

# AWARENESS RAISING

PUBLIC HEALTH INFORMATION  
AND COMMUNICATION IN  
CAMEROON:  
A DIAGNOSTIC OF THE SITUATION



# PUBLIC HEALTH INFORMATION AND COMMUNICATION IN CAMEROON: A DIAGNOSTIC OF THE SITUATION



## FIELD ACTIVITY

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## LA COMUNICAZIONE IN SANITÀ PUBBLICA IN CAMERUN: UNA DIAGNOSI DELLA SITUAZIONE

*La prevenzione è la pietra angolare di ogni strategia di sanità pubblica. La comunicazione e la promozione della salute è tutto ciò che concerne lo scambio di informazioni sulla salute, offrendo prodotti e servizi per correggere i comportamenti delle persone e migliorare la salute pubblica. Il sistema di comunicazione in Camerun è in rapida crescita e offre numerosi strumenti per raggiungere la popolazione di interesse. Purtroppo, questi strumenti sono ancora sottoutilizzati dai professionisti della sanità pubblica.*

*L'esperienza di Noodles nella diffusione delle informazioni circa i potenziali effetti per la salute del Bisfenolo A presente nei biberon in Camerun ha rivelato alcune difficoltà nell'effettuare campagne di comunicazione attraverso i mass media. Nonostante queste difficoltà, l'ambiente della comunicazione rimane favorevole ed è necessario maggiore sforzo per intraprendere azioni appropriate per attività efficaci di prevenzione sanitaria.*

**SUMMARY:** Prevention is the corner stone of any public health strategy. Health communication and marketing is all about exchanging health information, delivering products and services to correct people behaviors and ameliorate public health outcomes. The communication system in Cameroon is fast growing and provides numerous tools to reach the target audience. Unfortunately, these tools are still underexploited by public health professionals.

Noodles experience in spreading information around potential health effects of Bisphenol A baby bottles in Cameroon revealed some difficulties to carry out communication campaign through mass media. Despite these difficulties, communication environment remain conducive and more effort should be done to take appropriate actions for effective health preventive activities.

## INTRODUCTION

Health communication is defined at the school of public health and health services (Georges Washington University) as “the production and exchange of information to inform, influence or motivate individual, institutional and public audiences about health is-

sues.” In essence, it’s about the message and successfully getting it out; while public health marketing in essence is about developing and successfully delivering products and services that help target audience members live more healthfully.

This underlines the importance of building adequate, understandable and careful design strategies to deliver the message. Of course, this message becomes useful only if put into actions and bring change.

At each step, there are varieties of channels that must be considered when communicating with stakeholders, from face-to-face to mass communications. The social contexts in which health communication occurs are also widely varied and can include homes, schools, restaurants, workplaces.

The recent explosion of ICT tools (Information and Communication Technologies) as online support groups, web portals, tailored information systems, telehealth centers, electronic health records, social networking and mobile devices is an unexpected opportunity to empower media as a whole and health communication. In the following lines, we will revisit Cameroon legal texts organizing communication activities, communication environment and existing opportunities to spread public health messages.

# 1

## MEDIASCOPE

Article 1 of the general provisions of Cameroon's 1990 Freedom of Social Communication law<sup>1</sup> and the 1996 revised constitution both guarantee freedom of the press.

Article 2(1) of the 1990 law stipulates that freedom of communication applies to all forms of communication.

However, at present, there is no specific law mandating access to information (Republic of Cameroon, 1990b; 1996b). A number of others provisions exist in relation to media regulation, but there is no provision for an independent media regulator. The main regulatory bodies are the Cameroon Media Council (CMC) and the National Communications Council (NCC), their still to make their impact felt. While the former is answerable to the Minister of Communication, the latter answers to the Prime Minister.

There are no current provisions that aim to secure the independence of state-owned media.

A share public opinion is that state media, in their mission of providing public services, rely more on official information, other sources of information are control and filter to verify their conformity to government exigencies before public diffusion. Because of this, they are considered to be pro-government. The 2000 Decree on Private Audio-Visual Communication Enterprises (private media) authorized the creation of both community and alternative media (Republic of Cameroon, 2000a)<sup>2</sup>. A 2002 Ministerial Order further supported development of a community sector by providing for public assistance to private communication (Republic of Cameroon, 2002b)<sup>3</sup>. It should be noted that the assistance given by the Ministry of Communication to private media houses has not been accompanied by attempts to exert government control.

