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*On peut mourir tranqui!*  
Functionalizing Alzheimer's Disease from  
*Wellkåmm to Verona* (2006) to *La Finale* (2018)

**Abstract:** Popular representations of dementia seemingly create an overall narrative of loss; the loss of productivity, economic resources, social power, autonomy, and, most of all, memory and personhood. Though the preoccupation with dementia continues to proliferate in various media, visual representations of the disease have remained relatively scarce and conventional. For the most part such representations focus on female patients and are characterized by somber undertones. Based on a representative selection of contemporary European films, this article inquires whether there are other ways of presenting and dealing with dementia and asks how comedies which feature older men afflicted with Alzheimer's manage to generate laughter, to what extent these films use mechanisms of denigration, exclusion and stereotyping in regard to the patients, the family, and the disease, and what kind of compromise they find between comic aspects and the dire physical, psychological and social realities of dementia. Further points of analysis are the possible infantilizing and stigmatizing of Alzheimer's patients, the reinforcement of stereotypical notions of later life and ageing, and the 'ideological' subtexts the comedies propagate in relation to traditional family values and hierarchies.

**Keywords:** dementia, Alzheimer's, ageing, care, infantilization, comedy, laughter, masculinity

I think I may be beginning to disappear.

*Wellkåmm to Verona* (2006)

Less than a decade and a half ago, Kurt Segers could still argue that though neurological conditions such as coma and memory loss have always been popular in movies, dementia, "on the contrary, has only seldom been the subject of films" (55).

Since then, however, things have changed and the cinema industry has become ever “more interested in stories about patients suffering from degenerative dementia” (58). Though some of the best known films such as *Iris* (2001), *The Notebook* (2004) or *Away From Her* (2006) go back to the early 2000s, there has been a clear increase in movies dealing with this topic over the last ten years, with notable films such as *The Iron Lady* (2011), *Die Auslöschung* (2013), *Still Alice* (2014), *Honig im Kopf* (2014), *Mr. Holmes* (2015) and others receiving acclaim at the box office and from critics.

Protagonists who suffer from dementia or Alzheimer’s disease<sup>1</sup> figure in movies pertaining to an astounding variety of genres like thrillers (*The Alzheimer Case*, 2003), science fiction (*Dawn of the Planet of the Apes*, 2011), horror (*Dementia*, 2015), animated films (*Wrinkles*, 2011), romantic comedies (*Aurora Borealis*, 2005), family dramas (*Happy Tears*, 2009), road movies (*The Leisure Seeker*, 2017) and also a few documentaries such as *First Cousin Once Removed* (2012).<sup>2</sup> Still, films “that have dealt more substantially with dementia over the last decade fall predominantly” (Scheidt et al. 172) into the category of drama.<sup>3</sup>

The increase in films dealing with Alzheimer’s shows that there is a “cultural fear of age-related mental deterioration and a concomitant loss of authority and autonomy” as “one of the anxieties currently being worried at and worked over” (Wearing 2) in the cultural imaginary. Though an engagement with dementia in movies is still the exception in comparison to the large majority of films released every year, it is nevertheless “suggestive of emergent cultural concerns and generic trends” (Wearing 3), given that in these movies “contemporary social and cultural anxieties about ageing and dementia are played out in highly gendered ways” (Wearing 1). In the public consciousness as in the cultural imaginary, diseases like cancer or HIV have stopped being perceived as public health threat number one. They have given way to Alzheimer’s, already now the “fourth leading killer” in the United States (Gravagne 131; Nebel et al. 2) and a metaphor for old age, decline

<sup>1</sup> Though Alzheimer’s and dementia are not necessarily the same, most scholars use the terms interchangeably. Often, dementia is used as an umbrella term for a variety of symptoms that affect “memory, other cognitive abilities”, as well as “[behaviours] that interfere significantly with a person’s ability to maintain their activities of daily living” (WHO). Among various forms of dementia, Alzheimer’s is the most common form, contributing to 60–70% of cases. However, there are no clear-cut lines between the set of symptoms that constitute Alzheimer’s or other forms of dementia, as “boundaries between different forms of dementia are indistinct and mixed forms often co-exist” (WHO), thus rendering a precise diagnosis problematic.

<sup>2</sup> Grinberg notes: “While the epidemic of Alzheimer’s disease continues to proliferate, its visibility, particularly within the documentary genre, has not kept pace with its impacts. The rare documentaries that chronicle the condition have primarily been conventional, visually unimaginative texts that rely on the informative mode, but which do not take advantage of valuable opportunities to sensorially investigate epistemological and ethical issues” (71).

<sup>3</sup> The full quote by Scheidt et al is, that those films fall “into the categories of drama and comedy” but their definition of comedy as “unsettlingly dark” when they mention *Happy Tears* or “discomforting” when they talk about *Barney’s Version* (172) is at least questionable.

and death. In this vein, Pamela H. Gravagne writes about the current 'epidemic' of Alzheimer's as a disease that draws "on deep reservoirs of cultural and historical anxiety about the dependency, decline, and debility associated with growing older" (8). Alzheimer's stands for the fear of losing oneself—at least according to traditional concepts of the self<sup>4</sup>—and if we move from the personal to a more general level, the disease loses nothing of its threat either:

Alzheimer's disease is the most prevalent form of dementia in the elderly, affecting approximately 0.6% of the world population and more than 6% of the population over 65 years old. As people are living longer and longer, this percentage is expected to increase such that it will affect around 1% of the world's population by the year 2030. (Guest 144)

Alzheimer's disease is not only "responsible for 75 percent of dementia cases in those over 65 years old" (Clayman 91), it is also of significant sociological and economic importance.<sup>5</sup> What makes it even more terrifying is the fact that as "a progressive neurodegenerative disease that causes memory loss, cognitive deficits, and behavioral changes" (Nebel et al. 2), it simply cannot be stopped (Clayman 91). Moreover, Alzheimer's seems to affect more women than men: statistics show that among the roughly 5.3 million people aged 65 years and older who are currently living with AD dementia, approximately two-thirds are women (Nebel et al. 2). One of the main reasons for this is that women have a greater lifetime risk of developing AD, the estimated lifetime risk for AD at age 45 being "approximately one in five (20%) for women and one in 10 (10%) for men" (Nebel et al. 3).<sup>6</sup>

Given this growing importance of Alzheimer's, it is surprising that there is still a serious deficit in research where questions of gender and especially masculinity are concerned. According to Sarah Campbell, there "are significant gaps in gender research in wider gerontology, particularly in terms of exploring masculinity for older men, men with disability and embodied masculinity in later life" (88). James A. Smith et al. argue that there is still

a paucity of theoretical discussion in gerontological scholarship relating to masculinities and aging, particularly that which relates to independence ... . While it has been recognized that older men's social worlds are intimately tied to gender and distinct masculinities, relatively little is known about how older men understand and enact being male. (327)

<sup>4</sup> See Gravagne (8) who advocates a relational concept of the self and argues that "the conceit that loss of memory equals loss of self leaves unexamined the ways in which the self is relational rather than autonomous, is composed of more than its memories, and continues to exist and evolve outside of language and cognition in the body itself."

<sup>5</sup> For the US, Nebel et al., argue that the "economic impact of AD is significant, costing an estimated \$259 billion for the ... health-care system in 2017. By 2050, AD is projected to cost more than \$1.1 trillion dollars with fourfold increases both in government spending under Medicare and Medicaid and in out-of-pocket spending" (2).

<sup>6</sup> "An important contributor to this sex difference in both the frequency and the lifetime risk is that women live longer than men. Age is the strongest risk factor for sporadic AD, and there are more women at older ages, when the development of AD is most likely. However, longevity does not wholly explain the higher frequency and lifetime risk in women" (Nebel et al. 3).

## 1. Comedies and Alzheimer's: Denigration, Valorization and the Potential of Comedy

While there has been at least some preliminary research done on films such as *The Notebook*, *Iris*, *Die Auslöschung* or *Mein Vater* (2003) which belong to the 'serious' genre of drama (or tragedy), i.e., a genre which seems to naturally suit disease, loss of self and death, there is also a small corpus of films that endeavor to tackle the motif of Alzheimer's from a decidedly different, i.e. comic, perspective that has hardly been analyzed yet.

By comic we do not mean family or 'cross-generational' dramas such as *Aurea Borealis*, comedy-dramas or road trip sagas such as *The Leisure Seeker*, or 'family dramedies' (Connolly) such as *Happy Tears* but films which use Alzheimer's to create laughter and in which the Alzheimer's patient is not a side character fulfilling certain functions, be it for the love interest (*Aurea Borealis*) or for the triggering of the plot (*Dawn of the Planet of the Apes*) but occupies a central position. At first glance, comedy appears wholly unsuited to delivering poignant representations of a disease which has a terminal prognosis and "is not likely to generate cheerful films with happy endings" (Segers 55). However, humour and laughter, i.e. comedy, can have a subversive aspect, can challenge hegemonic discourses, isolation and exclusion, and can further inclusion.

Viewing the often crushing diagnosis and illness<sup>7</sup> in a humorous light can help to dismantle negative stereotypes by employing "a special type of communication impossible in everyday life" (Neumann and Kamm 6); a type of communication that "involves a temporary suspension of everyday norms and anarchically subverts established boundaries" thereby unsettling power structures, "often making them visible in the first place" (Neumann and Kamm 6). This unsettling can remove "the horror and the embarrassment associated with dementia ... in order to avoid stigma and discrimination" (Medina 3). Anton Zijderveld has argued that humour can be defined as playing with the institutionalized, traditional, and differentiated values and norms of a given society. This implies that a comedian—or in our case a producer or director of comedies—can be regarded as a *homo ludens*

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<sup>7</sup> Scholars have long debated the use of the terms 'disease' and 'illness' in relation to dementia and/or Alzheimer's. Even if 'Alzheimer's disease' has seen widespread usage in medical and social studies, it has also been argued that the term disease is 'the practitioner's perspective', reducing the experiences of Alzheimer's by older adults to an "alteration in biological structure or functioning" and, thus, viewing dementia through a largely bio-medical perspective (Medina 29). Instead, Medina proposes to use the term 'illness', as it allows scholars to look at "how the sick person and the members of the family or wider social network perceive, live with, and respond to symptoms and disability" (29). However, we believe that, just as the ageing process should be regarded as an amalgamation of cultural and biological processes (Guellette 12; Sandberg "Affirmative" 16), Alzheimer's is similarly both a social, cultural and biological process and can thus be regarded as both, disease and illness at the same time.

who engages in cultural juggling. He or she playfully reshuffles the components of the surrounding *nomos*, turns the established order of opposites such as healthy and sick, acceptable and unacceptable around and inverts traditional hierarchies (see also Horlacher “Short Introduction”); hierarchies which all too often lead to the marginalization of the sick and old.

