‘Keep raw meat and vegetables apart’

- on the advice and context of diagnosis in the case of food infections

’Ethnographies of Diagnostic Work’

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Who's to blame?

- during the 1950ies large campaigns for hygiene improvements were undertaken
- 'the housewives five minutes'
- vegetables were identified as the source due to cases with food infections caused by anaerobe bacteria
- lasted until the late 1980ies where the first salmonella infections showed
- now raw meat was the core problem infecting vegetables – and not the opposite

Hygiene strategies

- hygiene strategies in food production were expected to have solved the problem already in the 1970ies
- chemical and mechanical cleaning of production facilities were seen as successful and conventional food poisoning expected to be eliminated
- but a new wave of meat infections turned up
- food inspectors could identify the bacteria and trace them to the slaughterers and farms
- doctors could trace the infections to bacteria and often to the meat (meal) and the supplier

Diagnostic work - 1

- more than deciding whether observed phenomena deviate from the normal / functional
- observations are assigned to specific types of ‘failures’ which often are related to specific causes
- leading to also prescribing a cure or at least an explanation to the ‘disorder’, ‘malfunctioning’ etc.
- requires skills, instruments, knowledge, laboratories and not least a socially accepted and institutionalised professionalism

Diagnostic work - 2

- based on an already established ordering of phenomena and actor roles
- with trained professionals making the assessment – the diagnosis – both of the relevance of the case and the conclusion and advice
- building on established and - at least partially – stabilised distinctions between healthy-ill, function-failure etc.
- detailed ethnographies can document these practices

Epistemic framing

- in environmental and medical diagnosis the implications of false diagnosis and questionable causal explanations are well documented
- the health sector has become controversial with alternative medical diagnosis and practice
- conditions and context of diagnosis concerning the involved knowledge and professionals can be identified as an epistemic framing
- demonstrating the strength of a diagnostic schemata

A foresight on hygiene

- my entrance: a Danish foresight
- I was invited to follow the meetings in an expert committee of doctors, health practitioners, and food specialists and seminars with stakeholders
- motivation came from a series of rather broadly observed contradictions between the hygiene strategies of cleaning and growing problems with allergies, resistant bacteria, and infections
- multiple possible explanations but a core question was about the impact of hygiene strategies

Controlled agendas - 1

- observed contradictions between the viewpoints taken in formal sessions and during breaks
- the expert committee very early defined: ’hygiene implies cutting off the paths of spreading illness’, meaning: pathogenic microbes must be removed
- (no doubt) this has been a medical paradigm paving the ground for a revolution in medical science and practice
- translating the aims of the foresight and (re-)establishing control by a dominant discipline

Controlled agendas - 2

- alternative views were expressed in breaks or identified as ‘absurd’
- an example was a coffee break where a lively discussion came up about bacteria communicating
- another discussion was about the strengthening of humans immune system as some doctors had applied for a grant to study how children could be exposed to more ‘dirt’
- but in official sessions alternative views were marginalised

Conditioned practice - 1

- diagnosis conditions the practices of professionals and lay people
- seems quite relevant in the case where specific pathogenic bacteria have to be eliminated
- but it gives a profession a more general say also in the hygiene strategies and leaves alternatives aside
- partly because their explanations are weak and the hygiene strategies building on collective actions and improving the human immune system instead of tracing the single case

Conditioned practice - 2

- in a stakeholder seminar the animal congestion in farms and at slaughterers was brought up but rejected as a causal relation and impossible to handle because of ‘economic processes’
- in the coffee breaks doctors and food engineers were talking about the next serious decease and how the health system would have difficulties in handling such a crisis
- salmonella is already seen as a limited problem compared to e.g. campylobacter

Alternative strategies

- when pigs, chicken and other animals are given (too) little space their immune system is weakened and the number of deceases increases
- sterile farms have lead to even worse epidemics as they also weaken the immune systems of animals
- antibiotics produces similar results which has lead to regulations of their use
- the working of the immune system and the co-existence of different pathogenic and other bacteria is crucial

Professional knowledge

- paradigmatic knowledge based on research and standardised and stabilised knowledge including the metaphysics and models of disciplines
- experience based knowledge from technological or other professional practices
- projections of knowledge and ideas from a discipline to a field of application
- tactical and situation dependent rhetorical repertoire
- interests in maintaining their professional control

A safe ground for critique?

- which professionals are the ’knowing’ and ’wise’ – is there a safe ground to judge expertise?
- sociology of knowledge / technology approach
  - identification of context,
  - conditions for development of knowledge, and
  - construction of claims
- an analytical basis to consider, judge, and plan for the use of expertise
- transparent foundations, but not based on consensus