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Media language use in Cameroon: Implications for information dissemination on the COVID-19 pandemic

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Abstract

This study investigates the extent to which language choice in the media against the COVID-19 pandemic is efficient in Cameroon. It examines the language choice in the media for the dissemination of COVID-19 information in rural communities in Cameroon as well as the outcome of this choice on the population. The study is guided by the Sapir-Whorf theory which stipulates that, every information passed down to an individual regardless of the channel used, has to consider the subconscious agreement that individual has with his own language. It adopts a mixed- methods of research and 313 people were selected from the communities of Batcham, Mbangassina and Mouanko. A questionnaire was randomly distributed to 308 respondents, while an interview was carried out with three medical personnel and two media personnel. The study reveals that, the choice of language by the media highly influences the people's adherence to the preventive measures of the COVID-19 pandemic. In Cameroon, the languages mostly used by the media are the two official languages. Though the media equally uses the indigenous languages, however, the time allocated to these languages is very limited and therefore prevents the majority of the population to have to access vital information. It therefore recommends the use of indigenous language for efficient communication with people living in rural communities.

Keywords: COVID-19, dissemination, information, indigenous languages, media



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Public Interest Statement

Cameroon is a multilingual nation that counts about 280 national languages, with English and French as official languages. The first language of the majority of Cameroonians is their local language. Unfortunately, most information in the media is disseminated through official languages, thus, depriving them of the right to information. The advent of COVID-19 reveals the need to provide all public interest information in languages used by the majority. This paper, therefore, presents the necessity to restructure the language policy of Cameroon, and integrate the use of national languages for the dissemination of information through the media.

1. Introduction

The Corona epidemic which started in Wuhan was officially declared a pandemic in Cameroon by March 11th, 2020 (Ministry of Public Health, 2020). The minister of Public Health in article 3 of the Ministerial Decree No 0824 of 9th April 2020, issued a series of protective measures to limit the spread of the pandemic and urged the populations to strictly abide by the barrier measures recommended by the World Health Organization (WHO) that include, but are not limited to, the regular washing of hands, social distancing, shaking of hands, avoiding crowded areas, avoiding travelling through public transport, and the confinement measures that led to the shutdown of schools (Ministère de la Santé Publique Cameroun, 2020). A series of reports from 2020 revealed the growth rate of the pandemic in Cameroon.

On May 1st 2020, Cameroon was rated the highest in Central Africa with several confirmed COVID-19 cases. Cameroon alone counted about 2069 confirmed cases with 448 death cases by the end of 2020 (United Nations Office for the Coordination of Humanitarian Affairs (OCHA), 2021). By 27th October 2021, the Minister of Public Health reported 2974 new cases and 83 deaths (OCHA, 2021). The same ministry provided a report by February 2022, stating that there were 119,240 cumulative COVID-19 cases and 1,923 deaths. By July 18, 2022, there were 120,068 confirmed cases and 1931 deaths (WHO, 2022). These figures would have been better if the government didn't restrict itself to using English and French but complemented this with the use of indigenous languages for public sensitization against the pandemic.

Despite the government's efforts to sensitize the population about the danger of the pandemic, the number of COVID-19 cases kept increasing. It, therefore, raised another issue, that of communication. In Cameroon, though there is sporadic use of indigenous language for the dissemination of information through the media, most information related to development projects are disseminated through the media in English and/or French. This is done to the detriment of those who rely on their mother tongues or local languages for proper communication and reception of information. The World Bank (2022) records the literacy level of people living in rural areas at 41.85% while in the national territory, the literacy rate is 77.07%. Admittedly, the literacy rate is high even in rural areas. But when it comes to life and death issues, everything should be done to save every life because it counts. So, we assume that 58.15% of those living in rural areas and 22.93% nationwide of those who cannot read and write English and French could be helped by rendering this information in their languages and thus ensure effective communication.

