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EDITORIAL

The West African Journal of Physical and Health Education (WAJOPHE) is an interdisciplinary journal that publishes articles, research findings and position papers in physical and health education, recreation, sports and dance. The journal was initially the innovation or brainchild of the Department of Human Kinetics and Health Education of the University of Ibadan, Nigeria. Today, it serves as a forum where scholars in education, exercise, sports, recreation, dance, and other health professionals contribute towards the full development of man and his environment, especially with regard to the entire West African subregion.

Among the articles in *Volume 13* are: geriatric social work; epidemiology of disease causation and methods of disease prevention and control; weight gain and weight loss measures adopted by martial arts athletes; community participation in primary health care; effectiveness of health education intervention on attitude towards strategies for reducing HIV/AIDS-related stigma and discrimination; personality traits of taekwondo athletes; health promotion and wellness strategies as capacity building for sustainable development; self-concept and academic performance of secondary school students; knowledge and methods of family planning; concept of human sexuality and changing sex role; technology and sports delivery; the growing threat of non-communicable diseases in developing countries; among others.

I want to specially thank all the contributors, for making the publication of this volume possible and worthwhile. I also want to thank the efforts of Professor J.A. Ajala and those of the current head of the Department of Human Kinetics and Health Education, University of Ibadan towards the publication of this and previous volumes.

B.O. Ogundele
Managing Editor

ARTICLES

1. **Geriatric Social Work: How Effective is the Practice among the Aged in Contemporary Nigerian Environment?**
Ayangunna J.A. 1
2. **Epidemiology of Disease Causation and Methods of Disease Prevention and Control**
Achalu E.I. 16
3. **Weight Gain and Weight Loss Measures Adopted by Martial Arts Athletes: An Exploratory Study of Rivers State Kung fu Athletes**
Elendu I.C and Okuma A.P. 27
4. **Community Participation in Primary Health Care: Strategy, Nature of Involvement in Healthcare Services and Sustainability in Health Promotion**
Mojoyinola J.K. 44
5. **Effectiveness of Health Education Intervention on Attitude towards Strategies for Reducing HIV/AIDS-related Stigma and Discrimination among Student Nurses in Lagos State**
Ogundele B.O. and Farotimi A.A. 59
6. **Personality Traits of Taekwondo Athletes**
Yazid L.I. 68
7. **Health Promotion and Wellness Strategies as Capacity Building for Sustainable Development**
Emeahara G.O., Ibeagha E.J. and Agbanusi E.C. 77

8. **The Need for Healthcare Insurance for the Aged in the New Political Dispensation**
Onyezere J.O. and Oyinlola A.I. 84
9. **Analysis of Teachers' Teaching Techniques in Nigerian Schools and Pupils' Involvement in Provision of Teaching and Learning Resources in Kogi State, Nigeria**
Owojaiye S.O. and Ojeomogha T.K. 96
10. **Human Resources Development and Preservation: Implications for Educational Development in Nigeria**
Olaniyan D.A. and Opinmi G.D. 110
11. **Economic Factors as Predictors of Health Service Delivery in attaining Millennium Development Goals in Oyo State, Nigeria**
Olufajo F.O and Ogundele B.O. 123
12. **Effects of Safety Education Programme on Transport Safety and Disaster Management Knowledge of Nursing Students in South-West, Nigeria**
Ojedokun I.M. 137
13. **Self-concept and Academic Performance of Secondary School Students in Okene, Nigeria**
Olawuyi B.O., Dada M.F. and Gbadura A.O. 151
14. **Knowledge and Method of Family Planning: A Panacea to Population Control Among Women in Nigeria**
Oyewo B. A. 164
15. **Concept of Human Sexuality and Changing Sex Role in Contemporary Nigerian Society**
Konwea E.P. 175
16. **Technology and Sports Delivery**
Ohuruogu B. and Iribemi B.S. 187

