

A Grounded Theory Study of ICT & Social Media Supported COVID-19 Containment in the Context of the “Anglophone Crisis”: A Case Study of Bamenda, in the North-West, Cameroon

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Abstract:- The ongoing Anglophone crisis and measures to manage the spread of novel Coronavirus (COVID-19) pandemic has severely tested the Cameroon’s preparedness in crisis containment systems especially in the Bamenda in the North-West region. The aims of the research were to understand and contextualize the behavior of Bamenda people towards Information and Communication Technology (ICT) communication tools and social media interventions for the containment of the spread COVID-19 pandemic as they continue to confront the impacts of the Anglophone crisis misinformation and disinformation; to date literature on this topic is limited. The study approach examines the people’s ideas, mindsets, views, behavior, attitudes, perspectives, evaluation, acceptance, and utilization of ICTs and social media towards COVID-19 containment measures in the context of the Anglophone Crisis. A conceptual grounded theory [ICT Communication Tools and Social Media Acceptance in Crisis Context (GT-IACC)] is generated able to explain what happened, predict what will happen, and interpret what is happening in our area of formal inquiry. The conceptual grounded theory supports understanding of facilitators and challenges to use of the ICTs and social media by Bamenda people. This research provides a number of implications for the government, practitioners, policymakers and researchers for the effective utilization of the existing ICT interventions and for the future potential research and technological development to the containment of the pandemic spread of COVID-19 and future pandemics.

Keywords:- COVID-19, Coronavirus, Anglophone, Crisis, ICT Intervention, Social Media, digital intervention, Grounded Theory Research.

I. INTRODUCTION AND BACKGROUND

Bamenda, the capital of Cameroon's northwest region, has been at the heart of a three-year conflict between Cameroon government troops and armed groups that are fighting to create a state they call Ambazonia. Frequent gun battles, lockdowns, more hunger, more unemployment, hospitalizations, road blocks and now the COVID-19

pandemic have made life difficult for the majority of the Bamenda English-speaking population. Governments around the world introduced suppression and mitigation measures to contain the spread of the pandemic. Each country has its capacity and reacts according to its perception of threat, economy, health care policy, and the health care system structure. The Cameroonian government instituted the policy of ‘containment’ as the national strategy in the fight against transmission of COVID-19. In this study, ‘containment’ refers to the measures that were put in place by the government to restrict movement and human interaction and educate the citizen.

Many people agreed that the genesis of the ongoing Anglophone crisis started in October 2016 with protests between lawyers and teachers in the Anglophone regions, in Bamenda, who were protesting against the use of French rule in their courts and schools. During these peaceful protests, government security forces brutalized the lawyers. This reaction was not welcome by the Anglophones in general, as consequence; those in the Diaspora began spreading information about the crisis online on social media platforms. A series of drastic decision taken by the central government including internet disconnection in the area has so much negative consequences. It intensified the feeling of marginalization and the Anglophones reacted by intensifying protest both online and physical confrontation between protestant and the regular Army, leading to the arrest and death of many more people. The attempt of the government to address the crisis instead contributed in radicalizing people, resulting to the creation of mainstream separatist movement “Ambazonia”, and later leads to the ongoing arms battle against the government regular army. The central government has resolutely pursued a military solution to the conflict. The crisis appears to exposes the hypocrisy and weaknesses of the current global system. The major consequence of this Ambazonia War has been deaths, education and economic disruptions. After more than four years of the Anglophone crisis, it seems there is no end in sight. The Anglophone crisis among all the negatives opportunities it has brought to the people of the North West region of Cameroon is also seen as an information and communication crisis. Depending on who you listened to, there is insufficient information for decision making,

unreliable information for healthy public debate, inaccessible information to meet people's daily information needs, and spread of misinformation, disinformation, and fake news. The coming of COVID-19 pandemic saw a drastic acceleration of the collapse of the existing social order. People's daily lives became more difficult under stay at home orders and many became overwhelmed with disinformation. Anxiety, fear, and curiosity - major indicators of psychological distress and well-being became highly noticeable. This is what we found in our data analysis

Thus, the COVID-19 pandemic and the associated public health interventions undertaken to reduce the spread combined with ongoing Anglophone crisis have resulted in widespread and unprecedented social disruption especially to the people living in North-West, Cameroon. Cameroon at large is recording one of the highest numbers of confirmed cases of the new coronavirus in sub-Saharan Africa. Health Cluster-WHO(2020) in her bulletin Number 16 evaluated that 17 out of the 19 health districts in the north-west region of Cameroon reported confirmed cases of COVID-19, with 61% of these cases recorded in Bamenda, the capital of the region. To further explain the high percentage, the bulletin talked about the irresponsible behavior of community in respecting preventive measures and the inadequate infrastructures and equipment for COVID-19 case management in the region". The consequential collective trauma (Hirschberger, 2018) has resulted in a spike in emotional distress. The COVID-19 crisis and the Anglophone crisis has not only highlighted the critical role of ICT communication tools and social media for continued functioning of societies but has also brought to the fore the startling digital inequalities between and within Cameroon cities.

