

The Space of In-Between. Illness, Medicine, and Horror

Edyta Just

Division of Gender Studies, Linköping University, Linköping, Sweden

Email: edyta.just@liu.se

How to cite this paper: Just, E. (2025). The Space of In-Between. Illness, Medicine, and Horror. *Sociology Mind*, 15, 105-122.
<https://doi.org/10.4236/sm.2025.152006>

Received: March 6, 2025

Accepted: April 25, 2025

Published: April 28, 2025

Copyright © 2025 by author(s) and Scientific Research Publishing Inc.
This work is licensed under the Creative Commons Attribution International License (CC BY 4.0).
<http://creativecommons.org/licenses/by/4.0/>



Open Access

Abstract

I call a “space of in-between”, the space where the embodied/embedded subject finds itself after an unwelcome ‘presence’ has entered its life. I call manifestations of the body which impair a daily life, a “presence”. In this text, I want to outline the contours of the space of in-between, to show what it means to have the presence under my skin, and to describe how the spaces of medical landscapes look like - at least to me. Furthermore, I also want to bring answers to the following questions: How do you feel in this in-between space? What do you gain? What do you lose? What do you need? What is missing? To meet the set goals, I tell the story about my experience with the disease known as endometriosis. Methodologically, this text is based on autoethnography, autophenomenography, my own poetry with two exceptions, and a reference to supernatural horror movies. Thinking together with presence and supernatural horror movies is my method of analysis. In supernatural horrors, presence indicates a haunting force that significantly influences the lives of those who come in contact with it. To understand that force, to live and deal with it proves to be both problematic, challenging, and frequently devastating. To me, to combine my experience with illness and medical encounters with supernatural horror movies, and to think together with presence and horror enables interesting and somehow daring reflections on the space where the embodied/embedded subject may find itself once its body has gone wrong. In this text, I use creative writing and creative methods (i.e., horror as a form of analysis) because it indeed matters how one studies what one studies.

Keywords

Endometriosis, Supernatural Horror Movies, Autoethnography, Autophenomenography, Illness, Medical Encounters, Creative Writing, Creative Methods

1. Introduction

This text is dedicated to those of us who can recognize themselves in it.

I call a “space of in-between”, the space where the embodied and embedded subject finds itself after an unwelcome “presence” has entered its life. I call manifestations of the body which impair a daily life, a “presence”.

The moment you start feeling that something is wrong with your body, that an unwelcome presence has entered your life. This is the beginning of relocation. A relocation to the space of in-between. In this space, you live with the presence. In this space, you hear the calling of your habits and familiar duties and feel the weight of the presence that distorts the shapes of the known. Your former actions are deeply and powerfully rooted in your body. They are with you; they act, yet the presence plays with them changing their colors and fragrances. I glue myself to the gravity of the familiar concomitantly feeling the presence. The in-between space is challenging as I am neither gone nor present as I used to be. The space of in-between is also challenging as you do not want to forget about and be forgotten by the familiar and the habitual. You do not want to forget about and be forgotten by the world from before the relocation. You enter an unknown territory. The unwanted presence, which has squeezed into your life, has relocated you to this space. Certainly, I want to know what this presence is, if I do not partially know it already, and I want to unload it from my life. Thus, I must start a quest searching for answers and/or remedies. The ones most equipped to help you to find answers and/or ultimate remedies are those affiliated with the field of medicine. Here comes the next challenge of the in-between space: not only do I need to live with the presence, not only do I need to live as neither gone nor fully present; not only do I want not to forget and be forgotten, but I also need to be on the quest and enter yet another territory i.e., spaces of medical landscapes.

In this text I want to outline the contours of the space of in-between, to show what it means to have the presence under my skin, what it means to me to live as neither gone nor fully present, what it means to me (not) to forget and be forgotten, and to describe how the spaces of medical landscapes look like - at least to me. Furthermore, I also want to bring answers to the following questions: How do you feel in this in-between space? What do you gain? What do you lose? What do you need? What is missing?

To meet the set goals, I will tell the story about my experiences with the disease known as endometriosis. This text is inspired by the following publications, *Narrative medicine: Honoring the stories of illness* (Charon, 2008), *The Principles and Practice of Narrative Medicine* (Charon et al., 2016), and *Danse Macabre* (King, 2010). Methodologically, this text is based on autoethnography (Cooper and Lilyea, 2022), autophenomenography (Allen-Collinson, 2010), my own poetry with two exceptions, and a reference to supernatural horror movies. Thinking together with presence and supernatural horror movies is my method of analysis. Why? As previously mentioned, I call a space of in-between, the space where the embodied/embedded subject finds itself after an unwelcome presence has entered

its life and I call manifestations of the body which impair a daily life, a presence. In supernatural horrors, presence indicates a haunting force that significantly influences the lives of those who come in contact with it. To understand that force, to live and deal with it proves to be problematic, challenging, and frequently devastating. To me, to think with presence and supernatural horror movies enables interesting and somehow daring reflections on the space where the embodied/embedded subject may find itself once its body has gone wrong.

Importantly, this text does not aim to make one's experience and following reflections universal. As stated at the beginning, this text is dedicated to those of us who can recognize themselves in it.

2. I love You and I Will Stick with You...for Life. ***The Autoethnographic Accounts***

Endometriosis. I heard this word for the first time in 2012 after the ultrasound scan. I did not know much about what it meant or what it entailed. To be honest, I did not know anything. For years, it remained hidden. I did not feel it and so I did not think about it. Occasional ultrasound scans showed that the endometriomas (the endometrial cysts in the ovaries) were stubbornly growing, but they did not hurt. Well, I had pain attacks in the first part of 2013 but back then I had no idea it was endometriosis related. Then the pain stopped. Since there was no pain, I did not think about what I had. Pain is a wakeup call, isn't it? In 2018 in a European country, in which I had health insurance, I decided to go for surgery to remove the endometriomas. However, just before the surgery the anesthesiologist seemed not to know much about my neurological condition even though I explained it well. This got me really scared, I did not want to end up paralyzed as I did after the surgery in 2001. I called off the whole thing. Afterall, it did not hurt.

