

Employees' Self-Perception on COVID-19 Sources of Information: Case of Higher Institutions of Learning in Buea

Busi Ernest Neba^{1*} & Gilles Yumo Nyuidzewira²

¹Department of Educational Psychology, University of Buea, Cameroon

²Advanced School of Mass Communication, Department of Advertising, University of Yaounde II, Cameroon

***Correspondence to:** Dr. Busi Ernest Neba, Department of Educational Psychology, University of Buea, Cameroon.

Copyright

© 2021 Dr. Busi Ernest Neba, *et al.* This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Received: 09 November 2021 Published: 17 November 2021

Keywords: COVID-19; Employees' Self-Perception; Information Sources Health Communication

Abstract

The study is title "Employees' self-perception on COVID-19 sources of information: Case of higher institutions of learning in Buea". Crisis communications play a critical role in crisis management and emergency response. This is because crisis management and emergency response through information from sources remains immutable. This study first and foremost seeks to investigate employee perception about COVID-19 sources of information. The study employs the quantitative research method with the use of descriptive research survey design. The sample was made up of 365 employees. Coombs' Situational Crisis Communication Theory (SCCT) is apt as it attempts to understand the subject matter. According to the findings, 62(17.0%) rely and consider information from sources very regular, 93(25.5%) regular, 63(17.3%), moderately regular, 103(28.2%), slightly regular, while 44(12.1%) is not at all regular that the Word Health Organisation is regular in providing information about the Coronavirus. To conclude, employees consider informational sources as vital in the battle against COVID-19. Thus, institutions should continue extensively using the means available to communicate about the pandemic.

Introduction

Self-perception is the process by which people develop a view of themselves. The self-view about themselves that goes with self-concept that is a set of beliefs people have about themselves, and sometimes, people suffer from cognitive dissonance at work, that is having multiple beliefs or cognition about an attitude. Resilience in crisis moments becomes very significant, that is psychological resilience where people are tough, bouncing back to adversities, emotional and physical resilience, overcoming stress and community resilience, interconnecting with others to overcome adversities. In order to counter crises, crucial decision making is needed. That brings us to the notion of crisis management, which in some cases can be a matter of life and death.

In stressful situations, people desperately seek answers and often believe the first piece of information thrown at them, regardless of the nature of the information and where it is coming from. Public opinion becomes truth before facts and sources are checked. These attitudes and beliefs can be factorized in terms of age, educational level, religion, country, state, city, neighbourhood, family background and traditions, social class, and racial background [1].

Background to the Study

As crises have become more common, so too has the notion of crisis communication. One fundamental change involves a cardinal tenet among PRs practitioners that an honest, candid, prompt, accurate, and complete response to a crisis is always called for (Small, 1991). In this perspective of crisis communication and response from stakeholders, the outbreak of the coronavirus, also known as COVID-19, is creating unprecedented social and economic upheaval globally. APCO Worldwide (2020), a global advisory and advocacy communications firm, conducted U.S. public opinion research to understand how the viral outbreak is impacting businesses and what organizations can be doing to safeguard employees, operations and reputation. It focused on tracking employees' attitudes and behaviours related to COVID-19 in a series of weekly polls with this first instalment focused on overall feelings, prevention actions, information sources and workplace impacts.

Crisis communication, then, involves the sending and receiving of messages to prevent or lessen the negative outcomes of a crisis and thereby protect the organization, stakeholders, and or industry from damage [2]. As such, it is part of the larger crisis management function (Seeger, 1998).

Banks (2002) suggests that Crisis communication is verbal, visual, and or written interaction between the organization and its stakeholders (often through the media) prior to, during and after a negative occurrence. These communication processes are designed to reduce and contain harm, provide specific information to stakeholders, initiate and enhance recovery, manage image and perceptions of blame and responsibility, repair legitimacy, generate support and assistance, explain and justify actions, apologize, and promote healing, learning, and change [3]. Crisis communication seeks to explain the specific event, identify likely consequences and outcomes, and provide specific harm-reducing information to affected communities in an honest, candid, prompt, accurate, and complete manner.

Coronavirus (CoV) infections are emerging respiratory viruses and are known to cause illness ranging from the common cold to severe acute respiratory syndrome (SARS) [4]. CoV is a zoonotic pathogen that can be transmitted via animal-to-human and human-to-human interaction [5]. Multiple epidemic outbreaks occurred during 2002 (SARS), with ~800 deaths, and 2012 (Middle East Respiratory Syndrome: MERS-CoV), with 860 deaths [6].

