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CENTRE DE RECHERCHE ET DE FORMATION DOCTORALE EN ARTS, LANGUES ET CULTURES

UNITE DE RECHERCHE ET DE LA FORMATION DOCTORALE EN ARTS, LANGUES ET CIVILISATIONS

A DISCURSIVE ANALYSIS OF MEDIA LANGUAGE ON NON-COMMUNICABLE DISEASES: THE CASE STUDY OF *CAMEROON TRIBUNE*

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DEDICATION

To

My parents, Koumtossa Tchamba Raymonde Marcelle

And

Kouayep Yomi Honore Aime

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LIST OF ABBREVIATIONS

CDA -Critical Discourse Analysis

DHA-Discourse Historical Approach

NCD- Non-Communicable Diseases

SOPECAM-Society of Press and Editions of Cameroon

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ABSTRACT

Non-communicable diseases (NCDs) pose a significant health challenge in Cameroon, yet the linguistic construction of these diseases within media narratives remains underexplored. This study analyses the portrayal of NCDs in *Cameroon Tribune* through a discursive lens, employing Critical Discourse Analysis (CDA) and the Discourse Historical Approach. It focuses on key research questions regarding the predominant non-communicable diseases (NCDs) featured, the linguistic styles employed, and the prevailing narratives. A qualitative survey of 50 articles published between 2017 and 2024 reveals that cancer, kidney failure, and diabetes dominate discussions, articulated through various discourses, educational, lifestyle, and hope. Linguistic strategies highlight power dynamics between medical personnel and patients, while metaphors such as "silent diseases" frame public perceptions. By incorporating historical contexts and cognitive dimensions of discourse within a qualitative framework, this research enhances understanding of how language shapes health narratives in *Cameroon Tribune*, contributing to broader discussions on health communication and public health policy.

Keywords: Discursive analysis, Media language, Non-communicable diseases.

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RÉSUMÉ

Les maladies non transmissibles (MNT) représentent un défi sanitaire majeur au Cameroun, mais la construction linguistique de ces maladies dans les récits médiatiques reste peu explorée. Cette étude analyse la représentation des MNT dans le *Cameroun Tribune* à travers une approche discursive, en utilisant l'Analyse Critique du Discours (ACD), l'Approche Historique du Discours. Elle se concentre sur des questions de recherche clés concernant les MNT prédominantes présentées, les styles linguistiques employés et les récits dominants. Une analyse qualitative de 50 articles publiés entre 2017 et 2024 révèle que le cancer, l'insuffisance rénale et le diabète dominent les discussions, articulées à travers divers discours éducatifs, de mode de vie et d'espoir. Les stratégies linguistiques soulignent les dynamiques de pouvoir entre le personnel médical et les patients, tandis que des métaphores telles que "maladies silencieuses" façonnent les perceptions publiques. En intégrant des contextes historiques et des dimensions cognitives du discours dans un cadre qualitatif, cette recherche renforce la compréhension de la manière dont le langage façonne les récits sur la santé dans le *Cameroun Tribune*, contribuant ainsi à des discussions plus larges sur la communication en santé et la politique de santé publique.

Mots-clés : Analyse discursive, Langage médiatique, Maladies non transmissibles.

CHAPTER ONE: GENERAL INTRODUCTION AND BACKGROUND TO THE STUDY

In an era where information flows constantly and narratives shape public perception, the language used in the media plays a pivotal role in framing issues that profoundly impact society. This study examines the media language surrounding non-communicable diseases (NCDs), with a focus on *Cameroon Tribune*, one of Cameroon's leading newspapers. As NCDs like diabetes, cardiovascular diseases, and cancer emerge as significant health challenges, understanding how these issues are communicated in the media becomes crucial. The portrayal of NCDS in the media can influence public awareness, shape health policies, and ultimately impact healthcare outcomes. Language is not merely a tool for conveying information; it constructs realities, reflects cultural attitudes, and can stigmatise or empower. Through a discursive analysis, this study will unravel the underlying narratives and ideologies embedded within *Cameroon Tribune's* coverage of NCDs, highlighting how language choices can illuminate or obscure critical health issues. As Cameroon's healthcare system grapples with the rising burden of NCDs, this research aims to uncover the responsibilities of the media in informing and educating the public. By analysing the representations, discourses and linguistic strategies employed in the coverage of NCDs, this study will contribute to a deeper understanding of the intersection between media language and public health discourse in Cameroon.

In the following sections, we will delve into the background of NCDs in Cameroon, the research motivation, the statement of the problem, the aim of the study, research questions, aim of the study outlines the objectives of the research, the scope of the work, and articulate the significance of this study in a broader health communication context. The findings aim to enrich academic discourse and offer insights for policymakers, healthcare professionals, and media practitioners in fostering a more informed and health-conscious society.

1.2 Background and Context

Non-communicable diseases (NCDs) have emerged as a significant global public health challenge, accounting for the majority of deaths worldwide. Conditions such as cardiovascular disease, cancer, diabetes, and chronic respiratory illnesses are not merely statistics; they represent profound challenges that affect individuals, families, and entire communities. The burden of these diseases is immense, impacting healthcare systems and national economies, particularly in low-

and middle-income countries, where resources for prevention and treatment are often limited (World Health Organisation, 2019). In 2019, an alarming 74% of all deaths globally were attributed to NCDs, highlighting the urgent need for effective strategies to combat these diseases.

A complex interplay of demographic, epidemiological, and socioeconomic factors drives the prevalence of NCDs. This means that various characteristics of population, patterns of diseases, economic and social conditions interact in intricate ways, significantly influencing how common NCDs are. Rapid urbanisation, a shift in dietary patterns towards processed and high-calorie foods, increased physical inactivity, and an ageing population have all contributed to the rise of NCD risk factors in many parts of the developing world (Popkin et al., 2012; Afshin et al., 2017). These changes reflect broader global trends yet manifest uniquely in different cultural and socio-economic contexts. The epidemiological transition from communicable to non-communicable diseases is not just a health issue; it indicates changing lifestyles and social dynamics that require urgent attention (Omran, 2005).

Cameroon, a Central African nation, is no exception to this global trend. Over recent years, the country has witnessed a significant increase in the prevalence of NCDs. Cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes now account for a substantial proportion of the national disease burden. In 2019, NCDs were responsible for an estimated 39% of all deaths in Cameroon, surpassing the burden of communicable, maternal, neonatal, and nutritional diseases (Institute for Health Metrics and Evaluation, 2020). This shift marks a critical turning point in the country's health landscape, necessitating a comprehensive and coordinated response.

Addressing the NCD epidemic in Cameroon has become a key priority for both the government and public health stakeholders. The Ministry of Public Health has taken significant steps by developing a National Strategic Plan for the Prevention and Control of Non-Communicable Diseases. This ambitious plan outlines a comprehensive approach to reducing the burden of NCDs through prevention, early detection, and effective management. It recognises the need for multi-faceted strategies, including public awareness campaigns, health education initiatives, and promoting healthy behaviours.

However, the successful implementation of this plan presents numerous challenges. The realities of limited healthcare resources, varying levels of public health literacy, and entrenched cultural beliefs around health and illness complicate efforts to engage the population effectively. Public awareness is crucial; even the best-laid plans may falter without a well-informed citizenry. Moreover, the media shapes public perceptions and understanding of NCDs. The language used to describe these diseases can foster stigma or promote understanding, highlighting the importance of critical discourse analysis in health communication.

In conclusion, the rising tide of non-communicable diseases in Cameroon reflects a broader global phenomenon that necessitates immediate and sustained action. As the country grapples with this complex health challenge, exploring how media language influences public discourse and health behaviours is imperative. By understanding these dynamics, stakeholders can develop more effective communication strategies that resonate with the public, ultimately improving health outcomes and reducing the burden of NCDs in Cameroon.

1.2.1 The Role of Language

The role of language in public health communication has been extensively studied within health communication and medical anthropology. Researchers have explored how linguistic framing, discourse analysis, and cultural competence intersect with public understanding of health issues, including NCDs. Language is a powerful tool that shapes individual beliefs, attitudes, and behaviours related to health and societal responses to public health challenges.

Using specific terminology, metaphors, and narratives in media representations and public health campaigns can influence how different audiences perceive NCDs. For example, the framing of NCDs as "lifestyle-related diseases" versus "complex chronic conditions" can evoke varying interpretations and responses from the public. Moreover, the impact of stigmatising language and its effects on individuals living with NCDs has been a significant area of concern within public health discourse. Cultural competence in health communication emphasises the importance of understanding diverse linguistic and cultural contexts when developing effective messaging about NCD prevention, management, and treatment. This approach recognises that language is deeply intertwined with cultural norms, values, and beliefs and that effective communication must be sensitive to these dynamics

1.2.2 The Role of Media in Health Communication

The role of media in health communication is pivotal in shaping public awareness, attitudes, and behaviours surrounding non-communicable diseases (NCDs) in Cameroon. As a powerful instrument for information dissemination and social influence, the media can be effectively leveraged to promote healthy lifestyles, facilitate the early detection of NCD risk factors, and encourage individuals to seek appropriate healthcare services. This multifaceted approach can significantly impact how communities understand and respond to health challenges (Corcoran, 2013).

Mass media channels, including television, radio, and print media, can deliver targeted health education campaigns that inform the public about the risk factors, warning signs, and preventive measures associated with NCDs. These campaigns can employ persuasive messaging strategies designed to motivate behavioural changes. Techniques such as testimonials from individuals who have successfully managed their health, fear appeals that highlight the serious consequences of neglecting NCDs, and positive reinforcement can all play crucial roles in altering public perceptions and behaviours (Wakefield et al., 2010).

In addition to traditional media, the rise of digital and social media platforms has opened up new avenues for health communication and engagement. Social media, in particular, has the potential to foster peer-to-peer sharing of health information, enabling interactive dialogues between the public and healthcare providers. This dynamic platform can facilitate the dissemination of evidence-based health content that resonates with diverse audiences (Korda & Itani, 2013). By harnessing the widespread adoption of smartphones and internet access, digital media can reach a broader audience, including underserved communities, with tailored NCD-related information and resources (Chou et al., 2013).

However, the media's influence on public health has its challenges. The proliferation of inaccurate, sensationalised, or misleading health information can inadvertently spread misinformation and undermine public trust in healthcare authorities (Southwell & Thorson, 2015). Furthermore, portraying body image, physical activity, and dietary patterns in the media can have unintended consequences, particularly for vulnerable populations such as youth, potentially reinforcing unhealthy norms and behaviours (Tiggemann, 2011).

1.2.3 *Cameroon Tribune:* A Case Study

Founded in 1974, *Cameroon Tribune* has become one of the leading national newspapers, providing coverage on various topics ranging from politics to health. Its reach and reliability as a news source make it an essential site for examining the discourse surrounding NCDs. *Cameroon Tribune* can highlight the significance of NCDs, encourage dialogue among stakeholders, and advocate for policy changes; however, how these diseases are framed, whether as urgent public health crises or as manageable conditions, can affect public perception and response.

Previous studies have demonstrated that media representations can promote a sense of urgency, mobilise public action, or contribute to apathy and misinformation. In a country where health literacy may vary greatly, the potential for media to serve as a double-edged sword is evident. Consequently, understanding how *Cameroon Tribune* frames NCDs is crucial for extracting insights about the broader implications for public health policy and community engagement. *Cameroon Tribune*, the national daily newspaper of Cameroon, provides a valuable case study for examining the role of the media in health communication within the country. As the leading source of news and information for many Cameroonians, *Cameroon Tribune* wields significant influence over public discourse and awareness of health-related issues

1.2.4 Influence and Impact

Cameroon Tribune plays a pivotal role in health communication, serving as a vital conduit for information that can substantially impact public health outcomes. Its influence extends beyond mere reporting; the newspaper has the potential to raise awareness about critical health issues, promote preventive behaviours, and advocate for the enhancement of healthcare policies and infrastructure. By disseminating accurate and comprehensive health information, *Cameroon Tribune* empowers individuals to make informed health decisions, fostering a culture of prevention and proactive health management.

Moreover, *Cameroon Tribune's* commitment to ethically sound health reporting builds trust with its readership. It cultivates a well-informed public that is likely to engage with and support health initiatives. Through investigative journalism and in-depth reporting on healthcare challenges, the newspaper can highlight gaps in the health system, thereby prompting policymakers to take necessary action to improve healthcare access and quality. Furthermore, by

covering success stories and best practices in health interventions, *Cameroon Tribune* can inspire collective action and encourage community involvement in health promotion efforts.

In this way, *Cameroon Tribune* does not just report on health issues; it actively shapes the narrative around health and wellness in Cameroon. Its coverage can influence public perception and attitudes towards various health topics, including disease prevention, vaccination, and mental health. By continuing to provide high-quality health communication, *Cameroon Tribune* can significantly contribute to the overall health and well-being of the Cameroonian population, ultimately leading to better health outcomes and a more resilient society.

1.3 Research Motivation

Media language on health challenges has always been intriguing in language analysis. The rising prevalence of non-communicable diseases (NCDs) in Cameroon presents a pressing public health challenge, one that necessitates a deeper understanding of how these issues are represented in the media. *Cameroon Tribune*, as a leading national newspaper, plays a pivotal role in shaping public discourse and influencing societal perceptions about health. However, the language used in media coverage can significantly affect how individuals and communities respond to NCDs. This study is motivated by the critical need to investigate the discursive strategies employed in health reporting and their implications for public awareness, stigma, and health-seeking behaviour.

In a context where health literacy varies widely, the media is a primary source of information for many individuals. Understanding how NCDs are framed in *Cameroon Tribune* can illuminate how language constructs particular narratives. These narratives can empower individuals to take control of their health or, conversely, perpetuate misconceptions and stigma. By examining the discourse surrounding NCDs, this research aims to reveal the underlying ideologies and power dynamics, thereby contributing to a more informed public dialogue.

Moreover, the motivation of this research transcends academic inquiry. It seeks to engage policymakers, healthcare practitioners, and community advocates in meaningful discussions about effective health communication strategies. This study aspires to foster a more nuanced understanding of public health issues by critically analysing the media language on NCDs, encouraging collective action towards improved health outcomes in Cameroon. Ultimately, this

research aims to bridge the gap between media representation and public health, emphasising the vital role of discourse in shaping health perceptions and behaviours in a rapidly evolving health landscape.

1.4 Statement of the problem

The discourse surrounding non-communicable diseases (NCDs) in media representations holds significant implications for public health awareness, policy formulation, and societal perceptions. Despite the increasing prevalence and significant impact of non-communicable diseases (NCDs) in Cameroon, there is a critical gap in understanding how these diseases are linguistically constructed and framed within media narratives, particularly in the context of *Cameroon Tribune*.

1.5 Aim of the Study

The primary aim of this study is to conduct a critical discursive analysis of media language concerning non-communicable diseases (NCDs) in *Cameroon Tribune.* This research seeks to uncover the complex interplay between language and health outcomes by examining how these health issues are framed within the media. Specifically, the study aims to analyse the linguistic strategies employed in representing NCDs, identifying the rhetorical techniques and choices that influence societal attitudes and beliefs. Furthermore, it seeks to uncover the underlying ideologies that inform health narratives, revealing how such discourses can empower individuals or reinforce stigmatisation and misconceptions surrounding chronic diseases.

In addition, this study will contextualise health discourse within the broader socio-historical landscape of Cameroon, examining how historical developments and cultural factors shape contemporary media representations of health. By achieving these aims, the research aspires to inform public health communication, providing insights that can be utilised by policymakers, healthcare practitioners, and media professionals to enhance public health messaging and encourage informed health behaviours among the population. Ultimately, this study intends to contribute to a deeper understanding of the vital role that media language plays in shaping public discourse on NCDs, fostering a more health-conscious society in Cameroon.

1.6 Research Objectives

The objectives of this research focus on understanding how non-communicable diseases (NCDs) are represented in *Cameroon Tribune.*

1.6.1 Main objective

The main objective of this research is to identify the prevalent discourses and narratives surrounding non-communicable diseases within the media. This will involve critically analysing the language and context in which these diseases are represented.

1.3.2 Specific objectives

To identify the linguistic strategies employed in *Cameroon Tribune.*

1.7 Research Questions

1. What are the prevalent discourses and narratives surrounding non-communicable diseases in *Cameroon Tribune?*

2. What are the linguistic strategies employed in *Cameroon Tribune* to discuss NCDs?

1.8 Significance of the Study

The significance of this study lies in its critical examination of media language surrounding non-communicable diseases (NCDs) within the context of *Cameroon Tribune*. As the prevalence of NCDs, such as diabetes, hypertension, and cancer, continues to rise globally, understanding how media representations impact discourse becomes increasingly vital. This research informs public health communication by highlighting how language influences the understanding of NCDs, allowing health communicators and policymakers to develop effective messaging strategies that resonate with diverse audiences. Additionally, it emphasises the cultural context of Cameroon, showcasing how the unique socio-cultural landscape influences health narratives and identifying culturally relevant themes that can lead to improved public awareness and behavioural change. By examining media language, the study also enhances reader awareness of how framing and linguistic choices affect perceptions of health issues, promoting media literacy among the public. Furthermore, this research fills a gap in the existing literature on health communication and media studies in Cameroon, providing a nuanced understanding of the role of print media in health narratives and encouraging future investigations in other contexts and regions. Ultimately, the findings can inform health policy initiatives by

revealing gaps in media coverage and suggesting areas for increased focus, thereby supporting the development of effective strategies to combat the rising tide of NCDs. In conclusion, this study seeks to enrich academic discourse while translating findings into practical applications that enhance public health communication and contribute to healthier communities in Cameroon and beyond.

1.9 Scope of the study

This work will cover the period from 2017 to 2024. One's choice of this period is because the most recent year provides the most up-to-date information on the prevalence, risk factors, and strategies related to NCDs in *Cameroon Tribune* newspaper. This allows for accurate reporting and ensures that the information presented is relevant to the current situation. The previous five to eight years (2017-2024) will increase the chances of getting data, which shall be used to check the different discusses surrounding media language on non-communicable diseases.

1.10 Definition of Key Terms

Clarifying key terms is essential in any academic exploration to establish a shared understanding and effectively frame the research. This section aims to unravel the complex vocabulary that underpins the discourse surrounding non-communicable diseases (NCDs) and their media representations. Each term is a building block, contributing to the intricate tapestry of language, perception, and health communication.

By defining essential concepts such as **discursive analysis** and **media language**, we illuminate how narratives are constructed and disseminated in society. Understanding these terms enhances our grasp of the subject matter and reveals language's influential role in shaping public perception and influencing health behaviours. As we delve into these definitions, we further explore how media representations affect our understanding of NCDs, ultimately underscoring the importance of informed health communication in today’s world.

1.10.1 Discursive Analysis

Discursive analysis, mainly through the lens of Critical Discourse Analysis (CDA), is a multifaceted approach that examines the relationship between language, power, and society. This analysis goes beyond mere textual interpretation; it investigates how discourse shapes and is shaped by social contexts, ideologies, and power dynamics (Gee, 1999; Fairclough, 2003). At its

core, discursive analysis seeks to understand what is said and how it is said. This involves scrutinising the linguistic choices made by speakers or writers, including vocabulary, syntax, and rhetorical devices, and considering the broader socio-political contexts in which these discourses are produced and consumed (Fowler, 1991). For example, framing news articles can significantly influence public perception, revealing underlying ideologies that may reinforce or challenge societal norms (Fowler, 1991).

Gee (1999) emphasises that discourse is a social practice, implying that language is a vehicle for reflecting and constructing social realities. Foucault (1972) further elaborates on this notion, arguing that knowledge is intertwined with power; thus, discourse describes reality and contributes to its formation. CDA posits that language is not neutral but imbued with power relations that can perpetuate inequalities or foster social change.

Norman Fairclough (1991; 2003) extends this analysis by focusing on the intertextuality of discourses, illustrating how texts draw upon and reshape prior discourses. This process is crucial for understanding how ideologies are maintained or contested over time. Fairclough's work highlights the importance of examining both the micro-level (textual features) and macro-level (social structures) to uncover the complexities of power within discourse. In summary, discursive analysis, mainly through a CDA framework, involves a rigorous examination of both the content and the form of discourse. It requires an awareness of how language functions within specific contexts and how it can reflect and influence social realities. This critical approach enriches our understanding of communication and empowers us to recognise and challenge the ideologies embedded within everyday discourse.

1.10.2 Media Language

The Oxford Advanced Learner's Dictionary (8th edition) defines "media" as the primary means of mass communication, underscoring its pivotal role in shaping public discourse. Media language is a vital conduit through which societal narratives are constructed, disseminated, and interpreted, reflecting and reinforcing societal power structures. Teun A. van Dijk (1991) articulates that media discourse is instrumental in shaping public opinion and constructing social ideologies, positing that framing media texts significantly influences audience interpretations and actively engages in creating social realities. Stuart Hall's (1980) seminal encoding/decoding model further elucidates these dynamics, asserting that media messages, while encoded by

producers with specific meanings, are subject to varied interpretations by audiences, revealing the complex interplay of cultural codes that characterise media language. David Machin and Andrea Mayr (2012) extend this discussion by exploring multimodality, arguing that integrating linguistic and visual elements enhances the communicative power of media texts, complicating how messages are constructed and received. Robert Fowler (1991) critiques the ideological nature of media language, particularly within news discourse, highlighting how linguistic choices can create narratives that marginalise or elevate certain societal voices. Through these perspectives, we recognise that media language is not merely a vehicle for communication but a site of ideological struggle, shaping public perception and social norms.

1.10.3 Non-Communicable Diseases

According to the Oxford Advanced Learner's Dictionary 8th edition, non-communicable diseases (NCDs) are defined as diseases that are not transmitted from one person to another and are typically chronic. These diseases, including cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes, result from a complex interplay of genetic, physiological, environmental, and behavioural factors. Beaglehole and Bonita (2010) further emphasise that NCDs represent a significant global health challenge, particularly in low- and middle-income countries, where they account for a substantial proportion of premature deaths. Marmot and Stansfeld (2003) highlight the critical role of social determinants in the prevalence and impact of NCDs, indicating that factors such as socioeconomic status, access to healthcare, and lifestyle choices significantly influence disease outcomes. Thus, understanding NCDs requires a medical perspective and a comprehensive look at the broader societal contexts contributing to their emergence and persistence.

1.11. Methodology

This study will employ a qualitative, critical discourse analysis (CDA) and discourse historical approach (DHA) to examine the representations of non-communicable diseases (NCDs) in *Cameroon Tribune* newspaper. The research design will follow a case study methodology, focusing in-depth on *Cameroon Tribune* as the primary media text for analysis.

1.11.1 Qualitative Approach

The study will employ a qualitative research design, allowing for a deeper understanding of *Cameroon Tribune's* role in health communication. According to Creswell (2014), qualitative

research is an approach for exploring and understanding the meaning individuals or groups ascribe to a social or human problem. This method shall provide insights into the complexities of human experiences, emphasising context and the subjective interpretation of data.

1.11.2 Critical Discourse Analysis (CDA)

The study will utilise critical discourse analysis (CDA) to examine the language, narratives, and underlying ideologies in *Cameroon Tribune*'s health-related reporting. CDA provides a framework for understanding how language is used to construct and maintain power structures, social relations, and dominant perspectives (Fairclough, 2013). This approach will enable us to uncover the implicit and explicit messages conveyed through the newspaper's coverage of health issues.

1.11.3 Discourse-Historical Approach (DHA)

In addition to CDA, the study will incorporate discourse-historical analysis (DHA) to situate *Cameroon Tribune's* health communication within the broader socio-political and historical context of Cameroon. DHA emphasises the importance of considering the contextual factors that shape discourse, such as the institutional, political, and cultural influences (Reisigl & Wodak, 2016). This approach will help us to understand how *Cameroon Tribune's* health reporting is shaped by and responds to the country's evolving healthcare landscape and public health priorities.

1.11.4 Data Collection and Analysis

The study shall collect data from *Cameroon Tribune's* archives, focusing on health-related articles, editorials, and reports published over a specific period. We systematically analysed the selected data using CDA and DHA techniques, such as identifying recurring themes, examining linguistic strategies, and exploring the underlying assumptions and power dynamics reflected in the discourse.

1.11.5 Expected Outcomes

The study is expected to provide insights into *Cameroon Tribune's* role in shaping health communication and awareness in Cameroon. The findings may highlight the newspaper's strengths and limitations in effectively disseminating health information, promoting preventive behaviours, and advocating for healthcare system improvements. The research may also

contribute to a better understanding of the complex interplay between media, public health, and social change in the Cameroonian context.

1.12 Theoretical Framework

This work operates within the Critical Discourse Analysis (CDA) framework, particularly utilising the discourse-historical approach developed by Wodak and her colleagues (Wodak, 2001; Reisegl & Wodak, 2001) to identify discourses. As noted by Fairclough and Wodak (1997, p. 258), Discourse Analysis is an evolving field of language study that views discourse as a "form of social practice," highlighting the importance of the context in which language is used (Wodak, 2001). CDA examines discourse not only as a social practice but also as a political tool that "establishes, sustains, and changes power relations and the collective entities between which power entities obtain" (Fairclough, 1992, p. 67). According to Fairclough and Wodak (1997) and Wodak and Meyer (2009), CDA should not be seen as a singular method but rather as an approach comprising various perspectives and methods for exploring the relationship between language use and social contexts.

CDA has diverse roots, including rhetoric, text linguistics, literary studies, sociolinguistics, anthropology, philosophy, socio-psychology, cognitive science, applied linguistics, and pragmatics. Van Dijk (2007a) and Wodak (2008a) identify at least seven dimensions in the study of discourse using CDA: (1) an interest in the properties of "naturally occurring" language used by confirmed speakers; (2) a focus on larger units than isolated words or sentences such as texts, discourses, conversations, speech acts, or communicative events; (3) an extension of linguistics beyond sentence grammar to encompass action and reaction; (4) consideration of non-verbal (semiotic, multimodal, visual) aspects of interaction and communication, such as gestures and images; (5) an examination of dynamic socio-cognitive and interactional strategies; (6) a study of the functions of social, cultural, situational, and cognitive contexts of language use; and (7) an analysis of various phenomena related to text grammar and language usage, including coherence, anaphora, topics, macrostructures, speech acts, interactions, turn-taking, signs, politeness, argumentation, and rhetoric. Given these tenets, CDA is an effective tool for analysing the discourses in news articles on NCDs. As a theory and method, CDA examines how individuals and institutions utilise language (Richardson, 2007, p. 1), focusing on "relations between discourse, power, dominance, and inequality, and how discourse (re)produces and maintains

these relations" (Teun van Dijk, 1993, p. 249). CDA practitioners, aware of the often-opaque relationships between discourse practices and broader social and cultural structures, adopt an "explicit socio-political stance" (Ibid, 2007, p. 252).

CDA encompasses numerous analytical methods, with the choice of method depending on the corpus requiring analysis. Thus, this work employs one analytical method: the Discourse Historical Approach (DHA) developed by Ruth Wodak. The DHA, aligned with CDA, adheres to a socio-philosophical orientation rooted in critical theory (Wodak & Meyer, 2009, p. 86). It follows a complex concept of social critique that incorporates at least three interconnected elements: (1) 'Text or discourse immanent critique' aims to uncover inconsistencies, contradictions, paradoxes, and dilemmas within the text or discourse; (2) 'Socio-diagnostic critique' focuses on exposing the potentially persuasive or manipulative nature of discursive practices, drawing on contextual knowledge and social theories to interpret discursive events; and (3) future-oriented perspective critique seeks to enhance communication by proposing guidelines to combat issues such as sexist language or to reduce 'language barriers' in various settings. This framework is particularly relevant for analysing medical discourses, especially those related to NCDs.

1.13 CDA, DHA, and this Study

Critical Discourse Analysis (CDA) is a multidisciplinary approach that examines the relationship between language, power, and social context. It seeks to uncover how social structures, ideologies, and power dynamics shape discourse. CDA posits that language is not neutral; instead, it reflects and reinforces social inequalities. CDA aims to reveal the underlying assumptions, values, and ideologies embedded in discourse by critically analysing written, spoken, or visual texts.

CDA is particularly relevant in the context of health communication. It allows researchers to analyse how health issues, such as non-communicable diseases (NCDs), are framed in media narratives. By examining the language used to describe NCDs, CDA can highlight how societal attitudes toward these diseases are constructed and perpetuated. This analytical framework enables a deeper understanding of how media representations influence public perception and policy responses.

Discourse-Historical Approach (DHA) is a specific branch of CDA that emphasises the historical and contextual factors influencing discourse. Developed by Ruth Wodak and colleagues, DHA integrates elements of discourse analysis with a focus on historical context, social practices, and the interplay between language and society. It recognises that discourse does not exist in a vacuum but is shaped by historical developments, social events, and cultural contexts.

DHA employs a multi-layered approach to analysis, considering various dimensions such as a discourse's historical background, the socio-political context, and the intertextual relationships among different texts. This method is handy for examining how discourses evolve and how they reflect broader societal changes. In the context of NCDs, DHA can help uncover how media language has shifted in response to changing health landscapes, policy shifts, and evolving public attitudes. This study employs CDA and DHA to analyse the discourse surrounding non-communicable diseases in *Cameroon Tribune*. By integrating these approaches, the research aims to comprehensively understand how NCDs are represented in the media, specifically *Cameroon Tribune,* and how these representations influence health behaviours.

