Animal Liberation Tasmania
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Dear Minister Ferguson,

While the ethical aspects of Hermann Nitsch's *150.Action* during Dark Mofo have been extensively discussed, Animal Liberation Tasmania would also like to raise the health concerns associated with this performance.

It is the understanding of Animal Liberation Tasmania that the performance involves the use of a bull carcass and 500 litres of animal blood. This carcass and blood is to be handled by volunteers most probably from the Tasmanian community, with spectators at close proximity.

This situation in terms of post-processing animal handling is similar to that of an abattoir, and as such common risks relevant to abattoir workers are applicable here.

Meat and Livestock Australia (MLA), with the help of the Australian Meat Processor Corporation (AMPC), have created Occupational Health & Safety (OHS) Reference Guides for the Australian Meat Industry[1]. These guides are further promoted by the National Meat Industry Training Advisory Council Limited (MINTRAC).

The concerns raised in this submission are largely based on the information in these guidelines, as they are well researched and widely credited around Australia.

The World Health Organisation defines zoonotic diseases as diseases and infections that are naturally transmitted between vertebrate animals and humans[2].

The MLA states that in the Australian agriculture industry the three main zoonotic diseases are Q fever, brucellosis and leptospirosis, though there are many more viral, bacterial and fungal conditions that can occur too. Slaughterhouse workers are identified as a high risk population.[1]

This submission will focus on Q fever due to its notability in animal agriculture, prevalence in cattle and the subsequent risk of transmission in a performance such as *150.Action*.

Q fever is a notifiable disease in Tasmania caused by the bacteria *Coxiella burnetti*. This organism is extremely infectious, with particles in blood and body fluids of infected animals forming droplets that can be inhaled by humans and cause disease. Though the incidence of Q fever is low, it is relatively high in Australia compared to other countries in which it is a notifiable disease. Furthermore, it is commonly recognised that rates are probably

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underestimated due to the non-specific symptoms of presentation and subsequent difficulty in diagnosis.[3]

The Australian Immunisation Handbook recommends the Q fever vaccination be given to all populations at risk, including “abattoir workers, farmers… and others exposed to cattle or their products”.[4]

Q fever infection can range from being asymptomatic to resulting in significant ongoing disability. Most commonly the clinical manifestations are fever, headache, night sweats, fatigue and anorexia. Severity can vary widely, with illness lasting between 1-6 weeks. In over 10% of cases there is serious ongoing illness, resulting in disability for 6 months or longer, referred to as post-Q fever fatigue syndrome. In a recent study using an Australian cohort, end-organ damage in the form of hepatitis occurred in half of the cases, though any organ can be affected. The same study reported contact with livestock as “the predominant risk factor for contraction of Q fever”. Interestingly, windborne transmission has also been implicated in situations where people who have not had direct contact with infected animals have been infected from inhalation of particles by simply living in the same area.[5]

It is not possible to identify an infected animal by simple observation or handling. As such, MLA recommends certain hygiene practices be implemented in the handling of all cattle and body products. These are extensive and can be viewed in their OHS Reference Guide, but include hand hygiene, proper ventilation, appropriate disposal practices of body products, efficient drainage of blood, daily cleaning with germicide and use of correct Personal Protective Equipment (PPE) including gloves, goggles, masks, waterproof boots and plastic aprons when contamination with blood is likely. Even so, vaccination is the only way to effectively prevent Q fever. MLA also recommends visitor protocols, which involves visitors to have proof of Q fever immunity before entering processing plants, as risk of airborne infection is high in this population.[1]

Animal Liberation Tasmania requests the State Government to state how they are intending to protect the Tasmanian community from the risk of infection if this performance is to go ahead. Will proper hand hygiene and PPE be employed for those participating in the performance? Given the recognised potential for windborne transmission in close proximity, will all spectators be required to have a Q fever vaccine, of which there is no government subsidy for the majority of the population attending?

In Tasmania, this area of jurisdiction is covered by the *Animal Health Act (1995)*. *The Act* allows certain areas to be declared protected by the Chief Veterinary Officer if they “consider it prudent to do so for the purpose of preventing the introduction into, or the spread in, that area of a disease” (section 42).

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The Minister has powers to direct the Chief Veterinary Officer to do so if they "(a) has consulted with any organisations or bodies representing persons who are likely to be affected by the implementation of the program; and, (b) is satisfied that it is in the interests of the State as a whole to implement the program" (section 50).

It can be argued in this situation the Minister, and subsequently the State Government, is neglecting their duty to the Tasmanian community by not using *the Act* for presumably one of the purposes it was created.[6]

As if these public health concerns are not enough, the artist has also expressed his wishes for the carcass to be consumed at the conclusion of the performance. Animal Liberation Tasmania has not received confirmation from the event organisers as to whether this will indeed occur, but will nevertheless include the health concerns associated with this practice.

Escherichia coli, the *Salmonella* genus and the *Campylobacter* genus of bacteria are all commonly associated with gastroenteritis (colloquially termed food-poisoning) due to the consumption of raw or poorly kept meat. Clinically patients present with diarrhoea, vomiting, nausea, abdominal cramps, dehydration and headache. They represent a public health concern due to ease of transmission. It is well known that prevention is key in regards to food-borne illnesses, and that abiding by safety standards and thorough cooking is recommended for the consumption of any meat products.[7]

Meat is a "potentially hazardous" food under the Australian Food Standards, and as such must be kept at either below 5˚C or over 60˚C for the time it is received, displayed, transported and stored (Standard 3.2.2).[8] This standard does not seem plausible to maintain if the carcass is used as a performance piece.

The *Tasmanian Food Act 2003* states that "A person must not handle food intended for sale in a manner that the person ought reasonably to know is likely to render the food unsafe" (section 13).[9] Though the meat in this situation is not intended for sale or commercial use, as the end result is public consumption it can be argued that *the Act* should still apply.

Furthermore, even if the carcass is not consumed at the end of the performance, members of the Tasmanian community are still interacting at close proximity with the carcass, and it is not unreasonable to suggest bacteria in blood or entrails could be transmitted to participants in an incidental fashion. Indeed, it is the understanding of Animal Liberation Tasmania that in previous performances blood has been poured into the mouths of participants.

Animal Liberation Tasmania believes if the State Government allows this performance to go ahead despite well-documented evidence that the consumption of poorly kept or raw meat can

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cause public health issues then they are treating the health of Tasmanians with a lack of care bordering on negligence.

Overall, there are serious health concerns regarding *150.Action*. Q fever is a prominent and potentially serious infection that has been recognised by regulating bodies to be easily transmissible by contact with cattle and their body parts, and even more pressingly, by simply sharing the same air. Furthermore, Union Safe Australia and Tasmanian Unions both recognise Q fever as a workplace danger, let alone as a danger to the wider community. This is without even considering the implications of Hermann Nitsch being granted his wishes for members of the community to eat the carcass, or of incidental food-borne illnesses.

For these reasons, Animal Liberation Tasmania calls on the authorities to treat this performance as a public health concern and protect the Tasmanian community from these health dangers by preventing this performance from going ahead.

Thank you,

Mehr Gupta BMedSc(Hons)

Animal Liberation Tasmania

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