If we differentiate between two fundamental aspects inherent to the comic, firstly denigration or exclusion, which works with the help of contrasts and incongruencies, and secondly, valorization or inclusion, which is liberating and often has recourse to the grotesque, thereby emphasizing the corporeal and the creaturely, then, at least theoretically, comedy can offer the possibility of valorization and inclusion of the repressed, of the marginalized, i.e., the Alzheimer's patient. Comedies, we argue, can function as powerful instruments of inclusion that challenge and subvert the established orthodoxies, authorities and hierarchies (see also Horlacher “Short Introduction”) and that reformulate “socially sanctioned power relationships, bringing the margin to the centre, making it visible and giving it voice” (Stott 35).

If dementia has long been seen as a negative experience, as something to be repressed from private and public consciousness, then comedies that work with inclusive, valorizing and elevating notions of the comic might be able to provide a new take on the experiences of Alzheimer's patients and the patients themselves. Comedies might be able to collapse the distance between viewer and patient into compassion, but may also result in harmonious laughter, a laughing-with based on a shared humanity and not a distancing or discarding laughing-at; however, faced with the inherent tragedy of the disease, the laughter comedies create can also help us to distance ourselves to better deal with (instead of deny) the inevitable, i.e., decay and death. There is, as Dietmar Kamper and Christoph Wulff argue, “a feeling of giddiness at the edge of the catastrophe. As long as we laugh, we are not in the catastrophe, we avoid it, have put off the inevitable. ... When nothing else seems possible, laughter offers a way out” (8; trans. SH/FR).

In the following, our aim is to shed new light on a whole series of long neglected topics. We focus on how comedies deal with a topic one would expect in drama and tragedy (and probably not even there)<sup>8</sup> and ask how the films represent Alzheimer's disease—“a condition and a subject position understood to challenge the very possibility of narrative” (Wearing 3)—and what its cinematic treatment reveals about society. Though we do not adopt a Masculinity Studies perspective, we concentrate on films with male protagonists, given that in gerontology as in Alzheimer's studies men are under-researched and that in films on Alzheimer's, male protagonists are almost an exception since “(t)wo-thirds of the characters” are women (Seegers 56).

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<sup>8</sup> Vickie Patik, the writer of *Do You Remember Love?*, mentions “that the network CBS initially refused financing the film because ‘no one would want to watch a film about something as depressing as Alzheimer's’” (Seegers 55).

We inquire how films portraying protagonists who have practically been handed their death-sentence manage to generate laughter, whether these films use mechanisms of denigration, exclusion and stereotyping (of the patients, of the disease, of the family), what kind of compromise they find between comic aspects and the dire reality of medication and long term care, and how they conceive the relationship between the patients and their families. Moreover, we ask to what extent the films infantilize or stigmatize Alzheimer's patients, how "the stigma attached to Alzheimer's intertwine with or build on stereotypes about growing older and old age" (Gravagne 132), and what 'ideological' subtexts the comedies propagate, whether they are subversive or affirmative of traditional hierarchies and power structures.

## 2. Corpus of Analysis: *Wellkåmm to Verona* (2006)—*Vater Morgana* (2010)—*Honig im Kopf* (2014)—*Nicht schon wieder Rudi!* (2015)—*Head full of Honey* (2018)—*La Finale* (2018)

The corpus chosen for this analysis consists of a representative selection of contemporary European comedies, i.e., *Wellkåmm to Verona* (*Wellkåmm*), directed by Suzanne Osten, *Vater Morgana*, directed by Till Endermann, *Honig im Kopf* (*Honig*) and *Head full of Honey* (*Honey*), both produced, directed and, in part, written by Til Schweiger, *Nicht schon wieder Rudi!* (*Rudi*), directed by Oona-Devi Liebich and Ismail Sahin, and *La Finale*, directed by Robin Sykes.

Since the power of film "to effect social change is generally considered to be determined either by ... commercial success, where the film is a medium for mass-influence ..., or by the reactions of fewer but more committed viewers" (Medina 33), the corpus comprises mainstream and non-mainstream productions. Another reason for including lesser-known films is that, while mainstream productions often revert to emphasizing the seemingly inherent tragedy of the illness, non-mainstream films have more liberties to "approach Alzheimer's disease from a rich variety of perspectives, highlighting different experiences of the disease, and diverse ways of aesthetically presenting it" (Medina 35)<sup>9</sup>.

By far the most successful production discussed here is Til Schweiger's *Honig im Kopf*. The film grossed \$78,127,384, was seen by 7.19 million viewers, was the most successful movie in Germany in 2014, and ranks as number six among the most successful German movie productions since 1968 (insidekino.com). *Honig im Kopf*

<sup>9</sup> Medina further argues that non-mainstream films "generally contribute to the representation of Alzheimer's disease from different angles and perspectives; in these films, the person living with Alzheimer's disease is either the focus, or becomes a trope for important national cultural, social, political, gender, and ethnic issues" (Medina 35).

was critically acclaimed and praised by the Deutsche Stiftung für Demenzerkrankte for its accurate portrayal of dementia and received—with some exceptions<sup>10</sup>—mostly positive reviews, noting the touching performance of Dieter Hallervorden and Emma Schweiger as well as the overall careful handling of the subject at hand (Maus; Bang). In this it fundamentally differs from *Head full of Honey*, which was lambasted by critics and audiences alike. The film underperformed at the box office resulting in its release being stopped in the US after six days, grossing \$12,300 in the US and \$138,844 in total.

Though *Honig im Kopf* and *Head full of Honey* are essentially the same film, albeit with slightly different cultural and national angles, Schweiger's US-remake was derided as “stunningly awful” with an “idiotic plot” (Buck) that is a “wildly implausible, overlong jumble” which would have “required a scalpel, but saw the blunt end of a sledgehammer instead” (Goldstein). Or, to quote Trevor Johnston: “There’s no doubting the laudable intentions to confront the realities of Alzheimer’s in an audience-friendly way, but the execution, frankly, verges on the catastrophic”. Apart from the writing, the editing of the film as well as the overall visual presentation were cited as rendering the film nearly incoherent (Buck)—a criticism that has also been leveled, albeit less fiercely, at *Honig*. Both films include tragic elements which are supported musically and visually and see equal treatment, and can thus be classified as tragic-comedies or “dramedies” (Ordon). As Christoph Decker argues in an interview with Torsten Landsberg, *Honig im Kopf* was so successful in Germany because as a comedy “it retains its provincial character and is not cosmopolitan”. The moment *Honig im Kopf* was remade for the American market it became obvious that “Germans are too undemanding in what we watch in our own cinemas” so that the film was in no way “too demanding for US audiences” (Decker) but simply not sophisticated enough.

*La Finale*, the third mainstream film considered here, grossed \$4,742,293 worldwide and received mostly positive reviews, lauding its script and intergenerational focus (Cleaner; Barcion). At the 21st “Festival du film de comédie de l’Alpe d’Huez”, *La Finale* won the “Grand Prix” and its protagonist, Thierry Lhermitte, the “Prix d’Interprétation masculine”. While some critics called it a “dramédie” (Thiphonet), a “bitter-sweet comedy” (Verhaeghe) and a touching comedy with huge melodramatic potential, others found fault in its balancing of humour and emotion (*Le Journal du Dimanche*), reproaching the film with being moralistic (Mandelbaum).

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<sup>10</sup> As Rösch notes: “With calmer narration, fewer bad gags and the complete deletion of the side plots Schweiger not only could have made his audience cry genuine tears, but might have added meaningfully to this debate. ... Instead, this is a severe blow to anyone caring for relatives with dementia who cannot afford to ignore reality and has to soldier on. A retirement home as a plan B or a spouse who spontaneously quits his/her job? One couldn’t be further from the realities of the German care system’s approach to Alzheimer’s” (trans. SH/FR).

*Vater Morgana*, *Nicht schon wieder Rudi!* and *Wellkåmm to Verona* can be regarded as non-mainstream films, the first two having grossed \$7,609 and 600,000 € respectively. For *Wellkåmm* box office numbers were, presumably, lower,<sup>11</sup> placing the film even more firmly in the category of ‘non-mainstream’. The reception of these films was mixed: *Vater Morgana* was deemed pleasant entertainment (Engel), with the performances of Michael Gwisdek and Christian Ulmen as father and son receiving approval overall, while it was criticized for its lack of emotional depth (Schwickert). Moreover, *Vater Morgana* is probably the most conventionally comic of the films presented here, relying mostly on slap-stick humour and over-illustrated scenes. *Nicht schon wieder Rudi* has been praised and criticized for its absurdity, slap-stick humour and chamber play-like quality (Horn; Günther). The film is characterized by a more surreal and absurd humor, and critics seemingly agreed that not mentioning Alzheimer’s or dementia in the film provided a novel and comical, though controversial approach to the disease. *Wellkåmm*, in turn, has been described as a specialist item that is a joy to watch due to its portrayal of “septuagenarians falling in love and wanting to have sex”, but has simultaneously been criticized for its filmic and narrative unpredictability which renders the movie occasionally confusing (Rehlin). In contrast to *Rudi* and *Vater Morgana*, *Wellkåmm* includes only a few slap-stick moments; rather, throughout its runtime, the film relies heavily on (narrative and visual) unpredictabilities that seemingly come with the illness whereby the humour derives from the unconventional, inappropriate or absurd situations that arise from them.

