Ghost in the Machine: Supernatural Threat and the State in Lars von Trier’s "Riget"
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The supernatural threat and the state in Lars von Trier’s *Riget*

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Lars von Trier’s 1994 four-part television mini-series *Riget* (The Kingdom)—one of the most popular television series in the history of Danish broadcasting—uses the main state hospital, *rigshospital*, as the backdrop for a contemporary ghost story. In the television series, von Trier tells the story of a young girl who is the victim of a murder and the attempts of an elderly woman to help the girl’s distressed spirit find rest (Trier). By situating a classic ghost story within the walls of the hospital amid a series of contemporary intrigues and by presenting a character—Fru Drusse—who has abilities as a spiritualist combined with her apparent hypochondria run directly...

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1 *Riget* had an average viewership of 941,187 when first released, with an average 31 share. During 1994, two other series, *En nomes kærlighed* (935,000) and *Landbyen* (968,000) had similar average viewerships. In subsequent years, the viewership has been surpassed by series such as *Manden & Co* (961,000, 12 episodes, 1996), *Landbyen* (1,132,000, 14 episodes, 1996), *Brobyggen* (1,931,000, 11 episodes, 1997), *Kun en pige* (1,044,000, 3 episodes, 1997), *TAXA* (1,031,000, 12 episodes, 1997), *TAXA* (1,265,000, 23 episodes, 1998), *Matador* (rebroadcast, 1,765,000, 21 episodes in 1998), *Edderkoppen* (1,188,670, 6 episodes, 2000). I would like to thank Peter Nagel from Danmarks Radio for supplying me with these statistics. Apart from various soccer matches, the 1992 Danish Melody Grandprix, and several important news broadcasts, the most popular television show in Danish broadcasting history is *Olsen-Bandens Sidste Bedrifter* broadcast on January 1, 1995 with 2,657,000 viewers (TV2 scertal database).
counter to the ideological foundations of the hospital, von Trier enables a multi-layered critique of the discourse of the hospital and, by extension, the State. With the disturbing final resolution of the girl's ghostly intrusion into the ultra-modern hospital in which the attempted conjuring only partially succeeds, von Trier's contemporary narrative endorses an evaluation of governmental authorities and related institutions reminiscent of the position taken by many late nineteenth-century Danish storytellers in their ghost stories, namely that something is indeed rotten in Denmark—or at least with those who purport to protect the interests of the average citizen (Tangherlini *Interpreting Legend*; and “Who ya gonna call?”).

Most previous considerations of von Trier's television series have focused on technique (Christensen and Kristiansen; Brogaard and Lindhardt;), humor (Agger), and his play with various film genres (Agger; Christensen and Kristiansen). Interestingly, most of these studies have assiduously avoided an examination of the ideological critique clearly evident in the work, with the exception of Christensen and Kristiansen who tip their hat in that direction: “Riget kan således eksempelvis også læses allegorisk som en kritik af det danske Rige, eller af den vesterlandske rationalitet for den sags skyld. Men det bliver en helt anden historie” [Accordingly, *Riget* can also be read allegorically as a critique of the Danish kingdom, for example, or of Western rationality for that sake. But that is another story altogether] (Christensen and Kristiansen 307). This critical project is what I propose to undertake here, along with highlighting von Trier's use of folklore as a basis for this critique and exploring how such a critique is also an essential part of folk legend tradition. Through this examination of von Trier's use of folk legend and folk belief, two facts come to light: folklore can play an important role in

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2 By "classic" ghost story, I mean one that presents a representation of a ghost consistent with that found in folk tradition (Pentikäinen, "dead").

3 In an interview concerning *Riget* and its potential meanings, von Trier proposes that there is not much to interpret in the series, saying, “Det er rent venstrehåndsarbejde og lavet som en form for afslapning.... Hvis der er nogen, som ser en dybere mening med det, jeg har lavet, så må de meget undskyde. Det har nemlig slet ikke været meningen” [It is complete left handed work and made as a form of relaxation.... If there is anyone who sees a deeper meaning in what I've made, then I must say I'm very sorry. That wasn't at all the idea]. Von Trier, in making *Riget*, is undoubtedly inspired by numerous television series (*Twin Peaks*), motion pictures (*The Shining, The Exorcist*), and the popular media. Nevertheless, he seems to derive significant inspiration from folk tradition.
Lars von Trier's *Riget*

contemporaneous ideological debates and 2. in media such as television, folklore can be deployed to serve rhetorical ends similar to those of folk tradition. Although the social criticism found in folk tradition is essentially local and rarely reaches beyond parish politics, von Trier's critique takes place in the national arena. Furthermore, while folk legend always exists within a tradition of more or less equally weighted narratives and counter narratives, the television program stands alone as the sole authoritative narrative. The reach and authority—attributable entirely to the form of communication (television as opposed to face-to-face conversation) — are perhaps the most important differences between modern and traditional transmission conduits and have significant implications for the cultural prominence accorded the television program (Dégh and Vázsonyi).

In von Trier's chaotic vision of the hospital—a vision made all the more chaotic by his resistance to standard rules of filmmaking—ghosts, hounds from hell, physicians, nurses, Voudoun-practicing porters, rats, members of parliament, and—perhaps most frightening of all—Swedes play hide-and-go-seek in the labyrinthine halls of the modern institution (Christensen and Kristiansen; Agger; Brogaard and Lindhartsen). Foregrounded in his ideological critique of the modern Danish welfare state are the competing claims for legitimacy, authority, and ultimately control made by an ultra-rationalist positivism represented by the hospital's senior physicians and a metaphysical

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4 Of course, the visual, theatrical presentation of the narrative on television is profoundly different than the oral performance of that narrative. For a discussion of television in Denmark, as well as television as a narrative media, see Bondebjerg 1993. Selberg ("Folklore") considers the interplay of folklore and television in the Nordic countries, as well as its role in everyday life in Norway ("Fjernsynsvirkelighet"), basing many of these ideas on Silverstone. Laba considers the interplay between folklore and popular culture, such as television, while a general consideration of the impact of television on culture can be found in Fiske. See also Schenda.