To most Cameroonians, the Anglophone crisis and the coronavirus pandemic have things in common: lockdowns, more hunger, more unemployment, hospitalizations and an ever-increasing number of deaths. As in other cities and countries, Bamenda and Cameroon's experience of the COVID-19 pandemic has gone through several waves of increasing and decreasing severity. A popular view among many residents of Bamenda is that at least with the Anglophone crisis, one knows how to respect rules like getting home early and avoiding no go areas. But for COVID-19, the risk is just so high. Nowhere is really safe.

ICT combined with social mobilization interventions are becoming weapons in crisis containment efforts. Since the whole world is fighting against the pandemic spread of COVID-19 and Cameroon has additional fight of Anglophone crisis misinformation and disinformation, the role of ICT to enhance public awareness and prevention, surveillance, diagnosis, treatment and coordinate responses for both crises has become more significant. Different social media platforms (e.g. Facebook, WhatsApp) are being used to provide authentic information as well as health alert messaging service. Other ICT-based initiatives such as developing dashboard or web portal to provide the updated statistical report on Coronavirus, digital interactive maps, awareness measures and emergency calling information or

hot-line numbers are being used to combat the spread of pandemic such as COVID-19 and to provide health services during this vulnerable period (Vera, 2020; Zaman et al 2020).

The South Korean government is a very good example of a country that has done reasonable well. They used ICTs in a variety of ways to enhance crisis communication, coordinate large-scale public health efforts and supply chains, and facilitate widespread adoption of preventive measures such as social distancing and mask wearing. Paek and Hove (2021) said in responding to COVID-19, the Korean government took different actions to facilitate behavior changes. For instance, to encourage voluntary virus testing: drive-through, walk-through, and mobile testing stations were made widely accessible. To make a variety of other behavior changes more convenient: smartphone apps were used. These smartphone apps made it easier for people to register their presence in potentially risky environments (restaurants, bars, health clubs, beaches), to verify their compliance with quarantines, and to learn where masks could be bought. South Korea's effectiveness has been attributed to a variety of factors, including citizens' cooperation and compliance with public health recommendations, as well as several measures initiated by the government such as early recognition of the threat; well-developed national response protocols and diagnostic capacities and its rapid activation; enactment of procedures for preventing community transmission; and collaborations among government, health, and private sector organizations to develop extensive treatment systems.

Statement of the Problem, Objectives and Research Questions

The twin disasters caused by Anglophone war and COVID-19 has combined to deny the people of Bamenda one of the indispensable conditions of our daily life which is communicating with and establishing relationships with the people around us. Family, friends and work environments are the most intense, trusted and comfortable environments. Such environments function as social relief for the individual (Perry and Pescosolido, 2015). Lack of social support not only leads to an increase in psychological stress, but also to a decrease in general health and well-being (Pescosolido, 1992). With the Anglophone crisis misinformation and disinformation still in active mode, the people of Bamenda have very little trust in government or political leaders to follow public health behavior changing directives. The mistrust has generated an environment where people face a fundamental problem: *how to survive amidst the health crisis (COVID-19) and the War crisis (the Anglophone problem)*. A natural tendency is to opt for a solution that primarily helps in maintaining emotional, financial, psychological and physical balance. Mass media plays a pivotal role in forming, remodelling and leading public opinion (Yang et al. 2019) and the relationship becomes even more apparent during situations of crisis (Ghassabi and Zare-Farashbandi 2015); where the media has the capability to inform, dispel misinformation or insight hysteria through headlines. Although some research has been carried out on ICT intervention in the containment of

the pandemics, there has been little analysis of the ICT and social media influences on a poverty stricken people's behavior in a dual crises containment situation. Therefore, further investigation and analysis are required to explore such issues raised due to the ICT interventions for the containment of the spread of COVID-19 pandemic and Anglophone crisis. This research is an attempt to satisfy this gap.

The problem of this study is the behavior of Bamenda people towards ICT interventions for the containment of COVID-19 pandemic spread and the impacts of the Anglophone crisis misinformation and disinformation, who were quarantined due to the Covid-19 global pandemic and deprived of their old normal habits due to both COVID-19 and Anglophone crisis.

Thus, the general purpose of this study is to explore and understand the behavior of Bamenda people towards ICT interventions for the containment of the spread of novel Coronavirus (COVID-19) pandemic as they continue to confront the impacts of the Anglophone crisis misinformation and disinformation.

For this general purpose, answers to the following questions were sought:

- a) *What influence has the ongoing Anglophone crisis played in making ICT communication tools and social media's capabilities effective or less in the containment of COVID-19 crisis spread?*
- b) *How has the use of social media platforms affected public behavioral changes toward COVID-19 as a pandemic disease and Anglophone war as a humanitarian crisis?*
- c) *As human behavior is influenced by people's knowledge and perceptions; what set of statements, principles, or ideas can we build to explain the people social relationships in the new situation?*

In this paper, theory is defined as a set of statements, principles, or ideas that relate to a particular subject. Such a theory describes, explains, and/or predicts phenomena. The research is organized as follows. Firstly, the related works for this research is presented in Section 2. Next, the research methodology is described in Section 3. Then, Section 4 gives an overview on the ICT interventions in COVID-19 pandemic. After that, the study results of FGD are discussed in Section 5. Finally, the main outcomes, implications, limitations and the possibility for future research are discussed in Section 6.