Though all of these films most certainly are comedies, we have to keep in mind that the term ‘comedy’ as a genre heading is rather imprecise. If genres are used to describe and analyze films, their defining features and conventions are mostly “based on a tacit agreement among filmmakers, reviewers, and audiences” (Bordwell and Thompson 320). Visual presentation, colours and light can also be seen as indicative of a certain genre, as well as the choice of props, objects, music or actors. By looking at the two latter indicators, the case can be made that *Honig*, simply because of the choice of actors, can be seen first and foremost as a comedy, as Dieter Hallervorden received acclaim and prominence through his role as “Didi” (Bang; Maus) while Til Schweiger has produced and performed in numerous romantic comedies throughout the last decade.

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<sup>11</sup> In fact, box office records for *Wellkåmm to Verona* are hard to come by, as neither the Swedish Film Database nor IMDB have recorded such numbers. Yet, as Gunnar Rehlin states, “domestic box office look[ed] to be fair for what is basically a specialist item”.





Figure 1: Cover image of *Nonstop Nonsens* (1975/2012)

Source: retrieved from <https://www.themoviedb.org/tv/45250-nonstop-nonsens>. 15 Sep. 2020.



Figure 2: Dieter Hallervorden as Amandus

Source: retrieved from <https://www.n-tv.de/leute/film/Hallervorden-hat-Honig-im-Kopf-article14181261.html>. 21 Sep. 2020.

A similar argument can be made for *Vater Morgana* as Christian Ulmen, too, has been known for his choice of comic roles. In the case of *La Finale*, *Honey*, *Wellkåmm* and *Rudi*, through the choice of relatively unknown actors (*Rudi*) or actors known to branch out into different genres (*Honey*, *La Finale*, *Wellkåmm*), it is more difficult to make a classification. When it comes to music, however, the light, upbeat pop or string music of *Rudi*, *Wellkåmm* and *Vater Morgana* denote them as comedy films. Even more so, *Vater Morgana* uses a technique called Mickey-Mousing, which over-illustrates the action through the musical score (Kaczmarek and zu Hünigen), twice in the movie, giving the scenes in which it is used a slap-stick like quality. In the case of *Rudi* and *Wellkåmm*, classifications along these lines are hard to make because both movies heavily rely on highly absurd situations, which at times derive from a reliance on improvisation during filming (mostly *Rudi*), and unusual camera angles, such as Dutch angles, and filters in *Wellkåmm*.<sup>12</sup>

From a visual standpoint, all films present a rather similar look; their visual presentation consists of bright, highly saturated images of perpetually sunny days, often incorporating establishing shots and extreme wide pan shots of various landscapes from lakes to bustling cities to locations in Gothland or the German and Italian Alps. While films with a tragic note are certainly equal in their production value, the films here lack the grayish or bluish tint that can often be found in other films about dementia, such as *Mein Vater* or *The Iron Lady*. Instead, they have a golden, warm tint which often connotes feel-good movies, comedy or romantic movies and renders the topic at hand more palatable.

### 3. Addressing Alzheimer's in Comedies

One of the most notable difference between the comedy films discussed here lies in the way they address Alzheimer's. From its first moment *Honey/Honig* leaves no doubt that the movie is about the illness, as Tilda's/Mathilda's (Emma Schweiger/Sophia Lane Nolte) voice-over narration clearly outlines the subject of the film, its central conflict as well as its protagonists:

My doctor, Dr. Edwards, told me everything I know about Grandpa's illness. Grandpa has Alzheimer's. People with Alzheimer's forget a lot of stuff. ... [Grandpa] forgets pretty much everything. My parents want to put him in a home, but that's just gonna make things worse. So, I'm taking him on a trip to Venice to make him better. (*Honey* 00:00:51–00:01:13)

The film proceeds to give an encompassing, albeit simplified, account of the illness through the granddaughter's voice-over narration, her diary entries and conversations with her paediatrician. In this regard, it is Dr Ehlers (Tilo Prückner)—or Dr Edwards (Jake Weber) in *Honey*—who explains to Tilda/Mathilda what Alzheimer's

<sup>12</sup> See for example *Wellkåmm's* use of filters to blur scenes that represent Walter's inner world (see also: Swinnen, "Staging Dementia" 312–13).

entails, how the illness may progress and whether or not Tilda/Mathilda may be able to stave off the illness or to help her grandfather to be at ease while the illness progresses. While the conclusions that are drawn from the diagnosis and the advice of Dr. Ehlers/Dr Edwards are naive and childlike—as such Tilda and Mathilda both conclude that “joy, happiness ... and fun” (*Honey* 01:17:52–01:18:17) are part and parcel of a possible healing process<sup>13</sup>—the notion that the feeling of being needed is important for well-being is well known from ageing studies.<sup>14</sup>

In contrast to *Honig/Honey*, *Vater Morgana* takes a little more time before addressing Alzheimer's. Both films start with a voice-over narration: Lutz (Christian Ulmen) notes that his father was absent when he needed him most, but the viewer is only introduced to Walther (Michael Gwisdek) a little later in the movie, i.e. in a scene in which a medium close-up of Walther singing is cut to on the mark of “what could go wrong?” (00:06:27–00:06:29). As such Walther is immediately identified as a potential problem, both as a troublemaker and as a family member afflicted with Alzheimer's. Whereas this introductory scene also sets up Walther's illness, as he forgets the lyrics to the song “My Way”, it is only in a conversation with nurse Britta (Ulrike Krumbiegel) that he confirms that he suffers from early onset Alzheimer's: “Heute habe ich das erste Mal den Text vergessen. Vielleicht haben die Ärzte ja doch Recht. ... Dann geht es jetzt los. ... Scheiß Alzheimer” (Today I forgot the lyrics for the first time. Maybe the doctors are right after all. ... Then this is how it starts. ... Bloody Alzheimer's) (00:08:54). From there on, the illness is omnipresent in Walther's verbal slips and his lapses in memory, but it does not impede him in any other way. Moreover, while various characters throughout the movie tend to remark on Walther's illness, what such a diagnosis truly entails is never really explored.

Similarly to *Vater Morgana*, *Wellkåmm* takes some time to address Alzheimer's explicitly, yet Alzheimer's is, from the start, an integral part of the movie. While it seems reasonable to assume that Walter Alex (Jan Malmjö) suffers from some kind of mental impairment when he is picked up by the police in the beginning of the movie, the topical cues used in *Wellkåmm* identify him soon as being afflicted with Alzheimer's (00:06:47–00:07:08). As the movie progresses, the depth of this affliction is piece-by-piece uncovered, and, by showing a brain scan (01:20:21), finally revealed to be a neurological degenerative brain disease.

<sup>13</sup> “Today I spoke to Dr. Edwards about Grandpa, about Alzheimer's, and happiness and joy. Joy is the most important thing. It's the best kind of brain fertilizer. It repairs the brain. Dr. Ehlers/Edwards said you can only attain your goals if you find joy in pursuing them. But many old people no longer have goals because they have no one to bring joy to and no one is proud of them. No one needs them. That's why they get sick: their brain shrivels up and they can't repair it, because they don't have fun anymore.” (*Honey* 01:17:50–01:18:30)

<sup>14</sup> For instance, Calasanti and King as well as Westwood argue that social interdependence, access to “love, care and solidarity”, and “social networks and informal social and instrumental support” are indicators of and determine the wellbeing of older adults (Calasanti and King 197; Westwood 8).

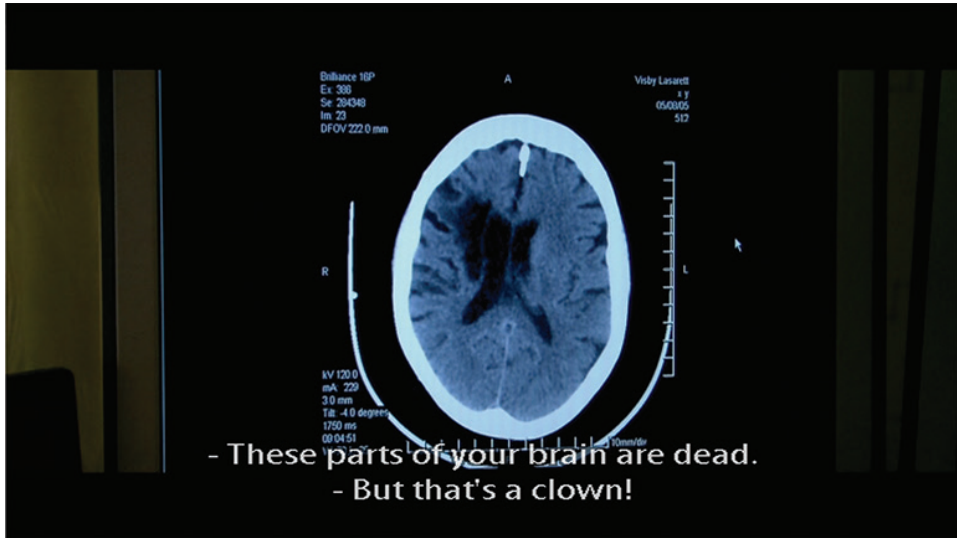


Figure 3: Brain scan

Source: Osten, S. (dir.). 2006. *Wellkåmm to Verona*. Stockholm: Filmlance International AB (further: *Wellkåmm*), 01:20:19.

Yet, the movie never fully states which form of illness Walter suffers from, only noting that some “parts of [his] brain are dead” (01:20:19). Instead, it leaves a possible medical diagnosis unspoken, choosing to rely on cues that typically (and topically) denote Alzheimer’s disease in film and which, in this case, range from lapses in memory and spatial confusion to engaging in socially unacceptable behaviour.

