Female, usually maternal, vulnerability is thematically central to neo-infirmity films. To this end, they at least partly value women's subjectivities and experiences. At the same time, most show stronger investment in male pathos, with ailing women sometimes functioning in schematic ways to produce it. In almost none are the women empty repositories for viewers' and male characters' sentiment, yet in few do the women claim narrative centrality either. Similar tensions surround ostensibly women-centered films such as Million Dollar Baby (2004), which mercilessly reroutes a narrative of female strength into one of female weakness and male self-pity. Throughout neo-infirmity films, the pained expressions of male onlookers render female suffering emotionally legible (in the overdetermining manner of Hollywood films, heartstring-tugging images of ailing women share narrative time with reaction shots modeling particular emotional responses). Partly this dynamic arises from the films' choices not to represent explicit physical symptoms of infirmity. As Bronfen and Goodwin argue, "the human body's fatality—decay, decomposition—demonstrates the way death gains presence in the realm of the real" (1993, pp. 10-11). With no images of decay aside from intermittent wrinkled skin or prone bodies, the films supply men's reactions as evidence of women's grave conditions. These reactions—

a son's or lover's look of horror upon discovering the ailing woman, followed by mute sadness as he sits by her side—arguably serve as loci for viewer response regardless of gender. Physically present but often literally anesthetized, women characters can supply the pretext for displays of male grief. Still, women's corporeal presence is central, and women occupy roles very different than those assigned to them as objects of erotic gazes.

Particularly in their rendering of male pathos and female corporeality, popular neo-infirmity films bear comparison to a radically different film, the Russian production Mother and Son. Alexander Sokurov's film sustains across its entire running time the very spare narrative of an adult son caring for his dying mother in and around a tiny house in the remote Russian countryside, negotiating loss through innovative aesthetic choices. The film opens with a long-duration shot of its title characters, a shot so static it is long indistinguishable from a still photograph. In subsequent scenes, the son carries his mother to a lush arbor and a wind-caressed field of grain, and throughout they engage in intermittent, whispered conversation. About half of the 65-minute film depicts the anguished son alone, usually walking slowly through nature. In scenes showing both mother and son, he holds her in his arms, combs her hair, and performs other physical rituals of filial affection. Her death is subtly registered, with the son holding a silent vigil over his mother's body for the film's closing minutes.

Mother and Son deals with dying not through narrative complexities but through a simultaneous sparseness and hyper-aestheticization. It grants strong narrative relevance to looming death: the deathbed interaction supplies the exclusive plot element, no hospital scenes occur, and no other subject or event is introduced. It also makes death a visual component of its lush, rural landscapes—literally, through views of its ailing mother and anguished son; and metaphorically, such as through spectacular views of a frame-engulfing black cloud and a far-distant ship on a shimmering sea. In place of narrative incident, the

entire film is strongly aestheticized. It consists principally of long takes, is largely absent of dialogue, and films its two characters in static close-ups and long shots that are impressionistically lit and colored. Yet rather than manage its subject matter through superficially lyrical spectacle (in the manner of 1998's What Dreams May Come, for example), the film uses its rich visual palette to underscore its characters' emotional pain and fatigue. The nearly motionless, five-minute long opening shot locates viewers at the site of this pain as well. At the same time, it overtly redesigns this landscape. The opening shot is a medium close-up that, like the rest of the film, is shot through a colored glass pane positioned at an angle, stretching the composition diagonally and producing an anamorphic effect similar to the distorted death's head at the foreground of Dutch painter Hans Holbein (the Younger)'s The French Ambassadors (1533).⁶ The film thus simultaneously grounds viewers in visual space—through the close view, the nearly frozen subjects, and the fixed camera position—and radically distorts that space. The camerawork and color do not mimic subjectivity: no point-of-view shots or eyeline matches occur, and the lack of dialogue and minimal physical expressiveness create barriers to interiority. Instead, by alternating long shots of the depopulated landscape with distorted close views of its characters, the film encourages viewers to confront the psychological experience of separation and loss. The film juxtaposes death's emptiness and pallor with life's dynamism and vividness. It too offers an image of entwined hands, in its penultimate shot, in which the son clasps his dead mother's hand while gently blowing air on a moth that sits on it. The film ends with a medium shot of the characters' heads low in the frame so their faces are mostly cropped out. The film thus finally grants them visual equality (contrary to the many shots elsewhere of the strapping son and the wispy mother), and the son's final line, "Be patient, dear Mother...wait for me," aligns their situations as well.⁷