5 Although *Riget* was produced before von Trier's now famous *Dogme* project, it incorporates many of the ideas concerning filming found in that project (e.g. use of handheld camera, use of available light). Of course, the visual, theatrical presentation of the narrative on television is profoundly different than the oral performance of that narrative. For a discussion of television in Denmark, as well as television as a narrative media, see Bondebjerg 1993. Selberg ("Folklore") considers the interplay of folklore and television in the Nordic countries, as well as its role in everyday life in Norway ("Fjernsynsvirkelighet"), basing many of these ideas on Silverstone. Laba considers the interplay between folklore and popular culture, such as television, while a general consideration of the impact of television on culture can be found in Fiske. See also Schenda.
spiritualism represented by the character Drusse. As such, one finds two competing discourses in von Trier's television kingdom. On the one hand there is the powerful and authoritative discourse of modern medical expertise endorsed and institutionalized by the state, purportedly dedicated to the betterment of society and grounded on the postulate that by opening things up and making the invisible visible, truth emerges (Foucault). On the other hand, there is the marginalized discourse of folk belief—long derided in the positivist, critical, and rational Western scientific discourse—in which the invisible is feared. In this system, when the invisible becomes visible, those affected enlist the help of a person with spiritual expertise to try and coax the apparition back to the hidden world where it belongs.

Von Trier makes use of a wide spectrum of folk belief and legend in his television narrative. In a story that spans nearly a century, he wedds eighteenth- and nineteenth-century folk beliefs about murdered babies, ghosts, and cunning folk with contemporary legends about medical malfeasance, spiritualists, and voudoun. By situating these intersecting stories entirely within the walls of the rigshospital, he constructs an alarming view not only of the hospital as a representation of the pervasive, yet failing, social welfare state, but also of the surprising intrigues of those entrusted with the health of the nation. In a critical gesture reminiscent of the folk narrators of the late nineteenth-century—as well as narrators of contemporary legends—von Trier proposes that institutions controlled by the state—here represented by the rigshospital and its senior physicians, administrators, and the minister of health—do not necessarily

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6 See also Bausinger (26) for a discussion of folklore in a world of technology, particularly his discussion of the connection in folk belief between technology and evil magic.

7 Not all that is invisible is necessarily destructive. Legends abound where a human benefits from being able to see the otherwise invisible possessions—often money—of the “hidden people.”

8 I use the term “cunning folk” throughout this paper as a translation for the Danish, klage folk, which literally translates as “wise folk.” An equally proper characterization of these people is the term “folk healer.” This last term has the advantage of sidestepping the potentially derogatory inferences of the word “cunning.” At the same time, it places more emphasis on these people's healing practices, and less on their spiritual practices. Furthermore, there is a tradition in English language scholarship of referring to these people as “cunning folk,” a usage which I have decided to follow here. In so doing, I depart from my earlier use of the term “folk healer” (Tangherlini, “Who ya gonna call?”). See also Brown.
align with the popular good (Tangherlini, “Who ya gonna call?”; Brunvand; Fine).9

Von Trier was not alone in advocating this position in 1994, but was rather echoing the sentiments of many of his countrymen who, by the early 1990s, were beginning to express a deep discontent with the social welfare state. During the 1980s in Denmark, amid spiraling unemployment and a stagnant economy, a broad critique of the institutions of the modern welfare state from both sides of the political spectrum emerged. This critique was perhaps best exemplified by the success of conservative parties in parliament at one extreme and the BZ movement at the other extreme. On May 18, 1993, after a hotly contested referendum concerning EU membership, this general distrust of the government exploded into open confrontation on the streets of Copenhagen in some of the worst violence to rock the city since the Second World War. By the time of the release of the television series approximately a year later in 1994, a general discontent with many of the earlier vaunted—yet heavy-handed—policies of the government and its Byzantine bureaucracies could be found among the general populace. The once rock-solid belief that socialized medicine was the shining jewel in the crown of the social welfare state was also attacked, not least in part by revelations of medical malfeasance, an increasing rationing of health care, and a general erosion of services. By the early 1990s, the jewel had lost much of its initial gleam, and the general population was receptive to the type of critique proffered by von Trier’s program.

The use of a ghost story as part of a general ideological debate is not unique to the late twentieth-century. Rather, one can find an interesting similarity between the ideological debate found in the late nineteenth-century legends about ghosts and cunning folk on the one hand and von Trier’s work on the other. Indeed, belief in ghosts and ghost stories has long been part of ideological debates (Bennett; Johansen; Grell). For example, ghost stories were at times deployed rhetorically in Denmark as part of a tactic of critical engagement with the powerful Lutheran church (Tangherlini, “Who ya gonna call”; de Certeau). In pre-Reformation Denmark, belief in ghosts and the ability of priests to counter their intrusion was a significant element in a broad spectrum of folk belief. However, with the advent of the Lutheran Reformation and the concomitant theological disavowal of the Catholic

9 This critical gesture is also reminiscent of the popular television series, The X-Files.
concept of purgatory, the potential for the living dead should have disappeared. In fact, Lutheran leaders went to great extremes in their attempts to eradicate the popular belief in ghosts including banning vigils (Johansen 181). Belief in ghosts, however, did not disappear. Eventually, Lutheran ecclesiastics reconciled the wide spread belief in ghosts with Lutheran doctrine by drawing a connection between Satan and ghosts (Bennett 6–9; Johansen 182–3). Thus, the popular belief in ghosts became somewhat “theologically correct.” This ecclesiastical accommodation of folk belief also found expression in legends in popular circulation primarily through the motifemic equivalence drawn by many tradition participants between Satan and revenants.