As Aagje Swinnen convincingly argues, *Wellkåmm* deviates from conventional depictions of the illness in numerous ways: Firstly, *Wellkåmm* casts an ambivalent light on the re-establishment of ‘former’ social roles. While movies such as *Honig/Honey* or *Vater Morgana* seem to long for a continuation or reestablishment of the protagonists’ old productive roles and seemingly blame age and dementia for the impossibility to continue, *Wellkåmm* re-distributes such blame and portrays age and dementia as a time in which such roles can be shed. Walter’s daughter Gudrun (Anna Takanen) makes it explicitly clear that she sees Walter’s return as a theatre director in a problematic light (01:19:10–01:19:30) rather than the illness from which he suffers. Secondly, *Wellkåmm* seeks to portray dementia similarly to what other movies have sought to do, namely as an illness that might bury but not necessarily completely erase memories,<sup>15</sup> making it possible for patients (in some form or an-

<sup>15</sup> *Honig and Honey* use similar metaphors to describe the illness, explicitly referring to the human memory as a bookshelf where some books may fall over but also may or may not right themselves again (00:32:23–00:32:47). Similarly, *Die Auslöschung* uses the metaphor of an eyelet embroidered curtain that shifts and moves, thus, obscuring some memories, revealing others before the curtain will, eventually, obscure all memories (00:49:09–00:50:04).

other) to access those memories, for instance through sheer muscle memory and “going through the motions” (00:34:21–00:34:25)<sup>16</sup> or by using an *aide memoire* to recall modes of behaviour and activate knowledge. As such, Åsa (Victoria Olmarker) has Walter dressed in different clothes similar to outfits he wore as a director and hands him his Borsalino hat. It is the latter that seems to aid Walter the most in recovering some knowledge of himself, as, while putting the hat on in front of a mirror, “he finds his olden grandeur again. It is as if he undergoes a metamorphosis in posture, tenor and pace, which gives proof of the return of his professional self-awareness” (Swinnen, “Staging Dementia” 314).

While the films analyzed have a tendency to mourn the loss of the person-that-was and, therefore, implicitly propagate discourses that present the “processes of ‘social death,’ social exclusion and abandonment” (Lamb 42) as part and parcel of how the cultural imaginary conceives of and deals with dementia, *Wellkåmm* views dementia as a chance and an opportunity to (re)connect. While a reconnection is seen as possible for familial connections, the film makes it clear that dementia is, furthermore, no hindrance for new friendships or even romantic liaisons. Finally, Osten’s film takes “the perspective of those institutionalized due to dementia, giving meaning to the ‘inmates’ version of reality by uniting the existence of self” not to some kind of external ‘truth’ but “to the cohesive intention of a narrative” (Gravagne 8) which—in this case—is strongly influenced by Shakespeare’s *Romeo and Juliet* but also explains why Walter takes his brain scan to represent a clown.

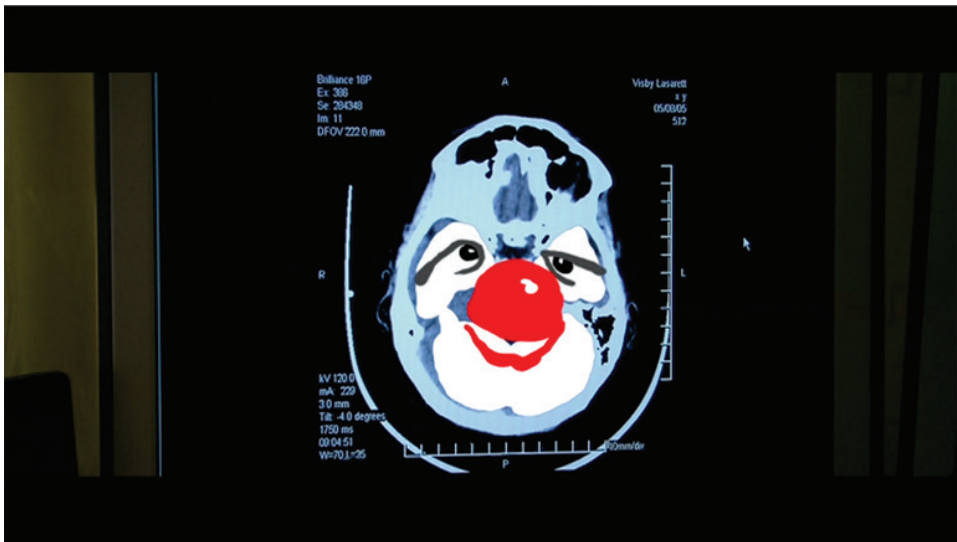


Figure 4: Brain scan (Walter’s view)

Source: *Wellkåmm* 01:20:24.

<sup>16</sup> This ‘topos’ or motif is also used in *Vater Morgana* where a holdup is re-staged to make Walther remember where he hid the diamonds (00:50:01–00:53:45).

Finally, right from the start, i.e., the promotional video for the nursing home called Verona with which the film opens, the boundary between healthy and sick, between visitors and residents, between “us and them is called into question and we, as viewers, are invited to position ourselves as potential future residents of Verona rather than as outsiders” (Gravagne 149).

*La Finale* has a completely different take on Alzheimer’s. Here, Roland (Thierry Lhermitte) is first shown in his brasserie in Paris near the Parc de Princes suffering from early symptoms of Alzheimer’s without the disease being mentioned. He looks very active and fit and leads a ‘fast’ life. Briefly after this scene, he is shown living with his daughter, Delphine (Émilie Caen), and her family in Lyon. One year has passed, he has moved to Lyon about one month ago, his condition has deteriorated, he often does not find his way home, does not really recognize his family, unintentionally kidnaps dogs, and is disoriented. This is interspersed with brief visions Roland has of the past, and also moments of insight—“Putain, c’est chiant cette maladie” (Fuck, this illness is really shit) (00:19:44)—so that the film creates a “balance between the disoriented man who is not aware of his condition and the man sometimes enlivened by flashes of lucidity, whose memories come back abruptly” (Dude; Thiphonet). Roland looks very sportive but his daughter and his son-in-law are looking for professional care for him, and his presence in their home takes its toll on the family.

In an interview with Sylvie-Noëlle Thiphonet, Robin Sykes states that Alzheimer’s is not at the core of the film but merely a means to create a transgenerational dialogue. This becomes obvious by the way the film functions: Delphine’s failure to look after her father creates the space in which the intergenerational relationship between Roland and JB (Rayane Bensetti) develops, incidentally also showing that a conciliatory and close relationship between grandparents and grandchildren is vital to an overall caring familial relationship. Comedy derives from the implausible tandem or unlikely partnership of Roland, who is revealed to have misogynist and racist tendencies, and his grandson “métis”.<sup>17</sup> JB is of mixed ethnicity and does not regard Roland as sick but as a nuisance who occupies his room and of whom he would like to get rid of as soon as possible. When these improbable partners finally embark on a road trip, their relationship grows stronger. What they share, and what the film uses to create comedy, is their recklessness, their lack of responsibility and a certain unscrupulousness, due to adolescence on the one hand and Alzheimer’s on the other.

Although Fred Teper argues that the film manages to keep pathos at bay and does not make fun of the Alzheimer’s patient, it is obvious that no one takes the disease and the risks it entails for the patient (and others) seriously. Though Alzheimer’s is never treated flippantly or disrespectfully, the few crises which surpass

<sup>17</sup> Jacques Mandelbaum describes this as a mix between a social problem such as Alzheimer’s and the traditional “film de tandem” or Buddy movie, whereby the two partners have to be as different as possible.

simple memory loss do not really run against the 'feel-good' mood of the movie, so that Alzheimer's is primarily used as a means to create amusing moments. This also explains why the fact that Roland almost burnt down his apartment in Paris is only mentioned toward the very end of the film. Still Alzheimer's pervades *La Finale* on many different levels: the informal care Roland receives throughout the film is clearly insufficient and what happens during their trip to Paris, e.g. Roland driving his Porsche then suddenly forgetting how to change gears and being unable to continue potentially endangers lives. Though humour and comedy in *La Finale* are meeker and less aggressive than in Schweiger's films, the structural similarities between these movies are obvious and comprise not only intergenerational road trips but also intergenerational irresponsibility.

In contrast to this, *Nicht schon wieder Rudi* takes a vastly different approach in that it never mentions Alzheimer's or dementia at all. Instead, the movie relies heavily on the cues that commonly denote Alzheimer's disease in film and which range from lapses in memory via misplacing objects, to cooking and nearly burning down the kitchen. *Rudi* shows visually and through its performance how dementia affects the peer group around Klaus (Oliver Marlo), while only going as far as stating that Klaus seems to have a problem and might be really 'sick'. Whereas the other films seemingly reaffirm heteronormative and traditional family structures, *Rudi* shows an inkling of a potentially different approach that erases women as the main caregiver, instead distributing equal amounts of caregiving within an all male peer-group, and thus showing that informal care does not necessarily need to be sustained by a female carer or negotiated in the context of the family. Still, the film only portrays a short holiday away from home, does not give any information as to Klaus' future—we only know that he is married to Christa and has a daughter—and the care he receives from his friends is more than dubious.

#### 4. Presenting and Functionalizing Alzheimer's I: Third Agers Facing Dementia

The protagonists in all of these films are in the early stages of Alzheimer's or show contradictory symptoms, usually for dramatic reasons. Three out of six protagonists die: in *Honig/Honey*, Amandus/Amadeus dies after the road trip to Venice and a dramatically necessary but completely unrealistic time lapse, and in *Wellkåmm*, Walter dies before his own nightmare of him being confined and befuddled comes true.

The protagonists have been either highly educated academics (Amandus/Amadeus worked as a veterinarian, Walter was the former director of the Swedish Royal Dramatic Theatre) or very active in their lives (Roland, Walther). Though Walther Stielike in *Vater Morgana* is placed in a nursing home and the use of props such as a cane denote him visually and spatially as 'old', the very fact that the film needs these props shows that he is still perceived as quite active, almost as a 'showman'.

A similar argument can be made for Walter Alex, who is also placed in a retirement home, and thus spatially connoted as ‘old’. However, he is able to walk about freely and routinely escapes this institution to visit his former workplace, Stockholm’s Royal Dramatic Theater. In order to place Walter even more firmly into the category ‘old’, *Wellkåmm* uses visual cues that are usually understood as denoting the ‘old’, that is wild, wiry, white hair and perpetually white pajama-like clothes which hint at a form of infantilization and seem to signify his mental state as well as his (in)ability to memorize. While Klaus is only in his late forties (Günther) or early fifties, the other protagonists can be regarded as ‘third agers’,<sup>18</sup> i.e., as male retirees who, at the onset of their disease, are active, healthy, autonomous and engaged with and in society.

