Speculative markets drug circuits and derivative life in Nigeria

Duygu Basaran Sahin

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BOOK REVIEW


Kristin Peterson’s first book, Speculative Markets Drug Circuits and Derivative Life in Nigeria, offers an ethnographic illumination of how market transformations of the 1980s in places seemingly very distant from each other – North America and Africa – created an unofficial pharmaceutical drug market in Nigeria where most of the products are inefficacious or fake. Its six chapters cover various topics ranging from the belief and attitudes of the ethnic group called Igbo – allowing this group to be the forerunners of the unofficial market – to how multinational pharmaceutical companies refuse to supply Nigeria with high-quality products because Nigerians cannot afford them.

Peterson begins the book by walking her audience through the narrow streets of the largest market in Nigeria, Idumota, which is also the main pharmaceutical distribution point of West Africa. For readers who are not very knowledgeable about Nigeria, the first chapter discusses the transformation of the pharmaceutical market in the context of the country’s history of independence. Peterson comprehensively links the oil boom of the 1970s to the multinational brand name drug companies spreading throughout the country. She then argues that the oil crisis of the late 1970s not only caused the multinational companies to suddenly abandon Nigeria, but also exposed the country to excruciating policies and mandates from the International Monetary Fund and the World Bank. In the same chapter, we also learn that in the hopes of ensuring a better life for their loved ones, many parents sent their children to study pharmacy. Peterson describes how the fresh graduates returned home only to find out that the new deregulation laws made it possible for traders to also open pharmacies (51).

In Chapter 2, Peterson contends that the collapse was “voluntary” (73) – the author borrows this term from the director of a brand name pharmaceutical company that she interviewed – rather than a simple market failure. In other words, she suggests that the multinational companies deliberately abandoned the market and therefore contributed to the failure of the Nigerian pharmaceutical market. In Chapter 3, Peterson posits that the unofficial drug market arose in Idumota due to multinational companies’ abandonment of the market, IMF’s
mandate on the devaluation of the Nigerian currency naira, and privatization of the
drug market. She relies on David Harvey and Henri Lefebvre to help explain how
changing regimes of capital blur the boundary between formal and informal econ-
omies. An example from the book shows that traders in Idumota were not granted
sales licenses because they ran businesses in an “illegal” market. However, at the
same time, the legal system did not even recognize Idumato as a market. Peterson
reveals that this was because “the oba (Adeyinka Oyekan, the traditional ruler) of
Lagos is staying (living) here. Oba cannot stay in the market” (97). This is a great
example of the culture-specific information that Peterson was able to obtain
through ethnography to explain the otherwise incomprehensible reasoning
behind this legal decision.

If one chapter provides a cohesive summary of the Nigerian drug market, it is the
fourth chapter, Derivative Life. Peterson demonstrates that the void left by the with-
drawal of the formal market and its professionals is filled by individuals who “chase
money” (107), trying to secure a living which “encourages speculating on one’s
life’s chances – one of the primary modes of managing an environment of
chronic risk” (108). What I found interesting in this chapter is the parallel
between the coping strategies of the Nigerians in times of uncertainty and the
concept of reflexive agency in Anthony Giddens’ Modernity and Self-Identity.
The lack of formal infrastructure and the presence of risk-creating markets in
Nigeria remind me of Giddens’ argument that modernity is a risk culture and
risk itself “becomes fundamental to the way both lay actors and technical specialists
organize the social world” (Giddens 1991, 3).

Chapters 5 and 6 question the ethics of the creation and distribution of generic
drugs. Speculative Markets is not an optimistic book to begin with, but the two
last chapters reveal even more frustrating facts about Nigeria’s drug market. For
example, some companies alter the chemical composition of pharmaceuticals in
the name of creating generics. In turn, disease-causing organisms become resistant
to such drugs and people die as a result (131). Offshoring drug manufacturing from
Nigeria to India and China, and further outsourcing to smaller manufacturers in
these countries, obstruct quality control (156). The shifting form of production
changes the direction of the flow of knowledge as well. Consequently, instead of
doctors and pharmacists giving patients the most efficacious pharmaceuticals,
drug marketers push the doctors to sell their most profitable products (161–162).
In addition, “Nigerian factors,” mentioned by some of the interviewees to describe
the complicated relations between political and legal bodies of the government,
explain why prosecution of fake drug traders was not properly executed (18).
Even though Peterson aptly uses the quotes from her open-ended interviewees,
the book would have benefited from a clear presentation of the fieldwork. How
many people were interviewed? What were the basic demographics of the intervie-
wees? What was her method in choosing the interviewees? It is difficult to under-
stand to what extent the interviewees accurately represented the actors in the drug
market. Furthermore, while Peterson clearly states in the conclusion that this book
is about “the ways daily market life – labor, price, credit, and other social practices, is linked to transnational and financial capital” (180), her fieldwork does not seem to explore the actors constituting this “daily market life” from across the Atlantic. For example, interviews with heads of the brand name companies who actually make the decision to abandon the Nigerian market would enrich the fieldwork.

Overall, Peterson tackles a highly complicated problem, which has economic, political, social and health-related consequences and manages to explain it clearly. Her earlier education in biology surely contributes to this rather difficult translation from medical to ethnographic language. *Speculative Markets* provides high-quality analysis of Nigeria’s pharmaceutical market for political economists and medical anthropologists as well as for those who are interested in applying ethnography to a complex problem. And, in spite of the complexity and the somewhat alarming findings presented through the monograph, the book ends on a somewhat optimistic note. Peterson takes her reader to a newly renovated pharmaceutical company in the suburbs of Lagos where drugs are being properly inspected and employees treated with respect. The year is 2010 and things are changing in a good way.

**Reference**


Duygu Basaran Sahin

*The Graduate Center, City University of New York, NY, USA*

*Email: dbasaransahin@gradcenter.cuny.edu*

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