My first relocation happened in May 2021. I started to feel pain. I suspected that those were endometriomas that caused it. The pain was localized next to the right and left ovary. By that time, the endometriomas were massive, the ovaries with the cysts were six times their size. The pain was irritating, the fatigue was enormous, but I pushed on not sharing much with the others. The duties were pushing the pain away, but the pain slightly distorted the duties. The duties were calling, and I was able to mute the pain or so it seemed. Finally, I decided to go for surgery again. The summer is a safe period—at this time of the year, people in my profession are on holiday. In June 2021 I wanted to have the surgery in a European country where I did not have health insurance. This was because I was afraid to do it in a country where I had my insurance—I still remembered the confused anesthesiologist from 2018. Yet, to do the surgery in a place where one does not have insurance means paying for treatment. I could try to reimburse the costs of the surgery if the insurance company, from the country I was insured in, would agree to that. Yet, those things are not as easy as they may seem. Moreover, to find a doctor who knows something about endometriosis and whose treatment (i.e., surgery) I could afford was more than a challenge. I remember leaving one doctor's office in pieces. He agreed to do the surgery, but the costs were too high. The

worst was that the doctor wanted extra money, in addition to the official costs, to be paid directly to him. The feeling of disgust was too much to take. Economizing on somebody's pain, *is this the way to go?* No.

A day in June 2021

Branches were growing all around me. Like ivy, they were everywhere. The cold sound of medical tools. Sterile spaces filled with liquids, questions, breaths, a sense of loneliness, an attempt to maintain dignity, being lost, gathering in oneself, courage made of glass, courage made of dust. The scent of June. Stubbornly blooming acacia trees, excavated streets, dust, constant hum of cars. Nicotine. Painful sinuses, another cigarette. Solace. Stimulation. Everything is green, green trees, green dress, green gynecological chair. A dance of the sterility of green with a mass of red-brown interior, the kingdom of endometriosis. Mask on the face, fatigue of the clock in the waiting room, an hour, another, and another. Home-spun. Virus. Fear of a narrow corridor, unpleasant toilet. Disinfecting my hands to pain. How to disinfect my hair?

- We can see you. We hear you. We understand you - the white walls of the doctor's room are stretching their hands uncertainly. White, silent walls, indifferent, insensitive.

- I will warm you up - the promises of the sun from behind the busy roller shutters. The sun, a distant star, blind to any cold sensation.

I look at the courage made of glass, watch it crumble, and I keep on mending it.

You must help a doll in a green dress.

I will dress her up as a tank, as titanium, as stellar dust that will bite into the nostrils, spell the work of the lungs, cause a cough, wake up. But the other doll has strong lungs, doesn't cough, or wakes up. The other doll helps you while sleeping, sleeps while helping. It doesn't want to wake up. Apparently, it knows how to help but loves its dream. I am talking to a sleepwalker.

(Edyta Just, June 2021)

Finally, later that summer, I managed to find a doctor that agreed to operate on me with acceptable payment. However, this time those were anesthesiologists, who refused the surgery. It was because it was a small hospital not prepared to treat people with my neurological condition. Around that time, from yet another doctor (yes, it was a real pilgrimage to find a knowledgeable doctor who could operate on me) I, for the first time, learned what endometriosis can result in. This disease, with unknown etiology, seemed to be like a stubborn ivy – spreading in the body, but unlike the ivy, possibly resulting in ovarian cysts, decreased ovarian function, ovarian carcinoma, adhesions between organs in pelvis minor, intestine and urethral stenosis, intestinal obstruction, renal failure, oophorectomy, or partial intestinal resection. The disease may also result in fatigue, depression, anxiety, and stress. At that moment, I thought to myself, why during all those years had nobody told me about the grave consequences this disease may have. Should I have googled it myself? Perhaps I should, being a proper neo-liberal subject that

can fix every problem on its own. But why did not any doctor mention to me what could happen to me when I left the growing endometriomas as they were, when I left this disease untouched by no means. The doctor who shared this knowledge with me, also wanted to operate on me, but he was not a specialist when it came to the treatment of endometriosis and, on top of that, I started to fear the surgery itself. The refusing anesthesiologists reminded me of the agony I went through after the surgery in 2001. I did not want to be paralyzed again. I gave up on the surgery, but this time, I could not give up on endometriosis. This time, I learned what this disease is capable of. I did my own research and asked a doctor for the IUD. He agreed. I got it. Yet again, nobody explained to me that this is not enough. I was reading a lot at that time about the disease and its treatment, but I did not get that the IUD was not enough, and so the endometriomas were growing.

For the whole of 2022, the endometriosis was painless and completely mute. Painless and mute till 3 a.m. on the 1st of January 2023 when it decided to demonstrate its presence and power. Back in the country where I had my health insurance, I thought I could no longer live like this. The pain localized around my right and left ovary was almost constant. You walk, you sit, and you sleep and yet, you cannot walk, you cannot sit, and you cannot sleep. Life goes on and yet, you see the life around you through the blurring of the vision lens. Again, I pushed. The workload, the full agenda, the deadlines, the responsibility, the people that count on you silenced the pain. And yet, the madly dancing pain was changing me.

(...)