In 1849, a democratic constitution was promulgated in Denmark, and a new guarantee allowing religious freedom was among its many far-reaching implications. While the constitution did not entirely separate church from state, it redefined the authority of the centralized Evangelical Lutheran church in Denmark and presaged a significant change in its hitherto unquestioned authority. By the end of the nineteenth-century, many communities engaged in significant debate over the theological direction a parish should take, and parish members began to have a say in the choice of the local minister (Banning). These debates were often vigorous, and the abilities of various ministers along with their theological affiliations were of great concern for many parishioners. Not surprisingly, some ministers were accused—if not in official documents at least in narrative—of alliances with Satan. Conversely, other ministers were seen as particularly adept at banishing the “Evil One” (or his manifestation as a ghost or revenant) and were referred to as “kloge” [wise, cunning], the same moniker used to describe the cunning folk. It is in this historical light of theological debate and profound social change that one should consider the ghost stories that the well-known nineteenth- and early twentieth-century collector Evald Tang Kristensen recorded and that—directly or indirectly—inform von Trier’s film.10

A close reading of ghost stories collected in Denmark during the late nineteenth-century reveals an intriguing disagreement over the proper action in the face of this otherworldly intrusion (Tangherlini, “Who ya gonna call?”). Juha Pentikäinen’s typology of ghosts in Nordic traditions helps pinpoint the types of haunts that one might encounter

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10 For elaboration of this point, see Tangherlini, “Who ya gonna call?”
in rural Denmark, but does little to explain the possible reactions to the haunting and what one might expect to be the outcome of the mediation of the ghostly intrusion (Pentikäinen, “Dead without Status”). A fundamental question posed by legends about ghosts—and one familiar from the world of popular film—is “When ghosts appear in the neighborhood, who ya’ gonna call?” (Parker). In the majority of the Danish legends, the answer to this question is “the minister,” and preferably one who is “klog.” However, in a significantly large number of legends, the minister actually fails to beat back this threat to the community. In an equally significant number of legends, the answer to the initial question is not “the minister,” but rather “a cunning man or woman.” Lærer Jakobsen from Mejilby mentions, for instance:


[The wise smith in Lønborg could conjure the Devil, but because of that, he had to belong to him at some point. The cunning folk were both feared and admired. They could measure, sign and show again, cure illnesses, and by reading prevent injury or remedy it. In addition, they could stop bleeding, quiet stampeding horses and much more. One accorded ministers a certain cunningness in these directions too. The cunning folk could do both evil and good.]

Here, the informant himself draws attention to the potential motifemic equivalence of the cunning person and the minister. Because of this equivalence, the individual narrator can choose whomever he wants to conjure the evil spirit—and whether he wants that conjuring to be successful or not.

The tradition dominant in Denmark is without doubt the minister in the role of successful conjurer. Interestingly, however, the minister does not always succeed in conjuring the spirit and, in numerous ghost stories, a cunning man or woman succeeds where the minister has failed.

While institutional authorities—in these legends Lutheran ministers—are the tradition dominant for the role of successful
mediator of ghostly threats in the nineteenth-century Danish tradition, the presence of an alternative and equally successful mediator in the figure of the cunning man or woman illustrates the devaluation of the hitherto powerful position of the minister. In some legends, the minister is allied with the Devil or is married to a witch, a possibility that underscores the rising suspicion in rural society that institutional authorities may not be dedicated to their betterment regardless of their expressed intentions. The cunning man or woman, who relies on a locally produced theology—frequently referred to as "the black book" or Cyprianus—thus represents an alternative to the powerful institution of the Lutheran church, which is ostensibly dedicated to the spiritual protection of the community. Drusse occupies exactly this position of the alternative to authority vested by the state in von Trier's kingdom. While she is not in possession of a Cyprianus, she is seen within a certain group of patients as a local source of spiritual authority. Although her attempts to make contact with the other world have hitherto failed, she emerges in the program's narrative as the only capable mediator of ghostly intrusion in the hospital. Here von Trier of course establishes a none-too-surprising equivalence between Drusse, the modern spiritualist, and the cunning folk of the nineteenth-century.

The cunning folk are remarkably complex figures in Danish folk tradition. The ghost stories in which a cunning man or woman succeeds where ministers had failed were likely part of an emergent challenge on the part of the rural populations to the previously unquestioned power of the Lutheran church and its representatives. But the cunning folk were more than simply convenient legend characters that could be inserted into the motifemic slot of successful ghost buster. Rather, they were an important part of rural life and, in many cases, were the only link to health care that people had in the isolated villages of rural Denmark (Seeberg; Rørbye). Indeed, when the Lutheran church was engaged in a frenzy of witch persecution during the seventeenth-century, local authorities requested rather sharply that the cunning folk be left alone as they were the only ones who had even rudimentary healing skills in many rural areas (Johansen 35; Seeberg). In a study of the Scandinavian Reformation, Ole Peter Grell mentions that, "the Lutheran clergy ... encountered fierce opposition in ... their attempts to suppress 'cunning folk', not least because these people represented the population's only access to healing" (Grell 11). Despite the strict apothecary law of 1672,
many cunning folk were able to practice their craft unimpeded by institutional interference (Rørbye 202). By the late 1700s, however, with the increasing power of the medical establishment, the cunning folk found themselves at odds with the authorities. In 1794, a law forbidding the practice of medicine by people not duly qualified—generally referred to as the quacksalver law—essentially outlawed the work of most cunning folk and clearly drew a line in the sand between the institutionally sanctioned and powerful physicians on the one side, and the alternative healers on the other (Rørbye 207–9). As a result of this law, its strict enforcement, and the harsh penalties that followed conviction for violation, the cunning folk found themselves marginalized and forced to practice their healing if not in hiding at least discretely.

