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Combating Covid-19 through Museum Exhibitions in Cameroon

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ABSTRACT

The global pandemic caused by the dreaded *Corona virus* (Covid-19) first hit Africa in December 2019 and then pounced on the rest of the continent by March 2020. Within weeks, governments trembled and virtually every public service was grounded. Soon, the entire continent was in panic and confinement. The butchery was comparable to none in human history. In Cameroon, where face masks were before now, a luxury; where government policy towards pandemics remained reactive rather than proactive; where doubt and skepticism still surrounded the existence of the virus; and where research on new brands of beer took precedence over healthcare, basic education and infrastructure, the cacophony was total. Virtually every television and radio slot carried horrifying news of the pandemic, its latest victims, traumatized medical staff, abandoned patients, mass burials, shocking images and lost hope

for a vaccine. However, one sector yet to paint its picture of the pandemic in Cameroon has been that of museums. Like the Holocaust Museum in Washington DC and the Apartheid Museum in Pretoria, Cameroonian museums have the capacity to immortalize ground-breaking events, pandemics and genocidal occurrences. They could also sensitize, orientate and communicate dramatic messages to diverse audiences. The present museographic study captures the role that Cameroonian museums could play in combating this gruesome monster through visual exhibitions, sensitization and outreach programs. It answers a central question: What legacy has the corona virus left in Cameroon and how can Cameroonian museums contribute to erasing it? A blend of qualitative research, art criticism and participatory observation, analyzed on thematic and chronological parameters provided grounds for our findings. Governments the world over have learnt that however powerful they might be, we all need God to survive. Secondly, national emergency plans need to be reviewed for greater pro-activity for the pandemic to be conquered.

Keywords: *Cameroon, Combating, Covid-19, Exhibitions, Museum*

1. INTRODUCTION

Like the Holocaust Museum in Washington DC and the Apartheid Museum in Pretoria; like the ideological museums of Soviet Russia and the nationalist museums of southern Africa, that immortalized the legacy and crusade against world pandemics, genocides and events of exceeding proportions, museums of Cameroon could become veritable tools for immortalizing the legacy, struggle and impact of the corona virus that has taken a great toll on the nation; museums of this great triangle could become the silent voice of local communities; burrowing and hissing into the ears of those on whose culture the museums are anchored; sensitizing and valorizing not only the values of prevention and compliance with social distancing. Above all, museums could echo the voice of heritage, calling on actors of local pharmacopoeia and natural medicine as they did to save the national triangle. Despite the countless questions and challenges that confronted museums in the face of this pandemic, our

study dwells on just three: it identifies the different perceptions of the virus as relayed by Cameroonian museums, namely skepticism, partial submission and total denial of its existence; it examines visual depictions of efforts made by the Cameroon government and private initiatives to combat the pandemic, notably the national riposte, trade unions and tradi-practitioners; it finally discusses the possible role of museums in immortalizing and combating the pandemic, notably through exhibitions, outreach programs, access precautions and public sensitization. Analyses of data collected and conclusions drawn should hold not only for local community museums but also for the entire museum community in Cameroon and perhaps beyond.

The litany of worries posed by the corona pandemic is manifold and the stakes for African governments are indeed very high. Far from proposing an encyclopedic narrative embracing all highlighted concerns, the present study is centered on what legacy the corona virus is leaving on Cameroon and how this could be dealt with? This is further discernable from three questions: How has the virus been perceived in Cameroon? What have government and private initiatives done in riposte to this pandemic? How can museums join the anti-corona crusade in Cameroon? In its principal objective, the study captures the role that Cameroonian museums can and have played in combating this gruesome monster through visual exhibitions, sensitization and outreach. More precisely, it identifies through visual representations, the different perceptions of the virus in Cameroon, examines efforts made by the Cameroon government and private initiatives to combat the pandemic and finally, discusses the possible role of museums in immortalizing and combating the pandemic.

Despite the short notice within which the corona virus developed from pneumonia-like illness into a global pandemic, reactions from all spheres and parts of the world were spontaneous.¹ These have been summarized

¹ What began as an emerging pneumonia-like illness in Wuhan, China in December 2019 was eventually declared as a global pandemic by the World Health Organization (WHO) on March 11, 2020.¹ The Chinese Center for Disease Control and Prevention (CDC) ruled out related corona viruses such as influenza, avian influenza, adenovirus, severe acute respiratory syndrome Coronavirus

in the views of some authors that we inventoried.² This literature captures some major orientations of authors between 2020 and 2021. These include national and global situational reports, personal perceptions of the pandemic, the future of the world when the monster subsides, the provision of health care services and government interventions, perceptions among community members and frontline healthcare providers, hesitancy among medical and health science students, social media as sources of information on COVID-19, various attitudes towards vaccines, and forms of assistance from the World Health Organization (WHO). Regarding national and global situations, WHO (2020) reported on the catastrophic situation in Cameroon with special focus on the period from 6th March 2020 to 6th July 2020. This report presents the efforts made by the Ministry of Public Health (MINSANTE) and the back-up from W.H.O to forestall the further spread of the pandemic. It also presents the epidemiological situation of the country, region by region. This reveals a total 14.916 registered cases, 359 deaths and 11.525 recoveries with the Center and Littoral regions topping the infections chart.³ In another situational paper, Adekunle Sanyaolu et al. (2020), highlight the rapid spread of Corona virus worldwide and

(SARS-CoV-1), and Middle East respiratory syndrome Coronavirus (MERS-CoV) as possible causes for the new respiratory syndrome, but eventually declared it as a novel Coronavirus, giving it the name COVID-19.

² Due to the abundant, disorderly, disjointed and often contradictory information and literature that was hastily produced upon the outbreak of COVID-19 in Africa and the world at large, the WHO Regional Office for Africa decided to publish a "Weekly COVID Literature Update" to furnish the most important and exact literature.