You win a while, and then it's done

Your little winning streak

And summoned now to deal

With your invincible defeat

You live your life as if it's real

A thousand kisses deep

Leonard Cohen/Will Robinson, A Thousand Kisses Deep, 2001.

Living my life as if it's real, in the winter of 2023, I went to the hospital, after a month of waiting, to ask about the possibilities of having surgery. They performed the vaginal ultrasound. The doctor was not skillful enough to find a left ovary while performing the scan. I waited twenty minutes sitting on the gynecological chair for a more advanced doctor to come and perform the scan. It was a long scan. Three days later my endometrioma (till today I do not know if it was on the right or left ovary as I never got an answer) ruptured releasing its content to the peritoneum.

The second relocation.

Just a regular day in March. Nothing special. Listening to music on a bus on the way home. Around 7 p.m., dinner. And then it began. An awful pain in the whole abdomen. Intestines got completely mad, screaming, moving, pulling, contracting. Horror. Perhaps something was wrong with the food? The mint and the other herbs do not help. The night is tough. The bed is not comfortable and welcoming

anymore. In the morning the mad dance of the intestines continues. Breakfast and lunch do not go through. There is work to be done, a package to be picked up, but everything is slow, every movement is slow, every step is a hesitation. And it is white. The snow has covered the whole city. The whiteness, the silence, and the sterility of the landscape are unbearable. In the evening, the body starts to shiver and warm up. It cannot be a digestive problem. Call somebody—a warm voice on the telephone, a wakeup call. Call this number—a second friendly voice. Calling. Go to the hospital—a third firm voice. It is dark, it is cold, it is windy, all the warmth and light are gone. The snow remains. “You live your life as if it’s real.” Hospital. 10 p.m., 11 p.m., 1 a.m., 2 a.m., there is light, but it is a cold light. The closed eyelids do not help. The rest does not come. The shapes are moving in the corridors. Occasional screams, blood on the floor, people running. The intestines are barely breathing, they want to go for a walk, staining the walls. The space is engulfing, suffocating, imprisoning, and alienating. I am present yet vanished, an invisible, intelligent, and feeling sack of meat. Stuck in immobilizing pain, sticking obsessively to the life known: there is an online meeting tomorrow, there is a message to be responded to. The intestines tell their story to a doctor maybe at 3 a.m., maybe at 4 a.m. No ultrasound is performed. Probably it is constipation. Enema. 5 a.m., 6 a.m., 7 a.m. Perhaps a CAT-scan? Perhaps. Maybe at 10 a.m.? Maybe.

Acacia

She felt something grabbing her throat tightly. She was getting out of breath. She clutched the hand, which was tightening around her neck, but the branch did not release it.

- The acacia trees are exceptionally aggressive this year, she thought.

Finally, the insistent green gave up.

- I am dying, said the tree.

She settled herself comfortably on a green chair and started to work. She opened her laptop, looked at e-mails, and clicked on the file with today’s tasks. The acacia stuck thorn into her lower leg.

- Come on! Bugger off! You are so annoying! We all die someday, accept it, she said.

Suddenly, it became brighter, as if someone had turned on an extra light. She heard an upset, female voice:

- Will you never get bored with these stupid jokes? Please take this mannequin from my favorite green chair and put it back on display!

(Edyta Just, 2021)

The machine brings its verdict: the endometrioma ruptured. There is so much hunger, the sandwich does not go through. The intestines are insulted. The online meeting still needs to be cancelled. One more mail to go. Another waiting room. Another corridor. Do the corridors ever end? Yet, there is another waiting room. How many waiting rooms are there? Corridors and waiting rooms, purgatory.

The third relocation.

Now, after the surgery, it should be ok. It should be fine. It is not fine. The

intestines do not agree that it is fine. The revenge of the intestines or how to call it? The space and time are too narrow for the expanding body. The movements of flesh do not match the familiar frequency of the house and streets. The comfortable sofa welcomes you and the body rejects the offer. Sending beacons to the world. The world responds. Alone at home. Something is wrong. Calling the hospital. Not being able to reach the doctor. It will pass, the intestines war, it will pass—a distant voice. It does not. Calling again. Come to the hospital—an official voice.

There is nothing wrong. It is. No, it is not. After the visit to the hospital, after the long examination, it is so much worse. There is suddenly so much body to feel on the right, lower side of the abdomen. When the right leg is stretched, the pulling, squeezing, and tearing inside begins. Something makes the intestines dance, something eats your right, lower side of the abdomen alive. Suddenly a 'lump' appears and then it is gone, deep under the skin. Calling the hospital again. Go to the GP or to the emergency services—an indifferent voice.

So many doctors visited. So many examinations. Exhaustion. Anger.

Voices. Possible causes. Endometriosis, Post-surgery Adhesions, and something unknown.

Me. What is that 'unknown' force? What does really lurk under the buzzwords: endometriosis/adhesions? What precisely is wrong?

A voice. We can do another surgery.

Voices. Do not do more surgeries, try to live with what you have as it can get worse after another surgery.

The fourth relocation.

After the surgery, the mad dance of intestines, the lower right side of the abdomen, the lump, the constant pain, are joined by the cold and the heat, the sweat, the hair loss, the trembling inside, the dizziness, the nausea, the unbearable fatigue, anxiety.

Me. Where do I even start?

Presence

Neither gone nor present.

Forgetting, forgotten or not?

Medical landscapes are so far away, barely visible in the distance.

Lost in this unknown territory (?) Lost in the space of in-between (?)

(...)¹

Na krawędzi życia tańczę jak na linie dziś

I nie umiem przegnać mroku, który we mnie tkwi

Jak upadły anioł chwytam każdą światła nić

Na krawędzi życia tańczę jak na linie dziś

Robert Gawliński, Na Krawędzi Życia, 2018

¹Translation into English: On the edge of life, I dance like on a rope today, And I can't banish the darkness that's inside of me, Like a fallen angel I grab every thread of light, On the edge of life, I dance like on a rope today.

