

COMMUNITY OF PROFESSIONS

- are not easy to access (only after intensive (self-)selection, long training and socialization)
- Have a 'licence to operate'
- Regulate their own business
- Want protection and support from society
- Are inner-directed

IVAN ILLICH: IATROGENESIS

- clinical iatrogensis damage through clinical action (wrong diagnosis, treatment, norms)
- social iatrogenesis damage through medical (over)consumption and medical interference in social/political issues -> medicalization of society
- Cultural iatrogenesis damage through autosuggestion, 'disease trap', learned helplessness,

BACKGROUNDS

• Professionalization through specialization, emphasis on functional rationality (= pigeon holing)

Perverse dynamics in control of public services (-> performance paradox)

• Meta-dynamics: taken-for-grantedness, unintended consequences, workplace silence/open secrets

POLEMISTOGENESIS

- Clinical polemistogenesis collateral damage (omelette)/taken for grantedness (e.g., casualties at the other side are hardly noticed). This includes non-intervention!
- Social polemistogenesis expanding influence of the military (politically, particularly in US; budgetwise at the expense of....; contentwise, f.i. disaster management; framing policies vis-a-vis social challenges as "wars on...")
- Cultural polemistogenesis unintended consequences such as Libya, peacekeeping, wartime inequalities in Israel

INSIDE POLEMISTOGENESIS

 Sacrificing own troops to gain operational dominance (spectacular example: Vietnam)

• Inside casualties, injuries and psychological trauma

ANALYSIS OF SOLUTION

- Health care knows: mediation, manipulation, ingestion and incursion
- Incursion is seen as most important and requires largest budgets
- Similarly the military values incursion most and trains their personnel particularly for this type of activities
- Ambidexterity and virtuous structures, cultures and policies could prevent this one-dimensionality