³ Other actions taken by MINSANTE supported by W.H.O included 10.8 tons of material and equipment placed at the disposal of health services; 183 oxygen concentrators donated to Cameroon; 39 WHO experts were deployed to Cameroon; 64 vehicles were offered to Cameroon to quicken the delivery of equipment to the regions; 80.000 face masks to Minsante; 80.000 communication kits; 2589 health personnel were trained in Covid-related interventions; 60.000 masks offered to Cameroon's penitentiary administration; 04 high profile WHO experts deployed in Cameroon to work with national actors; and 08 ripost observatories.

indicate a higher number of mortalities in the elderly and those with “comorbidities”. To slow down or reverse the trend, the authors recommend rapid detection, testing, isolating the infected, and organizing the healthcare response to the virus. This report takes a closer look at the cases, fatalities, and recoveries in different regions of the world with details regarding the geographic scale of the Severe Acute Respiratory Syndrome Coronavirus SARS-CoV-2 spread, risks, and the subsequent impact on the countries affected. The report also discusses some effective measures carried out by some countries to mitigate the pandemic and flatten the curve of COVID-19 spread as early as possible (Ibid). The authors conclude among other things that the virus spreads quickly, often through those who do not know they are carriers, and seems to present more severely in those with advanced age.

Regarding the implementation, adjustment and enforcement of social measures to prevent and mitigate the spread of COVID-19, WHO (2021), in a policy brief addresses the issue of infections at workplaces outside of healthcare facilities.⁴ More precisely, the author examines the factors influencing the spread of COVID-19 in the workplace; the effectiveness of workplace interventions; policies directed at preventing transmissions in the workplace; policy action points designed for workplaces; and policy action points for government. In another “Interim Guide,” WHO (2021) affirms that Public Health and Social Measures (PHSM) have proven critical to limiting transmission of COVID-19 and reducing deaths. WHO further states?

The decision to introduce, adapt or lift PHSM should be based primarily on a situational assessment of the intensity

⁴ This document focuses on addressing the following questions: what characteristics of the workplace and workforce increase the risk of SARS-CoV-2 transmission in the workplace? Is there evidence of successful infection prevention and control (IPC) measures in the workplace? What is the role of workplaces for containing and mitigating COVID-19 in their workforces? What types of policies have been implemented to prevent and mitigate transmission in the workplace? What policies will help prevent transmission and mitigate the impact of COVID-19 in the workplace?

of transmission and the capacity of the health system to respond, but must also be considered in light of the effects these measures may have on the general welfare of society and individuals. Indicators and suggested thresholds are provided to gauge both the intensity of transmission and the capacity of the health system to respond; taken together, these provide a basis for guiding the adjustment of PHSM. Measures are indicative and need to be tailored to local contexts. PHSM must be continuously adjusted to the intensity of transmission and capacity of the health system in a country and at sub-national levels. When PHSM are adjusted, communities should be fully consulted and engaged before changes are made. In settings where robust PHSMs are otherwise in place to control the spread of SARS-CoV-2, allowing the relaxation of some measures for individuals with natural or vaccine-induced immunity may contribute to limiting the economic and social hardship of control measures. Applying such individualized public health measures must take into account a number of ethical and technical considerations. (WHO, 2021)

As to how the world will be after the corona pandemic, Daniel Susskind (2020) presents the views of four researchers.⁵ According to these experts, we are facing the fragility and vulnerability of the human situation and the world after COVID-19 is unlikely to return to the world that was. The experts strongly believe that many trends already underway in the global economy are being accelerated by the impact of the pandemic. They affirm that historically, pandemics have forced humans to break with the past and imagine their world anew (Ibid, p. 27). One of the experts, Jean Saldanha states for instance that the world after the first wave of COVID-19 must be more inclusive, resilient, and sustainable. Too many countries suffered the external shocks of COVID-19 without universal social protection, robust public health systems, and a sustainable real economy

⁵ They include James Manyika, Jean Saldanha, Sharan Burrow, Sergio Rebelo & Ian Bremmer and himself.

with quality jobs. Viewing the world from an economic perspective, Sergio Rebelo submits that, COVID-19 will leave a lasting imprint on the world economy, causing permanent changes and teaching important lessons. To the expert, virus screening is likely to become part of our life, just like security measures became ubiquitous after 9/11. Consequently, it is important to invest on the infrastructure necessary to detect future viral outbreaks. This investment protects economies in case immunity to COVID-19 turns out to be temporary (Ibid, p. 28). Like Rebelo, but rather taking the stand of a geo-strategist, Ian Bremmer states that “the global order was in flux well before the COVID- 19 crisis.” The Coronavirus has according to him accelerated three of the key geopolitical trends that will shape our next world order. These are “deglobalization”, an inevitable growth of nationalism, and finally, the geopolitical rise of China (Ibid, p. 29).

Other subjects of debate that have preoccupied Covid-19 literature include the provision of services and government interventions, related perception among some community members and frontline healthcare providers, hesitancy among medical and health science students, social media, as a main source of information on COVID-19, attitudes towards vaccines and more.⁶ These works reveal among other things that the pandemic has resulted in a major breakdown of health service provision in the fight against neglected tropical diseases (NTDs). The COVID-19 may therefore impact NTDs service delivery in varied ways (<https://doi.org/10.1186/s12879-022-07084-0>). As the Ghana NTD programme planned to resume MDA activities, we examined the COVID-19 related perceptions and practices among some community members and frontline health workers for NTD control activities in the country. Regarding the hesitancy towards taking vaccines, students are advised to receive COVID-19 vaccine information from government lead