Jar

- I love you, she said to a large glass jar that she had just taken out from the dishwasher. She pressed it to her ear. The shell, as always, did its job. It disrupted space-time. I'm here again. Endless gaze at the calmly breathing sea. The smell of Greece warmed up to forty degrees. Fine sips of gin and tonic. Peanuts sifted through the fingers. Red swing contrasting with green grass. White, soft sheets. Dancing curtain. And this lightness, this hovering above the ground, this finest absorption of life.

She shuddered as the door slammed suddenly. The shell fell out of her hands. There was a broken jar on the hard tiles.

The presence and them. The presence and them entered the room.

- Are you playing with the jar again? You are strange, they said.

- Don't worry, I will try to mend it for you, whispered her own embodied/embedded mind.

(Edyta Just, 2021, 2023)

3. The Space of In-Between. The Analysis Through the Lens of Horror²

3.1. Presence under the Skin

I felt it and I still feel it all, all the body manifestations. During my first and second relocation, a demon was named. This is Bathsheba (TC, 2013). This is Valak (TC, 2016). Then the third and fourth relocation occurred, and I still feel something lurking, something hidden in the shadows, something following me, just like a true crime writer Ellison Oswalt (Si, 2012), a therapist Dr. Rose Cotter (S, 2022), and a university student Jay Height (IF, 2014) felt. You know that there is the presence close by, you sense it, you are aware it is there. No more pretending that it is just an imagination. All the body manifestations. The demons love causing pain, they especially enjoy twisting the body (TEoER, 2005), dismembering it (EDR, 2023), cutting and tearing the skin (ED, 2013), bending the spines (V, 2017), and pulling/pushing around (Ho, 2020). Ghosts are not better. They seem to like to play with the human body, too. Samara enjoyed leaving the imprints of her hands on the skin of those whom she touched (TR2, 2005), not to mention her love for disfiguring humans' faces (TR, 2002; TR2, 2005). The presence does things to you. It burns, it stabs, it twists, it pulls, it heats you up, freezes you, fogs you, makes you dizzy. It causes pain. The body manifestations result in exhaustion. Everybody is so tired, exhausted, anxious, and frequently lost, Amelia (B, 2014), Rose Cotter (S, 2022), Janet (TC2, 2016), Mia (A, 2014), Rachel Keller (TR, 2002; TR2, 2005), and most of the haunted characters in the supernatural horror movies. The presence causes tiredness, anxiety, and the feeling of being lost. This is what the presence does. I genuinely hate the presence.

²The full titles of the movies together with the abbreviations are to be found in the Filmography section of the text.

3.2. Neither Gone Nor Present

Na krawędzi życia tańczę jak na linie dziś [On the edge of life, I dance like on a rope today]—most of the haunted supernatural horror movies' characters feel that the life they had known has been taken from them: Rose (S, 2022), Janet (TC2, 2016), Madison Lake-Mitchell (M, 2021) or Rachel Keller (TR, 2002; TR2 2005). I feel like they feel. I also feel their anger. I am not even scared anymore. I am mostly tired; tired and angry that the presence takes life from me and that it makes me neither gone nor present. I pushed with the workload, with the deadlines despite the pain; I thought about the emails and online meetings while the intestines were dancing madly in the emergency room. Rose went to work even if she knew that something was not right (S, 2022), Candela kept on working in the shop despite the ghostly madness occurring in her house (M32, 2020), and Annie Graham continued to paint doll houses in a gloomy, haunted ambience of her home (H, 2018). We pushed with the duties not only because the rules of the neo-liberal order are tough, but also because we did not want to be relocated to the space of in-between. We did not want to give up on the world from before the relocation. However, the paradox is that you are already there, and pushing against the pain, the painting of the doll houses in a haunted ambience (H, 2018), and the thinking about the duties while intestines scream, are the signs that you are already there. My chair welcomes me even if I know it will be difficult to sit on it. *The scent of June. Stubbornly blooming acacia trees, excavated streets (...) Everything is green, green trees, green dress, green gynecological chair. A dance of the sterility of green with a mass of red-brown interior, the kingdom of endometriosis.* You sleep even if you know that the ghost that got under the skin of your son is sitting comfortably on the sofa watching cartoons (TR2, 2005): in the space of in-between, the familiar tries to silence the presence. I throw myself on the sofa, bed, and chairs, squeeze into staircases, cars, buses, and trams, visit shops and offices, and yet, I do not pulse the way I used to. Even if my street has not changed a bit, I find it difficult to walk on it. Rachel's face is disfigured on all the photos of hers (TR, 2002): space and shapes of the familiar are distorted by the presence. Reality remains untouched and yet, the presence changes reality. We are neither gone nor present. *You live your life as if it's real.* Kiera Woods fights to release her family from the demonic possession, and just when she thinks that all is over and opens the door to leave the haunted house, she realizes they are still there, in the dim demonic dimensions (TCe, 2022). Juggling the familiar and the presence at once is precisely the demonstration of the space of in-between. Yet, juggling is not about either or, rather, it is about living with the presence through the prism of the familiar and living with the familiar through the prism of the presence. Neither gone nor present.