Distinct in many ways from U.S. and other international productions, Sokurov's film nevertheless features another narrative trope characteristic of female deathbed or hospital-bed scenes: nearly wordless interactions between bedridden women and their male attendants. Hollywood films tend to provide a straightforward narrative justification for such interactions: the women are either sedated, comatose, or near death. Male looks of horror or incredulity aside, such interactions take on a normative cast through their repetition across films. In an insidiously commonsensical process, men are reduced to stunned silence, while women are characteristically silent. In supplying narrative motivation for female muteness and unconsciousness, Mother and Son replicates Hollywood infirmity films' timeworn patriarchal scenario. Tellingly, most of Sokurov's other films, including the talky, virtuosic Russian Ark (Russkiy kovcheg, 2002) and the second film in a proposed family trilogy, Father and Son (Otets i syn, 2003), feature almost no speaking roles for women. The latter film does not depict a parent's death, though both father and son imagine this event through metaphoric dreams that conclude the film—the son dreams of being alone on a path, the father of waking during a heavy snowfall.

Fathers' deaths in cinema tend to occasion loss and unmooring, and are frequently associated with mature male protagonists, as in Magnolia and Affliction (1997). Such deaths typically confirm knowledge already gained, bonds already forged. Mothers' deaths function very differently, hastily producing men's knowledge and maturity. Like many other films, Hollywood neo-infirmity films use wives' or mothers' deaths as epochal occurrences for male protagonists, paradigm-altering events for husbands or rites of passage for sons. Even as women's infirmity temporarily rocks the foundations of male protagonists' worlds, ultimately such events are commonplace or even necessary: husbands must evolve, sons must grow up. (Mother and Son is exceptional in its final assertion that the son's narrative concludes with the mother's.) Neo-infirmity films negotiate this apparent paradox—the simultaneously

routine and exceptional nature of women's illnesses—through emotional displays. Curiously, only when women die do men exhibit connotatively feminine signs of emotion such as prostration and tears. In a lethal co-optation of sentiment, women's deaths specifically authorize such displays. Following these events, the bereaved males return or ascend, more fully humanized, to their roles as adult men. Films typically surround father's illnesses and deaths, by comparison, with connotatively masculine behavior: anger, revenge, and father/son power struggles in various forms. In the logic of Magnolia or Affliction (a logic the films imply is the root of their characters' familial and psychological crises), sons exhibit ostensibly masculine emotions as defenses against the phenomena that strike down their fathers.

Unsafe

Scenes of female immobility and infirmity, which one might imagine as marginal to the vast output of contemporary international cinema, nonetheless appear with some regularity across genres and production contexts.⁸ Neo-infirmity films' textual and social appeals bear comparison as well to those of another 1990s film, writer-director Todd Haynes' Safe, which takes the enigma of female infirmity as its central subject. A sort of anti-melodrama melodrama, Safe relies more on distance and alienation than proximity and recognition for its emotional effects. In the film, the fragile, upper-middle class wife and stepmother Carol White (Julianne Moore) develops an illness legible only as environmental poisoning or multiple-chemical sensitivity. (Like many commentators on the film, Haynes himself has referred to the illness as metaphoric of AIDS, and the film is set in 1987, amid the rising AIDS epidemic.) The film depicts Carol in various stages of psychological and physical decay, and includes one hospital-bed scene before moving her to the world of alternative medicine.