Stories abound in late nineteenth-century collections of the remarkable healing abilities of many of these cunning folk. In numerous stories, they are able to heal people on whom the medical establishment had effectively given up. In a study of the practices of various cunning folk during the nineteenth and early twentieth centuries, Birgitte Rørbye points out that the cunning folk were engaged in a dangerous enterprise that was rife with competition and subject to deep suspicion and frequent punishment by governmental authorities (Rørbye). It did not help that many cunning folk attributed their healing powers to God and mixed a great deal of evangelical Christianity with their various powders and herbs. Among the most habitual detractors of the cunning folk were, of course, physicians who often found their own practices seriously compromised by the locally trusted—and far less expensive—cunning men and women (Tangherlini, “How do you know”). While much of this criticism was doubtless well deserved and grounded in the clearly improper treatment prescribed by these frequently self-taught healers, some of the criticism was based on a feeling among physicians that the cunning folk were taking their patients, a notion that seems to lie behind the “revenge” taken by a physician in Frederiksund on a patient who had also consulted the cunning woman Karen Pedersdatter (Rørbye 20).11

In short, the figure of the nineteenth-century cunning folk presents an intriguing mix of extraordinary pragmatism, metaphysical awareness,

11 Although the physician initially refused to treat the patient, he eventually agreed on the condition that the patient no longer seek the counsel of cunning folk.
and local power. While many of the cunning folk were considered by even their own customers to be slightly odd—originaler—that characterization only underscores the distance that separated them from the powerful institutional authorities of the medical establishment and the Lutheran church who were among the clearest representations of state authority in the daily life of the rural nineteenth-century Dane. However, by the end of the century, the previously unquestioned authority of the kingdom (riget) and its institutions were under attack both politically and rhetorically. This interrogation of power—and the profound concern that those in power were not necessarily working for the good of the ordinary citizen—found expression in numerous ways, not the least of which was the storytelling tradition of the people most affected. The questioning of powerful state institutions is also a hallmark of the late twentieth-century, and so it is not surprising that von Trier's accession of a ghost story in the contemporary hospital captured the imagination of contemporary Denmark poised, as it were, on the brink of a new millennium, a quickly changing society and, with membership in the European Union, a new position in Europe.

Just as the institutions of the Lutheran church and the institutionally powerful physicians were challenged, at least rhetorically, in the narrative tradition of late nineteenth-century Denmark, the power and the intentions of these same institutions are subject to criticism in von Trier's television program. In the opening sequence, a mesmerizing voice-over slowly explains that "porten til Riget er begyndt at åbne sig på ny" [the door to the Kingdom is beginning to open again]. To which kingdom the narrator refers is not entirely clear, as the word can be interpreted narrowly as the hospital, more broadly as the Danish kingdom, and even more broadly (and metaphysically) as the world beyond. The cracks in the positivist armor of the hospital—and by extension scientific discourse—are blamed in the voice-over on the arrogant exclusionary stance of the scientists and doctors who work at the hospital: "Måske er det blevet for meget med hovmodet og den konsekvente fornægtelse af det åndelige" [Perhaps the arrogance and its consequent denial of the spiritual got to be too much]. During this voice-over, the dissolution of the otherwise rock-solid discourse of science is visually represented first by a crack which fractures a granite wall on which the word Riget is carved followed by blood which gushes through the fissure and
covers the entire screen. This heavy-handed introduction erases any doubts about von Trier’s narrative perspective and critical evaluation of the hospital. Although many aspects of society at large endorse the notion that scientific rationalism has won out at the end of twentieth-century, the extraordinary popularity of *Riget*—and of many American television series, such as *Twin Peaks* and *The X-Files*, that question this victory—indicates that this debate is far from over (Lynch; Carter). The hospital itself, which is supposed to be “kronen på værket” [the crown on the work] of the union of scientific rationalism and the modern welfare state, is built on shaky foundations: “Grunden under Rigshospitalet er gammel mose” [The ground beneath the State Hospital is an old swamp]. This physical shakiness, of course, is a metaphorlic representation of its ideological shakiness. Not only is the hospital built on top of an old swamp but, as the name of one of the roads that forms a boundary for the hospital—Blegdamsvej—bears witness, it is also an old bleaching field. Swamps and bleaching fields are, in Danish legend tradition, the site of countless infanticides and von Trier uses this connection between murdered children, swamps, and the bleaching fields to enable his own ghost story.