- Power and Ideology: CDA will facilitate an exploration of how language in *Cameroon Tribune* reflects power relations and ideologies surrounding NCDs. The study will reveal how certain narratives gain prominence while others are marginalised by analysing linguistic choices, metaphors, and framing strategies. This analysis will uncover the implications of these narratives for public understanding and policy prioritisation.
- Historical Context: DHA will enrich the analysis by situating the discourse within its historical and socio-political context. It will allow for an examination of how the representation of NCDs has evolved in response to changing health trends, economic factors, and public policy initiatives in Cameroon. By tracing these historical trajectories, the research will highlight how past events and discourses continue to influence current media narratives.

In summary, the integration of Critical Discourse Analysis and Discourse-Historical Analysis provides a robust framework for examining the representation of non-communicable diseases in *Cameroon Tribune*. By focusing on the interplay between language, power, and

historical context, this study aims to uncover the complex narratives surrounding NCDs and their implications for public health. Through this analysis, the research seeks to contribute to a deeper understanding of how media discourse shapes societal attitudes and informs health policy in Cameroon, ultimately fostering a more informed and health-conscious population.

1.14 structure of work

This research is organised into five chapters:

Chapter 1: Introduction outlines the background, research motivation, statement of the problem, aim, significance, objectives, research questions and scope of the study.

Chapter 2: Literature Review and Theoretical Framework discusses existing research on NCDs, media representation, and health communication strategies.

Chapter 3: Methodology provides a detailed description of the research design and analytical framework.

Chapter 4: Findings present the content analysis results, highlighting key themes and linguistic strategies.

Chapter 5: Discussion and Conclusion interpret the findings, discusses their significance in the broader context of public health, and offers recommendations for future research and practice.

1.15 Conclusion

This study critically explores media language concerning non-communicable diseases (NCDs) as presented in *Cameroon Tribune.* By examining how language shapes health narratives, this research aims to reveal the influential role of media in influencing public discourse on pressing health issues. Given the rising burden of NCDs in Cameroon, it is imperative to understand the linguistic strategies employed by media outlets, as these inform and empower communities to engage with their health. The insights from this analysis will enhance public health communication strategies, fostering a more informed population capable of making healthier choices. As we delve deeper into the heart of this discourse, we open avenues for meaningful dialogues that bridge the gap between health information and public understanding. Ultimately, this study is a vital contribution to academic literature and practical policy, aiming to shape a healthier future for all Cameroonians.

CHAPTER TWO: LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 Introduction

This chapter establishes the foundation for the research by presenting the literature review and the theoretical framework. The literature review contextualises the study within existing scholarly discourse, particularly concerning media representations of non-communicable diseases (NCDs) in Cameroon. This chapter addresses the current state of knowledge, identifies key themes, and highlights gaps to be addressed. It is essential to understand how media language and health communication function within the unique cultural and social platform of Cameroon, as these elements significantly influence public perceptions and health outcomes. Research indicates that effective health communication can improve health literacy and promote better health behaviour (Kreps & Sparks, 2008). In Cameroon, where diverse languages and cultural practices coexist, media plays a pivotal role in disseminating health information and shaping public attitudes toward health issues (Mbuagbaw *et al*., 2017). Additionally, the theoretical framework provides the necessary lenses to analyse the research, focusing on Critical Discourse Analysis (CDA) and the Discourse Historical Approach. CDA facilitates examining how language shapes health narratives in the media, revealing the power dynamics and ideologies that influence public discourse (Gee, 2014). Meanwhile the Discourse historical approach offers a method to explore how historical contexts and socio-political factors shape discourse over time, enabling a deeper understanding of the evolution of health narratives in the Cameroon media. Together, these theories enhance understanding of how media representations impact public health awareness and attitudes towards non-communicable diseases (NCDs) in Cameroon.

Following the literature review, the theoretical framework presents two selected theories: CDA and DHA. Each theory is discussed in detail, outlining its foundational concepts and relevance to health communication. The application of CDA is particularly significant in analysing how media narratives construct meanings around health issues, thereby influencing public perceptions.

2.2 Literature Review

This chapter is organised first to present the literature review, followed by the theoretical framework. The literature review section is divided into several key areas: the importance of health communication in Cameroon, the role of media as a source of health information, and the specific representations of NCDs. This includes analysing how language and framing in media narratives are discussed. Furthermore, the literature review explores the existing research on media portrayals of NCDs, examining the implications of these representations for public attitudes and behaviours.

2.2.1 Concept of Health Communication

Health communication is a pivotal concept within public health, medicine, and social work, serving as a cornerstone for achieving individual and collective health outcomes in contemporary society. This term encompasses a broad array of definitions, reflecting its multifaceted nature. At its core, health communication is viewed as a vital instrument for changing attitudes and behaviours towards health, facilitating the adoption of rigorously tested and effective health innovations and practices. Its importance cannot be overstated, as it is essential for fostering informed communities capable of making health-conscious decisions.

The Alma-Ata Declaration of 1978 significantly contributed to the discourse on health communication by emphasising the necessity for individual and community participation in health processes. This declaration marked a paradigm shift from a focus on disease prevention to promoting healthy lifestyles. It recognised that effective health communication is integral to increasing knowledge and reinforcing positive behavioural patterns among individuals and communities. Health communication is not merely about disseminating information; it is a dynamic process through which individuals and groups learn to engage in behaviours conducive to health promotion, maintenance, and restoration.

Scholars have broadened their understanding of health communication, drawing from practical experiences to highlight its role in health education. Health education fundamentally aims to promote healthy behaviours, with health communication serving as the vehicle for this education. It informs, educates, and persuades individuals to adopt and maintain practices that enhance their health. Furthermore, health communication advocates for necessary environmental changes that enable populations to adapt to evolving health challenges. Thus, it encompasses

various strategies and activities aimed at achieving better health outcomes for individuals and communities. According to the National Institute of Health Advocacy and Education (NIHAE) in 1989, health communication translates health knowledge into desirable behaviours at both individual and community levels, combining learning opportunities with teaching activities to enhance health knowledge and facilitate behavioural adaptation. This educational process is crucial for empowering communities to take charge of their health, fostering a proactive health management culture.

Planning is a critical component of health communication. Health professionals and communicators must develop comprehensive plans that align with the needs of their communities. Shanmugam (1981) outlines various stages in health communication planning, including identifying health problems and needs, understanding available communication resources, setting communication goals, and mobilising resources for effective implementation. This structured approach ensures that health communication efforts are targeted, efficient, and capable of addressing the unique challenges faced by different populations.

Social media has transformed information sharing, particularly in the realm of health. Defined as a collection of Internet-based applications built on the principles of Web 2.0, social media enables the creation and exchange of user-generated content, including social networking sites, blogs, content communities, collaborative projects, virtual game worlds, and virtual social environments (Kaplan & Haenlein, 2010; Smailhodzic et al., 2016).

Today, these diverse social media tools significantly influence how individuals create, seek, and share information. People from varied backgrounds and cultures use social media to share information, including health-related content, freely. Users increasingly turn to the web to search for information on symptoms and conditions, communicate in real-time with health experts, learn about medication administration, and complete online personal health assessments (Doherty-Torstrick et al., 2016; Finney Rutten et al., 2019; Fox & Duggan, 2013; Zhang et al., 2019).

Health information on social media is sourced from various channels, including generalist information platforms, lay users, healthcare professionals, and institutions (Crook et al., 2016; Şahin et al.). This broad spectrum of sources can lead to a mix of reliable and unreliable

information, making it crucial for users to critically evaluate the health content they encounter online. As social media continues to evolve, its role as a vital source of health information will likely expand, necessitating research and education regarding the quality and implications of the health information shared in these digital spaces.

2.2.2 Relevance of Health Communication

The relevance of health communication in contemporary society is indicated by the role of communication media in promoting health awareness. Broadcast media, particularly radio, have been instrumental in reaching diverse audiences, especially in rural areas where access to information may be limited. Nuguid (1985) highlights how radio has effectively disseminated health information through targeted programs, bridging health literacy and awareness gaps. In this context, health communication is about informing the public and persuading individuals to embrace health innovations and best practices.

Interpersonal and mass communication are the primary channels through which health messages are conveyed. Effective coordination among consumers, providers, and administrators is essential to ensure that health communication efforts are cohesive and impactful. Mass media campaigns play a vital role in raising awareness about healthy lifestyles, and collaborative efforts between health professionals and media specialists can enhance the effectiveness of these campaigns. Backer *et al*. (1992) emphasise that health communication campaigns must carefully consider the target audience to maximise their impact.

Despite the advancements in health communication, challenges remain. Prejudices and biases can limit the effectiveness of healthcare delivery, creating communication gaps that hinder health management. Kreps (1996) argues that appropriate communication strategies are necessary to improve healthcare systems and enhance the quality of health communication. Interactive and persuasive communication methods are often more effective than traditional mass communication, as they foster engagement and dialogue between health providers and the community.

The convergence of technology has revolutionised health communication. Integrating computers, telecommunications, and visual technologies has improved the accessibility and visibility of health information. Health communication professionals must undergo systematic

training to navigate this evolving platform effectively. Kreps *et al*. (1998) note that health communication has emerged as a distinct branch of mass communication, necessitating adherence to specific criteria and guidelines to ensure effectiveness. Media advocacy is essential in changing public attitudes and behaviours towards health. Grassroots community groups, public health leaders, and researchers utilise media to address social inequities and promote healthier lifestyles. Wallack *et al*. (1999) argue that media advocacy links public health issues to broader social problems, forming part of a comprehensive strategy for improving public health management.

The advent of the internet has further transformed health communication. Bernhardt and Hubley (2001) emphasise the Internet's significance as a channel for health education, enabling professionals to disseminate information widely and efficiently. Websites serve as accessible resources for health communication, allowing individuals to seek information and engage with health content. However, the effectiveness of these digital platforms hinges on the communication skills and competencies of health professionals, who must be equipped to navigate this varied platform.

In conclusion, health communication is an indispensable component of modern public health efforts. It informs, educates, and empowers communities to take charge of their health. As society continues to evolve, the strategies and tools used in health communication must adapt to meet the changing needs of populations.

2.2.3 Media Language and Health Communication in Cameroon

The relationship between media language and health communication in Cameroon is a fused issue that influences public perceptions and health behaviours. A critical examination of this relationship reveals several vital ideas that indicate the importance of culturally relevant media narratives in addressing health issues, particularly non-communicable diseases (NCDs). Mbuagbaw *et al*. (2017) provide a foundational analysis of health communication strategies in Cameroonian media, showing the necessity of culturally informed messaging. Their research demonstrates that incorporating local languages and culturally relevant narratives enhances public engagement and improves health information retention. This finding is particularly significant in Cameroon, where linguistic diversity is pronounced, and health communication must navigate multiple cultural platforms to be effective. The ability of health campaigns to

resonate with local audiences is crucial for fostering positive health behaviours, as evidenced by Kreps and Sparks (2008), who argue that culturally tailored messages are essential for improving health literacy.

Furthermore, the ethical considerations surrounding health communication in Cameroon are highlighted by Njeuma (2010), who critiques the sensationalist tendencies prevalent in health reporting. This critique raises important questions about the responsibilities of media outlets in delivering accurate health information. The tendency toward sensationalism not only undermines the credibility of health messages but also risks perpetuating misunderstandings and misinformation among the public. Thus, the ethical implications of media practices become a critical aspect of health communication, necessitating a balance between engaging narratives and the imperative to provide reliable information. This moral dimension is relevant in the context of NCDs, which often lack the visibility afforded to communicable diseases in media narratives.

The role of media in shaping public health priorities is further explored by Tchouankam (2015), who examines how media representations influence the perception of health issues. Using a qualitative methodology that includes content analysis of various media forms, such as newspapers, television broadcasts, and online platforms, the study reveals that media narratives predominantly spotlight communicable diseases, reflecting a societal emphasis on immediate health threats. This focus often leads to the neglect of NCDs, which are increasingly emerging as critical public health challenges. Tchouankam's findings indicate that the marginalisation of NCDs in media discourse skews public awareness and influences health policy agendas, diverting attention and resources from these pressing issues. The study shows how specific health issues gain prominence while others are side-lined. This selective representation raises significant concerns regarding the effectiveness of current health communication strategies in Cameroon, suggesting that a more balanced approach is necessary to ensure that all health issues, particularly NCDs, receive appropriate attention in public discourse. Thus, Tchouankam's work indicates the critical role of media in shaping health priorities and the need for a more inclusive narrative that accurately reflects the varieties of public health.

The emergence of social media as a transformative force in health communication adds another layer of variety to this discussion. Ndangam (2018) investigates the impact of social media platforms, such as Facebook and WhatsApp, on health information dissemination in

Cameroon. The proliferation of social media provides new avenues for sharing health-related content, enhancing access to information for diverse populations. However, this shift also presents challenges related to the quality and reliability of health information. Ndangam's analysis emphasises the dual nature of social media, which serves as both an opportunity for improved health communication and a risk for the spread of misinformation. This dynamic necessitates critically examining the content shared on social media platforms and its implications for public health. The challenge lies in harnessing the potential of social media to promote accurate health information while mitigating the risks associated with misinformation and sensationalism.

Moreover, the importance of local dialects in health communication is presented by Biyogo and Nguema (2019), who argue that incorporating indigenous languages into health messaging can significantly enhance understanding and engagement among populations with limited proficiency in official languages. Their study highlights those local dialects improve comprehension and foster a sense of ownership and relevance among community members. This perspective is vital in a diverse linguistic platform like Cameroon, where effective health communication must consider the linguistic capabilities of its audience. The findings advocate for a more inclusive approach that recognises the value of local dialects in health messaging, thus leading to improved health outcomes.

In summary, exploring media language and health communication in Cameroon reveals several critical ideas that show the necessity for culturally relevant and accurate messaging. The reviewed articles above show the densities of health communication in diverse linguistic scenery, underlining the need for media practitioners to adopt inclusive approaches that resonate with local communities. While substantial research has focused on communicable diseases and traditional media, a notable lack of emphasis remains on NCDs and the challenges emerging media platforms pose. The current study aims to address these gaps by investigating how media language, particularly the language on *Cameroon Tribune*, can be strategically used to enhance public awareness and understanding of NCDs in Cameroon.

2.2.4 Multilingualism and Health Communication in Cameroon

Cameroon is a nation marked by extraordinary linguistic diversity, with Eberhard, Simons, and Fennig (2020) noting that it is home to at least 280 living languages. This linguistic

variety arises from the country's historical context, particularly its colonial past, during which French and English were established as the official languages. This colonial legacy has profound implications for communication within the health sector, as a significant proportion of the population, especially in rural areas, may not be proficient in these languages. Pius Akumbu (2020) critically examines this issue, arguing that the existing language policy in Cameroon fails to address the communicative needs of the majority of its citizens. He asserts that "the two official languages are a superstratum imposed on a very heterogeneous home language substratum," indicating that the rich tapestry of indigenous languages is often overlooked in favour of the colonial languages.

The implications of language barriers in healthcare settings can be dire. Research indicates that individuals facing language obstacles experience poorer health outcomes. For example, Feinberg *et al*. (2002) found that language barriers are associated with reduced awareness of healthcare benefits, leading to decreased utilisation of health services. Similarly, Derose and Baker (2000) highlighted that those patients who do not speak the dominant language in a healthcare setting are less likely to seek care, which can exacerbate health disparities. These studies show the urgent need for health communication strategies inclusive of the population's linguistic realities. Akumbu (2020), suggests that one practical approach would involve establishing specialised units within health ministries dedicated to translating health materials into local languages. This would facilitate better understanding and empower communities to engage more effectively with health services.

In addition to the challenges posed by language barriers, the representation of health issues in the media plays a vital role in shaping public perceptions and health behaviours. Tchouankam (2015) conducted a qualitative analysis of media narratives surrounding health in Cameroon, revealing a significant bias towards non-communicable diseases. He notes that "media narratives often reflect dominant health concerns, leading to the marginalisation of non-communicable diseases (NCDs) in public discourse." This selective framing has severe implications for public health priorities, as it can lead to a lack of awareness and resources allocated to NCDs, which are becoming increasingly prevalent. Tchouankam's findings highlight the need for a more comprehensive approach to health communication that adequately represents the population's full spectrum of health challenges.

The COVID-19 pandemic has further illuminated the critical need for adequate health communication strategies that consider the linguistic diversity of Cameroon. During the pandemic, the Minister of Public Health issued multiple press releases primarily in French and English, often neglecting the linguistic needs of those not literate. As noted in the literature, "many young Cameroonians now do not speak their languages, especially those living in urban centres." This oversight can exacerbate misinformation and hinder effective public health responses. Akumbu and Di Carlo (2021) argue that the lack of accessible information in local languages can lead to increased anxiety and confusion among citizens, particularly in times of crisis when clear communication is paramount. The reliance on French and English for critical health messaging can alienate portions of the population, undermining public health initiatives.

Moreover, the intersection of multilingualism and health communication is especially pertinent in urban settings, where diverse linguistic communities coexist. Di Carlo and Good (2020) emphasise that individual multilingualism was widespread long before the colonial period and continues to be a defining feature of urban life in Cameroon. They argue that urban centres are characterised by high levels of multilingualism, with many individuals navigating multiple languages daily. This linguistic adaptability allows health authorities to engage with communities more effectively. In conclusion, the relationship between multilingualism and health communication in Cameroon presents challenges that require urgent attention. The existing language policy, rooted in colonial history, fails to address a linguistically diverse population's needs adequately. Integrating national languages into health communication strategies, alongside a more balanced representation of health issues in the media, will enhance public understanding and foster a more inclusive healthcare environment.

2.2.5 The Role of Language and Framing in Health Discourse on NCDs

The influence of language and framing techniques in discussing noncommunicable diseases (NCDs) is a vital area of research with significant implications for public health, policy, and individual behaviour. Language serves as a communication medium, shapes perceptions, and influences actions. In NCDs such as diabetes, cardiovascular diseases, and cancer, how these conditions are discussed profoundly affects individuals' understanding of their risks, the importance of prevention, and appropriate responses to these health challenges.

Numerous studies have examined the relationship between language, framing, and health communication. Goffman (1963) discusses framing in social interactions, highlighting how the presentation of information influences understanding and responses. His insights are foundational in health communication, where framing NCDs can enhance understanding or perpetuate stigma. For example, framing diabetes solely as a result of poor lifestyle choices can lead to victim-blaming, alienating those affected and discouraging them from seeking help. This perspective is echoed in Entman's (1993) work, which indicates that framing can emphasise certain aspects of an issue while obscuring others, leading to a limited understanding of health issues.

Research indicates that framing health issues can elicit different interpretations and emotional responses. When NCDs are framed as personal failures, they can induce feelings of guilt and shame among those diagnosed. This perspective often overlooks the genetic, environmental, and socioeconomic factors contributing to health outcomes. In contrast, framing NCDs as public health issues demanding collective action can foster a sense of community responsibility. Cohen et al. (2015) highlight how collective narratives can boost community engagement and support for health initiatives, underscoring the significance of framing in public health messaging.

The literature extensively documents how language can mitigate or exacerbate the stigma surrounding NCDs. Words can either empower individuals or reinforce negative stereotypes. For instance, framing obesity as a personal failing rather than as influenced by genetic and social factors can increase stigma. Goffman's exploration of stigma provides a framework for understanding how language constructs societal narratives that marginalise individuals with NCDs, often resulting in detrimental health outcomes due to fear of judgment or discrimination.

A substantial body of work critiques the individualistic framing of NCDs, emphasising the importance of social determinants of health. Scholars argue that health communication should address broader societal factors, such as economic inequality and access to healthcare, rather than focusing solely on individual behaviour. This perspective is essential for developing effective public health strategies. Freudenberg (2004) critiques public health messaging for often neglecting these determinants, advocating for a shift towards collective responsibility rather than individual blame, and encouraging empathy and community engagement.

Consequently, the language used in health communication becomes critical; it can either alienate communities or foster inclusion and understanding. An inclusive language recognising and respecting diverse experiences is essential for building trust and encouraging engagement among marginalised populations. When health messages are crafted sensitively to the unique contexts and challenges these groups face, they are more likely to resonate and be effective. This involves using terminology that reflects the lived experiences of individuals from diverse backgrounds, helping to dismantle the stigma associated with certain health conditions and promoting equitable discourse.

Moreover, health communicators must avoid jargon or technical language that may not be universally understood, as this can alienate those already on the fringes of health discussions. Clear, accessible language that invites participation and dialogue is crucial for empowering individuals to take charge of their health. The context in which health information is presented is vital; framing health issues within the broader social determinants of health illuminates the systemic factors contributing to disparities. This shift enhances the relevance of health messages and encourages community engagement, which is essential for effective public health initiatives.

The media's role in shaping health narratives is also significant. Sensationalised reporting can distort public understanding and reinforce negative stereotypes, particularly regarding marginalised populations. Health communicators must strive for accuracy and clarity in their messaging to avoid perpetuating harmful narratives. Developing culturally competent health communication strategies involves collaboration with community members to ensure messages resonate with the values and beliefs of the target audience. This participatory approach enhances the effectiveness of health campaigns and empowers communities to address their health needs actively.

In light of critical discourse analysis critiques examining how language shapes social realities, health communicators must adopt a reflexive approach to their messaging. This means acknowledging biases within their communication strategies and actively seeking to include diverse voices and perspectives. Engaging with community members can help ensure that health messages are culturally relevant and resonate with the experiences of those they aim to serve.

In conclusion, the language used in health discourse plays a pivotal role in shaping perceptions and experiences related to health equity. By fostering inclusive and accurate communication, health communicators can promote a more equitable discourse and empower individuals and communities to take meaningful charge of their health. As health information is increasingly disseminated through various channels, it is crucial that messages reflect society's diverse experiences. Through a commitment to continuous learning and adaptation, we can move towards a more equitable health landscape where everyone has the opportunity to thrive.

2.2.6 Media Representations of Non-Communicable Diseases (NCDs) in Cameroon

Despite the media's critical role in shaping public understanding and health behaviours, research on the portrayal of NCDs in Cameroonian media is sparse. The existing literature suggests that while the burden of NCDs is increasingly recognised in societal discussions, the narratives surrounding these diseases in public discourse, particularly in newspapers, remain underexplored. For instance, a study by Muliira *et al*. (2015) examining media coverage of health issues in Cameroon found that health reporting often lacks depth and fails to address the complexities of NCDs, which could hinder public understanding and engagement. This lack of representation in the media can lead to a diminished public perception of the urgency of addressing NCDs, ultimately impacting health-seeking behaviours and policy advocacy.

Understanding how NCDs are framed in media can provide insights into public perception and inform health communication strategies. This gap in media representation highlights the need for targeted research that investigates how NCDs are communicated to the public and the implications of these narratives for health policy and practice.

Collectively, these studies illustrate a pressing need for more focused research on the portrayal of NCDs in Cameroonian media. They reveal that while the burden of NCDs is increasingly recognised in societal discussions, the narratives surrounding these diseases in public discourse, particularly in newspapers, remain underexplored. Given the media's critical role in shaping public understanding and health behaviours, it is essential to investigate how NCDs are communicated to the public. This research seeks to fill this gap by conducting a discursive analysis of media language concerning NCDs, explicitly focusing on the case study of *Cameroon Tribune*. By examining the discourses used in this prominent newspaper, the study aims to contribute to a more nuanced understanding of health communication in Cameroon,

ultimately fostering improved public awareness and policy responses to the growing challenge of NCDs.

Non-communicable diseases (NCDs) pose a significant health challenge in Cameroon, where urbanisation and lifestyle changes contribute to their rising prevalence. According to the World Health Organisation (WHO, 2018), conditions such as cardiovascular diseases, diabetes, and cancers are becoming leading causes of morbidity and mortality. Despite this alarming trend, media representations often lack depth, focusing primarily on sensational aspects rather than providing comprehensive information. Such superficial coverage limits public understanding and engagement with these critical health issues, hindering efforts to combat NCDs effectively.

Media narratives frequently frame NCDs through a lens of personal responsibility, reinforcing stigmatising views that individuals are solely to blame for their health conditions (Patterson, 2015). This framing neglects the broader social determinants influencing health, including socioeconomic status, access to healthcare, and environmental factors. Bourdieu (1984) asserts that dominant cultural narratives marginalise voices that do not conform to prevailing norms, further alienating vulnerable populations. This exclusion can lead to a lack of awareness about the varied factors contributing to NCDs, perpetuating a cycle of misunderstanding and stigma.

Moreover, the portrayal of NCDs in the media often emphasises dramatic cases, distorting public perceptions and leading to fear rather than informed action (Cohen, 2001). Sensationalism in reporting may result in a limited understanding of the chronic nature of NCDs, causing individuals to overlook the importance of prevention and management strategies. Instead of fostering a culture of awareness and proactive health behaviours, media representations can inadvertently perpetuate myths and misconceptions surrounding these diseases. Such narratives may discourage individuals from seeking timely medical advice or making necessary lifestyle changes, thus exacerbating health issues.

Research indicates that media can play a transformative role in shaping public attitudes towards health (McCombs & Shaw, 1972). However, in Cameroon, the media often fails to provide adequate education about NCDs, focusing instead on episodic coverage that lacks contextual depth. This information gap contributes to a public health crisis, where individuals

may not recognise the significance of lifestyle changes or the importance of regular health screenings. Without a clear understanding of NCDs, the public may remain passive rather than actively participating in health-promoting behaviours.

The lack of diverse voices in media discussions about NCDs exacerbates existing disparities. Engaging healthcare professionals, patients, and community leaders in media narratives can provide a more holistic view of the challenges and solutions related to NCDs (Freudenberg, 2004). By incorporating these perspectives, media can foster a more nuanced understanding of health issues, promoting collective responsibility and community engagement. This approach enhances the credibility of health information and empowers individuals to take charge of their health.

Additionally, the role of social media in shaping health discourse cannot be overlooked. Platforms like Facebook and Twitter offer opportunities for sharing information and personal experiences related to NCDs. However, misinformation can spread rapidly on these platforms, complicating public understanding (Tandoc *et al*., 2018). Health communicators must leverage social media effectively to counteract misinformation and provide accurate, evidence-based information about NCDs. In brief, media representations of NCDs in Cameroon require critical revaluation.

2.2.7 Media Coverage of NCDs

The portrayal of non-communicable diseases (NCDs) in the media reveals significant gaps in understanding and representation. Critics argue that the media often sensationalises health issues, distorting public perception. O'Neill (2016) notes that sensationalist narratives create a climate of fear, overshadowing the chronic nature of NCDs and leading to public misunderstanding. This approach tends to emphasise individual cases without contextualising them within broader societal issues. Jernigan (2014) highlights the need to frame health narratives about social determinants, such as poverty and access to healthcare. Gollust et al. (2015) observe that media coverage often perpetuates a narrative blaming individuals for their health outcomes, which stigmatises those affected by NCDs and overlooks systemic barriers contributing to their prevalence.

Moreover, the lack of diverse voices in media discussions exacerbates the problem. Williams (2018) argues that excluding healthcare professionals and patients limits the depth of understanding regarding NCDs, alienating communities and hindering collective action. Sweeney (2017) emphasises that episodic coverage fails to provide continuity, leading to public apathy towards chronic health issues. The media's focus on sensational stories detracts from the ongoing nature of NCD management, which requires sustained public engagement and education.

The media's failure to provide comprehensive educational content about NCDs contributes to misinformation. Brown et al. (2019) argue that when media outlets do not deliver accurate information, they risk misinforming the public of the importance of prevention and early detection. This knowledge gap can lead to fatalistic attitudes, where individuals believe their health outcomes are predetermined. Consequently, the media's role in shaping public perceptions is crucial, as it can empower individuals with knowledge or perpetuate harmful myths.

Critics highlight that those misleading narratives foster a sense of helplessness among individuals. McCombs and Shaw (1972) emphasise that the media shapes public attitudes, and shallow coverage can create disengagement from health-promoting behaviours, which is particularly concerning for NCDs where proactive measures are vital. Kearney and McCarthy (2016) note that sensationalist reporting can distort risk perceptions, causing increased public anxiety that may lead to avoidance behaviours, where individuals hesitate to seek medical assistance due to fear of diagnosis.

Social media further complicates public perception of NCDs. While it allows rapid information dissemination, it also facilitates the spread of misinformation. Tandoc et al. (2018) argue that unchecked narratives on social media can lead to confusion and mistrust, making it difficult for individuals to discern credible health information. This issue is exacerbated by social media's tendency to amplify sensational stories, distorting public understanding. The episodic framing of NCDs in media diminishes the urgency needed to tackle these health issues. Williams (2018) asserts that public engagement may wane without consistent coverage, highlighting the chronic nature of NCDs, which can result in missed opportunities for education and prevention.

Despite the growing body of literature on media representations of NCDs in Cameroon, significant gaps warrant further exploration. Existing studies, such as those by O’Neill (2016) and

Gollust et al. (2015), critique sensationalist narratives but lack research on how these representations influence public health behaviours and attitudes towards NCDs across diverse demographic groups in Cameroon. Additionally, the intersectionality of social determinants, such as socioeconomic status and education, has not been thoroughly examined in media narratives. Finally, while the role of social media in shaping public perceptions has been acknowledged, there is a lack of empirical studies investigating how digital platforms contribute to disseminating health information and misinformation regarding NCDs. Addressing these gaps is crucial for developing effective health communication strategies that resonate with the Cameroonian populace and promote better understanding and management of NCDs.

