

Scientific discourse in and as public debate

Introduction

In this paper, we will analyse two short examples taken from Swiss media in order to describe how scientific discourses are made accountable as instances of expertise in and as public debates¹. In other words, we won't analyse the practical accomplishment of expertise as a scientific practice. But we will propose to elucidate it as constitutive instance of democratic public spheres. In consequence, this contribution will be less concerned with the "sociology of scientific knowledge", than with a praxeological approach of public spheres as phenomenon². Our first example will analyse a doctor's discourse about in vitro fertilisation (IVF), taken from a radio program. This broadcast was part of a larger public debate that took place in Switzerland during the first months of 2000 about a popular initiative³. In this case, the initiative was aiming to prohibit any technique of fertilisation outside the human body, as well as sperm gift. This discussion was generally framed as a medical issue. Therefore, the media gave medical experts a prominent position so that they inform the citizen-voters. Thereby they were regularly invited to take a stand publicly, pro or con. The intervention we will analyse can be seen as an opposition to the initiative, grounded on the exclusion of IVF as potential public issue. Our second example will focus on a historian's discourse, taken from a daily newspaper article. This article was part of a much wider public debate in Switzerland, about the so-called "Holocaust Assets and Nazi Gold" issue. This debate has been framed as part of a larger reassessment of the role of Switzerland during World War II. In the course of this wide discussion, it appeared that Swiss public and private institutions maintained close economical relationships with Nazi Germany until the last months of the conflict. These revelations rose major historical and moral questions, which led Switzerland to be suspected of complicity with the Nazi government. Hence, the Swiss government constituted an official Commission in charge of establishing an historical expertise about the role of Switzerland during the war. According to the Government, the Commission was mandated to establish the factual truth about the past, independently of the ongoing debate. The article we will analyse is the first public intervention of Jean-François Bergier, the president of the Commission. As we will see, his discourse is explicitly opposed to such a positivistic conception of historical work. In consequence, he presents the expertise as a constitutive part of a moral and political public debate.

Both cases can be seen as emerging "public problems"⁴. In the first one, the very deposit of the "initiative" made IVF accountable as a public and political matter. It engaged the Swiss citizens

¹ In a sense, this paper is concerned with categorisations. But we won't look at them from the way experts are individually and explicitly categorised in a discourse. We will rather concentrate on the way the category of "experts" emerges in courses of public action and discourses. Jean Widmer (2001 a and b) already stressed this point. Membership categorisations can be analysed as implicit adverbs, qualifiers for how the utterance is understood as an action. Thus, the availability of membership categorisations is to be found in the course of ongoing activities, and in the case of expertise, in courses of public actions and debates.

² This approach is inspired by the works of: Michel Barthélémy (1992, 1996); Michel Barthélémy and Louis Quéré, (1991) and Daniel Cefaï (1996; 2001).

³ The notion of "initiative" is specific to the Swiss political procedures. At any time, Swiss citizens can collect signatures on a project aimed at a modification of the federal Constitution. Provided procedural constraints obtain, the project is submitted to a national referendum. This political right is commonly used in the Swiss semi-direct democracy. Most of them occasion quite large public debates.

⁴ According to John Dewey (2003 [1927], 238-258), the "Public" is the distinctive group formed by those indirectly and seriously affected by the consequences of human collective actions. Thus, the constitution of a public generates a specific common interest to define indirect means in order to influence or control the situation.

to actively question these medical practices, to make their own opinion, in order to vote. In the second one, a public debate put the past of Switzerland in question. It made it relevant as a problem to be dealt with, and concerning the whole political community. In other words, the emergence of both questions as "public problems" engaged processes of public "enquiry" (Dewey, 1993 [1938]). Our core argument will be to show that expertise is, in both cases, experienced and publicly presented as one sequence of these courses of public action. Of course, these expertise might be respecified in a classical ethnomethodological way. We could thus describe them as an usual scientific practice (i.e. as local step by step practical accomplishments). But we will argue that such an analysis might miss the specific practical problems implied by the conduct of an expertise about public problems. On the first hand, in order to make his work accountable, the expert must make clear that he is not dealing on his own with a scientific question. In other words he must present his results as publicly (and not only scientifically) relevant. On the other hand, his work is accountable as an expertise when it appears as articulated to (and not completely isolated from) a larger public enquiry. In technical terms, it might be analysed as a sequence reflexively tied to (i.e. constitutive of and constituted by) a larger course of action.