II. LITERATURE REVIEW

Detailed literature review is not a strong advocated Ground theory principles, the method used in this study. However, according to Suddaby (2006), "formulation of grounded theory was never intended to encourage research that ignored existing empirical knowledge", while Barley (1990) highlights the looming weaknesses and the impracticality of research where a researcher is completely unknowledgeable regarding the topic of

research. Considering the massive global health crisis the world is facing, numerous tentative solutions and theories have been developed as a supplementary response.

Obrenovic et al (2020) in a study relying on the Theory of Crisis Management Teams, Stakeholder Theory, and the Distributed Cognition Theory proposed an "Enterprise Effectiveness and Sustainability Model during Pandemic". The model sees the use of digitalization and ICT as one major contributor in providing enterprise effectiveness and sustainability during COVID-19. Van Bavel et al (2020) for example proposes using *insights of social and behavioral science (managing threat perception, social context, science communication, individual and collective interests, leadership and stress and coping)* to support Covid-19 pandemic containment based on the fact that the crisis requires large-scale behavior change and places significant psychological burdens on individuals.

An exploratory research by Zaman et al (2020) provides in-depth views of ICT interventions in the containment of the pandemic spread of COVID-19 by providing (a) the type of ICT solutions that are deployed during the COVID-19 pandemic, (b) the way ICTs are being used to provide the health services, (c) the types of services or supports that are received from digital innovations, (d) explore the strengths, weakness, threats and opportunities of ICT interventions to combat with COVID-19 pandemic and to mitigate future pandemics. A recent research (Chao et al., 2020) on COVID-19 media exposure documented this relationship: a study of 917 Chinese residents, assessed during the initial phase of the COVID-19 outbreak, found that new media use (e.g., online news sites; pictures, videos, news or text updates on social media) was associated with negative psychological outcomes, while traditional media use (television, radio and newspapers) was not. Garfin (2020) in another study observed that increased media exposure to collective trauma resulting from a health crisis such as COVID-19 has been associated with heightened psychological distress and impaired functioning over time.

Galaz (2009) in his work "Pandemic 2.0: Can Information Technology Help Save The Planet?" highlighted how the information technology can contribute in pandemic situation. In this research, Galaz discussed how the information technology can facilitate to provide early warning about the epidemic, create the networks for global health governance, provide communication support in a low cost, establish network among the social organization, and the likes during pandemic. Similarly, Pletzer (2008) explored the ICT services developed for reducing the Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) in context of South Africa. The study included the conventional and modern ICT applications like television, video, multimedia, web portals, mobile phones, database systems, telemedicine and tele-centers. The study highlighted the effectiveness of ICTs; and found that health and HIV prevention projects should give much focus and priorities on ICT based application despite having the digital divide in the developing countries.

Korda et al [2013] stated: Evidence about social media's impact on health knowledge, behavior and outcomes shows that these tools can be effective in meeting individual and population health needs. Much research addresses specific interventions and approaches, which vary widely in focus, target population, theoretical foundations, mode of delivery, functionality, and usability. This wide variation makes it difficult to find out what works and how, and complicates efforts to compare approaches.

Discussing on the Anglophone crisis, Ngange1 et al (2019) explored the content of information (graphics, audios, videos, texts) posted on two widely used social media platforms (WhatsApp and Facebook) in the context of the Anglophone Crisis. The authors rely on the gatekeeping theory and the agenda-setting theory to argue that ICT tools and social media mainly contributed in the distortion of information and wide dissemination of rumors. The author concluded that social media has been awash with falsehood in the Cameroon Anglophone Crisis. He recommended that users of social media should make efforts to verify the authenticity of information obtained from such media before consuming and disseminating to others. To mark the drastic role the social media platforms have played in fueling the Anglophone crisis, [78] mentioned that the Anglophone movement can be dubbed as the 'Twitter Revolution' or 'Facebook Revolution'.

The importance of ICTs extends beyond identifying, tracing, understanding, managing, treating, and perceiving pandemics (Wilson and Jumbert, 2018). More fundamentally, ICTs are our best chance to maintain social order during a pandemic. However, while ICT provides tools and applications for mental, physical and psychological health, prior research suggests these benefits (Decker et al 2019) must be cautiously weighed against the potential for harm (Haidt and Allen, 2020; Primack et al., 2017). In this regard, Alter (2017), point out that for instance online platforms are, by design, addictive. Some research even suggests that time spent on social media may be associated with increased anxiety, depression and other mental health ailments (e.g. Haidt and Allen, 2020). Each has some applicable, as well as limiting factors especially for the present study. Zaman et al (2020) provides an in-depth views of ICT interventions by providing (a) the type of ICT solutions that are deployed during the COVID-19 pandemic, (b) the way ICTs are being used to provide the health services, (c) the types of services or supports that are received from digital innovations, (d) explore the strengths, weakness, threats and opportunities of ICT interventions to combat with COVID-19 pandemic and to mitigate future pandemics.

By presenting the various efforts, it is clear that although some research has been carried out on ICT interventions and social media and COVID-19 crisis containment, however, to the best of our knowledge, no academic research or studies is conducted focusing on their influences on a poverty stricken people's behavior towards a dual-crisis containment measures.