⁶ Using guidance from the Joanna Briggs Institute, a scoping review was used to explore the current literature (scientific and grey) on IDD and COVID-19. Three core themes emerged from the review URL: <https://doi.org/10.1111/jppi.12408>

mass media (television and radio), increase awareness and adhere to COVID-19 mitigation measures

(<https://doi.org/10.1371/journal.pone.0263081>). Experts also recommend social media as viable risk communication channel during the COVID-19 pandemic in sub-Saharan Africa. Despite concerns about misinformation, social media may be associated with favorable perception of the effectiveness of face masks

(<https://doi.org/10.1177%2F17579759211065489>). Unlike the tendency towards divergences, the general orientation of literature on Covid-19 has despite geo-strategic and other strategy-related motivations, been generally convergent on the causes, manifestations and strategies of prevention and mitigation. These views, which are far from exhaustive, reveal how open the subject and impact of the global pandemic has been on the world. The present study however, adopts a museographic and visual methodology for indeed museums have and can play a vital role in the fight against the world pandemic.

Unfortunately, in Cameroon they have failed to fully assume this role on account of their poor communication strategies. It beats every imagination that when medical services, schools, TV stations and other public utilities were busy reflecting and taking measures to mitigate the spread of the virus, Cameroonian museums chose to close down. While the museum sector across Europe, America and parts of Africa sought and put in place creative solutions to reach their audiences and stay engaged with their diverse audiences, Cameroonian museums shrank into their shells. This wasn't of course a matter of merely keeping, museum institutions alive but also of mobilizing their efforts and capacities to support community resilience and an effective recovery. Understandably, Cameroon's predominantly community museums have for decades suffered perennial management and logistical problems. These negatively impact their collections management, handling services, security, exhibitions, outreach, and communication programs. Challenges associated with existing infrastructures have also been crucial and numerous. Managed essentially by traditional authorities (for community museums) and poorly trained curators (for those of the public sector), Cameroonian museums were among the least prepared to face the

pandemic. Until the outbreak of the pandemic, no Cameroonian museum regularly used the face mask, the hand sanitizer or the thermoflash. No Cameroonian museum operated on an autonomous budget and none had an updated emergency plan (V.B. Ngitir, 2021). Promoters who generally doubled as directors hardly listened to their personnel, bothered about their health or cared for their safety and working conditions. Personnel went for several months without salaries and many survived by trafficking objects to art dealers.

2. AFRICAN PERCEPTIONS OF THE CORONA PANDEMIC

Ever since the emergence of COVID-19 in Wuhan, China in December 2019, the declaration of the disease as a global pandemic, and the recorded million deaths associated with it by the end of 2021 (Africa-CDC (2021), Africa like the rest of the world was and has never been indifferent. What differed however, stemmed from the diverse perceptions of the pandemic, its impact on the continent and approaches towards its repost. An African Union report stated that the first case in Africa appeared in Egypt on 14 February 2020 and cases have since been reported in all 55 African Union Member States (Africa CDC, 2021). At the start of 2021, Africa faced a second wave, with far more reported cases and deaths than in the early months of the global pandemic (ibidem)⁷. Initial government responses to control the pandemic were limited to promoting protective behaviors through frequent hand washing, physical distancing and the use of face masks in public spaces. As these stop-gap measures progressed, Africans remained largely divided over the development of a western vaccine as long term solution to the pandemic, reason why most Cameroonian museums were silent.

African perceptions of the pandemic centered on five main articulations: first, some claimed the virus was inexistent, and even if it did, it was fabricated by some powerful nations; second, the virus could not kill

⁷ According to Africa CDC, (2021), new virus variants have since then emerged.

Africans; third, the incidence and impact had been exaggerated in order to make financial gains; fourth, the vaccines so far produced contained dangerous African variants intended to drastically cut down African populations; fifth, African traditional medicines and local pharmacopoeia were more suitable for Africans (A. J. Udoakang et al., 2022). Because of the long standing distaste for western neocolonialist manipulation of Africa and the recent determination by Africans to unmask them, the continent was on the alert. African distrust of European and American machinations, even in the health domain has been total (Elnadi H. 2021). Today, no western project designed to assist Africans is embraced in good faith.⁸ Hence, though the control of this pandemic still remained unachievable in Egypt, Nigeria and other African countries, the acceptance of western vaccines was strictly under scrutiny by African governments and individual families⁹. This to most Africans accounted for the comparably fewer deaths and infections recorded on the continent between December 2019 and December 2020 (WHO, 2020). Regarding the incidence, Africans largely believed that the impact of the pandemic as revealed by W.H.O. and some government statistics had been deliberately exaggerated to create an unprecedented scare and consequently, make money through tests, handling charges and vaccines – and in the process, depopulate Africa, leaving it at the mercy of western wolves (Roy D, 2020).

Regrettably, some African governments were said to back such schemes for financial and other gains. In a social media outburst, the President of Madagascar, Andre Rajollina denounced W.H.O and the west for offering him 2.2 million dollars to use poisoned portions of the nationally produced vaccine to kill as many Africans as possible (African Union, 2021). Similar stories abound citing the likes of the American multi-

⁸ Moreover, suspicions about some African leaders receiving huge bribes to oblige their subjects to take the deadly vaccines for testing purposes ran across the continent.