For, any effective communication for the dissemination of COVID-19 information should take into consideration the linguistic diversity of the country. This thinking is brought about by UNESCO,

CABTAL, SIL, NACALCO, and others. For instance, Translators without Borders (2020) state that *“To be useful, information must be tailored to the intended audience. It must respond to people’s questions and concerns, not just give them instructions. It must be clearly expressed using concepts, sentence structures, and terminology that the audiences are familiar with”*. Despite the rich linguistic repertoire found in Cameroon, the government needs to endeavor to meet the communication needs of the people.

2- The Linguistic Situation of Cameroon

Sutton (2013) and Akumbu & Carlo (2022) record the very rich linguistic background of Cameroon which counts about 280 languages. Some communities in the nation are defined and even identified by their language; others are not, while some languages such as the Malimba, go across community boundaries. For instance, Lamberty (2009) records that, the Malimba villages are found in Edea and Mouanko. Language experts over the years have seen the need to develop these multiple languages and use them in communication alongside the official languages for more effective and inclusive communication. Most generally, in Cameroon as in other African nations, the information needed for knowledge, skills, and technology that are necessary for national development are transferred through the languages inherited from the colonial masters (Bamgbose, 2011). Though, African scholars argue that the development of Africa crucially depends on the development and use of African languages (Chumbow, 2009). Chumbow (2009) further states that only about (20-40 percent) of the African population is educated in these foreign languages which serve as official languages; whereas the total rural population of Cameroon is about 11,339,005 with 41.85% of a literate population (World Bank, 2022).

3- Media Language Use in Cameroon

According to Burke (1999), media can help reach concrete goals. Through the use of media, stereotyped attitudes can be changed. People from every class in society can use media to express their needs and opinions, as well as issues that are not raised in the public domain. Media plays a very important role in people’s lives and the community. The community relies on the media to receive information on their social, economic, and political lives. Media facilitate the government’s task of explaining its policies to the population to mobilize the latter to participate fully in forging national unity, national integration, and development (Nyamnjoh & Fonchingong, 1996). They, therefore, stand as the most suitable means to reach the minds and hearts of the population.

With the advent of COVID-19, the population greatly relies on the media to receive current information. Providing the right information through the right language in the media can help people acquire proper knowledge and enable them to make informed decisions about their lives. Because of the threat it represents, everyone without exception deserves to be informed about the COVID-19 pandemic to know how to stay safe from it. Unfortunately, English and French are the main languages through which most information about the pandemic is disseminated in the Cameroon media landscape. Cheo et al. (2021) remark that information on CRTV North West Region, Cameroon is most often broadcast in either English or French. CRTV Bamenda has to broadcast information in 25 indigenous languages every week except on weekends. So, 5 languages are used for the dissemination of information each day for 15 minutes. This is similar to CRTV Buea which allocates 20 minutes to information in indigenous languages twice a week. It shows that the time allocated to

the dissemination of information through the local languages is very limited and so, insufficient to inform the illiterate population about the danger of the pandemic. The limited consideration ascribed to the use of the local or indigenous languages over the media raises an issue about the importance of effective communication in the dissemination of COVID-19 information.

4- Effective Communication and COVID-19

There cannot be any effective communication without the sharing of information. There is therefore a need for information to be shared between the sender and the receiver. The information shared by the sender must be received and understood by the receiver who in turn has to respond or provide feedback. Effective communication occurs when the desired outcome of information is attained (Velentzas & Broni, 2015). Burke (1999), states that efficient communication should involve all stakeholders and therefore must be communicated from the top to the bottom, from the bottom to the top, and horizontally, among the people at the bottom. Language does not only serve as a communication tool but also as an important initiator of human development and identity formation. Murphy (2013) highlights the potential of language in health by stipulating that, the role of language in health communication is not only to receive health information, but it is also a means of communicating complex feelings and emotions and connecting with cultural conceptions of health. The COVID-19 pandemic stands out as a threat to lives and the development of the nation. The successful implementation of its barrier measures does not require a simple process of communication, but it requires effective communication which aims at attaining a specific goal.