This contribution will show that both these aspects of the accountability of expertise are not stipulated, but empirically observable in the data. Expertise can indeed be said to acquire public and consequential dimensions in and through its inscription in larger courses of action, reflexively tied to a particular topic. In this sense, the "experts" and their "public" could be analysed as "topical bound categories"⁵. In both cases, the development of courses of public action (a voting process about IVF and a debate about Switzerland's past) constitutes the public relevance of all categories involved. Whatever an expert could say about these topics is thus recognisable as part of their temporal developments. But, as we will see, this publicity of expertise can be accomplished in quite different ways. In the IVF debate, the expert publicly contests the publicity (in this case, the political dimension) of a medical treatment. In the historical debate, the expert calls for publicity, relying on the mandate delivered by the government and on the general availability of the results of his researches.

1. A doctor's discourse about IVF

Excerpt 1⁶

journal1 so let's briefly sum up . our own child/ in vitro
 fertilisation is a crutch/ h sterility is a disease <we
 are no laboratory rats/ ((slowly))> so precisely rene
 lizek behind the the black curtain of your laboratory/ h
 you select . yourself/ in certain cases the the
 spermatozoid which will meet the the ovule/ and which
 therefore might give life/ yet you grant yourself a <huge
 power ((low))> don't you
 lizek it's a power that Patients/ couples/ ask us to take we don't
 grant it: from nowhere/ couples come to see us in order
 to find an answer to their questions . so I think one thing
 has to be demythified . in vitro fertilisation/ is taking
 one spermatozoid . one ovule and setting them together

⁵ The reflexive links tying the development of a topic and the institution of relevant categories is analysed by Peter Eglin and Stephen Hester (e.g. 1999).

⁶ The original French transcription is presented as appendix 1.

journ2 but sometimes you CHOOSE the spermatozoid which will be the most lively the the strongest isn't there a responsibility here yet
lizek well among the techniques which could be banned by this referendum there's only one in which we make a choice/ in sperm gift the ovule is bathed in a . sperm bath so . nature decides/ in in vitro fertilisation it is also the case/ and it's only in the technique which is called icsi that is in the case where the sterility of male origin where one will indeed take ONE spermatozoid and introduce it into the ovule\ then one does a first washing so one will keep the ovules- spermatozoids which are the mightiest/ and then indeed at a certain time there's a choice\⁷

This excerpt is taken from a radio debate, which took place two weeks before the vote. Saying so, we mean that the few turns we selected for the purposes of our analysis are constitutively tied to the whole broadcast. In turn, the relevance of the latter appeared on the background of the voting process. This indication is analytically consequential. As such, the excerpt itself could be analysed as dealing with (quite a typical) ethical issue about IVF. As part of the broadcast, it acquires a specific meaning. If we turn to the introduction of the debate, it is clear that the IVF issue is not treated as the usual medical one, but as publicly relevant:

Excerpt 2

journ1 good evening did/ you know it\ since that day of 1978 when louise brown\ the first IVF baby was born six hundred thousands of children are born through in vitro fertilisation on the planet\ . and small switzerland is not outdone/ with two/ babies who are born each day through medically assisted procreation the famous PMA . a well-tried technique/ that remains to be seen\ since on next march the twelfth/ you will be required to give a decision on a popular initiative\ it is aimed at forbidding/ any artificial conception/ effected outside the woman's body

From the beginning of the broadcast (excerpt 2), the addressee of the debate is explicitly categorised as the citizen-voters. Given the temporal and political frame established in the introduction, the ethical question addressed in the first excerpt is given a public relevance. Thus, the key issue of excerpt 1 is to establish if the ethics of IVF can be treated as a public matter. The interviewee, R. Lizek, is a doctor who performs IVF. We will try to show that, as an expert, he proposes to distinguish clearly the public problem of human reproduction from its technical accomplishment as a medical treatment. This distinction is crucial to the legitimisation of the autonomy of both the medical corporation and the courses of action it conducts. In the perspective of the vote, this argument can be seen as a practical opposition to the initiative. Lizek accomplishes this stand-taking in and through two descriptions of IVF. In the first moment of excerpt 1, he describes IVF as an ordinary medical treatment. In the second

⁷ In the next turn, the journalist selects another speaker about another topic. He thus can be said to close Lizek's sequence about the selection process.

moment, he emphasises its plain technicality. As we will see, both these rhetorical moves contest the ascription of intentionality implied by the journalist's question. In so doing, the expert circumscribes his responsibility within the scope of his technical expertise, which is extracted from the public debate.