III. METHODOLOGY

The study was conducted in the North West Region, one of ten regions in Cameroon. Bamenda (or Abakwa or Mankon Town) is the regional headquarters of the Northwest region and is also the administrative headquarters of the Mezam division in Cameroon. Bamenda city has a population of approximately 2 million people and lies 366 km northwest of Yaounde, the capital city. Prior to data collection, the researchers obtained written informed consent of the participants, with the guarantee of anonymity, privacy and confidentiality and assurance of the voluntary nature of their participation. Information on the study objectives and goals were explained in detail, and contact information of the principal investigator was provided to answer any questions of the participants.

Recruitment and participant information

Recruitment targeted people, aged 18-50. The sample selection process was based on the following criteria: 1) having lived in Bamenda long enough to experience both the ongoing Anglophone crisis and the COVID-19 pandemic, 2) having at least one year experience of using relevant computer tools or social media, and 3) acceptance of the invitation to participate in the study. A total of 29 participants met the inclusion criteria and agreed to participate in the study. This is in keeping with Glaser's (1978) suggestion that a researcher should select research areas or sites that are most likely to maximize the possibilities of obtaining data and leads for more data. Selection of the participants was initiated using purposive sampling and after the eighth interview continued through theoretical sampling until saturation was achieved. The study subjects took part in semi-structured interviews and focus group meetings in which close and open-ended questions were used to investigate the process of understanding how *the use of social media platforms affected public behavioral changes toward COVID-19 as a pandemic disease and Anglophone war as a humanitarian crisis* containment measures. This study targeted individuals from the following groups: 1) information technology professionals based on their theoretical proximity to the usage of ICT and various related tools. The researchers believe that their contribution in evaluating digital impact considering their knowledge of the field can be deterministic, 2) healthcare related professionals based on their proximity with the management of COVID-19 cases in the North-West region, 3) internal displaced people (IDP) selected based on their immediate relation with the Anglophone crisis as prime victims that experienced dramatic consequences of the crisis and are still enduring it the most up to now, 4) business people selected based on their dependency on an economy that is stable, which has been seriously disrupted at one hand by the Anglophone Crisis with multiple ghost town and insecurity issues, and at the other hand by the COVID-19 with lockdowns and demands to stay-at-home. Researchers believed that their survival experience in such period could also be very deterministic, and 5) unemployed people selected in because they also constitute a class of people who will find it very hard in surviving in this environment because their survival

often depends on little daily activities that they won't be able to conduct conveniently because of the socio-political and health crisis. After a process of awareness and invitation, some of the targeted individuals showed interest and consequently signed the corresponding informed consent. This way of forming the participating group of research participants was mentioned by Albuquerque et al (2014) as a non-probabilistic and intentional sample.

Study design

The aims of the research to collect rich data on individual experiences of using the ICTs communication tools and social media meant a qualitative research based on the grounded theory approach was the most appropriate. Aspers and Corte (2019) defined qualitative research as an iterative process in which improved understanding to the scientific community is achieved by making new significant distinctions resulting from getting closer to the phenomenon studied. Qualitative research allows researchers to discern explicit and implicit processes in their data. The Grounded theory [GT] methodology (Corbin and Strauss 2008) is rooted in landscape interpretation and symbolic interaction, and it suggests that reality exists in the meaningful social actions of individuals, which are created through interpretational interactions. GT is used to uncover such things as social relationships and behaviors of groups, known as social processes (Crooks 2001). Concurrent data collection and analysis followed the constructivist grounded theory approach developed by Charmaz (2014).

Procedure, Data collection and analysis

Individual face-to-face semi-structured interviews, focus group discussions, survey interviews were chosen as the best way to explore the participants' views. The interviews and discussions were guided by universal themes commonly found within COVID-19, Anglophone crisis and ICTs communication tools focused literature. Three different kinds of questions were employed: engagement questions – e.g. *people say covid-19 is for white people, what you think of such a statement*; explorative questions - e.g. *how do you think your digital tools helped to keep you safe from COVID-19*; and exit questions - e.g. *what is your appreciation of the impact of ICT tools and social media in fighting the spread of COVID-19 and Anglophone related information?*

The field diary, as instrument of data collection, allowed us to address the triangulation process in which the observations and reflections of the research team were documented and contrasted with the results of both interviews and focus groups. The field diary writing throughout allowed the researchers to examine emerging theoretical concepts and explore alternative interpretations and identify alternative data collection avenues. Concurrent data collection and analysis followed the constructivist grounded theory approach developed by Charmaz (2014) and the emerging theory was proposed based on the data. Table 1 show the data sources.

Table 1: Summary of data sources

Type of data	Quantity
Focus Groups interviews	7
Interview transcripts with people who use ICT communication tools and social media	4
Post interview conducted in order to illuminate an issue that had been raised by a participant but not understood by the first researcher	5
Online interview surveys by participants including those who could not be seen in person. Email questions sent by researcher as a guide.	25
Field Diary	Several notebooks and voice memos
Video recordings of interviews	non-verbal communication analysis of 3 videos made during participant interviews

Data analysis was carried out through a coding process outlined by Charmaz (2014) of initial, focused and theoretical coding and supported by memo writing. Initial codes tried to stay conceptually close to the participants' voices and joint understanding often spread over several conversational turns. Focused codes then brought the initial coded data together to build more conceptual ideas and coherence. Nvivo 9.0 was used to identify the frequency of initial codes and cross-examine across multiple levels. Theoretical coding brought the focused codes together and explored the relationships between them to create explanatory categories. Once the final explanatory categories were established, a core category was sought that determined how the categories related to each other.