The National Development Strategy 2020-2030 stipulates that, in view of contributing to the development of healthy human capital, productive and capable of supporting strong, inclusive, and sustainable growth, the authorities intend to guarantee all sections of the population fair and universal access to health care and service (MINEPAT, 2020). To protect the lives of all Cameroonians from the threat of the COVID-19 pandemic, it is important to provide everyone access to information without any form of marginalization. For, there cannot be real access to health care and service without access to information about health care and service. Access to information and service can only occur when a common language is used among the two parties. Considering the illiteracy level of people living in rural areas (41.85%), the appropriate language that ensures successful communication between the government and the population is the indigenous language. The extent to which the population of Cameroon respects COVID-19 preventive measures determines the extent to which the communication process about the pandemic has been effective.

5- Problem Statement

Accurate, reliable, and timely information about epidemics or pandemics is most often regarded as a matter of life and death. Such information is important in guiding people when they are faced with a complex situation like that of the COVID-19 pandemic which hit the world in December 2019 and has since then produced various strands and claimed several lives. By July 2022, the Minister of Public health in Cameroon reported 120068 cumulative cases and 1,931 deaths (OCHA Cameroon, 2022). A retrospective study of COVID-19 cases shows that, since the beginning of the pandemic, the cases of contamination keep growing at an alarming rate. Thus, raising concern about the effectiveness of the communication process. This was the case with the Spanish-speaking community in Boston.

Knuesel et al (2020) report that, in-between March 25, 2020, and April 13, 2020, the COVID-19 positive inpatient population increased at an alarming rate at the Massachusetts General Hospital. A census revealed that 40% of the affected population was constituted of limited English proficient Spanish-Speaking individuals. Their limitations in English language skills did not favor the smooth flow of communication and hence caused them to be more vulnerable to the pandemic. Most often, official communication in Cameroon is carried out in English or French languages (Nyamnjoh, 2009). Though the media houses sometimes disseminate information in indigenous languages, the common trend is the use of official languages. This stands as a major limiting factor in communities where indigenous languages are the major languages of interaction and instruction. This paper, therefore, seeks to investigate one extent to which the media language choice for the sensitization of the Cameroon population against the COVID-19 pandemic is efficient.

6- Theoretical Framework

The Sapir-Whorf Hypothesis also known as the Whorfian hypothesis was developed in the 1920s by Edward Sapir and his student Benjamin Lee Whorf. According to this hypothesis, the particular language an individual speaks influences the way he thinks about reality. Human thoughts are shaped by language. Language serves as a filter through which the world is constructed for communication (Sapir, 1921). Edward Sapir and Benjamin Lee Whorf posited that language acts as a mold for thoughts. They argue that, the way we perceive the world is predetermined by the structure of the language we speak (Troyer, 1994). The language spoken by an individual determines his view of the world and the realities surrounding him. The understanding one has of the challenges in one's life is determined by his culture and language (Sapir, 1921). It is through language that life, nature, and all phenomena of the world are understood. The cultural belief of an individual has a great influence on his or her understanding of the worldview. You cannot understand or appreciate one without the knowledge of another. Murphy (2013) cites Ricoeur (1995) who posits that the language, signs, and symbols of our natural environment may serve as the foundation of the meaning-making of an individual. All information passed down to an individual regardless of the channel used has to consider the subconscious agreement that individual has with his language.

The linguistic implications of the Sapir-Whorf hypothesis apply to the language used for the transmission of COVID-19 information through the media. The information related to the pandemic is most often disseminated in either English or French through the media. Though the media houses sometimes disseminate information in indigenous languages, the time allocated to the information in indigenous languages is not enough to establish effective communication. The indigenous languages are the languages that are culturally bound to Cameroonians; they are the languages the Cameroonians identify with. Unlike the official languages which are imported from the colonial masters' nations and which are estranged from Cameroonians.

In a study carried out by Adéníyì & Bèllò (2006) on Nigerian Media, Indigenous Languages, and Sustainable Development, they found out that Nigerian media fail to communicate the norms, rules, and values of the communities as they fail to transmit development ideas through indigenous languages. This, therefore, impedes the development of the nation since the language and culture of development is the language rooted in the people's culture and traditions. Considering that health is a very essential aspect of development, Tasah (2021) goes beyond the simple use of indigenous

language and further adds that image-associated sensitization posters should be written in indigenous languages in the fight against health epidemics. He argues that such posters are not only culturally relevant and well accepted by community members, but they also enhance and facilitate respondents' understanding of health issues. According to him, important health-related information should be presented in picture-based posters, flyers, and brochures in the people's local languages.