⁹ Allegations that the virus was inexistent; was a western fabrication; and did not kill Africans due to their resistant genetic composition and the special texture of their skin, were perverse throughout sub-Saharan Africa.

billionaire Bill Gates and some powerful international pharmaceutical firms. They were categorized into two: first, those frustrating the development of a genuine vaccine for Africa, and secondly, those out rightly working for one that would wipe out entire African communities. More favorable and convincing to Africans was the paradigm for local pharmacopoeia produced in several African states – Cameroon, Madagascar, Mali, Senegal, Nigeria, Ethiopia and others. Though some authors qualify the African perceptions as resulting from ignorance, a survey by E. H. Odetokun et al, (2021) revealed that the level of awareness of the Coronavirus was on the rise.¹⁰ In sum, Africans had come of age and were no longer ready to be used, manipulated or jilted by any western power for selfish interests. Whether natural or man-made, Africans in their vast majority, preferred to handle the pandemic through alternative medicine – African pharmacopoeia. This went along side a positive attitude towards protective measures (use of masks, social distancing, hand washing, general hygiene and the isolation of infected persons). This study puts to question the silence of Cameroonian museum in the face of this pandemic on the one hand and the apparent complacency of their promoters on the other. This endeavor represents a

¹⁰According to E. H. Odetokun (2021), the mean knowledge score was 14.7 ± 2.3 , from a maximum obtainable score of 20. Most respondents (61.6%, $n = 885/1437$) had satisfactory knowledge of the disease, and the internet was the main source of information for most respondents (83.7%, $n = 1204/1437$). Moreover, most (78%, $n = 1127/1437$) of the respondents knew that COVID-19 was different from the common cold. The majority of the respondents (83%, $n = 1195/1437$) knew that it is possible to have asymptomatic COVID-19 positive patients. Most of the participants (95%, $n = 1365/1437$) also knew that most symptoms appear between 1–14 days. Most respondents also correctly identified several symptoms of COVID-19, knew how to kill (inactivate) the virus, and recognized the importance of hand-wash in reducing the chances of contracting the disease. All of the independent variables (age, gender, level of education, background, and nationality) were significantly ($p < 0.05$) associated with the knowledge of respondents about COVID-19.

wake-up call and advocacy for these failed museums to wake to their responsibilities as social educators and silent media outlets.

3. REHABILITATION OF THE CAMEROON MUSEUM

One of the principal missions of the museums has been to educate and transmit values that are dear to human society and its development (African Union, 2021). Today, these values are no longer limited to tangible and intangible heritage but embrace the whole gamut of solutions to the ever expanding spectrum of human challenges. Museums have become classical memorabilia for happenings of overwhelming magnitude – the slave trade, Apartheid, genocides, military policy, ideologies, Marxism, Communism, religion, and more. Between the 1960s and 80s, museums in Eastern Europe, the Soviet Union, Japan and parts of Asia played vital roles in disseminating one ideology or the other around the communist and capitalist divide of the Cold War (Abdelhafiz A.S. et al., 2020). Ever since the demise of that war, the International Council of Museums (ICOM) embarked on giving museums a new impetus as agents of social and community development and has continued to do so till date. In an era of the corona virus pandemic, the role museums can play could and should go beyond the traditional functions of conservation and exhibition. In Cameroon where many are yet to believe in the existence of the virus, where government still grapples with figures, masks and a consistent policy, where traditional medicine has made nascent yet encouraging inventions in defiance of docile modern medicine, the search for solutions has to be a synergy of all stakeholders and shades of opinion.

No doubt, most Cameroonian museums have since their establishment existed and operated as manual and analogous units with functionless communication units to enhance visibility. This made it virtually impossible for them to play their communication and educational roles. In recent times, museums across the world have extended into the online space of social media and virtual worlds, where knowledge is constructed through a democratized process of contribution, recommendation and commentary (RDA, 2015). Instead of seeing

knowledge construction as the preserve of experts, to be published and consumed through mass media, knowledge ought to be created through a process of continual construction and adjustment through electronic and digital applications. Unfortunately, most Cameroonian museums lack internet connectivity, lack websites and blogs. Some are located in localities with either constant power failures or no power at all. The social learning process of, for example, Wikipedia is based upon a dynamic medium where knowledge is publically constructed, discussed, and refined. The predominantly community-based Cameroonian museums are out of the reach of these platforms.¹¹ Little wonder, these museums were taken by surprise when the pandemic broke out; they could neither cope with the welfare needs of their personnel nor the innovative exigencies of their audiences.¹²

Like elsewhere on the continent, efforts should have been made by Cameroonian museums to integrate museum social knowledge construction and programs into curated online exhibitions, and audio-visual platforms like local and international TV and radio stations. These common non-interactive practices have been carried out by countless museums elsewhere, and one wonders why not in Cameroon. This approach would have constituted a significant shift away from only presenting authentic objects, towards building a multiplicity of personal and collective authentic experiences. It would create a distributed web for meaning making (Ibid). These experience-sharing activities could be confined to carefully-managed online spaces representing the museum's physical collections. Alternatively, they could be conducted outside the control of museums through visitor websites and blogs. This paper explores how museums could better harness and manage the anti-covid-

¹¹ This distributed and visible process of meaning making aligns with social constructivist theories of learning, as well as more innovative approaches such as rhizomatic and connectionist learning.

¹² The function of social media, to co-create dynamic and undifferentiated knowledge, does not sit well alongside the established role of museums as solid architectural sites for careful curation and display of lasting historic artefacts.

19 crusade through oral and visual conversation, experience-sharing and capacity building with little or no cost. Such innovations are suited for Cameroonian museums many of which operate without annual budgets. This explains why they made a very little or no contribution to the fight against the pandemic.

As the pandemic swept across the world, leading to the closure of institutions new challenges emerged for museums. They include rethinking the museography of their physical collections, reviewing conservation protocols and new public health logistics, revising engagement with the public and access procedures, readapting the conservation and safeguard of collections, facing the dangers of having to cut down staff, ensuring social distancing at all times, revamping and readapting training programs, sustaining volunteer programs and internships, moving from physical to virtual exhibitions (online), and above all, facing the challenge of documenting this unique moment in human history for future generations.