2.3 Theoretical Framework

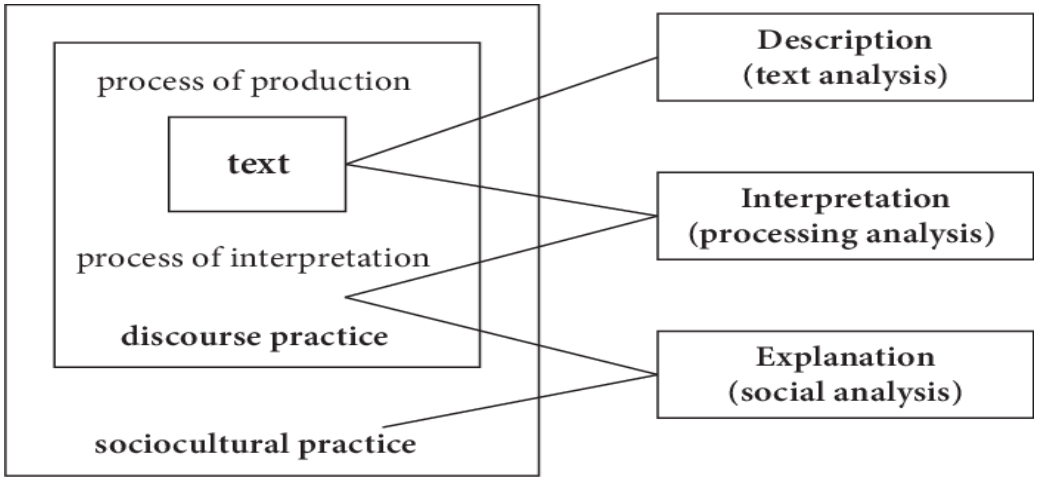
This section focuses on the theoretical framework that explains the research on media representations of non-communicable diseases (NCDs) in Cameroon. The framework serves as a lens through which the varieties of health communication can be examined, particularly in understanding how media narratives shape public perceptions and behaviours towards NCDs. Central to this framework are two fundamental theories: Critical Discourse Analysis (CDA), developed by Norman Fairclough (1992), which facilitates the examination of power dynamics and social inequalities reflected in media discourse, and the Discourse Historical Approach (DHA) by Ruth Wodak and her colleagues in the early 1990s.

2.3.1 Critical Discourse Analysis (CDA)

Critical Discourse Analysis (CDA) is a theoretical approach that examines the relationship between language, power, and social inequality. In the late 20th century, scholars such as Norman Fairclough, Teun A. van Dijk, Ruth Wodak, and Michel Foucault significantly shaped CDA. At its core, CDA posits that discourse is not merely a reflection of reality but a means through which social practices and power dynamics are constructed and contested. The key principles of CDA emphasise the interconnectedness of language and social context.

Fairclough (1992) posits that discourse is a dynamic process that reflects and constructs social realities, emphasising a dialectical relationship between language and power. This perspective is foundational in understanding how media representations mirror societal norms and actively shape them. The following chart indicates Fairclough's dimension of discourse and discourse analysis:

Figure 1: Fairclough's Dimension of Discourse and Discourse Analysis (adapted from Titscher *et al*. 2000, 153)



It highlights the critical components in understanding how discourse operates within social contexts, showing the relationship between language, power, and social structures. In the context of health communication, particularly regarding non-communicable diseases (NCDs), this relationship is critical as it elucidates how language influences public perceptions and behaviours. Discourse, as Fairclough suggests, is inherently tied to social structures. It operates within a framework of power relations, where dominant discourses can reinforce existing inequalities while marginalised voices struggle for representation. For instance, media narratives surrounding NCDs may prioritise specific health issues or populations, shaping public discourse and influencing policy decisions. This selective representation can perpetuate stigmas associated with particular diseases or demographics, affecting how communities perceive risk and engage with health services.

In addition, intertextuality, central to Fairclough's framework, highlights how texts are interconnected and how meaning is constructed through these relationships. Media representations of NCDs in health communication are not isolated; previous discourses, cultural narratives, and institutional practices inform them. For example, the portrayal of diabetes in Cameroonian media may draw on historical stigmas related to lifestyle choices, thereby framing the disease in a way that influences public understanding and personal responsibility.

Additionally, Fairclough's emphasis on the agency's role within discourse allows for exploring how individuals and groups can contest and reshape dominant narratives. This is

particularly relevant in health communication, where advocacy groups and affected individuals can challenge prevailing discourses that may misrepresent their experiences or needs. Fairclough's (1992) dialectical approach to discourse offers a critical lens for examining the intersection of language, power, and health communication.

Another foundational aspect of Critical Discourse Analysis (CDA) is its critical stance towards dominant ideologies, as articulated by Van Dijk (1993). He posits that discourse plays a pivotal role in reproducing social hierarchies, where language reflects societal norms and actively contributes to reinforcing stereotypes and marginalising certain groups. This principle is particularly relevant when analysing media portrayals of non-communicable diseases (NCDs), as these narratives often encapsulate biases that can significantly influence public perception and health policy.

Van Dijk's framework explains how language serves as a vehicle for power relations, shaping how specific groups are represented and understood within societal discourse. For instance, media narratives surrounding NCDs may depict individuals suffering from these diseases in a manner that emphasises personal responsibility or lifestyle choices, thereby reinforcing stereotypes about health behaviours. Such representations can perpetuate stigma, leading to the marginalisation of affected populations and discouraging them from seeking necessary medical care. Framing NCDs in a negative light, the media contributes to a culture of blame, where individuals are held accountable for their health outcomes without considering broader social determinants, such as access to healthcare, education, and economic conditions.

Van Dijk's analysis of discourse structures reveals how language can create in-group and out-group distinctions, further entrenching social hierarchies. In the context of health communication, this can manifest in the portrayal of specific demographics as "at risk" or "unhealthy" while others are depicted as "healthy" or "responsible." Such dichotomous representations can skew public understanding of NCDs, leading to generalised assumptions about affected individuals and fostering an environment of exclusion.

Additionally, Van Dijk emphasises the importance of context in understanding how discourse operates. The media platform, influenced by cultural, political, and economic factors, shapes the narratives around NCDs. For example, public health campaigns that fail to consider

local cultural beliefs may inadvertently reinforce existing stereotypes, alienating marginalised communities. Van Dijk's (1993) insights into the relationship between discourse and social hierarchies provide a crucial framework for analysing media portrayals of NCDs.

Additionally, Wodak (2001) introduces the concept of "discourse history," which emphasises the significance of historical contexts in shaping contemporary discourse. This approach is particularly vital for understanding the evolution of health narratives in Cameroon, as historical and cultural factors substantially influence how non-communicable diseases (NCDs) are perceived and discussed in the media.

Wodak claims that discourse is not static but deeply embedded in a continuum of historical events, cultural practices, and social changes. In health communication, the portrayal of NCDs in Cameroonian media cannot be understood in isolation from the country's historical and socio-political context. For example, the colonial legacy, economic transitions, and health policies have all shaped public attitudes towards health issues, including NCDs.

Historical stigmas associated with specific diseases can linger in contemporary discourse, affecting how individuals and communities engage with health information. For instance, if a particular NCD is historically linked to specific lifestyle choices or socio-economic status, media representations may perpetuate these associations, reinforcing negative stereotypes. This leads to a reluctance among affected individuals to seek help or disclose their health status, further exacerbating public health challenges.

More so, Wodak's focus on the relationship between discourse and power dynamics highlights how dominant narratives can marginalise alternative voices. In Cameroon, biomedical discourses promoted through mainstream media may overshadow traditional beliefs and local health practices. This marginalisation can hinder the integration of culturally relevant health interventions, as public health messages may not resonate with local populations. Understanding the historical context of these discourses is essential for developing effective communication strategies that acknowledge and respect local beliefs and practices.

The concept of discourse history also encourages a critical examination of how institutional practices and policies shape health narratives. For example, government and international health organisations often influence media portrayals of NCDs through funding and

research priorities. This can lead to focusing on certain diseases while neglecting others, shaping public perception and influencing resource allocation in healthcare. Thus, Wodak's (2001) concept of discourse history provides a crucial lens for analysing the evolution of health narratives in Cameroon. In this light, the varieties of how NCDs are represented in the media can be brought to light through research. This understanding is vital for developing health communication strategies that are culturally sensitive and responsive to the needs of diverse populations, thus promoting better health outcomes in the context of non-communicable diseases.

In conclusion, CDA provides a critical framework for analysing the link between language, power, and social issues. Its emphasis on the socio-political dimensions of discourse makes it particularly relevant for exploring the media's role in shaping perceptions of health and disease, thereby offering insights into the broader implications for public health communication strategies in Cameroon.

2.3.2 The Discourse History Approach

The Discourse Historical Approach (DHA), developed by Ruth Wodak and her colleagues in the early 1990s, offers a robust framework for analysing the intricate relationships between language, power, and society. This approach is particularly compelling, as it provides a multifaceted lens through which to examine discourse across various contexts, including media, policy, and health communication. The DHA is grounded in recognising that discourse is not merely a reflection of reality but is shaped by historical events and cultural contexts, making it essential for understanding contemporary issues.

One of the DHA's key strengths is its focus on intertextuality, which allows researchers to explore how different texts influence one another and collectively shape public understanding. This is crucial in an era where information is disseminated rapidly across multiple platforms. Additionally, the approach emphasises the role of social power and ideology in discourse, revealing how language can reinforce or challenge existing power dynamics. This aspect is particularly relevant for those interested in social justice and public policy, as it highlights how discourse impacts societal attitudes and behaviours.

Moreover, the DHA advocates for a multi-dimensional analysis incorporating linguistic, social, and cultural perspectives. This comprehensive approach equips researchers with the tools

to analyse discourse holistically, ensuring they consider all relevant factors influencing communication. As a result, the DHA is invaluable for doctoral research, particularly in fields such as media analysis, policy discourse, and health communication, where understanding the nuances of language is critical for addressing complex societal issues. By employing DHA, one can better understand how discourse shapes and is shaped by the socio-political landscape, ultimately fostering more informed and impactful scholarship.

2.4 Conclusion

In conclusion, the literature on non-communicable diseases (NCDs) has predominantly concentrated on various media representations. However, it has often overlooked the critical role that news articles play in shaping public perception and discourse surrounding these pressing health issues. While significant insights have emerged from studies that examine television, social media, and other digital platforms, a substantial gap remains in the scholarly analysis of how newspapers articulate the narratives that define our understanding of NCDs. This oversight is particularly pronounced within the Cameroonian context, where the representation of health issues in the press is prevalent and influential in shaping public awareness and policy responses.

Previous research has largely failed to explore the specific NCDs most prominently discussed in Cameroon. As a result, there is a void in our understanding of which conditions are prioritised in public discourse and how this prioritisation affects societal attitudes and health-seeking behaviours. Diseases such as hypertension, diabetes, and various cancers are increasingly significant in the Cameroonian healthcare landscape, yet their representation in the media remains inadequately examined. This lack of focus hampers our comprehension of public health narratives and limits the potential for effective intervention strategies that might arise from a more robust understanding of media influences. Furthermore, the absence of a comprehensive analysis of the diverse discourses employed in news articles restricts our grasp of how the public represents and understands these diseases. The framing of NCDs in news articles, including the language used, the narratives constructed, and the emotional appeals can significantly influence public perception and behaviour. Without thoroughly investigating these discursive practices, we miss critical insights into how societal attitudes towards NCDs are formed and transformed.

To bridge these gaps, employing Critical Discourse Analysis (CDA) as a theoretical framework will be instrumental in uncovering the power dynamics and ideological underpinnings present in

media representations of NCDs. CDA facilitates a deeper understanding of how language shapes social perceptions and behaviours, revealing how news articles may reinforce or challenge prevailing health narratives. Additionally, integrating the Discourse Historical Approach (DHA) allows for exploring the historical context and evolution of discourses surrounding NCDs in Cameroon. This approach highlights the interplay between historical events, socio-political factors, and media representations, providing a comprehensive lens to examine the complexities of public health discourse. By addressing these theoretical frameworks alongside the identified gaps, future research has the potential to illuminate the intricate ways in which media, particularly news articles, influence perceptions and responses to NCDs. This understanding is essential for developing more effective public health strategies and interventions tailored to the specific cultural and social dynamics of Cameroon. As this chapter has demonstrated, there is a pressing need for a focused investigation into the representation of NCDs in news media. Such research will not only contribute to academic discourse. However, it will also have practical implications for public health policy, enabling stakeholders to harness the power of media in promoting healthier lifestyles and improving health outcomes across the population. Ultimately, a nuanced exploration of these themes will pave the way for a more informed and engaged public better equipped to confront the challenges of non-communicable diseases in contemporary society. The next chapter covers the research methodology employed in this study. It outlines the research design, data collection methods, and analytical approaches to investigate the relationship between media narratives and public health discourse.

CHAPTER THREE: METHODOLOGY

3.1 Introduction

This chapter presents the various steps and procedures followed in collecting and analysing data in the current study. According to Kothari (2004), research methods may be understood as all those methods or techniques used for conducting research. Research methods or techniques, thus, refer to the methods the researchers use in performing research operations. It is a way to solve the research problem systematically. Thus, when we talk of research methodology, we not only talk of the research study and explain why a particular method or technique is used and why others are not used so that research results can be evaluated either by the researcher himself or others. To this effect, this section describes the data collection process, the tools used in its collection, and how it is analysed and presented. It also explains the context of the corpus used in this project and outlines the method for data analysis.

3.2 Design

This study adopted a qualitative research design, a case study approach, to understand the discursive construction of non-communicable diseases (NCDs) in *Cameroon Tribune* newspaper. A case study design was deemed appropriate as it allows for a comprehensive and contextual investigation of a particular phenomenon within a real-world setting. The "case" under investigation is the media representation of NCDs in *Cameroon Tribune.* The choice of critical discourse analysis (CDA), explicitly employing the discourse-historical approach (DHA) as an analytical method for the study of media language on non-communicable diseases in *Cameroon Tribune* newspaper, is strategically grounded in the need for a comprehensive and multi-dimensional understanding of the discursive construction of NCD-related narratives within the media landscape. This methodological approach is characterised by its potential to yield nuanced insights into media representations' linguistic, social, and cognitive dimensions, thereby enriching scholarly discourse and informing practical interventions in public health communication. The utilisation of the discourse-historical approach within CDA is justified by its emphasis on historical context, socio-political dynamics, and power relations in shaping discursive practices. By applying DHA to the analysis of NCD-related language in *Cameroon Tribune,* the study seeks to uncover historical continuities and discontinuities in media representations of NCDs, trace the

influence of power structures on discursive formations, and elucidate how socio-political factors intersect with linguistic strategies in framing NCD-related narratives. The DHA's focus on historical context and power dynamics aligns with the study's objective of unearthing the broader socio-political implications of media language on NCDs.

3.3 Data Sources

In the realm of media discourse analysis, the participants in this study are not individuals in the traditional sense but rather the texts themselves, specifically, the articles published in *Cameroon Tribune* from 2017 to 2024. This selection of media sources is a rich repository of language and rhetoric surrounding non-communicable diseases (NCDs) within Cameroon. By examining these textual participants, we engage with many voices that collectively shape the discourse surrounding health issues.

Cameroon Tribune, a prominent national newspaper, acts as a pivotal conduit for information, reflecting societal concerns and governmental policies regarding health. Within the pages of this publication, the discourse surrounding NCDs unfolds, revealing the interplay between language, culture, and public health. The articles from this period were meticulously chosen to provide a comprehensive overview of how NCDs have been represented in the media, particularly in light of evolving health narratives and policy frameworks.

The timeframe of 2017 to 2024 is particularly significant, as it encapsulates a crucial period during which the global health landscape increasingly began to acknowledge the burden of non-communicable diseases. This phase witnessed a burgeoning awareness among policymakers and the public, necessitating a deeper exploration of the language employed in media representations. The choice of articles reflects a range of genres, from news reports and feature stories to opinion pieces, each contributing uniquely to the discourse and offering varied perspectives on the challenges posed by NCDs.

In addition to the articles from *Cameroon Tribune,* online archives retrieved from *Cameroon Tribune* website (www.cameroon-tribune.cm) further enrich the study. These archives allow for a broader contextual understanding of how media language surrounding NCDs has evolved and adapted to the shifting dynamics of public health discourse. By analysing the linguistic choices, framing techniques, and rhetorical strategies employed within these texts, this

study aims to uncover the underlying narratives that inform and influence discussions about non-communicable diseases.

Thus, the participants in this methodological framework are not merely passive texts but active agents in constructing meaning. Through a detailed examination of the media language surrounding NCDs, we can discern the broader societal implications of these narratives, shedding light on how language not only reflects but also shapes health discourse in Cameroon.

3.4 Data Collection Methods

The data for this study were drawn from *Cameroon Tribune* newspaper, the national, state-owned newspaper in Cameroon. *Cameroon Tribune* was selected as the primary data source due to its broad readership and influence as the dominant media outlet in the country. A systematic analysis of articles published in *Cameroon Tribune* from 2017 to 2024 involved several key methods to comprehensively examine the media language surrounding non-communicable diseases (NCDs). The primary source of data consisted of articles from *Cameroon Tribune,* a prominent national newspaper, with selection criteria focusing on relevance to NCDs, including coverage of health policies, disease prevention, treatment options, and public health initiatives, thereby ensuring a targeted analysis of topics pertinent to the research objectives. In addition to *Cameroon Tribune*, online archives from *Cameroon Tribune* website were utilised to facilitate access to a broader range of articles and identify trends and shifts in media language over the specified period. A qualitative content analysis was employed to systematically examine the selected articles, identifying key themes, linguistic choices, and rhetorical strategies used in the discourse surrounding NCDs, focusing on how language constructs meaning and conveys information about health issues. Articles were categorised based on genre, news reports, opinion pieces, and personal stories, enabling a nuanced understanding of how different articles contribute to the overall discourse on NCDs and revealing the varied narrative techniques employed by journalists and commentators. The chosen timeframe of 2017 to 2024 was critical in capturing the evolution of media discourse on NCDs and analysing articles from this specific period to uncover emerging patterns and shifts in focus that reflect broader changes in public health narratives. Through these methods, the study aimed to gather a rich dataset that would facilitate a thorough analysis of media language, ultimately contributing to a deeper understanding of how non-communicable diseases are represented in *Cameroon Tribune.*

3.4.1 Data Management

Organising and categorising the collected data was a pivotal part of the research process. A systematic approach was adopted to facilitate efficient analysis, involving:

1. Classification Process:

Each article was read thoroughly to grasp the main ideas and identify critical NCD-related phrases. Each selected article was assigned unique identifiers and classified based on key themes and dates. This process involved highlighting salient phrases, terms, and narratives that emerged within the text. By categorising information according to themes such as "public awareness," "government response," and "patient experiences," the analysis could focus on the key areas that emerged across different articles.

2. Database Development:

A structured database was developed using spreadsheet software to manage the growing body of data. This database included fields for article title, publication date, type, key themes, and linguistic features. Such an organisation made cross-reference and information retrieval easier during the analysis phase, ensuring that all relevant data could be easily accessed.

3. Reflexivity in Data Collection:

Throughout the data collection process, a reflexive approach was maintained. This involved critically reflecting on how personal biases or preconceptions could influence the selection and interpretation of articles. By documenting these reflections, the research sought to maintain transparency and credibility in the methodology, allowing for a more objective analysis.

In conclusion, the data collection process outlined in this section underscores the importance of a systematic and strategic approach to gathering qualitative data. This study aims to paint a comprehensive picture of how non-communicable diseases are portrayed in *Cameroon Tribune* by employing purposive sampling, diverse article formats, and a thorough coding process. This meticulous methodology enhances the findings' reliability and lays the groundwork for a compelling analysis in the subsequent chapters. Ultimately, understanding the media representation of NCDs is crucial for informing public awareness and shaping effective health communication strategies in Cameroon

3.5 Justification of the Data Source

Cameroon Tribune is a prominent newspaper established in 1974 by the Société de Presse et Éditions du Cameroun (SOPECAM). As the official government publication, it is crucial for disseminating information about national policies, social issues, and economic developments. Situated in the heart of Cameroon's media landscape, the Tribune serves as a source of news and a platform for shaping public discourse and national identity. Its bilingual approach, publishing content in both French and English, reflects Cameroon's commitment to promoting unity amidst linguistic diversity. This characteristic caters to the country's diverse linguistic landscape and fosters inclusivity among its readership.

The bilingual nature of *Cameroon Tribune* is one of its most compelling attributes. By offering content in both English and French, the newspaper bridges the linguistic divides that can often fragment society. In a nation where language can be a source of division, the Tribune acts as a unifying force, ensuring all citizens have access to vital information. This commitment to bilingualism enriches the reading experience and enhances the paper's relevance in a multilingual society. Moreover, the discourse within the media significantly influences national identity, intertwining narratives that resonate with the public.

Another noteworthy aspect of *Cameroon Tribune* is its status as one of the most widely read newspapers in the country. Its extensive circulation ensures it reaches a broad audience, from policymakers and academics to everyday citizens. This widespread readership reflects the newspaper's credibility and amplifies its influence on public opinion and societal norms. Readers trust the Tribune to deliver accurate, timely news that resonates with their lives, making it a staple in households across Cameroon. The newspaper's ability to connect with such a diverse audience underscores its importance as a primary source of information in an ever-evolving media landscape.

Cameroon Tribune distinguishes itself further by its commitment to daily publication. In an age where information constantly changes, the need for timely news has never been greater. The Tribune meets this demand head-on, providing readers with up-to-date coverage of local, national, and international events every single day. This regularity not only keeps its audience informed but also enhances the paper's role as a reliable source of news in a fast-paced world.

Readers can rely on the Tribune to deliver the latest developments, ensuring they are always in the loop and equipped to engage with current affairs.

Being a state-owned newspaper, *Cameroon Tribune* holds a unique position in the media landscape. It operates under the auspices of the government, which reinforces its role as a vital channel for official communication. This association provides the Tribune with access to information that may not be available through private outlets, allowing it to offer comprehensive coverage of governmental policies and initiatives. While some may question the objectivity of state-owned media, *Cameroon Tribune* strives to maintain a balance, ensuring that it serves the public interest while reporting on government actions and decisions transparently.

With decades of history behind it, *Cameroon Tribune* has established itself as a credible source of information. Since its inception, it has weathered the storms of political change and social upheaval, consistently delivering news that reflects the realities of life in Cameroon. This longevity speaks volumes about its commitment to journalistic integrity and the trust it has garnered from its readership. The Tribune has become synonymous with reliability, its name a hallmark of quality journalism. In an era where misinformation can easily proliferate, choosing a publication with such a rich legacy ensures readers are well-informed by a trusted source.

In conclusion, *Cameroon Tribune* is not merely a newspaper; it is a vital institution that embodies the spirit of Cameroon. Its bilingual nature, extensive readership, daily publication, state ownership, and long-standing credibility make it an invaluable resource for anyone seeking to understand the complexities of Cameroonian life. Through its articles and reports, the Tribune exemplifies the Cameroonian context's complex interplay between language, politics, and culture. By choosing *Cameroon Tribune*, readers align themselves with a publication that informs, engages, and empowers its audience. In a world awash with information, the Tribune stands out as a beacon of truth and a testament to the power of journalism in shaping society.

3.6 Analytical Methods

In recent years, language study within social contexts has garnered increasing attention, particularly through the Critical Discourse Analysis (CDA) lens. This methodological approach offers a multifaceted framework for scrutinising the interplay between language, power, and society. According to Chilton and Wodak (2007), CDA is a multi-method framework that

necessitates the integration of diverse data types to elucidate how discourse shapes and is shaped by social practices. This research's primary data comprises news articles collected over several years, encompassing both hard copies and online formats sourced from the official *Cameroon Tribune* page. Through qualitative analysis, this study investigates how non-communicable diseases (NCDs) are portrayed, the narratives constructed around them, and the ideologies and power dynamics that influence this discourse.

CDA is an interdisciplinary approach that aims to unpack the intricate relationship between language and power, focusing on how discourse influences social structures and individual identities. It operates on the premise that language is not merely a tool for communication but a potent instrument that can reinforce or challenge societal norms and values. CDA examines texts within their social contexts, revealing how language constructs meaning and reflects power relations.

Key figures in the development of CDA, such as Norman Fairclough, Teun van Dijk, and Ruth Wodak, have contributed various theoretical frameworks that emphasise the importance of context in understanding discourse. Fairclough's model, for instance, integrates three levels of analysis: the text itself, the discursive practice (how texts are produced and consumed), and the social practice (the broader societal implications). This triadic relationship enables researchers to uncover the layers of meaning embedded within texts and to explore how power dynamics manifest through language.

In the context of this study, CDA provides a robust framework for analysing how NCDs are represented in *Cameroon Tribune.* The qualitative analysis aims to identify key language features, themes, and framing strategies that shape public perceptions of these diseases. By examining the narratives surrounding NCDs, the research seeks to uncover the ideologies underpinning media representations and the implications for public health discourse in Cameroon.

CDA is grounded in several theoretical perspectives that inform its practice. One of the central tenets of CDA is the notion that language is inherently ideological. This perspective posits that language reflects and perpetuates social inequalities and power relations. Additionally, CDA draws upon post-structuralist theories, which emphasise the fluidity of meaning and the role of

context in shaping discourse. This theoretical backdrop allows researchers to critically engage with texts and to interrogate the assumptions and values that underpin language use.

Furthermore, CDA is informed by a commitment to social change. Researchers employing CDA often aim to highlight issues of social justice and to challenge oppressive discourses. This activist orientation is particularly relevant in the context of public health, where media representations can significantly influence public perceptions and health behaviours. By revealing the ideologies embedded in media discourse, CDA serves as a powerful tool for advocacy and social change.

Complementing CDA, the Discourse Historical Approach (DHA) offers a unique perspective on the study of discourse by situating it within its historical context. Developed primarily by Ruth Wodak, DHA emphasises that discourse is not static but evolves over time, shaped by historical events, social changes, and cultural contexts. This approach highlights the importance of understanding the historical background of a discourse to fully grasp its current meanings and implications.

DHA incorporates a diachronic perspective, allowing researchers to trace the evolution of discourses over time. This involves examining how specific themes, concepts, and language practices develop and change, reflecting broader societal shifts. By situating discourse within its historical context, DHA enables a deeper understanding of the continuity and change in social practices and ideologies.

In this study, the DHA is particularly significant as it facilitates an exploration of how the discourse surrounding NCDs in *Cameroon Tribune* has evolved in response to historical events and public health initiatives. By analysing how language and representations have changed over time, the research can offer insights into the shifting narratives and power relations that shape public health discourse in Cameroon.

DHA is characterised by several key concepts that guide its analytical framework. One such concept is ‘historical context’, which refers to the socio-political and cultural circumstances that shape discourse at any given time. Researchers employing DHA must consider how past events and prevailing ideologies influence contemporary discourse.

Another important concept is ‘intertextuality’, which refers to the connections between texts across time and space. Intertextual analysis allows researchers to examine how different discourses interact and inform one another, revealing the complexities of meaning-making in public discourse. By exploring intertextuality, this study can identify how representations of NCDs in *Cameroon Tribune* relate to broader public health narratives both locally and globally.

The data for this research consists of a selection of articles from *Cameroon Tribune*, spanning multiple years to capture a broad spectrum of discourse on NCDs. A purposive sampling method will ensure that the chosen articles are relevant to the study's focus. This selection will include various formats, such as news articles, opinion pieces, and health-related features, providing a comprehensive view of how NCDs are discussed in the media.

The qualitative analysis will follow a structured approach. Initially, a close reading of the selected articles will be conducted to identify key language features, themes, and framing strategies. This will involve examining the terminologies used, the metaphors employed, and the overall narrative structure of the articles. By focusing on these elements, the analysis aims to uncover the underlying ideologies and power dynamics that influence the representation of NCDs.

Following the textual analysis, thematic analysis will be employed to identify recurring themes within the discourse. This will include exploring themes such as prevention, treatment, stigma, and the role of healthcare systems. Each theme will be examined about its historical and cultural context, allowing for a nuanced understanding of how societal attitudes towards NCDs are constructed and communicated.

The integration of CDA and DHA, alongside a robust qualitative research design, creates a comprehensive framework for analysing the discourse surrounding NCDs in *Cameroon Tribune.* By employing CDA, the study critically examines the language and power relations at play in the media discourse. This approach highlights how language shapes public perceptions and influences health behaviours, revealing the complexities of communication in the realm of public health.

Simultaneously, the DHA situates these discussions within their historical context, allowing for an understanding of how past events and societal changes have shaped current

narratives around NCDs. This dual approach facilitates a richer analysis, as it acknowledges the dynamic nature of discourse and the interplay between language, history, and social practices.

The integration of CDA and DHA not only enhances the analytical depth of the study but also has practical implications for public health communication strategies. By revealing the underlying ideologies and power dynamics in media representations of NCDs, the research can inform health policymakers and communicators about the potential impact of their messaging. Understanding how language influences public perceptions can lead to more effective communication strategies that address stigma, promote awareness, and encourage healthier behaviours.

In summary, this study utilises qualitative analysis informed by Critical Discourse Analysis and the Discourse Historical Approach to investigate the representation of non-communicable diseases in *Cameroon Tribune.* By examining the language, themes, and historical context surrounding NCDs, the research aims to uncover the ideologies and power dynamics that shape public health discourse in Cameroon. This holistic approach not only enriches the analysis but also equips the study with the interpretive tools necessary to engage critically with the complexities of health communication, ultimately contributing to a deeper understanding of how NCDs are constructed and understood within the media landscape.