3.3. (Not) to Forget and Be Forgotten

Forgetting, forgotten or not? The body manifestations keep you occupied, busy, and active. To live with the ghost or demon means to constantly feel and think

about it. I cannot ignore them. I want to understand them and/or get rid of them. To identify a ghost or demon, and to remove or exorcise it, requires action. In supernatural horror movies, the main characters cannot disregard the presence and are making constant efforts to understand and remove it from their lives. Even if they maintain the ties with the world from before the relocation, the sensing of the presence and the need to focus on the presence and do something about it somehow distances them from the world they do not want to forget. Dr. Rose Cotter had to finally take time off from her work as her preoccupation with the presence and her quest to identify the haunting her entity make her unfit to perform her daily duties in the hospital, not to mention that she started to be seen as, to put it bluntly, 'slightly mad' (S, 2022). Those who experience the presence and try to do something about it are perceived as 'slightly mad,' 'detached from the reality,' 'a bit crazy' as they are preoccupied with it and frantically and often desperately search for remedies: a haunted student Verónica (V, 2017), Beth, who feels the presence in her house after her husband's suicide (TNH, 2020), Rachel Keller, who first wants to get to know the killing presence (TR, 2002) and then to release her son's body from the ghostly presence of Samara (TR2, 2005) or Dahlia Williams, who senses that the hole in the ceiling with a leak of dark water (in her apartment in a gloomy, almost empty block of flats with mysterious story of the neighbors who used to live just above her) is not a good sign to say at the least (DW, 2005). While the presence plays with you, it is mostly the play you can focus on. The presence keeps you preoccupied, busy, and it tends to label you 'mad,' 'crazy.' But neither I nor Verónica, Beth, Rachel or Dahlia is mad. Yes, we feel and think about the presence, we are busy, we might be seen as somehow 'distant from reality,' but this is because the presence does things to us, and we want to understand and/or get rid of it. Those presence's plays, our constant sensing of it, our preoccupation, business, distance is integral to the space of in-between. Here comes fear. I fear that I will forget the world from before the relocation and I fear that the world will forget me. Rose's family cuts her off – who gives a nephew a dead cat in a box as a birthday gift? (spoiler: the presence did it) (S, 2022). The presence may never leave, so far it did not, and I may forever dwell in the space of in-between together with Beth (TNH, 2020), Amelia (B, 2014) or Kiera (TCe, 2022). Will the world outside still remember me now when I am haunted? Now, here is a trick, you try to do all you can to remain present and make efforts not to be forgotten even though you inhabit the space of in-between. I do it. *I'm here again. Endless gaze at the calmly breathing sea. The smell of Greece warmed up to forty degrees. (...) And this lightness, this hovering above the ground, this finest absorption of life* ~ intestines dance madly. Amelia does it. She celebrates her son's birthday in the garden ~ Babadook squats in the basement (B, 2014). Forgetting, forgotten or not?

3.4. Unknown Territory

Once the body begins to manifest itself, once you have seen that dead, gloomy face

with a big dark eye piercing through a curtain of long, black hair (TG, 2004; TG2, 2006), I become aware that I have entered a new territory, an unknown one. In the former landscapes of my habitation, I was typically not suspended in the air (TC2, 2016), I generally did not see demonic visages in the streets (TEoER, 2005), I did not observe black shapes in my room and the bottom of my mattress was usually not burnt (V, 2017), I could most of the time open doors that now constantly close on me blocking an exit (TAH, 2005; TG2, 2006; TC, 2013; THoPS, 2015), I did not have to paint doll houses in a haunted ambience (H, 2018), and I did not have to wonder about a hole in the ceiling (DW, 2005). When the body goes wrong, you usually do not get a well-written, peer-reviewed, and published manual of how it will be to live and deal with a ghost or a demon. I did not get it and none of my haunted friends from the supernatural horror movies did. The space of in-between is a real *terra incognita*. Then you slowly begin to learn: so, this is what it is to hang up high in the air, to see dark shapes, to not to be able to open doors, to paint doll houses when haunted, and to wonder about the hole above your head. Learning never stops.

3.5. Medical Landscapes

Body manifestations. Because the presence does things to us, we want to understand it and/or get rid of it. Of course, sometimes we try to do it on our own, but we need companions. I enter medical landscapes, supernatural horror movies' characters search for companions, too - we do it to find somebody who can possibly support us in understanding and/or removing a ghost or a demon. In this sense, medical landscapes have become an integral part of the in-between space. Importantly, when I enter medical landscapes, when we search for companions, I enter/we search for with the presence close by, we enter/search while the presence burns, stabs, twists, pulls and makes us dizzy. We enter/search while tired, exhausted, anxious, and frequently lost. We enter/search while living with the presence through the prism of familiar and living with the familiar through the prism of the presence, while being neither present nor gone. We enter/search while being deeply preoccupied with the presence, and we may indeed look slightly 'mad' as we desperately seek remedies. We enter/search while making efforts not to be forgotten. When the bodies go wrong, when the presence pulsates, we do not get a manual of how it will be to live and deal with the presence. We inhabit *terra incognita*. We constantly learn. When we enter medical landscapes/when we search for companions, we are in the constant process of learning (so, this is what it is to hang up high in the air, to see dark shapes, to not to be able to open doors, to paint doll houses when haunted). The medical landscapes which for us, haunted ones, are related to looking for companions and remedies belong to the unknown ambience of the space of in-between (remember we do not get manuals). It is only while we are there that we start to learn what such search means.

The body, that moment when no longer can you tell yourself that everything is fine and when you need to admit to yourself that there is indeed a ghost or a de-

mon close by. I know that Parker Crane has possessed the body of Josh Lambert (IC2, 2013). I really saw this strange, unknown person in the maze of the house precisely like Vanessa Shepherd, a journalist doing visual footage of the artistic performance in a possibly haunted hotel, did (HHIII, 2019). That moment when you realize that you really must do something about it. Bathsheba must be exorcised so that Carolyn Perron can live (TC, 2013). Roger Perron: “Who’s in here? What happened? Somebody tells me what’s going on here!” (TC, 2013). Those are the moments when you need to become active, when you need to mobilize yourself, gather all your strength (or what is left of it) to search for companions and remedies. Carolyn Perron: “There is something horrible happening in my house. Could you come take a look? (...) No, you don’t understand. (...) I’m so afraid this thing wants to hurt us” (TC, 2013).