Safe complicates the recurrent cinematic emphasis on illness and death as means to unite families and promote male self-interrogation. Carol's husband, Greg, is at best frustrated and ineffectual, at worst silently blaming and remote. Carol is not a biological mother, and has almost no verbal or physical relationship with her stepson, Rory. Carol's growing illness merely exacerbates her social and familial alienation, and the film's one hospital scene evokes principally terror and helplessness rather than staging an affirmative, intimate interaction. Carol visits doctors twice for diagnoses and tests, in scenes that include invasive experiments on her body, shots of her alone in close-ups with minimal backgrounds, and long shots in which other characters stand far away from her in the frame. Once Carol is hospitalized, such compositions recur: Greg and her physician are positioned together at the left edge of a long shot as they assail the prostrate Carol for her lack of medical symptoms, and subsequent shots show Carol in claustrophobic, roughly symmetrical close-ups and medium shots in bed, literally up against a bare wall. Carol's illness leads to greater physical distance from other characters, apparent as well in many long shots of her isolated in a wide frame, often centered in archly symmetrical compositions. Moreover, the film does not confine her illness to a discrete sickbed: she has a coughing fit while driving in traffic, develops a sudden nosebleed at a beauty salon, passes out at the dry cleaner, and hyperventilates while attending a baby shower. Corroborating Judith Butler's (2004, p. 26) observation that the body is "a social phenomenon in the public sphere" that "is formed within the crucible of social life," Carol's illness is thoroughly public and expressly not intimate. An almost comically un-erotic sex scene that opens the film constitutes Carol and Greg's sole intimate contact. Throughout the film, her husband and stepson refrain from embracing her or holding her hand (during their last visit together, Greg does hold Carol's hand, but at the end of the visit he shifts to a standoffish posture, after Carol rebuffs him when something triggers her symptoms). Finally, Carol's infirmity does not offer a path to

male self-knowledge, or to her own. Greg is not present for any of Carol's attacks, and when they discuss her condition, he reacts with bafflement or condescending sympathy rather than with the anguish that characterizes the men in most of the other films. Safe's final scene shows Carol alone in a windowless cabin at the retreat she has entered, staring at her decayed self in a mirror, and the final shot shows her in close-up, facing the camera and confronting the viewer. Ending the film, it offers surcease by default, but no reassurance. Illness here is something to be accommodated and negotiated, but not defeated.

Trauma Management

In addition to denying viewers a narrative of wish fulfillment, Safe eschews images of family solidarity and physical affection. Other films offer the hand-holding images fundamentally as motifs of affirmation. The close-up image also compensates for the limits of dramatic performance. Virtually no actors who play ill or dying characters are actually dying themselves, and death cannot be Method-acted.⁹ (Jason Robards did act in Magnolia while recovering from a life-threatening illness and died less than a year after the film's release, and many actors—including Clark Gable, John Wayne, Robert Ryan, and Oliver Reed—have made films while gravely ill, but typically their characters do not share their illnesses.) In addition, the hand-holding motif strips away the iconography of the medical institution or another semi-specific space, leaving a manageable icon portable to cultural memory. Viewers who have experienced such situations may apprehend this icon with relatively little anxiety. The connotatively charged spaces of hospitals or domestic sites of illness and death require management in different ways, such as through the comprehensive knowledge promised by serial television dramas.

Bronfen and Goodwin note that “[p]erhaps the most obvious thing about death is that it is always only represented. There is no knowing death” (1993, p. 4). Against this void of knowledge and the loss that defines death, representation offers a fantasy of tangibility and

completeness, relying on both the immediacy of the repeatable image (such as Schiavo's) and the distance of the fiction or nonfiction media frame.¹⁰ Far afield from deathbed scenes, representations of violent death, usually men's, are frequently understood as cathartic spectacles or as antisocial fantasies for social subjects for whom real violence is not a viable option. From The Epic of Gilgamesh to 300 (2007) and The Dark Knight (2008), such representations have had lasting popular appeal. Representations of nonviolent illness and death speak to viewing subjects by envisioning undesirable situations that can be contained within narrative frameworks. Even when films locate those scenarios at the margins of other stories, representation itself contributes to knowledge, providing a means of engagement and access.