17.	Critique of National Programme on Immunization in Nigeria Babadare Abubakar	192
18.	Demographic and Psychological Predictors of Marital Violence among Married Women in Bodija Market Ibadan, Oyo State Fehintola J.O and Fehintola E.O.	200
19.	Sexuality Education Practices of Parents of Young Students in Enugu Education Zone, Enugu State Ursula C.E. and Nwobodo-Ani N.	209
20.	Benefits of Garlic as a Functional Food in Health and Diseases Okwori, E., Onu R.O. and Onagwa G.I.	220
21.	Audience Effects on Concentration and Attentional Demand in the Performance of selected Motor Skills by Athletes of University of Ibadan, Ibadan Nigeria Ohuruogu B.	228
22.	Hepatitis: A Faster Killer Disease than HIV/AIDS Olubode O.O.	236
23.	The Growing Threat of Non-communicable Diseases in Developing Countries: Implications for Health Education and Health Promotion Achalu E.I.	244
24.	Relationship between Integrated Science and Student Achievement in Senior Secondary School Science Subjects Ogunkule S.J.	254
25.	Sexual Practice and Belief System among Menopausal Women in Ibadan: Implication for Sexual Health Asuzu C., Babalola E. and Agokei R.C.	261

26.	Challenges Facing Teaching of Physical and Health Education in Elementary Schools in Osun State, Nigeria Oloyede A.O. and Oyedele A.O	272
27	Mitigating the Socioeconomic Impact of HIV/AIDS on Rural Nigerian Households: Implications for Extension Communication Onagwa G.I. and Abdullahi A.A.	283
28.	Effects of Plyometrics Training Techniques on Physiological Parameters of School Children in Ibadan Abass A.O and Osho Zaheed Adekunle	296
29	Barriers to Effective Participation in Physically-Oriented Leisure Time Activities: Case Study of Imo State Sport Council Ezete L.C.	308
30.	Separation Anxiety and Separation Anxiety Disorder: Causes, Prevention and Treatment Bakare A.O.	318
31	Assessment of HIV/AIDS Awareness among Health Education Undergraduate Students in the Face of Mounting Information Igbudu .U. and Okoro F.I.	327
32.	Demystifying Consumerism: Towards Tackling the Problem of Quackery in Nigeria Odelola J.O.	335

Demystifying Consumerism: Towards Tackling the Problem of Quackery in Nigeria

Odelola J.O.*

Abstract

Marketplaces are flooded with goods and services from which consumers must choose. Consumers are in this way faced with challenges of choosing goods and services that will satisfy their wants and have positive impact on their health. Studies have shown that many of the goods available in marketplaces are fake, expired or contaminated. Quacks render ineffective health services. Information provided about the goods and services are deceptive and inadequate. This paper examines problems of quackery and consumerism and the importance of consumerism. It also explains rights of consumer and corresponding laws as well as consumer health protection agencies and consumer health education. The paper concludes that consumer's rights could be protected through legal means. The paper recommends the integration of consumerism into school curricula and massive public enlightenment on the activities of quacks in Nigeria.

Introduction

The plant is the primary producer, while man is the grand consumer. Human beings require products of many kinds to meet their physical, emotional and social needs. Hornby (2006) defined a product as a thing produced during a natural, chemical or industrial process. A product can be in the form of goods or services. A consumer is a person who makes use of products, which could be in the form of goods, services or information to satisfy some

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immediate wants. In a broader dimension, consumers can be a group of persons or a corporate body. A consumer buys a product on the trust that it will be a valid one. In this wise, the product is expected to meet the need of the consumer in terms of quality and quantity. The consumer expects the purchased product to be standard.

Durojaiye, in Ademiju (2006) described a standard as the approved usage and acceptable properties in a product which involve weight, quantity, quality and dimension (length, breadth, weight and volume). A product that satisfies the need of the consumer is said to be standard. When a product is brought to the level that could meet the need of a consumer, standardization has taken place.

Quackery is a fraudulent presentation in the diagnosis or treatment of a disease. Anderson, Morton and Green (2005) described quackery as a medical claim fraudulently used to prey on the public by professing to cure diseases by useless ineffective procedure, remedies nostrums or diagnosis and therapeutic devices. According to this definition, falsehood and fraudulent practices are the main instruments used by quacks to defraud consumers. A quack is a person that practices quackery or pretends to possess knowledge about the treatment of disease or illness. Consumers who patronize quacks have their health status at risk. Economic hardship in Nigeria is, however, forcing many people to go into shady businesses, including quackery. The objective of quackery is to make money through fraudulent practices at the expense of the health of consumers. Nigerian government seems to be incapacitated in controlling the activities of quacks, as the number keeps increasing daily. Quacks are having a field day as they freely display their wares and disturb public peace through advertisements.