Mukenge (2018) carried out a study of HIV/AIDS communication in Zimbabwe which shows that indigenous languages play a pivotal role in HIV/AIDS communication because they are key features of health communication models in Africa. She further asserts that the basic principles of various health communication models in Africa believe that behavior change is attained through the use of localized languages, and reliance on local knowledge systems which are also reflected in the languages of the people. The use of indigenous languages which reflect the indigenous values of a group of people is an appropriate tool for the dissemination of health-related information against the COVID-19 pandemic. For it can easily influence and instigate change in people. Many studies have emphasized the important role of indigenous language use in sensitizing communities on development or health projects, however, little is done on the important role of indigenous language use in the media for the dissemination of life-saving information in rural communities and its influence on behavior change.

7- Methodology

This study makes use of the mixed-method case study propounded by Dornyei (2007). This method involves both the quantitative and qualitative approaches, which according to him are used to measure overlapping, but also different facets of a phenomenon. Data for this paper was collected through a questionnaire and an interview guide. The target population for this study comprises people living in three rural communities of Cameroon; the Batcham community in the West region, the Mbangassina community in the Center region, and the Mouanko community in the Littoral region. In Batcham the sample size was made up of 112 people out of a target population of 160.000, representing 0.07 %. In Mbangassina, there were 88 participants from a general population of 60.000 which is 14.67 %. Lastly, in Mouanko there were 108 participants from a general population of 9.162 people which is about 1.18 % of the population of Mouanko.

Table 1: Target Population and Sample Size

Respondents	Target Population	Sample size	Percentage
Batcham	160.000	114	0.07%
Mbangassina	60.000	90	0.15%
Mouanko	9162	109	1.18%
Total		313	

Source: Researchers' (field survey, 2021)

This study employed two sampling techniques for the selection of its participants: the purposive and the simple random techniques. Purposive sampling was used for the selection of participants for the interview. The Chief medical officers in the hospitals of Mbangassina, Mouanko, and Batcham Chefferie participated in the interview as well as the journalist of the local radio stations of Mbangassina and Batcham. Mouanko does not have a community radio. The simple random

sampling technique was used to select the participants through which the quantitative data of this study was elicited. Descriptive statistics were used for the quantitative data while the qualitative data were transcribed, coded, interpreted, and analyzed thematically.

9- Data Analysis

This section presents information about the respondents, their opinions on the use of official languages in the media as well as their adherence to the government’s instructions about COVID-19.

Table 2: Level of Education of Respondents

EDUCATIONAL LEVEL OF POPULATION (BATCHAM)	FREQUENCY	PERCENTAGE
FSLC	56	50.0%
O-LEVEL	15	47.6%
A-LEVEL	4	3.6%
BACHELOR	2	1.8%
MASTERS	0	0%
TOTAL	112	100%
EDUCATIONAL LEVEL OF POPULATION (MBANGASSINA)	FREQUENCY	PERCENTAGE
FSLC	44	50.0%
O-LEVEL	26	29.5%
A-LEVEL	18	20.5%
BACHELOR	0	0%
MASTERS	0	0%
TOTAL	88	100%
EDUCATIONAL LEVEL OF POPULATION (MOUANKO)	FREQUENCY	PERCENTAGE
FSLC	22	22.4%
O-LEVEL	56	51.9%
A-LEVEL	14	13.0%
BACHELOR	8	7.4%
MASTERS	8	7.4%
TOTAL	108	100%
EDUCATIONAL LEVEL OF POPULATION (ALL THREE COMMUNITIES)	FREQUENCY	PERCENTAGE
FSLC	122	39.6%
O-LEVEL	132	42.9%
A-LEVEL	36	11.7%
BACHELOR	10	3.2%
MASTERS	8	2.6%
TOTAL	308	100%

Source: Researchers’ (field survey, 2021)

