Reinterpreting the Consumer Citizen

The alternative consumer movement and the Right to Health and Development in Malaysia

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Paper outline

- alternative consumer movement of the South
- Consumer’s Association of Penang (CAP)
- Distinctive, broad-based approach to health, integrated with development, justice and environment – public health
- ‘nodal governance’ with transformative potential: mobilizing solidarities (contrast Burris, Drahos & Shearing, 2004)
  - Re-interpreting the ‘consumer citizen’
- Right to Health & Right to Development
- Core principles: indivisibility and interdependence
- Realizing human rights: (constructive) accountability, participation a shared core for rights and development practice
Rethinking health, development, rights - together

The triple challenges of economics, of equity, and of ecology make health issues possibly the single most important issue both at the personal and the global level

(Fazal, HAI 2006:1).

‘Development’ provides rights with...

...an expansive, ecological view of public health, public health systems, and public goods in response to fundamental social structures affecting public and population health, addressing, inter alia, environmental harms, patterns of population growth, distributive justice and other inequalities, and deleterious lifestyle trends

(Meier & Fox, 2008: 273).
Jones & Stokke, 2005, Human rights discourse increasingly frames approaches to development:

Previously, “human rights” and “development” lay as if two distinct islands in mutually uncharted waters.

Socio-economic issues comprised a vast channel that put great distance between human rights and development.
The Right to Health


- Rights terminology: ‘participation’, ‘transparency’, ‘accountability’, ‘monitoring’ ring hollow where corporate power is not questioned and official pronouncements about rights gloss over the questions of justice and development.

- Alternative/Southern consumer activism puts corporate violations of health justice at the centre of public concern and highlights Northern responsibilities.

- It is a key countervailing global force protecting health as a public good.
The right to development is an inalienable human right by virtue of which every human person and all peoples are entitled to participate in, contribute to, and enjoy economic, social, cultural and political development, in which all human rights and fundamental freedoms can be fully realised.

BUT we CAN understand “participate in, contribute to, and enjoy…”

(Lindroos, 1999)

The sustainability question

North-South controversies

R2D is difficult to define, and subject to dispute...
R2H, the State and Public Health

- R2D is a powerful vector of rights,
- R2 Health is too “limited and atomized”
- The state is responsible for realizing the underlying determinants of health through strengthening national public health systems
- Beyond strict legalism – ‘wild law’
- “Constructive accountability” (Freedman 2003)- accountability as a political process
- Social process of norms building - feedback and interaction between government, health professionals and civil society
- BUT this can be tense...
Rights, public health, public goods

- Public in consumption and benefits (i.e. non-discriminatory, fair and just),
- Accountable and Participatory (i.e. public in its manner of decision-making).
- Health MARKETS fail to fulfil rights, (property rights trump other rights?)
- Anyway, markets aren’t aren’t that efficient – US example
- RIGHTS provides alternative principles of humanity, universality, non-discrimination
- AND a system of accountability, response and redress
- WITH particular attention to issues of development, poverty and trade needed (Hunt 2006)
Triangle of Publicness

- Publicness in consumption
- Publicness of benefits
- Publicness in planning/decisionmaking

After Kaul, 2001: 14-15
Constructive accountability

- ‘constructive accountability’ moves rights from strict legalism and towards ‘developing a dynamic of entitlement and obligation between people and their government and within the complex system of relationships that form the wider health system, public and private’ (Freedman 2003b:111).
- HR in practice – hybrid approaches with public health, health systems, evidence-based approaches (Gready 2009: 3)
- ‘accountability’ as a political process, working at different levels
- ‘participation’ is human agency driving that process
- Participation is a FUDGE: applies to individual ‘persons’ AND collective ‘peoples’
North-South tensions

- DRD a ‘right of solidarity’ historically related to rise of the global South at UN & NIEO
- R2D implies a criticism of N denial of development for S
- Recognition of growing power of N based TNCs – South demands regulation and benefits – UNCTC
- This is the REAL controversy – Nestle case
Malaysia – participation beyond ethnicization

- **Participation**: “the relation between the state and the people in the developmental process” (Ginther 1992)
- Malaysia’s development: “success”, with ethnicization, authoritarianism, inequality, exclusion
- 1970 NEP Malay affirmative action – ambivalent understandings of collective equality and rights
- Demands for reform and democratization since 1990s – society in search of transethnic solidarity
- NGOs like CAP represent the potential to displace elite accumulation/ethnicization with solidarity
- Constraints: ethnicised development, suspicion of civil society, hostility to human rights universality
Consumers Association of Penang
Est. 1969, reacting to ethnic riots and NEP
Independent - did not join FOMCA
Rejects individualistic, passive consumer citizen – Southern consumer activism

Evolution
- from watching prices & testing products
- to local issues of development and displacement
- to international campaigns
Campaigns, networks, organizations

- 1971 Nestle/ ‘commericiogenic malnutrition’
- SAM 1977 – 78 ‘Development and Environmental Crisis’ (FoEI, 1983)
- 1982 Pesticide Action Network – global monitoring
- Southern position for the IOCU - Asian Regional Office (1974)
- 1981 Health Action International
- Third World Network (1984) South-focused trade/ development policy network
CONTROL TRANSNATIONALS

- RIGHT TO HEALTH
- PHC
- ‘decommercialize Health’
- BIG PHARMA
- Dangerous Drugs
- HAI
- Babymilk
- War on Want
- Breastfeeding
- OXFAM
- IBFAN
- CAP
- FoE
- SAM
- FoEl
- SUNS Geneva
- Monte video
- N-S ISSUES
- Drug Pricing
- TRIPs
- Biopiracy
- TWN Penang
- Ghana
- TWN
- Pesticides (POP)s
- Toxic Waste
- WABA
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Conclusions

- Malaysian NGO has actively contested meanings of “development”, health issues have important potential for transethnic solidarity
- Consumer movement under-researched, but a rich, complex node for local-global struggles over governance of health, development, environment
- Specific Southern character - echoes Right to Development
- Reinterprets consumer as active, politicised citizen demanding constructive accountability esp. from MNCs
- R2H, R2D significant for “…the terms in which re-embedding of the market can occur” (McMichael 2002, Polanyi) - global social contract beyond neoliberalism
- Major relevance to wider debates on rights, citizenship, development and democratization