Neo-infirmity films, like their more familiar deathbed-melodrama counterparts, typically circumvent the trauma of illness or the finality of death through representation of familial relationships (Miami Vice, depicting unmarried lovers, is an exception). They foreground the anxiety and grief of witnesses to trauma while also insisting, through the recurring hand-holding motif, upon the healing power of human contact. While risking triteness or cliché, they use the cinematic apparatus to produce iconic images transportable to social reality, where motionless physical contact often comprises our final intimate communication with the dying. At the same time, as Bronfen and Goodwin note too, representations of death demonstrate “how not only individuals but also groups have defined themselves against what they are not but wish to control” (1993, p. 20). (Hence the convergence of tropes of femininity and Otherness—manifestations of cultural logics of control—with those surrounding death.) In narrating interpersonal responses to illness and death, films provide a foothold, a means of understanding, but also a mode of containment. The discrete boundaries of the film text manage trauma, for better or worse. A.O. Scott (2005), writing about a different film he locates in what he calls the “feel-bad” mode, argues

that “the movies that bring us closer to the sufferings of others also measure our distance from them.”¹¹ Nevertheless, feel-bad movies, or feel-good movies with intermittent feel-bad episodes, can reevaluate the terms of cinema’s implicit contract with viewers, provoking meaningful confrontations and highlighting the expansive emotional possibilities of fiction cinema.

Notes

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¹ Linda Williams identifies the link between the two discourses: “Melodrama appears modern by borrowing from realism, but realism serves the melodramatic passion and action” (1998, p. 67).

² For more on these images, see the Jump Cut special section “Emergency Analysis: Terri Schiavo” (2006); see also Heffernan (2005).

³ On generic marking and modeling, see Neale (2000, p. 28).

⁴ In post-classical U.S. cinema, such films include The Hospital (1971), Visiting Hours (1982), Young Doctors in Love (1982), Disorderlies (1987), Dead Ringers (1988), Critical Care (1997), and Bringing Out the Dead (1999). Notably, they cross genres; hospitals provide staging grounds for drama, horror, comedy and melodrama.

⁵ Sharon Waxman (2005, p. 286) offers this anecdote surrounding Magnolia’s deathbed scene: “Jason Robards’s dying monologue goes on for ten full minutes, from twenty-two pages of script. Watching his cut, [director Paul Thomas] Anderson remarked, ‘I like it. It’s long. It’s indulgent. Let’s leave it.’”

⁶ Edward Guthmann (1998) writes, “Sokurov shoots through mirrors and panes of hand-painted glass positioned at various angles.” Guthmann and other reviewers also note Sokurov’s debt to nineteenth-century German painter Caspar David Friedrich, whose subjects include death-tinged landscapes.

⁷ The quotation comes from the subtitled DVD of the film (Fox Lorber Films/Winstar Video, 2000).

⁸ As this essay demonstrates, such scenes are of course not restricted to mainstream U.S. cinema. For example, the independent Honeydripper (2007) uses an elderly nightclub singer’s death to signal the passing of an era. The pop-art film The Fountain (2006) makes the immobilized woman its key plot thread. The transnational production Babel (2006) locates Cate Blanchett’s gunshot victim on the grimy floor of a hut in a Moroccan village, providing a hospital-bed scene with no hospital and no bed. The popular German comedy Goodbye, Lenin (2003; U.S. 2004) weaves comic and political elements into an extended deathbed narrative, as an East German woman’s children and friends monitor her recovery from a coma; her illness serves as an elaborate metaphor for German unification. In European art cinema, to name just two prominent examples, Talk to Her (2002) foregrounds a beautiful-woman-in-a-coma plot, and Three Colors: Blue (1993) includes a subplot of the female protagonist’s relationship with her ailing, hospitalized mother. And from East Asia, the unnerving Japanese film Audition (Ôdishon, 1999) begins with a wife and mother’s deathbed scene, develops as a realist drama about male grief, and later shifts into visceral, fantastic horror.

⁹ James Naremore elaborates on this subject in his discussion of “biological performance” (1988, pp. 19-21).

¹⁰ Bronfen and Goodwin note this as well, claiming that “[r]epresentations are fantasies of wholeness” (1993, p. 13).