The back story of *Riget* tells of Mary Jensen, an illegitimate child, who was murdered by her physician father, Åge Krüger, nearly one hundred years ago on the grounds of the hospital. Mary’s father passes off her murder as an unfortunate result of a valiant attempt to treat her tuberculosis, from which, he claims, she suffered. As part of his elaborate plan to eliminate his illegitimate—and therefore inconvenient—daughter, he takes her away from her lower class mother’s provincial home to the city convincing the mother (and his illicit mistress) that Mary suffers from tuberculosis, which he says is the reason for her humpback. As Drusse begins to put together the puzzle of Mary’s haunting, a terrifying flash-back sequence shows the cold-hearted physician father and his assistant pursuing the scared child through swirling fog across the bleaching field of the hospital

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12 This scene is of course visually reminiscent of the famous elevator of blood sequence in Stanley Kubrick’s *The Shining*, another filmed version of a ghost story that plays on the role of the cunning person in the mediation of ghostly threat (Kubrick; Christensen and Kristiansen). This type of intertextuality is highly characteristic of von Trier’s work, with his frequent reference to other films (and film genres) that, interestingly enough, are all related to some degree with folk belief (Christensen and Kristiansen).
grounds. Chased down by a snarling black dog, the girl is finally caught, brought back to the hospital, and killed by treatment with chlorine gas. After murdering his daughter, Krüger covers up her death using the various devices available to him as one of the hospital’s senior physicians. He falsifies her death certificate, forges the papers for the release of her body, and hides her body in the hospital’s teaching collection of medical specimens housed in giant glass containers.13

As a link to the present day, Mary Jensen makes her first appearance in the hospital’s high speed elevator shaft by ringing a little bell—presumably attached to her clothes so that the evil physician father can always find her—and by crying. As Pentikäinen notes in his work on child haunts, the ghostly cry is a remarkably common motif (Pentikäinen, Nordic). Mary’s haunting query, “Hvorfor skal jeg slås ihjel?” [Why do I have to be killed?], which echoes throughout the film, becomes the question her ghost poses again and again. It is of course typical of an innocent haunt to pose a question or to make an obtuse statement, the interpretation of which is usually quite difficult but also holds the key to the haunting (Pentikäinen, Nordic). In Danish legend tradition (and in most Nordic traditions), speaking to an innocent haunt often helps solve two simultaneous mysteries: the reason for the haunting and the identity of the haunt’s killer. Seen in this context, one can consider both the cunning folk of nineteenth-century legend and Drusse as spiritual detectives. The conception of the detective operative here, however, is significantly different from most contemporary notions—of which Sherlock Holmes is perhaps the most extreme example—whose work is marked by rational argumentation and attention to minute detail and is, in that sense, surprisingly similar to that of the modern physician. While the latter type of detective is interested in revealing important aspects of a crime and ultimately bringing the villain to justice, the main goal of the former is to restore a spiritual balance, to cover things back up, and to allow the departed to find rest.

13 There is a strange resonance between this and a scandal that gripped the Rigshospital and the Arbejdernes Lигkistemagasiner in the final months of 1999 concerning the disappearance of in all 114 bodies of dead children from the hospital’s chapel from 1996 through 1999 and the apparent falsification of various documents concerning those children (Ritzau nyhedsbureau, March 9, 2000). The importance of this event in the media cannot be overstated; see for example the front page of Politiken for December 10, 1999.
In the front story of von Trier's program, an arrogant Swedish neurosurgeon goes to great lengths first to deny and then to cover up a surgical mistake that results in the brain death of another young girl, Mona Jensen. This front story is, of course, similar to popular rumors of medical malfeasance and the well known stories that circulate among medical workers about Dr. Death, a physician both so arrogant and so incompetent that his patients die in droves (Tangherlini, *Talking*). Amusingly, von Trier's hospital is not populated with only a single Dr. Death, but rather an entire legion of them. Kroghshøj, a young attending physician who has set up an apartment in the basement of the hospital, has built a small “cemetery” using an instrument tray, sand, and some tongue depressors on which are written the names of patients who have suffered at the hands of their physicians. This cemetery of medical mistakes provides a visual representation of the scores of malpractice cases attributable to the hospital's core of senior physicians. These cases are otherwise hidden away under lock and key in the hospital's archive. With the cemetery of medical mistakes, von Trier confirms the worst suspicions of the person confronted by a large, anonymous institution that, while purporting to have the best interests of its patients in mind, is both riddled with incompetence and filled with physicians more interested in their research than their patients. As Michel Foucault aptly points out, the teaching hospital is not necessarily dedicated to the well-being of the individual patient; rather, it is dedicated to the expansion of medical knowledge through the examination, description, and, finally, dissection of the patients who come through its doors (Foucault). Krüger's concealment of Mary's corpse in the teaching collection takes on added significance when seen in this context. In the television narrative, von Trier ultimately equates the bleaching field infanticides of illegitimate children from folk tradition, the back story death of Mary at the beginning of the century, and Mona's contemporary brain death in the front story. This equation, in turn, leads to an unavoidable assault on both the role of the hospital in society and the blind valorization of medical discourse in the late twentieth-century.

Foucault, in his work on the birth of modern medical science, identifies a profound change in the discourse of medical practice in the late eighteenth century, a time concurrent with the Danish quacksalver law (Foucault; Rørbye). This important shift in the perception of the hospital and the role of the doctor in society, postulates, at once, a significant political dimension to the practice of medicine, in which
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“medicine [was] link[ed] with the destinies of states” (Foucault 34) and simultaneously placed the practitioners of this newly, politically situated practice in an interesting, albeit somewhat surprising, position, “organized like the clergy, and invested, at the level of man’s bodily health, with powers similar to those exercised by the clergy over men’s souls” (Foucault 31). This power of the physicians is one that von Trier considers explicitly in his work and one that can be glimpsed implicitly in folk narrative tradition. Ultimately, in Foucault’s words, “the first task of the doctor is ... political: the struggle against disease must begin with a war against bad government. Man will be totally and definitely cured only if he is first liberated” (Foucault 33). But von Trier’s image of the hospital contests the liberating view of medicine and its practitioners. Much like the incarceration of those who transgress the rules of civil behavior, the hospital imprisons those who transgress the rules of health and the discursively constructed healthy body. Rather than a locus of resistance to bad government, the hospital becomes an extension of bad government.