Though images of the third age, at times, involve heterosexual relationships and coupledness, the films are more varied: three of the protagonists (Roland, Amandus, Amadeus) are widowers, Walther is in a relationship with a younger woman, Klaus is married to Christa, and the fate of Walter’s (former) partners is left largely untouched as he, instead, pursues Virginia (Ghita Nørby). Thus, for dramatic reasons, none of the films in their representation of Alzheimer’s follow the vast majority of real-life cases but all feature protagonists who appear relatively mobile and active.

Whilst the onset of older age threatens to take away strength, power and vitality—after all, age defines the protagonists as no longer being mature, socially and economically productive adults—and whilst Alzheimer’s endangers not only their social status but also their personhood, such ideas of illness, age and a fading masculinity seem incompatible with the protagonists of the chosen films. All six of them are still able to communicate freely and verbosely, they are (relatively) autonomous and independent, able to walk without aid, perform their daily routine or dress themselves properly—at least most of the time—and are interested in women and sexuality. Moreover, they are still engaged with other members of society and are even drawn back into society from the margins,<sup>19</sup> thus showing that Alzheimer’s patients are not necessarily socially excluded or dependent and that dependency on the family, friends or nurses does not necessarily represent a loss of autonomy.

While such a view can be seen as affirmative and positive in comparison to other cinematic productions which paint a different, much bleaker picture, this idea of the older (but not old), active, relatively independent man afflicted with Alzheimer’s needs to be taken with a grain of salt. As Chris Gilleard and Paul

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<sup>18</sup> Running counter to bio-medical perspectives that see older age as a totalizing, physical experience and inevitable decline, the ‘introduction’ of the third age has created a form of retirement “in which leisure, self-fulfilment, health, and social engagement are stressed” (Medina 16).

<sup>19</sup> For instance, Amadeus and Amandus live alone in a rural area, where, it can be assumed, their engagement with others is relatively minimal. Nick and his family, by asking him to move in, thus, draw him back into a wider social circle. Yet, it can also be argued that by keeping the grandfather in the family, therefore making his illness a private matter among a tight social circle, and by preventing (or even by forbidding him) to speak to others one form of marginalization is simply exchanged with another.



Higgs note in regard to increasingly positive images of the third age: “The brighter the lights of the third age, the darker the shadows they cast over this underbelly of ageing — the fourth age” (372). If early Alzheimer's disease, or even moderate Alzheimer's disease, is nothing to be afraid of and—obviously—a source for comedy, the question of what lies in store for those afflicted should be highlighted. Yet, none of the movies discussed here go into any detail on what severe cases or deterioration might look like.

In contrast to other films on this topic, none of the films analyzed portray Alzheimer's patients as, to quote Stanley Hall, “battered, water-logged, leaky derelicts without cargo or crew, chart, rudder, sail, or engine, remaining afloat only because they have struck no fatal rocks or because the storms have not yet swamped them” (Hall qtd. in Blaikie 35–36), or as essentially empty, mindless shadows of their former selves, isolated from society and their families. Rather, the movies choose, presumably both for dramatic/generic reasons and due to the perceived “intrinsic unwatchability” (Williams et al. 2) of the later stages of the disease, to end on positive notes.

## 5. Presenting and Functionalizing Alzheimer's II: Symptoms—Diagnosis—Medication

An important feature the films share is that they remain vague about or fully strip Alzheimer's of its temporality. While nearly all protagonists show symptoms of mild Alzheimer's disease, such as forgetting names, misplacing (valuable) objects, or memory lapses accompanied by a decline in linguistic ability, more severe symptoms are added, often for dramatic or comic effect. As such Walther in *Vater Morgana* has moments of complete forgetfulness, even forgetting his diagnosis,<sup>20</sup> while still being able to dress properly and communicate fluently. Similarly, Klaus is presented as forgetful but functioning in the beginning of *Rudi*, a state that rapidly deteriorates after he is hit on the head, resulting in his inability to dress appropriately or to adjust to reality. He wanders about, gets lost, forgets that Rudi, his dog, died two years ago, and starts to look for him. While such a rapid decline might, in part, be attributed to Klaus' being removed from his typical routine and familiar environment, it is absolutely improbable that this stage of the illness could have gone unnoticed by his friends for a longer period of time.

<sup>20</sup> WALTER: Is' was? (What's wrong?)

LUTZ: Ich hab' das nicht gewusst... das mit Deinem Alzheimer. (I didn't know about your Alzheimer's)

WALTER: Wer hat Alzheimer? (Who has Alzheimer's?)

LUTZ: Du. (You.)

WALTER: Ich hab doch kein Alzheimer. Welche Flitzpiepe hat dir denn den Scheiß erzählt? (I don't have Alzheimer's. Which moron told you that nonsense?) (*Vater Morgana* 00:47:32–00:47:34)

In both films, *Rudi* and *Vater Morgana*, most of the humour derives from their protagonists' being unable to remember and from showing other symptoms of the illness: in *Vater Morgana*, Walther's inability to recall the robbery he committed (which, unintentionally, leads to his son's unjustified incarceration) or the place where he has hidden the stolen diamonds serves as a running gag that sends both father and son on a wild goose chase. In *Rudi*, Klaus' lapses in memory are met with chagrin (Peter), exasperation (Bernd) and amusement (Murat), his search for his long-dead dog being played for comic effect as Bernd (Matthias Brenner), Peter (Frank Auerbach) and Murat (İsmail Şahin) stumble through the woods, knowing that Rudi will most certainly not be found. As a comedy, *Rudi* never really tries to explain what happens to Klaus, shies away from a realistic representation or even the mentioning of Alzheimer's and—aided by the musical score of oompah music—avoids viewer-identification to make laughter possible. This is not consistent, however, but interlaced with moments in which the characters gain insight into the severity of Klaus' condition and male friendship and nearness becomes visible:

BERND: Klaus, ich weiss nicht, was es ist, aber ich lass' Dich nicht alleine. Ich werde immer an Deiner Seite sein. Du brauchst keine Angst zu haben. (Klaus, I don't know what it is, but I will not leave you alone. I will always be by your side. There is no need to be scared.)

KLAUS: Ich hab' keine Angst, Bernd. Du hast welche. (I'm not scared, Bernd. You are.)

BERND: Du hast Recht. Ich habe eine Scheißangst. (You are right. I am scared to death.)  
(*Rudi* 01:21:59–01:22:40)

Still, these moments remain an exception while the movie repeatedly veers toward the absurd and the silly:

PETER: Vielleicht sollten wir einen Arzt aufsuchen? Ja, nicht dass sich da in seinem Kopf was verdreht hat. (Maybe we should take him to a doctor? Maybe there's something scrambled in his head.)

MURAT: Vielleicht braucht er einfach einen zweiten Schlag. (Maybe he needs a second blow to the head.)

PETER: Das'n Scherz. (You're kidding.)

BERND: Was ist schwerer als ein Schlag mit der Schaukel? (What's heavier than being hit with a swing?)

MURAT: Schaufel? (A shovel?)

BERND: Mit etwas Schwung könnte das gehen. (That could work, if we add a little more energy.)

PETER: Willst du ihn umbringen? (Do you want to kill him?)

BERND: Hast'e ne bessere Idee? (Do you have a better idea?)  
(*Rudi* 00:25:31–00:26:01)

*Vater Morgana* works similarly with its protagonist being a trickster who even functionalizes the Alzheimer's diagnosis to manipulate others.<sup>21</sup> As in *Rudi*, Alz-

<sup>21</sup> When it is hinted that Walther has faced problems with controlling his bladder, in order to both escape an argument with his son and to garner sympathy from him, he drenches his trousers with water.

heimer's works almost like a topos (and an excuse), standing for forgetfulness, erratic behaviour and awkwardness which is used to create comic situations as well as a dis-identification from the protagonists which is needed to create a laughing-at position. Even *Honig* and *Honey*, in spite of their long runtime, do not show a gradual and realistic process of the illness either—after all their protagonists die at the end of the film—but present the symptoms of the illness as emerging either instantaneously or as worsening rapidly. As such Amandus loses his ability to remember names and places nearly instantly upon his arrival in Venice, suddenly neither recognizing his son nor his granddaughter. Moreover, he does not recognize himself in the bathroom mirror—something he shares with Roland in *La Finale*. Such a complete loss of memory may occur in later stages of the disease and is often accompanied by “changes in physical abilities, including the ability to walk, sit and, eventually, swallow” (*Alzheimer's Association*) or troubles in communication, yet none such symptoms are shown.<sup>22</sup>

*Wellkåmm* takes a similar route and shies away from showing later stages. Walter exhibits the same symptoms of the disease all through the movie. He is unable to remember most names, and his short-term memory has declined to a degree that he, at times, keeps on meeting Virginia anew—a ‘topos’ that is also used in *La Finale* where Roland is three times introduced to Juliette (and each time they start to flirt). Walter's sense of appropriate conduct is diminished and he is “spatially confused [rendering him unable] to decode visual and verbal messages” (Swinnen, “Staging Dementia” 312). Only some of the symptoms are played for laughs<sup>23</sup> with the resulting unpredictable and absurd nature of the interactions bearing a lot of comic potential.

A significant absence in all films, with the exception of *La Finale*, is the question of medication. Though there is no scene where Roland is shown seeing a doctor, the film makes clear that he does take medicine. When Delphine gives him his pills he asks whether this is Viagra (00:04:52). Hicham (Lyes Salem), his son-in-law, is a practicing doctor, and when he and Delphine visit a nursing home the director upon hearing about Roland's symptoms diagnoses him as being “entre le stade 5 et 6” (between stage 5 and 6) (00:09:08) and—almost echoing Vivian's (Jacqueline Bisset) suggestions in *Honey*<sup>24</sup>—argues against anti-depressants and in favour of humour.

<sup>22</sup> In one of the few deviations from *Honig*, *Honey* follows a similar course upon arriving in Venice, yet, the film hints that this deterioration might only be temporary, as Amadeus is shown hugging his granddaughter while watching fireworks with his family soon after. Only after this brief snippet, and after an unspecified time span, does *Honey* take up the same narrative threads as *Honig*.