4. MANAGING THE COVID-19: THE CAMEROON RIPOSTE

Like the rest of Africa, Cameroonians have been divided over their perception of the corona virus, with a vast majority seeing the invisible hand of the west both in the origins of the virus as well as its management. Consequently, pockets of skeptics persist here and there as manifested by the initial indifference to government-prescribed protective barrier measures. Most containers and kits adapted for hand washing have gone dry of water, soap remains a luxury around these kits, where masks haven't fallen below the chin, they are in pockets, handbags or left at home, the gel (sanitizer) is visible perhaps in some offices, super-markets and pharmacies, but elsewhere, they are meant to be displayed when authorities pass by. Despite the numerous deaths, Cameroonian families are yet to associate them with Covid-19. This has been the more so due to the stigma attached to Covid infections and deaths. No family wants to accept that its loved one died from the pandemic. An alleged Covid infected patient was recently evacuated from the Jakiri District Hospital to the Shisong Catholic Hospital (North-

West Cameroon) where the patient passed on but the official reason for the evacuation was typhoid fever. This happened because the Jakiri health personnel feared to be lynched if they declared the patient, positive of the corona virus (Enesta Yika, 12/042021).¹³ Talking about the stigma, similar cases of patients either abandoned by health personnel to die or simply denied treatment abound in Cameroon's cities of Douala and Yaoundé. The result has been casual treatment of and scant consideration for deceased members and their entourage.

4.1. Role of the state

Upon the outbreak of the corona virus in the Wuhan Province of the People's Republic of China in December 2019 and the dissemination of news of its rapid spread to Asia, Europe and Africa, the World Health Organization (WHO) announced that the virus had gone from an epidemic to a pandemic, with over 170,000 cases in 146 countries and about 6,500 deaths (Abdelhafiz A.S. et al., 2020). Cameroon, like many states was not spared. From the very first hours of its emergence, the Government elaborated a prevention and response plan to stem its spread. Initially, 10 persons were diagnosed and moved to specialized health services (Roy D, 2020). On the instructions of the Head of State, His Excellency Paul BIYA, an inter-ministerial consultation was held on Tuesday, 17 March 2020, to assess the situation and identify appropriate actions to be implemented. The outcome was a document that came to be known as *Government Response Strategy to the Coronavirus Pandemic (covid-19)*. At the end of this meeting and in line with the above strategy, the Prime Minister in a special statement announced that as from Wednesday 18 March 2020, till further notice:

Cameroon's land, air and sea borders are closed. Consequently, all passenger flights from abroad are suspended, with the exception of cargo flights and vessels transporting consumer products and

¹³ Enesta Yika, sister and care-taker of the bereaved also revealed to us that the same nurses who told her to take her patient to Shisong confessed to her a week after the patient's death that they had lied to her on the cause of death. He was actually a victim of the corona virus.

essential goods and materials, whose stopover times will be limited and supervised: Cameroonians who wish to come back home should contact our diplomatic representations; the issuance of entry visas to Cameroon at the various airports shall be suspended; thirdly, all public and private training establishments of the various levels of education, from nursery school to higher education, including vocational training centers and professional schools, are closed; gatherings of more than fifty (50) persons are prohibited throughout the national territory; school and university competitions, like the FENASSCO and University games are postponed; under the supervision of administrative authorities, bars, restaurants and entertainment spots are systematically closed from 6 p.m.; a system for regulating consumer flows will be set up in markets and shopping centers; urban and inter-urban travel was only allowed in cases of extreme necessity; drivers of buses, taxis and motorbikes are urged to avoid overloading; law enforcement officers will ensure they comply; private health facilities, hotels and other lodging facilities, vehicles and specific equipment necessary for the implementation of the COVID-19 pandemic response plan in Cameroon may be requisitioned as required, by competent authorities; public administrations shall give preference to electronic communications and digital tools for meetings likely to bring together more than ten (10) people; missions abroad of members of Government and public and para-public sector employees are hereby suspended; finally, the public is urged to strictly observe the hygiene measures recommended by the World Health Organization, including regular hand washing with soap, avoiding close contact such as shaking hands or hugging, and covering the mouth when sneezing. (PM. Dion Ngute, March 2020)

According to ITUC-AFRICA, by May 27, 2020, Cameroon had 5,436 confirmed cases of COVID-19, 1,996 recoveries and 175 deaths. The negative impact on the economy was accentuated by 800 billion FCFA in losses (Erfani A, et al., 2020). Several economic sectors, notably tourism, transport and services had been paralyzed. According to a study by the Employers Association of Cameroon (GICAM, 2020), Cameroon, which had opted for partial lockdown, had soon lifted some restrictions in order to stimulate economic activity since some sectors had crashed by 92%. Other measures taken by the state included regular press briefings involving the Prime Minister, the Health minister and the minister in charge women and the family. During various outings, these state officials presented the periodic situation of the Coronavirus in Cameroon, the need to respect government's barrier measures and the primordial role women should to play to stem the spread of the pandemic.

4.2. Social and economic measures

In addition to the thirteen restrictive measures of March 18, 2020, government took a series of steps to rescue the economy from total collapse. To deal with the socio-economic consequences of the COVID-19 pandemic, the President of the Republic called on his government to show ingenuity and creativity. On 31st March, President Biya established a special solidarity fund to fight the pandemic. According to Cameroon's presidency, the fund, initially endowed with the sum of US\$ 1,681,833 (CFAF 1.68 billion), was intended to finance operations under the strategy for preventing the spread of the pandemic in the country (Di Gennaro F. et al., 2020). On 30th April, measures aimed at cushioning the shock suffered by households and businesses as a result of the restrictions related to the fight against COVID-19 were announced by the Cameroonian Prime Minister. They covered the suspension, for a period of three months, of the payment of parking charges (a penalty for occupying port space beyond the duty-free days) and demurrage (penalty for holding a container at a terminal beyond the duty-free period) in the ports of Douala and Kribi. This concerned only essential goods