Through this comprehensive methodology, the research aspires to illuminate the crucial role of media in shaping public health narratives and to advocate for more informed and equitable health communication practices. The findings of this study are anticipated to offer valuable insights for scholars, practitioners, and policymakers engaged in the discourse surrounding non-communicable diseases, ultimately fostering a more nuanced understanding of public health issues in Cameroon and beyond.

3.6.1 Synchronic Analysis

A synchronic analysis is a methodological approach that examines a language or cultural phenomenon at a specific point in time, without considering its historical evolution. This framework enables researchers to focus on the structures, rules, and relationships in the language as they exist at that moment, providing a detailed snapshot of discourse. In the context of this study, we utilise synchronic analysis to explore the discourse surrounding non-communicable

diseases (NCDs) within the pages of *Cameroon Tribune* from 2017 to 2024. This approach offers a compelling lens to investigate the multifaceted narratives constructed by media language.

Focusing on contemporary articles over these eight years, we can unveil the prevailing themes, terminologies, and rhetorical strategies that inform public understanding and dialogue about these pressing health issues. The synchronic analysis invites us to consider the lexical choices made by journalists and editors and the broader socio-cultural context in which these articles are situated. For instance, the portrayal of NCDs in *Cameroon Tribune* may reflect prevailing health policies, public awareness campaigns, and societal attitudes toward these diseases during this period.

By capturing this snapshot, we can discern how language serves not merely as a vehicle for information but as a powerful tool that shapes public discourse, influences perceptions, and potentially drives health-related behaviours. Moreover, this analysis highlights the interplay between language and ideology. The way NCDs are framed, whether as a personal failing, a public health crisis, or a societal concern, can significantly impact how individuals and communities respond to these conditions.

By examining the articles of *Cameroon Tribune* through a synchronic lens, we can reveal the underlying ideologies that permeate media narratives, thereby uncovering the assumptions and values that inform public discourse on health in Cameroon.

In essence, a synchronic analysis of the media language surrounding non-communicable diseases in *Cameroon Tribune* from 2017 to 2024 offers a rich and nuanced understanding of the current landscape of health communication. It serves as a vital tool for unpacking the complexities of how language not only reflects but also shapes societal attitudes towards NCDs, making it an invaluable component of your research in Chapter

3.7 The Language of the Data

The data corpus for this study consisted primarily of articles published in *Cameroon Tribune*, the national newspaper of Cameroon. Cameroon is officially bilingual, with French and English as national languages; the articles were written in both languages. Most of the articles analysed were in French, the predominant language used in *Cameroon Tribune*. French is the language spoken by the majority of the population in Cameroon's francophone regions. The use

of French in the newspaper reflects the historical legacy of French colonial rule. However, the dataset *al*so included fewer articles written in English. These English-language articles cater to the anglophone population, primarily located in the North and Southwest regions of the country. Including French and English articles in *Cameroon Tribune* is in keeping with Cameroon's official bilingual status. Careful consideration was given to translating key terms, concepts and rhetorical devices from French to English during the analysis process. This ensured that the nuances and contextualised meanings of the discourses were accurately captured and interpreted throughout the study.

3.8 Translation

Translation is a critical process that involves accurately conveying the intended meaning of a text into another language. In this study, translating articles from *Cameroon Tribune*, which were written in French, was essential for ensuring a comprehensive critical discourse analysis. The approach involved translating the French texts into English to create a cohesive corpus for analysis, enabling the exploration of linguistic nuances and rhetorical devices in the original articles. Being fluent in both languages facilitated a contextually appropriate translation that preserved the original meaning while adapting the language for an English-speaking audience.

Throughout the translation process, a rigorous methodology was employed to maintain the integrity of the texts. Translation apps such as itranslate and Microsoft translator were used. Careful selection of vocabulary ensured that the English terms captured the connotations and subtleties of the original French, avoiding oversimplification. Furthermore, key rhetorical devices such as metaphors and idioms were preserved to reflect the stylistic richness of the source material. An independent translator reviewed a sample of the translated texts to enhance accuracy, verifying consistency and fidelity to the original. The resulting English translations were integrated into a structured digital database, allowing for seamless cross-referencing with the original French articles during the coding and analysis phases. This meticulous approach to translation was fundamental in ensuring the reliability and depth of the critical discourse analysis conducted in this study.

3.9 Ethical Considerations

In conducting this discursive analysis of media language related to non-communicable diseases (NCDs) as reported in *Cameroon Tribune*, several ethical considerations were carefully

addressed to uphold the integrity of the research. As the study relied on archival material from publicly available newspaper sources, including online platforms and contributions from a ministry contact, there was no direct interaction with individuals affected by NCDs. Consequently, the requirement for informed consent was not applicable. Nonetheless, ethical diligence was paramount; all data collected was handled precisely to ensure accurate content representation, free from misinterpretation or manipulation.

Confidentiality and sensitivity were guiding ethical principles throughout the research process. Although the analysis concentrated on media portrayals rather than individual narratives, it was vital to remain cognisant of the potential repercussions of these representations on communities impacted by NCDs. Efforts were made to avoid reinforcing negative stereotypes or contributing to the stigma associated with these health conditions. The findings aimed to present a balanced view that acknowledged the complexities surrounding NCDs while respecting the dignity of those affected. Moreover, a commitment to transparency regarding the research methodology and ethical framework fostered trust within the academic community, ensuring that the analysis contributed constructively to public health discourse in Cameroon.

3.10 Limitations of the Study

One significant limitation of our study was the reliance on a single media source, *Cameroon Tribune,* which may have influenced the breadth and diversity of perspectives represented in our analysis. While focusing on one publication allowed for an in-depth exploration of its discourse regarding non-communicable diseases (NCDs), it also meant that our findings might not fully capture the broader media landscape in Cameroon. Different outlets could present varying narratives, framing, and emphasis on health issues, which our study did not account for. Additionally, the potential for editorial bias within *Cameroon Tribune* could skew the representation of NCDs, limiting the generalizability of our findings to other contexts or media sources. This reliance on a singular perspective may restrict our understanding of public discourse surrounding NCDs and underscores the need for further research that includes multiple media outlets to provide a more comprehensive view of how these health issues are portrayed in the Cameroonian media landscape**.**

3.11 Challenges in the Study

We encountered several significant challenges related to data collection that shaped our study's trajectory. One of the foremost issues was the accessibility of comprehensive data. At the same time, *Cameroon Tribune* is a prominent source; the availability of articles specifically focused on NCDs was inconsistent, and we often faced difficulties in locating relevant pieces within the newspaper's archives. The digitalisation of older articles was often incomplete, which hindered our ability to analyse historical trends in media representation thoroughly. The language barrier compounded this challenge, as *Cameroon Tribune* published content in English and French, necessitating proficiency in both languages to ensure accurate interpretation. Additionally, time constraints placed considerable pressure on our research team; balancing the rigorous demands of data collection and analysis with other academic responsibilities proved quite taxing. We had initially underestimated the time required to sift through a vast array of articles, leading to a tighter timeline than anticipated for completing our analysis. Financial limitations also posed a challenge; securing access to specific databases or archival material often required funding that was not readily available. Moreover, logistical issues arose, such as the need to navigate the cultural context of Cameroon, which required us to be acutely aware of local health beliefs and practices that could influence media representations of NCDs. Overall, these multifaceted challenges tested our resilience and adaptability and compelled us to refine our research strategy, ultimately enhancing the depth and relevance of our findings as we navigated the intricate landscape of health communication in Cameroon**.**

3.12 Conclusion

The methodological approach outlined in this chapter has provided a robust and comprehensive framework for conducting a critical discourse analysis of non-communicable disease reporting in *Cameroon Tribune*. The integration of qualitative techniques and the discourse-historical approach has enabled a multifaceted examination of the linguistic, rhetorical, and contextual elements that shape the media's construction of these health issues. The careful preparation of the data corpus, including thorough translation processes, has ensured the integrity and reliability of the textual materials subjected to analysis. Developing a structured coding scheme, informed by deductive and inductive analytical techniques, has facilitated the systematic identification and interrogation of dominant discursive patterns, thematic framings, and rhetorical devices. Integrating contextual factors, such as the sociocultural landscape, prevailing health

policies, and the evolving non-communicable disease epidemiology in Cameroon, has been crucial in situating the media discourse within its broader socio-political and public health environment. This holistic approach has enabled a nuanced understanding of how *Cameroon Tribune's* coverage reflects and shapes societal perceptions, attitudes, and responses to non-communicable diseases. The methodological rigour and analytical depth outlined in this chapter have laid a solid foundation for the in-depth exploration and discussion of the research findings in the subsequent chapters. By meticulously documenting the data collection, preparation, and analysis procedures, this chapter has strengthened the study's overall trustworthiness and transparency, facilitating potential future replication or extension of the research.

CHAPTER FOUR: DATA PRESENTATION AND ANALYSIS

4.1 Introduction

This chapter provides a detailed analysis of non-communicable diseases (NCDs) reported in *Cameroon Tribune* from 2017 to 2024. The chapter begins with exploring the prevalent non-communicable diseases addressed in *Cameroon Tribune*. It proceeds to analyse the linguistic features in the coverage, the identification of various discourses, nomination and referential strategies, and mitigation and intensification strategies. By synthesising findings from multiple articles, this chapter aims to elucidate the complexities inherent in health communication regarding NCDs in *Cameroon Tribune* and contribute to understanding the challenges and strategies necessary for addressing these pressing health issues.

4.2 The Prevalent Non-Communicable Diseases in *Cameroon Tribune*

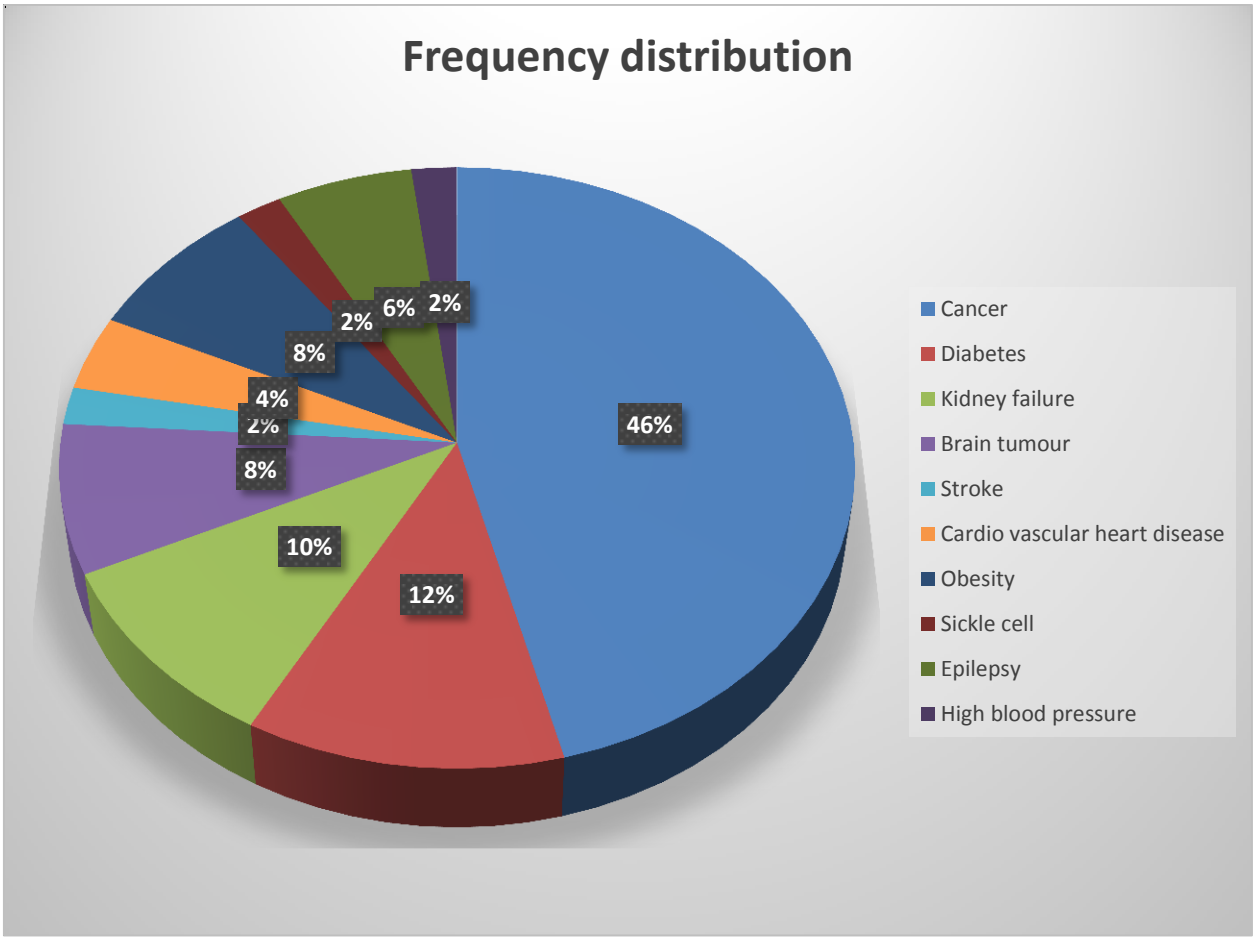
In our analysis of non-communicable diseases in *Cameroon Tribune*, we set out to uncover which health issues dominate the public narrative. The findings are striking: cancer emerged as the most frequently discussed NCD, appearing 23 times across 50 articles. This significant representation underscores the urgency and relevance of cancer in Cameroon's public health discourse.

In stark contrast, other severe health conditions received less attention: diabetes was mentioned 6 times, kidney failure 5 times, brain tumour 4 times, obesity 4 times and epilepsy 3 times. Even more concerning, critical issues like stroke and sickle cell diseases were barely acknowledged, appearing only once each. This disparity in coverage raises important questions about the prioritisation of health narratives and the implications for public awareness and policy.

The prominence of cancer in these discussions highlights its critical status in the society, prompting a deeper exploration of the language and the narratives used in these articles, due to the rising incidence of the disease, which necessitates heightened public awareness and education. October is designated as cancer awareness month, featuring campaigns that focus on different types of cancer, such as breast, cervical, mouth, lung and eye cancer. Notably, Pink October emphasises breast cancer awareness, promoting early detection and community support initiatives. These discussions are driven by the need for advocacy, funding for research and the importance of preventive measures, making cancer a critical health issue in Cameroon.

Table 1: Frequency distribution table of the different NCDs in *Cameroon Tribune*

Frequency distribution table of the different NCDs in *Cameroon Tribune*		
NCDs	**Frequency**	**Percentage**
Cancer	23	46%
Diabetes	6	12%
Kidney failure	5	10%
Brain tumour	4	8%
Obesity	4	8%
Epilepsy	3	6%
Cardiovascular Disease	2	4%
Sickle cell	1	2%
Stroke	1	2%
High blood pressure	1	2%
Total	**50**	**100%**



4.3 Linguistic Analysis

How do the words we choose impact our understanding of non-communicable diseases? Exploring the linguistic features in academic and public health discourse reveals much. This paper examines the language used in the discourse surrounding NCDs, focusing on the terminology, and narrative structures employed by authors. Understanding these linguistic features is essential for deciphering how NCDs are represented in academic literature and public health communications. The table categorises various linguistic elements, such as technical jargon, metaphors, and persuasive language, which can influence public perception and policy responses to NCDs.

4.3.1 Lexical Analysis (Choice of Words and Vocabulary)

We shall examine the vocabulary used in different texts to uncover patterns, meanings, and structures. It focuses on individual words and their relationships within context, analysing aspects such as modals, collocation, and jargon. This process is essential in linguistics and

discourse analysis, as it helps reveal how language shapes communication and influences audience perception. We can gain insights into the themes and narratives conveyed in a given discourse through lexical analysis.

> *Elles sont fortes, belles et courageuses. Elles ont arboré le rose et décidé de mener une lutte acharnée contre le cancer du sein. Elles, ce sont les femmes de la SOPECAM Women Association (SOWA) qui ont décidé de s'unir à la communauté internationale dans la lutte contre le cancer du sein en ce mois d'octobre encore appelé « Octobre rose ». Pendant une semaine, la SOWA organise donc au sein de l'entreprise des activité de sensibilisation de lutte contre ce tueur silencieux. (Cancer 24.Oct 2023)*

They are strong, beautiful, and courageous. They proudly wear pink and have decided to lead a determined fight against breast cancer. They are the women of the SOPECAM Women Association (SOWA), who have chosen to unite with the international community in the battle against breast cancer this October, also known as "Pink October." Throughout this week, SOWA is organising awareness-raising activities within the enterprise to combat this silent killer (Cancer 24 Oct 2023). My translation

"Patients and their families ***must*** *establish a new way of living." (Epilepsy 20th 2017)*

Awareness ***must*** *continue. I consider myself a burden to my family," she continues. (16th March 2017, Kidney failure)*

We ***must,*** *in a spirit of solidarity and equity, contribute to the good health of our compatriots…"(6th Dec 2017 Cardiovascular disease)*

It is now a ***bad memory****. Karim M., 42 years old, rediscovered a* ***taste for life*** *two years ago after getting rid of mouth cancer. It was in 2016 that he was diagnosed with a mouth tumor. The cancerous cells were removed.*

These expressions convey emotional weight and personal recovery, enhancing relatability and connection to the reader (Mouth Cancer 22nd March 2018)

"Obesity ***can*** *also be linked to food insecurity..."*

"Obesity ***would*** *kill three times more than malnutrition." (Obesity 6th March 2020)*

This vaccine, introduced throughout the national territory as part of routine vaccination..." (cervical cancer 13th Oct 2020)

4.3.1.1 Collocations

Starting with collocations, we observe phrases like **"lutte acharnée" (fierce fight)** and **"tueur silencieux" (silent killer)** in the first extract, which not only emphasise the urgency and seriousness of the battle against breast cancer but also evoke a shared emotional response from the reader. The **descriptive adjective "fierce"** provides information about the qualities of the **concrete noun "fight"** It describes the intensity and nature of the fight against cancer, suggesting an unwavering and vigorous commitment. Similarly, **"fight"** frequently collocates with terms associated with health crises, creating a linguistic connection that positions the struggle against cancer as both a personal and collective endeavour. This collective identity is reinforced by ***"the SOPECAM Women Association (SOWA),"*** which links individual experiences to a broader social movement, fostering solidarity among the audience.

In the fourth extract, turning to the collocations in the cancer-related excerpts, phrases such as **"bad memory"** and **"cancerous cells were removed**" The **descriptive adjective "bad"** describe the **abstract noun "memory"** by indicating that it has a negative personal narrative of recovery and resilience. The collocation **"bad memory "** evokes powerful emotions and associations. It often stirs feelings of fear and anxiety, given the serious health risks and mortality linked to the disease. Personal experiences bring grief and sadness, especially when remembering the patient's pain. Additionally, it may prompt feelings of regret or guilt regarding missed opportunities for early screening. This phrase also highlights the fragility of life, fostering a sense of vulnerability and an acute awareness of mortality. Conversely, it can inspire reflections on resilience, showcasing the strength of coping with such profound challenges. Overall, it encapsulates the complex emotional landscape shaped by cancer's impact on patients. The juxtaposition of **"bad memory"** with rediscovering a **"taste for life". "Taste" and "life"** are both abstract nouns, **"for"** is a **preposition of purpose.** The collocation encapsulates a journey from despair to hope, inviting readers to connect emotionally with the speaker's experience. The term **"cancerous cells" (comprising of an adjective and a noun)** serves as a clinical yet potent descriptor that conveys the severity of the illness while illustrating the triumph of medical intervention, thus framing cancer not merely as a personal tragedy but as a manageable condition.

4.3.1.2 Modal Verbs

The choice of the verb **"must"** in **"Patients and their families must establish"** indicates necessity and obligation, highlighting the urgency of adaptation in the face of health challenges. This modal verb conveys a sense of responsibility and recovery not just as a personal journey but as a familial and social imperative, thus broadening the discourse to include the community's role in supporting individuals.

In the extract discussing solidarity and health, the modal **"must"** again signifies obligation, as in **"We must, in a spirit of solidarity,"** positioning health as a collective responsibility. This phrasing not only galvanises action but also invokes a sense of community, suggesting that individual health is intertwined with that of others. It appeals to a moral imperative, thus fostering a discourse that emphasises equity and mutual support.

Finally, in discussing obesity, a phrase like **"obesity would kill three times more"** utilises stark statistical language to convey the severity of public health issues. The modal "would" introduces a conditional perspective that emphasises the potential consequences of inaction, urging readers to consider the broader ramifications of obesity on society. This framing informs and provokes critical thought about systemic issues, such as access to healthy food and the societal structures contributing to health disparities.

In the sentence **"Awareness must continue. I consider myself a burden to my family,"** the modal verb **"must"** expresses a strong obligation and necessity for ongoing awareness. This emphasises the importance of continuously fostering understanding and education, which are crucial for addressing challenges and building support systems. Linking this need for awareness to personal feelings of being a burden suggests that increased understanding can lead to better support from others, potentially alleviating feelings of isolation. Thus, **"must"** reinforces the critical role of awareness in creating a more compassionate and informed environment. "**I consider myself a burden to my family,"** where the speaker's use of "consider" reflects a subjective viewpoint. This modal framing invites readers to empathise with the speaker's vulnerability while critically reflecting on societal perceptions of illness and dependency. It also underscores the psychological toll of chronic disease, reinforcing the narrative that health challenges extend beyond physical symptoms to affect familial relationships profoundly.

4.3.1.3 Direct Speech

> *I take my BP every two days here in the market and once it is abnormal, I rush to the hospital," said Marie Nonos, a lady who sells vegetables in the Missoke market in Douala.* (24th January 2023. High blood pressure)

> *"I am the cornerstone of my family, and I do my best to stay healthy so I will be able to provide for my family and take care of my children," words of Marie Nonos."* (24th January 2023. High blood pressure)

> *"I used to take her BP at times twice a day and had a paper that I was writing the readings and when it is elevated I report to the nurse that was taking care of her or I rushed her to the hospital immediately," Bridget Sanjep explained.* (24th Jan 2023.High blood pressure)

> *"Nous devons être solidaires" (We must be united) from Marie Claire* (30thOct 2023 breast cancer)

> *"My brother stopped working. I am now the one taking care of his treatment and his two children's education."* . (21st March 2017. Kidney failure)

> *"But I didn't know what it was. I went to the hospital and they discovered that these symptoms were related to complications..." This structure keeps the focus on the speaker's actions and experiences. (*21st March 2017.kidney failure)

The quotes from individuals like Marie Nonos and Bridget Sanjep provide profound insights into the lived experiences of those navigating health challenges, such as exceptionally high blood pressure, a significant public health concern. Marie Nonos states, **"I take my BP every two days here in the market and once it is abnormal I rush to the hospital."** This is an example of **simple direct speech**, which quotes someone's exact words without modification. This encapsulates her proactive approach to managing her health. Her routine reflects an acute awareness of the importance of monitoring her blood pressure, revealing how she responds to abnormalities. Such diligence makes her experience relatable to readers, highlighting the reality of many individuals who must balance health management with daily responsibilities.

Marie Nonos further asserts, **"I am the cornerstone of my family, and I do my best to stay healthy so I will be able to provide for my family and take care of my children."** This

instance of simple direct speech underscores her commitment to her family, positioning her health as integral to her ability to fulfil her role. Using **"cornerstone"** conveys a sense of stability and responsibility, suggesting that her well-being directly impacts her family's livelihood. This highlights the broader implications of health in familial structures, emphasising how individual health is intertwined with the welfare of loved ones.

Bridget Sanjep provides a detailed narrative of her responsibilities when she explains, **"I used to take her BP at times twice a day and had a paper that I was writing the readings, and when it is elevated, I report to the nurse that was taking care of her or I rushed her to the hospital immediately."** This is an example of an **embedded direct speech,** which incorporates the speaker's words within a larger sentence structure. This enriches the narrative with personal testimony and illustrates the proactive measures she takes to ensure the health of a loved one. The emotional weight of caregiving is palpable in her account, which humanises the experience of managing high blood pressure and sheds light on the challenges faced by caregivers.

In another context, direct quotes such as **"Nous devons être solidaires" (We must be united)** from Marie Claire Nana enhance the emotional appeal of the message regarding breast cancer awareness. This phrase is a **simple direct speech** emphasising personal commitment and urgency, fostering a sense of community and collective responsibility in tackling health issues. This call for solidarity resonates deeply, encouraging individuals to support one another in their health journeys.

Moreover, one speaker states, "**My brother stopped working. I am now the one taking care of his treatment and his two children's education."** This is also an example of **simple direct speech**, directly attributing actions to the speaker and highlighting personal responsibility amidst the challenges of caregiving. Coupled with the reflection, "**But I didn't know what it was. I went to the hospital and they discovered that these symptoms were related to complications, "**this structure keeps the focus on the speaker's actions and experiences, illustrating the journey of navigating health uncertainties and the importance of seeking medical advice.

These narratives reveal the interconnectedness of personal health, family dynamics, and societal expectations. The use of direct speech both simple and embedded and the emphasis on personal responsibility highlight how individuals perceive and manage health challenges within their socio-economic contexts. This discourse highlights the importance of health awareness and community support and underscores the implications for public health initiatives. By sharing personal stories, these individuals contribute to a broader dialogue that advocates for greater understanding and resources to address health disparities, ultimately fostering a culture of solidarity and proactive health management in society.

4.3.1.4 Figurative Language

> *"le ministère de la Santé publique et ses partenaires... ont décidé de prendre le taureau par les cornes."* (19th Nov 2019)
>
> *"Eye cancer occurs before five years old. As soon as the cancer is present, the child's eye shines like a cat's in the night. As soon as a parent notices such a phenomenon, they should rush to the hospital".* (16 Feb 2017. Eye cancer)

In exploring figurative language within the extracts, we can further appreciate how these linguistic choices reflect broader societal attitudes and implications regarding health issues. The use of **personification** in the phrase "**le ministère de la Santé publique et ses partenaires... ont décidé de prendre le taureau par les cornes" *(the Ministry of Public Health and its partners have decided to take the bull by the horns)*** not only suggests an active commitment to addressing health crises but also reflects an expectation that public institutions should embody strength and decisiveness. This expectation can be seen as a critique of governmental responsibility, implying that inaction or indecisiveness would be unacceptable in the face of health challenges, thus shaping public perceptions of accountability in health governance.

The **simile** describing a child's eye shining **"like a cat's in the night"** not only creates a vivid image but also heightens awareness among parents about the critical symptoms of eye cancer. This figurative language acts as a call to action, urging vigilance and prompt medical attention, which is essential in paediatric health contexts. The implications here extend to a societal responsibility for education and awareness, reinforcing the need for health campaigns that empower parents to recognise early signs of illness.

Finally, the phrase "silent disease" encapsulates the insidious nature of conditions like kidney failure, suggesting that such illnesses can progress unnoticed, which has profound implications for public health messaging. This terminology highlights the necessity for proactive health monitoring and education, advocating for a culture of regular health checks and increased awareness of subtle health changes.

These figurative language elements reveal underlying social attitudes towards health, responsibility, and the importance of awareness. They enrich the narrative and powerfully shape public discourse, influencing how health issues are perceived, discussed, and addressed within society. By engaging with these linguistic choices, readers are encouraged to reflect on their perceptions and to advocate for a more informed and compassionate approach to health challenges, ultimately fostering a culture of collective responsibility and support in public health.

4.3.2 Pragmatic Analysis

Pragmatic analysis focuses on understanding how context influences language interpretation, examining the relationship between meaning and the situational factors surrounding communication. This type of analysis considers various elements, such as the speaker's intentions, the social dynamics at play, and the cultural background of the discourse. For this analysis, we will explore a single article to illustrate the key aspects of pragmatic analysis, including contextual influence, conversational implicature, speech acts, and deixis. Through this focused examination, we aim to uncover the underlying meanings and societal implications embedded in the text, revealing how language shapes our understanding of critical health issues.

Female-Oriented Cancers: Insufficient Screening, Vaccination, Negligence.

... Cancer is an important social issue. However, due to many reasons, people are afraid to face cancer cells whose origin is not even certain in the scientific world.

Non-Compliance To Vaccination

In contrast to the situation in developed countries, the mortality rate of cancer, especially cervical cancer, is currently high in most developing countries like Cameroon, where parents vehemently refuse their girl children to receive the vaccine against cervical cancer. …. This is primary prevention, in the form of vaccination against HPV, as recommended by

the World Health Organization (WHO) between the ages of 9 and 14. However, this vaccine is highly rejected by the population as some people say it is meant to render a girl child sterile…

Screening Is Missing

Although early screening is said to be key to preventing and treating cancer, the majority of women do not go for a voluntary screening for cancer… If parents happily welcome the introduction of the HPV vaccination, there are hopes that cervical cancer will be eliminated

-Contextual Influence

The article addresses the high rates of cancer-related deaths among women in Cameroon, highlighting a critical public health issue. The phrase **"dealing with the reality of cancer can be one of the most distressing medical experiences"** sets a poignant tone, evoking empathy and urgency. This emotional weight is shaped by the socio-cultural backdrop, where cancer remains a taboo subject. The context suggests that the fear surrounding cancer is compounded by societal stigma, making it difficult for individuals to seek help or discuss their experiences openly.