IVF as an ordinary medical treatment

We will now concentrate on excerpt 1. In the first turn, the journalist lists a few utterances that appeared in the adjacent testimony of parents who turned to IVF. The last one (we are no laboratory rats) is used to initiate a question explicitly addressed to Lizek. The premise of the question (behind the the black curtain of your laboratory/ h you select . yourself/ in certain cases the the spermatozoid wich will meet the the ovule/ and which therefore might give life/) exploits the metaphor of the laboratory rats. It gives a description of IVF as a laboratory practice. As such it can be characterized as 1) a secret and solitary practice (behind the the black curtain of your laboratory/ h you select . yourself/), and 2) as a process through which the doctor practically intervenes in the production of life (and which therefore might give life/). The stress on the activity of selection constructs an intentional actor at the heart of the practical process. That makes relevant a public moral questioning about the relation between a source of power and the practical intervention it allows (yet you grant yourself a <huge power ((low))> don't you). In particular, it clearly treats its potential description as a self-sufficient relation (you select . yourself/) as a moral problem. In other words, the question formulates the necessity to distinguish the medical course of action that produces human life and the external legitimisation/motivation of it.

The first part of the answer (it's a power that Patients/ couples/ ask us to take we don't grant it: from nowhere/ couples come to see us in order to find an answer to their questions) practically exploits that distinction by locating the patient couples in the motivation position. In so doing, the practical agent is morally neutralised. A parallel can be traced here with Greimas' narrative analysis. According to Greimas (1976), a narrative can be analysed as a structure of opposition between actantial positions. Two important positions are found in any narrative: the manipulator and the operator. The former ascribes to the latter a program of action. The manipulator will eventually evaluate the performance accomplished by the operator. We can see in the first question of the excerpt that both actants are occupied by the same figure, which is the doctor. The answer replaces the situation in the categorisation device of medicine, in which patients ask a doctor to do something. This recategorisation clearly distinguishes both greimasian actants. It constitutes an alternative IVF narrative that starts with the request of "patients-couples", and ends up with a successful medical answer.

This actantial distinction can be seen as a key to the whole question. What is at stake is the autonomy of the medical corporation. The question raises a political and moral issue: it describes the medical corporation as owning both the motivational and practical aspects of human reproduction. The answer relativises the autonomy of the medical corporation. It emphasises the role of "patients-couples" request in the process. As we will see the answer to that request is a practical course of action, which needs to be demythified, in the perspective of the vote.

IVF treatment as a plain technical process

In the second part of the turn, Lizek reformulates the process from the position of the practical agent. It is asserted as the truth of the matter, opposed to myths. This proposition to see IVF as a plain technical process (so I think one thing has to be demythified . in vitro fertilisation/ is taking one spermatozoid . one ovule and setting them together) can be heard as an answer to the intentionality ascribed by the question (you select . yourself/). The triviality of this alternative description constitutes IVF as a moral-free course of action.

The third turn (self-initiated by another journalist) retrospectively treats the first answer as unsatisfying (but sometimes you CHOOSE the spermatozoid which will be the most lively the the strongest isn't there a responsibility here yet). It gives an alternative formulation of the course of action, which stresses again an intentional and responsible actor. This allows another similar moral questioning in terms of the responsibility induced by the selection of gametes.

The answer relocates the question in the political course of action, through the announcement of a list of the techniques that would be banned, in case the initiative was accepted (well among the techniques which could be banned by this referendum). On the one hand it exploits the previous medical framing of IVF to indicate the possible forbidding of therapeutic techniques. In other words, it morally qualifies the initiative as obstructing the medical answer to legitimated parents' requests. On the other hand, the listing reduces the importance of the case the question treated. It is just one item in a list (there's only one in which we make a choice/).