Von Trier chooses the neuro-surgical unit of the hospital as the main setting for the film since it is perhaps here more than anywhere else in the hospital that the discourse of modern medicine is best articulated, and also where patients are the most thoroughly somatized, their personality, thoughts—even spirit—reduced by medical discourse to electrical discharges between neurons. Foucault notes that a significant aspect of medical discourse is the importance of the practitioner’s gaze which reveals what is hidden and, through this revelatory gesture, produces knowledge. This knowledge in turn perpetuates itself in a never ending spiral of clinical observation. In this sense, the modern teaching hospital begins to assume aspects of the panopticon, a device of control closely linked not only to the conceptualization of the democratic state but also to the organization of the modern prison. With the clinic, however, surveillance is not used in an elaborate interaction between discipline and punishment, but rather as a tool for the mapping of medical knowledge onto the body of its subjects. In the contemporary hospital, aspects of surveillance have reached a remarkable level—CAT scans and MRIs can peer into crevices in the body providing greater and greater detail, and EKGs can reveal in minute detail the electrical activity of the heart.

One of the central issues among the medical staff in von Trier’s hospital is access to the CAT scan, a machine that promises an intimate look into the inner workings of the brain. The conflict between Stig
Helmer, the Swedish senior neurosurgeon, and Kroghshøj, a young Danish attending physician, over access to this machine encapsulates von Trier's critique of the modern hospital. The younger (Danish) doctor sees the equipment as a diagnostic tool intended to be used to help patients, whom he treats as whole individuals. He apparently does not view the machine as necessarily better at diagnosing and curing than the much more subjective process of talking and listening. At the same time, he is more willing to accept the spiritual side of disease. In contrast, the older (Swedish) doctor sees access to the machine as a representation of status in the elaborate medical hierarchy and its detailed pictures as an important part of an objective, mechanical endeavor that treats people as parts. Not surprisingly, he is of the opinion that people are like machines and, with close attention to the physical dimensions of disease, they too can be repaired. It is no coincidence that Helmer places more store in his cherry red Volvo than he does in his patients—technology and its control, rather than its use, are paramount concerns for him.

The clinical obsession with greater and greater specificity represented by the CAT scan reappears in the strange experiments of the neurological unit's sleep laboratory. Mogge, a hapless medical student who contributes to the spiritual bankruptcy of the hospital by stealing the head of a body used in the cadaver laboratory—a theft that resonates with contemporary legends of stolen body parts (Klintberg, Råttan, 214–7; Klintberg, Den stulna; Christensen)—enrolls in a sleep study in an attempt to get close to a nurse whom he wishes to seduce.14 In his nightmares, which are captured by von Trier's camera, a host of ghoulish revenants eat his body, likely as punishment for the theft of the head. With the help of the sleep laboratory's machines, the lab technicians can see that his "pleasure centers" glow red during a particularly erotic dream. Amusingly, these same technicians spend most of their evenings engrossed in watching slasher videos—particularly The Texas Chain Saw Massacre—which, as Carol Clover notes, are as obsessed as modern medicine with "opening things up" (Clover).

More interesting than the sleep laboratory in the context of the ghost story however is the audiology laboratory, where the idea of ever greater specificity through the use of elaborate diagnostic machinery runs head-on into the spiritual world where covering things up is

14 For the most thorough study of legends about stolen body parts, see Campion-Vincent 1997.
usually the best strategy. Drusse, after telling the staff about Mary’s haunting cries and her ghostly bell, is sent to the laboratory because her physicians are convinced that she is “hearing things.” Drusse’s suspicions about Mary’s haunting, however, are confirmed by the appearance of the ghostly voice in the very machinery of the hospital that is intended to provide a rational explanation of those sounds. Although the hospital’s diagnostic machinery promises greater scientific objectivity by virtue of its extraordinary ability to make visible even the smallest and least known parts of the human body—in this case the tone generated by the healthy ear—the appearance of Mary’s ghostly voice in the machinery undermines the intentions of the test itself. Much to the technician’s dismay, the machine confirms what science has told us is impossible, namely Mary’s haunting. A similar unexpected result occurs during an ultrasound examination of Krogshøj’s pregnant girlfriend. Here, the machine confirms the extraordinarily quick growth of the fetus, that, as it turns out, is the child of Mary Jensen’s father’s revenant—an impossibility according to medical science. Rather than making things understandable—like a modern-day detective—the results of the medical machines’ surveillance of Drusse’s ear and the womb of Krogshøj’s girlfriend only contribute to greater confusion.18

The concept of a surveillance that challenges scientific knowledge rather than producing that knowledge plays a critical role in von Trier’s dismantling of the vaunted discourse of modern medicine and the underlying idea that the irrational can be explained away by looking at it very closely. By turning the gaze of his camera on the medical establishment itself, von Trier undermines this idea of “surveillance” as a means to a rational truth. As a way of signaling this questioning of the rational underpinnings of the idea of “surveillance,” the hospital’s security camera captures the mysterious appearance of an otherworldly ambulance in the opening scenes of the program. Similarly, von Trier’s own camera is one that can make the invisible visible. But this visibility is not that of modern medical discourse as represented by other film cameras such as the Ultrasound or CAT scan. Instead, with von Trier’s camera, one sees the otherwise invisible intrusions of the spiritual

18 This type of obfuscation is reminiscent of *The X-Files*, where the endeavors of the two FBI sleuths never provide answers and only help reveal glimpses of a nefarious government-sponsored organization that is not working for the betterment of society (Carter).
world into the human world. In one of the more haunting sequences, Mary's ghost appears in an operating room during surgery. In an analysis of the intersection between tradition and science in the hospital, Marie-Christine Pouchelle notes,

*A l'intérieur même du microcosme hospitalier en effet, le bloc opératoire, les salles d'accouchement, la morgue, et plus récemment les services de réanimation apparaissent par excellence comme les domaines de l'entre-deux.* (318)

(In effect, at the very center of the hospital microcosm, the operating theaters, the autopsy rooms, the morgue and, more recently, the resuscitation services emerge as excellent representations of the domains of the in-between.)