-Conversational Implicature

Statements often imply deeper meanings. For instance, the assertion that **"the majority of women do not go for a voluntary screening for cancer"** conveys not just a statistical fact but suggests systemic issues such as lack of awareness, unwillingness, and societal barriers that inhibit women's health-seeking behaviours. The implication is that education and outreach are desperately needed to combat these barriers, pointing to a societal responsibility to address these gaps.

-Speech Acts

The article employs various speech acts to convey its message:

Assertive: The declaration that **"Cancer is an important social issue"** functions as a factual assertion that frames cancer as a pressing societal concern, underscoring its relevance to public discourse.

Directives: Statements like **"parents vehemently refuse their girl children from receiving the vaccine against cervical cancer"** serve to inform and provoke thought among readers about the consequences of parental attitudes on public health.

Commissives: The hopeful statement, **"If parents happily welcome the introduction of the HPV vaccination, there are hopes that cervical cancer will be eliminated soon,"** expresses a commitment to potential positive outcomes, urging societal change in attitudes towards vaccination.

-Deixis

The text employs deictic expressions that anchor the discussion in a specific context, such as **"this vaccine"** and **"these are some of the reasons."** These references create a sense of immediacy and relevance, drawing readers into the critical conversation about the HPV vaccine and its implications for cervical cancer prevention.

-Power Dynamics

The text reveals power imbalances in health access and decision-making. The repeated mention of parental refusal to vaccinate their daughters against cervical cancer highlights the influence of traditional beliefs over scientific recommendations. The statement **"some people say it is meant to render a girl child sterile"** illustrates how misinformation and fear can overpower scientific evidence, reflecting a broader struggle between cultural beliefs and public health initiatives. This power dynamic emphasises the need for health education that respects cultural contexts while promoting accurate information.

Stereotypes

In the provided text by Brenda Yufe, several stereotypes emerge that warrant an in-depth discourse analysis. These stereotypes are not mere linguistic choices; they reflect and reinforce societal beliefs, attitudes, and fears surrounding cancer, vaccination, and women's health in Cameroon. A thorough examination reveals how these narratives shape public perceptions and influence health behaviours, ultimately impacting health outcomes.

-Stereotypes Surrounding Vaccination and Gender

The text presents a stark contrast between developed and developing countries, suggesting that the latter, particularly in Cameroon, exhibit a pervasive refusal to vaccinate girls against cervical cancer. This stereotype implies that parents in Cameroon are primarily negligent or uninformed about the benefits of vaccination. By framing the population's rejection of the HPV vaccine as **"vehement,"** the text perpetuates a narrative of ignorance and fear, suggesting that cultural beliefs rather than scientific evidence drive these decisions. This stereotype can be unpacked by examining the socio-cultural context in which these beliefs arise. The fear of sterility associated with the HPV vaccine highlights deep-rooted anxieties about female sexuality and reproductive health. Such fears are often exacerbated by historical and ongoing gender inequalities, where women's health decisions are influenced by patriarchal norms and societal expectations. The discourse surrounding vaccination becomes a battleground for broader issues of autonomy, agency, and the control of women's bodies. By positioning the rejection of the vaccine as a moral failing, the text not only simplifies the issue but also marginalises the voices of those who express fear based on lived experiences. Discourse analysis here reveals how language constructs a dichotomy between the 'informed' population in developed countries and the 'misinformed' population in developing nations, thereby reinforcing colonial narratives that undermine local knowledge systems.

-Stereotypes of Compliance and Non-Compliance

The text suggests that **"very few women will be fortunate enough not to encounter cancer,"** painting a grim picture of inevitability. This generalisation may reinforce the stereotype that cancer is a common fate for women in Cameroon, which can lead to fatalism and despair. Furthermore, the mention of **"non-compliance to vaccination"** implies a moral failing on the part of parents, framing the issue as one of negligence rather than a response to legitimate concerns about health practices. By labelling the lack of vaccination as **"non-compliance,"** the text positions parents as actively resisting a beneficial health intervention. This framing can obscure the underlying reasons for vaccine hesitancy, such as mistrust in medical institutions, lack of access to information, and historical exploitation by healthcare systems. A more nuanced discourse analysis would consider how these factors contribute to public health outcomes and challenge the stereotype of negligence. The discourse surrounding compliance must be reframed

to acknowledge the complexities of informed decision-making, where individuals weigh personal beliefs against the backdrop of societal pressures and historical contexts. Such an analysis reveals the necessity of cultivating trust between healthcare providers and communities, emphasising the importance of culturally relevant health education that respects local beliefs and practices.

-Stereotypes About Knowledge and Awareness

The assertion that **"the majority of women do not go for a voluntary screening for cancer"** and lack knowledge about various cancers suggests a stereotype of women in Cameroon as uninformed or disengaged from their health. This generalisation overlooks systemic barriers that might prevent women from accessing information and healthcare services, such as economic constraints, educational disparities, and inadequate healthcare infrastructure. This portrayal simplifies the complexities of women's health in Cameroon. A discourse analysis should investigate the societal structures that contribute to this lack of knowledge. Factors such as cultural attitudes towards women's health, the availability of educational resources, and the impact of healthcare policies must be considered to provide a more comprehensive understanding of the issue. The text's framing risks perpetuating a narrative that blames women for their health outcomes while neglecting to address the broader socio-economic and political contexts that shape health behaviours. By recognising these systemic barriers, we can advocate for interventions that empower women, enhance access to healthcare services, and promote health literacy. Such an approach not only challenges existing stereotypes but also fosters a more equitable discourse around women's health in Cameroon.

-Intertextuality and Global Context

The article's references to international health guidelines, such as those from the World Health Organization (WHO), situate local issues within a global framework. By mentioning the WHO's recommendation for HPV vaccination, the author connects the local plight of women in Cameroon to international health standards, reinforcing the legitimacy of the call for vaccination. This intertextuality enhances the argument's credibility and encourages readers to view local health issues as part of a larger global health narrative.

Through a CDA lens, Yufe's article reveals the intricate interplay of health, societal norms, and cultural beliefs surrounding female-oriented cancers in Cameroon. By highlighting

the emotional, social, and political dimensions of cancer awareness and prevention, the article informs and advocates for a shift in public attitudes and behaviours. This analysis encourages readers to reflect on their perceptions of health and the collective responsibility to advance awareness and accessibility in cancer prevention soon.

4.4 Discourses on Improving Prevention of Non-Communicable Diseases (NCDs)

Jaworski and Coupland (1999) argue that discourse can only exist if it is considered ‘‘socially acceptable” by specific segments of society. For a discourse to achieve this acceptability, it must be 'provisionally recognisable' (Sunderland, 2004), a condition that relies on established social structures and modes of communication. Importantly, discourses do not merely reflect or represent social entities and relationships; they actively construct and constitute them. Different discourses shape key entities such as health conditions, healthcare providers, and patients in varied ways, positioning individuals within specific social roles (e.g., as caregivers or recipients of care). This social effect of discourse is a central focus of discourse analysis.

In this section, we will analyse newspaper articles to identify prevalent topics within the discourse surrounding the prevention of non-communicable diseases (NCDs). These articles illustrate the discursive practices used by journalists and public health advocates. The key topics identified within this discourse will be explored in detail below.

4.4.1 Awareness of Non-Communicable Diseases

Awareness is a foundational topic in newspaper articles, functioning as an entry point to gauge public understanding of NCDs. Journalists and health communicators must assess awareness regarding these diseases, as it establishes the reality of the conditions being discussed. Despite extensive media coverage surrounding NCDs and their risk factors, it is often surprising to find that many individuals remain uninformed or misinformed about these health issues. This gap in knowledge underscores the critical role of awareness in prevention efforts. For instance, many articles consistently highlight the importance of awareness creation as a primary focus in public health campaigns. Journalists often begin their discussions by addressing the prevalence of NCDs and the necessity for individuals to recognise their risk factors. By doing so, they aim to inform the public about the existence and implications of these diseases, helping to bridge the knowledge gap within communities.

This initial focus on awareness validates individual experiences and empowers readers to engage actively in discussions about the prevention and management of their health. Furthermore, articles often include statistics, expert opinions, and personal stories reinforcing the need for increased public awareness, illustrating how collective understanding can lead to more proactive health behaviours.

Through discourse analysis, it becomes evident that awareness of NCDs is not merely an informational exchange but a vital component in shaping public attitudes and behaviours toward health. By understanding the social dynamics within newspaper discourse, we can better appreciate how media influences perceptions of non-communicable diseases and fosters a culture of proactive health management. This understanding can ultimately inform more effective public health strategies to reduce the burden of NCDs. Here is an excerpt from the data on an article written on Tuesday, 24th October, on Cancer.

> [NC: *The activities related to the **awareness month**, organised by the Women's Association of the Company, were officially launched yesterday in Yaoundé by the General Director, Marie Claire Nana.*
>
> *They are strong, beautiful, and courageous. They wore **pink** and decided to engage in a **fierce fight against breast cancer**. These women are from the SOPECAM Women Association (SOWA) who have chosen to join the international community in the fight against breast cancer this October, also known as **"Pink October."** For one week, SOWA will organise **awareness activities** within the company **to combat this silent killer**. …In her element, the specialist managed to **explain**, in **simple terms**, **what breast cancer is**, its risk factors, prevention methods, and treatment. According to Dr. Mboua Batoum, breast cancer is **defined** as **the multiplication of cells** in the mammary gland. It is the leading cause of cancer-related deaths among women. The risk factors are multiple; they are primarily genetic. However, individuals who consume **alcohol** and **tobacco** are also at risk; …Without being **overly alarming**, the specialist nonetheless indicated preventive measures. She recommends regular **physical activity**, **avoiding stressful situations, using beauty products not containing aluminium salts** (often found in deodorants) or parabens, and encouraging early detection. The gynaecologist also advises maintaining a **healthy diet** by consuming **fresh foods**, with a preference for white meat.*

The first linguistic trace that shows awareness is the use of a collocation: " *The activities related to the **awareness month**, organised by the Women's Association of the Company, were officially launched yesterday in Yaoundé by the General Director, Marie Claire Nana.* The term **"awareness month"** serves as a powerful discursive tool in public health campaigns, functioning as a focal point for communication strategies to educate the public about specific health issues. As Jaworski and Coupland (1999) suggest, discourse exists only when it is socially acceptable. "**Awareness Month"** is widely recognised and socially accepted, making it a potent vehicle for disseminating information. The term provides a clear temporal framework that facilitates discussions about health issues, allowing organisations, media, and communities to unite under a common cause. This recognition is crucial, as it fosters a sense of legitimacy and urgency around health topics that might be overlooked.

The phrase **"awareness month"** does not merely reflect social realities; it actively constructs them. By designating specific months for awareness, the discourse surrounding health issues is institutionalised, influencing how individuals and communities perceive and engage with these topics. For example, Breast Cancer Awareness Month in October promotes knowledge about breast cancer and shapes individuals' identity as supporters or advocates, positioning them within a broader narrative of health solidarity. Awareness months play a critical role in mobilising action. The temporal aspect of "**awareness month**" creates a sense of urgency, encouraging individuals to participate in screenings, fundraisers, and educational events. This call to action is often reinforced by media campaigns utilising the term, making it easier for organisations to rally community involvement. During these months, articles and social media posts frequently emphasise participation, further solidifying the connection between awareness and action. The narratives constructed during these months often highlight personal stories, statistics, and expert insights, which collectively work to normalise discussions about sensitive health topics. This normalisation reduces stigma and prompts individuals to seek information or assistance, fostering a culture of openness and proactivity regarding health management.

Critical Discourse Analysis highlights the role of "awareness month" as a public health strategy. Organisations can create focused campaigns that resonate with the public by framing health issues within a dedicated period. This approach enhances visibility and encourages

sustained conversations beyond the designated month, promoting ongoing engagement with health topics.

In the creation of awareness, the article uses symbolism **".** *These women are from the SOPECAM Women Association (SOWA) who have chosen to join the international community in the fight against breast cancer this October, also known as "**Pink October**"* **"Pink October"** refers to the annual awareness campaign dedicated to breast cancer, symbolised by the colour **pink.** This designation is a linguistic feature that encapsulates a specific time frame (October) and an associated cause (breast cancer awareness). By associating a specific colour with breast cancer, "Pink October" creates a visual identity for the campaign, making it easily recognisable. This symbolism fosters a community connection and encourages individuals to participate in awareness activities, thus increasing visibility and understanding of the disease.

The article equally makes use of **Euphemism.** The use of **"pink"** to refer to breast cancer awareness softens the harsh realities of the disease. This euphemistic approach makes discussions about breast cancer more approachable, reducing stigma and encouraging open conversations among individuals who might otherwise avoid the topic.

Another instance of euphemism "…*For one week, SOWA will therefore organise awareness activities within the company to combat this **silent killer"*** is **"silent killer."** A mild or indirect word or expression substituted for one considered too harsh or blunt. It softens the impact of discussing cancer, making the topic more approachable while conveying seriousness.

The word **"explain"** is a verb that means to make something clear or understandable by describing it in detail. In the context of the text about breast cancer awareness and campaigns, **"explain"** indicates the intention to clarify complex medical concepts related to breast cancer, making them accessible to a broader audience. This is essential in health communication, where understanding can significantly impact prevention and treatment. The act of explaining fosters engagement. When presented clearly, information encourages dialogue and questions, allowing individuals to connect more deeply with the topic and enhancing community involvement in awareness efforts. Other Verbs like **"organise"** and **"encourage"** suggest proactive engagement, which is essential in the fight against NCDs.

Nominalisation: "multiplication of cells," "awareness activities." Transforming verbs into nouns (e.g., "multiply" to "multiplication") allows abstract concepts to be treated as concrete issues. This helps distil complex medical information into more digestible terms for a general audience, promoting understanding of NCDs.

Adjectives describe and add detail to nouns **("early," "fresh," "courageous").** Adjectives create emotional resonance and depict the urgency and importance of awareness.

Awareness does not end at the level of the different parts of speech used. Another important element the article used is Metaphor. A figure of speech is a word or phrase applied to an object or action that is not applicable. *They are strong, beautiful, and courageous. They wore pink and decided to engage in a* ***fierce fight against breast cancer****. These women are from the SOPECAM Women Association (SOWA) who have chosen to join the international community in the fight against breast cancer this October, also known as "Pink October." For one week, SOWA will organise awareness activities within the company* ***to combat this silent killer.*** These metaphors create a vivid picture of the struggle against cancer, framing it as a battle that requires collective effort.

4.4.2 NCDs as a Lifestyle Long-Term Infection

The discourse surrounding Non-Communicable Diseases (NCDs) often follows discussions on awareness. It is crucial to inform individuals about how NCDs can develop and the risk factors involved. This stage is essential, as it reveals much about people's understanding of these diseases and their associated risks. Much time is dedicated to analysing the different contributing factors to NCDs. Emphasising this knowledge is vital, as understanding the methods of disease development can enhance awareness and improve strategies for prevention and self-protection against these diseases. It is said that NCDs are a group of conditions that are not mainly caused by an acute infection, result in long-term health consequences and often create the need for long-term treatment and care. They are linked to lifestyle choices such as tobacco consumption, alcohol, lack of physical activity and unhealthy diets (PAHO source 2013). Below are three articles that provide information on the causes of NCDs.

> *"They were also educated on the importance of* ***diet and sports exercise to keep fit****. For two days (March 9 and 10, 2023), the population of Buea received free screening for kidney-related diseases like high blood pressure, diabetes, and hypertension.…. All those*

*screened were **advised** on how their **lifestyles can affect their health.** They were also **counselled** on the type of **meals** to eat and to take **sports seriously**."* (16th March 2023. Kidney failure)

*"Completely in her element, the specialist succeeded in simple terms to **explain** what breast cancer is, its risk factors, means of prevention, and treatment. According to Dr. Mboua Batoum, breast cancer **is,** by **definition**, a multiplication of cells in the mammary gland. It is the leading **cause** of cancer death in women. Risk factors are multiple. They are primarily genetic; however, **individuals consuming alcohol and tobacco are also exposed to the disease**. Certain **chemical substances, foods, and beauty products (nail polish, lipstick) and the onset of early menstruation (around 8 or 10 years) are also risk factors.** Without being overly alarming, the specialist indicated prevention measures. She **recommends** engaging in **regular physical activity, avoiding stressful situations, and using beauty products that contain aluminium salts (often found in deodorants) or parabens, and she encourages early detection."*(24th October 2023. Breast Cancer)

*"... The goal is to **encourage** populations to **adopt** a **healthy diet and exercise regularly**. According to a dietitian, **excessive consumption of high-fat foods such as okok, eru, koki, kondre, and yellow sauce is a significant factor**. Obesity **can** also be linked to **food insecurity**, understood here as a situation that occurs when healthy and nutritious foods are not available or are difficult to acquire in sufficient quantities."*(6th March 2020.Obesity)

The articles specify several risk factors for breast cancer, epilepsy, obesity and kidney diseases, including **genetic predispositions, lifestyle choices**, and **environmental exposures**. This multifaceted framing informs the audience that genetics, personal behaviours, and environmental conditions influence NCDs. For instance, the mention of **alcohol** and **tobacco** consumption positions these behaviours as critical points for intervention. The phrase ***"individuals who consume alcohol and tobacco are also at risk"*** emphasises the impact of personal choices on health outcomes. This awareness empowers individuals to **make** informed lifestyle decisions, fostering a proactive approach to health management.

The discourse surrounding preventive measures normalises healthy lifestyle choices essential to NCD prevention. Recommendations for regular **physical activity**, **stress management, and dietary** preferences promote a holistic understanding of health. For example,

advising individuals to **consume fresh foods, with a preference for white meat**, offers practical guidance and establishes a cultural norm around healthy eating. This normalisation encourages readers to **integrate** preventive measures into their daily lives. The positive and constructive language employed focuses on empowerment rather than fear. By stating "…**without being overly alarming," t**he article aims to promote awareness while ensuring individuals feel a sense of agency over their health. Equally, the phrase **"kidney-related diseases**" encompasses a range of health issues, allowing readers and patients to understand the general category under discussion, which includes high blood pressure and diabetes. This shows that one NCD can lead to another in the long run.

Education plays a pivotal role in the article. Using a straightforward, informative, formal educational tone informs without inciting panic. The phrase **"without being overly alarming"** reflects a balanced approach to discussing sensitive health issues. **Dr. Véronique Mboua Batoum**'s explanation of breast cancer in **"simple terms"** exemplifies an effort to make complex medical information accessible. This choice of language demystifies the disease and positions the audience as **active participants** in their health. The text serves as a public health education vehicle, reinforcing the notion that informed individuals are better equipped to manage their health risks. By providing clear **definitions** and **explanations**, such as describing breast cancer as "t**he multiplication of cells in the mammary gland,"** the discourse simplifies complex concepts, making it easier for the public to grasp the seriousness of the disease.

The use of different parts of speech such as nouns (diet, exercise, screening, treatment, risk factors) highlight the multifaceted nature of the diseases and their prevention methods, verbs (Action-oriented verbs like educated, received, advised, and counselled) convey an active engagement in health promotion. Adjectives Descriptors such as **"early"** (referring to menstruation) and **"overly alarming"** influence the reader's perception of urgency and seriousness.

It becomes evident that the article effectively raises awareness about breast cancer risk factors. By framing these as a combination of genetic, lifestyle, and environmental influences, normalising preventive measures, and emphasising the importance of education, the discourse informs and empowers the public. This approach not only enhances awareness but also promotes

proactive health behaviours, ultimately contributing to the larger goal of reducing the incidence of breast cancer within the community.

4.4.3 The Discourse of Negligence

The discourse of negligence becomes particularly salient when individuals receive diagnoses for Non-Communicable Diseases (NCDs) that could have been prevented. This discourse often highlights circumstances in which negligence has directly contributed to their health issues. The primary aim of this discourse is not punitive; instead, it seeks to enhance awareness regarding critical health issues that have been overlooked. We shall examine the case of Fadima N., a 20-year-old female student who struggles with obesity, weighing 125 kilograms at a height of 1.62 meters. Her situation illustrates how lifestyle choices, often rooted in negligence, can lead to serious health consequences like hypertension.

> *"Fadima N., 20 years old, suffers from obesity. A student in a high school in Yaoundé, the young woman weighs no less than 125 kilograms at a height of 1.62 meters.* ***Nothing alarming so far****, except that recently, her doctor diagnosed her with hypertension. 'At first, I felt very unwell. I had difficulty breathing normally. I often drank one to two litres of sugary drinks per day. Not to mention that I used to gorge myself on pastries****,' admits Fatima, who says she has started exercising and adopted a healthier diet,* ***thanks to*** *her doctor's recommendations."* (6th March 2020. Obesity)

The use of the active voice and adverb of frequency in this expression**, "I often drank one to two litres of sugary drinks per day"** the use of **"often"** suggests a habitual action, indicating negligence in her dietary choices. This repetition implies a lack of awareness or concern regarding the health risks associated with excessive sugar intake.

The Contrastive Statements **"Nothing alarming so far, except that recently"** The phrase contrasts her previous state and her recent diagnosis. The word **"except"** serves to downplay the seriousness of her situation until it escalated, reflecting a negligent attitude towards her health.

Words like **"gorge"** convey a sense of indulgence and excess, highlighting negligence in her eating habits. This verb choice suggests a lack of moderation and awareness of the consequences.

A causal clause is a subordinate clause expressing a **cause-and-effect relationship between two statements**. It explains why something happens or the reason behind an action or event. The Causal clause **"thanks to her doctor's recommendations"** implies that her previous lifestyle choices were detrimental, yet she only began to change after being diagnosed. This phrase indicates a cause-and-effect relationship, suggesting that the young lady's positive changes in lifestyle-such as starting to exercise and adopting a healthier diet, were a direct result of her doctor's advice. It highlights the influence of external guidance on her health decisions. This linguistic element is significant in discourse analysis as it underscores the role of authority figures, like healthcare professionals, in shaping individual behaviours and decisions regarding health. This highlights negligence in not proactively seeking a healthier lifestyle before the health crisis.

The descriptive Imagery **"Had difficulty breathing normally**" depicts a serious health concern that could have been avoided with better lifestyle choices. This imagery emphasises the consequences of her negligence.

The text illustrates a clear trajectory of negligence leading to obesity and hypertension in Fadima's life. Her acknowledgement of consuming large quantities of sugary drinks and pastries showcases a disregard for her health, which is common among individuals facing lifestyle-related diseases. The initial lack of concern reflects a broader societal issue where individuals may not recognise the long-term impact of their dietary habits until faced with serious health consequences. The transition she describes, prompted by her doctor's recommendations, signifies an awakening to the importance of lifestyle choices, yet it also underscores how preventable these conditions could have been.

4.5 Discourses related to Stigma

What does the term "stigma" really mean? Derived from the Greek word for branding slaves, stigma originally signified a mark that identified individuals as inferior and bound them to their social status (Paterson 2009a, 7). This definition suggests that stigma functions as a mechanism that keeps certain groups in marginalised positions, making it challenging for them to escape their circumstances. The Dutch Van Dale dictionary reinforces this idea, defining stigma as "something that degrades one's reputation." The implications of stigma are profound, as it fosters feelings of shame, blame, hopelessness, and distress. It can also lead to misrepresentation

in the media and a reluctance to seek or accept necessary help. Families are not immune to the effects of stigma; they often find themselves lacking support as well.

4.5.1 Educational Discourse

Why is education about non-communicable diseases (NCDs) essential? There are three primary reasons for effective education on NCDs. The first reason is to prevent new cases. This involves two key processes:

1. Providing Information: The first aspect focuses on educating the public about NCDs defining what they are, how they are transmitted, and what measures individuals can take to protect themselves. This includes practical guidance on using protective methods and suggesting safer practices.

2. Improving Quality of Life: The second reason underscores the importance of enhancing the quality of life for those already affected by NCDs. Often, education is perceived as solely aimed at preventing new cases. However, it is equally crucial to empower those living with NCDs by providing them with the knowledge to manage their condition effectively, access medical services, and find emotional and practical support.

> *…They are strong, beautiful, and courageous. They donned pink and decided to wage a fierce battle against breast cancer. "They" refers to the women of the SOPECAM Women Association (SOWA), who have chosen to unite with the international community in the fight against breast cancer this October, also known as "Pink October."*
>
> *.... "14,000 new cancer cases among adults each year. In the absence of statistics regarding children, doctors estimate there are about 300 new cases annually.* **(**February 16th, 2017. Cancer)

The educational discourse surrounding breast cancer prevention and female-oriented cancers plays a crucial role in reducing the stigma associated with these health issues by employing clear language, emphasising empowerment, and fostering community engagement. The use of **descriptive adjectives** such as **"strong," "beautiful**," and **"courageous"** about women involved in initiatives like SOPECAM reframes the narrative from victimhood to resilience, showcasing their proactive roles in health management. Additionally, phrases like **"engage in regular physical activity" and "early screening"** normalise discussions about

cancer by framing these actions as community responsibilities rather than personal failings, thus diminishing the stigma often linked to cancer diagnoses. Educational efforts, exemplified by Dr. Véronique Mboua Batoum's clear explanations, demystify the illness by providing straightforward information on risk factors and prevention methods, empowering individuals with knowledge and reducing associated fears. Events like **Pink October** foster community involvement, emphasising solidarity and collective action, which further alleviates feelings of isolation and shame among those affected. Moreover, the use of quantitative statements, such as **"14,000 new cancer cases,"** provides a factual basis for understanding the prevalence of cancer, reassuring individuals that they are not alone in their experiences and helping to dismantle the stigma surrounding cancer patients. Overall, by fostering empowerment, normalising conversations, and encouraging community engagement, educational discourse creates a supportive environment where discussions about health issues can occur freely, ultimately leading to better health outcomes and greater awareness.

4.5.2 The Discourse of Hope

How does hope influence the lives of individuals living with NCDs? Hope can serve as a powerful, positive force, encouraging individuals to plan for the future while also promoting treatment adherence. Over recent decades, many NCDs have transitioned from being life-threatening to manageable conditions, largely due to advancements in medical research. Ultimately, one of the primary goals of articles on NCD is to diminish stigma and restore hope among those affected.

Hope discourse plays a vital role in reducing the stigma surrounding breast cancer and female-oriented cancers by fostering a sense of possibility, empowerment, and collective action. By using uplifting language and emphasising achievable goals, such as the prevention of cervical cancer through vaccination, the discourse instils confidence in individuals and communities. Phrases **like "there would be hope for the elimination of cervical cancer shortly"** inspire optimism and motivate proactive health behaviours, encouraging individuals to seek screening and vaccination without fear of judgment. The emphasis on community involvement, such as the **Pink October** campaign, highlights collective efforts against cancer, which serves to normalise the experience of those affected and reduce feelings of isolation. Additionally, by focusing on the **"importance of diet and exercise"** as preventive measures, the discourse promotes a positive

narrative that encourages healthy lifestyle choices without placing blame on individuals for their health conditions. This reframing helps individuals see themselves as active participants in their health journey rather than passive victims of circumstance. Overall, hope discourse not only empowers individuals but also fosters a supportive environment where conversations about cancer can occur openly, ultimately leading to greater awareness and better health outcomes.

> *"La présentation de l'ouvrage de Marcelle Dahgo sur ce sujet de santé s'est récemment déroulée à Yaoundé. « Plus qu'un livre, une action ». C'est par ce slogan que l'auteur Marcelle Dahgo a capté l'attention du public lors de la cérémonie de dédicace de son premier livre intitulé : « Vaincre l'épilepsie : de la fatalité à la victoire ». L'événement s'est tenu à Yaoundé le 25 novembre dernier…Victime de fortes crises d'épilepsie dans son adolescence, Marcelle Dahgo se sent beaucoup mieux à prése..."*(21st December 2022)

> *"The presentation of Marcelle Dahgo's book on this health topic recently took place in Yaoundé. "More than a book, an action." This slogan captured the audience's attention during the book dedication ceremony for her first book titled: "Overcoming Epilepsy: From Fatalism to Victory." The event was held in Yaoundé on November 25. Marcelle Dahgo is the founder of a non-governmental organization (NGO) called "Overcoming Epilepsy Together," which aims to provide various forms of support to individuals suffering from epilepsy. ...Having suffered from severe epilepsy seizures during her adolescence, Marcelle Dahgo now feels much better..."* (21st my translation

In the text "Dedication: Keys to Overcoming Epilepsy," various linguistic features intricately weave together to construct a powerful discourse of hope. Key **nouns** such as **"action"** and **"victory"** evoke a proactive and triumphant approach to overcoming challenges, suggesting that the book catalyzes change. The **verb "aims"** indicates a purposeful intention to foster hope among those affected by epilepsy, while the verb **"overcoming"** emphasises an active struggle toward empowerment and recovery. The adverb **"much"** intensifies the sentiment of improvement in Marcelle Dahgo's condition, highlighting significant progress and reinforcing a narrative of hope. **Descriptive adjectives** like **"first"** suggest new beginnings and potential for future advocacy, whereas **"severe"** underscores the journey from hardship to hope. Phrases such as **"Overcoming Epilepsy Together"** evoke a sense of collective action and solidarity, and **"From Fatalism to Victory"** contrasts hopelessness with achievement, inspiring individuals to envision positive outcomes. Together, these features create a rich tapestry of language that not

only reflects personal journeys of overcoming adversity but also emphasises community support, positioning the discourse as a vital instrument for empowerment and resilience in the face of non-communicable diseases.

