Politics and practices of global health: Critical ethnographies of health systems

Dr. Katerini T. Storeng
Centre for Development and the Environment
University of Oslo, Norway
katerini.storeng@sum.uio.no

Dr. Arima Mishra
Azim Premji University
Bangalore, India
arima.mishra@azimpremjifoundation.org

The 9th Conference on Global Health and Vaccination Research
Oslo, 17-18 March 2015
Global health and health systems

- Growing recognition that weak health systems threaten global health progress
- Renewed global and national commitment to strengthening health systems
- No consensus on what HSS entails
Global Public Health special issue

- **Aim:** To demonstrate the potential of ethnographic enquiry to reinvigorate a political – rather than technical – debate about ‘health systems’

- Ethnography as the study and systematic recording of human cultures, including the culture of global health
Social science and health systems

• Recent calls for a social scientific perspective that challenges the biomedical and technocratic understanding of health system policies and practices (Gilson et al., 2011).

• New global health subfield of health policy and systems research (HPSR), research...
• ...but prone to ‘disciplinary capture’ by dominant health research traditions driven by utilitarian or instrumental views of health systems and policies

• Recognized need for conceptual and theoretical engagement with disciplines with strong analytical focus on the social and political aspects of health systems (e.g. social medicine and medical anthropology)
Anthropology’s engagement with health systems

• 1970s onwards: medical systems within larger historical, economic and political contexts (Janzen, 1978; Kleinman, 1978)

• 1990s onwards: critical interpretative analysis of assumptions that frame problems of relevance to health

• Increasing focus on the dynamics of ‘global’ public health
Anthropology’s marginal position within global health research

- Anthropologists tend to publish in specialist, disciplinary journals
- Mistaken tendency to dismiss qualitative forms of enquiry as insufficiently rigorous to inform public health policy and practice
How can ethnography contribute to HSPR?

- Ensure that the evidence base that frames global health debates is ‘inclusive and represents multiple dimensions of the human experience, including the voices of those affected by global processes’ (Pfeiffer & Nichter, 2008, p. 43)

- Address ‘blockages in the upward flow of information from localities and regional centres, about realities of professional practice and about patients’ lives and conditions of treatment’ (Feierman, Kleinman et al., 2010)
How can ethnography contribute to HSPR?

• Reveal how global health policies and programmes interact with weak health care systems to shape people's access to health care and experiences of ill health and care-seeking

• Uncover the health systems’ role in expressing and reproducing the ‘structural violence’ that shapes the unequal distribution of global health problems
Ethnography applied to global health

• Not just the use of qualitative methods
• Questioning the categories that we take for granted
• Asking awkward questions
• Interrogating the social relations, histories and politics that shape the way we think about health
Our special issue

- Multi-sited and multi-layered ethnographic research in Kenya, Burkina Faso, Mongolia, Gambia and three Indian states, and within the centres of global health power
- Questions about the relationships between policy, discourse and practice
- Privilege the perspectives of a range of global health actors
Special issue articles

• Storeng: how global health initiatives (GHIs) have appropriated the rhetoric of health system strengthening (HSS) in favour of their disease-specific approach and ethos

• Prince and Otieno: how differential access to medical technology and infrastructure in Kenyan public sector medical practitioners and nearby globally-funded HIV clinics impact on professional practices
• Kielmann et al.: the social relations and working roles that underpin a public–private initiative for directly observed treatment for TB in Western Maharashtra, India

• Mishra: local meanings of HSS from the perspectives of community health workers charged with implementing India's National Rural Health Mission (NRHM) in Odisha, India, focusing on the notions of teamwork and building trust with the community

• Roalkvam: health system reforms as instruments of state governance that articulate citizenship through values of equity and rights in Rajasthan, India
• Lindskog: how winter disasters, migration and donor-driven neoliberal health sector reforms combine to fragment access to healthcare in Mongolia

• Sundby: the tension between local state autonomy and the donor-driven trend towards uniformity and top-down priority setting in the history of Gambia’s reproductive health policy

• Storeng & Ouattara: how abortion policy in Burkina Faso is shaped at the interface of global and local norms
Our shared aims

• To take ethnography beyond the traditional preoccupation with the ‘local’ by conducting multi-sited ethnographies of multiple stakeholders in health systems, donor communities and emerging global health networks.

• To analyse the ‘the social processes, power relations, development culture and discourses that drive the global health enterprise’ (Pfeiffer & Nichter, 2008, p. 413).

• To demonstrate how ethnography can reinsert politics into technical debates about health care delivery and systems.
• All articles are open access and are freely available from the Global Public Health website: http://www.tandfonline.com/toc/rgph20/9/8#.VQk4fMZN3FK

• Thank you to the Research Council of Norway GLOBVAC programme and to LEVE for funding our research and analysis workshops and open access costs