<sup>23</sup> In a notable scene Walter is unable to differentiate theater performance from reality, and asks a widow, “What kitsch is this?” before shredding flowers used during the funeral.

<sup>24</sup> VIVIAN: You just have to be patient. You have to learn to look at it with... Humour. Humour and wisdom. And that is the key. Darling, it can teach you a lot about yourself, and it's called love. (*Honey* 00:31:22–00:31:32)

DOCTEUR: On limite la médication à la simple galantamine. Pas d'antidépresseurs, pas de calmants... (We limit medication to Galgantamine only. No antidepressants, no sedatives)

DELPHINE: Pardon mais vous faites comment pour gérer les crises sans calmants? (I am sorry but how do you deal with crises without sedatives?)

DOCTEUR: Avec humeur (With humour)

HICHAM: Avec quoi? (With what?)

DOCTEUR: Avec humeur (With humour)

HICHAM: Vous, vous êtes sérieux là? (Are—are you serious?)

DOCTEUR: Absolument. (Absolutely)

(*La Finale* 00:09:42–55)

Although *Wellkåmm* even features a brain scan when Gudrun tries to convince her father that he is ill, medication is not an issue, and if doctors are consulted in *Honig/Honey*, this is mainly functionalized to trigger laughter, e.g., when Amandus/Amadeus tries to outwit a specialist in a nursing home.

## 6. Presenting and Functionalizing Alzheimer's III: Formal versus Informal Caregiving

Only in two of the movies, *Wellkåmm* and *Vater Morgana*, do the protagonists live in nursing homes. In *Wellkåmm* the patients freely engage with what lies outside, denoting the retirement home as an institution with semi-permeable and not necessarily enforced barriers. With its premise of staging a play for the families and friends of the patients, *Wellkåmm* even invites people from the outside in, thus shifting and exchanging 'margin' and 'centre' in a way that none of the other films do. As such, what is seen as inevitable marginalization in four movies is divested of its excluding and disadvantageous character by blurring the lines of exit and entrance, and by showing residents leaving and willingly coming back to the social group that has formed within. Among this established social group, which grows closer together through their rehearsals and the communal performance of *Romeo and Juliet*, each member takes up a certain subject position, mostly regardless of their physical or mental impairments.

*Wellkåmm* presents formal care as a positive and much needed step in the treatment of Alzheimer's patients and thoroughly rejects notions of informal care. Not only are informal care arrangements not shown in the film, hinting by its sheer lack of representation that such situations might not be valid options at all; the strain on the family members and their inability to handle Alzheimer's patients is represented by Walter's daughter, Gudrun who, even though her father is already in formal care, seems unable to cope with his disease, as all the mechanisms of control and stability she tries to implement seem to crumble in the face of Walter's illness-related unpredictability. Walther Stielike, the protagonist of *Vater Morgana*, also lives in a nursing home but leaves it whenever he wants to and even uses it to do

business, e.g., selling an entire edition of the *Brockhaus*, a comprehensive multi-volume encyclopedia worth thousands of Euros to a female Alzheimer's patient (and later not even remembering this). Indeed, Walther uses the nursing home almost as a hideout and more for his criminal and sexual activities than as a place for receiving care. At the end of the film, he leaves with his nurse (who is also his lover) for Cuba in a submarine, literally and figuratively submerging, both physically and, presumably, mentally.<sup>25</sup> Even if *Vater Morgana* struggles with formal care—after all Walther escapes from such a formal setting—the need for professional care is not as staunchly rejected as in most of the other films but established early on in the movie:

WALTHER: Passt du auch auf mich auf, wenn ich nicht mehr... (Will you take care of me, even when I...)

BRITTA: ...auch wenn du mich vergessen hast? (...even when you've forgotten about me?)  
(*Vater Morgana* 00:09:15–00:09:25)

In *Honig/Honey*, *La Finale* and *Rudi* the protagonists are living in or re-introduced to closely-knit families and peer-groups. While this is certainly a more affirmative but not entirely serious approach to the care for Alzheimer's patients, the films, nevertheless, meander between the need for formal caregiving and the wish for informal caregiving within the family—formal caregiving is, in this regard, only seen as the last resort, while informal caregiving is shown to be the ultimately 'better' and worthier form of care. Yet, none of the films go into detail of how such an arrangement may truly look or how informal care may be negotiated in the context of the family. Questions as to the quality of caregiving that family structures can provide or how such arrangements may lack the quality Alzheimer's patients require are never explicitly addressed. In *Honig/Honey* Tilda/Mathilda condemns her parents' wish to preserve their normal life by putting Amandus/Amadeus in a nursing home. Not only is Tilda/Mathilda furious at her parents for such a plan, telling her father that "I'd never put you in an old folks' home! I hate you!" (*Honey* 01:04:03—01:04:06), the possible transfer of her grandfather is furthermore cited as the inciting incident that sets off the road trip to Venice (00:01:02). Moreover, the informal care situation is used to generate a pretty gross form of humour, both during the road trip<sup>26</sup> and while Amandus/Amadeus is living with Niko/Nick (Til

<sup>25</sup> How serious this ending is remains open for debate since Walther remains a trickster and charmer to the end, even making fun of Alzheimer's. When his nurse/lover meets him to leave for Cuba he greets her with: "Ich begrüße Sie, gnädige Frau. Mein Name ist Walter Stielike" (I welcome you, Madam. My name is Walter Stielike). She is clearly irritated but takes this formal introduction as an effect of his disease, answering: "Ich freue mich, Sie kennenzulernen, Herr Stielike" (I am delighted to make your acquaintance, Mr. Stielike), only to have him answer: "Hast Du wirklich geglaubt, dass ich eine so wunderbare Frau wie Dich vergessen könnte, mein Herzblatt?" (Did you really think I could forget a woman as wonderful as you, my darling?) (*Vater Morgana* 01:21:03–01:21:22).

<sup>26</sup> Scenes like Amandus' not understanding that he talks to an answering machine—TILDA: "Opa willst Du auch noch etwas sagen?" (Grandpa, do you want to say anything?) / AMANDUS:

Schweiger/Matt Dillon) and Sarah (Jeanette Hain/Emily Mortimer), for example when he almost burns down the house, inadvertently sets off fireworks or urinates in the fridge in their presence.



Figure 5: Amandus urinating

Source: Schweiger, T. (dir.). 2018. *Honig im Kopf*. Berlin: Barefoot Films (further: *Honig*), 00:37:55.

Other examples comprise Amandus/Amadeus stealing their car or causing severe road accidents (00:01:12:50) which he comments on with “Grün bleibt stehn, rot darf gehen” (Green no, red go) (*Honig* 01:13:08) and:

MATHILDA: Get out of the way. Grandpa, it’s a one-way street.

AMADEUS: I know it’s a one-way street. But they don’t know that. (*Honey* 01:16:31)

The question of self-endangerment or the endangerment of others is never asked—but this is something most comedies analyzed here share. Even though he lives in a nursing home, *Wellkåmm*’s protagonist Walter constantly returns to the front doors of the Royal Dramatic Theater in Stockholm unsupervised and needs to be returned—with no mention of how he got there in the first place. In *Rudi*, Klaus’s friends do not seem to comprehend the severity of his disease and twice try to ‘heal’ him by knocking him on the head (again) and playing along with his delusions.

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“Was, wem ... hallo, hallo, weggegangen” (What, to whom ... hello, hello, disappeared) (*Honig* 00:01:50)—, smashing a full bag of crisps over his head, asking for “die Klotoilette” (the loo-toilet), getting off the train dressed in a pajamas top and long underwear and carrying his huge soft toy and then being chased by a dozen policemen do recall Hallervorden the comedian. Maybe this ambivalence between comedian, comedy and Alzheimer’s patient, which only works with *Honig* and for a German audience (who largely equates Hallervorden with comedy) explains at least partly why *Honig* was so successful in Germany and *Honey* such a disaster.

Though there are almost tragic moments of insight, and there is a lot of talk about taking Klaus to the doctor, responsible behaviour toward Klaus remains an exception: Klaus' friends are debating whether hitting him a third time on the head might do the trick and make him 'right' again, he almost drowns when Bernd wants to test whether he is playing a game and trying to fool them, and they do not pay attention to his whereabouts so that in one scene he ambles through the village in his underwear, only to run into another Alzheimer's patient.



Figure 6: Klaus in his underwear

Source: Liebich, O.-D. and İ. Şahin (dirs.). 2015. *Nicht schon wieder Rudi!* Berlin: Buff Connection (further: *Rudi*), 00:55:08.

In *La Finale*, finally, Roland irresponsibly drives—or attempts to drive—in his Porsche 911 to Paris. Here, the family is well-intentioned but clearly overtaxed, so that potentially life-threatening situations arise which are used for comic effect. Ultimately, the family rejects putting Roland in a retirement home in favor of supplying him with his own, permanent room in his daughter's house, even including some of his own furniture and pictures, and by positioning Roland, at least for the 90 minutes of *la finale* as the centerpiece of his family and his grandson's peer-group (01:17:54).

## 7. Presenting and Functionalizing Alzheimer's IV: Intergenerationality and Infantilization

What is particularly notable among *La Finale* and *Honig/Honey* is the emphasis on intergenerationality. Intergenerational relationships and interdependence across age groups have been seen, in other cultures, as an essential part of the ageing pro-

cess<sup>27</sup> and, generally, as a way of deconstructing age-related stereotypes by exposure to stereotype-incongruent information (Fiske and Cuddy 7). And, indeed, the movies show that making the patients part of family life eventually leads to a different (if not always very responsible) kind of care, to a better understanding between the generations and to overall closer relationships among the age groups.

In this vein, Walther overcomes his distant relationship with his son and reconciles, whereas in *La Finale* and *Honig/Honey* the main relationships develop between the Alzheimer's patients and their grandchildren. However, especially in the case of Amandus/Amadeus, this intergenerational relationship is also an expression of a wider trend of infantilization of older adults in general and of Alzheimer's patients in particular. Not only is infantilization one of the common images connected to dementia, it is also a pervasive, albeit ageist, assumption connected to older age, suggesting "that aging is essentially cyclical, returning older adults to an infantile state (or second childhood) marked by dependency, diminished responsibilities and capacities, and child-like personalities and preferences" (Harrington 41).