4.5.3 Discourse of Blame

Blame discourse surrounding non-communicable diseases (NCDs) often focuses on individual behaviours, such as poor diet or lack of exercise, attributing responsibility for these diseases to personal choices. This can lead to stigma against individuals with conditions like obesity or diabetes, as society may perceive them as having failed to take care of their health. However, this perspective overlooks the broader social determinants of health, such as access to nutritious food and healthcare resources, which play a crucial role in the prevalence of NCDs.

> *… "At first, I felt very unwell. I had difficulty breathing normally. This was accompanied by headaches in the morning, at the top and back of my head. Not to mention dizziness and visual disturbances with great fatigue," confides the high school student, who admits to having abused sodas and calorie-rich foods. "I often drank one to two litters of sugary drinks a day. Not to mention that I stuffed myself with pastries,"*
>
> *The causes include, among others, excessive consumption of fatty foods such as okok, eru, koki, kondre, and yellow sauce, according to a dietitian... An international study on the state of global health indicates that obesity kills three times more than malnutrition. "Today, in the world, people die more from overeating than from not eating enough. In 20 years, we have moved from a world where people suffered from malnutrition to a world where people suffer from diseases related to a diet that is too fatty and rich," emphasises an expert on this health paradox..* (6th March 2020. Obesity)

One of the most explicit expressions of blame is seen in the young lady's admission. Fadima admits to having abused sodas and calorie-rich foods. This statement directly attributes her obesity to her personal dietary choices, suggesting that her lack of moderation is a significant factor in her health issues. Additionally, her revelation that **"I often drank one to two litters of sugary drinks a day"** reinforces the notion that her lifestyle choices are blameworthy. The repetition of her excessive consumption underscores a personal accountability narrative, implying that individuals have the power to control their health outcomes through their choices.

The text also highlights cultural eating habits as a contributor to obesity when it states, **"Excessive consumption of fatty foods such as okok, eru, koki, kondre, and yellow sauce."** By associating these specific cultural foods with obesity, the discourse implies that societal norms and practices around food consumption are partially responsible for the rising rates of obesity, thereby placing blame on cultural behaviours.

Moreover, the characterization of obesity as **"the primary risk factor for cardiovascular diseases and diabetes"** frames those who are obese as contributing to their own health risks. This medical framing shifts responsibility onto individuals, suggesting that their condition is a direct result of their choices and behaviours.

The article does acknowledge systemic issues with the statement, **"Obesity can also be linked to food insecurity**." However, even this acknowledgment implies that individuals living in food insecurity might make poor choices due to their circumstances, subtly shifting some blame back to them. The narrative suggests that individuals could still strive for healthier options if they were more responsible.

A particularly striking element of blame emerges from the comparison made in the statement, **"Obesity kills three times more than malnutrition."** This stark contrast not only emphasises the severity of obesity but also implies that individuals are making choices that lead to preventable health issues, thus framing obesity as a moral failing compared to those suffering from malnutrition.

Finally, the call to action in the text, **"The stated goal is to encourage populations to adopt a healthy diet and engage in regular exercise,"** reinforces the discourse of personal responsibility. This statement suggests that individuals have a duty to improve their health, implying that failure to do so reflects a lack of accountability.

Overall, the discourse surrounding obesity in this article utilises a blame framework that foregrounds individual responsibility for dietary choices while acknowledging systemic factors like food insecurity. By framing obesity as a consequence of personal habits and cultural practices, the text encourages a societal shift towards healthier behaviours, implicitly blaming those who do not conform to these ideals. This approach reflects a prevalent societal tendency to

hold individuals accountable for their health outcomes, often overlooking the broader structural factors at play.

4.6. Discourse Related to Burden

Burden discourse refers to the framing of certain health issues, particularly non-communicable diseases (NCDs), as significant burdens on individuals, families, communities, and healthcare systems. This discourse highlights the negative consequences associated with NCDs, emphasising the multifaceted strains they impose. In the context of NCDs, burden discourse manifests in several key areas:

- **Economic Impact**: NCDs such as diabetes, cancer, and cardiovascular diseases often lead to substantial financial costs for treatment, medication, and ongoing management. Families may face significant out-of-pocket expenses, leading to financial hardship. Additionally, the economic burden extends to communities and healthcare systems, as resources are diverted to manage these chronic conditions, impacting overall healthcare funding and allocation.
- **Emotional Strain:** The psychological effects of living with NCDs can be profound. Patients often experience anxiety, depression, and stress related to their diagnosis and treatment. Families may also feel the emotional toll, as they support loved ones dealing with chronic illnesses. This emotional burden can affect mental health and overall quality of life.
- **Social Consequences:** NCDs can disrupt daily life and social interactions. Individuals may struggle with reduced productivity at work or school due to their health issues, which can strain family dynamics. The need for caregiving can shift responsibilities within a household, affecting relationships and social support systems. Communities may also experience reduced cohesion and increased stigma associated with NCDs.
- **Healthcare System Challenges:** The rising prevalence of NCDs places immense pressure on healthcare systems. Hospitals and clinics may become overwhelmed with patients, leading to longer wait times and resource shortages. Public health initiatives may struggle to address the increasing burden of these diseases, complicating efforts to promote preventive care and health education.

4.6.1 Economic Discourse

Economic discourse refers to the language and communication surrounding economic issues, policies, and behaviours that influence individuals and society. It encompasses discussions about financial burdens, healthcare costs, employment, and the social dynamics that arise from economic conditions. In the context of health, economic discourse can highlight the financial challenges patients face, affecting their quality of life and support systems. We shall use extracts of two different articles for this.

> *….**After a month in the hospital, which he left due to lack of funds**, he returned **home to Nkolmintag (Douala II) not fully recovered**…. The task of cleaning him up after using the bathroom now fell to his nephew Marcelin, who took care of him once he returned from his jobs…. Gervais hired a lady to take care of him full-time, **with all expenses covered by himself**. This assistance went further in July 2016, Gervais was evacuated to Switzerland. Over the years, he recovered. As a cherry on top of their friendship, he also found employment…* (17th May 2024)
>
> *… Au-delà de la sensibilisation sur ce tueur silencieux qui fait des milliers de victimes au sein de la gente féminine, il faut bien trouver les fonds nécessaires pour arriver à bout lorsque la maladie est confirmée. La vie devient de plus en plus difficile et on n'arrive pas à joindre les deux bouts avec notre salaire. Les coûts du traitement du cancer étant exorbitants, il est impossible de compter uniquement sur le salaire…*
>
> *… Beyond raising awareness about this silent killer that claims thousands of victims among women, it is essential to find the necessary funds to cope when the disease is confirmed. Life is becoming increasingly difficult, and we cannot make ends meet with our salary. Given that the costs of cancer treatment are exorbitant, it is impossible to rely solely on a salary...* (October 27, 2023) My Translation.

The narrative surrounding Gervais E.'s experience after his stroke exemplifies a critical discourse analysis (CDA) framework, particularly through a discourse-historical approach that situates individual experiences within broader social and economic contexts. This perspective reveals how economic discourse intertwines with societal attitudes toward illness, caregiving, and the stigma associated with chronic conditions.

From the outset, the phrase **"due to lack of funds"** serves as a crucial entry point for understanding the structural inequalities that shape Gervais's situation. The passive construction diverts responsibility from Gervais to the socio-economic forces at play, illustrating how systemic financial constraints dictate life-altering decisions. This linguistic choice conveys a sense of powerlessness, reinforcing the notion that economic limitations can render patients burdensome, particularly when their care requires significant resources. Such framing reflects societal attitudes that often marginalize those who are ill, positioning them as dependent and problematic within family dynamics. Yolande's statement encapsulates the stigma surrounding caregiving roles, where the expectation for women to manage both familial and caregiving responsibilities can lead to overwhelming emotional strain. Her assertion that **"she couldn't take care of the children and their father at the same time"** not only highlights the logistical challenges of caregiving but also underscores societal narratives that often valorise self-sacrifice in women. This expectation can fracture familial bonds, as seen in Yolande's departure, which illustrates how financial stress can exacerbate relational tensions. The discourse surrounding her choice reveals underlying gender norms that dictate caregiving responsibilities, ultimately framing illness as a catalyst for familial disintegration. Marcelin's subsequent role as a caregiver provides further insight into the economic discourse at play. The phrase **"cleaning him up after using the bathroom"** starkly illustrates the intimate, often unacknowledged labour involved in caregiving. This depiction emphasises the physical and emotional toll on caregivers, who frequently juggle their own economic pressures while providing support. The choice of language here serves to humanize the caregiver's struggle, while also highlighting the societal tendency to overlook the burdens borne by family members in caregiving scenarios. The arrival of Gregoire marks a pivotal shift in the narrative, introducing a contrasting economic dynamic. The phrase **"all expenses covered by himself"** juxtaposes Gervais's initial financial hardships with a newfound capacity to hire help, emphasising the role of social capital in mitigating economic distress. This shift illustrates how relational networks can provide crucial support, yet it simultaneously underscores the precariousness of recovery dependent on external relationships. It reflects the broader discourse around social responsibility and the importance of community in addressing individual crises.

In summary, the economic discourse embedded in Gervais E.'s narrative elucidates the complexities of caregiving, the pervasive stigma associated with chronic illness, and the

emotional burdens placed on both patients and their families. Through a CDA lens, it becomes evident that financial limitations can amplify feelings of inadequacy and helplessness, transforming illness into a multifaceted struggle that encompasses not only physical health but also broader socio-economic realities. This analysis reveals how the interplay of language, societal norms, and economic factors shapes the lived experiences of those affected by chronic conditions, highlighting the urgent need for systemic change to support both patients and caregivers.

The article “Octobre rose à la SOPECAM”, delves into the economic discourse surrounding women's empowerment and health financing in the context of breast cancer awareness. The narrative unfolds in Yaoundé, where the SOPECAM Women Association (Sowa) addresses a pressing health crisis and its economic implications. At the heart of this discourse is the acknowledgment of cancer as a silent yet devastating affliction that disproportionately affects women. The phrase **"tueur silencieux" (silent killer)** highlights the situation's urgency, evoking a sense of immediacy and concern. The use of financial terms like **"fonds nécessaires" (necessary funds)** and **"coûts du traitement" (treatment costs)** emphasises the economic burden that accompanies health crises. It underscores the reality that relying solely on salaries is insufficient to cover exorbitant medical expenses, thus painting a stark picture of financial strain.

Maureen Tabe, the president of Sowa, articulates a compelling argument for the necessity of alternative income-generating activities. Her statement that "**la vie devient de plus en plus difficile" (life is becoming increasingly difficult)** resonates with many, illustrating how economic pressures can exacerbate health issues. The call for entrepreneurial endeavours is not merely a suggestion but a lifeline for women seeking both financial independence and health security. The organisation of a roundtable on social and solidarity economy demonstrates a proactive approach to addressing these issues. It reflects the understanding that economic empowerment is vital for well-being and resilience. Inviting Etienne Didier Atangana as a consultant further enriches this discourse, as it signifies the importance of expert guidance in navigating the complexities of income generation. In essence, the economic discourse presented in this article transcends mere discussions about money. It intertwines health, empowerment, and community solidarity, illustrating that financial stability can indeed support women's health

initiatives. This holistic view advocates for a society where women are not only informed about health risks but also equipped with the tools to combat them through economic agency.

4.7 Discourse Related to Adherence

Adherence refers to the extent to which patients follow their prescribed treatment plans, including medications and lifestyle changes, crucial for managing health conditions effectively. Incorporating sports and physical activity into these plans significantly enhances adherence by fostering a routine, promoting a healthy lifestyle, and improving overall well-being. Engaging in sports boosts motivation through enjoyment and social support and reinforces the commitment to health goals, making it an essential element in achieving better health outcomes and long-term adherence to medical advice.

4.7.1 Discourse of Sports

Sports discourse concerning non-communicable diseases (NCDs) encompasses the narratives and discussions that advocate for physical activity as both a preventative and therapeutic strategy against chronic conditions such as obesity, diabetes, and various cancers. This discourse underscores the significance of regular exercise and healthy lifestyle choices as fundamental elements of sports medicine. Physical activity is not merely seen as a means of enhancing physical fitness; it is positioned as a vital strategy for improving overall health and well-being, effectively framing exercise as a cornerstone of preventive healthcare. Below are text extracts from different articles on NCDs.

> *"Through physical exercises, the women of the Cameroon Press and Publishing Company concluded last Friday the activities of Pink October. They were all in sports attire and especially in motion last Friday at the esplanade of the headquarters of the Cameroon Press and Publishing Company (SOPECAM)….. An hour of warm-ups, cardio, stretching, and relay racing under the guidance of the sports coach, Philippe Mem. "This kind of exercise contributes to well-being and the flourishing of the body…." (October 30, 2023)*

> *"They were also educated on the importance of their diet and sports exercise to keep fit. For two days (March 9 and 10, 2023), the population of Buea received free screening for kidney-related diseases like high blood pressure, diabetes, and hypertension." (March 16, 2020)*

"Lack of physical activity, sedentary behaviour, and obesity are among the factors that can lead to cancer…Lack of physical activity, poor diet, sedentary behaviour, and obesity account for 20 to 40% of all cancers, according to specialists. (February 4, 2021)

The overarching goal articulated within this discourse is to encourage populations to adopt a healthy diet and engage in regular exercise. This proactive approach emphasises the vital necessity of fostering healthier habits within communities, positioning sports as an essential tool for combating the rising tide of NCDs. For instance, a notable event organised by the Cameroon Press and Publishing Company showcased women participating in physical activities as part of the Pink October campaign against breast cancer. This event not only highlighted the importance of community engagement but also served as a powerful reminder of the role those collective physical activities play in promoting health awareness.

Under the guidance of sports coach Philippe Mem, participants engaged in a series of exercises, including warm-ups, cardio, and relay races. Coach Mem emphasised that "**this kind of exercise contributes to well-being and the flourishing of the body,"** effectively portraying physical activity as a form of medicine. His assertion that regular engagement in sports leads to increased comfort, happiness, and reduced stress illustrates the multifaceted benefits of exercise, particularly for individuals managing chronic health conditions**.**

Furthermore, the discourse extends to health education, as evidenced by initiatives in Buea, where local populations received free screenings for kidney-related diseases such as hypertension and diabetes. During this health campaign, individuals were informed about how their lifestyle choices impact their health, reinforcing the critical connection between diet, exercise, and overall well-being. This educational component empowers individuals to make informed decisions about their health, illustrating the role of sports in fostering health literacy.

The narrative also addresses the detrimental effects of sedentary lifestyles, stating that "**lack of physical activity, sedentary behaviour, and obesity are among the factors that can lead to cancer."** This highlights inactivity as a significant risk factor, underscoring the urgent need to incorporate physical activity into daily routines. Specialists assert that these lifestyle habits contribute significantly to the prevalence of chronic diseases, necessitating a paradigm shift towards integrating regular exercise as a natural part of life.

Ultimately, the discourse surrounding sports in the context of NCDs effectively conveys the multifaceted benefits of physical activity, positioning it as a crucial element in prevention and healing. By promoting community engagement, health education, and the integration of exercise into everyday life, it advocates for a comprehensive public health strategy that addresses the physical dimensions of health and acknowledges the psychological benefits of regular physical activity. This holistic understanding of well-being is indispensable in the ongoing fight against chronic diseases, reinforcing sports as a vital component of effective health management.

4.8 Nomination and Referential Strategies

As defined by Wodak (2011), nomination and referential strategies are techniques used in discourse to construct and represent social actors, events, and phenomena, thereby shaping public perception and social identity. Nomination strategies involve the labelling and categorising of individuals or groups, influencing how they are perceived by creating in-groups and out-groups. Referential strategies encompass metaphors and synecdoche, which determine how entities are represented and can evoke specific emotional responses. In this context, Wodak discusses *pars pro toto* (part for the whole) and *totum pro parte* (whole for the part) as key referential strategies that illustrate how language simplifies complex subjects or emphasises collective identities. From a Critical Discourse Analysis (CDA) perspective, these strategies reveal the underlying ideologies that inform discourse, demonstrating how language constructs social realities, perpetuates power dynamics, and challenges or reproduces societal norms and inequalities. Understanding these strategies is essential for analysing how discourse reflects and shapes social hierarchies and cultural narratives. In this section, an identification of nomination and referential strategies used in an article on kidney failure will be done.

1. Which social actors are represented?

2. How are these social actors represented?

3. What social actions are referred to in the article?

This analysis focuses on language use and power relations. CDA looks at the relationship between discourse, power, dominance and inequality and how discourse (re)produces and maintains these relations of dominance and inequality, (Teun van Dijk, 1993: 249). Here,

nomination strategies are going to be identified and analysed. These strategies of course are seen from the discourses regarding an article on an NCD (kidney failure) gotten from my data.

Concerning nomination strategies, the point of focus is at the level of the discursive construction of social actors, objects, phenomena, events, processes and actions. (Ruth Wodak and Michael Meyer, 2009: 94). These strategies include aspects like membership categorisation devices and tropes such as metaphors, verbs and nouns used to denote processes and actions. Another very important aspect is the ideological perspective of the article.

4.8.1 Representation of Social Actors

In this section, I will identify the social actors involved in the discourse surrounding a non-communicable disease (NCD). As a category in discourse analysis, social actors represent textual instantiations of models of the self and others, both individual and collective (van Leeuwen, 2004). In exploring the representation of these actors, I will focus on agency and address the following questions:

1. Who is passivised and who is activised?
2. How does agency relate to power?
3. Who is silenced? Who is silent? Who silences?
4. Who is named, and how is he/she named?
5. Who is backgrounded and who is suppressed?
6. How are social actions represented in relation to social actors?

4.8.2 Activation and Passivation

According to van Leeuwen (2004), representations can assign active or passive social actors roles. Activation occurs when social actors are portrayed as the active, dynamic forces in an activity. At the same time, passivation takes place when they are depicted as undergoing the activity or being at its receiving end. This distinction can be realized through grammatical participant roles and transitivity structures, where activated social actors are coded as actors in material processes, behavers in behavioural processes, senses in mental processes, sayers in verbal processes, or assigners in relational processes (Halliday, 1985).

In articles on NCDs, healthcare providers such as Doctors, government and organisations are often activated during the reporting process, taking on roles that emphasise their agency and expertise. Conversely, patients are passivated, depicted as recipients of care and guidance rather than as active participants in their health management. This dynamic shall be illustrated through an example from *Cameroon Tribune* news reports on NCDs, highlighting how the language used shapes perceptions of agency and responsibility among different social actors involved in addressing NCDs.

> *Pediatric nephrologists in Africa have been immersing themselves in new treatment methods since yesterday, thanks to a congress in Yaoundé. According to the pediatric nephrologists at the Mother and Child Center of the Chantal Biya Foundation, malformations are responsible for the suffering of nearly 50% of children with end-stage renal failure….. "Once this diagnosis is refined, the management is swift for a better renal future for this child," adds the specialist. To put words into action, the 7th Congress of the African Pediatric Nephrology Association opened yesterday in Yaoundé, bringing together nephrologists of all specialities to learn from experts from the United States, Europe, and Africa, among others. The theme was: "Let's work together to preserve kidney health in Africa." Emphasis was also placed on treating renal failure in children and infants…. This device ensures extra-renal purification. Dr Mignon Mc Culloch, a South African expert, also reassured participants about the benefits of this method. It is a gentle, continuous dialysis that preserves residual renal function and can be performed at home. Since kidney disease is silent, experts advise both children and adults to avoid eating too much sugar or salt, limit screen time, to exercise, to avoid street medications and self-medication. It is essential to drink plenty of water: at least one litre per day for children and 1.5 litres for adults, consumed in small amounts throughout the day. Professor Stephano Picca: "Ensure that your child urinates each day…*"

The language in the discourse surrounding kidney failure activises the medical personnel. For instance, ‘‘*pediatric nephrologists in Africa* ***have been*** *immersing themselves in new treatment methods since yesterday, thanks to a congress in Yaoundé*,’’ the verb **have been** emphasises the proactive engagement of nephrologists, showcasing their commitment to professional development and innovation in treatment. Similarly, ‘‘*Once the diagnosis is*

*established, the medical team **mobilises** and **cares** for the child during gestation and after birth."* the verbs **mobilises** and **care** highlight the active role the medical team plays, reinforcing the importance of their initiative and dedication in managing patient health. *''According to the pediatric nephrologists at the Mother and Child Center of the Chantal Biya Foundation, malformations are responsible for the suffering of nearly 50% of children with end-stage renal failure. "That's why ultrasound is important, not only to determine the sex of the child but much more to see if the child in the womb has malformations in the brain, heart, lungs, kidneys, etc.," **explains** Dr. Georgette Guemkam, a pediatric nephrologist at this healthcare facility.''* The verb **explains** positions her as an authoritative figure who actively disseminates crucial information that can prevent further health complications in children.

Conversely, the narrative also contains instances of passivisation that can diminish perceived agency among certain actors. Children with end-stage renal failure are described as suffering due to malformations, suggesting they are victims of circumstances and lack agency in their condition. The phrase ''*…the child in the womb **has malformations** in the brain, heart, lungs, kidneys, etc.,"* **has malformations** emphasises helplessness without highlighting any proactive measures being taken. ''*Participants at the congress **were educated** on the placement of peritoneal catheters…'',* indicating they are recipients of knowledge rather than active contributors, which can reduce their perceived agency in advancing their understanding. Additionally, kidney disease is referred to as 'silent''. ***''Since kidney disease is silent**, experts advise both children and adults to avoid eating too much sugar or salt, to limit screen time, to exercise, to avoid street medications and self-medication…''* portraying it as an active agent of harm while the affected individuals remain passive, underscoring the urgent need for awareness and preventative measures.

This analysis underscores the intricate dynamics of agency and responsibility in the discourse surrounding kidney health. By employing language that either activates or passivises certain social actors, the narrative shapes public perception and engagement with kidney disease issues. Activised actors, like healthcare professionals and organizations, exemplify proactive measures and leadership in addressing public health concerns, thereby fostering a sense of hope and progress. In contrast, passivized actors, such as children affected by renal failure, risk being

viewed solely as victims without agency, which can diminish the urgency for comprehensive healthcare solutions.

4.8.3 Agency and Power

Ideology, discourse, and power are deeply interconnected, with discourse serving as the primary vehicle for expressing ideology. As Fairclough (2001, p.38-39) noted, power can often dictate and constrain the contributions of less powerful participants. To illustrate this, we can examine several key elements within NCD discourse:

Contents: This refers to what is articulated in articles, including the accessibility of information and the representation of NCDs. The way journalists frame diseases, treatment options, and public health initiatives.

Relations: The social relationships depicted in NCD discourse. (eg stakeholders, such as healthcare professionals, patients, and policymakers, interact.)

Subjects: The "subject positions" of others

Language Form: The choice of language, including the dialect and register (eg level of formality)

In this regard, I shall look at how agency relates to power to bring the above aspects. This will be observed using the article on kidney failure.

For this article, the content deals with education on the engagement of paediatric nephrologists in Africa with new treatment methods, the importance of ultrasound for diagnosing malformations, and the management of renal failure in children. It also highlights the collaborative efforts at a congress aimed at improving kidney health in Africa. The person in position of power is the pediatric nephrologist since he determines what is relevant and irrelevant. This is seen as he tells the patient what to do ‘‘…*Dr. Mignon Mc Culloch, a South African expert, also reassured participants about the benefits of this method. It is a gentle, continuous dialysis that preserves residual renal function and can be performed at home.* ***Since kidney disease is silent, experts advise both children and adults to avoid eating too much sugar or salt, to limit screen time, to exercise, to avoid street medications and self-medication…***’’ The use of "experts" reinforces a hierarchical structure where knowledge is centralized among professionals.

The resulting power imbalance can silence patients and families who may feel disempowered to question or challenge medical advice, contributing to a culture where professional voices dominate.

At the level of the relationships, they are depicted as primarily hierarchical, with paediatric nephrologists positioned as knowledgeable experts and advocates. The medical team is portrayed as actively caring for children, while the children themselves are depicted as vulnerable and dependent on medical interventions. This dynamic emphasises the power of medical professionals in shaping health outcomes. By presenting information through their lens, the article prioritizes their expertise and knowledge while side-lining the voices of those most affected, such as the children and their families as a result, the institutional authority and medical personnel silences.

In the discourse surrounding this article, various subject positions emerge that shape the landscape of care and knowledge within the field. **Paediatric nephrologists** are positioned as knowledgeable and proactive agents in the healthcare system, actively seeking out new methods and knowledge to enhance treatment. Meanwhile, the **medical team** is viewed as dedicated caregivers who mobilise resources and attention to provide essential care for children. In contrast, **children with renal failure** are often positioned as passive recipients of care, enduring conditions they cannot control. Additionally, **experts and congress participants** are seen as learners and contributors to the collective knowledge aimed at improving paediatric nephrology. This framework highlights the complex interplay of roles and perceptions that define the experiences and responsibilities within the realm of children's kidney health.

The use of active verbs (e.g**., "mobilises," "explains," "have been immersing")** conveys agency and responsibility among healthcare professionals, while passive constructions (e.g., **"were educated," "are responsible")** suggest a lack of agency for patients and some participants. The language surrounding the congress emphasises collaboration and collective action, with phrases **like "Let's work together to preserve kidney health,"** indicating a unifying call to action among professionals. Additionally, the imperative language in advice given to the public (e**.g., "ensure that your child urinates each day")** conveys authority and reinforces the role of experts in guiding health practices. Phrase: **"experts from the United States, Europe, Africa, among others"** The article mentions these experts but does not provide

their voices or insights directly. Their presence is acknowledged, yet their contributions remain unarticulated in the text, leaving their perspectives silent in the discourse.

This analysis reveals how language shapes perceptions of agency and power in the healthcare discourse, highlighting the active roles of professionals while simultaneously illustrating the vulnerabilities of patients. Through careful examination of these linguistic features, we gain insights into the broader implications for public health narratives and the responsibilities of various actors involved in paediatric nephrology.

4.8.4 Membership Categorisation Devices

Membership categorization devices (MCDs) are linguistic features that define and classify individuals within a discourse, establishing their roles and identities. In the provided article, several MCDs can be identified, revealing how different groups are constructed and what implications this has for agency and power dynamics. For instance, the term **"Paediatric nephrologists"** explicitly identifies a specialized group of medical professionals, indicating their expertise in treating children with kidney issues. By situating these nephrologists within **"Africa,"** the geographical designation emphasises their collective identity based on location and highlights the regional context of their work.

The article personalizes the discourse further through specific names such as **"Dr. Georgette Guemkam"** and **"Dr. Mignon Mc Culloch."** Using titles alongside their names legitimizes their authority and marks them as respected members of the medical profession. The phrase "Mother and Child Center of the Chantal Biya Foundation" also identifies a specific healthcare institution, framing it as an integral part of the paediatric care community. The **"Congress of the African Paediatric Nephrology Association"** denotes a formal assembly of professionals, reinforcing the collective identity of nephrologists engaged in paediatric care and showcasing a united front in addressing kidney health issues.

Furthermore, **"experts"** categorises individuals with specialized knowledge, suggesting their authority within the medical community. The reference to **"children"** categorises patients as a vulnerable group, highlighting their specific needs and status. Although not explicitly stated, the discourse implies the inclusion of **"families"** as part of the caregiving network, suggesting a broader context of support and responsibility.

The article also categorises patients and affected individuals through phrases like **"children with end-stage renal failure,"** which frames these patients as a group defined by their medical condition, evoking a sense of vulnerability and the necessity for care. Additionally, the mention of **"children in the womb"** emphasises the need for prenatal care, constructing a narrative around early intervention and situating these children as deserving of attention and care.

Regarding health initiatives, the phrase **"bringing together nephrologists of all specialties"** suggests inclusivity within the professional community, indicating collaboration across various branches of nephrology. This collective effort is further emphasised by the **"7th Congress of the African Paediatric Nephrology Association,"** which conveys authority and legitimacy in paediatric nephrology discourse.

The article also employs MCDs in categorising health recommendations. The phrase **"experts advise both children and adults"** indicates that knowledge extends beyond medical professionals to the public. However, it implies a top-down approach to health guidance, potentially silencing individual experiences and input from patients or families. Moreover, Professor Stephano Picca's directive to **"ensure that your child urinates each day"** categorises caregivers as responsible for monitoring health outcomes, positioning parents in a caregiving role while implying authority from medical professionals in guiding parental responsibilities.

Through these membership categorisation devices, the article constructs a narrative that emphasises the authority of medical professionals while positioning patients, especially children, as passive recipients of care. Using specific titles and roles reinforces the power dynamics at play, with experts guiding the discourse and defining the experiences of those affected by non-communicable diseases. This analysis reveals how language reflects and shapes identities and relationships within paediatric nephrology.

4.8.5 The Use of Tropes

Tropes are commonly defined as recurring themes, motifs, or clichés in literature, art, and discourse that convey particular meanings or ideas. According to the Oxford Advanced Learner's Dictionary 8th edition, a trope is "a word or expression used in a figurative sense" or "a common or overused theme or device". This definition highlights the role of tropes in shaping narratives and influencing audience perceptions through familiar patterns and expressions.

In the context of the article on kidney failure, tropes manifest in various ways, such as:

•**Metaphor:** The phrase ***"kidney disease is silent"*** metaphorically characterises kidney disease as progressing without obvious symptoms, highlighting the need for vigilance and proactive care. This trope emphasises the hidden dangers of the disease and underscores the importance of early detection.

