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Don’t Point that Gun at My Mum: Geriatric Zombies

Gerry Canavan


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1. DON’T POINT THAT GUN AT MY MUM

Geriatric Zombies

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Academic analyses of zombie narratives have tended to read these stories as genocidal fantasies of unrestricted violence against monstrous Others with whom no sympathy is possible and who, as a result, can be murdered without guilt. The typical critical move, that is, has been to read such stories metaphorically, as murderous ideation against the raced, classed, and colonized subjects whose extermination is no longer wished for openly but whose difference is still perceived as a dire threat to white middle-class subjectivity in the industrialized West. This is true even of more politically utopian readings of zombie narrative, such as Sarah Juliet Lauro and Karen Embry’s widely cited “A Zombie Manifesto” (2008), which accedes to the basic terms of the violence but chooses instead to take the zombies’ side, identifying their brutal destruction of the existing order as a sideways vision of a longed-for revolution. Novels, films, and video games may nominally be about fantastic encounters with zombies (or robots, or orcs, or alien invaders, or sentient apes), the argument goes, but on the more abstract level of ideology they are actually about reproducing and/or critically reexamining cultural narratives about who in real-world society is “killable” and who is not.

Without diminishing the importance of such readings, in this chapter I want to enrich this approach to zombie fantasy by introducing a new Other to the long list of politically sensitive topics that zombies can be seen to allegorize: the disabled or infirm body, particularly the elderly body. I argue that the zombie “resurgence” of the twenty-first century can and should be linked to the changing demographics of the industrialized world in that same period. After a decade languishing in low-budget, direct-to-video releases
doomed to obscurity in the back rows of the video store, the zombie sud-

ddenly returns as an important mainstream cultural force in the 2000s pre-
cisely alongside the aging and decline of the World War II and boomer
generations. To risk putting too fine a point on things, we have suddenly
become acutely interested in slow-moving, degenerating bodies and forget-
ful minds with violently altered personalities at the very moment that cul-
tural concern over the progressive and degenerative conditions that strike
the elderly (such as Alzheimer's, post-stroke symptomology, advanced
cancers, aphasias, multiple sclerosis, Huntington's and Parkinson's diseases,
and the like) is at an all-time high. Likewise, these ravenous undead figures
have become important cultural markers at the very moment that anxiety
about the ability of younger and poorer generational cohorts to support the
swelling ranks of the elderly over the coming decades has become a potent
force in Western politics. Thus we frequently see in recent zombie fantasies
(and in related fantasies of decrepit immortals who refuse to die, such as José
Saramago's [2008] novel Death with Interruptions or the UK television series
Torchwood's fourth-season arc, Miracle Day [2011]) the repressed expression
of a real and increasingly urgent intergenerational struggle—one that is
complicated by the unhappy realization that this sort of “zombiism” is in fact
the universal fate of anyone sufficiently “lucky” to live long enough to expe-
rience the inevitable breakdown of their mind and body.

In this chapter I trace the zombie's allegorization of aging and senes-
cence through a number of the zombie texts that have emerged since the
explosive popularity of Danny Boyle's film 28 Days Later (2003) and Robert
Kirkman's The Walking Dead (comic 2003--; television 2010--; video game
2012--). But my focus will be on my identification of a newer, smaller sub-
genre of zombie texts that has risen to prominence only recently, in which
the zombie's original subjectivity is mostly or entirely retained, and they are
even able to talk in complete and complex sentences. The novel assertion
that zombies might remember, speak, and feel—albeit in ways that parallel
the cognitive and emotional disabilities associated with old age—interrupts
the logic of radical inhumanity that had previously licensed unrestricted
violence against them, recasting the zombie not as the monster that can only
be killed but as the transformed loved one who must somehow still be cared
for, despite their unhappy metamorphosis. It is in these newer texts (which
have frequently originated in the medium of comics) that the implicit con-
nection between zombie fantasy, disability, and gerontology I am uncovering
becomes most visible to us; the physical and mental anguish that the zombies
experience in “talking zombie” narratives maps directly on to the suffering
that is inherent in growing old—which the zombies’ new ability to speak allows them to communicate to the people that had once been (and, sometimes, may still be) both their victims and their killers.

**Planet of Zombies**

The industrialized world is growing older. Japan faces steeply declining birth rates at the same moment as a rapidly aging population remains; these trends have only accelerated since the 1990s, with record population decline in 2014. The birth rate in Japan is only 1.39 per woman, well under replacement rate, while 20 percent of the population is over the age of sixty-five; by one estimate, in 2060 the country’s population will have shrunk by nearly a third (to 87 million, from 127 million today), with 40 percent of that population over sixty-five (Panda 2014). And Japan, while an extreme case, is by no means unique; the combination of declining birth rates with a graying population exists across the globe. The birth rate in many countries in Europe has dipped below replacement rate as well; as of 2004 the birth rate was approximately 1.5 per woman across the EU, and as low as 1.3 in Germany, Spain, and Italy (see “Old Europe” 2004). The United States has remained above replacement rate largely due to the effects of immigration, though this has produced its own demographic panic in an aging white majority anticipating its own imminent transition to “majority minority” status (which in turn produced fearful popular rhetoric about uncontrollable zombie “hordes” crossing the border). Still, the projections of a graying America suggest that a huge transformation of the country’s demographics will be underway over the coming decades; in 2014 the Census Bureau projected that 84 million Americans will be sixty-five or older by 2050, more than 20 percent of the population, compared to fewer than 10 percent in 1970 (Williams 2014).