Lizek then engages in an overview of the list. Once again, he stresses the lack of agency, apart from strictly technical operations. The problematic case is finally treated. It is identified as a very specific case. That rare case is then detailed in a list of activities. The answer exploits a kind of double zoom technique, designed to demonstrate the isolation of an intentional micro-action among a flow of technical and trivial events. Only this micro-action can be seen as an intervention in an otherwise completely natural process⁸ (in sperm gift the ovule is bathed in a . sperm bath so . nature decides/ in in vitro fertilisation it is also the case/).

Let's sum up. On the one hand, the expert intervenes to describe IVF as an answer to "patients-couples" request. That answer is presented as a common, and thus self-regulated, medical intervention. The only relevant categorisation device is the pair patients/doctor. Therefore, any public regulation is excluded. In particular, the type of political regulation proposed by the referendum appears as illegitimate. On the other hand, the categorisation of IVF as a therapeutic tool allows a reframing of the political course of action in an alternative narrative plot. In particular, a moral claim can be made about a potential forbidding of efficient medical techniques.

In so doing, Lizek paradoxically acknowledges and rejects the public dimension of the issue. On the one hand, he assumes that the Swiss citizens will decide on the fate of IVF. He intervenes in the perspective of the vote. On the other hand, his intervention simultaneously denies the legitimacy of a public action about an ordinary medical technique. In other words, the point is not that Lizek rejects the public dimension of IVF. His line rather consists in locating a public dimension of it, but clearly outside of IVF itself, which is construed as an autonomous device, a kind of "black box" (Latour, 1989). Lizek reverses the moral issue. He wonders on what grounds could anyone refuse to the "patients-couples" the access to an

⁸ A similar argument is used about "ICSI". Even if Lizek acknowledges a choice, he relativises it. His decision is submitted to a kind of "natural" pre-selection of the "mightiest spermatozoids".

efficient-and-morally-neutral-ordinary-medical-technique. In the perspective of the vote, the practical answer to that question is the rejection of the initiative.

This analysis leads to four theoretical and methodological points. First, a public debate can be analysed as involving a narrative component. Yet, greimasian narrative actants should be seen as logical resources in a political argument. The example shows that they emerge from a sequence of arguments in which the participants diverge on alternative narratives and treat the occupation of their actantial positions as politically consequential. Second, Gusfield (1981, 1-23) correctly pointed that the ascription of responsibilities is constitutive of public problems. But this phenomenon is not to be stipulated. It can be empirically observed, described and analysed as a practical accomplishment. In the excerpt, responsibility appears in and through the unfolding of a narrative. It is sequentially ascribed and reflexively tied to the establishment of the medical categorisation device. The development of the interview, as sequences of question and answers, progressively institutes “doctor”, “patients-couples” and “nature” as relevant categories. Third, the narrative and sequential ascription of responsibility is discussed in and through controversial descriptions. IVF appears as quite a different political issue under both descriptions proposed in the excerpt. When the journalists question Lizek, they endorse the perspective of the initiative, describing IVF as an intentional process (i.e. performed through the intervention of an actor who can be said to make a choice, for instance). On the contrary, Lizek answers describing IVF as a natural process (“nature decides”) made possible by a technique. This redescription can hardly be said to imply a political responsibility, except through an anthropomorphisation of nature and techniques as intentional actors⁹. Fourth, these three points (the narrative, the responsibility and the controversial descriptions of IVF) are practical resources used by the members to take and recognise accountable sides in a specific political debate. In other words, expertise is reflexively tied to a debate, and its practical accomplishment (implying a narrative, the ascription of responsibilities, and a description) makes it accountable as a stand taking in and through this debate.

2. An historian's discourse about "Dormant accounts"

Subsection: Dormant accounts

Title: The Bergier plan: clarity first

Sub-title: The president of the commission of experts delivers his credo: researching, but not judging...