¹¹ Scott’s statement is misprinted as “measures” in the original. He refers to films about Third World suffering: Hotel Rwanda (2004) and the documentaries Born Into Brothels (2004) and Darwin’s Nightmare (2005). Unlike the films this essay covers, those to which Scott refers depict situations few viewers in the developed world will experience firsthand.

References:

- Bronfen, Elisabeth (2000) 'Death. A preface', in The Limits of Death: Between Philosophy and Psychoanalysis, eds Joanna Mora, Mark Robson & Marquard Smith, St. Martin's Press, New York, pp. xv-xxiv.
- Bronfen, Elisabeth (1992) Over Her Dead Body: Death, Femininity, and the Aesthetic, Manchester University Press, Manchester, UK.
- Butler, Judith (2004) Precarious Life: The Powers of Mourning and Violence, Verso, New York.
- The Epic of Gilgamesh (1977) Trans. Nancy K. Sandars, Penguin Classics, New York.
- Gledhill, Christine (1987) 'The melodramatic field: An investigation', in Home Is Where the Heart Is: Studies in Melodrama and the Woman's Film, ed Christine Gledhill, BFI, London, pp. 5-39.
- Gledhill, Christine (2000) 'Rethinking genre', in Reinventing Film Studies, eds Gledhill & Linda Williams, Arnold, London, pp. 221-243.
- Goodwin, Sarah Webster & Elisabeth Bronfen, eds (1993) Death and Representation, Johns Hopkins University Press, Baltimore.
- Guthmann, Edward (1998) '“Mother and Son” celebrates intimate family relationships' (film review), San Francisco Chronicle, 20 February, p. C3.
- Heffernan, Virginia (2005) 'Provocative snapshots of a many-layered issue', The New York Times, 21 March, p. A15.
- Jacobs, Jason (2003) Body Trauma TV: The New Hospital Dramas, BFI, London.
- Naremore, James (1988) Acting in the Cinema, University of California Press, Berkeley.
- Naremore, James (1998) More Than Night: Film Noir in its Context, University of California Press, Berkeley.
- Neale, Steve (2000) Genre and Hollywood, Routledge, London.
- Neale, Steve (1993) 'Melo talk: On the meaning and use of the term 'melodrama' in the American trade press', The Velvet Light Trap 32 (Fall), pp. 66-89.
- Preston, Catherine L. (2006) 'Emergency analysis: The academic traffic in images', Jump Cut 48 [Online] Available at: <http://www.ejumpcut.org/currentissue/SchaivoPreston/index.html>, accessed 15 November 2006.

- 'Schiavo Case Goes to Appeals Panel' (2005) CNN.com, 22 March [Online]
Available at: www.cnn.com/2005/LAW/03/22/schiavo/, accessed 28 March 2005.
- Scott, A.O. (2005) 'The feel-good feel-bad movie', The New York Times, 27 March [Online] Available at: www.nytimes.com/2005/03/27/movies/27Scot.html, accessed 27 March 2005.
- Staiger, Janet (2006) 'The cutting edge: Emergencies in visual culture', Jump Cut 48 [Online] Available at: <http://www.ejumpcut.org/currentissue/SchaivoStaiger/index.html>, accessed 15 November 2006.
- Waldman, Diane (2006) 'Schiavo videos' context and reception: Timely triage', Jump Cut 48 [Online] Available at: <http://www.ejumpcut.org/currentissue/SchaivoWaldman/index.html>, accessed 15 November 2006.
- Walker, Janet (2006) 'The videographic persistence of Terri Schiavo', Jump Cut 48 [Online] Available at: <http://www.ejumpcut.org/currentissue/SchaivoWalker/index.html>, accessed 15 November 2006.
- Waxman, Sharon (2005) Rebels on the Backlot: Six Maverick Directors and How They Conquered the Studio System, Harper Entertainment, New York.
- Williams, Linda (1998) 'Melodrama revised', in Refiguring American Film Genres, ed Nick Browne, University of California Press, Berkeley, pp. 42-88.
- Wolf Blitzer Reports (2005) CNN, 23 March.

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