(Abdelhafiz A.S. et al., 2020)¹⁴. In addition, at the tax level, the government prescribed full deductibility for the determination of corporate income tax of donations and concessions granted by companies for the fight against the COVID-19 pandemic; exemption from the axle load tax for the 2nd quarter; exemption from the tourist tax in the hotel and restaurant sector for the rest of the year 2020, starting from March 2020 (Roy D, 2020). The Government also decided to cancel penalties for late payment of social security contributions due to the National Social Insurance Fund (CNPS), the payment between May and July of allowances to workers whose employers found it difficult to pay their social security contributions, an increase in family allowances from CFAF 2,800 to CFAF 4,500 and a 20% increase in pensions (Ohia C. et al., 2020). The management of this fund was strongly criticized by the social partners, who considered the measures taken insufficient to alleviate employers' tax burdens. Further, none of the accompanying measures addressed the loss of earnings of workers who went on unpaid technical leave.¹⁵

4.3.Private initiatives

These initiatives were championed by the civil society led by trade unions, the church and other private corporate bodies. It must be noted that Cameroonian's trade union landscape was and remains very complex and dominated by pluralism (Erfani A, et al., 2020). This liberalism had unfortunately been abused by some trade union leaders who sacrificed the interests of their workers. While these unions criticized

¹⁴ This measure later had a severe impact on customs revenue.

¹⁵The management of this crisis took place under the backdrop of political division. While Cameroon was struggling to control the pandemic, opposition initiatives suffered from various fortunes. For having undertaken to distribute masks and hydro-alcoholic gels to the population, six members of the solidarity operation "Survie-Cameroun", launched by the opposition leader, Maurice Kamto, were arrested. After five days in prison, the six detainees accused of "gang rebellion" were finally released following multiple pressures. The arrest and detention of these people caused a wave of uproar in the country and beyond. For Ilaria Allegrozzi, senior Human Rights Watch (HRW) researcher for Central Africa, the arrest highlighted the government's desire to suppress any efforts by the opposition, fuelling political divisions at a time when national cooperation is more necessary than ever.

the government repost for being cosmetic and far from yielding desired results, government accused them of being manipulated by politicians and enemies of the state. In a more constructive manner, the church, led by the Catholics and PCC opted for grassroots approach to assisting not only victims of the pandemic but also refugees of the Anglophone crisis which coincided with the pandemic. The roles of the Ayah Foundation, "Survie-Cameroun" and other NGOs though capital were systematically frustrated by the state which saw their efforts as ruining the credibility of state efforts. To these, must be added the efforts of traditional healers and African pharmacopoeia, the likes of Mgr Samuel Kleda, the Association of traditional healers of the Nde and others whose research endeavors produced credible treatments for the containment of the pandemic. They also boosted the immune system and enhancing protection from COVID-19 infections.

This paper argues that if Cameroonian museums had used the practical, physical and digital tools within their reach, they would have stayed open and championed the fight against the pandemic more vigorously.¹⁶ Museum environments and visitor services, their exhibitions, programs, technologies, activities and events if well offered, would have been intentionally designed to aggressively sensitize the public, distribute face masks and provide the much needed preventive education. In doing so, the museums would have communicated their own identities through distributed anti-Covid gadgets, flyers, wall panels, conferences, outreach caravans, face masks, sanitizers and more. As places of awe and wonder, museums would have welcomed strangers and initiated the youth into proper hand washing using locally made soaps, the use of sanitizers, social distancing, avoiding crowded places, and more. Unfortunately, Cameroonian museums left these indirect forms of communication to chance. They failed to face challenge of the time and therefore failed to

¹⁶ The museum communicates through its website and signage, its accessibility, its architecture, the welcome and orientation it offers, the rest rooms, seating areas, retail outlets and cafes it provides. Depending on the type of experience a visitor is seeking, some of these may be the most important forms of communication they encounter.

enter the national book of records on the Covid-19 ripost in Cameroon. At such times visitor-welfare should have been the priority through deliberate communication of appropriate messages as well as demonstrations.

5. CAMEROON MUSEUMS AND THE ANTI-COVID CRUSADE

Museums like other social institutions respond to shifts in social phenomena and the rules defined both by ICOM and local cultures on which they are anchored. This partly explains why museums have progressively shifted from their traditional roles of acquisition and conservation to embrace a broader spectrum of preoccupations of social, political, economic and even ideological nature.¹⁷ The Apartheid Museum in Pretoria for instance opened in 2001 and is acknowledged as the pre-eminent museum in the world dealing with 20th century South Africa, at the heart of which is the apartheid story. The United States Holocaust Memorial Museum on its part is America's national institution for the documentation, study, and interpretation of Holocaust history. It serves as the country's memorial to the millions of people murdered during the Holocaust.¹⁸ Corroborating the role of museums in communicating

¹⁷The Apartheid Museum, the first of its kind, illustrates the rise and fall of apartheid. The exhibits have been assembled and organized by a multi-disciplinary team of curators, film-makers, historians and designers. They include provocative film footage, photographs, text panels and artifacts illustrating the events and human stories that are part of the horrific period in our history, known as apartheid.

¹⁸The Holocaust was the state-sponsored, systematic persecution and annihilation of European Jewry by Nazi Germany and its collaborators between 1933 and 1945. Jews were the primary victims—six million were murdered; Gypsies, the handicapped and Poles were also targeted for destruction or decimation for racial, ethnic, or national reasons. Millions more, including homosexuals, Jehovah's Witnesses, Soviet prisoners of war and political dissidents, also suffered grievous oppression and death under Nazi tyranny. The Museum's primary mission is to advance and disseminate knowledge about this unprecedented tragedy; to preserve the memory of those who suffered; and to encourage its visitors to reflect upon the moral and spiritual questions raised by the events of the Holocaust as well as their own responsibilities as citizens of a democracy.

ideologies, Kevin Coffee (2017) affirms that while serving an array of practical purposes, museums and similar cultural organizations have a fundamental function to define and control visual expressions of major social narratives. Although perhaps not as broadly influential as television, advertising or film, museums are important concentrations of ideological symbols—the “visual ideologies” of society. Coffee continues:

Museums perform a special role in communicating and legitimizing predominant social relations and the ideological views that reinforce those relations in society. The narratives conveyed by museums are generally viewed as definitive and authoritative, while the objects displayed are presented as emblematic of normative culture. Perhaps this is most overt in the national cultural centers, where the communication is most commonly practiced. (K. Coffee, 2017).

