



## SESSION ABSTRACT

### **Ethnographies of Infrastructure: Changing Work Places in Mediatized Society**

**Organizer:** Chrisopher Schlembach (University of Vienna), Michaela Pfadenhauer (University of Vienna)

**Abstract:** In the wake of (deep) mediatization of social worlds (Friedrich Krotz, Andreas Hepp) and the rise of what is labeled communication society (Hubert Knoblauch) work organizations are transformed both at cultural and structural levels. These developments invoke hopes and desires for humanizing work in the direction of a more equal and participative mode. The promise of digital communication or broader digitality as a medium of communication (Achim Brosziewski) to avoid hierarchies and to involve individuals in an ongoing conversation, however, is a mixed blessing and raises questions concerning new structural and cultural ramifications to avoid the pitfalls of organizational dysfunctionality and personal frustration as has been shown, e.g., by Catherine Turco's "The Conversational Firm."

The panel intends to address these issues at the level of work place and situational analysis not only in service and production industries but also in professional organizations like hospitals and educational facilities or in the realms of policing, surveillance and governance. Papers can address the transformation and re-figuration of social relations, but also of spatial arrangements or symbolic orders. Moreover, communication infrastructures not only transform work and/or interaction situations and processes but they also make dependencies, conflicts, and hierarchies visible, and they use their 'vernacular creativity' to appropriate, negotiate or even create work and workplaces. Both aspects can be addressed especially by ethnographic research. Finally, papers can address questions about how the "politics of infrastructure" (Susan Leigh Star) gains momentum from the symbolic level of categorizations, the social structural level of the transformation of social relations, and the material level of hardware and (digital) infrastructure.

## SESSION SCHEDULE

**Thursday, September 29, 2022 | Slot 4 | Room 2**

*Uwe Schäfer & Christopher H. Schlembach: Digitally Mediatized Learning Situations to Foster Gendered Patterns of Integration: Some Findings from Fieldwork*

*Antonia Modelhart: The crumbling infrastructure of antibiotics in biomedicine: doing healthcare amidst rising resistance to antibiotics*

*Christopher H. Schlembach & Michaela Pfadenhauer: Hospital Information Systems as Boundary Objects of a Mediatized, Multi-professional Hospital Work Setting*

## SESSION PAPERS

### **Digitally Mediatized Learning Situations to Foster Gendered Patterns of Integration: Some Findings from Fieldwork**

*Uwe Schäfer, Christopher H. Schlembach, Holger Bienzle, Ulli Röhsner, Uwe Schäfer*

In complex society, gender identity and gender relations are central elements of the pluralized and differentiated social structure. In the context of the 2015 European migration movement, these relations constituted a forum of encounter between migrant and native cultures which sometimes escalated in conflict, framed by media in more or less dramatizing ways. The research project Gender -- Identity -- Gamification (GIG), conducted by an interdisciplinary consortium of social scientists and adult educators working with migrants, analysed these cultural encounters of immigrants from Syria, Afghanistan, Pakistan and Iraq with the gender order of Austrian society and re-interpreted it in terms of opportunities of informal learning. In the course of the project, a prototypical digital learning tool was developed to reflect learning experiences and one's own gender identity in the light of normative expectations prevailing in contemporary Austrian society. Evaluating the usability and the educational potential of the learning tool, we observed and interviewed male and female participants of education programs for migrants as well as trainers of two participating education institutions by using thinking aloud techniques. While trainers appreciate that the learning tool evokes every-day life situations with which the participants are familiar, difficulties emerged between researchers and participants. Findings suggest that participants are fully aware of gender related social expectations which partly contradict their own attitudes. This phenomenon can partly be explained by the fact that participants interpret the researchers as representatives of Austrian society and its 'official' value structure. We conclude that the use of mediatized learning tools developed in the course of this project is based in (professional) relationships between trainers and participants that cannot be substituted by digital technology.

### **The crumbling infrastructure of antibiotics in biomedicine: doing healthcare amidst rising resistance to antibiotics**

*Antonia Modelhart*

In my PhD project on antimicrobial resistance (AMR) I address “antibiotics as infrastructure” (Chandler 2019) to grasp how antibiotics are entrenched in our current modes of living and how the crumbling infrastructure due to resistance mechanisms, the loss of the efficacy of antibiotics is met in daily hospital encounters. The functioning of healthcare in hospitals is deeply interwoven with the availability of antibiotics and its efficiency, though with varying functions: In one context, antibiotics

can compensate for the lack of other hygienic infrastructures and provide greater safety for medical interventions; in another context, they allow a faster pace of animal growth and human convalescence (Chandler 2019: 17). AMR now challenges these infrastructural nodes of antibiotics. Based on ethnographic research in Austrian hospitals, I am asking what kind of infrastructure antibiotics embody in certain situations to analyze, beyond the mere pharmaceutical agent, how aspects of care, how disease and health, are organized. It also helps to expose what is at stake and what societal threats may accompany it. At the same time, thinking about antibiotics as infrastructure and tracing the infrastructural processes can also show how to think beyond antibiotics as infrastructure: How are human-bacteria relations arranged if antibiotics can no longer act as a safety net in the background? I draw on the practices of hygiene management as a case of stabilizing human-bacteria relations in biomedical encounters amidst a crumbling antibiotic infrastructure. In approaching antibiotics as infrastructure, I aim to go beyond current shortcuts of addressing AMR as a behavioral, individualized problem in practices of prescription (physicians) and use (patients) and acknowledge the “deeper societal, economic and international relational pillars that support this infrastructure” (Chandler, Hutchinson et al. 2016: 17).

### **Hospital Information Systems as Boundary Objects of a Mediatized, Multi-professional Hospital Work Setting**

*Christopher H. Schlembach, Michaela Pfadenhauer*

In contemporary hospital settings, work relations are organized at the levels of organizational structure and more and more by digital communication infrastructure or health information systems. The interdisciplinary research project SMARAGD (Smart Aggregation and Visualization of Health Data) addressed these issues in a multi-disciplinary approach which involved ethnographically oriented sociologists, physicians, health scientists, computer scientists, legal scholars and work psychologists. The project explored the information needs of ergo- and physiotherapists and developed ways of taking their information relevancies into account in the ongoing development of health information systems. Field work in two hospital units which was based in an ethnographic semantics framework (Spradley 1980) offered insights into how information about patients' situations and therapy needs was generated and communicated by therapists. The treatment process can be analysed along two dimensions. (1) the hierarchy of professions structures digital information systems and the availability of and access to specific information. (2) documentation and communication work organizes the workflow in highly fragmented and multi-disciplinary work situations by aligning the patient's actual situation with his representation in the digital system. Therapists construct an image of the patient by scrolling through patient files and picking out relevant information which are not always available or structured according to their needs. Moreover, not all information relevant in the work situation is or can be documented by the digital health information system. Therefore, work-arounds like using oral or pencil-and-paper ways of documentation is used in order to keep the flow of information aligned with the patient's situation. We argue that professional groups within hospital negotiate the representation and communication of knowledge by interpreting the information system as a 'boundary object' which connects and differentiates disciplines, information needs and interpretive perspectives.