Table 2 features the educational levels of respondents in all three communities, the First School Leaving Certificate (FSLC) is equivalent to CEP. The Ordinary Level (O/L) is equivalent to

BEPC and Probatoire. The A/L is equivalent to Baccalaureat (BACC), while the Bachelor of Arts (BA) is equivalent to Licence. In the Batcham community, 50% of respondents hold the FSLC, while 44.6% hold G.C.E O-LEVEL or its equivalent. 3.6% hold G.C.E A-LEVEL or its equivalent, while 1.8% hold BACHELOR’S. In Mbangassina, 50% hold FSLC, while 29.5% hold G.C.E O-LEVEL or its equivalent, and 20.5% hold G.C.E A-LEVEL or its equivalent. In Mouanko, 20.4% of respondents hold FSLC. 51.9% hold G.C.E O-LEVEL or its equivalent, while 13% hold G.C.E A-LEVEL or its equivalent. 7.4% hold BACHELOR’S, and another 7.4% hold MASTER’S. Aggregately, 39.6% of respondents hold an FSLC, while 42.9% among them hold G.C.E O-LEVEL or its equivalent. 11.7% hold a G.C.E A-LEVEL or its equivalent. 3.2% hold a BACHELOR’S, and 2.6% hold a MASTER’S Degree.

Table 3: First Language of Respondents

FIRST LANGUAGE (BATCHAM)	FREQUENCY	PERCENTAGE
FRENCH	14	12%
ENGLISH	0	0%
LOCAL LANGUAGE	98	87.5%
TOTAL	112	100%
FIRST LANGUAGE (MBANGASSINA)	FREQUENCY	PERCENTAGE
FRENCH	16	18.2%
ENGLISH	0	0%
LOCAL LANGUAGE	72	81.8%
TOTAL	88	100%
FIRST LANGUAGE (MOUANKO)	FREQUENCY	PERCENTAGE
FRENCH	38	35.2%
ENGLISH	4	3.7%
LOCAL LANGUAGE	66	61.1%
TOTAL	108	100%
FIRST LANGUAGE (ALL THREE COMMUNITIES)	FREQUENCY	PERCENTAGE
FRENCH	68	22.1%
ENGLISH	4	1.3%
LOCAL LANGUAGE	236	76.6%
TOTAL	308	100%

Source: Researchers’ (field survey, 2021)

Table 3 displays the first languages of respondents. French is the first language for 22.1% of respondents, while English is the first language for 1.3% and the local language is the first language for 76.6% of respondents.

Table 4: Opinion of Respondents on Linguistic Bias

There exists a linguistic bias in French and English with regards to local languages for the dissemination of COVID-19 information. (BATCHAM)	FREQUENCY	PERCENTAGE
YES	82	73.2%
NO	22	19.6%
NO RESPONSE	8	7.1%
TOTAL	112	100%
There exists a linguistic bias in French and English concerning local languages for the dissemination of COVID-19 information. (MBANGASSINA)	FREQUENCY	PERCENTAGE
YES	58	65.9%
NO	18	20.5%
NO RESPONSE	12	13.6%
TOTAL	88	100%
There exists a linguistic bias in French and English with regard to local languages for the dissemination of COVID-19 information. (MOUANKO)	FREQUENCY	PERCENTAGE
YES	68	63.0%
NO	28	25.9%
NO RESPONSE	12	11.1%
TOTAL	108	100%
There exists a linguistic bias in French and English with regards to local languages for the dissemination of COVID-19 information. (ALL THREE COMMUNITIES)	FREQUENCY	PERCENTAGE
YES	208	67.5%
NO	68	22.1%
NO RESPONSE	32	10.4%
TOTAL	308	100%

Source: Researchers' (field survey, 2021)

Table 4 presents the respondents' opinions on the possible bias in the dissemination of COVID-19 information in favor of French and English, to the detriment of the local languages. The majority, 67.5% of respondents in all communities agree that there is a bias in favour of French and English to the detriment of local languages in the dissemination of COVID 19 information. Meanwhile, 22.1% of these respondents say there is no bias, and 10.4% of respondents gave no response.