Lorraine and Ed Warren, paranormal investigators, came to Carolyn and Roger’s house. Bathsheba disappeared (TC, 2013). As for me, during my first relocation, it was difficult to find a well-trained demonologist who could professionally deal with endometriosis and my body. There are many of us who are trained to deal with demons and ghosts, yet some demons and ghosts require unique tools and a high degree of initiation. Father Richard Moore heard all the demons’ names that took over Emily Rose, but he could not get them expelled (TEoER, 2005). Brock Davis apparently could communicate with ghosts, but the ghosts of Abaddon Hotel (HHII, 2018). During the beginning of my second relocation, the doctor made guesses of what might have happened and yet did not order any additional examinations but made me do enema at twilight – the intestines were screaming anyways so, well, they could scream even more. There are many of us who think they can deal with presence, but can they? Noah was sure that Samara was no longer lethal. That he understood her. He was wrong. “She never sleeps” – said Aidan, Noah’s son (TR, 2002). David felt he conquered a demon who possessed his sister Mia by ‘cleansing’ her through live burial. He was wrong, too (ED, 2013). As for my third and fourth relocation, doctors are completely lost – all that I get are vague statements, bits and pieces of ideas, ephemeral thoughts, and contradictory reflections. The crew of Hell House (HHI, 2015) and the journalist team (HHII, 2018) – everybody felt that there was something wrong with the Abaddon Hotel, they all got the worrisome signs and yet, all they could do was to share vague reflections and contradictory statements till it was too late. There is a profound lack of knowledge concerning presence. Paranormal investigators may feel presence and can either be sure or completely lost about it. Both the surety and the confusion can make it harder to identify and/or remove presence and help it to win.

At times, this lack of knowledge does not surprise me. Sometimes I am even emphatic to those who do not know. Not everybody can reach the highest degree of initiation. Furthermore, bodies are like presence: paranormal. Here is the lump, here is the tearing inside, here is the cold and the heat, here is the anxiety. Here is your face painted with red lipstick when you just woke up and the light that suddenly went on in your room while you were sleeping (TDtW, 2020). Here is the

shadow in the corridor, your bathtub with a presence wanting to drown you, those whispers you constantly hear (TAH, 2005). Presence likes to utilize different tricks to demonstrate itself so that it becomes utterly difficult for the paranormal investigators to identify and/or get rid of it.

Every time I meet a doctor, I get bits and pieces of information, never the entire spectrum, I need to ask a million questions, and I need to visit at least a few of them to increase my chances of getting closer to my presence. The haunted ones pose many questions. Usually, the information about the presence comes in bits. A local deputy gradually updates Ellison Oswalt, true crime writer, with information about the sinister force that surrounds him (Si, 2012). The same does psychic Dr Fredrichs when visiting twice and talking about a demon in Katie and Micah's house (PA, 2007) and Walter, acclaimed by others to possess psychic abilities, who occasionally throws incomplete ideas at haunted Jennifer Branagan (THoPS, 2015). This happens mostly because either they do not know the presence well themselves, or because for unknown reasons they simply do not want to share. Frequently, the information about the presence comes from various sources. Oswalt was supported not only by the deputy, but also by occult specialist Prof. Jonas (Si, 2012). Mia, haunted by a demon, gathered information from detective Clarkin, Father Perez, and a neighbor Evelyn (A, 2014). This was because, apparently, not a single person had all the knowledge concerning the presence. Quite often it requires an entire team of paranormal investigators cooperating with one another to come as close to the presence as possible – Lorraine and Ed Warren worked in a group as in Harrisville (TC, 2013) as in London (TCII, 2016) to identify and deal with the haunting force, and so did psychic Elise Rainier when trying to help Josh and Renai Lambert's son, whose body was about to be possessed by a demon (I, 2011). I visited many doctors and went through so many examinations – paranormal investigators need to take their time, this is clear, but the chances are higher if they work in teams and are willing to increase their knowledge about the presence – in result, the demons got exercised (TC, 2013; TC2, 2016), and the son got saved (I, 2011). To understand and deal with body manifestations, with presence, may take time and effort, and one may need to deal with fragmented information coming from various sources (if one is lucky enough to afford to have many companions). Afterall, can one acquire all the knowledge about the presence? Yet, if you know much, as Walter did (THoPS, 2015) why don't you share? Do you think I am not capable of dealing with what I hear or what the problem is? Importantly, it seems that knowledge, tricks, and rituals, which come from an engaged and cooperative team, may increase the chances of identifying and making presence vanish, otherwise there are high chances that presence will keep on dancing.

During the beginning of my second relocation and especially the third and the fourth one, I had a constant feeling that I was heard but not listened to. I was drawing the contours of the presence haunting me but in response I heard a different story, different from mine. --*I am dying, said the tree. (...) --Come on!*

Bugger off! You are so annoying! It was as if we did not speak the same language. A group of young people breaks into abandoned Gonjiam Psychiatric Hospital to do a live broadcast from this widely acclaimed haunted place. During the broadcast Ji-hyun got her hand pulled into a wooden box and scratched, and Charlotte's scarf's loose end suddenly went up. None was to be seen. Those two were trying to convince the others that there is the presence close by. "We are cursed." Yet, a leader of the team, Ha-joon, had his own version of the story: "They are just freaked out (...) It seemed like Ji-hyun was faking (...) There might have been thorns inside [about the scratches] (...) Was there any wind blowing in? [about the scarf]" – the presence won (G, 2018). Kat, a freshman, and Rose, a senior student, are not picked up by their parents on time for a week break. Overnight Kat gets possessed by a devilish force. Though the signs are there, Rose, just like Ha-joon, has her own ideas about Kat's state of being: "Were you sleepwalking? Do you sleepwalk, is that what that was? (...) You should go to bed. Just go to bed, then when you wake up in the morning...you're gonna be ok, alright?" – here too, the presence won (F, 2015). My story versus your story; the muted, neglected and rejected narration allows presence to tighten its grip.