As of (2020), going by the World Health Organization, no antiviral treatment or vaccine had been explicitly recommended for COVID-19. Therefore, applying preventive measures to control COVID-19 infection is the most critical intervention. Healthcare workers (HC Ws) are the primary sector in contact with patients and are an important source of exposure to infected cases in healthcare settings; thus, HCWs are expected to be at high risk of infection. By the end of January 2020, then the World Health Organization (WHO) and Centres for Disease Control and Prevention (CDC) had published recommendations for the prevention and control of COVID-19 for HCWs. The World Health Organisation (WHO) also initiated several online training sessions and materials on COVID-19 in various languages to strengthen preventive strategies, including raising awareness, and training HCWs in preparedness activities [7].

In several instances, misunderstandings among health care workers (HCWs) have delayed controlling efforts to provide necessary treatment (Hoffman SJ, Silverberg SL, 2018) [-] led to the rapid spread of infection in hospitals, and put patients' lives at risk. In this regard, the COVID-19 epidemic offers a unique opportunity to investigate the level of knowledge and perceptions of HCWs during this global health crisis. In addition, we aim to explore the role of different information sources in shaping HCWs' knowledge and perceptions of COVID-19 during this peak period [8].

In Africa, Anjorin (2020) revealed that as of March 2020, there were currently over 21 000 deaths out of more than 470 000 cases from 194 countries/locations globally with Africa having low number of confirmed cases of over 2 400 and more than 60 deaths in 46 out of the 47 WHO member countries till the 25th March 2020. In Africa, Egypt recorded the first confirmed case on the 14th February 2020, followed by Algeria on the 25th February 2020, while Nigeria recorded on the 27th February 2020. The novel virus whole-genome sequence showed 96.2% similarity to a bat SARS-related coronavirus isolated in China against <80% to the genomes of SARS-CoV and <50% to MERS-CoV. Therefore, the 2019-nCoV can be considered as a SARS-like virus, hence the name SARS-CoV-2 designated by the Coronavirus Study Group of the International Committee on Taxonomy of Viruses.

Therefore, it should be noted that as a result of COVID-19 the employment industry in Cameroon just like other parts of the world have been greatly affected. This sector it should be noted employs close to 90% of the active population and accounts for more than 50% of the country's Gross Domestic Products (GDP) according to the International Labour Organisation ILO (2017).

Statement of the Problem

The current COVID-19 pandemic and its dreadful global impact is a reminder of the potential detriment of emerging infectious diseases. Fortunately, the world today is better equipped to battle this emerging beast. COVID-19 is, undoubtedly, once-in-a-lifetime pandemic. Humanity is witnessing moments of extreme

uncertainty and an unprecedented global health crisis. Although it is impossible to foresee where this pandemic is heading, certainly, a new chapter in the history of infectious diseases has just begun. COVID-19 has caused a lot in terms of how the job place environment is. therefore in an attempt to understand employees perceive COVID-19, it is instrumental to harness the flexibility and ubiquity of media technologies to increase the public's adherence to the safety measures suggested by global health organizations to combat the spread of COVID-19.

There is limited knowledge on employee perceptions about COVID-19 in terms of what institutions and organisations have done towards handling work place realities in the course of the pandemic. The research problem probes on the perceptions they therefore have about information sources amidst the spread of this pandemic. The problem therefore is how these employees perceive the handling of the crisis within their job sides in terms of information flow. The problem is therefore centered on investigating employee perceptions' of the various information sources COVID-19.

Objective of the Study

• The objective of this study is to investigate the various information sources employees' rely on concerning COVID-19.

Literature Review

Understanding the Various Information Sources on COVID-19

The Institute for Public Relations (2020) conducted a global online survey of 300 communication executives and senior leaders to determine how their company and their communication function are responding to the COVID-19. Overall, internal communication was the focus for most responses as companies take additional measures outside of the standard practices that most companies are adopting.

Ibid (2020) hold that at the level of increase in Internal Communication Resources intranets, microsites, and other internal sites, companies opened hotlines, offered FAQs on their sites, and opted for mobile apps. One respondent noted their company offered live feeds of updates from health authorities and medical experts. They also summarises actions taken at their Pandemic Preparedness Committee and relays the impact to the employee base.