Last paragraph: “[...] The commission is an agency of historical research, not a court of Justice, emphasises its president. It will devote itself to researching clarity. As an historian, he doesn’t like much the word “truth”. Formally, the commission cannot issue recommendations. It must present an interim report every six months. At the end of its work, a generally understandable synthesis should be presented.”¹⁰

This excerpt presents the title, the subtitle and the conclusion of a daily newspaper article. It was published about one month after the Swiss government constituted an Independent Commission of Experts (ICE). The article reports the considerations of its president, Jean-François Bergier, about the planning of its work. As we will see, in this article,

⁹ The distinction between the descriptions of natural causality and of intentional actions is developed by Vincent Descombes (1996).

¹⁰ A copy of the original article is presented as appendix 2.

Jean-François Bergier accomplishes a conception of expertise as part of a larger public inquiry. We will specify in which way this perspective differs from the one performed in the radio debate about IVF.

The title graphically emphasises “clarity”, presenting it as a “reading instruction” for the whole text. As we will see, this instruction accomplishes a specific definition of historical expertise in a democratic public sphere. First, Bergier presents the research of clarity by historians as an appropriate contribution with a view to solve the public problem of “dormant accounts”. Thus, it defines the issue as an historical matter. Second, clarity is not given, but has to be conquered through a process of research. Expertise appears as a future-oriented activity. Third, this process won’t close the discussion by formulating the truth of the matter. On the contrary, it leads to a clarification of the issue at hand, in order to stimulate a scientific, political and public debate¹¹.

“Dormant accounts” as a historical matter

Let’s analyse first the page setting. It relates a rubric (“Dormant accounts”), a title (“The Bergier plan: clarity first”), and a sub-title (“The president of the commission of experts delivers his credo: researching, but not judging...”). This presentation can be analysed as a progressive specification of an undetermined situation identified under the category “dormant accounts”. The title says it can be seen as requiring a plan. It institutes the issue as a “problem”, which has to be questioned, analysed and solved (Schutz, 1970, 116-117). In other words, the relation established between the rubric and the title supposes that something must be done about the dormant accounts. What has to be done (i.e. the “plan”) is specified in the sub-title. It is an activity of research, explicitly distinguished from another one: “judging”. More precisely, this activity and its definition are ascribed to Bergier, as “president of the Commission of experts”.

At this point, the article could be described as setting a narrative. It constitutes the dormant accounts as the starting point from which stories about the Commission of experts researching clarity can be developed. In greimasian terms, Bergier appears as manipulator. His discourse defines the appropriate way to specify what the “dormant accounts” situation is about. First, it is presented as something that needs to be clarified. Second, a Commission of experts is competent for accomplishing this clarification process. Third, this process will consist in “researching, but not judging”. The development of the article establishes these three dimensions as historical matters. It is as an “agency of historical research” that the Commission is a competent operator for researching clarity. As such, it will have to perform an historical research. And it is explicitly “as an historian” that its president plans the supervision of its work. To sum up, this article specifies the “dormant accounts” as an unclear historical matter, to be dealt with by an historical commission, leading a process of historical research, under the supervision of an historian.

According to a structuralist analysis, expertise appears as a performance that defines both a problematic situation and the actants competent to conduct its resolution. In the IVF case, a medical expert identifies the desire of baby as a patient request, and thus a medical treatment as an appropriate answer. In the second case, an historical expert identifies an unclear situation as

¹¹ In the language of John Dewey (1993, [1938], 170-179), Jean-François Bergier articulates a scientific (in this case a historical) enquiry with a public one. Both processes share the same schema. They ground and are grounded on: (a) the identification of an undetermined situation (in this case, the role of Switzerland during the Second World War); (b) the institution of a problem (how can the contemporary Swiss community deal with this past); (c) the determination of a solution to the problem (which is still to be found); (d) and an open process of reasoning.