Though this thesis has been rejected by gerontologists and ageing scholars, the parallelism of childhood and old age has remained firmly entrenched in popular culture and popular media. The ways of conveying such a "second childhood" are manifold and range from dressing older adults similarly to children in colourful, easy-to-clean, loose-fitting clothes, to showing a role reversal of older people and their offspring in which "[older adults] become the children of their own children" (Arluke and Levin 22), to pairing children and older people with one another.

It is exactly these strategies that *La Finale* and *Honig/Honey* employ, the most notable of which is the pairing of Tilda/Mathilda and Amandus/Amadeus throughout *Honig* and *Honey*, thereby showing that the granddaughters are the only ones patient enough to understand the illness and the needs of their grandfathers while being unperturbed by various idiosyncrasies and (unsavoury) pitfalls the illness brings with it.<sup>28</sup> Such moments between grandfather and granddaughter do not only establish a bond between these two but put them in the same position and moreover in opposition to the parents who are not only helpless in the face of the Alzheimer's diagnosis but seem to view Amandus/Amadeus as an interruption rather than as a person.

Yet there are many more instances in the movie that render Amandus/Amadeus childlike. Not only do Sarah, doctors and party guests revert to elderspeak<sup>29</sup>

<sup>27</sup> See Lamb (2015) on the system of care for older adults in Asian cultures.

<sup>28</sup> In a scene in which Amandus cannot control his bladder Tilda seems unfazed, telling him "ist gar nicht so schlimm, ist mir auch schon Mal passiert" (don't worry, that has happened to me too) before wiping him down and helping him to redress, showing no reservation to doing so (*Honig* 01:16:22).

<sup>29</sup> Elderspeak is a form of simplified or infantilizing communication that "features simplistic vocabulary and grammar, shortened sentences, slowed speech, elevated pitch and volume, and inappropriately intimate terms of endearment" all of which imply a lack to competence on the side



when talking to Amandus/Amadeus, or treat him in a childlike fashion by leading him by the hand, wiping his mouth or signaling him to behave in a public setting, Amandus'/Amadeus' childishness is further emphasized when the manager who shows the nursing home to Niko/Nick compares Alzheimer's patients to small children who go to the nursery for the first time.<sup>30</sup> Similar instances are the scenes when Amandus/Amadeus—because of his childlikeness—does not have to face repercussions for his irresponsible behaviour and when he is gifted with a plush toy which he proceeds to carry with him during the entire trip to Venice. Amadeus is even made to openly accept and consent to his position as a child when he first refuses to be fed and explicitly argues that he is not a child, then opens his mouth to show Sarah that he still has to chew, only to finally give in and accept being fed another fork of Caprese Salad.



Figure 7: Amadeus refusing to be fed by Sarah

Source: Schweiger, T. (dir.). 2018. *Head Full of Honey* (further: *Honey*). Berlin: Barefoot Films, 01:59:02.

of older adults (Williams et al. 12). Such a form of communication is, according to Williams et al., not uncommon in daily interactions with older adults, as well as in long term care settings or dementia care.

<sup>30</sup> NIKO: Und wie erklär ich meinem Vater, dass er irgendwann nicht mehr bei uns wohnt? (And how do I tell my father that, at some point in time, he will not live with us anymore?)

MANAGER: Erklären sie's ihm nicht, er wird es nicht verstehen. Stellen sie sich ein kleines Kind vor, das zum ersten Mal in den Kindergarten kommt. Es wirft sich auf den Boden, es schreit, Sie haben ein wahnsinnig schlechtes Gewissen, aber schon nach drei Tagen kriegen sie es dort nicht mehr weg. Es wird gut für ihn sein. (Don't tell him. He won't understand it anyway. Imagine a little child who goes to kindergartden for the first time. The child throws her/himself to the ground, cries, you feel terribly bad about all of this, but only three days later the child does not want to leave kindergartden at all. It will be good for him.) (*Honig* 01:02:44–01:02:59).



Figure 8: Amadeus being fed by Sarah

Source: *Honey* 01:59:04.

While the constellation in *La Finale* is pretty similar to *Honig/Honey*, Roland retains more agency and is not infantilized to the extent that Amandus/Amadeus is—a fact that is also due to the very short period of time the film portrays and to its focus on moments of lucidity when Roland takes action—“Le droit ne se donne pas, il se prend, mon garçon” (You have to fight for your right, my boy) (00:40:37) or, shortly before the end of the film, when he defends his grandson against his daughter and son-in-law.

Though there are also intergenerational relationships in *Rudi*, *Wellkåmm* and *Vater Morgana*, none of the male protagonists are placed in parallel to childhood, and neither Walther, Walter nor Klaus explicitly face strategies of infantilization. Whereas the case could be made that Klaus is humored by his friends playing along, which might well be seen as patronizing, the film seemingly evaluates such tendencies by showing them to be ultimately futile. Moreover, Klaus is treated like an adult throughout the film and his connection to Murat is rife with conflict and not familial. *Vater Morgana* uses infantilizing strategies ‘only’ in very few scenes in regard to female Alzheimer’s patients but not in regard to Walther. In *Wellkåmm*, finally, the choice of clothes that Walter wears—they are pajama-like and seemingly fit the description of easy-to-clean and loose-fit—as well as the treatment by the manager of the residential home and strategies employed by his daughter might be seen as infantilizing and, in the case of Gudrun, as a role-reversal of child and parent. While one could therefore argue that *Wellkåmm* shows strategies of infantilization, it is important to note that given its strong Shakespearean intertext, the film rather draws a parallel between teenagers and older adults, given that *Romeo and Juliet* functions as a mirror to the forming relationships and pitfalls of romantic connections in the nursing home.

## 8. Alzheimer's, Death and Comedy

What unites all six films is that none of them fully explore the later stages of the illness. Nevertheless, there are significant differences: In *La Finale* and *Rudi* the protagonists remain suspended in an eternal present, simply being returned to their family at the end of the film. What really happens to Roland and Klaus is clouded in silence, and their destiny does not seem to be of interest. This can be explained by the fact that whatever follows in the progression of Alzheimer's would spoil the "feel-good" mood of the movies, be it the absurdist subtext which permeates *Rudi* and the budding romance at the end of the film, or the strong intergenerational perspective of *La Finale*. Here, Roland has moved into JB's room and, in the last scene, is convinced it is July 12, 1998. Together with his family and his grandson's peer-group he is watching "la finale" (which France won 3:0 against Brazil). In this scene the original TV commentary is given, concluding: "On peut mourir tranqui!" (One can die in peace!) (01:17:44).

Just like Klaus, Roland has still a considerable life expectancy but the later stages of Alzheimer's are excluded from both comedies, so that both films refuse to really tackle the problem of Alzheimer's and dispose of their protagonists by metaphorically putting them on shelves where they remain eternally frozen—and forgotten—in a state beyond time. Structurally, these endings also correspond to Walther's fate in *Vater Morgana*, a film which closes on a similarly ambivalent note as Walther, fully aware of his condition,<sup>31</sup> leaves in his submarine, and Lutz later casually informs the audience that his father is assumed to have opened a funsport resort for snowboarders in Cuba.<sup>32</sup> The German verb "soll", which Lutz uses, implies that there is no evidence and that doubts are more than justified. These open endings prevent the comedies from turning into dramas or even tragedies; the price they pay for it is that they cannot bring their motif or driving mechanism, i.e., the problematics of Alzheimer's, to a satisfactory conclusion.

In contrast to *Rudi*, *La Finale* and *Vater Morgana*, death is not shunned in *Honig*, *Honey* and *Wellkåmm*. In Osten's sophisticated intertextual comedy, Walter Alex dies but the film leaves it up to the audience to choose their version of his demise, not as some kind of medical or biological truth but as either a dream-like sequence or a nightmarish reality. This results from Osten's technique of privileging Walter's

<sup>31</sup> WALTER: "Ich muss nach Kuba bevor es anfängt zu schneien. ... Meine Welt schneit langsam ein und mir wird kalt. Ich dreh mich um und sehe meine eigenen Spuren wie sie im Schnee verwehen. Und ich finde den Weg nicht mehr zurück." (I have to get to Cuba before the snow sets in. ... My world is slowly covered with snow and I am getting cold. I turn around and see my own footprints being blown over with snow. And I do not find my way back.) (*Vater Morgana* 00:57:17–00:57:44)

<sup>32</sup> LUTZ: "Ach ja, mein Vater soll auf Kuba mit Hilfe des ehemaligen Honorarkonsuls von Liberia eine Funsportanlage für Snowboarder aufgemacht haben." (Oh, yes, rumor urs has ve it that my father opened a funsport resort for snowboarders in Cuba, helped by the former honorary consul of Liberia) (*Vater Morgana* 01:24:51–01:25:00).

vision of life, love and death by blurring “the boundaries between internal and external focalization” (Swinnen, “Staging Dementia” 317), and by omitting to mark “the transition from the actual to the imaginary” (Gravagne 150). In dream-like sequences, we see Walter falling off his horse, and we see him dying on the beach in the arms of Virginia after having successfully attracted her and staged *Romeo and Juliet*. His remains are then shown drifting onto the sea and being set ablaze.



Figure 9: Virginia and Walter’s boat

Source: *Wellkåmm* 01:33:38.



Figure 10: Walter’s boat on fire

Source: *Wellkåmm* 01:34:03.

The other version of his death is that his own nightmarish vision of himself, bedridden and completely lost to the illness he suffers from, comes true. This scene which does not only hint but directly point at the “darker underbelly of ageing” (Gilleard and Higgs 372) is shown, with slight variations, twice in the film. During both scenes, Walter is seen wandering through a rundown, dirty hospital.



Figure 11: Walter in a hospital I

Source: *Wellkåmm* 01:32:55.



Figure 12: Walter in a hospital II

Source: *Wellkåmm* 01:17:55.

Eventually, he finds an emaciated version of himself confined to a hospital bed, barely able to do more than mutter almost unintelligibly.



Figure 13: Walter in a hospital III

Source: *Wellkåmm* 01:32:59.