In a recent study conducted by Leger (2020) [9] in an online survey using computer-assisted web interviewing technology, through a random sample of 1,526 Canadians and 1,004 Americans. Using data from the most recent census, results were weighted according to gender, age, mother tongue, region, education level, and presence of children in the household to ensure a representative sample. Going by the findings, in Canada, more than half (54%) of employees said their company was doing very good or excellent in terms of communicating information and updates to them during COVID-19. Employees at large companies (63%) were more likely to rate their employers better at communicating information and updates than employees at small (50%) and medium (52%) companies.

To the institution, in the U.S., more than half (58%) of the employees said their company was doing "very good" or "excellent" in terms of communicating information and updates to them during COVID-19. Similar to Canada, employees' at large companies (71%) in the U.S. rated their employer better at communicating information and updates than small (62%) and medium (57%) companies. In the U.S., significantly more employees said their CEO, manager, and communication and HR department were doing well at communicating than in Canada.

In terms of how often are direct supervisors/managers communicating with employees during COVID-19, In both the U.S. and Canada, employees who typically communicated daily with their supervisors/ managers before COVID-19 were communicating less frequently during the COVID-19 pandemic. Both countries saw declines of at least 20% in the amount of daily communication, with a 28% decrease in daily communication in Canada and 21% in the U.S.

In both the U.S. and Canada, two-thirds of employees said their work productivity has stayed the same during COVID-19, while at least 1-in-5 experienced decreases, and 1-in-10 experienced increases. Threequarters of employees said their relationship with their company stayed the same during COVID-19. U.S. employees were more likely to experience slight increases in satisfaction, trust, and engagement with the company, while Canadian employees were more likely to experience decreases Ibid (2020). Furthermore about two-thirds of employees in both the U.S. and Canada said collaboration with co-workers stayed the same, while at least 1-in-5 said it decreased.

Similar findings reveal that in the U.S. employees (58%) were more likely to say their company was doing "very good" or "excellent" at communicating information and updates to them than Canadian employees (54%). U.S. employees (54%) were also more likely to say the same about their CEO than Canadian employees (45%) leger (2020).

Conceptual Review

COVID-19

In today's global convergence, locally emerging pathogens have the capacity to spread rapidly and cross borders and become an imminent public health threat to the entire world. According to Wuhan Municipal Health Commission (2019), this is exemplified by the current COVID-19 pandemic where the appearance of a seemingly limited cluster of cases of pneumonia linked to a sea food market in Wuhan, China has become one of the worst pandemics in human history with a staggering number of more than 1.4 million infections in 177 countries and more than 85 000 deaths globally as of 9 April 2020. It is worth noting that only a few of the current 177 countries affected seem to have passed the peak of the epidemic while the majority of these countries are just beginning to see a surge in cases [7].

As the COVID-19 pandemic continues to move at record speed, the speed and volume of the scientific knowledge on SARS-CoV-2 and COVID-19 are correspondingly fast and unprecedented. As of 9 April 2020, the WHO regularly updated bibliographic database of publications on COVID-19 astoundingly including more than 5300 publications of which about 1800 articles appeared in PubMed indexed journals [7].

Furthermore, the urge for a swift exchange of information relevant to COVID-19 at the time of a global public health crisis to inform appropriately timed responses has resulted in a surge in preprints (un-refereed manuscripts that have yet to undergo peer review). As of 10 April 2020, there were more than 1300 preprints related to the COVID-19 research. As a result of this unprecedented rapid and effective scientific response and prompt information sharing, it took the scientific community a few weeks to characterize the outbreak, identify the causative agent, share its genome, and develop highly specific diagnostics. For the first time in the history of pandemics, a prompt and real-time communication of knowledge and sharing of information between scientists, infectious disease specialists, public health professionals, policymakers, and the general public is possible.

A crisis can be local or international, economic or cultural and natural or human-made. Consequently, scholars have tried to develop typologies, using the three critical elements of a crisis mentioned above, in order to understand how they differ and how they pose different challenges in managing them (Boin, 2016). When looking at the threat element of a crisis, first a distinction can be made of what it will impact. A crisis can namely endanger the health and safety of people, but it can also be related to the performance of a public institution or organization which threatens their legitimacy.

Kreps and Thornton (1984) defined health communication as concerned with human interaction in the health care process, focusing on the needs of patients/consumers in health-care settings, but also noting the levels at which communication processes and effects may be examined (intrapersonal, interpersonal, group, organizational, public and mass communication).

Communication Channels

Communication being a day to day activity is a process incomplete without a channel. The channel is a vital link in communication and it is important to know the channels to make communication effective. Payne (2001) [10] defined channels as the means used to transmit the message from sender to receiver. Just as television programmes broadcast over many channels, messages can be transmitted through many channels. The choice of channel depended on time available, expenditure involved, urgency of the information and intellectual and emotional state of the sender and receiver.

