
The 9th Public Health Association of South Africa (PHASA) in collaboration with African Federation of Public Health Association (PHASA) conference held at the International Conference Centre, Cape Town, South Africa, from the 25th to the 27th of September 2013, with participation of some executives of the World Federation of Public Health Associations. The conference was preceded by a symposium of Public Health Students with the aim of developing future leaders of public health in the continent.

During the conference, a day-long work-shop on fake drugs in Africa and the need for leadership, policy and advocacy for their control was held. After a lead presentation on the levels and problems of fake drugs in Africa and the discussions by the participants on the health and economic and human life costs of the problems, the following conclusions and resolutions were reached by the participants:

Conclusions:
1. The problems of fake drugs in Africa are enormous and the effects on the loss of human lives, economy, drug resistance and the persisting poor health indices are extreme.
2. Even though, a couple of countries had been the sources of these fake drugs, only one country continues to do so, seemingly knowingly, in the absence of any real and enforceable international laws and treaties in these regards.
3. Though some individual African countries have made and are making efforts to control these problems, it has become obvious that more needs to be done in these regards, especially corporately and internationally in this regard.

Resolutions: In the light of all these, the workshop resolved as follows:
1. That both the African and World Federations of PH Associations should bring the problem of fake drugs to the attention of all the international agencies that they are associated with, in order to bring about a global agenda for the control of fake drugs in the world.
2. That national associations in PH should bring to the attention of their political leaders back home, of the need for this international cooperation for the control of fake drugs as a global problem, with its worst effects in the African continent.
3. The public health professionals, as individuals and groups, should do more research on this fake drug problem and provide the further evidence of the effects of these drugs with the view of their informing national policies in this regard as well as their implementation.
4. Increased funding should be sought and/or made available for these researches which should be based on the social and economic costs of these fake drugs, useful for policy purposes.
5. Some of these studies should be multi-institutional and as global as possible.

James Chauvin  
President WFPHA

Dr. Flavia Senkubuge  
Vice-President, AFPHA.