More than 200 press enterprises are functional in Cameroon (Newspapers, Radios, and Television). Televisions and radio channels are on satellite and are

received worldwide for a good number of them. Cameroon has many journalist associations that work for the wellbeing of its practitioners. The most outstanding to cite a few are Cameroon Union of Journalist (UJC), Cameroon Association of English Speaking Journalist (CAMASEJ), Cameroon Association of Sports Reporters, Cameroon Association of Commonwealth Journalists (CACOJ) etc.

According to the last estimate from the UJC, in 2005 there were 874 practicing journalists in the country: 183 women and 691 men (UJC, 2005); 21% of the country's journalists are female and 79% male<sup>3</sup>.

Practicing journalists are expected to register with the government. A 2002 Decree established a press card system for registered journalists (Republic of Cameroon, 2002c). To obtain a press card a journalist must prove to belong to a legal media house or a media organization. Only journalists who own a press card are allowed access to cover public events related to the state<sup>4</sup>.

There is one vocational journalism school, the Advanced School of Mass Communication, based in Yaoundé. There are also three university departments offering journalism programs, two of which are private institutions (Siantou Supérieure and Institut Ndi Samba), and the third is a public institution (Department of Journalism and Mass Communication, University of Buea).

In addition, some NGOs provide journalism training, such as UNESCO, Friedrich Ebert Stiftung (FES), and the British Council in collaboration with the Thompson Foundation.

Publications are done in English, French or in both languages; they are release daily, weekly, twice a week or monthly. The main press distributor is a French base company "Messapresse" with Headquarters in Douala. Not all papers are circulated by the company; others used their personal network connections.

Despite the impressive growth in the radio sector (about 100 stations between 2000 and 2010), no private radio services has been established at national level, leaving the state-run station (Cameroon Radio Television, CRTV) a national footprint. Apart from CRTV, Others international stations having a footprint are the French station Radio France International (RFI), The British Broadcasting Corporation (BBC), and the African service (Africa No 1).

National internet coverage area is more than 50% with the optic fibers. With this, Cameroon is experiencing an explosion of online media. Almost all newspaper has online edition, besides this others newspapers published exclusively online, on their website or sent into register members' email address. These newspapers for the majority covers general topics, while spe-

cialized ones covers topics on economy, law, women actuality and celebrities, but none in public health.

Three mobile phone operators also supply mobile phone services as far as in rural communities, making internet services accessible in the whole territory via computers and mobile phones. Despite the cost of this service relatively high for a good fraction of the population, its remains a wonderful communication opportunity to reach the final target who is the consumer. The number of people using social network, especially in the youth population is exponentially growing. Unfortunately, no public health newspaper or magazine printed or online exist to take advantage of this environment.



## 2 THE PUBLIC HEALTH SECTOR

Despite the growing communication facilities, no specialized health newspaper or magazine exist among the hundreds periodic published nationwide. A positives notes however, could be that all TV and radio stations (public or private, French / English) somehow propose health programs on weekly basis, but this remains greatly insufficient compared to the urgent need raise by to the National Burden of Diseases. In addition, no communication training school offers course in public health communication, this can explain why very few health programs and debate are opened by journalist on major public health topics. The scientific and technical characters of these health topics may constitute a barrier for ordinary journalist with little scientific background to discussed health issues.

Promoters of traditional medicine and natural health clinics are more prone to invest media space to talk health issues. Health professionals from medical schools and scientists in Universities do not communicate enough about their findings and health actuality, especially into mass media.

Public health curriculum in Cameroon is diverse: from classic: biochemistry, chemistry, animal and plants biology, to medical studies (pediatric, gynecology, obstetric, endocrinology, surgery, nursery) and others fast growing biomedical specialities: virology, bacteriology, immunology, pharmacognosy, pharmacy, public health, radiology to cite few.

Relevant and useful health information most often end up in books, articles and other intellectual support rather than staying in people mind for effective implementation.

Knowledge and findings from health's professional should be made available to population. The actual most use means of communication is through scientific peer review journal in international and regional

publications. Few professional associations like the association of medical doctors and the Cameroon bio-science society have periodic publication to channel their research works and findings. However, the inconsistency of these publications makes them unknown and greatly inaccessible to the general population.