Bizmove.com (2002) [11], in their article on 'Communicating within an organization' explained that the communication channel selected for transmitting a message plays a significant role in maintaining the quality of the original message in its passage from the sender to receiver. The sender, given the opportunity to weigh the merits of using an oral or written communication, or a combination of the two, selects the most effective for the situation.

In the case of Cameroon, there is a campaign for the vaccination of civil servants, with the Johnson and Johnson vaccine and sinopharm vaccine, though many workers and civil servants are reluctant to take the vaccines due to unknown side effects. Campaigns have been organized in the past for administrators, lecturers, students in the University to get vaccinated before entering University campus, though many reluctantly did not take the vaccine.

Theoretical Review

Situational Crisis Communication Theory (SCCT) by Timothy Coombs, 1995

Developed and refined by Coombs, Situational Crisis Communication Theory (SCCT), is comprised of three elements: the crisis situation, crisis response strategies, and a system for matching the crisis situation with the crisis response strategies (Coombs 2008). As a result, crisis planners are able to identify the factors which pose threats to the reputation of an organization then utilize them to determine the most appropriate communication strategies to be implemented during a crisis response endeavour.

This theory is therefore important because it reminds institutions to prioritize public opinion than its own needs when responding to a crisis (COVID-19). Just as in any organizational action, the focus is on the employee's success, not the organizations'. This is because what stakeholders want to hear is what's going to make them trust the organization again. This therefore entails employers putting aside their pride and taking responsibility for their actions, in the hopes that their honesty will regain their employee loyalty. Within the framework of this study, employee perceptions about COVID-19 and how employers respond towards the crisis demonstrates the way the pandemic can or has been handled within institutions. Perceptions usually help institutions understand the level of trust and satisfaction employees have in handling a crisis that has to do with their safety and that of the society.

Research Methodology

A scientific theory used, most be one that has for a long time stood the test of misrepresentation or forgery. The main objective of the science is to develop satisfactory and convincing explanations to all what baffles us and that seems to require explanations POPPER K (1969-1971). The quantitative type of inquiry provide specific direction for procedures in a research design. With quantitative research, it is possible to collect enough review of related literature and sample the population through the survey.

Population of the Study

The population of the study is made up of employees' who form the middle management sector of higher institutions in Buea, in the SW Region of Cameroon. These institutions include; University of Buea (UB), Catholic University Institute of Buea (CUIB), Higher Institute of Management Studies (HIMS), AND Higher Institute of Business Management and Technology Buea (HIBMAT). The study was conducted among middle/low level employees in Buea. The categories chosen were thought to be involved in the low level management, decision making and operations of their work places. The study population was 800 employees within the four selected higher institutions of learning individual university sources. Going by the Research Advisors (2006) sample size table when calculating the population to be sampled and finally obtained 396 employees as the one to be sampled out of the above N of 800.

Area of the Study

The main study area is the South West region with a surface area of about 25 419km² and a population of about 1 427 076 persons, and six divisions that include Fako, Lebialem, Manyu, Meme, Ndian and Kupe

Muanenguba with their headquarters Limbe, Menji, Mamfe, Kumba, Mundemba and Bangem respectively. The subdivisions as stipulated by Decree No.008/376 of 12 November 2008 [12], organising the administrative setup of Cameroon according to subdivisions include Tiko, Limbe 1,2,3, Buea, Muyuka and Idenau (West Coast) in Fako Division.

Instrumentation

In other for us to carry out our indirect observation and get the valid information a questionnaire was formulated with 22 questions which were mostly closed ended and a few opened ended questions on *"Employee Self-Perception on COVID-19 Sources of Information: Case of Higher Institutions of Learning in Buea"*. The reason being that the questionnaire designed aimed at keeping it short and simple (KISS), so as not to bore the respondents. The main tool for this research in terms of instrumentation is the questionnaire within the survey method of data collection and also a primary source of information. It also allowed the researcher to control the answers participants can give for ease of data analysis and coding. Survey methods rely on use of questionnaire as they can be distributed to a wider number of participants to increase the reliability and validity of research findings.

Validation of the Study

Validity looks at the extent to which a study if carried out once more, can obtain the same accurate. The instrument used which was questionnaire can be tested again to obtain similar results. This is so because the sample population represented the population of employees who have an understanding of the subject matter. Additionally, the validity was realised because measures were taken to ensure that the questions and words used actually measure the exact issue the study is out to investigate (perception).