an historical problem, which can be clarified through an historical research. In both cases, this tautological reasoning grounds the autonomy of expertise. From such a structural point of view, the discourses of both experts are similar. As we will see, this similarity vanishes as one accounts for expertise as a practical accomplishment. The latter is not only setting a “narrative”, which could be reduced to actancial structures (as manipulators, operators, etc.). It also constitutes a “problematic situation” as a “plot” (Ricoeur, 1983)¹². As such, the “dormant accounts issue” appears as both a configuration (a figure – ground relation) and a temporal order¹³. Its “emplotment” (*mise en intrigue*) institutes the relations between the identification of a problem, the agents competent to deal with it, and the temporal development of a course of action. What appeared as tautological in a structural perspective can be described as the application of a “consistency rule” (Sacks, 1974) at a topical level. In both cases, the development of a topic determines the adequacy of categories of experts legitimate to intervene in the media. It can be described as a practical resource for the accomplishment of journalistic work. From the beginning, the broadcast and the newspaper article institute the reflexive links between a topic and its experts’ categories. In so doing, they constitute “IVF” and “dormant accounts” as medical and historical matters. They thus refer to courses of public action, the stability (and the recognisability) of which is achieved through the consistent recourse to topically bound categories. As opposed to a structural analysis, this perspective focuses on the temporality of practices (Ricoeur, 1985, 15-162). It will make accountable the differences between a technical and a pluralistic conception of expertise. These, in turn, will appear as constitutive of specific public spheres.

Expertise as a future-oriented process

A first temporal figure of expertise is expressed inside the program of action itself. As we have seen, the title thematically specifies the “dormant accounts” as an historical matter. But it also constitutes it as a problematic situation to be developed, questioned and specified in and through a process of scientific and public enquiry. It projects a research leading to its anticipated unraveling: the future establishment of “clarity”. Thus, clarity as the object of the research is still to be discovered or conquered. Its content is not determined in advance. From this temporal point of view, expertise appears as a future oriented research aiming to clarify a situation. This could be glossed as a procedural conception of expertise. The latter is then a heuristic process: it can only be determined by the practical engagement of experts, the conclusion of which will emerge during its development. This conception of expertise differs from the one accomplished in the radio debate. In the IVF case it mainly consists in the technical applying of past discoveries in order to solve a clearly identified problem. Thus, the outcome of the experts’ intervention is entirely predetermined. Its completion is reached with the answer to the “patients-couples” request, that is to say with the successful production of a baby¹⁴.

¹² “[A] situation is not any temporal unity. It can be said to have a plot structure. Indeed a situation emerges when something unravels (*se noue*); its unforeseeable development corresponds to the unfolding of peripeteia, of contingencies and initiatives, which lead to its unravelling (*dénouement*). The whole constituted by these peripeteia, contingencies and initiatives forms a configuration: they are integrated into a totality where they find a unity, an identity and a sense [i.e. a meaning *and* an orientation]” (Quéré, 1996, 182).

¹³ These temporal and configurational properties of enquiries are pointed by Lynch et al. (1983).

¹⁴ Following John Dewey, we could say Lizek presents IVF as a technical response to a determined situation. As such, it does not initiate an open-ended process of enquiry. It is not constituted as a plot, and thus can be seen as closed from its beginning. “When a suggested meaning is immediately accepted, the enquiry stops” (Dewey, 1993 [1938], 176).

At this point, we have seen that in both conceptions, expertise is presented as a topically bound activity. But their temporal textures are radically different. In the IVF case, the radio debate offers a position from which the expert delimits his autonomy. He delegates the initiation of his intervention to the external request, but determines its end on his own, as the success of a medical treatment. On the contrary, the newspaper article establishes a topical bound between Switzerland's past and the historical commission. It thus constitutes an enunciative position from which its president grounds the adequacy of his work, by defining the situation that requires his intervention. But he leaves its end undetermined, or more precisely to be determined in and through the accomplishment of an enquiry. Lets now turn to the consequences of these distinct temporal textures of expertise for its inscription in a public debate.

Expertise as an open-ended process

In the article, the key word "clarity" is not only the central resource to identify the historical character of the problem at hand and of the agents legitimated to elucidate it. It is explicitly opposed to the close notion of "truth": "[The commission] will devote itself to researching clarity. As an historian, he doesn't like much the word "truth"". This distinction delimits the experts' work. As they can research clarity, but not truth, experts "cannot issue recommendations". They will regularly present interim reports and conclude their work with the publication of "a generally understandable synthesis". Thus, the work of the ICE is presented as an historical research articulated to a public enquiry, being both considered not only as future oriented activities, but also as open-ended processes. The matter of "dormant account" is a situation that needs to be clarified through a research process that requires the scientific intervention of historical experts. But as they do not claim to define the truth, their results won't be the last word about the history of the role of Switzerland during the Second World War. The outcome of the expertise, in this case "clarity", is thus conceived as a first step in a wider plan ("clarity first"). This conception projects further debates about this topic. In this perspective, the conclusions of the commission should be "generally understandable". Through that recipient-design feature, they can be conceived as a contribution to the information of citizens, enabling them to take a part in the reassessment of the role of Switzerland during the War. This description contributes to the definition of "dormant accounts" as a question of public (and not only scientific) interest.