The identity information of the participants in the study is presented in Table 2. Twenty-nine people who have lived in Bamenda long enough to experience both the ongoing Anglophone crisis and the COVID-19 pandemic, and have used relevant ICT communication tools or social media for at least a year, (11 male, 18 female, age ranging from 18 to 50 years) contributed to the research (see Table 2).

Table 2: Proportion of Participation

Total Participants	Age	Number	Work and Occupation Activities
Male = 11	18 to 35	8	ICT & Social Media
	40 to 50	3	Healthcare
Female = 18	18 to 35	13	Private & Corporate Business
	40 to 50	5	Registered themselves as no specific work or occupation activity

The collection of the demographic information was essential to the analysis carried out in the research. The analysis of demographic information focused in analyzing the proportion of participation, the gender contribution, age range participation, and the work and occupation of participants are represented in Table 2. Looking at the participant's work and occupation activities, the analysis provided in table 2 shows that the predominant activity for the male who participated is ICT & Social Media oriented while that of the female is what we classified as Private & Corporate Business.

For the people of Bamenda, the level of income maybe a motivating factor of acquiring these ICT communication tools and enabling infrastructure to sustain its use such as constant electricity and internet connectivity. The ICT probability rating of participants based on their financial power are shown in Table 3. This information helped the researchers to have a better understanding of the type of participants and good appreciation of the quality of the interview sessions. Analysis of the participants financial power in Table 3 shows that most participants have incomes ranging from 50 to 250 000 XCFA.

Table 3: Participants Probability of ICT usage Per Income

Total Participants	Income (XCFA)	Gender	Number	ICT Probability Rating
29	50 to 250 000	Male	6	50%
	250 000 to 500 000		5	75%
	50 to 250 000	Female	9	50%
	250 to 500 000		4	75%
	More than 500 000		3	100%
	Less than 50 000		2	25%

The study registered some participants with very high financial Power (more than 500 000 XCFA/monthly). Very few participants have income of less than 50000/ monthly.

In the present study four supporting processes of trustworthiness were applied, namely conformability, dependability, credibility and transferability. Credibility was confirmed by selecting the appropriate data collection method for the interviews. The researchers interviewed participants for their views and experiences in their practice environment. Furthermore, member check was used to prolong the involvement of the researcher to increase the credibility of the data and, after encoding, the interview transcripts were returned to the participants to ensure the accuracy of the codes and the relevant interpretations. Dependability was established by detailed and descriptive data analysis and direct references to the professional experiences of the individual. The conformability and

consistency of the analysis were maintained through research team meetings to discuss and dissect the preliminary findings. Thematic analysis and the coding process occurred through consensus, and to increase the transferability of the findings, a description of the context, selection and demographic data of the participants, data collection and the analysis process was presented so that the reader would be able to determine whether the results are transferable to other environments (Yilmaz 2013).

Identified Categories and supporting raw data extracts

The coding procedure (as described above) led to the identification of eleven categories of which 'the main trauma source' was identified as the unifying category by which all the others could be understood (see Table 4). The criteria for judgment of the core were based on the ease with which it related to other categories, the frequency of occurrence within the data and the relevance and flexibility

it had within parameters of context, strategies and consequences Charmaz (2014). At the open coding point of research, the transcribed files was processed using a thematic coding method where participants' answers were read line after line, analyzed, associated to a label corresponding to a chosen thematic and strictly related to a thematic question. It means creating memos, grouping per thematic and labeling using a coded format GrxY

(x=number of the group and Y= thematic associated – see Table 4) then associating each participant response under the corresponding research focus point. The researchers in this study continued in this way until reaching the stage of theoretical saturation, which means not only the absence of new information in the data, but also the confirmation of concepts that were clearly and accurately identified to construct the theory according to Corbin and Strauss (2008).

Table 4: Identified categories and supporting raw data extracts

Cod es	Thematic	Themes	F. T	TT T	% contributi on/ Thematic (CT)	Overall contribution/the matic
GRx A	COVID-19 Knowledge	For white people, deadly, from China	24	59	41%	71%
		Virus, airborne, affect old, affect immunity	18		31%	
GRx B	Digital Environment	TV+ Smartphone	35	64	55%	75%
		TV+ Smartphone + Computer	13		20%	
GRx C	Main Update Source of information	Social media and TV programs	27	41	66%	73%
		Mouth-to-mouth	3		7%	
GRx D	ICT Contribution	No dedicated for sensitization, for Professional	24	125	19%	80%
		No dedicated for basic necessity, for most vulnerable	29		23%	
		Usage MegaPhone, Loudspeaker, Telco SMS, radio, TV	40		32%	
		Moodle, Google Meet, Zoom, What app	7		6%	
GRx E	Impact ICT tools & Social Media	Very poor	10	23	43%	100%
		Medium	6		26%	
		Appreciable	7		30%	
GRx F	Consequences Anglophone Crisis	Family disruption	11	38	29%	45%
		Loss of relatives	6		16%	
GRx G	More Impactful Tools	Social media - WhatsApp, Facebook	21	23	91%	91%
GRx H	Crisis Conflict	COVID-19 distraction to Anglophone Crisis	7	29	24%	100%
		Anglophone Crisis distraction to COVID-19	12		41%	
		Trapped in between	10		34%	
GRx I	Behavioral Change	Major change	15	20	75%	95%
		Relative change	4		20%	
GRx J	Main Trauma Source	Anglophone Crisis	21	26	81%	92%
		COVID-19	3		12%	
GRx K	Balance Capability	Increase in traumas	10	35	29%	69%
		helpful for COVID-19	14		40%	