Although many of the effects of these demographic changes have not yet been felt with great intensity, sharp increases in healthcare spending and the growing need for pension expenditures (both public and private) have already been an important economic force across the 2000s—as have high-profile attempts (in Detroit and elsewhere) to renege on those pension obligations in the name of other budgetary priorities, notably debt repayment and cost-shifting. Just as important is the anticipation of the more radical changes that, we are told, will soon be necessary as a result of anticipated trends. Al Gore’s famous “Social Security lockbox” from the 2000 US
presidential campaign was only the opening salvo of fifteen years of debt- and deficit-related anxiety in American politics, much of it addressed to graying, increasingly conservative baby boomers worried about both the future “we” will be leaving for “our children,” as well as their own ability to survive in the new world of austerity projected to be right around the corner. This vision of austerity is so robust as to pervasively transform even longer life expectancy—that most hallowed marker of human achievement—into a pessimistic economic indicator, at least within the pages of the *Wall Street Journal*: “Good news for Americans: You are living longer. The bad news: The longer life span doesn’t bode well for the corporate pension plans that are supposed to support workers into old age” (Fitzpatrick 2014). The long, scorched-earth policy fight over 2009’s Affordable Care Act, popularly known as Obamacare, is only the most obvious example of this wide-ranging and widely felt civic crisis. To the Democratic left Obamacare signifies an attempt to “bend” the curve of healthcare costs as they are projected to continue to spike as a result of new treatments and an aging population, while to the Republican right Obamacare signals the emergence of “death panels” that will determine which lives have now become too costly to sustain—a list that members of the aging white male demographic of Fox News and the *Wall Street Journal* feel certain will target them, first and foremost.

These public policy shifts are mirrored by changes on the personal level of the home or the family. The first baby boomers turned fifty in 1996 and reached the traditional US retirement age (sixty-five) in 2011; the youngest baby boomers turned fifty in 2015. The largest demographic cohort in American history is thus now encountering the diseases and conditions associated with aging that their own parents suffered and died from a generation previously (or in many cases are still suffering from): slowdowns in speed and agility; senility and dementia; cancers; diabetes; strokes; progressive and degenerative conditions like Parkinson’s, Huntington’s, multiple sclerosis, Alzheimer’s, and so on. Many of these conditions are associated with personality changes, sometimes causing disturbing, bizarre, or violent behavior—while others are associated with a new condition of physical weakness or with severe depression, senility, or delusions. The family memory of the decline and death of parents—needless to say, often quite traumatic regardless of the cause—and the anticipation of one’s own imminent decline to come has led to these kinds of conditions having new visibility in American culture, both parents struggling with their own aging and for adult children wondering how to care for their declining parents.
The general stress of aging, and the stress of caring for aging parents, has been an important subject of popular attention across the 2000s, in every register: political, medicinal, ethical, economic, religious. *The Notebook* (Nick Cassavetes 2004) may be the most prominent recent film to feature characters with Alzheimer's disease and their caretakers, but the condition has been featured in a host of other well-received films in and outside the United States (perhaps most notably *Away from Her* [Sarah Polley 2006] and *Still Alice* [Richard Glatzer and Wash Westmoreland 2014]) as well as on television in *Grey's Anatomy*, *Raising Hope*, and even the surrealist cartoon *Adventure Time*. I choose Alzheimer's as my example here precisely because, as Susan M. Behuniak (2011, 77-78) among others has demonstrated, the particular symptomology of Alzheimer's has very frequently led commentators to compare it to “living death,” and Alzheimer's patients to zombies themselves:

Seven characteristics are associated with zombies by Romero's trope: exceptional physical characteristics, lack of self-recognition, failure to recognise others, cannibalisation of living human beings, the exponential spreading of this plague, the resulting horror of those still unafflicted, and the zombie's overwhelming hopelessness that makes death a preferred alternative than continued existence.

Three aspects of the zombie trope—appearance, loss of self, and loss of the ability to recognise others—have been directly applied to people with AD. Three other aspects—the epidemic threat, widespread cultural terror, and death as preferable to becoming an animated corpse—are referenced by way of implication in describing the disease itself. The remaining aspect of the zombie trope—cannibalism—is applied both to patients and to the affect their disease has on others.

The “stigma” resulting from this metaphorical slippage between the fantastic condition and real-world medicine, Behuniak argues, “is powerful enough to replace compassion with fear, hope with despair, and empathy with disgust” (77). Carmelo Aquilina and Julian C. Hughes (2006, 143) have similarly suggested that the allegorical link between zombiism and old age has contributed to a culture in which “people with dementia can be treated as already dead and as walking corpses to be both pitied and feared, despite their obvious signs of life.” Elizabeth Herskovits (1995, 153) has even gone so far as to claim that the popular conception of Alzheimer's—and perhaps the
diagnosis as such—is, in itself, a “monsterizing of senility.” And this is only one very prominent condition; we might easily make similar lists associated with Huntington's disease, multiple sclerosis, Parkinson's disease, cancers, strokes, diabetes, or any other number of conditions that strike in or after late middle age, each with their own set of “zombie” symptoms that can be used to differentiate them from the normative ideal of the nondisabled body.