In consequence, the conclusions of the commission are not conceived as the closing version of the "dormant accounts" question. They only contribute to its clarification, in order to orient a wider public debate, which should draw the practical inferences of this situation, and thus define a program of action in order to solve its problematic character. The work of experts appears as part of a political and public process of elucidation of the past, constitutive of what Jürgen Habermas (1962) analysed as a liberal public sphere¹⁵.

This conception of expertise is quite different from the one accomplished in the radio debate we analysed before. There, the completion of the intervention is assessed on expert grounds. Therefore, the expertise doesn't open a public discussion, but closes it before it could even start.

¹⁵ According to Habermas' normative and procedural conception of public spheres, their political dimension relies on free discussions, characterised by the critical use of reason. To some extent, this conception is compatible with the one defended by John Dewey (1993 [1938], 176-177). In his theory, the emergence of "public problems" initiates a public enquiry, involving an open-ended process of "reasoning". It grounds a conception of public spheres as experiences. In other words, the "public experience" can be defined as "an anonymous and continuous process, which dynamically organises actions and conducts adjusted to situations [...]" (Quéré, 2001).

Then, medical production of human life appears as a black box inside the public discussion. The autonomy of medical expertise is then accomplished by making itself immune to any democratic sanction. On the contrary, the Independent Commission of Experts autonomously defines the procedures of its work. And its results should not only be publicly discussed, but should implicate as many citizens as possible in the reassessment of Switzerland's past. In both cases, the media discourse institutes a public topic as its main resource. It is legitimated as part of a discussion about a public topic, which provides the categories it concerns. In this sense, the "public" and the "experts" enunciatively implicated by these discourses are "topically bound". In turn, these positions can be analysed as resources from which the topic and its categories can be respecified. In the broadcast, Lizek recognises the political public of the initiative about IVF. But his discourse can be seen as a way of contesting his competence and his legitimacy to assess IVF. He presents the latter as a plain technical matter, concerning couples and doctors. As such, it appears as a private matter that can be staged for the audience of media. But it is not a political matter in which the citizen could intervene. The newspaper article presents the "dormant accounts" as an unquestionably public matter. It institutes the position of historical experts and the results of their work as publicly interesting. In this frame, Bergier is shown accomplishing historical research as a future-oriented and open-ended process, that can (and should) be publicly discussed. So far, the development of a topic appears as a main resource for media discourse. It establishes sequences of actions that can be analysed as predicates through which the media make the experts and their publics accountable.

Conclusion

In this paper, we attempted to describe the discursive logic of expert interventions in public debates. These interventions establish the systematic relations between the identification of a problem, the experts that are legitimated to deal with it, and the properties of the course of public action designed to treat the problem.

In the radio debate about IVF, the expert ascribes the definition of the problem to couples categorised as patients. The course of action is therefore intelligible with the pair patient-doctor. This categorisation device institutes a kind of adjacency pair: patient request-medical treatment. The doctor is not only legitimated to but also morally bound to provide the second pair part. That categorisation circumscribes a sequence of actions that is opened by the request and closed by the successful application of the technique. That sequence of action appears as being autonomous in that it defines a descriptive as well as normative scope.

In the newspaper article about the planning of ICE's work, the identification of the three components (problem-experts-political action) is made in a different way. The role of Switzerland during the Second World War is presented as an open-ended phenomenon, which is to be clarified in and through an open-ended enquiry. This epistemological conception of history involves a moral dimension of scientific but also of public concern. This open-endedness ascribes a specific role to the commission of experts. As historians, they are legitimated to conduct a research about past events. But their findings will not be the last word in the debate. On the contrary, they are only a contribution to a social work of elucidation. They call upon subsequent interventions to draw their practical inferences in terms of public action. What can be termed an "autonomous field", according to Bourdieu (e.g. 1980, 113-120), or the "ownership of a problem", according to Gusfield (1981), can then be observed as local and practical accomplishments. In the IVF case, the discursive intervention institutes the reflexive relation between the medical description of the problem and its medical treatment. This kind of

tautology can be analysed as ordered means to discursively perform the autonomy of a field. That form of closing rejects any claim to ownership from categories other than patient and doctor.