Findings

Understanding the various information sources employees rely on about COVID-19.

Terms	Very regular	Regular	Moderately regular	Slightly regular	Not at all regular
World Health Organization	62(17.0%)	93(25.5%)	63(17.3%)	103(28.2%)	44(12.1%)
National agency in Cameroon (Ministry of Health)	41(11.2%)	56(15.3%)	109(29.9%)	90(24.7%)	69(18.9%)
Regional health Delegations	32(8.8%)	70(19.2%)	124(34.0%)	87(23.8%)	52(14.2%)
Hospitals/academic medical centres	8(2.2%)	33(9%)	96(26.3%)	54(14.8%)	174(47.7%)
Mainstream local media(TV, radio, newspaper)	35(9.6%)	130(35.6%)	110(30.1%)	64(17.5%)	26(7.1%)
Mainstream foreign media (TV, radio newspaper)	58(15.9%)	104(28.5%)	122(33.4%)	62(17%)	19(5.2%)

Medical practitioners con- nected to my organization	39(10.7%)	107(29.3%)	116(31.8%)	83(22.7%)	20(5.5%)
Cameroon's leaders)President, Prime Minister, Ministers)	48(13.12%)	99(27.1%)	126(34.5%)	75(20.5%)	17(4.7%)
Online websites	39(10.7%)	107(29.3%)	115(31.5%)	76(20.8%)	28(7.7%)
An unaffiliated medical prac- titioner	53(114.5%)	144(39.5%)	88(24.1%)	56(15.3%)	24(6.6%)
Social media(Facebook, Twitter, Whatsapp)	33(9%)	118(32.3%)	111(30.4%)	84(23%)	119(5.2%)
Friends	32(8.8%)	111(30.4%)	126(34.5%)	75(20.5%)	21(5.8%)

Source: Author's field work (2020)

As per the table above, 62(17.0%) very regular, 93(25.5%) regular, 63(17.3%), moderately regular, 103(28.2%), slightly regular, while 44(12.1%) is not at all regular that the Word Health Organisation is regular in providing information about the Coronavirus.

Interestingly, similar findings reveal that when it comes to the Cameroon government (President, Prime Minister, Ministers etc.), 41(11.2%) consider them very regular, followed by 56(15.3%) who think they are regular, 109(29.9%), moderately regular, with 90(24.7%) slightly regular, meanwhile 69(18.9%) consider them not at all regular in providing information about the pandemic. The rest of the information in terms of how regular other stakeholders in combatting the spread of the virus by communicating information has been presented extensively in the table above.

Discussion of findings

✓ To investigate the various sources of information employees rely on about COVID-19.

Discussions from the outcome of the study as presented before now at the level of results indicate that employees rely a lot on different stakeholders in getting COVID-19 communication response. The study has highlighted these stakeholders to be employers, World Health Organisation, Presidents of Cameroon, Prime Ministers of Cameroon, Ministers, local health authorities etc. on information about the coronavirus. These statistics as already presented, goes in line with literature based on more than half of the employees sampled and who revealed that their institutions were doing a lot in terms of communicating information and updates to them during COVID-19. This explains why emphasis was laid significantly with more employees of the opinion that their employers, and other departments were doing well at communicating information about COVID-19.

This closely relates with the findings of the Institute for Public Relations, IPR (2020) [13], which conduct a study of 300 communications executives and senior leaders from to gain a better understanding of how employees in their respective institutions were prepared and communicated about COVID-19 with employees. More than half of respondents said COVID-19 has been adequately communicated by employers and in mitigating the negative impact it can have on their business operations.

It is important to stress that as an outcome of the findings, organisational leaders are leaning into their communication function as an essential resource to help them deal with COVID-19. According to IPR (2020) [13], more than three-quarters of respondents said the communication function by employers and the organization is very important to their company's COVID-19 response. Communicating to employees was therefore remains an essential priority respondents, especially around operational changes and precautionary measures.

Regular and reliability in sources when it comes to how organisations communicate during a crisis is instrumental in getting updates and information on the COVID-19 pandemic. The outcome of the findings as revealed that employees consider sources like the World Health Organisation as one of the most regular and reliable source of information on the pandemic. It equally further reveals their regular and reliability of these respondents on employers, the government of Cameroon, Ministers and other local health bodies as some other regular and reliable sources of information on the pandemic. The deductions here indicates that more than half of employees as already presented in the results of said those were the regular and reliable institutions/individuals in terms of communicating information and updates to them during COVID-19.

