

“Towards eliminating viral hepatitis”: Examining the productive capacity and constitutive effects of global policy on hepatitis C elimination

Lancaster, K.¹, Rhodes, T.^{1,2} and Rance, J.¹

¹Centre for Social Research in Health, UNSW Sydney, ²London School of Hygiene and Tropical Medicine

BACKGROUND

In 2016 the World Health Organisation (WHO) published the first global health strategy to address viral hepatitis. Subtitled “Towards ending viral hepatitis”, this strategy set a goal of eliminating viral hepatitis as a major public health threat by 2030. The targets have generated action. However, there has been little critical attention paid to the productive capacity and constitutive effects of this policy. How is governing taking place through the mechanism of this global strategy, and how are its goals and targets shaping what is made thinkable (indeed, what is made *in the real*) about hepatitis C (HCV) and its elimination? And with what effects?

METHODS

We draw on poststructural thinking on problematisation and governmental technologies to examine how ‘elimination’ – as a proposal – constitutes the problem of HCV. We examine how governing takes place through numbers, by analysing ‘target-setting’ (and practices of management and quantification) as governmental technologies. Thinking with these approaches allows for analysis of the political effects of practices; that is, of what governing practices *perform*.

ANALYSIS

Making viral hepatitis visible

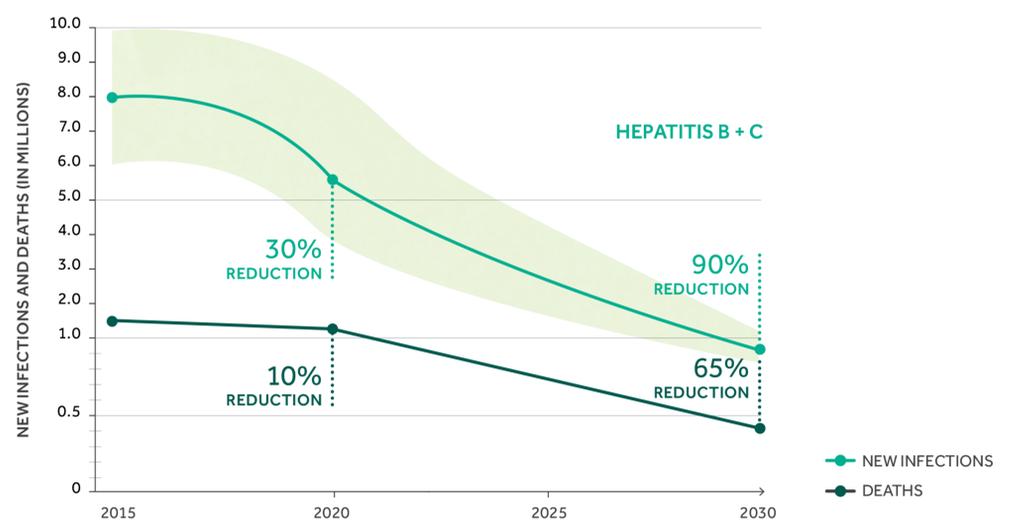
- References to HIV, tuberculosis and malaria produce viral hepatitis as ‘major’ problem, recognised on a global scale.
- By being made visible through the governing mechanism of the Agenda for Sustainable Development, it is produced as a manageable entity.
- The proposal to make visible viral hepatitis as a health and development priority produces it as a solid and observable ‘problem’ which can be acted upon.
- Implicit is the assumption that what is required to generate action is a recognisable condition.
- Through supranational governing practices and the technology of strategy formation, viral hepatitis is transformed from a complex or hidden entity into one recognisable and amenable to structuring, action, and multilateral global management.

Quantifying and targeting viral hepatitis

- Central to making viral hepatitis visible and controllable through targeted action is quantification.
- Numbers are used to describe the complex social phenomena of hepatitis infection, transmission, deaths, treatment and care in countable and commensurable terms through categorisation and simplification.
- Viral hepatitis is made as a problem requiring urgent public health management through quantitative representation and comparison of estimated rates.
- These estimates are mere traces of socio-political and biological events, mobilised and accumulated, inscribed and transported in standardised forms.
- Quantification generates policy action, but what is represented as non-political, objective and authoritative is not always numerically specific.

CONCLUSION

HCV and its elimination are enacted through policy, targets and practices of global health. These technologies of governing shape how HCV is constituted a ‘problem’. A challenge is to think about how we might maintain the momentum generated by the production of a singular, recognisable and globally manageable viral hepatitis, while also creating space for other (local) matters of concern.



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CONTACT

Dr Kari Lancaster
k.lancaster@unsw.edu.au
@kari_lancaster

Centre for Social Research in Health
UNSW Sydney NSW 2052
csr.h.arts.unsw.edu.au