To deduce more meaning from the collected data, we calculated the percentage of contribution per theme (FT/TTT *100) and the overall contribution per thematic ($\sum\%CT$) with $FT=\sum$ (Strong themes) + (Medium themes) + (low themes) /Thematic. It should be noted that not all participants contribute to a given theme. From the Table 4 Analysis (F.T: Frequency Response per Theme, TTT: Total Theme per Thematic), the highest number of contributions

which generated the highest number of themes was on the thematic evaluating the *impact one crisis has on the other* (100%) with code GRxH label; and the thematic that evaluated the *impact of ICT communication tools and social media* in the containment of these crises (100%) with code GRxE label.

On the levels of knowledge about the COVID-19 and their sources of information (see Table 4 and code GRxA), the common point of the people interviewed within the scope of the study is that Covid-19 is defined as a new type of “Virus, airborne, affect old, affect immunity” and “for white people, deadly, from China”, an indication that the government containment measures and messaging are not getting through. This belief is mostly because many argue that they have never seen or know anyone diagnosed as a COVID-19 case in their community.

Participant Gr1P1 said *"HERE IN BAMENDA, I have never seen someone who has COVID-19"*. Participant GR1P4 said *"A critical look of those who died of COVID-19 shows that only old people are mostly affected. This sounds like a plan to wipe away elderly people from the planet"*.

Participant GR4P5 said: "is a flu whose effect has been over-amplified by the media causing a lot of fear and panic."

Thus, this study reveals that very few in Bamenda at the time of the field research have a good understanding of the what, how, and why of COVID-19. Researchers, therefore, believe that this lack of good knowledge determines to a large extent their attitude towards the pandemic containment measures; consequently how they use ICT communication tools and social media as a source of management support.

For their *main source of information update* (code GRxC), Social media, TV programs and word of mouth were listed as their main tools. TV and Smartphone happened to be their best digital gadgets because they provide them with a means to be informed and relate with love ones. For example,

Gr2P1 said "TV help me to see what is happening around the world, and keep me informed; although we don't always have constant public electricity",

Gr2P5 said "My phone compensate what I could not have with my TV especially due to frequent power cut, it keeps me going".

When the participants were asked what kind of changes in their attitudes and behaviors were due to the crisis containment measures and impact of ICT Communication tools, and the influence the ongoing Anglophone crisis have played in making ICT communication tools and social media's capabilities less effective in the containment of COVID-19 pandemic spread. Findings reveal that the fear resulting from the Anglophone crisis misinformation and disinformation affected the COVID-19 containment measures acceptance or interest. The Anglophone crisis related events was a more overriding issue for the people than COVID-19 crisis related events.

Participants

Gr1P5 "I don't really believe there has been any impact of digital technology here in Bamenda. So for me, it is of a very poor impact. In a scale of 100, I give it 0%".

Gr1P1 "I saw drones used to track rebels, but I didn't see any such in the fight against COVID-19"

Gr1P5 "the tools used by the government is not really digital, and if they have been, is more to engage repression on the fighters with the use of sophisticated Armor cars equipped with Hightech."

GR3P3 answering to the question if he feels the Ambazonia War related events affected the people's behavior, said: *"yes it has affected the way people use their digital devices. I can make days without checking on the updates of COVID-19, but I will not spend a single day without checking the Anglophone crisis"*.

Gr4P4 said, "100 % SURE that my ICT tools and social media allowances are more useful to me following the Anglophone crisis than the COVID-19".

GR3P3 said: "I have been affected because I lost my family members, I cannot go to my village again" or the comment of GR4P4 who said "The war has a direct impact on me personally. The fact that I cannot carry out my daily activities, I cannot do my job, I am not where I am supposed to be. I am in a different town as IDP (Internally Displaced People)."

GR3P1 "I appreciate the government a lot especially for using the television yes it can be determinant" while Gr2P6 added that "there is serious need of an upgrade in term of usage of social media as a response to COVID-19 beside the existing means such as radio and TV".

Discussing on what they considered as main source of trauma and their opinion on the handling of the crisis by the regional government; participant's mentioning the Anglophone crisis as main source of trauma [see code GRxJ] (Table 4) generated 81% contributions. The thematic with code label GRxG show that 91% of themes think *Social media - WhatsApp, Facebook* as more impactful tools in their understanding of both COVID-19 and the Anglophone crisis containment measures.