Unfortunately, Cameroonian museums failed to stand up to the challenges that led to what are now called, media museums. These museums of the post-digital period merge both traditional and digital communication to transmit messages from simple to complex to the least literate populations. Like the Holocaust and Apartheid museums, Cameroon museums would have told in the most mythical language, the story of the corona virus to those still doubting its existence; in a visual rather than textual narrative, they would convince the millions who refuse the face mask and die in ignorance; in a powerful visual language they would echo not only the need to respect the protective measures prescribed by the state and World Health Organization but also highlight innovations embraced by our educational system as a result of the pandemic, notably e-learning and other online interactions. Cameroonian museums failed to become hubs for the training of agents of online transactions, e-learning and e-commerce. The history, manifestations, transmission, prevention, riposte, impact and legacy of the pandemic would have henceforth been at the heart of the story told from generation to generation by Cameroonian museums. The present visual and museographic project therefore envisages the rehabilitation of Cameroonian museums as agents in the fight against the Covid-19

holocaust in 8 main articulations: permanent and itinerant exhibitions, outreach programs and mobile caravans, public sensitization, panels and flyers, didactic and pedagogic techniques, audio-visual testimonies, training workshops and conferences, public events, cultural evenings and open days.

5.1. Permanent and itinerant exhibitions

The permanent exhibition remains the fundamental feature of every classical museum that seeks to engage the public. This project is expected to manifest in local communities and in community museums. Dismissing any doubts as to the existence of the covid-19 would naturally be a good start for an opening exhibition. With the aid of a historical narrative the exhibition would display panels and posters of the Wuhan experience and the evolution of the pandemic through Europe, Asia and across to Africa. Other figurative imageries suitable for museum displays would include music, literature, motion pictures, or theater. These narrative forms are also more frequently explored for their formal structures by authors outside the museum. Museums and the public exhibitions therein would therefore constitute central hubs of the museographic project.

Unlike a seasonally transient piece of popular music played on the radio television, museum exhibitions connote values and permanence that are perceived to transcend other socio-cultural forms. Because public museums primarily present a visual ideology of the dominant social narrative, these organizations tend to be rather closely held and tightly monitored. Relatively few art museum exhibitions staged over the past 20 years have pricked the ideological sensibilities of the health pandemics. Since the topic is horror and the ideological expression projects toward actual questions of saving lives and erasing a horrendous legacy, the choice of exhibits must be carefully done as not to plant even greater horror into fragile minds. Whether permanent or itinerant, the exhibitions have to emphasize the forms taken by the corona virus, the variants currently ravaging the world, modes of transmission, protective kits, local treatments, government action, as well as private and community

initiatives. Exhibition themes and sub-themes would above all clarify and reinterpret often misinterpreted perceptions about the pandemic and proposed vaccines.

5.2. Outreach programs and mobile caravans

Outreach is broadly defined as those activities, processes and programs that have as goal to reach out to grassroots communities who, otherwise, are most often cut-off from mainstream programs as a result of poor communications, inaccessibility and enclavement (Di Gennaro F. et al., 2020). Poor communication most often manifests in the near absence or dilapidated road networks, lack of telephone and/or internet connectivity and logistics associated with them. This is typical of most of Cameroon's East region, parts of the North-West, the Extreme-North and the south. To these must be added the inaccessibility and enclavement of certain local communities, often as a result of low literacy levels, challenges of using mainstream official languages (English and French), backward and repulsive indigenous cultures as well as and hostility to modern literacy, health and social programs. Such communities with special needs also require specially trained personnel and adapted outreach programs. Such programs must seek amongst other things to be accepted by these communities, avoiding as much as possible, tendencies that could scare the folks, temper with their cultures or endanger their habitats. In the context of the corona virus, care must be taken to select cultural zones and localities that are receptive to such programs. Local community radios with slots in indigenous languages would also be capital in transmitting the message of the pandemic to local populations. Here emphasis should be on the history of the virus, modes of transmission, protective measures (regular hand-wash, masking, use of the sanitizer and more). Besides re-echoing government's prescribed measures, such programs stand greater chances of succeeding especially, if accompanied by the free distribution of masks, sanitizers, hand-wash gadgets as well as the installation of more bore-holes and portable water points. Above all, the involvement of local elite, use of local languages, audio-visual testimonies, free testing and convincing documentaries would guarantee

success. In these ways, museums would become veritable tools of outreach in the fight to stem the spread the corona virus.

5.3. Public Sensitization/communication

One role of the museum that has come under severe scrutiny in recent times on account of its capital role in contemporary society has been communication. Grau (2009: 30) contemplates the museum as a space created in the interest of a community where its members can find different pieces of tangible and intangible heritage that help them to build their own personality. In other words, the museum becomes a "discursive space of 'structure' or connection between the local and the global, past and present, individual and group" (Golding 2009: 199). Richard Kurin (2004: 7) argues that *the items acquired and displayed by museums become part of the collection...* Such communication ranges from individual through the collective and societal level. Richard Sandell also supports this idea and justifies the social role of the museum through the dialogue between different members in a community and the institution (Sandell 2003: 45):

"Museums can contribute towards social inclusion at individual, community and societal levels. At an individual or personal level, engagement with museums can deliver positive outcomes such as enhanced self-esteem, confidence and creativity. At a community level, museums can act as a catalyst for social regeneration, empowering communities to increase their self-determination (...). Lastly, museums through the representation of inclusive communities within collections and displays have the potential to promote tolerance, intercommunity respect and to challenge stereotypes."

