

Covid19 and Medical Counterfeits

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The problem

Criminals have been exploiting the COVID-19 pandemic by selling fake medical and health products online or door-to-door. Such fraudulent goods have included COVID-19 testing kits, medicines that treat, prevent or cure COVID-19, and COVID-19 protective equipment, such as face masks and hygiene products. Relevant stakeholders have been urging caution and promoting public awareness of the existence of such illicit goods. However, fear around the pandemic can trigger impulsive and protective behaviours, increasing people's vulnerability to such scams.

What we know about medical/health counterfeits

Trade in counterfeits is a transnational crime that can be run by organised criminal groups. Counterfeit goods can be any product that is fake but designed to be sold as authentic. The Chartered trading standards institute has reported that trade in counterfeit goods now accounts for over 3% of all international trade and that it is a rising problem. Items that are frequently counterfeited include luxurious and branded clothing and accessories, cosmetics, electronic gadgets, alcohol and tobacco, mechanical parts and building materials, food products and medicines. While the supply of these products is opportune and lucrative, previous research has shown that consumers' ethical attitudes and socio-economic demographics can affect the likelihood of the demand for such products.

Trade in counterfeit goods negatively affects legitimate trade and business, but — as well as profiting organised crime groups — can also be extremely dangerous to consumers with sub-standard, and in some cases, toxic materials causing health problems and injuries. These risks are amplified when dealing with medical and health related counterfeits, which can be fake, falsified or substandard. For example, they may contain no active ingredient, the wrong active ingredient or the wrong dose of it. As such, as well as not having the expected effect, they may cause adverse reactions. Such products are also often produced in unhygienic conditions by unqualified people. As a consequence, they can contain toxins, impurities and bacteria, making them (still more) dangerous to the consumer.

To make them attractive, such products may be sold at a lower price to their legitimate alternatives, promise a "miracle cure" or a preventive ingredient or solution for a specific disease. They can also be extremely difficult to detect or identify as fake/counterfeit as offenders imitate/forgo the labels and packaging to match those of legitimate products.

The WHO has reported that sub-standardised and fake medical products are more prevalent in low- and middle-income countries, and most likely to reach patients in situations where access to legitimate, quality and safe medical products is hindered due to poor governance and infrastructure.

What we think is happening in the covid-19 pandemic

COVID-19 seems to have increased the selling of, and demand for fake/sub-standardised medical and health products worldwide. Recently, in coordination with the law enforcement entities of 90 countries, Interpol has seized counterfeit facemasks, substandard hand sanitizers and unauthorized antiviral

medication worth more than 14 million USD as a result of the coronavirus outbreak. In the UK, law enforcement and relevant stakeholders such as Action Fraud, Take Five, Friends Against Scams have reported an increase in fraudulent medical and health products being sold online or door-to-door as a result of the COVID-19 pandemic. In some cases, websites or emails used to promote such products may also be used to launch phishing scams or inject malware into computing systems. As the pandemic unfolds, we anticipate the opportunities for the sale of counterfeit products to continue.

Considering the next stage of the pandemic, we still find ourselves facing much uncertainty, rumours, fake news, and no effective solution (i.e. a cure or vaccine). Research demonstrates that when people perceive a high level of threat, it is easier to persuade them to take particular actions to reduce risk, perhaps particularly so when they feel helpless. On a positive note, we can see that this thinking (which is backed by empirical research) has been used to positive effect by governments to encourage the public to practice specific actions during the lockdown, such as social isolation, social distancing and handwashing. Clear and frequent messaging about the scale of the problem is likely to have been important to the success of these interventions. However, the perceived threat that this messaging (and the reality of the situation) has achieved may also make the public susceptible to being persuaded to buy fake medicines. This may be particularly the case when new treatments – real or otherwise – and vaccines are created and/or when demand outstrips legitimate supply.

Some ideas in response

- Government, the media and other stakeholders should consider the unintended effects that messaging which increases fear may have on criminal opportunity.
- Widely spread messages (campaigns) from Government, especially when targeting new phenomena that may trigger fear, should be clear and should have parallel messages that raise awareness of the criminal opportunities arising from that message/campaign, what the public can do to protect themselves, and where they can report suspicious activity.
- For example, clear messaging should advise the public how to differentiate between websites that are operating legally and those that are not (e.g. MHRA's online sellers registry, <https://medicine-seller-register.mhra.gov.uk/search-registry/>).

Relevant resources

- **Interpol:** <https://www.interpol.int/en/Crimes/Illicit-goods/Illicit-goods-the-issues>
- **World Health Organisation:** <https://www.who.int/news-room/fact-sheets/detail/substandard-and-falsified-medical-products>
- **Action Fraud:** <https://www.actionfraud.police.uk/a-z-of-fraud/medical-scams>
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About this series: This is brief 10 of a series of short, speculative papers developed by the UCL Jill Dando Institute to support the police services during the current pandemic. It is edited by Nick Tilley and Gloria Laycock. The raison d'être of the series is fully described at: <https://www.ucl.ac.uk/jill-dando-institute/research/COVID-19-special-papers>