The worst is if the companions, mostly accidentally or due to a lack of knowledge, make presence manifest itself even more profoundly and then abandon you. *After the visit to the hospital, after the long examination, it is so much worse. There is suddenly so much body to feel on the right, lower side of the abdomen.* A demon wants Angela – companions are to be found, but are they? A psychiatrist is trying to help, but is she? The doctor: "So, how are you feeling today?" Angela: "I want to go home." The doctor: "You're safe in here, Angela. And we're going to take very good care of you." Angela: "I want to go home now." The doctor: "And we will continue to take care of you." (...) Angela: "I was fine before I saw the doctors. This place is making me sick" (TVT, 2015). *After the visit to the hospital, after the long examination, it is so much worse. (...) Calling the hospital again. Go to the GP or to the emergency services – an indifferent voice.* The doctor to Angela's father: "She is downstairs. Outside. There's nothing more we can do" (TVT, 2015). Inertia was all Angela was about at that moment. Inertia was all I was about when the person from the hospital hung up on me. Then hell opened.

Does not matter which relocation it was, what was frequently present apart from the presence, was indifference, distance, and coldness: *White, silent walls, indifferent, insensitive. (...) The sun, a distant star, blind to any cold sensation.* Often, the voices that I heard and still hear lack(ed) empathy and support. A haunted house in Amityville. Billy and Michael are getting scared: "The babysitter told me...that two little boys died in our room." Their mum and stepfather know the drill however: Mum: "Go to bed. We'll deal with this in the morning." Billy: "I'm not sleeping in that room." Stepfather: "Wipe that stupid look off your face...and go to bed" (TAH, 2005). This look of sorrow, anxiety, confusion, and anger on Bill's and Michael's faces and on my face. This indifference, coldness, lack of empathy and support weaken those who live with presence and make them

more vulnerable to its overwhelming power.

The lack of knowledge, fragmented information coming from various sources, the lack of sharing the tricks and rituals, the lack of listening, abandonment, indifference, distance, and coldness make us, the haunted ones, even more tired, exhausted, and lost. They make us look even ‘madder’ and ‘detached from reality.’ I constantly hear the screams of my haunted supernatural horror friends: “What is happening to me?”; “What to do”; “I am so tired!”; “Help me!”.

The presence that lives with me has not yet left, and I still do not know its name. Is it just one ghost or a demon? Or, are there more? –*Don’t worry, I will try to mend it for you, whispered her own embodied/embedded mind.* I am aware that I must be active, constantly mobilize myself, and not give up. Yet, companions are necessary. They are crucial not only for the quest of identifying and/or getting rid of the presence, but also for me not giving up. A psychic Elise Rainer, two paranormal investigators, Tucker and Specs, Quinn’s dad, Sean Brenner, a spirit of a neighbor, Grace, and a spirit of Quinn’s mum, Lillith Brenner were trying to do all they could to identify and/or vanish the presence that had entered Quinn Brenner’s life. Importantly, they also helped her not to give in to the presence. Elise: “Wake up. Don’t let it take you. Grab her hands! Quinn, don’t leave! Don’t leave! Stay with us!” (IC3, 2015). Thanks to them, Quinn could face the haunting force. She did not give up. Companions, a *sine qua non* in the space of in-between.

4. The Space of In-Between: How Do You Feel? What Do You Gain? What Do You Lose? What Do You Need? What Is Missing? Concluding Remarks

When the presence holds me in its embrace, it does not feel well. I feel the presence’s burns, stabs, and pulls. I feel pain. I feel exhausted, anxious, and lost. I am angry that the life that I knew has been taken from me. *I live my life as if it’s real* while living with the presence through the prism of familiar and living with the familiar through the prism of the presence. Being neither gone nor present feels very surrealistic and it is utterly irritating. I am occupied and busy – since I constantly feel the presence, I continually think of it and what I can do about it. The presence does not allow me to forget about itself. Because of the presence in my life, I fear that to some extent I may forget the world from before the relocation and I fear that the world will forget me.

Medical landscapes are so far away, barely visible in the distance. The way the companions, which I have been so persistently and frequently desperately looking for, have dealt with my haunted body, made me even more tired, exhausted, and lost. My companions have often left me in a state of inertia where I could feel the hell swallowing me. So much sorrow, anxiety, confusion, and anger on Bill’s, Michael’s (TAH, 2005) and my face. In result, the vulnerability to the overwhelming power of presence increases.

When I think about what I have gained, I think about two things. First, I realized that it was my work that saved me from drowning in the hellish spaces of

being completely gone and forgetting. It has been my most stable link, a thick rope even, with the world from before the relocation. It has been both an escape from the presence (though you can never escape it) and a visitor to my in-between space (a well-known face in an unknown terrain). Second, I have gained the spirit of a fighter, sort of. Companions are necessary not to give in to presence, but I know that this spirit of a fighter is in me now. I bow, I lay on the ground, I sink into the ground, and yet I do not break, at least not for now. *You must help a doll in a green dress. I will dress her up as a tank, as titanium, as stellar dust...*

What have I lost? Life that I knew.