This study discovered that what people thought are easing trauma of the Anglophone crisis may actually be adding to their disillusionment. The people of Bamenda spend most of their times checking Anglophones crisis-related content using social media - mainly WhatsApp and Facebook, and this is actually used by Anglophone separatist as misinformation and disinformation platform. While the not very trusted available COVID-19 containment measures are made available using the government information tools mainly TVs and Radio programs, Anglophone crisis updates are propagated through the ICT

communication tools and social media where the people are. COVID-19 containment measures cannot be aired mainly in radios and TVs when people have no electricity to listen to radios or watch the televisions.

More detailed analysis reveal that many of the participants have not seen dedicated social media containment measures purposely developed to manage COVID-19 in Bamenda. For those who acknowledge governmental effort as somehow impactful, the study found that it is the general sensitization launched by international and local nongovernmental organization website that have helped the population of Bamenda to fight the pandemic spread in the region.

Gr1P3 said "Bamenda government approach in the management of COVID-19 is very mechanical and scaring because besides using only basic tools such as water basin and hand sanitizers, once you are confirmed positive, a test that we cannot even account for its reliability, you are treated with all stigmatization as an outcast. In the attempt to copy the western world, we do things very poorly. Only high temperature here is already enough for you to be suspected as COVID-19 positive".

In general, the COVID-19 pandemic represents a massive, global health crisis. The Anglophone disaster represents a massive localized social political intrusion into Bamenda daily life. Because the dual crises require large-scale behavior change and poses significant psychological burdens on individuals, insights from the social and behavioral sciences are critical for optimizing the response. On the discussion: *Does the use of social media platforms increase public behavioral changes toward COVID-19 as a pandemic disease and Anglophone war as a humanitarian crisis*, we note that from an ICT communication tools and social media usage perspective, the ongoing Anglophone crisis and now the COVID-19 pandemic have seen the Bamenda people adoption of digital technologies advanced twenty years in approximately three years.

Gr1P14 said "Many of our people are looking to buy android phones and internet connectivity."

This is a positive development in itself. As Braccini (2013) stated, ICT has changed the lifestyle of people and influences their behavior towards their daily activities.

Understanding the effect on the behavioral change is a fundamental objective of this study. Study findings reveal that there are some people who feel trapped in between the two crises. On the behavioral perception analysis of data as shown in Figure 1, there is a major change (75%) in ICT communication tools and social media usage based on the level of the trauma (81%) the Anglophone crisis generate on the affected individual. The same data shows a different behavioral impact on the people with COVID-19 which was calculated at (12%) with a relative change of behavior (20%). There is a very high degree of reluctance in respecting or following the COVID-19 containment

measures and taking drastic steps in stopping the misinformation.

Participant Gr4P4 said, "I feel extremely trapped because, before COVID-19, we use to run tension and go to different regions, but now, with COVID-19, the danger is real everywhere and people are asked to stay at home...".

Gr12P12 said, "I seriously feel trapped because when I or my child is sick, I am scared to go to the hospital because of fear of contracting the disease while the war is also a serious threat to our lives".

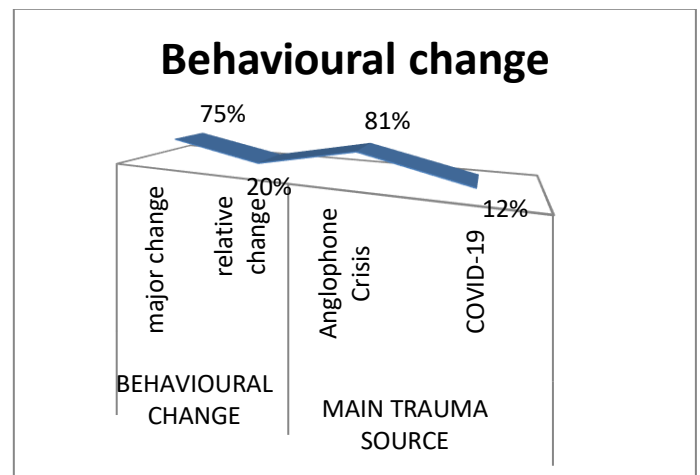


Figure 1: Behavioral perception

Gr14P14 participant said "This dual crisis situation really affected my behavior in the way I use communication tools like my phone, I was always prompted to find things on Covid-19 when it started, then later my attention shifted. Anxiety and fear make me close to my cell phone".

The behavioral perception result reveal that participant's attitude - an individual's positive or negative feelings about performing the target behavior (Ajzen and Fishbein 1980) towards their social media crisis contents influences their behavioral intention to use it even further. This is a confirmation that psychological satisfaction through ICT induced knowledge impact people perception of the usefulness of the tool.

GR2P2 said, "For me even though it is of help, but it brings trauma when you see pictures of people butchered."

Gr5P5 said, "Some of the things I see in the course of using my social media are instead making me more dismayed. Seeing so much blood or hearing about these crises is making me sick!"

These responses are example of what can be called positive values of ICT communication tools and social media in crisis containment but remarkable it also increases people negative attitude towards their information platforms. As Chao et al. (2020) have argued, increased media exposure to collective trauma has been associated with

heightened psychological distress and impaired functioning over time.

