

Outsourcing the Laboratory?

(Point-of-care) Diagnostic technologies and the rise of a testing paradigm in Global Health

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Inadequate diagnosis of diseases remains to be among the central limitations of health care systems in many developing countries. Therapeutic rationale has it that treatment with quality medication can only unfold its full potential when there is diagnostic evidence that patients are actually suffering from the disease they are treated for. In the last decade we can thus observe a shift of focus in Global Health towards 'point-of-care' diagnostic technologies (mainly for HIV, tuberculosis and malaria). In the proposed symposium this shift shall be interrogated analytically and conceptualized as part of a broader socio-technical shift to testing as a newly emerging therapeutic paradigm in Global Health.

What has been coined "point-of-care" or "out of the lab into the field" refers to highly mobile and simple to use devices that aim to account not only for lower-skilled health work forces but also is catered directly to poor populations. While this emphasis on diagnosis pays attention to the limited human and financial resources of most of the formal public health care landscape in developing countries, the focus on diagnostics also promises to be more inclusive, responding to the needs and limited financial capacities of the majority of the target populations to access even basic health care services. Furthermore, the devices extend the geographic reach of biomedicine in developing countries by bringing diagnosis into regions with low coverage of formal health facilities. One core strand in R&D as well as implementation programs is concerned with the improvement of usability and mobility of new diagnostic devices particularly in remote areas.

The symposium "Outsourcing the Laboratory" is aimed to open-up an interdisciplinary discussion on the effects and impact of point-of-care diagnostics across diseases as well as geographical contexts. Taking into account that most research and discussion on diagnostics centres on prominent

infectious diseases like HIV, TB and malaria, the symposium encourages a more comprehensive and comparative perspective on the topic. Going beyond this emerging discourse and focus on the 'big three' infectious diseases, the symposiums' aim is to better understand the socio-technical and public health implications of this – in scale and scope – unprecedented shift in Global Health. We aim to bring together more empirical depth as well as novel conceptual frameworks that allow us to identify fundamental differences and commonalities *across* diseases and places.

The symposium invites contributions on the following dimensions and questions in particular:

1. **The Rise of the Testing Paradigm in Global Health:** what can be learned from a comparative view on point-of-care diagnostics across diseases? How does one conceptually and methodologically best think about diagnostics, and what they do/represent? How can one conceptualize the different modes of knowing diseases that different diagnostic tools enact? How to account for new knowledge/information emerging from scaled-up testing?
2. **The Biopolitics of Diagnostics:** why and how have these technologies become crucial to current Global Health efforts? What do they symbolize, what is privileged and what is neglected? Which risks and uncertainties are emerging within the new certainty that diagnostics can offer?
3. **Identity, Subjectivity and Ethics:** how can testing contribute to or cast doubts on identity-making of patients? How does the identity of clinicians shift in light of tests, and do clinicians feel it challenges their clinical autonomy? How do the different forms of testing, e.g. saliva for HIV, change patient views of the disease and self? How do relations with providers and family members change when a test is done in the home, or generally outside of a laboratory?
4. **Space, Mobility and Infrastructures:** how do tests themselves change spaces and relations to health, (self)responsibility and care through their mobility? How are the mobile tests related to new notions of care and a changed professional landscape (de-skilling of health workers vs. skilling of unskilled health volunteers)? How are health infrastructures reshaped when tests travel outside of the boundaries of laboratories?