

Authorised personnel only: Reflections on a study about counterfeit medicine

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Abstract

In 'Making Social Science Matter', Flyvbjerg (2001) calls for a phronesis-based social science that places power and 'situational ethics' at the centre of the analysis. This paper addresses the difficulties of engaging in such politically-sensitive research through a study of the 'hidden' crisis of counterfeit medicine.

Counterfeit medicine has been recognised as a serious public health risk, yet reliable data about the issue is difficult to obtain; discussion of the problem only surfaces in Western media when a patient dies or people become seriously ill from tainted products. Although numerous reports offer evidence of the scale of the counterfeit medicine problem (O'Mathúna & McAuley 2005, OECD 2008, World Health Organisation 2006), these are usually high-level fact sheets or strategic reports rather than detailed empirical cases. Much of what we know about prevalence of counterfeit medicine has resulted from in-depth journalistic investigations such as Eban's (2005) account of the contamination of the pharmaceutical supply chain in America or the

‘Toxic Pipeline’ investigations by Walt Bogdanich for the New York Times in 2007-08¹.

In contrast to these in-depth journalistic investigations, there have been few academic studies of the subject (Cockburn et al. 2005, Newton et al. 2002). Moreover, the limited academic research into counterfeit medicine has been confined, almost exclusively, to the medical field, where the two predominant research categories concentrate on laboratory-based testing and patient safety. Although counterfeit medicine is also an organisational issue, covering such areas as supply chain security, pricing agreements, corporate strategy, the topic has not been widely addressed in organisational research.

One reason for the dearth of organisational research on counterfeit medicine is that the complexity of the pharmaceutical supply chain means that it is difficult to map the scale of the problem. Indeed, Grant (2006) has argued that no one person can understand the pharmaceutical supply chain thoroughly because its very complexity produces information overload. Given that counterfeit medicine remains a serious public health risk, there is a need to understand the complexity of the pharmaceutical supply chain through an analysis of the different perspectives and vested interests embedded in the situation.

This paper reports on one such attempt. The empirical material is drawn from a range of discussions, interviews and observations made over a three year period. The research engaged with a wide variety of people within the pharmaceutical supply chain, including members of representative bodies, trade associations, patient advocates, a pharmaceutical company, logistics providers and government agencies.

¹ <http://topics.nytimes.com/top/news/international/series/toxicpipeline/index.html>, accessed 14 Jan 2010.

Their contrasting, and often conflicting, statements made about the counterfeit drug problem are theorised from a power/knowledge (Foucault 1980, 1982, 1977) perspective, allowing the analysis to foreground the contrasting regimes of truth within the discourse of 'counterfeit medicine'.

In our attempt to negotiate access to a large, multinational pharmaceutical company called Contest Pharmaceuticals (a pseudonym), we experienced a discourse of denial within the company; the various ways in which they framed the crisis precluded any acknowledgement that counterfeit medicine might be part of the company's concern. Even though we were eventually granted access to the company, it was on the assumption that we would *not* be studying counterfeit medicine. Access was granted, but at a price; our research question was changed to such an extent that we could no longer claim to be making a difference to the social and political praxis about counterfeit medicine.

The main contribution of the paper is methodological, but also relates to the issue of conflict suppression and the need to make social science matter (Flyvbjerg 2001). Ethnographic research relies on access to rich empirical data, yet the question of gaining access is mostly overlooked in research methods handbooks or else reduced to a couple of pages of generic hints and tips (for example: Bryman & Bell 2003, Silverman 2000, Creswell 1998). A crucial part of this research project was our ongoing, persistent attempts to gain access to Contest Pharmaceuticals. Although access was eventually granted, it was only done so on condition that we did *not* study counterfeit drugs. This was an ambiguous outcome; pharmaceutical firms are notoriously secretive, so any access was better than none, but the core question of our research was compromised in the access negotiations.

This outcome prompts several questions about the difficulties of attempting to study 'risky' topics. Is it enough to observe, record and report or should the researcher also have an emancipatory (Alvesson & Sköldbberg 2000, Alvesson & Willmott 1992) aim? A second contribution of the paper is that it raises questions about the difficulty of conducting politically-engaged research about crisis topics in an age of confidentiality agreements, ethics committees and corporate vested interests. Are some topics better left to investigative journalists? And, if so, what is the place of politically-engaged academic researchers as they struggle to engage 'relevance' and 'knowledge transfer'?

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