•**Victimhood Trope:** The framing of ***"children with end-stage renal failure"*** evokes a sense of vulnerability and suffering. This trope positions these children as victims of their circumstances, eliciting empathy and concern from readers and emphasising the urgency for medical intervention.

•**Heroic Narrative:** The article portrays paediatric nephrologists and healthcare professionals as heroes dedicated to improving children's health. Phrases like *"the medical team mobilises and cares for the child"* create a narrative of compassion and commitment, elevating the professionals' roles in the fight against kidney disease.

•**Collective Action Trope:** The phrase *"Let's work together to preserve kidney health in Africa"* embodies a call to collective action. This trope fosters a sense of community and shared responsibility among healthcare providers, policymakers, and the public, encouraging a united front in addressing health issues.

•**Expertise and Authority: T**he frequent references to "experts" and the formal gatherings such as the "7th Congress of the African Paediatric Nephrology Association" create a trope of authority and legitimacy. This framing reinforces the idea that knowledge and solutions come from established professionals, which can overshadow the voices and experiences of patients and families.

4.8.6 The Use of Idiomatic Expressions

Understanding idiomatic expressions is essential for grasping the nuances of language. According to the Oxford Advanced Learner's Dictionary 8th edition, an idiomatic expression is defined as "a phrase or expression whose meaning cannot be understood from the ordinary meanings of the words in it." This definition highlights the figurative nature of idioms, which often convey meanings that extend beyond their literal interpretations. For example, phrases like

"kick the bucket" or "spill the beans" illustrate how idiomatic expressions can concisely encapsulate complex ideas or emotions. By recognising and interpreting these expressions, individuals can enhance their communication skills and deepen their appreciation for the richness of language.

In examining the discourse surrounding an article on kidney failure, it becomes evident that idiomatic expressions significantly shape perceptions and underlying assumptions. For instance, **"silent disease"** suggests that kidney disease progresses without noticeable symptoms, conveying a sense of urgency for vigilance and proactive care. This phrase implies that families and caregivers must remain attentive to subtle changes in health, reinforcing a narrative of helplessness as the disease appears insidious and difficult to detect. Similarly, the expression "**a united front**" emphasises collaboration among medical professionals and stakeholders, suggesting solidarity. However, it may also marginalise the voices of patients and families, indicating they have limited roles in the discourse. Furthermore, **"bringing together"** denotes inclusivity among nephrologists but may oversimplify the complexities of achieving consensus. The directive to **"ensure that your child urinates each day"** positions parents as responsible monitors of their children's health, reflecting a top-down approach that can diminish family agency. Lastly, the term **"game changer,"** when referring to new treatments, can highlight innovation but may also undermine previous efforts. Collectively, these idiomatic expressions serve as vehicles for conveying ideologies and power relations, framing the narrative in ways that emphasise the authority of medical professionals while positioning patients and families in more passive roles. Analysing these expressions allows us to uncover the assumptions influencing the broader conversation about children's kidney health.

4.8.7 Discursive Construction of Objects/Phenomena/Events

In the context of the discursive construction of objects, phenomena, and events (Wodak & Reisigl, 2009), emphasis will be placed on tangible elements such as country, food, hospitals, and anti-retroviral medications. In addition, abstract dimensions will be explored, including lifestyle, culture, mental constructs or feelings, fear or panic, economic issues (such as poverty and prosperity), and political considerations.

4.8.7.1 Concrete Aspects

The first concrete aspect to explore is the concept of "country," specifically focusing on Cameroon. In the context of the news article, Cameroon is portrayed positively. How is Cameroon depicted in these discussions? Like many countries in Africa, Cameroon faces a high prevalence of NCDs. Since the disease emerged, Cameroon has actively fought against its spread, continuously adapting strategies to reduce contraction rates. Another important point is the country's rich cultural diversity, which significantly shapes the lifestyles of its people. NCD contraction is often linked to lifestyle choices. Cameroon is committed to combating NCDs and has implemented several initiatives. For instance, the government provides free screening campaigns, subsidies, sport sessions and large-scale campaigns are conducted to raise awareness and educate the public about NCDs, demonstrating the country's dedication to addressing this critical health challenge.

Food plays a crucial role in awareness sessions related to non-communicable diseases (NCDs), particularly how individuals manage their health after diagnosis. When someone is diagnosed with an NCD, their eating habits often need to change significantly. During the awareness sessions, which include adherence and awareness education, a strong emphasis is placed on dietary choices. It is not just about how individuals with NCDs should eat; it's also about what foods they should include in their diets and what they should avoid. This focus on nutrition is essential for managing their condition effectively and improving overall health. The examples below are extracts taken from different articles on NCDs from our data

> *''As children are growing taller and heavier, their energy intake from* ***food is decreasing over time.*** *Populations prefer foods that are very high in protein. There is an* ***overconsumption of sodas and calorie-rich recipes*****."** **(***Obesity 3rd March 2023)*

> *''****Lack of physical activity, sedentary behaviour, and obesity are factors that can lead to cancer. The announcement of a cancer diagnosis often prompts patients to reassess their previous lifestyle choices.*** *According to TOMS,* ***poor nutrition is one of the main factors linked to a range of chronic diseases, including cancer and other obesity-related conditions. Lack of physical activity, poor diet, sedentary behaviour, and obesity are responsible for 20 to 40% of all cancers, according to specialists.... Good "nutrition and health" habits also include getting used to a balanced diet.''****(Obesity 4th February 2021)*

''According to a dietitian, excessive consumption of ***high-fat foods such as okok, eru, koki, kondre, and yellow sauce is also a factor****. ... "Today, in the world, people die more from overeating than from not eating enough. In 20 years, we've shifted from a world where people suffered from malnutrition to one where people suffer from diseases related to overly fatty and rich diets," emphasises an expert on this health paradox.''* **(**Obesity 6th March 2020)

For instance, a recent newspaper article highlighted the importance of a balanced diet for individuals with diabetes, illustrating how specific foods can help control blood sugar levels or exacerbate the condition. Such insights from media discussions emphasise the critical nature of dietary education in the ongoing management of NCDs. By reshaping their eating habits, individuals can take significant steps toward better health outcomes, showcasing the power of informed choices in combating the impact of non-communicable diseases.

The discourse surrounding non-communicable diseases (NCDs) often emphasises the profound impact of dietary choices on health outcomes. In examining this relationship, several key points emerge that highlight food as a central theme in the prevention and management of NCDs. The different text illustrates that **poor dietary habits** are closely linked to the rise of NCDs. Phrases such as "excessive consumption of high-fat foods" and "hyper-sweet and salty diet" underscore the negative implications of certain eating patterns. The mention of specific foods like **okok, eru, koki, kondre**, **and yellow sauce(achu)** concretises the problem, showing how traditional diets can contribute to health issues. This emphasis on specific foods highlights how cultural and regional dietary practices affect health. By naming these foods, the discourse creates a clear connection between local eating habits and the risk of developing NCDs.

The text notes that as children grow taller and heavier, their **energy intake from food is decreasing**, suggesting a shift in dietary trends. This observation points to a critical contradiction: while children may consume more calorie-dense foods, their overall energy intake is inadequate, leading to potential health risks. The phrase "populations prefer foods that are very high in protein" reflects a societal trend that prioritises certain types of foods, potentially at the expense of a balanced diet.

The discourse also provides clear **eating advice** aimed at mitigating the risks of NCDs. Recommendations such as practicing **regular physical activity** and consuming **fresh foods** are

highlighted as essential for maintaining health. The mention of **"white meat"** as a preferred option encourages healthier protein choices, reinforcing the importance of balanced nutrition. Moreover, the guidance on **breastfeeding for new mothers** emphasises the foundational role of nutrition in early childhood development, further illustrating the long-term impact of dietary choices on health.

The text discusses preventive measures, including avoiding **stressful situations** and being conscious of beauty products containing harmful substances. However, the most substantial emphasis remains on dietary habits. The recommendation of **early screening** and regular health check-ups complements the dietary advice, creating a comprehensive approach to health management.

The use of phrases like "**lack of physical activity**," "**sedentary behaviour**," and **"food insecurity**" serves to construct a narrative that frames health as a multifaceted issue. These terms are significant as they draw attention to the broader societal factors influencing dietary choices and health outcomes. Additionally, the expert opinions and statistical information provided lend credibility to the discourse. For instance, stating that **"obesity kills three times more than malnutrition**" starkly contrasts two health issues, effectively illustrating the urgency of addressing dietary habits.

In summary, the discourse surrounding food as a dominant aspect of contracting NCDs constructs a compelling narrative about the critical role of dietary choices in health. By emphasising specific foods, recommending healthier alternatives, and linking dietary habits to broader health outcomes, the text effectively communicates the importance of nutrition in preventing non-communicable diseases. This discursive construction informs readers and encourages a proactive approach to health through better eating habits.

4.8.7.2 Abstract Aspects

After examining concrete aspects and phenomena, we focus on abstract events and phenomena. These include lifestyle choices, cultural influences, fear and panic, economic factors like poverty, political issues, and ideological beliefs. We can see how these elements are constructed in discourse in articles on NCDs in *Cameroon Tribune*. Our lifestyles significantly influence the risk of contracting non-communicable diseases (NCDs) and managing them. To a

large extent, our behaviours determine whether we develop NCDs, cope with them, or even share the risk factors associated with these diseases. Throughout the different articles used for his research, discussions frequently centre around lifestyle choices. For instance, in awareness sessions and screening sessions, conversations about NCDs reveal that our daily habits are closely linked to health risks. Engaging in unhealthy eating, excessive alcohol consumption, and lack of physical activity are all lifestyle choices that can increase susceptibility to NCDs. Moreover, other lifestyle behaviours, such as smoking and neglecting regular health check-ups, contribute to the risk of developing these diseases. Understanding the connection between our lifestyles and health outcomes is vital in addressing the challenges posed by NCDs. By fostering awareness and encouraging healthier choices, we can reduce the prevalence of these diseases and improve overall well-being.

> *''Seeing an* ***addictive tendency towards alcohol and tobacco before the illness****, the young man confides that he has put an end to it. Unfortunately, the case of Karim M. is not exceptional…''* (22nd March 2018. Mouth Cancer)

> *''****Lack of physical activity, sedentary behaviour, and obesity are factors that can lead to cancer. The announcement of a cancer diagnosis often prompts patients to reassess their previous lifestyle choice****s. According to TOMS, poor nutrition is one of the main factors linked to a range of chronic diseases, including cancer and other obesity-related conditions.* ***Lack of physical activity, poor diet, sedentary behaviour, and obesity are responsible for 20 to 40% of all cancers, according to specialists. Indeed, the use of cars or public transport, mechanization of work, and urbanization, among other factors, make physical activity less natural in daily life****.* ***These lifestyle habits necessitate the integration of daily physical activity, such as walking or doing exercises at home****.* ***Being physically active can significantly reduce the risk of bladder, breast, colon, endometrial, kidney, and oesophageal cancers****. Good "nutrition and health" habits also include getting used to a balanced diet.''* (4th February 2021. Obesity)

The discourse surrounding lifestyle choices and their impact on non-communicable diseases (NCDs) underscores the critical role of behaviours such **as "consumption of alcohol and tobacco**" in increasing health risks. The text notes that **many cases are recorded each year**," pointing to the prevalence of lifestyle-related illnesses, with estimates ranging from **"one**

to ten cases per 100,000 inhabitants" in most countries. This statistic highlights the urgency of addressing these behaviours.

The text further emphasises that **"lack of physical activity, sedentary behaviour, and obesity"** are significant factors that can lead to cancer, indicating that lifestyle choices directly correlate with disease risk. The phrase **"the announcement of a cancer diagnosis often prompts patients to reassess their previous lifestyle choices**" illustrates how a health crisis can catalyse reflection on behaviours, emphasising the need for change.

Moreover, details how "**the use of cars or public transport,"** along with **"mechanization of work"** and **"urbanization,"** make physical activity less natural in daily life, effectively framing these societal shifts as barriers to healthier lifestyles. The recommendation for individuals to **"integrate daily physical activity**" is a clear call to action, indicating that lifestyle modifications are essential for disease prevention.

Expert opinions also reinforce the notion that **"poor nutrition and sedentary behaviour"** contribute to a significant percentage **"20 to 40% of all cancers"** underscoring the complex interplay between lifestyle choices and health outcomes. By advising individuals on how their **"lifestyles can affect their health,"** the discourse aims to empower people to make informed decisions that could mitigate their risk of NCDs. This narrative not only highlights the detrimental effects of specific lifestyle choices but also advocates for a proactive approach to health through improved behaviours and choices.

4.8.7.3 Ideology

As Brian Paltridge (1990: 29) notes, ideologies manifest in spoken and written genres, which are not merely linguistic categories but are integral processes through which dominant ideologies are reproduced, transmitted, and potentially transformed. There are various ways to explore referential strategies within a text. The analysis may begin with textual features and progress to explanations and interpretations. This process can involve tracing underlying ideologies from the linguistic characteristics of a text, unpacking specific biases and ideological presuppositions, and relating the text to the speaker's own experiences and beliefs (Clerk, 1995).

To conduct this type of analysis, one should consider the following aspects:

1. Framing: This refers to how the content of the text is presented, including the angle or perspective taken by the writers or speakers.

2. Foregrounding: This involves identifying which concepts and issues are emphasised, as well as those that are downplayed or backgrounded in the text or discourse.

3. **Presuppositions**: This pertains to the attitudes, points of view, and values that the text assumes.

4. **Agency**: This relates to the social actors involved, who are portrayed as active or passive?

According to Gee (2004) and Blommaert (2005), the framing of a text encompasses how its content is presented and the perspective adopted by the writer or speaker. In this context, NCD is the focal point, with the perspective emphasising the need for individuals to be well-informed to avoid contracting it or, if already affected, to manage their condition effectively. As Critical Discourse Analysis (CDA) stipulates, this work illustrates the "relations between discourse, power, dominance, and inequality, and how discourse (re)produces and maintains these relations of dominance and inequality" (Teun van Dijk, 1993: 249).

Those in position of power in articles on NCDs are the health personnel and the different organisations who sponsor awareness sessions. Those dominated are the patients and general public. This is seen from the kind of words that are used during the awareness processes. In an article on kidney failure, the neurologist shows her position of dominance as can be observed below:

> ‘‘*…Dr. Mignon Mc Culloch, a* ***South African expert****, also* ***reassured participants*** *about the benefits of this method. It is a gentle, continuous dialysis that preserves residual renal function and can be performed at home. Since kidney disease is silent, experts* ***advise*** *both children and adults to avoid eating too much sugar or salt, to limit screen time, to exercise, to avoid street medications and self-medication…’’* (16th March 2017. Kidney Failure)

In this extract, Dr. Mignon Mc Culloch embodies a position of power through various linguistic features that highlight her authority, reassurance, and the promotion of proactive health practices.

First, her designation as **"a South African expert"** establishes credibility and expertise, positioning her as a knowledgeable figure whose insights command respect. The specificity of her title reinforces her authority in the discourse surrounding kidney health. The phrase "*also **reassured** participants about the benefits of this method*" utilises the verb **"reassured,"** which conveys a sense of care and confidence, suggesting that her knowledge not only informs but comforts the audience, thereby exercising power in a nurturing manner.

Moreover, the directive *"experts advise both children and adults"* signals an authoritative stance, implying that this guidance comes from a position of knowledge and experience. The use of the verb **"advise"** implies that the audience should heed this expert guidance, reinforcing her power over the discourse of health management.

The list of preventive measures *"to avoid eating too much sugar or salt, to limit screen time, to exercise, to avoid street medications and self-medication"* is structured using infinitive verbs, creating a clear, actionable set of recommendations that promote agency among the audience. This encourages individuals to take responsibility for their health, illustrating a positive exercise of power through informed decision-making.

Finally, the statement *"kidney disease is silent*" serves as a cautionary reminder of the hidden dangers associated with the condition, emphasising the need for awareness and vigilance. By highlighting this aspect, Dr. McCulloch asserts the importance of knowledge, further reinforcing her authoritative position in guiding the audience toward better health practices. Overall, the linguistic features in this extract collectively demonstrate how Dr Mc Culloch's discourse reflects a positive exercise of power, fostering a sense of agency and promoting well-being while establishing her authority as an expert in the field.

> *"Seeing an addictive tendency towards alcohol and tobacco before the illness, the young man confides that he has put an end to it. Unfortunately, the case of Karim M. is not exceptional. Many cases are recorded each year, with estimates of one to ten cases per 100,000 inhabitants in most countries, according to the WHO." (*Mouth cancer 22nd March 2018)

As children are growing taller and heavier, their energy intake from food is decreasing over time. Populations prefer foods that are very high in protein. There is an overconsumption of sodas and calorie-rich recipes. (Obesity 3rd March 2023)

Lack of physical activity, sedentary behaviour, and obesity are factors that can lead to cancer. The announcement of a cancer diagnosis often prompts patients to reassess their previous lifestyle choices. According to TOMS, poor nutrition is one of the main factors linked to a range of chronic diseases, including cancer and other obesity-related conditions. Lack of physical activity, poor diet, sedentary behaviour, and obesity are responsible for 20 to 40% of all cancers, according to specialists. Indeed, the use of cars or public transport, mechanisation of work, and urbanisation, among other factors, make physical activity less natural in daily life. These lifestyle habits necessitate the integration of daily physical activity, such as walking or doing exercises at home. Being physically active can significantly reduce the risk of bladder, breast, colon, endometrial, kidney, and oesophagal cancers. Good "nutrition and health" habits also include getting used to a balanced diet.'' **(**Obesity 4th February 2021)''

Huckin (1997) looks at foregrounding as the concepts and issues emphasised and those that are played down or backgrounded. Foregrounding is a powerful linguistic tool that effectively directs attention to essential information. Within this passage, phrases such as ***"addictive tendency towards alcohol and tobacco"*** and *"**the leading cause of cancer-related deaths"*** emerge as critical focal points. These expressions underscore urgent issues that demand immediate attention, illustrating the severe implications of addiction and the significant toll of cancer on women's health. Furthermore, ***"many cases are recorded each year"*** introduces a quantitative dimension, enhancing the urgency of addressing these pressing public health challenges. The text compels readers to engage with the substantial health risks associated with lifestyle choices by strategically positioning these phrases at the forefront.

Presuppositions subtly shape our understanding and interpretation of a text. In this context, the assertion ***"poor nutrition is one of the main factors linked to a range of chronic diseases"*** implies that readers recognise the critical connection between diet and health outcomes. Additionally, the observation **that *"children are growing taller and heavier"*** presupposes a direct correlation to lifestyle and dietary practices, hinting at deeper issues related to child nutrition. These embedded assumptions guide readers' comprehension of the larger context

surrounding health and lifestyle, framing the discussion around widely accepted beliefs about nutrition and its significant impact on overall well-being.

Agency is a crucial concept that highlights who is portrayed as active or passive in the narrative. This theme is vividly illustrated in phrases like ***"the young man confides that he has put an end to it"*** and ***"parents drive them to school."*** In the first instance, the young man exerts agency by choosing to end his addictive behaviour, demonstrating personal responsibility in managing his health. In contrast, the phrase about parents driving their children emphasises a more passive role for the children, who are influenced by parental decisions that significantly shape their physical activity levels. This distinction underscores how certain individuals take initiative while others may be more passive in the context of health decisions, reinforcing the importance of recognizing agency in discussions about lifestyle choices and their health impacts.

Framing is a vital technique that influences how information is perceived and understood. The text effectively frames lifestyle choices as critical determinants of health by stating, ***"lack of physical activity, sedentary behaviour, and obesity are factors that can lead to cancer.''*** This framing positions these behaviours not merely as personal choices but as significant contributors to serious health issues, guiding readers to grasp the complex relationship between lifestyle and disease. Moreover, the reference to ***"overfeeding children at home and at school"*** frames parental behaviour as a crucial influence on children's health, suggesting that societal norms and practices warrant scrutiny. This intentional framing draws attention to the systemic factors that shape individual health, encouraging a thorough examination of lifestyle choices in the broader context of public health discourse.

4.9 Intensification and Mitigation Strategies

What are the key differences between intensification and mitigation strategies? On one hand, intensification strategies aim to amplify the emphasis of a statement, while mitigation strategies seek to soften or lessen it. Both strategies play a crucial role in shaping the epistemic status of a proposition by either intensifying or mitigating the illocutionary force of discourse utterances (Reisigl & Wodak, 2011). These strategies significantly influence how discourse is presented, either sharpening its meaning or toning it down.

Mitigation is not only a cognitive phenomenon but also a linguistic and social occurrence. It encompasses expressions of politeness and responses to stressors, such as blame (Bilyana Martinovsk, 2009). Conversely, the rhetorical strategy of intensification challenges and disrupts unnoticed and untheorised presuppositions in academic discussions. It redefines commonly accepted language uses and reemphasises the often-overlooked social contexts in which language operates, particularly in its figurative forms (Barbara Tomlinson, 1999).

How can a Foucauldian approach to discourse enhance our understanding of these strategies? By examining the discourses in articles related to non-communicable diseases (NCDs), this analysis reveals how power relations shape the development of these strategies. It explores how the effects of these discourses are either mitigated or intensified through specific discursive and material practices (Cynthia Hardy, 2013). This approach contributes to a deeper understanding of the mechanisms by which discourse influences strategy through intensification and mitigation practices.

> *"Breast cancer is the leading cause of cancer-related deaths among women. The risk factors are numerous. They are primarily genetic, but people who consume alcohol and tobacco are also at greater risk. Certain chemicals, foods, and beauty products (such as nail polish and lipstick) and the onset of menstruation at an early age (around 8 to 10 years) are also risk factors. Without being overly alarmist, the specialist indicated some preventive measures. She recommends engaging in regular physical activity, avoiding stressful situations, using beauty products that do not contain aluminium salts (often found in deodorants) or parabens, and encouraging early screening. The gynaecologist also advises eating well by consuming fresh foods, especially white meat. For new mothers, breastfeeding is strongly encouraged for up to 12 months. Combining practical exercises with her explanations…"* (Breast cancer 24th October 2023)

> *"...14,000 new cancer cases among adults each year. In the absence of statistics regarding children, doctors estimate there are about 300 new cases annually.* **(**February 16th, 2017. Cancer)

In the provided articles on non-communicable diseases (NCDs), several mitigation strategies emerge, highlighting a discourse of hope alongside serious health concerns. Phrases such as **"Without being overly alarmist"** and **"nonetheless indicated ways to prevent it"**

serve to soften potentially distressing information about breast cancer, establishing a balanced tone that alleviates anxiety. Recommendations like **"engaging in regular physical activity**" and **"maintaining a healthy diet"** emphasise proactive health behaviours, empowering individuals to influence their health outcomes. Statements such as **"if addressed quickly, the child can be saved"** introduce a sense of hope that prompt action can lead to positive interventions, while **"could be prevented early"** suggests possibilities for cervical cancer prevention through vaccination. The juxtaposition of **"costly treatment"** with the potential for survival reinforces the urgency of action despite financial barriers. Overall, these strategies collectively foster a narrative that encourages vigilance, community action, and a constructive engagement with health challenges, ultimately promoting a hopeful outlook for individuals and families facing NCDs.

In what ways can we observe intensification in discourse? Intensification is often manifested through rhetorical questions, repetition, descriptive adjectives, and imperatives. Wodak (2001) notes that mitigation can serve as an expression of caution and deliberation, often achieved through the use of modalities. In this context, mitigation is evident in the use of modal verbs, avoidance of direct naming, and the application of weak adjectives or nouns. These linguistic choices shape the discourse surrounding NCDs, influencing how individuals perceive and engage with their health challenges.

The intensification strategies in the articles on breast cancer and female-oriented cancers serve to amplify the urgency and importance of the health messages conveyed. First, **descriptive adjectives such as "high rate," "severe diseases," and "distressing medical experiences"** are employed to underscore the gravity of cancer as a public health issue, making it clear that it affects many and should not be overlooked. Additionally, **imperatives** like **"be vigilant and report any tumours"** directly call on individuals to take action, enhancing the sense of urgency around cancer detection and prevention. This is complemented by quantitative statements, such as **"14,000 new cancer cases" and "300 new cases annually,"** which provide stark numerical contexts that highlight the prevalence of cancer, thereby intensifying the message that this is a widespread and critical issue that requires immediate attention.

On the other hand, mitigation strategies are employed to soften the impact of certain statements, making the discourse more approachable and less alarming. For instance, the use of

modal verbs like '**could be prevented'** introduces a sense of possibility rather than certainty concerning prevention, which can help alleviate some of the fear associated with cancer. Additionally, the '**avoidance of direct naming, using phrases** like **"some people"** instead of naming specific groups, helps reduce blame and stigma, promoting a more inclusive narrative. Finally, **weak adjectives** such as **"may need to be removed" or** "**generally goes unnoticed"** tone down the severity of the statements, making them less overwhelming for the audience. Together, these strategies create a balanced discourse that educates and empowers individuals while reducing the stigma associated with cancer

CHAPTER FIVE: DISCUSSION OF FINDINGS AND CONCLUSION

5.1 Introduction

This work aimed to discover the different discourses used in *Cameroon Tribune* and the linguistic features discussed within its pages. This chapter delves into the diverse linguistic strategies employed by *Cameroon Tribune,* illuminating the language choices that shape discussions about NCDs. Through a meticulous examination of these language choices, we revealed a rich tapestry of narratives that both inform and engage readers. In this chapter, we will synthesise these findings, exploring the implications of *Cameroon Tribune's* discourse on health awareness, individual agency, and community resilience. By understanding the linguistic choices made in this prominent publication, we can better appreciate the role of media in shaping health narratives and fostering a proactive approach to combating the rising tide of NCDs in Cameroon. Ultimately, this discussion aims to contribute to a broader understanding of how language can be harnessed as a powerful tool in the fight against chronic diseases, paving the way for more effective communication strategies in the future.

5.2 Summary of Findings

This study identified various discourses surrounding non-communicable diseases (NCDs) in *Cameroon Tribune,* revealing distinct discursive and linguistic strategies employed in the narratives. The findings highlight the interplay of intensification and mitigation strategies, demonstrating how *Cameroon Tribune* effectively balances urgent health messages with a tone of hope and empowerment. Descriptive adjectives, quantitative data, and imperative calls to action amplify the urgency of health issues, while modal verbs and inclusive language soften potentially distressing information, allowing for a more accessible discourse. Moreover, the analysis of tropes, idiomatic expressions, and the framing of health narratives reveals underlying attitudes towards NCDs, shedding light on the complexities of stigma, personal responsibility, and community engagement. The discourse not only reflects the realities faced by individuals living with NCDs but also catalyses collective action and health literacy. The analysis highlighted multiple narratives, including themes of hope, fear, and resilience, which reflect the complex experiences of individuals affected by NCDs. Various linguistic techniques, such as framing, metaphors, and emotional appeals, were utilised to shape public understanding and attitudes

towards these diseases, influencing how individuals relate to their conditions and one another. The primary NCDs discussed included cancer, diabetes, and kidney failure, each represented through specific narratives that underscored their societal impact, challenges in management, and the importance of awareness and prevention. Overall, the findings underscore the significant role of media discourse in constructing narratives around NCDs, impacting both public understanding and the lived experiences of individuals within the community.

5.2.1 The Linguistic Features Identified

In examining the intricate interplay of language and health discourse, the articles illuminate the pressing public health challenges surrounding cancer, particularly among women in Cameroon. Through a rich tapestry of collocations and modal verbs, such as "must," the authors convey a profound sense of urgency and collective responsibility in addressing health issues. Direct speech from individuals personalises these narratives, fostering empathy and highlighting the emotional weight of managing chronic conditions. Using figurative language, including vivid imagery and personification, enhances understanding while urging proactive health behaviours.

Furthermore, the articles delve into the societal stigma surrounding cancer, emphasising the need for education and dialogue to combat misinformation and traditional beliefs that hinder health-seeking behaviours. By situating local health concerns within a global context, mainly through references to WHO guidelines, the authors advocate for a shift in public attitudes and behaviours, calling for solidarity and increased awareness.

The text employs linguistic features such as collocations, modal verbs, direct speech, figurative language, and pragmatic analysis to convey complex health messages and evoke emotional responses. For instance, phrases like "silent killer" and "fierce fight" emphasise the seriousness of health issues, creating a strong emotional impact that engages readers more deeply than everyday language, which often relies on simpler expressions. The frequent use of modal verbs, particularly "must," conveys a sense of urgency and necessity, urging readers to take action regarding their health. In contrast, daily communication may use modal verbs to indicate possibility or permission, lacking the same call to collective responsibility.

Personal testimonies in direct speech also humanise statistics and abstract concepts, making narratives relatable and impactful. While direct speech in everyday life is often informal and personal, in the article, it serves to illustrate broader societal issues. Using figurative language, such as "silent disease," enhances emotional resonance and highlights the complexities of health conditions, whereas in daily communication, figurative language might be employed for humour or creativity. Furthermore, the article's pragmatic analysis addresses cultural beliefs and societal stigma, framing them as barriers to health, an approach that goes beyond typical conversation, which may not engage with systemic issues or the implications of language on public health.

Overall, the linguistic choices in the article are strategically crafted to inform, persuade, and evoke empathy about serious health issues, contrasting with the more casual and immediate nature of daily communication. The language in the article is more formal and structured, employing specific terminology and rhetorical strategies to enhance credibility, while everyday interactions tend to be more straightforward. This deliberate crafting of language elevates the discourse around public health and encourages a broader societal response, highlighting the urgency and importance of the issues discussed. Ultimately, these narratives inform and inspire a movement towards more significant health equity and proactive management in the face of daunting challenges, inviting readers to reflect on their roles in fostering a compassionate and informed society.