In 1989, over 150 children died in Nigeria as a result of intake of Paracetamol syrup containing Diethylene glycol (NAFDAC, 2010). Odebode et al. (2008) reported that twenty-five children aged between four months and three years died after they had taken a contaminated teething mixture. The children died as a result of renal failure linked to the administration of the drug. This is just a tip of the iceberg of the sorrows which contaminated drugs cause to members of the public.

Encyclopaedia (1973) gave three technical meanings of consumerism thus: (i) protection of consumer's right; that is, protection of the right and interest of consumer, especially with regard to price, quality and safety; (ii) materialistic attitude; that is, an attitude that values the acquisition of material goods; and (iii) belief in the benefits of consumption; that is, the belief that the buying and selling of large quantities of consumer goods is beneficial to an economy or a sign of economic strength. The first definition is appropriate for this article.

Consumerism aims at safeguarding the health of consumers. Its knowledge becomes imperative considering the extent of damage done to the health of consumers in this country. This paper gives a vivid explanation of consumerism with the aim of educating the public for wise and intelligent decision in choosing and using health products.

Problems of Quackery

Quackery is the act of dishonest claim of medical knowledge or skill. Barrel (2007) described quackery as the promotion of unsubstantiated methods that lack a scientifically plausible rationale. Quackery is fraudulent misrepresentation in the diagnosis or treatment of disease with the main motive of making money. It is a health as well as social problem which is assuming wider proportion. Many people are affected by the activities of quacks in the society. Consumers spend huge amount of money on goods and services, to get the best that satisfy their needs. The products, most times, are ineffective. This way, consumers are duped of their money. Quackery is criminal, as deceptive advertisement is used to convey false information about products to consumers.

Quacks make wrong diagnosis of ill-health, since their knowledge about medical treatment is limited. Improper treatment of a disease can lead to the development of resistance by germs, thereby making disease conditions go worse. Quacks make use of contaminated medical equipment, which can lead to infection. The use of unsterilized needles to administer injection often leads to infection. Abortion procedures performed by quacks can lead to damage of a womb and result in permanent sterility or death.

Quacks have done some sort of psychological harm to mothers by making them believe that orthodox medicine cannot be trusted. For this reason most mothers do not go for treatment nor present their children for immunization. This probably accounts for the high prevalence of childhood diseases in the society. Quackery encourages the use of drug for therapeutic purposes, without medical doctors' advice. It should, however, be noted that all potent medicines can also be poisons; that non-prescribed drugs taken can lead to psychiatric disorder.

The ineffectiveness of relevant government agencies saddled with the responsibility of preventing fake and substandard products from getting into the market has continued to encourage quackery. This has brought untold suffering to consumers and calls for consumer education among the people of Nigeria.

Consumerism

Consumerism is a movement or policies aimed at regulating the methods and standards of manufacturers, sellers and advertisers, in the interest of the buyer. Such regulations may be statutory, or may be embodied in voluntary codes accepted by particular industry or it may result more directly from the influence of consumer organizations (Encyclopaedia, 1973). Consumerism includes enactment of laws and legislation common to many countries to deal with advertising and labelling of health products. Access to information on what constitute standard in many products, awareness of consumer's right and knowledge of where to seek redress in case a product is fake are all embodied in consumerism.

Consumerism gave rise to many movements aimed at safeguarding the health of consumers: (i) Consumer activism which is the concerned effort and action and collective reaction of consumers to protect their perceived interest in marketplaces (Ijiwere, 2001); (ii) consumer union which tests products for performance, safety, reliability and value based on government and industry standard as well as in the organization's standard; (iii) consumer protection, which is a term applying to the efforts of government, public-interest organizations, individuals and businesses to establish, protect and enforce the rights of people.