What do the haunted ones need? Carolyn (TC, 2013), Rachel (TR, 2002; TR2, 2005), Rose (S, 2022) what would you say? I think recognition and acceptance from those who surround the haunted ones are key words here. Recognition and acceptance that we are neither gone nor present as we are conquering presence by sticking to the familiar that is nonetheless always already processed through presence. That we might look distant and 'slightly mad.' That we make efforts not to be forgotten even though we inhabit the space of in-between. That we constantly learn about how it is to have presence so close by.

In the medical spaces adjacent to the space of in-between, I long for the paranormal investigators who recognize that I am haunted and that I inhabit the space of in-between with all that this entails. I need companions with a high degree of initiation, being able to be a source of a wide spectrum of tricks and rituals aimed at naming and/or conquering the presence. Companions willing to listen, learn and share. Humble companions that are neither stubbornly convinced about their infallibility nor totally lost. Companions who do not abandon us. Companions who will not only support us in the quest for identifying and/or removing presence, but also help us not to give up. "Grab her hands! Quinn, don't leave! Don't leave! Stay with us!" (IC3, 2015). Is it a utopian dream? Perhaps. Yet, this is what is needed if we want to send presence back to hell or wherever it should go. Because this is precisely what is missing in my space of in-between. I simply miss good companions.

5. Epilogue

Maybe one day, my presence will be named, and maybe it will be possible to remove it. Maybe. I am acting and waiting for this day to come. Though, I am aware that even if the presence is named, it might not be possible to remove it, but maybe it will be possible to mute it to such an extent that it will stop impairing my life. Yet, this is a topic for another story. Life yet to be lived and story yet to be told.

Gabriel (the haunting force): "You don't deserve your body. I can use it better than you."

Madison Mitchell (the haunted): "Not anymore. You don't get to control me ever again. It's over, Gabriel. I'm taking it all back. My mind, my body, my everything. Now, you get to live in a world that I create."

Gabriel: "You can't lock me in here forever. You'll always be stuck with me."

Sooner or later, I will get out.”

Madison Mitchell: “I know, but next time I’ll be ready for you.”

(M, 2021).

Maybe.

Conflicts of Interest

The author declares no conflicts of interest regarding the publication of this paper.

References

- Allen-Collinson, J. (2010). *Running Embodiment, Power and Vulnerability: Notes towards a Feminist Phenomenology of Female Running*. In E. Kennedy, & P. Markula (Eds.), *Women and Exercise: The Body, Health and Consumerism* (pp. 280-298). London: Routledge.
- Charon, R. (2008). *Narrative Medicine: Honoring the Stories of Illness*. Oxford University Press.
- Charon, R., DasGupta, S., Hermann, N., Irvine, C., Marcus, E. R., Colsn, E. R., Spencer, D., & Spiegel, M. (2016). *The Principles and Practice of Narrative Medicine*. Oxford University Press.
- Cooper, R., & Lilyea, B. V. (2022). I’m Interested in Autoethnography, But How Do I Do It? *The Qualitative Report*, 27, 197-208. <https://doi.org/10.46743/2160-3715/2022.5288>
- King, S. (2010). *Danse Macabre*. Gallery Books.

Song Lyrics

Leonard Cohen/Will Robinson, A Thousand Kisses Deep, 2001.

Robert Gawliński, Na Krawędzi Życia, 2018

Filmography

Annabelle (2014), John R. Leonetti (A, 2014)

Babadook (2014), Jennifer Kent (B, 2014)

Dark Water (2005), Walter Salles (DW, 2005)

Evil Dead (2013), Fede Álvarez (ED, 2013)

Evil Dead Rise (2023), Lee Cronin (EDR, 2023)

February (2015), Oz Perkins (F, 2015)

Gon-jj-am (2018), Beom-sik Jeong (G, 2018)

Hell House LLC (2015), Stephen Cognetti (HHI, 2015)

Hell House LLC II: The Abaddon Hotel (2018), Stephen Cognetti (HHII, 2018)

Hell House LLC III: Lake of Fire (2019), Stephen Cognetti (HHIII, 2019)

Hereditary (2018), Ari Aster (H, 2018)

Host (2020), Rob Savage (Ho, 2020)

Insidious (2011), James Wan (I, 2011)

Insidious: Chapter 2 (2013), James Wan (IC2, 2013)

Insidious: Chapter 3 (2015), Leigh Whannell (IC3, 2015)

It Follows (2014), David Robert Mitchell (IF, 2014)

Malasaña 32 (2020), Albert Pintó (M32, 2020)

Malignant (2021), James Wan (M, 2021)

Paranormal Activity (2007), Oren Peli (PA, 2007)

Sinister (2012), Scott Derrickson (Si, 2012)

Smile (2022), Parker Finn (S, 2022)

The Amityville Horror (2005), Andrew Douglas (TAH, 2005)

The Conjuring (2013), James Wan (TC, 2013)

The Conjuring 2 (2016), James Wan (TC2, 2016)

The Cellar (2022), Brendan Muldowney (TCe, 2022)

The Dark and the Wicked (2020), Bryan Bertino (TDtW, 2020).

The Exorcism of Emily Rose (2005), Scott Derrikson (TEoER, 2005)

The Grudge (2004), Takashi Shimizu (TG, 2004)

The Grudge 2 (2006), Takashi Shimizu (TG2, 2006)

The House on Pine Street (2015), Aaron Keeling, Austin Keeling (THoPS, 2015)

The Night House (2020), David Bruckner (TNH, 2020)

The Ring (2002), Gore Verbinski (TR, 2002)

The Ring 2 (2005), Hideo Nakata (TR2, 2005)

The Vatican Tapes (2015), Mark Neveldine (TVT, 2015)

Verónica (2017), Paco Plaza (V, 2017)