In accordance with this line of thinking, it is my suggestion in this chapter that this cultural milieu—changing bodies, and their changing minds, and the difficult forging of new relationships between loved ones that are made necessary by these changes—is as important an etiology for the renewed interest in the zombie following the release of 28 Days Later in 2003 as were the events of 9/11 and the war on terror to which such texts have usually been related. Most of the beginning of 28 Days Later—before the zombies emerge—registers an anxiety that is easily linked to family, especially to parents and the threats they can pose to children. Very early in the film, a long shot on a wall memorializing the dead lingers on a child's drawing of his or her parents, with the “Daddy” clearly wielding a knife and threatening the others. Shortly thereafter the protagonist, Jim (Cillian Murphy), first encounters the infected in a church; the first words Jim speaks in the film after the lengthy silent opening are “Hello? Hello? Father?” to a priest whom he must then hit over the head. Jim then goes to his parents' house, only to see they have killed themselves during the outbreak. Later, one of the most vivid and disturbing scenes in the film occurs when Frank (Brendan Gleeson) becomes infected with the “rage virus” and, out of nowhere, suddenly attacks the group, including his terrified daughter, Hannah (Megan Burns)—in one terrible instant transforming him from the loving father he had always been to a brutal attacker.

This theme of zombie family—or, more precisely, a zombiism that interrupts the circuit of family—is echoed and extended by an important scene in the zombie comedy Shaun of the Dead (Edgar Wright 2004), from which this chapter draws its title. When Shaun (Simon Pegg)'s mother is infected by the zombie virus, the entire tone of the film suddenly changes; what had previously been a comedic “romp” through an apocalyptic London becomes instead an unexpectedly sad rumination on the loss of one's parent. Shaun, who has previously killed zombies without remorse, cannot allow his mother to experience the same fate; against the members of his group who insist that she, too, must be put down, he screams, “Don't point that gun at my mum!” In this moment of rupture, the very telos of zombie narrative is temporarily
suspended by the power of Shaun's love for his mother—though, in the end, Shaun must give in to inevitability and is forced to shoot her after all.

The first issue of Robert Kirkman's long-running comic book series *The Walking Dead*, like *28 Days Later*, also begins with its protagonist, Rick Grimes, waking up from a coma in an abandoned hospital. The series, like *28 Days Later* and *Shaun of the Dead*, is similarly constructed around a logic of shattered domesticity, with characters frequently losing (or forced to murder) either biological or ersatz family members. But the mood of *The Walking Dead* is made much darker than either *28 Days Later* or *Shaun of the Dead* by two significant structural changes. First, there is simply its open-ended nature; Kirkman has often said his ambition is to write a zombie movie that never ends, that piles on the horrors issue after issue after issue forever. But second and more crucially there is his shift away from the logic of outbreak and infection back toward something closer to the metaphysical or existential nightmare that drove George Romero's original *Night of the Living Dead* (1968). Rather than a contagion, Kirkman's zombies are an ontology; in the universe of *The Walking Dead*, everyone is “infected.” Everyone reanimates as a zombie shortly after they die, with catastrophic damage to the head either pre- or postmortem being the only possible way to prevent this dreaded fate. This leads to Rick's well-known rant, early in the comic series, that explains the buried pun in the series title: “You people don’t know what we are! We’re surrounded by the dead. We’re among them—and when we finally give up we become them! We’re living on borrowed time here. Every minute of our life is a minute we steal from them! You see them out there. You KNOW that when we die—we become them. You think we hide behind walls to protect us from the walking dead? Don’t you get it? We ARE the walking dead! We are the walking dead” (issue 24, pp. 19-22). The splash page’s close-up on Rick’s battered, bloodied face—wrapped in bandages from a severe head injury—is testament to how thin a line separates “them” from “us.” We could any of us cross over at any moment.

In “We’re All Infected”: Essays on AMC’s “The Walking Dead” and the Fate of the Human, a recent essay collection concerning the television adaptation of the comic series, the imminence of this change is linked to the thin line separating nondisabled persons from their potential future as disabled subjects. Several of the book’s contributors tease out important links between the Romero/Kirkman-style zombie and the larger ideology of medicine, particularly with respect to the elderly. Xavier Aldana Reyes (2014, 148), for instance, focuses on what he calls the “dying undead” to call new attention
to the fact that the comic’s Walkers (i.e., zombies) are slowly “ceasing to exist through gradual erosion and physical decay”; while the Walkers themselves are “oblivious” to this fact, “the series takes great pains . . . to make a point of their suffering.” Gary Farnell (2014, 178) takes up the Walking Dead zombie as a medicalized and disabled subject through explanation of one particular condition we have already noted as being linked to aging and senility, aphasia, the loss of either written or spoken language; one subhead asks, “What If Zombies Could Talk as Well as Walk?” But it is only Dave Beisecker (2014, 178), in the final pages of the book’s afterword, who makes what is the final and necessary allegorical leap:

Let us suppose that the zombies are an allegory for an aging “baby boomer” demographic. After all, in their ceaseless wandering and bewildered expressions, zombies can bear a striking resemblance to those afflicted by Alzheimer’s, which has been called the defining affliction (and perhaps greatest fear) of the baby-boom generation. Indeed, the comparison seems apt. Every day, over 10,000 baby-boomers inexorably “crossover” into retirement age, and the overwhelming weight of their numbers, especially by comparison to subsequent “Generations X and Y,” threatens to bring down our health care system and social security net (or so we are told).

Rereading the zombie as a figure for the elderly transforms our attitude toward the zombie, giving new energy to possibilities condemned in the larger series like (to note Beisecker’s examples) Morgan’s inability to kill his zombified wife, or Hershel’s locking his deceased family and neighbors in his barn pending treatment. If zombies are simply another stage of human life, the firm line that separates “us” from “them” (and makes “us” worthy of protection while “them” worthy only of extermination) becomes erased, impossible to see. “If aging is the affliction,” Beisecker goes on, “we are all infected. . . . In the natural course of things, there might come an awkward time of twilight in which we are neither ourselves, nor are we dead” (212–13).