In the context of the present pandemic, museum communication should target both local communities as well as cities, employing radio, television, local relay officers, town and village criers, churches and community leaders. In terms of themes, emphasis should be on changing mindsets regarding the existence of the corona virus, echoing

government' s protective measures, demonstrations on proper hand-washing, the acquisition and proper use of face masks and above all modes of transmission and prevention. This collaboration between museums and community members brings positive effects in two different ways that affect the human being individually as well as society. First, unhealthy socio-cultural practices in specific communities are used by museum professionals to design preventive steps. Second, after entering the museum, visitors from that community better understand the different traditional practices that render them vulnerable to corona infections. This dialogue turns the museum into an *unusual 'mass media* which communicates with credibility (Ohia C. et al., 2020). Consequently, communication departments in Cameroonian museums are in the best position to adopt strategies to sensitize the public about the corona virus, changing mindsets, promoting new and innovative attitudes and above all, reversing the present trend of corona infections and deaths. Despite their limited means (budgets, personnel, internet facilities and pedagogic tools...) they have the potential to research their audiences and design appropriate messages to reverse the trend of corona infections and deaths in Cameroon. Since museums as social institutions operate in partnership with other tertiary structures, collaboration with media houses is crucial in organizing public events, exhibitions, mutual promotions or creating TV shows to promote the museum's anti-corona programs. A series of materials and hand-outs would render such public presentations even more feasible for museums while making the exhibitions more complete and attractive. The public relations activities of museums have to be initiated and rendered innovative. Until this is done and a public relations plan put in place, the anti-Covid story will remain a stale narrative for Cameroonian museums.

5.4. Billboards, wall panels and flyers

The success of Cameroonian museums in championing the anti-Covid crusade also rests among other things on essential pedagogic tools such as billboards, wall panels and flyers. An intense promotion of the museum throughout the nation would tremendously enhance the success of its anti-corona campaigns and programs. Computer endowment

programs can equally be essential for a good coordination of museum communication of the corona pandemic. Billboards, panels and flyers would provide basic information, documentation and orientations on the museums' activities and could do immensely well for the crusade. This public relations strategy shall be built on two levels: first, promoting the personality and new anti-corona image of museums as an institution; and second, communicating the anti-Covid story through various public relations techniques, and gadgets.

5.5. Audio-visual testimonies and training workshops

Audio-visual testimonies by surviving patients, relations of deceased victims and medical personnel could also go a long way to foster the museum's communication strategy on the corona virus. In community museums like those in the North-West region (Babungo, Oku, Bafut, Mankon) and the West region (Batoufam, Fumban, Bamendjida, Bamendjou, Dschang, Foto, etc), this strategy could also be enhanced by the use of local dialects. The same messages and testimonies could then be relayed on local radio and television. For this strategy to succeed vast training programs, for museum staff, notably the education and communication units are imperative. Such programs, beefed up by workshops, seminars and conferences, would enhance a mastery of the museum environment, its actors and target populations. The training would also sharpen the communicable messages, carry out needs assessments and elaborate road-maps for their execution. Funding such programs and trainings should not be a problem if wasteful spending on fruitless wars stops and if foreign financial assistance meant for the repost of the virus is not misappropriated or grossly embezzled as has been the case in the last two years.

5.6. Special events, evenings and open days

Special events feature prominently not only among the museum's fund-raising strategies but also boost its public image and advertise its offers to the clientele. Such occasions and open days offer splendid opportunities for communities and audiences to discover the units that comprise the museum and how the populations could benefit from them. Doubtlessly,

these are occasions to tell the corona story – its nature, modes of transmission, prevention, protective gadgets, hand washing, the use of masks and more. Above all, holding firm to the argument that the virus exists, spreads rapidly and kills could be the ideal take-off point. On such days, video projections of the holocaust caused by the virus, its manifestations, fruitless efforts of both great and small nations, as well as mass graves in the USA, Italy and China, etc. could pass touching messages to their audiences. Extending such projections and talks to scenes of most powerful airports in the world grounded, the greatest cities of the world on lock-down and the busiest streets of New York, Paris, Amsterdam, Berlin and Tokyo transformed into cemeteries could also boost the program and convince local skeptics.

CONCLUSION

From the early days of Ptolemy Soter and the muses of Mount Olympus till the 1960s, museums were concerned with acquisition, cataloguing, preservation and display of objects. However, after World War II, the museum worldview dramatically evolved towards tertiary and virtual services with visitor-centered programs taking center stage. Far from their traditional functions, museums assumed social, economic, touristic, ideological and even political dimensions. Inspired by the Holocaust and Apartheid museums, the present project-paper reaches three main findings regarding the role Cameroon museums could play in combating the pandemic. First, it identifies three principal perceptions of the corona virus in Cameroon, namely those who adamantly deny the existence of the virus despite available evidence, those who recognize strange health manifestations but associate the symptoms with existing pathologies (cough, tuberculosis and usual fevers), and finally, those who see business and a huge western ploy to depopulate Africa at the center of the pandemic. Secondly, the study reveals that while the governments repost and official anti-corona measures were largely cosmetic and inefficient, those of private initiatives, traditional healers and non-governmental organizations were more pragmatic though lacking the means to vulgarize their inventions. Finally, Cameroon museums could

become veritable instruments in the fight against the corona pandemic through exhibitions, outreach programs, public sensitization, special events, open-doors and above all training programs.

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