Importance of Consumerism

Consumerism ensures that the individual is better educated, fully aware of his/her rights and can access information as to where to seek redress if and when goods bought are substandard. The importance of consumerism, according to Ukpore (1993) and Coppack (2003), reviewed by Ademiju (2006), include:

- a. helping the individual to clarify values, identify goals, weigh alternatives in relation to consequences, and make rational decisions for the best utilization of available resources.
- b. giving rise to informed and effective consumers.
- c. helping consumers to know about laws which give them rights and responsibilities; to ensure that when consumers encounter dishonest practices, they can know how to obtain help.
- d. exposing consumers to a broad range of behaviour for dealing with economic conditions, inflation and scarce resources within the environment and achieve the a desirable lifestyle.

Rights of Consumer

The need to protect the health of consumers from the nefarious activities of quacks led to the spirited efforts of government, public-interest organizations, individual and corporate bodies to establish and enforce the rights of people who buy and use products. Karpatkin et al. (2007) reviewed the basic rights of consumers as set forth by President J.F. Kenedy of the United States of America in 1962 thus;

1. *The right to safety:* Products offered for sale should not pose undue risk of physical harm for consumers or their families. However, most products in our marketplaces cause serious harm to health of consumers; many of the products include unhygienically prepared foods, defective automobile, drugs that have harmful side effects and unsafe electrical appliances.
2. *Right to be informed:* The wise choice of a product or service depends on available information. Our marketplaces are flooded with different and complex products. Advertisement is usually not informative enough for consumer purposes. Therefore, consumers often lack information required to compare the quality of various products and services to

determine their true cost or to be assured of their suitability or safety. Governments at all levels have at one time or the other passed laws directing business organizations to disclose the necessary information. Laws are necessary instruments for prosecuting erring producers of goods and services.

3. *Right to choose:* Consumers must be given a wide opportunity to choose goods and services that best suit their purposes. Different manufacturers must be allowed to produce the same goods. When many companies sell a product, the effort of each attracts customers and keeps prices at the lowest level. In order to preserve competition in the marketplace, laws make it illegal for organizations to monopolize an industry or product.
4. *Right to be heard:* When a product or service is not good enough, a consumer reserves the right to seek refund of money or replacement of such item. In most times, manufacturers are reluctant to cooperate in this regard. Laws are enacted to ensure that consumers are given fair hearing in law. Consumers should be at liberty to sue business establishments engaged in illegal practices.

Consumer Health Protection Laws in Nigeria

Consumers have the right, as provided for in the laws of Nigeria, to register complaints when they have been deceived, misled or victims of quackery. Thus, it is important that a consumer is knowledgeable about the laws which give him/her the rights and responsibilities, so that when his/her rights are infringed upon, he/she can seek redress. The Consumer Protection Council Act Chapter C25 (Decree No 66 of 1992) Part II No 6 states that:

A consumer of community that has suffered a loss, injury or damage as a result of the use or impact of any goods , product or services may make a complaint in writing to or seek redress through a state committee.

The complaint of the affected consumer after investigation by the Council or state committee of a complaint by a consumer, it is proved that:

- The consumer's right has been violated; or

- That a wrong has been committed by way of trade, provision of services supply of information or advertisement thereby causing injury or loss to the consumer.

The consumer shall, in addition to the redress which the state committee, subject to the approval of the council may impose, have a right of civil action for compensation or restitution in any competent court (International Centre for Nigerian Law, 2009).

Achalu (2005) noted that in Nigeria, efforts towards consumer protection have been made in such areas as the Hire Purchase Act 1975, which sets out the right and duties of the hire purchaser and seller and the prices of some consumer items. Attempt to safeguard the health of consumer can also be found in the Consumer Protection Council Act, Part II No 12, which states that 'any person who, in contravention of any enactment whatsoever for the protection of the consumer:

- sells or offers for sale any unsafe or hazardous goods; or
- provides any service or proffers any information or advertisement thereby causing injury or loss to a consumer;
... is guilty of an offence under this Decree and liable on conviction to ₦50,000 fine or to five years imprisonment or to both fine and imprisonment.