This critical intervention necessarily pushes us away from the eliminationist logic that governs most zombie narratives toward an ethical paradigm more conducive to the field of medicine than war. Instead of wild animals being put down, such zombies look more like patients (perhaps our own parents) being euthanized—or even, unthinkably, not being killed at all, but rather treated and cared for. At the same time, this alternative way of thinking about zombies directs us toward the zombie body as a genuine problem
for the medical field, outside the fantasy: what do we do with bodies whose intensity of suffering, or extreme cognitive decline, or total non-responsiveness, seem to have pushed them outside the realm of human life into some other category altogether? Even texts that flirt with a medicinal context, like *Torchwood: Miracle Day*, often collapse back into eliminationist thinking as hospitals begin to run short on beds, doctors become overwhelmed by their patients, and unpaid bills begin to pile up. Such thinking dialectically loops us back to the intergenerational anxiety with which I began this section: the fear of a coming planet of zombies, filled with decaying bodies that can no longer do productive work but which cannot be disposed of either. How do we break out of this trap? Is another zombie possible?

**Can the Zombie Speak?**

At the start of the 2000s, zombies were seen as a niche interest at best; when Robert Kirkman sold *The Walking Dead* to Image Comics, for instance, he was allowed to use zombies only on the promise that “the zombies were actually animated by an alien race that was preparing to invade Earth by disrupting its infrastructure”; the idea of a “zombie comic” seemed that bizarre and that unworkable from a financial perspective (Johnston 2012). More than a decade into *The Walking Dead*, now zombie comics are everywhere, a staple of the industry—and they have become quite diverse, even sometimes taking up possibilities for zombie narrative that move beyond the usual forced logic of crisis and extermination. One such narrative possibility that has become popular in the intervening years is the psychic repudiation of the logic that drove the death of Shaun’s mother: what if Shaun’s mother did not have to die? Even *Shaun of the Dead* itself took up this possibility as its closing joke; at the end of the film Shaun’s infected friend, Ed (Nick Frost), is kept locked in a shed in the backyard rather than killed, where the two can play video games together. But in a new subgenre of zombie fantasy this possibility of rapprochement with the zombie takes center stage, facilitated by an important shift in the zombie mythos: the new ability of zombies to think, feel, and speak.

In *Warm Bodies* (novel 2010; film 2013), originally based on a short story called “I Am a Zombie Filled with Love,” the unthinking and lumbering zombie is revealed to retain some type of human interiority, in a kind of fantastic Locked-in Syndrome—which in the fairy-tale logic of the narrative
is able to be unlocked, and reversed, with a kiss. Other recent filmic and televisual treatments extend this shift to its natural endpoint, imagining zombies as fully articulate subjects simply suffering from a highly unusual medical ailment. These texts implicitly and often explicitly take up the idea of zombiism as a kind of disability, an ongoing condition that can (at least potentially) be managed through love and care. The title of Margaret Atwood and Naomi Alderman's recent novella *The Happy Zombie Sunrise Home*, first published on Wattpad.com, is perhaps illustrative here. Rather than the locked-down hospital of *28 Days Later* and *The Walking Dead*, the militarized inner city of *World War Z* (novel 2006; film 2013) or Colson Whitehead's *Zone One* (2011), the juvenile detention center of M. R. Carey's *The Girl with All the Gifts* (2014), or the death camps of *Torchwood: Miracle Day*, Atwood and Alderman's surprisingly sweet mother-daughter story imagines the zombie as more properly inhabiting something like a nursing home.