Similarly, these liminal spaces of the hospital—the entrance, the operating room, the basement (where one finds the morgue)—all emerge in von Trier's film as loci for the emergence of the supernatural. The extrasensory vision exhibited by his camera is one otherwise only accessible to those with certain powers—cunning folk for example—and at certain liminal times. Thus, von Trier's cunning camera gives viewers access to ghosts, voices from the distant past, and an ambulance that comes from the "other side." Once subjected to von Trier's spiritually omniscient filmic gaze, the hospital, like the patients who are subjected to its medical gaze, reveals the degree of its own disease, namely an ultra-rationalist arrogance that is eating away at its core like a rapidly metastasizing cancer.

Von Trier's hospital in many ways countermands the purported rationality of medical discourse with its logical orderings and aversion of the unknown as it is riddled with blind spots and inexplicable occurrences. Once inside the hospital doors, the viewer discovers that it is an extraordinary labyrinth, both physically and organizationally. Rather than a building that reflects the purported order and logic of medical discourse, one finds instead a surprising corollary to Umberto Eco's library in *Il Nome della rosa* [*The Name of the Rose*], another work that plays with the concept of the detective (Eco). Whereas Eco situates the labyrinth in a library and thus challenges the idea of the library as an institution dedicated to illumination in all scholarly endeavors, von Trier's hospital labyrinth refutes the notion that medical practice through its revelatory gestures is dedicated to elucidation. Rather, in von Trier's view; the hospital is dedicated to self-aggrandizement and arrogance, a criticism all the more alarming
given the role of socialized medicine in the Danish social welfare state. Von Trier frequently cuts to ominous aerial views of the dark, monolithic hospital which rises austerely from the misty wooded fallen [commons]. Here, on the roof, one finds Helmer, the Swedish neurosurgeon so obsessed with both status and technology that he seeks refuge from the “Danske jævler” [Danish bastards] to gaze lovingly at the Swedish nuclear power plant Barsebäck and to invoke the names of Swedish industry. Below the roof, one finds the wards of the hospital where the day-to-day organization of the hospital is manifest and where the objects of the medical gaze are housed in room after anonymous room. Although somewhat confusing, and certainly reflective of the labyrinthine social bureaucracy of contemporary Denmark, it is not until one gets to the basement that von Trier’s remarkable maze comes to light.

Here, hidden at the base of the hospital, is an intriguing array of rooms. Perhaps the first indication that not all is right with this hospital can be found with the two mentally retarded dishwashers who are engaged in the Sisyphian task of washing an endless flow of hospital dishes. Despite their Down’s syndrome—a condition that modern medicine identifies, defines, describes, and, because of its resistance to cure, ultimately hides—the two, like nineteenth-century cunning folk from legend tradition, are preternaturally gifted, and their prescient pronouncements act as a challenge to the authority of the institution. Also in the basement is the hospital archive that houses all of its secrets, secrets that are, in the words of the dishwashers, written in blood. It is the archive—the assembled record of the hospital’s surveillance and description of its patients—that stands at the center of the Kingdom’s mysteries and is the key to both Mary Jensen’s death at the beginning of the century and Mona Jensen’s brain death at the hands of Helmer. Although protected by an elaborate, yet aging alarm system, the archive is not impervious to attack—another parallel to Eco’s library.

But the surprising elements of the basement do not end there. Rather, down the hall from the archive, one finds the Haitian rat keeper who has close ties to voudou, perhaps one of the best known but least understood traditions of spiritualism and folk healing in modern Western societies. Rigmor, Helmer’s jilted lover, spends considerable time here listening to his tales of an alternative medical discourse. As part of the continued critique of the arrogance and hypocrisy of physicians, Helmer, despite his avowed positivism, ultimately seeks
out the Haitian’s assistance when Krogshøj threatens to make public Helmer’s transgressions of the rules of his own vaunted discourse. The lodge, the brotherhood of senior physicians, also holds its ritualistic Freemason-like meetings down in this hidden world. While ostensibly devoted to the purest forms of medical discourse and dedicated in the words of their charter to the eradication of superstition and quackery, the lodge quickly shows itself to be a corrupt organization committed to covering up mistakes and furthering the careers of its own members regardless of the possible ethical implications of their actions. In addition to their willingness to help Helmer avoid punishment for his mistakes during Mona’s surgery, they help the senior pathologist Bondo sidestep the rules governing the acquisition of research specimens. So, when he decides to transplant a heavily diseased liver into his own body, a surprising metaphor for the state of medicine in the Kingdom and a bizarre corollary to organ theft narratives, the operation takes place in a civil defense operating theater—a room built for the defense of the state—with his heavily anesthetized lodge brothers performing the surgery. In the basement, one also finds Mogge’s locker where he hides the amputated head, Riget and her pistol, a psychotherapist whose treatment of patients borders on the shamanistic and, most importantly, Krogshøj’s private apartment.

16 In a study of resuscitation and rites of passage in contemporary hospitals, Pouchelle notes:

En ce qui concerne les professionnels, l’hôpital comporte d’autre part des rites qui assurent leur identité et leur appartenance. C’est le cas bien connu du folklore carabin, un ensemble de représentations et de comportements fondé sur la transgression et la dérision, qui se trouvent généralement chez les chirurgiens, et ce n’est pas par hasard, ses meilleurs défenseurs. (318)

(As for the professionals, the hospital includes on the other hand rites that assure their identity and membership. This situation—a range of perceptions and attitudes based on defiance and scorn, which are generally found among surgeons—is well known in the folklore of medical students. And it is not by chance that the surgeons are the strongest defenders of these practices.)