Decree No 15 of 1993 authorized the National Agency for Food and Drug Administration and Control (NAFDAC) to inspect production, processing and preparation of food and drugs. The Decree also authorized NAFDAC to carry out compliance action such as prosecution of offenders and seizure and destruction of adulterated or substandard food and drugs (Achalu, 2005)

Consumer Health Protection Agencies in Nigeria

Consumer Health Protection Agencies in Nigeria are the organization whose main function is to safeguard the health of consumers. They are many and operate nationwide. The prominent ones that are discussed for the purpose of this paper are:

- Consumer Protection Council (CPC)

- National Agency for Food and Drug Administration and control (NAFDAC)
- Standard Organization of Nigeria (SON)

Consumer Protection Council (CPC)

The Consumer Protection Council (CPC) is a statutory agency established by the Consumer Protection Council Act No 66 of 1992. Its office is at A2 Herbert Macaulay Way, Zone 6 Wuse Abuja. The functions of the council include to:

- provide speedy redress to consumers complaints through negotiations, mediation and conciliations.
- seek ways and means of removing or eliminating from the market hazardous products and causing offenders to replace such products with safer and more appropriate alternatives.
- publish, from time to time, list of product whose consumption and sale have restricted or not approved by the federal government or foreign governments.
- cause an offending company, firm, trade, association or individual to protect, compensate, provide relief and safeguards to injured consumers or communities from adverse effects of technologies that are inherently harmful, injurious, violent or highly hazardous.
- organize and undertake campaigns and other forms of activities as will lead to increased public consumer awareness.
- encourage trade, industry and professional associations to develop and enforce in their various fields quality standards designed to safeguard the interest of consumers.
- issues guidelines to manufacturers importers, dealers and wholesalers in relation to their obligation under the Decree".
- encourage the formation of voluntary consumer groups or associations for consumers' well being.
- ensure that consumers interests receive due consideration at appropriate forum and to provide redress to obnoxious practices or the unscrupulous exploitation of consumers by companies firms trade association or individual.
- encourage the adoption of appropriate measures to ensure that products are safe for either intended or normally safe use.

- perform such other functions as may be imposed on the council pursuant to this Decree (International Centre for Nigeria Law, 1992).

In order to function effectively, the Decree empowers the Council to carry out the following:

- apply to court to prevent the circulation of any product which constitutes an imminent public hazard.
- compel a manufacturer to certify that all safety standards are met in their products.
- cause as it deems necessary, quality tests to be conducted on a consumer product.
- demand production of labels showing date and place of manufacture of a commodity as well as certification of compliance.
- compel a manufacturer, dealer and service company where appropriate, to give public notice of any health hazards inherent in their products.
- ban the sale distribution, advertisement of products which do not comply with safety or do not comply with safety or health regulation (International Centre for Nigeria Law, 1992)

National Agency for Food and Drug Administration and Control (NAFDAC)

NAFDAC is a Nigerian government agency under the Federal Ministry of Health that is responsible for regulating and controlling the manufacture, importation, exploration, advertisement, distribution, sale and use of food, drugs, cosmetics, medical devices, chemicals and packaged water. In January 1993, the supporting legislation was approved as Decree No 15 of 1993. On 1 January 1994, NAFDAC was officially established as parastatal of the Federal Ministry of Health (NAFDAC, 1999). The functions of NAFDAC include to:

- Regulate and control the importation and exportation, manufacture, advertisement distribution, sale and use of drugs cosmetics, medical devices. Bottled water and chemicals.

- Conduct appropriate tests and ensure compliance with standard specifications designated and approved by the council for the effective control of quality of food, drugs, cosmetics, medical devices, bottled water and chemicals.
- Undertake appropriate investigation into the production premises and raw materials for food, drugs, cosmetics, medical devices, bottled water and chemicals and establish a relevant quality assurance system, including certification of the production sites and of the regulated product.
- Undertake inspection of imported foods, drugs, cosmetics, medical devices, bottled water, and chemicals and established a relevant quality assurance system including certification of the production sites of the regulated products.
- Compile standard specifications, regulations, and guidelines for the production, importation, exportation, sale and distribution of food, drugs, cosmetics, medical devices, bottled water and chemicals.
- Undertake the registration of food, drugs, medical devices, bottled water and chemicals.
- Control the exportation and issue quality certification of food, drugs, medical devices, bottled water and chemicals intended for export.
- Establish and maintain relevant laboratories or other institutions on strategic areas of Nigeria as maybe necessary for the performance of its functions (NAFDAC, 2010).