Of course, the mere innovation of talking zombies, by itself, does not necessarily promote sympathy or an ethics of care. Warren Ellis's comic *Blackgas* (2007, with Max Fiumara and Ryan Waterhouse), for instance, would seem to contain all the elements that might provoke a zombie ethics alternative to the need for killing, but there is ultimately no change in its narrative trajectory. The zombie outbreak happens during a visit to one protagonist's childhood home; after a chase during the initial outbreak, the characters encounter Tyler's mother in this psychologically crucial space. The panels are drawn to evoke the way horror films delay the reveal of their creature, with Tyler's mother's face first shrouded in shadow, then obscured by shots of the sides and back of her head. Tyler's mother at first says she is OK but is quickly revealed to be carrying the head of Tyler's father, his dismembered penis stuffed into his mouth. She has been changed by exposure to the black gas, though there is an implication that these changes reflect an extreme loosening of inhibitions rather than a genuinely radical transformation of the self: "Had enough of his shit. All his shit. . . . All the things I always thought about doing. I just did them. So hungry now." Finally, we see the monster dead-on (part 2). Her unkempt, filthy appearance and flat affect reinforce the sense of psychological break suggested by her newfound hostility, even hatefulness—all personality changes associated with dementia, senility, and adult-onset neurodegenerative disease. This horrifying encounter with the mother does not produce any significant sympathy in the characters, however; she is quickly dispatched, with Tyler left to wonder only whether he had told his parents he loved them when he last saw them, as the zombie narrative continues down its well-trod, gory path.
The zombies in the DC Comics (2009–10) crossover event *Blackest Night* evokes a similar relationship to family: they are the corpses of fallen heroes reanimated by the “Black Lantern” power of the villainous Nekron and able to speak. In the context of DC's system of “legacy” heroes, this entails an intense focus on literal parents as well as mentors and father figures, alongside spouses and comrades. Here, as in *Blackgas*, the presentation is something more akin to demon possession than mere aging; what these lost fathers, mothers, and mentors say is always wicked and always hurtful, with none of the original heroism and self-sacrifice that had marked their earlier appearances as living heroes—and usually augmented by a disturbing and out-of-character sexual aggressivity that constitutes a key locus of horror in the comic. Needless to say, there are any number of late-adulthood conditions that mirror this sort of disturbing and dramatic personality shift, though as with Behuniak's discussion of Alzheimer's or the earlier discussion of *The Walking Dead* what is at work here is not so much a one-to-one presentation of specific symptoms as the “cumulative stock image . . . [forming] a powerful metaphor that is utterly recognizable and so familiar that only a few need to be invoked to imply the others” (Behuniak 2011, 78). Here the Black Lanterns' zombie presentation as decrepit, nasty walking corpses evokes a hostility to infirm bodies and non-neurotypical minds that draws on ageist and ableist assumptions about what is “normal” to generate the sense of revolting abjection on which the story hinges—without ever directly naming any one particular condition as the object of the allegory. What is built out of these kinds of zombie stories is really something more like a mood than a metaphor: the general sense that the older generation is, or at any moment could turn into, a sinister and threatening horror, a crisis, a problem to be “solved.”
The story's science fantasy—that this is all the unnatural work of a strange alien technology—provides the cognitive buffer that flattens and legitimates this antagonism: the Black Lanterns may have the bodies of loved ones, and may know the things they know, but they are nonetheless ontologically distinct, and so the series as a whole is able to replicate the familiar exterminative logic of typical zombie narratives without complication. It is only in the spinoff series Blackest Night: The Flash that the psychic closeness of these zombies to the deceased loved ones does begin to intrude on the need to eliminate the monsters without compunction; the second Captain Boomerang chooses to side with the monstrous Black Lantern corpse of his father (the first Boomerang) over the combined team of heroes, antiheroes, and villains that is fighting zombies in Central City. “I can't let you hurt my father,” he says to his compatriots. “Don’t be stupid, kid. That’s not your father. It’s a walking bag of bones,” replies Captain Cold. But Boomerang is defiant: “I’m going to help you, Dad,” he says to the zombie. “I know how to bring you back” (Johns and Ries 2008, issue 2, last page). For his part, the zombie recognizes his son immediately: “Owen? Son?” In the panel, Boomerang I does not even look that monstrous—nor, indeed, all that different from the nearby Captain Cold, who is calling for Boomerang I’s immediate execution.

As the narrative progresses, Boomerang II even brings living people to feed to the zombie, in a mistaken belief that this will help revivify his lost father; his karmic punishment for this bizarre mix of love and sociopathy is to be fed to his father himself in due course (Johns and Ries 2008, issue 3). Weirdly, though, Boomerang II’s gambit to save his father does ultimately pay off, albeit in a way he never expected. A small number of the Black Lanterns (including Boomerang I) are magically revivified as part of the outcome of the story and returned to their old lives, with their original personalities and restored health—hopelessly blurring the supposedly clear ontological distinction between these creatures’ “normal” living state and their corpses’ status as demonic Black Lanterns.

Other comic treatments land still elsewhere on the continuum between monstrosity and sympathy. In Marvel’s Marvel Zombies (2005–6), written by The Walking Dead’s Robert Kirkman, it is again the heroes who have become zombified, despondently consuming every other living thing on the planet (and the galaxy, and the universe, and the next universe over . . . ) in their endless search for food. Although the Marvel universe’s various genius-level intellects have been affected, no cure is available to them; as they begin to lose their cognitive abilities and forget their lives the zombies can only
reflect dyspeptically on their situation as they degrade both mentally and physically. But unlike DC's storyline, the Marvel zombies have not been turned into killers and perverts; they behave this way only when they are hungry. Instead of psychological discomfort, the artistic focus is instead on body horror: multiple characters lose limbs, Captain America is missing most of his skull, and the Wasp is reduced to just a ghastly head. Their moods swing wildly from rage to mad hunger to suicidal regret, though nothing gives the heroes hope. "I don't want to figure anything out!" screams Spider-Man, thinking of how he ate both his wife, Mary Jane Watson, and his beloved Aunt May. "I think I just want to die!" (Kirkman and Phillips 2005, part 1).

As with the DC Comics event, the sheer oldness of the heroes itself helps to fuel the symbolic link to actual old age: these are characters that were invented as teenagers in the 1960s or even the 1940s but who have never really aged, characters for whom the normal passage of time has somehow been suspended altogether. These characters should be ancient; by now they should all be retired, or in nursing homes, or dead. Transforming Iron Man and Captain America into zombies is in some sense no transformation at all, so much as a revealing of what these out-of-time characters have been for decades as they have become totally divorced from the mid-century cultural context from which they (and the baby boomers more generally) sprang. Whereas DC's Blackest Night ends with a fantasy of resurrection and revivification for its moribund characters, returning them to their lost and longed-for state of vibrant youth, Marvel's more cynical zombie narrative embraces this state of furious obsolescence. In this story the zombies are triumphant, taking over the planet-devouring alien Galactus to threaten the rest of their universe, and ultimately the entire multiverse, with their bottomless resentment for those who are still alive.