This description of surgeons’ use of transgressive folkloric practices resonates with von Trier’s lodge of senior physicians (and their humor). Pouchelle’s further observation that, “le terrain médical le plus scientifique … reste marqué … par des représentations traditionnelles devenues inconscientes” [the most scientific medical terrain is marked by traditional perceptions that have become subconscious], helps in the understanding of the tension between tradition and rationality that animates von Trier’s film (318).

17 See also Campion-Vincent 1997 in regard to organ theft.
Krogshøj is a remarkable figure in von Trier’s chaotic realm. Part doctor, part cunning man, he defies easy categorization. Like a Danish version of Heller’s Milo from Catch-22, Krogshøj liberates items from various hospital floors for use on others and is closely tied to the army of orderlies who populate the back corridors of the institution (Heller). At the same time, he is the keeper of the graveyard of medical mistakes. Because of his interesting position, Krogshøj seems to straddle the discourse of modern medicine and that of folk belief. On the one hand, he is a physician and therefore implicated in the positivist discourse of modern medicine. On the other hand, he frequently questions his superiors, is attuned to the spiritual side of disease, actively works to subvert the hospital’s calcified hierarchies, and has little difficulty in believing in ghosts. Indeed, it is his success as both physician and cunning man that von Trier praises.

Running between all of these floors is, of course, the elevator shaft, the place where Mary first makes herself known to Drusse. Crouched up among the gears of the high speed elevator, Mary rings her ghostly bell and announces that all is not well in this mechanized institution that treats people with machines as if they were machines themselves. Drusse’s discovery of Mary and her subsequent attempts to conjure her spirit offer an intriguing view of the interaction between the State, the medical establishment, one of its victims, and the modern spiritualist/cunning man. After repeated attempts to contact Mary and thereby unravel the mystery of her haunting, Drusse finally makes contact, discovers the crime of the rigshospital’s forefathers, and plots a course of action. An initial attempt to win peace for the troubled soul by burying her preserved remains in the parking lot of the hospital fails and, with this failure, Drusse realizes she must conjure the spirit. In one of the more amusing scenes, Drusse consults the hospital’s Lutheran chaplain as a “sort of colleague” for instruction on how to conjure the spirit. Although he initially disparages her and proposes a medical marginalization, namely her clear madness—thus suggesting a close alliance between the expert discourse of medicine and theology reminiscent of the one proposed by Foucault—he reaches for his own copy of the Cyprianus and lends it to her. As such, he emerges as a “klog præst” [cunning minister], a figure well known from folk legend. Drusse subsequently enlists the aid of her reluctant son, Bulder, and Krogshøj, the one physician who is not entirely convinced by the totalizing project of contemporary medical discourse, to help her with the conjuring.
After opening a hole in the foundations of the building, the conjuring begins, replete with visual puns—the three hold sports equipment for their conjuring sticks—and in a surprising reference to *Ghost Busters*—the film that asks the question, “Who ya' gonna call?”—Drusse is slimed by the ectoplasm of the departing ghosts (Reitman). The conjuring proceeds fitfully and is interrupted by power outages and a lengthy interview by members of Danish parliament and representatives of the neurosurgical ward. It is likely that these intrusions of governmental control doom the conjuring to only partial success. Of course, folk tradition is filled with instances of conjuring gone awry usually because of the intrusion of a lowly farmhand. While Drusse is successful in conjuring Mary and her father’s dog reincarnated as Bongo, the untimely interruption by the visiting minister of health, like the untimely intervention of the farm hand in nineteenth-century legends, allows the escape of a host of spirits from the other side. The motifemic equivalence that von Trier draws between a farmhand from nineteenth-century legend tradition and the minister is yet another amusing component in his elaborate critique of the State. To underscore the ambiguity of Mary’s conjuring’s success, Krogshøj’s girlfriend simultaneously gives birth to a fully-developed adult, the result of her affair with Mary Jensen’s original antagonist.

The final image of the hospital in von Trier’s modern ghost story is then one poised on the verge of collapse. The physical building is rife with mechanical failures, an aging infrastructure, and a crumbling foundation. While the spirit of a victim of one of the hospital’s founding fathers has been laid to rest, the man’s adult child has been unleashed on the floors above and, back down in the cellar, a host of ghosts has commandeered a delivery cart. Not surprisingly, the positivist experts of the hospital medical staff find themselves powerless against these intrusions from the other world. Meanwhile, Bondo delays his own liver transplant to grow his hepatoma to an even more startling size, and Helmer has gone over to the practice of voudoun. The discursive practices of modern medicine have been exposed as profoundly corrupt and the Danish state’s administration of its citizens has revealed itself to be deeply unsympathetic. Meanwhile, the efforts of Drusse, the cunning woman, have only been marginally successful, not because of their inefficacy, but because of the pervasive influence of (and frequent interruptions by) the State. As in nineteenth-
century legend where one finds the constant threat that conjured ghosts will reappear, there is a profound resistance to resolution in von Trier's work. But while the critique proffered by the rural nineteenth-century narrator was local and easily countered by other stories, von Trier's television critique has far greater reach and, because of the medium, seeming authority. In this way, his story is far scarier and far more pessimistic than any of the stories from folk tradition on which it is based. With von Trier's "Kingdom," as the screen fades to black, the ghost in the machine is still there, and there is no one to call on for help.

Works Cited


——. “‘How do you know she’s a witch?’: Witches, Cunning Folk and Competition in Denmark.” *Western Folklore*. Forthcoming.