Standard Organization of Nigeria (SON)

SON is the sole statutory body that is vested with the responsibility of standardizing and regulating the quality of all products in Nigeria. When it was established by the General Yakubu Gowon Military Regime through Decree 56 of 1971, It was called the Nigerian Standards Organization (NSO). The Decree establishing the body was amended in 1976 by the Military Regime of General Olusegun Obasanjo; in 1984, by the short-lived regime of Major General Muhammadu Buhari; and in 1990 by the regime of General Ibrahim Babangida.

The original Decree provided the body with the authority to specify and elaborate standards, as well as provide a quality assurance system for commodities, including manufacture industrial and imported products and services. But the 1976 amendment conferred on the minister of industry the power to declare mandatory industrial standards in respect of products or processes recommended by the Nigerian Standard Council. The 1984 amendment changed the name of the body from the Nigerian Standard Organization (NSO) to the Standards Organization of Nigeria (SON) because NSO Created confusion with a newly established security body known as the Nigerian Security Organization. The 1990 amendment centred partial autonomy on the SON from the Ministry of Industry (SON, 2009). The functions of SON include:

- to organize tests and do everything necessary to ensure compliance with standards designated and approved by the council.
- to undertake investigation as necessary into the quality of facilities, materials and products in Nigeria and establish a quality assurance system including certification of facilities, products and laboratories.
- to ensure reference standards for calibration and verification of measures and measuring instruments.
- to compile an inventory of products requiring standardization.
- to compile Nigerian standard specifications.
- to foster interest in the recommendation and maintenance of acceptable standards by industry and the general public.
- to develop methods for testing of materials, supplies and equipment including items purchased for use of departments of the Government of the federal or a state and private establishments.
- to register and regulate standards marks and specifications.
- to undertake preparation and distribution of standards samples.
- to establish and maintain such member of laboratories or other institutions as maybe necessary for the performance of its functions under this Act.

- To complete and publish general scientific and other data:
 - resulting from the performance of its functions, under this Act or:
 - from other sources when such data are of importance to scientific or manufacturing interests or to the general public are not available elsewhere.
- to advise departments of the Government of the Federation or a state on specific problems relative to standards specifications.
- to sponsor such National and International conferences as it may consider appropriate.
- to coordinate all activities relative to its function throughout Nigeria and co-operate with corresponding, National or International organization in such field of activities as it considers necessary with a view to securing uniformity in standards specification.
- to undertake any other activity likely to assist in the performance of the functions imposed on it under this act (Law of the Federation of Nigeria, 1990).

Categories of Consumer Protection in Nigeria

Consumer protection agencies can be broadly categories into two. They are tax-supported and non-tax-supported.

Tax-Supported Consumer Protection Agencies

Tax-supported consumer protection agencies are government-owned agencies — that is, they are funded by government. They can also be categorized into ministries and parastatals. The ministries are (federal and state):

- Ministry of Health
- Ministry of Education
- Ministry of Power, Mine and Steel

The parastatals are:

- Nigeria Maritime Administration and Safety Agency (NIMASA)
- Infrastructure Concession Regulatory Commission (ICRC)
- Economic and Financial Crimes Commission (EFCC)

- Legal Aid Council of Nigeria (LACON)

Non-Tax Supported Consumer Protection Agencies

Non-tax supported consumer protection agencies are non-government agencies, and they include:

- Advertising Practitioner Council of Nigeria (APCON).
- Nigerian Medical Association (NMA)
- Manufacturer Association of Nigeria (MAN)
- Nigerian Consumer Movement Union (NCOMU)
- National Union of Road Transport Workers (NURTW)

Consumer Health Education

Education provides an individual with the appropriate knowledge, attitudes and intellectual skill to make decision, good judgment and logical analysis of situation. It is the development of a critical mind and skill for seeking redress when a product bought is substandard. Ijiwere (2006) defined consumer education as the process of exposing people to the knowledge and skills needed by individual, groups, families and corporate bodies to become competent consumers in a world that is constantly changing. One of the ways through which the Nigerian consumer can be protected against the activities of quacks is consumer education. This is because the individual will be equipped with the critical skill to be an intelligent buyer and user of health products.