Marvel's Night of the Living Deadpool (2014) achieves a similar effect of temporal disjunction in a different way: the book is drawn in black and white, evoking the film stock of its cinema namesake; only Deadpool himself appears in color, as if he is wandering around within the frame of the old movie. Night of the Living Deadpool amplifies the regret and angst found in the zombies of Marvel Zombies: the infected are likewise driven to horrific violence they would have never contemplated in their previous lives. Here, though, rather than simply succumbing to their uncanny hunger, they are constantly aware of this difference, utterly horrified by it and unable to explain to themselves what they are doing or to find the capacity to stop. "Don't want to do this . . . can't . . . stop myself," mutters the miserable
zombie that Deadpool encounters near the beginning of the book; "Oh, this is awful." The violence against the zombies that appears in the story according to shifts from gleeful extermination to something more like euthanasia or mercy killing. It is mournful, and miserable, rather than exhilarating. "Please . . . please . . . kill me," the zombie begs. Deadpool does so, only to be quickly confronted (in a long panel that runs horizontally across two pages) by a throng of zombies, all speaking over one another, begging for death: "So sorry"; "Don't let me . . ."; "Someone find my daughter"; "Please help"; "I had a good life"; "Kill me next." Here it is the confusion of neurodegeneration that reigns supreme in zombification, the loss of self-identity that comes with loss of control. These zombies are not inhuman, or non-persons; they are suffering. Deadpool—a character whose narration frequently bounces off the fourth wall—is frustrated by this violation of the implied contract of zombie narrative. He has been cheated: "I've played video games! Whacking dead folks is supposed to be fun!" (Bunn and Rosanas 2014, issue 1).

**Zombie Families/Zombie Love**

Other "talking zombie" texts, outside the superhero genre, push us still further from the routinized logic of violent and relentless extermination toward an alternative mode of thinking about zombic bodies. Tim Seeley and Mike Norton's *Revival* (2012–), a "rural noir," is set in an isolated town in Wisconsin where the dead have risen. The "Revivers" in the small town of Wausau need to reintegrate into their lives in a town that now faces quarantine from a panicked nation around it; the protagonist, Dana, is the police detective put in charge of "the Revitalized Citizen Arbitration Team," a special task force devoted to crimes involving the Revivers. "I've spent the last few weeks interviewing all the Revivers," her father, the local police chief, tells her. "Most of them, they're just like they used to be. But some of them . . . Anyway, your first case came in the morning." That is to say, some of them are different, in ways that are genuinely frightening—but not all of them (vol. 1).

That first case involves an older woman (naturally, a Reviver) who keeps regrowing her teeth and then pulling them out with pliers so she can fit in her dentures; by the end of the issue she has brutally murdered her daughter, screaming incoherently that Dana made her do it. The page uses the same horror-movie strategy as *Blackgas* to obscure a full view of the zombie before
its reveal—but this time the depiction is not that of an eyeless monster, but simply the face of an old, frightened woman who does not understand what is happening to her, or even the monstrous thing she is about to do. The comic continues: “Heaven wouldn’t take me. Made me stay in Purgatory. . . . Just wanted to rest. Wanted to sit at the side of the Lord. I was going to sing with the angels . . . Everyone thinks it’s a miracle, but then they whisper and point. Ask me to heal them.” The same woman revives again and escapes the morgue, arriving at her daughter’s funeral to ask, unknowing, “Oh, honey, who did this to you?” before transforming into a more traditionally mindless zombie and attacking the stunned onlookers (vol. 1).

Another Reviver, an elderly man, seems to have come back to a kind of catatonic senility. But those around him think he’s faking. “You think he’s just some poor old man drooling and shitting his pants,” his son-in-law says during a guns-drawn confrontation with Dana. “But he’s not. He’s faking it. He’s one of them. He died, and he came back. And, he’s . . . he’s got something wrong in that brain. He’s sick and he’s fucking evil.” And the son-in-law is more or less right. Anders is faking it, as he seeks revenge on the daughter who murdered him with the help of her adulterous lover, her own step-brother, for their inheritance: “You’d already lived, Daddy. So well . . . So

1.2 From Revival, volume 1, You’re among Friends, by Tim Seeley and Mike Norton. Reprinted by permission of Image Comics.
l-long. But our lives couldn’t even get started.” Anders does murder her, though he takes little joy in it, and pointedly asks Dana a question that we can now recognize as being at the center of twenty-first-century zombie fiction: “How will the next generation thrive . . . if the old generation doesn’t die?” (vol. 2).