In the “dormant accounts” case, the article proposes a conception of history as both an open-ended and public process. In consequence, the historical experts can be said to be owners of the procedures of expertise, but not of its conclusions. The epistemological stand simultaneously closes and opens the historical field. The beginning of expertise opens a kind of parenthesis that grants the autonomous conduct of a historical research. But, as we have seen, this closing is considered as the beginning of an open-ended heuristic process. The accomplishment of this temporal texture can be analysed as contributing to the accountability of history as an interpretative process. It is thus submitted to a pluralistic and polarised public debate.

These differences could be accounted for by a prescriptive epistemology. The different construal of expertise would be related to distinct logics of knowledge production. History as a human science would only produce interpretative results, whereas medicine is grounded on the hard facts of the natural sciences.

We do not intend to enter the discussion of that "big divide". On the one hand, we tried to show that such controversial conceptions are accomplished by experts public interventions. On the other hand, we tried to analyse their temporal structure as consequential for the conduct of public debates. Expertise appears as an ordered means either to achieve the closing of a debate, or to manage its open-endedness. Expertise constitutes then a perspicuous case of diverse accomplishments of democratic public spheres. In some cases, these appear as a sequence of closed stories, which are produced through restrictions of actors. In others, they can be described as an open-ended (and expertly informed) discussion on what is discussed and whom it can be discussed with.

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Appendix 1a

- journal1 alors si on fait un résumé succinct notre enfant à nous/
la fécondation in vitro est un béquille/ h la stérilité
est une maladie <nous ne sommes pas des rats ((lent))> de
laboratoires/ alors justement René Lizek derrière le le
rideau noir de votre laboratoire/ h vous sélectionnez .
vous-même/ dans certains cas le le spermatozoïde qui
rencontrera l'ovule/ et qui pourrait donc donner la vie/
vous vous octroyez tout de même un <immense pouvoir
((bas))> non
- lizek c'est un pouvoir que les Patients/ les couples/ nous
demandent de prendre nous ne l'octroyons pas: de nulle
part/ les couples viennent nous voir pour . essayer de
trouver une réponse à leurs questions . alors je crois
qu'il faut démythifier une chose . la fécondation in vitro/
c'est . prendre un spermatozoïde . un ovule et le mettre
ensemble
- journal3 ouais mais parfois vous CHOISISSEZ le spermatozoïde qui
va être le plus vivant le le plus fort/ est-ce que là y
a pas une responsabilité/ quand même
- lizek alors dans les techniques qui peuvent être interdites par
cette initiative il y en a qu'une seule où nous faisons
un choix/ dans le don de sperme l'ovule est baigné dans
un . bain de spermatozoïde donc . c'est la nature qui
décide/ dans la fécondation in vitro c'est également le
cas/ et c'est seulement dans la technique qu'on appelle
l'icisi c'est à dire au cas où la stérilité d'origine
masculine où on va prendre effectivement UN spermatozoïde/
et l'introduire dans l'ovule\ alors on fait d'abord un
premier lavage donc on va garder les ovules- les
spermatozoïdes les plus vigousses/ et ensuite
effectivement à un moment donné il y a un choix\

Appendix 1b

- journal1 bonsoir le/ saviez-vous\ depuis ce jour de mille neuf cent
septante huit où Louise Brown\ premier bébé éprouvette
vint au monde six cent mille enfants sont nés de la
fécondation in vitro sur la planète\ . et la petite suisse
n'est pas en reste/ avec chaque jour deux/ bébés qui
naissent de la procréation médicalement assistée la
fameuse pma . une technique qui a fait ses preuves/ à voir\
puisque le douze mars seuh prochain/ vous serez appelés
à vous prononcer sur une initiative populaire\ elle vise
à interdire/ toute procréation artificielle/ effectuée
hors du corps de la femme .