Conclusion and Recommendations

Quacks are involved in the sale of substandard goods. They also render ineffective health services. Thus goods and services provided by quacks further damage the health of consumers. It is unfortunate that government at all levels in the country have not been able to curb the activities of quacks, thus their drastic effects on the health status of citizens prevail. Consumerism aims at protecting the health of consumers. This can be done through enactment of laws, establishing and ensuring rights of consumers and consumer education. The activities of consumerism are carried out by relevant government agencies, professional bodies and private individuals.

Goods consumed and services utilized have positive or negative impact on the health of an individual. There is the need to ensure that goods and services in our marketplaces are standard in terms of safety, quality and quantity. Therefore, the following recommendations are made:

1. The mass media, both electronic and print, should discourage quackery by not promoting their activities. They should jettison the monetary gains that come from such promotion.
2. Consumer health agencies like Standard Organization of Nigeria (SON), National Drug Law Enforcement Agency (NDLEA) and National Agency for Food and Drug Administration and Control (NAFDAC) should be more alive to their responsibilities. They should ensure that substandard goods and services are not made available in market places. Quality control law must be enforced.
3. Relevant consumer health agencies should publish in the National Dailies list of contaminated and adulterated drugs constantly to alert the public of the imminent dangers.
4. Non-Governmental Organizations and Professional Bodies must embark on aggressive campaigns against the activities of the quacks in our society.
5. There should be integration of consumerism into the schools curricular. Consumer education must be taught in primary, secondary and tertiary institutions of learning in Nigeria.
6. Manufacturers must ensure that adequate and clear information are provided on their products. Consumers on their part must be equipped with adequate information about products they want to buy so that they are not deceived by quacks.
7. Consumers must buy products from reputable and registered companies.

References

- Achalu, F.I. (2005): *Consumer Health Education and Protection*. Lagos Simarch Nigeria Limited.
- Anderson, C.L Morton, R.F., and Green, L.W. (1998): *Community Health*. Saint Louis. Mosby Publishing Company.

- Barrell, S. (2007): Your Guide to Quackery: Health Fraud and Intelligent Decision, *Quackwatch*. Retrieved on 7/8/2010 from <http://www.quackwatch.org>
- Durojaye in Ademiju, P.U. (2006): Consumerism: Agencies, Consumer Education, Laws, Regulations, Rights and Obligations. *Journal of the Nigeria Association for Physical Health Education Recreation Sports and Dance. Oyo State Chapter* 4(1) 9-24.
- Encyclopedia (1973) *Encyclopedia Britannica*: Vol 5. Chicago.
- Hornby, A.S. 2006 *Oxford Advanced Learner's Dictionary*. Oxford University Press 7th Edition
- Ijiwere, A. A. (2000). Impact of Education on Consumer Activism in Nigeria. *Africa Journal of Studies in Education* 2(2) 223-235.
- International Centre for Nigeria Law (1992). Consumer Protection Act. Retrieved 5/12/2010 from www.nigeria-law.org.
- Karpatkin, Rhoda H. and Been V. (2007). *Consumer Protection*. Encarta 2008 (DVD) Redmon, W.A Microsoft Corporation..
- Laws of the Federation of Nigeria (1990). *Standard Organization of Nigeria Act*. Retrieved on 6/12/2010 from www.ngcareer.com.
- NAFDAC (1999). *History of NAFDAC*. Retrieved on 10/10/2009 from www.nafdac.org.co.uk
- NAFDAC 2010 *History, Structure and Function of NAFDAC*. Retrieved on the 20/11/2009 from www.nigeriafirst.org/printer
- Odebode, N., Amokeodo, T., Aboridade, S. and Sam, V. (2008): Teething Mixture. *The Punch*. Wednesday 26th.
- SON (2009) *Standard Organization of Nigeria (SON). Recruits Graduates, Corper and Interships*. Retrieved on the 5/12/2010 from Dards Organisation of Nigeria SON Online.
- Ukpore (1993) and Coppack (2003) in Ademiju P.U (2006). Consumerism: Agencies, Consumer Education, Laws Regulations, Rights and Obligations. *Journal of the Nigeria Association for Physical Health Education. Recreation Sports and Dance. Oyo State Chapter* 4(1) 9-24.

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