Other Revivers experience similar breakdowns, not all of them murderous: some experience severe health problems (or repeated deaths), or losses of affect, or fugue states. Not all—seemingly not even most—are murderous, though the narrative seems to hint that violent and psychotic outbursts may be associated with Revival on some level. But the narrative never endorses the attitude that the appropriate “answer” to this problem could be to round up the Revivers and murder or imprison them all, any more than such a thing could be suggested about the mentally ill or the elderly in a real-world context; whenever such an idea is posited, it is revealed to be monstrous and roundly rejected by the more sympathetic characters. Even the reliance on the fantasy of a noble small-town police department—run by a father-daughter team—points toward the notions of family and community that ground the series. Tellingly, it is almost always outsiders to the community who suggest these extreme measures, and characters within the community who resist them. Instead of elimination, the Revivers indicate a difficult population that must be carefully managed, with care and love, rather than with exterminative violence. When it is revealed that there actually is something supernatural at work in Wausau, the demon turns out to be hunting Revivers, who need to be protected from it. Similarly, many of the “cases” Dana encounters are actually about those who would seek to exploit Revivers—those who, for instance, would try to transport their body parts for sale as an aphrodisiac or exotic food, outside the quarantine zone—rather than the Revivers themselves as a threat. Most Revivers, even while experiencing disturbing personality changes, remain cherished and loved, like Dana’s own sister; others are children, whose periodic odd or disturbing behavior does not push them outside the boundaries of love and protection, or our sympathy, or of the human. (When one terrified Reviver child is abandoned by her parents and institutionalized in volume 3, our sympathies are overwhelmingly with the child.) Even a second confrontation with Anders sees him framed as someone who “got a second chance” but “blew it by being a piece of shit” (vol. 4)—suggesting that other Revivers could choose to embrace their better selves instead. Frequently, Dana and others need to intervene to prevent the Revivers from hurting themselves, either out of guilt or out of a misplaced sense that their loved ones would be better off without
them. When Diane, the Revived wife of Ken Dillisch, the town's mayor, tries to harm herself, his answer is clear: "Now you see, right? Why I can't let them take the Revivers away? Why they can't put them in some lab or a camp? ... She's my wife. I'm not letting someone else tell me what's best for her. And I'm sure as shit not letting some fucking towelhead from the CDC cut her up. I just need her to remember that she has so much to live for, even more now" (vol. 4). Of course his methods of dealing with her are also deeply inappropriate—he ties her up and confines her in a misguided (and ultimately failed) effort to protect her from herself. Both husband and wife would undoubtedly benefit from responsible medical intervention (as opposed to police/military violence) aimed at caring for their needs and alleviating their suffering. The Revival crisis calls for doctors and psychologists—care teams, not soldiers.

Even these terms get muddied as the series progresses; at the end of volume 5, *Gathering of Waters* (collecting issues 24–29), we see the mayor's wife set off a suicide bomb at a press conference that outed her as a Reviver, killing dozens including her husband, while in issue 31 and onward it is revealed that the monster apparently hunting Revivers is a being of intense *love* as well as horrific violence. Despite the language of sympathy and care that is used by outsiders, in bad faith, to justify locking more and more Revivers away, the audience is meant to recoil from this logic of instrumentalization and institutionalization (which here is nothing but extermination by another name). “The ultimate horror in science fiction,” Carlos Clarens (1997, 134) has written, “is neither death nor destruction but dehumanization.” Accordingly the overarching ethos of *Revival* is the rejection of zombie narrative's familiar logic of dehumanization, and an insistence instead that the bounds of love, community, and family must somehow be stronger than the uncanny strangeness of Revival, even when this seems hardest to imagine.

At the furthest end of the spectrum from the extermination of *Blackgas* and *Blackest Night* we find Matthew Shepherd and Roy Boney, Jr.'s *Dead Eyes Open* (2005), which abolishes any need for zombie extermination entirely. Echoing the identity politics and self-discovery discourse of *In the Flesh*, here *zombiism* is presented as just another chronic health condition in a world already full of them. Dr. John Requin, the psychiatrist at the story's center, is living a lie when the book begins: he is actually a zombie, and he worries his patients are beginning to catch on. His daughter fears, despite her mother and father's assurances to the contrary, that he might try to "eat her brains"; in fact, his condition simply requires a diet high in protein, mostly tofu, and...
keeping the house a little cooler than the living find comfortable. But still, he is lethargic and emits an unusual smell. “I suffer from a strange affliction,” John soon announces at a press conference, when he is forced out of the metaphorical closet to lead a Cabinet-level task force dedicated to “Returner Affairs”—“but I am still fundamentally the same person I have always been” (chap. 2).

His role as the first liaison of Returner Affairs is hardly easy. The federal government had been covertly killing Returners whenever they were discovered, in an effort to keep the truth under wraps—but the rate of Return has gone from one in a million to one in six hundred and the secret is now far too big to contain. Some of the zombies are criminals or terrorists—usually in violent counterreaction to the government’s own exterminative bent—but most are simply normal people trying to return to their lives in peace. Returners are simply a new situation that must be confronted not with “fear or superstition” but with reason and empathy. “Research is being conducted,” John promises. “We will understand this phenomenon . . . and we will get through it together” (chap. 2).

The world will simply need to change, to find some way to adapt to a new class of “Humans Plus” who barely eat, never get sick, and have no need to sleep. We see glimpses of the changing economic and legal context throughout the story, especially around the new practice of willing one’s money to oneself: as one Returner puts it, “Money’s not an issue with me, gentlemen. When I died, I was richer than Croesus. And I’m not getting any poorer. Do you know how many retirees are leaving their money to themselves? We don’t need medical, nursing, special care. Money’s not the issue” (chap. 6). The threat here, as in Revival, is in some ways the inverse to the threat of aging focused on earlier in this chapter—we are worried not that the older generation might die but that they might never die, hoarding and consuming necessary resources even as they persist as shadows of themselves. At the same time Dead Eyes Open also reverses the zombie body as an object of horror to turn it into an object of utopian fantasy: now it is the fantasy of a body that (at least potentially) might magically de-age, or might never get old at all. This is in fact what motivates the story’s final antagonist, the murderous general, in his plan for Returner genocide: “Think, John. Undying billionaires in Arctic mansions, issuing orders to every continent. Returner soldiers fighting wars that never end. Media dominated by people that never eat, never get sick. A dead world.” But John looks to the future, suggesting that the zombie condition may not be something monstrous or unnatural but instead (echoing a common euphemism
for aging) “just another phase of life” to which we all must find ways to adapt (chap. 6).