As such, *Wellkåmm* does not deny the notion that the later stages of age and Alzheimer's are not only unwatchable but can be downright nightmarish, robbing the patients of their mental and physical autonomy. However, the film manages to balance this with the more romantic Shakespearean ending.<sup>33</sup> It goes without saying that there is no space for such subtleties in Schweiger's films. Here, Amandus and Amadeus die in a nursing home. The scenes shown towards the end of their lives portray a happy family spending time with their relative, literally dancing in the rain and accepting him just as he is. What can be seen as an expression of tolerance and love can also be interpreted as the films' denial to present the final and darker reality of Alzheimer's. The moment they are characterized by suffering, the final years, months and days of Rudi, Roland, Walther, Amandus and Amadeus simply do not make it into the films, and only *Wellkåmm* at least hints at what might come.

On a technical level, if one focuses on plot points and comic effects, one could certainly argue that death and suffering are simply not subjects suited for comedy. But this line of reasoning is problematic. As has been argued above, comedy, humour and laughter can be adequate means of dealing with death and suffering, for example by turning the established order of opposites such as healthy and sick

<sup>33</sup> As Swinnen argues on this staging of Walter's death, "the scene on the beach with the water burial creates a vision of the way that Walter wanted to stage his own dying hour. It counters the disturbing image of the bedridden patient whom Walter twice encounters in his nightmares and recognizes as a frightening version of his own death" (Swinnen, "Staging Dementia" 316).

around, by inverting traditional hierarchies and by following a logic of inclusion instead of exclusion, even if we are talking about unsavoury bodily processes, sickness and death. However, with the exception of *Wellkåmm*, the comedies analyzed here do not include the suffering Alzheimer's patient but marginalize, exclude and finally negate him, thus affirming socially sanctioned power relationships. Compassion, a "laughing-with" and as its consequence a "suffering-with position" based on a shared humanity is not what these comedies are after, and laughter is not used in the sense of Kamper and Wulff as a means to deal with the inevitable.

While *Wellkåmm* manages to both show and suppress the final phases of Alzheimer's by presenting Walter's nightmare as well as a 'Shakespearean version' of his death, *Vater Morgana*, *Rudi*, *La Finale*, *Honey* and *Honig* choose to deny this part by simply getting rid of the Alzheimer's patient. In these comedies, the protagonists with whom the audience has sympathized at the beginning of and a good way through the films are, as the disease progresses, not humanized by their suffering, i.e. the human bond between protagonists and audience is not deepened. On the contrary: on a deep structural level and without openly acknowledging it, the comedies make sure that the audience does not identify too much with the protagonists by slowly turning them into objects or "non-people" (Swinnen, "Ageing in Film" 71) who forget their name, change their personality, are not 'funny' anymore, do not recognize themselves in the mirror, lose more and more of their agency—and can finally be forgotten, i.e. discarded as the abject. This mechanism has to remain implicit so as to guarantee that suffering and death do not lead to feelings of guilt, especially when the comedies close on celebrating a new and hopeful beginning.

In *Vater Morgana*, Lutz and Annette (Felicitas Woll) can only marry and start a family after Walther has submerged with his submarine, after the trickster who has lived at the very borders of the law/the socio-symbolic order is washed away (not to say: flushed out) by the waters of an entire ocean. As we have already seen, in *Rudi* and *La Finale* the fate of the protagonists is not of interest either and the films make sure they do not burden the audience with it, emphasizing instead the romance between Murat and Sophie (Oona Devi Liebich) or JB's budding career in basketball. In *Honey/Honig* it is ultimately Amandus'/Amadeus' illness and death which leads to the reinstatement of a happy family life.

As a matter of fact, the solution *Honey/Honig* offers is as simple as conservative: Throughout both films, the marriage between Niko/Nick and Sarah is characterized by infidelity, a certain hostility and mistrust. Sarah is shown energetically working on her own career but forced to play second fiddle to her husband who runs his own company. Given that she is the only person who sees the gravity of Amandus'/Amadeus' condition and tries to act responsibly,<sup>34</sup> her presentation (especially in the German version) of the film has strong misogynous tendencies.

<sup>34</sup> SARAH: ... I know you don't wanna hear this but I think there's something up with him.  
NICK: He just needs time to get over the shock.

Repeatedly, the film evokes the stereotype of the hysterical woman, for example when, in sheer frustration, she demolishes her own car with a baseball bat.



Figure 14: Sarah destroying her car

Source: *Honig* 01:11:56.

This only changes towards the end of *Honey* and *Honig* when, in an almost perfidious turn, Schweiger has Sarah discover what D.H. Lawrence would call the ‘true principles of womanhood’: she decides to abandon her career, quits her job and stays at home to take care of her father-in-law and her daughter Tilda/Mathilda:

SARAH: Was hältst Du davon, wenn ich kündige? (What would you think if I resigned from my job?)

NIKO: Du liebst doch Deinen Job. (But you love your job.)

SARAH: Aber ich will mehr für Tilda da sein und für Amandus. (But I want to be there for Tilda and Amandus.)

NIKO: Bist Du sicher? (Are you sure?)

SARAH: Ja! (Yes!)

NIKO: Das fände ich ganz toll. (I think that would be amazing.)

SARAH: Das hätte ich schon viel früher machen sollen. (I should have done this much earlier.)

(*Honig* 01:28:32–51)

If Decker argues that German film comedy cannot do without combining “comedy with moral views or doctrines in order to confirm the status quo from the point of view of the majority society—especially not from the margins” (Decker), Christian Genzel criticizes that *Honig/Honey* “turns into the modern equivalent of

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SARAH: Don’t you think it’d be a good idea just to take him to a doctor and get him checked out? Make sure he doesn’t have some kind of early onset dementia or something?

NICK: No, he’s fine. (*Honey* 00:23:55–00:24:07)



the *Heimatfilm*, those idealized romances in idyllic regional settings in which the daughter, by running away from home, manages to reconcile her warring parents into loving unity” and concludes: “‘Sickly sweet’ suggests itself as a suitable attribute” (Genzel, trans. SH/FR). As a matter of fact, *Honig/Honey* almost becomes a parody of itself when Sarah, in addition to reverting to the role of nurse and ‘stay-at-home-mom’ gives birth to a baby boy she calls Amandus/Amadeus.

From this it follows that although Alzheimer's is used in all of the films as the main motif or trigger for action, it is negated and ousted the very moment its reality threatens to clash with the principles and mechanisms of ‘light’ and easily consumable comedy as understood by Schweiger, Sykes, Endermann, Liebich/Sahin and the like. The suffering of the Alzheimer's patient, even if he is allowed to die before the end of the film (Amandus, Amadeus, Walter) is not shown and, with the exception of *Wellkåmm*, not even alluded to. To the contrary: the presumably happy endings derive from the fact that the Alzheimer's patient, in an unacknowledged and covered process of abjection (see Kristeva, *Powers of Horror*), is silently removed from the scene—and thus his suffering negated. Instead of acknowledging our ‘being-towards-death’ (Heidegger), a dimension which Alzheimer's exemplarily displays on many different levels, almost all of the comedies discussed here suppress this knowledge in favour of the reinvigoration of the traditional heteronormative family.

Notwithstanding the praise by the Deutsche Stiftung für Demenzerkrankte for *Honig im Kopf*, the real function of the protagonists' suffering from Alzheimer's in almost all of the films discussed is not to familiarize the audience with this disease or to create an understanding for the patients or their suffering.<sup>35</sup> Once the (more or less) funny spectre of Alzheimer's in its early stages has sparked off enough laughter and comic relief, once the ‘feel-good’ mood threatens to turn sour, the disease is almost reflexively negated in favour of love, romance (*Rudi, Vater Morgana*) and the reinstatement of the traditional loving family (*Honig/Honey*, and to a certain extent also *La Finale*). This strong increase in social cohesion in the remaining couples and families after the death or disappearance of the Alzheimer's patient hints at underlying mechanisms of exclusion and projection (Horlacher, “Überkreuzungsphänomene” 229) reminiscent of the scapegoat mechanism (see Kenneth Burke/René Girard). Whatever was felt to be a hindrance to happiness vanishes almost miraculously with the death or disappearance of the Alzheimer's patient, and on the micro-level of the family a new ‘community’ arises, purged of bad emotions and completely bereft of feelings of guilt. In these ‘comedies of innocence’, to borrow Karl Meuli's concept, no one is responsible for the death or disappearance of

<sup>35</sup> “A film like *Head Full of Honey* only delivers if one never succumbs to the desire to seriously engage with the material. But how can one not question a topic as serious as Alzheimer's dementia? Testing the truth value of *Head Full of Honey*—always in relation to Alzheimer's—it is impossible to avoid the conclusion that Til Schweiger resorts to an idealized extra light version of the illness. Bent into the exact shape that adds and is palatable to a broad consensus” (Genzel, trans. SH/FR).

the Alzheimer's patients,<sup>36</sup> but without their death/disappearance a new beginning would not be possible.

Given these deep-structural mechanisms—and with the exception of *Wellkåmm*, Osten's celebration of love, life and literature in the face of Alzheimer's and death<sup>37</sup>—it is obvious that five of the six comedies analyzed are more interested in functionalizing the disease than in adequately representing or understanding it. If the films fail to explore Alzheimer's and the patients' suffering more extensively, they do not fail because of generic conventions or because they reach the limits of what humour and laughter are capable of (Horlacher, "Short Introduction" 36–43); they fail because instead of endeavouring to fathom the topic of Alzheimer's in new and innovative ways they are more interested in the restoration of traditional family structures and thus remain bound to conservative values and an ancient, millennial-old subtext of renewal through exclusion, (religious) sacrifice and repression.

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<sup>36</sup> For an elaboration of Meuli's concept, the link to sacrifice and a psychoanalytical reading of these mechanisms see Horlacher, "Überkreuzungsphänomene" 233ff.

<sup>37</sup> VIRGINIA: "I will love you till I die."

WALTER: "No, death is for amateurs, who don't watch out. Death is just a mistake. Like slipping on a banana skinpeel. ... Let's promise each other never to die" (*Wellkåmm* 01:32:08–44).

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