Table 5: Opinion of Respondents on Language of Sensitization through Media

The Media Transmits the COVID-19 Related Information in my Local Language. (BATCHAM)	FREQUENCY	PERCENTAGE
Always	44	39.3%
Often	28	25.0%
Sometimes	16	14.3%
Rarely	6	5.4%
Never	16	14.3%
No Response	2	1.8%
Total	112	100%
The Media Transmits the COVID-19 Related Information in my Local Language. (MBANGASSINA)	FREQUENCY	PERCENTAGE
Always	6	6.8%
Often	8	9.1%
Sometimes	6	6.8%
Rarely	2	2.3%
Never	66	75.0%
No Response	0	0.0%
Total	88	100%
The Media Transmits the COVID-19 Related Information in my Local Language. (MOUANKO)	FREQUENCY	PERCENTAGE
Always	6	5.6%
Often	6	5.6%
Sometimes	12	11.1%
Rarely	14	13.0%
Never	66	61.1%
No Response	4	3.7%
Total	108	100%
The Media Transmits the COVID-19 Related Information in my Local Language. (ALL THREE COMMUNITIES)	FREQUENCY	PERCENTAGE
Always	56	18.2%
Often	42	13.6%
Sometimes	34	11.0%
Rarely	22	7.1%
Never	148	48.1%
No Response	6	1.9%
Total	308	100%

Source: Researchers' (field survey, 2021)

Table 5 presents the responses of participants on the transmission of COVID 19 related information in their local language by the media. Among all respondents from all three communities, 48.1% of participants answered that the media never transmits the COVID 19 related information in their local languages. 18.2% of them say the transmission of such information in their local language

is done always, and 13.6% say it happens often. 11% say the transmission in local languages happens sometimes, and 7.1% say it occurs rarely, while 1.9% of respondents did not voice their opinions.

Table 6: Vaccination Status

Are you Vaccinated? (BATCHAM)	FREQUENCY	PERCENTAGE
YES	20	17.9%
NO	82	73.2%
NO RESPONSE	10	8.9%
TOTAL	112	100%
Are you Vaccinated? (MBANGASSINA)	FREQUENCY	PERCENTAGE
YES	8	9.1%
NO	72	81.8%
NO RESPONSE	8	9.1%
TOTAL	88	100%
Are you Vaccinated? (MOUANKO)	FREQUENCY	PERCENTAGE
YES	8	7.4%
NO	94	87.0%
NO RESPONSE	6	5.6%
TOTAL	108	100%
Are you Vaccinated? (ALL THREE COMMUNITIES)	FREQUENCY	PERCENTAGE
YES	36	11.7%
NO	248	80.5%
NO RESPONSE	24	7.8%
TOTAL	308	100%

Source: Researchers' (field survey, 2021)

Table 6 shows the responses of participants on their vaccination status, which represent their adherence to the government's instructions. In Batcham, 17.9% affirm they are vaccinated, against 73.2% that are not vaccinated. 8.9% did not give a response to this question. In Mbangassina, 9.1% of participants say they are vaccinated, against 81.8% that are not. 9.1% did not give a response. In Mouanko, 7.4% of participants say they are vaccinated, against 87% that are not vaccinated. 5.6% of participants did not give a response. In total, 11.7% of respondents in all three communities say they are vaccinated, while 80.5% of them say they are not vaccinated. 7.8% of them all gave no response.

Table 7: Correlation between level of education and willingness to adhere to COVID-19 vaccine

FSLC (ALL THREE COMMUNITIES)		
BATCHAM	MBANGASSINA	MOUANKO
56	44	22
24	32	46
PEARSON	-0.99992766989	
O-LEVEL (ALL THREE COMMUNITIES)		
BATCHAM	MBANGASSINA	MOUANKO
50	26	56
24	32	46
PEARSON	0.339422117	
A-LEVEL (ALL THREE COMMUNITIES)		
BATCHAM	MBANGASSINA	MOUANKO
4	18	14
24	32	46
PEARSON	0.572855804	
BACHELOR (ALL THREE COMMUNITIES)		
BATCHAM	MBANGASSINA	MOUANKO
2	0	8
24	32	46
PEARSON	0.819656165	
MASTERS (ALL THREE COMMUNITIES)		
BATCHAM	MBANGASSINA	MOUANKO
0	0	8
24	32	46
PEARSON	0.933256525	