Table 2: Summary of linguistic features identified

Linguistic Aspects	**examples**	**purpose**
Lexical analysis	**Collocations** -fierce fight, silent killer, bad memory and cancerous cells.	To evoke strong emotional responses and create a collective identity in the fight against cancer (cervical, mouth, breast, and eye cancer)
	Modal Verbs The articles mostly use the modal verb “must” to indicate strong obligation**.**	To encourage community and individual responsibility. It equally conveys urgency and highlights the importance of awareness.
	Direct Speech "I take my BP every two days here in the market, and once it is abnormal, I rush to the	Quotes from individuals to illustrate relatable personal experiences.

	hospital."	
Figurative Language	**Simile** “Eye cancer occurs before five years old. As soon as the cancer is present, the child's eye shines like a cat's in the night. As soon as a parent notices such a phenomenon, they should rush to the hospital”.	To enhance understanding and highlight the importance of early intervention and screening.
Pragmatic analysis	**Power Dynamics** "Some people say it is meant to render a girl child sterile"	Illustrates the conflict between traditional beliefs, fear and public recommendations.
	Conversational implicature "The majority of women do not go for a voluntary screening for cancer"	Highlights the issues behind health-seeking behaviours. The unwillingness people express towards free screening.
	Intertextuality “This is primary prevention, in the form of vaccination against HPV, as recommended by the World Health Organisation (WHO) between the ages of 9 and 14”	References WHO guidelines to situate local health issues within a global context and to enhance credibility.

5.2.2 The Different Discourses on NCDs in *Cameroon Tribune*

The articles in *Cameroon Tribune* reveal a rich and intricate tapestry of discourses surrounding non-communicable diseases (NCDs), encompassing critical themes such as gender, education, stigma, negligence, responsibility, and blame. Each discourse is articulated through various linguistic features, figurative language, and narrative strategies, contributing to a deeper and more nuanced understanding of how NCDs are represented and discussed in the media.

5.2.2.1 Discourses on Improving Prevention

All these discourses are identified and placed in chapter four of this work. The first discourse that we see here is that of awareness. This discourse runs through all the articles. Awareness surrounding non-communicable diseases (NCDs) is crucial, especially given that some individuals remain ignorant of these diseases and their implications. The awareness activities around Breast cancer are usually organised in October ("Pink October"), exemplifying the importance of such awareness. This event marks a collective effort to combat different types

of cancer, a silent yet deadly disease that disproportionately affects women, men and children. Establishing specific dates and months for NCDs has proven to be effective in promoting public awareness. For example, World Heart Day, September 29, is dedicated to raising awareness about cardiovascular diseases, and encouraging individuals to adopt heart-healthy habits. In Cameroon, health campaigns often include information on diet, exercise, and regular health check-ups. Organisations can create focused campaigns that resonate with the community by linking specific health issues to particular times of the year. These awareness periods provide opportunities for structured outreach, enabling health professionals and advocates to disseminate crucial information on prevention, risk factors, and treatment options. Moreover, these designated times foster a sense of urgency and collective action. They encourage individuals and communities to participate in educational events, screenings, and fundraising activities, enhancing community engagement and solidarity in the fight against NCDs. The annual recurrence of these awareness dates helps normalise discussions around these health issues, reducing stigma and promoting proactive health management. In conclusion, promoting awareness through specific dates and months has significantly impacted the landscape of NCD prevention and education in Cameroon. By creating a structured framework for engagement, these initiatives empower individuals and communities to take charge of their health, fostering a culture of awareness and proactive action against non-communicable diseases.

The discourse of negligence emerges as a prominent theme in discussions about non-communicable diseases (NCDs), particularly regarding patients who delay seeking medical care until their health has severely deteriorated. The articles in *Cameroon Tribune* frequently highlight this tendency, emphasising the dangers associated with neglecting health issues. This discourse illustrates how a lack of timely intervention can lead to more severe health consequences, reinforcing the importance of early detection and proactive management. In addressing this issue, the articles often critique the prevailing attitudes among patients who may underestimate the seriousness of their symptoms. Moreover, the articles employ a tone of urgency that calls for immediate action, urging individuals to recognise the importance of seeking medical attention at the first signs of health issues. Direct appeals to the audience emphasise the need for personal responsibility in health matters, highlighting that neglect can lead to complications that are detrimental to the individual and place additional burdens on the healthcare system. Ultimately, the discourse on negligence highlights a critical gap in health-seeking behaviour among patients

and serves as a call to action. By raising awareness about the importance of timely medical intervention, *Cameroon Tribune* aims to foster a culture of proactive health management, ultimately contributing to better health outcomes for individuals living with NCDs.

The discourse on lifestyle choices such as tobacco use, alcohol consumption, poor diet, and physical inactivity. These chronic conditions lead to long-term health consequences, often resulting in the need for ongoing treatment and care. Understanding the risk factors associated with NCDs is essential for effective prevention and management. The news articles foster proactive health management and encourage responsible decision-making by empowering individuals with knowledge about the genetic, lifestyle, and environmental influences on these diseases. Normalising healthy behaviours such as regular physical activity, balanced diets rich in fresh foods, and stress management creates a cultural norm that prioritises well-being and prevention. This is particularly vital given the interconnected nature of NCDs; for instance, obesity can lead to diabetes and cardiovascular diseases, illustrating the importance of addressing multiple risk factors simultaneously. The articles equally highlight the impact of personal choices, such as the consumption of tobacco, alcohol and certain meals like “Kondre”, “Okok”, “Eru”, “koki” and “yellow sauce(achu)” as critical intervention points in community health strategies.

5.2.2.2 Discourse Related to Stigma

Hope discourse is a powerful influence for individuals living with non-communicable diseases (NCDs), encouraging planning for the future and promoting treatment adherence. The discourse of hope reduces the stigma surrounding NCDs by fostering a sense of possibility and collective action. Uplifting language and achievable goals, such as cervical cancer prevention through vaccination, instil confidence and motivate proactive health behaviours. Phrases like "there would be hope for the elimination of cervical cancer soon" inspire optimism and reduce fear of judgment. As exemplified by the Pink October campaign, community involvement normalises experiences and alleviates isolation. Emphasising the "importance of diet and exercise" as preventive measures promotes a positive narrative that encourages healthy choices without blaming individuals. This reframing allows individuals to view themselves as active participants in their health journey. Key linguistic features, such as the nouns “action” and “victory,” evoke a proactive approach to overcoming challenges, while verbs like “aims” and

“overcoming” emphasise purposeful intentions and active struggles. Descriptive adjectives and phrases like “Overcoming Epilepsy Together” create a rich narrative of hope, empowerment, and community support, positioning the discourse as essential for resilience in the face of NCDs. The emphasis on community engagement and collective action normalises health discussions and encourages proactive health behaviours. Additionally, the discourse of hope inspires individuals, reinforcing their agency and encouraging a positive outlook towards health management. These discourses highlight the necessity of inclusive and supportive communication strategies in public health, which can lead to improved health outcomes and a more informed and engaged community.

Educational Discourse is another prominent theme, emphasising the importance of knowledge dissemination in combating NCDs. The articles actively advocate for heightened awareness and understanding of these diseases, employing clear and accessible language to educate the public about risk factors, prevention methods, and the necessity of early detection. By integrating informative narratives, statistics, and expert testimonies, *Cameroon Tribune* seeks to empower individuals with the knowledge required to make informed health decisions. This educational approach fosters a culture of prevention and aims to dismantle misconceptions surrounding NCDs, ultimately promoting healthier lifestyle choices within communities. The articles highlight several risk factors for non-communicable diseases (NCDs) such as breast cancer, epilepsy, obesity, and kidney diseases, including genetic predispositions, lifestyle choices, and environmental exposures. This multifaceted perspective informs the audience that genetics, personal behaviours, and environmental conditions influence NCDs. For example, the mention of alcohol and tobacco consumption positions these behaviours as critical points for intervention, emphasising that "individuals who consume alcohol and tobacco are also at risk." This awareness empowers individuals to make informed lifestyle choices, fostering a proactive approach to health management. The discourse surrounding preventive measures normalises healthy lifestyle choices as essential to NCD prevention, promoting recommendations for regular physical activity, stress management, and dietary preferences. The articles establish a cultural norm around healthy eating by advising individuals to consume fresh foods, particularly white meat. The positive and constructive language focuses on empowerment, as seen in phrases like "without being overly alarming," which aims to promote awareness while ensuring individuals feel a sense of agency over their health.

The discourse of Blame is prevalent in discussions about the socio-economic factors contributing to the rise of NCDs. The articles frequently highlight systemic inequalities and environmental influences that exacerbate health disparities, challenging readers to reconsider simplistic narratives that assign blame solely to individual behaviour. By employing critical language and emphasising socio-political contexts, *Cameroon Tribune* promotes a more nuanced understanding of the complexities surrounding NCDs. This approach encourages empathy and systemic solutions, advocating for a shift away from individual fault towards collective responsibility in addressing the root causes of health inequities.

5.2.2.3 Discourse Related to Burden

The economic discourse surrounding non-communicable diseases (NCDs) reveals the profound financial burdens that patients face, often exacerbating their conditions and straining family dynamics. For instance, the phrase "due to lack of funds" highlights the structural inequalities that leave patients feeling powerless, as they grapple with the overwhelming costs of treatment. This financial strain positions them as burdens within their families, complicating caregiving roles and heightening emotional stress, as seen in some cases in chapter four. This pushes economic implications on NCD awareness, as discussed in "Octobre rose à la SOPECAM," underscoring the necessity for alternative income-generating activities. Maureen Tabe's assertion that "life is becoming increasingly difficult" resonates widely, reflecting how economic pressures can lead to a cycle of dependency and distress. The focus on financial constraints underscores the inadequacy of relying solely on salaries to cover exorbitant medical expenses but also reveals how these pressures can fracture familial bonds, as caregivers like Marcelin endure unseen emotional and physical tolls. Together, these narratives illustrate that the intersection of health and economic discourse is critical in understanding the challenges individuals and families face, advocating for a holistic approach to empower patients and alleviate the burdens they impose on their loved ones.

5.2.2.4 Discourse on Promoting Adherence

The discourse surrounding sports played a pivotal role in promoting healthy lifestyles and combating non-communicable diseases (NCDs), positioning physical activity as a fundamental strategy for enhancing community health. Initiatives such as the event organised by the Cameroon Press and Publishing Company demonstrate how collective participation in sports can

foster engagement and raise health awareness. Under the guidance of a coach, who aptly describes exercise as a form of medicine, participants experienced the diverse benefits of physical activity, including increased comfort and reduced stress, critical factors for individuals managing chronic conditions. Moreover, educational campaigns in areas like Buea, which provided free screenings for kidney-related diseases, effectively linked lifestyle choices to health outcomes, empowering individuals to make informed decisions. By addressing the dangers of sedentary behaviours and advocating for regular exercise, the sports discourse encourages a cultural shift towards active living and instils a sense of community responsibility for health. Ultimately, this holistic approach reinforces the notion that sports are not merely recreational but integral to effective health management, offering both physical and psychological benefits that are essential in the fight against chronic diseases.

In conclusion, the diverse discourses on NCDs presented in *Cameroon Tribune* illustrate the multifaceted nature of health communication. Through the strategic use of linguistic methods, figurative language, and critical narratives, the articles not only inform the public but also inspire action. This comprehensive approach ultimately contributes to a broader dialogue about health and well-being in Cameroon, highlighting the importance of understanding the linguistic and cultural dimensions of health issues in fostering effective communication and intervention strategies

Table 3: The different discourses on NCDs in *Cameroon Tribune*

Macrostructure	**Discourses**
Improving prevention	Discourse of NCD awareness
Stigma-related discourse	Discourse of hope
	Educational discourse
	Discourse of blame
Burden-related discourse	Economic discourse
Discourse on promoting adherence	Discourse of Sports

5.3 Discursive and Linguistic Strategies

This section outlines the discursive and linguistic strategies employed in Chapter Four of this study, focusing on the representation of non-communicable diseases (NCDs) in *Cameroon*

Tribune. The analysis in this chapter emphasises how language constructs social realities. An investigation on nomination and predication strategies was done to illustrate how prevention is articulated in the discourse surrounding NCDs. These strategies involve the construction and representation of social actors through various categorisation devices, such as metaphors, metonymies, and synecdoches. By examining membership categorisation, particularly through deictic expressions, we highlight the roles of individuals engaged in health discussions, those seeking assistance and those providing it and how their language contributes to effective prevention efforts.

5.3.1 Nomination or Referential Strategies

A key focus in this chapter is on nomination strategies, which construct social actors within the discourse. This includes the creation of in-groups and out-groups, achieved through categorisation devices that shape perceptions of those affected by NCDs. For example, collective terms used for patients foster a sense of community and shared experience, enhancing solidarity among individuals dealing with similar health challenges.

Using tropes such as metaphors and idiomatic expressions added emotional depth and engagement to health communication. Language that incorporates terms of endearment creates a friendly atmosphere, encouraging openness and participation during awareness campaigns. This approach facilitates a connection between health professionals and patients and promotes a more collaborative dialogue on health management.

In discussing concrete aspects relevant to NCDs, the articles emphasise critical factors such as healthcare access, treatment options, the country and food. By focusing on tangible elements like the availability of essential medicines and the necessity of a balanced diet, the discourse reinforces effective prevention strategies. Highlighting these aspects conveys that proactive management of health conditions is achievable and essential for improving outcomes.

The analysis also delves into abstract phenomena, including lifestyle choices, cultural influences, and socio-economic challenges. The articles stress the importance of maintaining a healthy lifestyle regardless of one's health status, reinforcing that health is an ongoing commitment. Lifestyle practices that may hinder health, such as excessive alcohol consumption, smoking and neglecting check-ups, call for a shift towards more health-conscious behaviours.

Finally, the exploration of ideology within the discourse reveals how underlying beliefs influence attitudes toward NCDs. Analysing framing, foregrounding, and presuppositions uncovers how ideologies shape public perceptions and health behaviours. This critical examination underscores the necessity of addressing ideological constructs to promote effective health communication and intervention strategies.

In summary, the linguistic strategies detailed in Chapter Four highlight the complex nature of health communication regarding NCDs. Through the use of various linguistic techniques, the articles not only inform and educate but also advocate for systemic changes that can lead to better health outcomes in the community.

5.3.2 Intensification and Mitigation Strategies

Intensification strategies and mitigation strategies serve distinct but complementary functions in the discourse surrounding non-communicable diseases (NCDs). Both approaches modify the epistemic status of a proposition by either intensifying or toning down the illocutionary force of utterances (Ruth Wodak, 2011). These strategies play a crucial role in shaping the presentation of health information, either sharpening or softening its impact.

The contrasting roles of intensification and mitigation strategies in discourse. Intensification aims to amplify statements, enhancing their illocutionary force, while mitigation seeks to soften them, reducing their impact. Both strategies significantly shape how propositions are perceived and understood. Mitigation functions as a cognitive, linguistic, and social phenomenon, involving politeness and responses to blame. It aims to create a hopeful narrative in the context of non-communicable diseases (NCDs) by using phrases that alleviate anxiety, such as "Without being overly alarmist." This approach encourages proactive health behaviours, illustrating that individual actions can influence health outcomes. On the other hand, intensification is manifested through rhetorical questions, repetition, and strong adjectives. It serves to highlight the urgency of health messages, particularly regarding the prevalence of breast cancer, using terms like “high rate” and imperatives like “be vigilant.” Additionally, intensification provides stark statistical contexts to emphasise the seriousness of the issue.

Examining discourse through a Foucauldian lens reveals how power relations influence intensification and mitigation strategies. This approach uncovers the mechanisms behind how

discourse shapes health perceptions and responses. Ultimately, the interplay of intensification and mitigation strategies creates a balanced discourse on NCDs, fostering an environment that promotes awareness and proactive engagement while minimizing stigma and fear associated with health issues. Furthermore, individuals living with NCDs can also utilise mitigation strategies to address challenging aspects of their lives. This reciprocal use of mitigation underscores its effectiveness in reducing stigma and promoting adherence. articles employ conditional clauses, reductive quantities, and weak adjectives, actively working to soften the impact of difficult messages. By carefully choosing language, they help create a more supportive and understanding environment for those affected by NCDs.

5.4 Limitations of the Study

This study on the discursive analysis of media language regarding non-communicable diseases (NCDs) in *Cameroon Tribune* presents several limitations that must be acknowledged. First, the research is confined to a single media outlet, which may not adequately represent the broader spectrum of media discourse in Cameroon. *Cameroon Tribune's* editorial stance and audience may differ from other newspapers or digital media platforms, potentially limiting the comprehensiveness of the findings. Additionally, the study focuses on a specific period, which may not capture the evolving discourse surrounding NCDs in response to changing health priorities or emerging research. These limitations highlight the need for a cautious interpretation of the findings and suggest that future research could benefit from a broader scope that includes multiple media sources and methodologies.

5.5 Difficulties Encountered

The data collection and analysis journey for this study encountered several challenges that impacted its execution and outcomes. Initially, accessing archives of *Cameroon Tribune* proved to be a complex task, as not all editions were readily available in accessible formats. This required extensive outreach to newspaper sales points and digital repositories, leading to delays. Once relevant articles were chosen, the analytical phase revealed the intricacies of conducting a discursive analysis where the subtleties of language and context needed careful interpretation. Balancing theoretical frameworks with practical analysis sometimes led to analytical paralysis, hindering timely progress.

5.6 Suggestions for Further Research

Future research should expand upon this study by exploring the discursive strategies employed across various media platforms, including social media, and health-focused websites and how it shapes public perception. A comparative analysis would provide a more comprehensive understanding of how different forms of media communicate health messages about NCDs and could highlight discrepancies in language use and effectiveness among diverse audiences. Furthermore, longitudinal studies that track changes in media discourse over time could elucidate how public health messaging evolves in response to emerging health trends or shifts in societal attitudes. These suggestions aim to foster a more nuanced understanding of health communication and its implications for public health strategies.

5.7 Conclusion

In conclusion, this discursive analysis of media language regarding non-communicable diseases in *Cameroon Tribune* has provided critical insights into the ways language shapes the discourse surrounding health issues. By examining the strategies of intensification and mitigation, the study has illuminated the intricate relationship between language and health communication, revealing how specific linguistic choices can either reinforce stigma or promote understanding and adherence to treatment. Despite the challenges encountered during data collection and analysis, the findings contribute significantly to the field of health communication, emphasising the importance of carefully crafted messaging in addressing NCDs. As the landscape of health communication continues to evolve, this research serves as a foundation for future inquiries that seek to explore the complexities of media influence on health behaviours and outcomes. Ultimately, enhancing our understanding of these dynamics is essential for developing effective interventions that address the needs of individuals affected by NCDs, promoting early detection, and fostering proactive health management.

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APPENDICES

Cancer du col de l'utérus: La campagne de vaccination effective

Assiatou NGAPOUT M. • October 13, 2020

#Société

Les intrants sont disponibles depuis hier dans tous les postes de vaccination logés dans les formations sanitaires du pays.

C'est effectif depuis hier. Le vaccin anti papillomavirus humain (HPV) fait son introduction dans le Programme élargi de vaccination (PEV). Ce vaccin introduit sur toute l'étendue du territoire national dans le cadre de la vaccination de routine protège contre le cancer du col de l'utérus et les autres infections causées par le virus HPV. Sont ciblées par cette vaccination, les jeunes filles âgées de 9 ans n'ayant pas encore eu de relations sexuelles.

Dans les postes de vaccination logés dans les formations sanitaires de Yaoundé visités, notamment à l'Hôpital de district d'Efoulan, les intrants sont disponibles depuis le 8 octobre dernier, à en croire Nadège Tebeu, major du service de vaccination, même si les parents traînent encore le pas avec leurs enfants.

> *« La vaccination injectable est effective ici. Nous attendons que les mamans viennent avec leurs enfants. Pour le moment, personne ne s'est encore présenté. Quelques jours avant le début de cette activité, nous avons procédé à la sensibilisation des parents dans les communautés par les mobilisateurs sociaux », a assuré Nadège Tebeu.*

L'objectif de cette introduction vaccinale gratuite étant d'amener au moins 70% des filles âgées de 9 ans à se faire vacciner contre le HPV, le PEV va mener son opération dans les écoles et les formations sanitaires. Et même dans les sites communautaires où les postes de vaccination sont installés. Les filles de 9 ans non scolarisées seront quant à elles vaccinées dans les centres de santé, dans les villages et écoles.

> *« Nous avons proposé cette introduction en deux phases : d'abord dans les formations sanitaires et dès le 23 novembre prochain, nous allons mener une campagne de vaccination dans les écoles », a indiqué Dr Hassan Ben Bachire, secrétaire permanent du PEV.*

Il confie à cet effet qu'il n'existe aucun traitement antiviral contre les infections à HPV pour le moment. La prévention des infections à HPV est essentiellement liée à la vaccination.

D'après le Programme élargi de vaccination, 2356 nouveaux cas de cancer du col de l'utérus sont diagnostiqués chaque année au Cameroun. Le cancer du col de l'utérus représente le deuxième cancer le plus fréquent chez les femmes, avec une incidence standardisée pour l'âge de 30 ans pour 100 000 femmes. Une étude réalisée en communauté a estimé la prévalence des HPV à 39% parmi les femmes.

Ces chiffres placent le Cameroun parmi les pays présentant les prévalences les plus élevées de HPV dans le monde. Les facteurs de risque d'infection par HPV au Cameroun sont liés au niveau socio-économique, à la séropositivité au VIH, à la contraception hormonale. L'âge de prédilection du développement du cancer du col de l'uterus est compris entre 30 et 50 ans.

Diabète : 615 000 malades au Cameroun

Assiatou NGAPOUT M. • November 19, 2019

#**Société** www.cameroon-tribune.cm

Des mesures comme la réduction du coût de l'insuline sont prises par le ministère de la Santé publique et ses partenaires pour soutenir ces personnes.

Une journée de plus et non des moindres pour sensibiliser sur le diabète qui touche **615 ooo personnes** au Cameroun. Soit 6% d'adultes avec une prévalence plus élevée en milieu urbain qu'en milieu rural d'après la fédération internationale du diabète. Chaque année, le 14 novembre plus précisément, le Cameroun se joint à la **communauté internationale** pour cette journée qui vise à informer le public sur les dégâts causés par cette maladie.

> *Au-delà de la sensibilisation et des consultations gratuites organisées dans certaines formations hospitalières, le* ***ministère de la Santé publique*** *et ses partenaires, dont la* ***World Foundation Diabetis*** *ont décidé de prendre le taureau par les cornes pour endiguer cette maladie chronique.*

Le diabète étant une affaire de tous, pour couper le mal à la racine, tout un programme a été mis sur pied dans les lycées et collèges afin de promouvoir une alimentation saine et équilibrée et l'activité physique dès le bas âge. Ce projet matérialise la parfaite collaboration entre les ministères en charge de l'Education de base et de la Santé publique en partenariat avec l'Ong « Recherche santé et développement ».

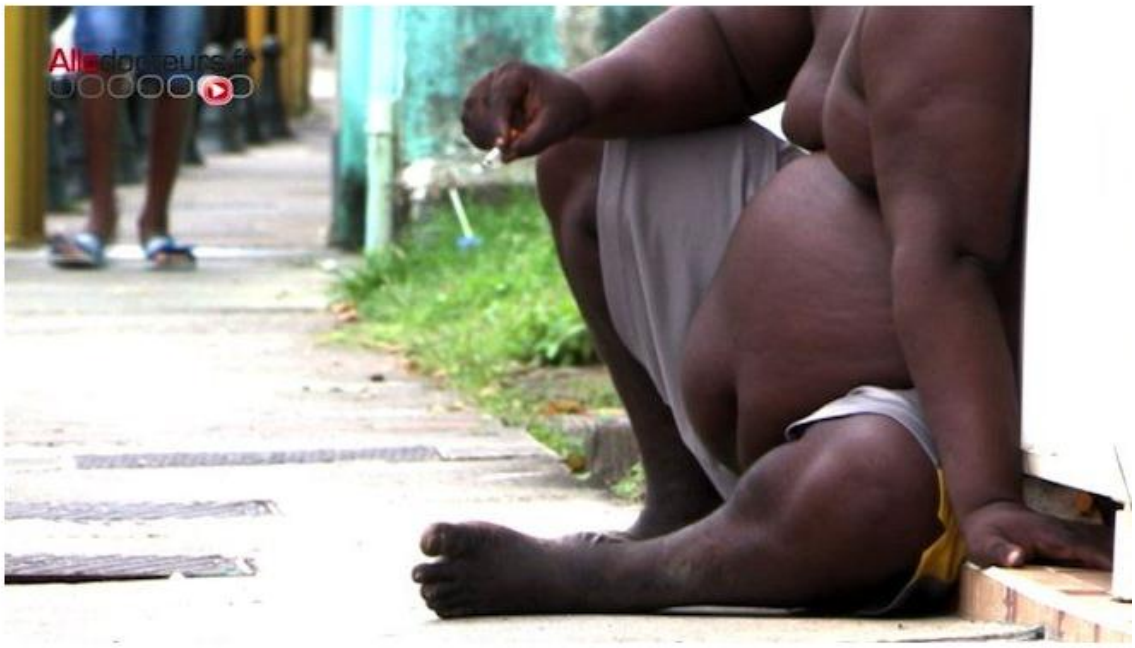
D'après le Pr. Eugène Sobngwi, diabétologue, il s'agit concrètement via ce projet de former les personnes qui concoctent des repas et les vendent dans les cantines scolaires. « Ces hommes et femmes doivent avoir une contrainte de proposer des plats sains et équilibrés dans la logique de promouvoir la santé des élèves dans les établissements scolaires », fait savoir le diabétologue.

> *Grâce au programme dénommé « Changing Diabetis In Children », le ministère de la Santé publique et ses partenaires stratégiques ont également pris la pleine mesure des choses. Désormais, ils prennent en charge, et ce de manière intégrale, les soins des enfants et des adolescents de moins de 21 ans vivant avec le diabète.*

Pour ce qui est du traitement des personnes adultes vivant avec cette maladie, grâce à un accord signé entre le Minsanté et ses partenaires stratégiques, l'insuline connaît actuellement une baisse drastique de son prix. Le prix d'un flacon est passé de 14 000 F à 3 000 voire 5 000 F.

Santé : l'obésité gagne du terrain

Assiatou NGAPOUT M. • March 06, 2020



#**Société** www.cameroon-tribune.cm

La première Journée de lutte contre le mal, le 4 mars dernier, invite à un changement de comportement.

Fadima N., 20 ans, souffre d'**obésité**. Elève dans un lycée de **Yaoundé**, la jeune **femme** ne pèse pas moins de 125 kilogrammes du haut de ses 1,62 mètres. Rien d'alarmant jusqu'ici, sauf que dernièrement, son **médecin** lui a diagnostiqué une **hypertension artérielle.** « Au début, je me sentais très mal. J'avais du mal à respirer normalement.

Cela était accompagné de maux de tête le matin, sur le sommet et à l'arrière du crâne. Sans oublier des étourdissements et des troubles visuels avec une grosse fatigue », confie la lycéenne qui reconnaît avoir abusé des sodas et des mets riches en calories.

> *« Il m'arrivait souvent de boire un à deux litres de sucrerie par jour. Sans oublier le fait que je me goinfrais de pâtisseries », avoue Fatima qui dit s'être mise au sport et avoir adopté un* ***régime alimentaire*** *plus sain, grâce aux recommandations de son médecin.*

Comme Fadima N., 15¨% de la population camerounaise souffre de l'obésité, une **accumulation anormale ou excessive de graisse corporelle** qui peut nuire à la **santé**. Un adulte sur quatre en milieu urbain est en surpoids d'après le **Pr. Eugene Sobngwi**, **endocrinologue-diabétologue**. Les enfants et les femmes sont les couches les plus exposées.

> *Cette maladie qui gagne du terrain, est selon les spécialistes, le premier facteur de risque de maladies cardio-vasculaires et du diabète, causes principales de décès dans le pays. L'obésité est également à l'origine de certains cancers et de nombreuses autres affections.*

En cause, entre autres selon un diététicien, la consommation excessive d'aliments riches en lipides comme l'okok, le eru, le koki, le kondre et la sauce jaune. L'obésité peut aussi être liée à l'insécurité alimentaire, compris ici comme une situation qui survient lorsque les aliments sains et nutritifs ne sont pas disponibles, ou qu'il est difficile d'en acquérir en quantité suffisante.

Une étude internationale sur l'état de santé du monde indique que l'obésité tuerait trois fois plus que la **malnutrition**. « Aujourd'hui, dans le monde, on meurt plus du manger trop, que de ne pas manger assez. En 20 ans, on est passé d'un monde où les gens souffraient de malnutrition à un monde où les gens souffrent de maladies liées à une alimentation trop grasse et trop riche », souligne un expert sur ce paradoxe sanitaire.

> *Hier 4 mars 2020, la communauté internationale a célébré la toute première Journée mondiale de lutte contre l'obésité. Cette mobilisation vise à apporter une réponse mondiale à une maladie qui prend de l'ampleur sur la planète. La volonté affichée étant d'encourager les populations à avoir une alimentation saine et à faire régulièrement de l'exercice.*