This aligns with the ideas of Coombs (2010) [14] in determining the success rate in terms of crisis response which includes the ability to ensure the sources the information come from is reliable. This deals with the reliability of the actors involved in crisis response strategies. This is because this aspect helps in instances of the repairing of reputation, diminishing negative affect, and the prevention of negative behavioural intentions. Be deduction, the response from institutions about COVID-19 places emphasis on the victims' perception of an organization in assuming their rightful responsibility in their part of the crisis [15-18].

Conclusion

At this juncture, it is important to know that based on the study, trust and reliance on information sources about Covid-19 has resulted to majority of employees' taking precautions to prevent the spread of virus. The most common actions currently being taken: frequent. It is important to stress that going by the study's results, majority of employees indicated that they follow laid down precautions on washing of hands, social/ physical distancing, use of hand sanitizers and wearing of face masks, while some have been straying at home before now and have cancelled a lot of travelling trips. Therefore resilience becomes very important, bouncing back to the adversities, that is mental resilience, emotional resilience, physical and community resilience.

Bibliography

1. Fearn-Banks, K. (2007). Crisis communications: A Casebook Approach (3rd ed.). New York, New York: Lawrence Erlbaum Associates, Inc.

2. Coombs, W.T. (1999). Ongoing Crisis Communication: Planning, Managing, and Responding. Thousand Oaks, CA: Sage.

3. Seeger, M. W., Sellnow, T. L. & Ulmer, R. R. (2003). Communication, organization and crisis. West port, CT: Quorum.

4. Yin, Y. & Wunderink, R. G. (2018). MERS, SARS and other coronaviruses as causes of pneumonia. *Respirology*, 23(2), 130-137.

5. Li, Q., Guan, X., Wu, P., Wang, X., Zhou, L., Tong, Y., Ren, R., *et al.* (2020). Early transmission dynamics in Wuhan, China, of novel coronavirus-infected pneumonia. *New Engl J Medi.*, 2020 Jan 29.

6. Bhagavathula, A. S. & Shehab, A. (2019). The story of mysterious pneumonia and the response to deadly novel coronavirus (2019-nCoV): So far!. *Emirates Med J.*, *1*(1), 7-10.

7. World Health Organisation (2020). Outbreak Brief #11: Coronavirus Disease 2019 (COVID-19) Pandemic Date of Issue: 31 March 2020. Data sources: World Health Organization and African Union Member States.

8. McCloskey, B. & Heymann, D. L. (2020). SARS to novel coronavirus - old lessons and new lessons. Epidemiol Infect. Perceptions about COVID-19 and the employer response. KRC Research, Vol 1. Micho Spring Chair, Global Corporate Practice.

9. Leger (2020). Report: How engaged are employees during COVID-19? Institute for PR. An IPR Signature Study. Presented by the IPR Organizational Communication Research Center.

10. Payne, B. K. (2001). Prejudice and perception: The role of automatic and controlled processes in misperceiving a weapon. *Journal of Personality and Social Psychology*, 81(2), 181-192.

11. Bizmove.com (2002). Communicating within the Organisations. BizMove.com-The small business knowledge Base, RL.

12. Decree No 008/376 of 12 November 2008). Sub-divisional Structural adjustment in Cameroon.

13. IPR (2020). Leadership Perspectives: Leading and Going Ahead Through COVID-19. 3rd series of branded research. An e-book by the Institute for Public Relations and Peppercomm on how communication leaders are responding.

14. Coombs, W. T. & Holladay, S. J. (Eds.) (2010). *The Handbook of Crisis Communication*. Malden, MA: Wiley-Blackwell.

15. Boin, A. P. 't Hart, Stern, E. & Sundelius, B. (2005). *The Politics of Crisis Management*. Public Leadership under Pressure. Cambridge University Press, New York.

16. Bundy, J., Pfarrer, M. D., Short, C. E. & Coombs, W.T. (2017). Crises and crisis management: Integration, interpretation, and research development. *Journal of Management*, 43(6), 1661-1692.

17. ILO (2020). Prevention and Mitigation of COVID-19 at Work. ACTION CHECKLIST.

18. Kreps, G. L. (1990). *Communication and Health Education*. In E.B. Ray & L. Donhew (Eds). Communication textbook series. Communication and health: Systems and applications (p.187-203). Lawrence Erlbum Associates, Inc.