This overall confusion and lead to misunderstandings, inefficient health promotion campaign, waste of time, energy and resources.

Civil Society Organizations are playing an important role to address specifics health topics. NGOs and Associations work to address HIV/AIDS, tuberculosis, malaria, cancers, cholera outbreaks. Infant malnutrition, river blindness and other diseases. Their role is important assistant decision makers to design and spread important messages.

Particular attention is given to endemic and epidemic transmissible diseases probably because of their rapid devastating effects. Chronic non communicable diseases are generally unknown by the population.

Group of journalists are trained to communicate on specific health topics, in collaboration with National programs fighting against particular chosen diseases: Roll back malaria program, the national committee for fight against HIV and tuberculosis to mention few of them.

Mobile phone operators, also in conjunction with private/public initiatives, help spread useful health information by SMS (Short Message Services).

Public health actors in Cameroon under exploit the constantly growing communication potential to reach targets with health messages. More can be done, the existing potential remain huge and opportunities should be oriented towards health communication, with require both good understanding of health topics as wells as communication skills. Health challenges are big and required biggest interventions.

## 3 EMERGING TOPICS NEEDS PUBLIC OUTREACH

Current projects in Cameroon cover topics mainly related to **endemic - transmissible diseases** (Malaria, HIV/AIDS, tuberculosis, river blindness, sexually transmitted diseases), **episodic epidemic outbreaks** (cholera, meningitis) and long term **m micronutrients**

**malnutrition** (Vitamins A, D, B12, Zinc, Iron, Folic acid).

The general tendency is the focus on acute devastating diseases that force for reaction after drastic consequences on people health. The great part of funds

used in this portfolio is donated by international funding's agencies.

Preventive measures need to become the milestones for health promotion strategies.

With the rapid changes observed in the structure of the traditional society and the fast "westernisation", added to diverse phenomena as the intensive use and consumption of chemical products, occurrence of natural disasters, climate changes and global warming, environmental pollution, fast foods, people are more and more exposed in various ways to pernicious new chemical compounds.

Attention should be paid also to ubiquitous, invisible but toxic chemicals with long-term effects, indicated sometimes like "silent killers". Their impact on the National Burden of Diseases is expected to be high even if difficult to see and to estimate.

In the lack of proper specific regulations, assessment projects should appeal for more intensive communication to inform the general population and educate on measures to avoid or mitigate risks.

Our world keeps changing, risks keep changing too, and we need preparedness to anticipate and prevent them to live healthy.

## 4 NOODLES FIELD EXPERIENCE

At its pilot experience in the country NOODLES attempts to communicate its findings about potential threats that Bisphenol A from baby bottles could pose in Cameroon. The organization decided to **post information on its website**, to attract general attention and widen discussion by **social network**, publish on international **scientific peer review journal** and **platform**, present at scientific congresses and social events, as well as contact **mass media** enterprises to widespread information and enable them to take informed decisions.

### 4.1 WEBSITE AND SOCIAL NETWORK

Noodles research findings, documents as well as others relevant documents are loaded on Noodles web-pages<sup>5</sup> and others organization websites<sup>6</sup> to allow rapid and easy access for people worldwide. Reaction can be done by contacting Noodles officials for clarifications and discussions, also forum discussions are opened via Noodles Facebook page<sup>7</sup>. Despite people access to internet, it can be noted that reactions came mostly from people abroad and very few from Cameroon. Eventhough the target population is not restricted to Cameroonian but opened to people worldwide, absence of reactions from inside the countries should be probably due to the fact that the website is still largely unknown. In addition, social networks are still mostly used to keep in touch with friends than to communicate professionals and health issues; moreover. Efforts should be increase to advertise and let interested people to take advantage of these forums.

### 4.2 PLATFORM, POSTER PRESENTATIONS AND SCIENTIFIC PUBLICATIONS

Communication in scientific forum is the more successful part of the information campaign till now. As a research organization, these platforms are useful to exchange with the scientific community, research activities, findings and efforts. Since its creation, Noodles has participated to numerous scientific events with publications available on its website<sup>8</sup>. However, the greatest challenge here is to convince and get involve the legislators who of course beyond scientific argument will consider others economic and social factors. Meeting that gathered health stakeholders, researchers, decision makers, civil societies' organization and consumers should be multiply to increase awareness on specific health questions and facilitate effectiveness of prevention measures.

