

Tuberculosis in India - A case of innovation and control

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Abstract

India is the country with the highest number of Tuberculosis patients. The current fight against TB in India is characterized by an existing control structure that has been dealing with the disease already for decades. At the same time the 'New Tuberculosis' is emerging due to additional challenges and combined effects of poverty, migration, HIV co-infection and the development of drug resistance. Increased international attention to TB and multi-drug resistant TB (MDR-TB) in recent years, portrayed as pressing global public health challenges, has also brought new opportunities in the form of new actors, new funds and progress in technology and medicine.

This thesis draws on innovation studies and Science and Technology Studies to examine innovation dynamics in organizational, strategic, technological and service delivery aspects of public Tuberculosis control in India. The results reveal that the dynamics of innovation and control in coping with Tuberculosis in India are a complex interplay of mutual influence and requirement. This is often disregarded by actors in the field.

Innovation and control mean different things at all levels and across the different worlds of Indian TB control. It is an ongoing struggle to find the right balance and to negotiate trade-offs. Controlling for example every aspect of a diagnostic process through standardization can exclude local scientific expertise and local non-scientific expertise and as a result face challenges in the field. Yet, innovating a diagnostic test without standardizing operational processes is not feasible for the TB programme and will fail to be taken into consideration by the decision-makers. Fostering innovation at any price is therefore not advisable; instead, balances between innovation and control need to be continuously assessed. Rather than providing advice on an optimal balancing act between innovation and control, I argue that these balances need to be found in situated assessments of the relation between innovation and control. The mechanisms that would need to be fostered in order to create strong, flexible innovation capacities are therefore situated assessments of the relation between innovation and control.

About the speaker

Nora Engel joined the PHD Programme on Innovation Studies and Development at UNU-Merit, United Nations University and University of Maastricht, in September 2006. She has a background in Media and Communication Sciences, Psychology and Art History from the University of Zurich and at the Humboldt University and Freie University in Berlin. Next to academia she had engagements in media, PR, culture and politics in various smaller agencies, the Council of Europe and her own cultural project, The Club Exchange Programme. She also explored the field of future studies/ foresight, particularly with regard to health and nutrition,

while working in a foresight company, Z_punkt GmbH. Nora's research interests lie at the intersection of Science and Technology Studies, Innovation Studies, global health and development. Her PhD project is titled "Tuberculosis in India: A case of innovation and control" under supervision of Prof. Wiebe Bijker (University of Maastricht), Prof Harro van Lente (Utrecht University) and Dr. Ragna Zeiss (University of Maastricht). The extensive qualitative fieldwork in India is based on in-depth interviews with key stakeholders, documentary research and visits to various sites. By examining different forms of innovation dynamics in organizational, technological, strategic and service delivery aspects of TB control, from decision making to implementation in a field level context, the thesis aims at showing the development of progress within public health policy and control practices along a specific public health challenge. Such an analysis can reveal how a control structure copes with uncertainty created by changing challenges, how new opportunities are made use of, whether there is a culture of innovation and how it looks like, whether and how social/technological change, new ideas are fostered and what barriers and drivers are impacting these developments. It offers furthermore a reflection on progress in knowledge production and service delivery within a public health context, on rigidities and flexibilities in reacting to a changing public health challenge like Tuberculosis and potential threat such as multi-drug resistant TB. Such insights can eventually help to enhance and foster response capacity of a public health system and simultaneously contribute to theoretical literature on innovation in healthcare, the public sector and services.

Venue: Minderbroedersberg 4-6, Maastricht

Time: 12:00 - 13:30