*Dead Eyes Open* deploys a number of the tropes common to the “zombie extermination” version of zombie narrative, including the usual free-floating borrowing from plague narrative, the Holocaust, and the militarized inner city of the war on drugs (as we have already frequently seen). This is the story we expect from a zombie comic, after all—a war between the living and the dead. And over the course of the book military figures repeatedly attempt to leap to the genocidal solution, only to be stymied by public opinion, human rights lawyers, or John’s inexhaustible decency. And the over-policing, violent suppression, concentration camps, and proposed forced relocation policies are all revealed by the end of *Dead Eyes Open* to be the consequence of misplaced government paranoia, not a genuine threat. In fact, the generals turn out to have been deliberately seeking to provoke the sort of violent resistance from the zombies that would justify full-on extermination, without success. This governmental overreach thus becomes the occasion for a civil rights struggle that reveals these proposed policies to be the result of an irrational prejudice against the undead. Zombies, we find out, are people, too: “These are rational beings. These are people... facing an unprecedented
Elsewhere in the story, the key “human” characteristic of the zombie is suggested to be not so much its rationality but its continued capacity for love; multiple characters suggest that it is the Returners’ love of their families and their desire to remain with them that has caused all this to happen. This is the attitude that prevails at the end of the story: both the zombie-supremacist terrorists and the anti-zombie revanchist shadow government are defeated, clearing the way for integration and inclusion. Liberal tolerance and love thus triumph in the end over hate, dehumanization, and fear, with a zombified Wil Wheaton (of Star Trek: The Next Generation fame) announcing his candidacy to be the first Returner governor of California while John embraces his family (including a now-tolerant daughter wearing an “I’m with Wheaton” T-shirt) at the story’s close. John could stay in Alaska with many of the other Returners and never rot, perhaps living forever—but he chooses instead to go home to where his loved ones are, no matter how “hard” or “strange” life with his condition will be. “Forever without you,” he tells his wife, “isn’t a forever I want” (chap. 6). This is a different sort of love than the love that cures the zombie in Warm Bodies—because, of course, it is no cure at all. For Shepherd and Boney love is ultimately not what reverses our zombic mortality but rather the force that sustains us and our relationships through it, even as the passing of time inevitably unmakes us all.

The very last page of Dead Eyes Open gives some taste of how the world will change to nourish the possibility of a love that can persist in the face of unhappy transformation. This page is a “toe tag” readers can cut out and distribute to support the book, a kind of viral marketing for the project—but it also indicates the kind of zombie ethics of love that here replaces the old zombie ethics of extermination and bitter violence. The layout of the text on the toe tag closely parallels a zombie recruiting poster from earlier in the text that suggested “they believe we are monsters” and called on Returners to “stand up and fight” against their human oppressors (chap. 3). Now that message of violence is reversed: the last page is a call for trust rather than bitter antagonism. This reversal reflects Aquilina and Hughes’s (2006, 158) pointed reversal of the usual terms of the zombie metaphor for illness: patients suffering from severe illness, old age, and dementia should be thought of not as “the living dead” but the “dying who live . . . who deserve our care and concern because of their continuing place as persons in the human world.” Rather than the shotgun or crowbar that destroys the zombies’ broken brain, we find instead in Dead Eyes Open a new proposed ethos for zombic medicine: treatment, care, reintegration, love. When zombies can speak, and tell us their stories, and explain their suffering, the fantasy of
killing them breaks down, and the circuit of empathy is restored. In the face of a public health crisis like the Returner event—or our own graying society—there must emerge new practices of care and new ways of interacting, but within a logic of inclusion and mutual respect, rather than extermination, elimination, or callous institutionalization. "IF YOU ARE READING THIS YOU ARE A RETURNER," the toe tag reads. "REMAIN CALM ... DO NOT ATTEMPT TO HARM YOURSELF OR OTHERS ... YOU ARE SAFE AND SECURE ... WELCOME BACK."

NOTES
1. This is more or less my own approach to The Walking Dead; see, for instance, my essay "We Are the Walking Dead" (Cana­van 2010).
2. Recall that 28 Days Later was actually filmed primarily before September 11, 2001.
3. See, for instance, his foreword to the first trade paperback, Days Gone Bye (Kirk­man and Moore 2006).
4. This situation was ultimately parodied in a special full-color epilogue to The Walking Dead issue 75, in which Rick wakes up (from another coma) to discover he has actually been in precisely this sort of alien-invasion story all along.
5. See, for instance, the French series Les Revenants (film 2004; television 2012), the BBC series In the Flesh (2013), and the film Life after Beth (Jeff Baena 2014).
7. See also the mainline Blackest Night series, published by DC at the same time.
8. See especially Iron Man's interrupted attempt at self-reflection in part 2: "I'm starting to forget things. It's starting to become ..." (Kirkman and Phillips 2005).
9. A similar sense of temporal dislocation is generated by the bizarrely compelling Archie Comics series Afterlife with Archie (2014), in which the idyllic permanent-1950s of Riverdale is suddenly shattered by a 2000s-style zombie apocalypse.
10. The slur is a reference to the doctor's ethnic heritage, suggesting the way that in-group and out-group dynamics are strongly at work in people's attitudes toward the Revivers. The book as a whole does not endorse ethnocentrism or Islamophobia; the Muslim doctor is actually Dana's primary love interest across the series.
11. The notion is taken from one of the zombie supremacists in the story, whom John kills at the end of chapter 5.

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