### 4.3 MASS MEDIA (NEWSPAPERS, RADIO AND TV STATIONS)

Communicating public health information in mass media has to face numerous barriers, the editorial line of the newspaper for example. Although it was always possible to have the paper published in the rubric reserved to "society", this required a certain amount of money. Even the social character of the information and the not-for-profit character of the organization proposing it, it doesn't make any difference in the fix charges the enterprise has to pay. No media, even the public media, has options for free publication, except if coming from an official governmental source; in that case, substantial considerations can be done.

Some of the plethora problems mention is high cost

of printing materials, lack of communication targets and the dwindling advertisement sector resulting on high taxes imposed by the government on the media. Crossing the economic barriers is not the end of the journey. The language issue should be considered: Cameroon is officially bilingual (French and English) and, unofficially, we have to take into account more

than 230 speaking native language, the unofficial but widely used “pidgin” language which is a mix of French, English and native languages. The rate of illiteracy as well as national or regional character of certain media command to use well designed and targeted communication strategies to avoid missing important layers of the population.

## 5

### BRIDGING THE GAP

Public health challenges are multiple and prevention capacities underexploited. To bridge this gap and re-center prevention at the heart of public health strategy, stakeholders should take advantage of the changing media environment. A real desire to communicate science to people has to become a leitmotiv. Health and consumers’ programs should be solicited by public health professionals from all specialties.

Multi-target communication should be established. Scientific publications reinforce, made accessible by professionals and diffuse in a more accessible language, illustrate with pictures for the public.

Public outreach remains a priority. Apart from general information talk show, creation of specialized private health magazine or newspaper could certainly be a good tribune to channel health information not only to inform the general opinion, but also for their education. This media support may cover topics ranging from health legislations and policy, health system, health innovations, to research and educational projects.

Another way forward is improving human resources skills. Public health professionals may follow journalism and communications training to improve their skills and acquire appropriate skills for knowledge spreading. Online educational and training courses design and release for specific target groups.

Radio and TV production of health programs and talk show for people of all ages could facilitate interactions between health professionals and people. A good beginning could be to mobilize and sensitize a journalist with good scientific background and health related training to specialize in specific themes and be working with health authorities and other civil society organizations to help improve health outcomes.

An online national forum animated by a moderator can be created and opened to public. Forum moderator will be in charge to post information of public interest, let people express their concern and exchange their view. Advantage with such a forum is that those

in capacity to propose a solution will promptly react and share their experiences with those in needs.

Moreover, mobile operators under their social responsibilities can assist organization by sending SMS (Short Message Services) into personal mobile phone. 3 to 5 minutes videos periodically broadcast on different media could attract people attention.

Booklet, pamphlet and leaflet as educational material can be published and made accessible to authorities and the public. This will create awareness, initiate debate and discussion, help empower people, drive adoption of appropriate behaviors and inform decisions.

## CONCLUSION

The essence of communication is all about informing people; convince them to take informed actions. Prevention should be the corner stone of any public health strategy. Despite the fast growing information tools in Cameroon, the health sector still suffers of inefficient and inadequate communication campaign, leading to great lost. Despite problems encounter to implement efficient communication activities, the improvement of ICT tools should be used to improve public health outcomes. Much work remain to be done, public health stakeholders should as much as possible

discuss with people on existing and emerging risks, ways to mitigate this and of paramount importance, prevention measures.

Peer review publications should be reinforce and made known and accessible to the population.

Television, radio, newspapers, social network and forum discussions remains good platforms for experience sharing. A health magazine or newspaper can be created, providing an opportunity to health professional to communicate on their works and inform consumers.

## REFERENCES

Law N° 90/052 of 19th December 1990 relative to the freedom of social communication, modified by Law N° 96/04 of 4th January 1996.

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The African Media Development initiative: “Cameroon Media health”

Decree N° 2002/2170/PM of 9th December 2002 fixing the modalities for the issuing of press cards

Noodles website: [www.noodlesonlus.org](http://www.noodlesonlus.org)

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