Source: Researchers' (field survey, 2021)

This table reveals that the population that shows a willingness to accept the COVID-19 vaccine correlates well with the level of education in the three communities. In other words, it suggests that from a lower to a higher level of education, both variables progress in the same direction and their relationship tends to get much stronger at higher educational levels. The population with the lowest level of education is unwilling to accept the vaccine, but as the level of education increases, so is the willingness to accept the vaccine. The people with a higher level of education have more skills in official languages; they have a better understanding of the information disseminated through the media than those with a low level of education.

8- Discussion

This study aimed at investigating the extent to which the language choice against the COVID-19 pandemic is efficient in Cameroon. Findings revealed that the majority of respondents have between FSLC and O/L, while a minority have from the A/L upward. The local language is the first language for the majority of respondents. Most respondents believe there is linguistic bias in the dissemination of COVID-19 information. The majority of respondents argue that the media does not disseminate COVID-19 information in their local language. A considerable number of respondents are not willing to take the COVID-19 test.

The analysis of the interviews with the medical personnel and the media personnel revealed that, in Batcham, the medical personnel and media personnel work in synergy to sensitize the population through the local language. In Mbangassina, the medical and media personnel do not lay particular emphasis on the local language. Information is mostly disseminated through the official languages while the local language is allocated a given amount of time; just like in urban areas. In Mouanko, there is no local radio station, therefore, the medical personnel only relies on town criers and interpersonal relationships for the dissemination of COVID-19 information. The study shows that Batcham community has the highest number of people who are willing to adhere to the government's instructions (17.9%). This result is followed by the community of Mbangassina (9.1%) and lastly, the community of Mouanko (7.4%) which has the smallest number of people who are willing to adhere.

The hypothesis guiding this study stipulates that the government's choice of language for the sensitization against the COVID-19 pandemic is effective. A Chi-Square test of independence was performed to assess the relationship between the language in use in the media and adherence to COVID-19 instructions. There was a significant relationship between the two variables, $X^2(10, N=308) = 100.653, p < .001$. The null hypothesis stipulated that; the language used by the media has no relation to the adherence to COVID-19 rules. The *p*-value being inferior to .05, the null hypothesis was rejected. This means, there is an association between the language in use in the media and the population's adherence to COVID-19 preventive measures. Based on this study, the use of indigenous language in the media can positively influence the population to adhere to the government's instructions.

9- Conclusion

This study aimed to investigate the extent to which the language choice in the media against the COVID-19 pandemic in Cameroon is efficient and the extent to which it determines people's adherence to the government's instructions. The study revealed that the COVID-19 discourse in the media is presented in a language that does not reflect the culture and realities of Cameroonians. Most often, English and French are the languages used in the media for the dissemination of COVID-19 information. Unfortunately, this does not favor the adherence of people with limited skills in these languages to respect the preventive measures against the pandemic. People with low educational levels have a limited understanding of the discourse about the pandemic because of the media language choice, hence; they do not easily adhere to the government's instructions. Ignoring a language for the dissemination of vital information implies marginalizing its people and preventing them from having access to information. This study reveals that the community that uses the local language for the dissemination of COVID-19 information on the media had more people willing to follow the government's instructions. The opposite is also true. Therefore, the use of indigenous

language through media can serve as a valuable tool that can positively influence people's adherence to the government's instructions. The study, therefore, suggests that English and French should be used for the dissemination of COVID-19 information in urban areas of Cameroon where the literacy rate is high; while the indigenous languages should be the main languages used for the dissemination of COVID-19 information in rural areas where most people have limited literacy skills.

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Authorship and Level of Contribution

Marthe Bekele Matanda carried out the study under the supervision and co-supervision of Prof. Victor N. Cheo, and Prof. Vincent A. Tanda respectively.

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