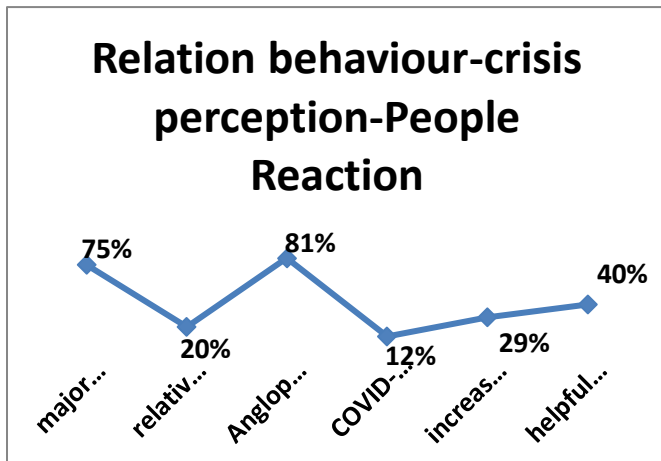


Figure 2: Relation crisis Perception to Behavior change

The use of ICT communication and information platforms is significantly increasing public health awareness in Bamenda and significantly contributing to public health behavioral change. Figure 2 summarizes the immediate relation between the perception of the dual social-political and global health crises by people and their dependent reactions which end-up affecting their behavior. The Figure illustrates that before the wave of COVID-19 pandemic, the main source of psychological trauma was the Anglophone crisis (with 81% of themes recorded in support of this argument) far above COVID (12% of themes supporting the position). With COVID-19 and even with all the misinformation and disinformation, many participants said they have started looking at more and more COVID-19 related digital content. This explains the 75% themes recorded in change behaviour (major change) while 20 % of themes show that there are still people that remain focus on the Anglophone crisis despite the COVID-19 threat (relative change).

IV. RESULTS AND DISCUSSION

The essential idea in discovering a grounded theory is to find a core category at a high level of abstraction but one that is also grounded in the data. This can be done in three stages: (i) finding conceptual categories in the data, (ii) finding relationships between these categories, and (iii) conceptualizing and accounting for these relationships through finding a core category (Robson, 2002). The conceptual grounded theory of ICT Communication Tools and Social Media Acceptance in Crisis Context (GT-IACC) (Figure 2) was developed by seeking to establish how the categories related to the identified core. This was operationalized by exploring: the causal conditions and limitations of the core category, the context within which the core category operates, the interaction and actions that take place to achieve the core category, the types of strategy required and finally the consequences of experiencing the core category

The analysis of the data resulted in a process that led to a core category (*Main Source of Trauma*) that provide explanation of how people cope with trauma generated by the dual COVID-19 and Anglophone crisis and predict the way they used their ICT communication tools and social media to contain the resulting collective trauma, where four different strategic categories were identified within this process, namely: (1) *Individual Knowledge*; (2) *Mental State*; (3) *Risk assessment*; and (4) *Conviction*. The workflow on how the four strategic categories connect and lead to the core category is depicted under Figure 4 representing the generated *Grounded Theory of ICT Communication Tools and Social Media Acceptance in a dual Crisis Context (GT-IACC)*.

The *GT-IACC* works with the identified elements to explain the people of Bamendas' attitudes, evaluation, acceptance, and utilization of COVID-19 crisis and Anglophone crisis containment measures. The *GT-IACC* is not a formal theory; it provides a framework for conceptualizing "what is important and what is not [important] in any discussions of people of Bamenda regarding their use of ICTs communication tools and social media for understanding dual health and socio-political crises containment measures.

Content of the dual COVID-19 and Anglophone messaging update constitute the main source of trauma the people are to manage. This trauma that originates from knowledge generated by usage of the ICT communication tools and social media generate differing behavioral change experience on the people. These are person's contextualization of fear, curiosity or anxiety. Depending on the perception of this feeling by the affected individual, their behavior in the use of these tools is affected thereby putting the individual maybe in a temporal mental state which are also influenced by external factors such as age, digital literacy and financial power. The individual will then have to perform a certain risk assessment to evaluate the usefulness of the platform in providing psychological balance and satisfying his survival requirements.

From the type of knowledge gathered, the evaluation may put the individual in a kind of loop where at the exit, he/she will either need to request more of the content provided by digital tools or, temporarily disconnect from the usage of these tools (Divide Point). It is the decision taken out of conviction made from the risk assessment that will then determine the tendency to follow event related to a given crisis compare to the other and the level of usage of digital tools to satisfy this need. The disconnected individual will remain in the loop with a confuse mindset so far his perception of the risk related to a given crisis is still high and during that period, there is minimum or no use of digital tools manifested by reduced desire to find more information about any of the crisis. As soon as the result of the evaluation is acceptable or convincing enough, the individual mental-state is renewed, and another behavioral change is manifested by exiting from the loop state and reconnecting with the need to use more of the digital

services to request more content related to the crisis of interest.

Looking at Figure 3 and following the flow of the arrows numbered 1 to 16 [used to demonstrate the link between elements of the model], the following are noted:

- **1 and 3:** Related update of COVID-19 and Anglophone Crisis is gathered by request of update (2 and 4) from various ICT platforms;
- **5:** Information associated with COVID-19 and Anglophone Crisis constitute a large database that happen to be the immediate source of trauma perceived by people leaving in the midst of those crises. Whenever used by an individual, it will likely improve his knowledge of these crises and later generate specific feelings that affect usage of digital tools in following these crises;
- **6:** The knowledge acquired may have one of the three following effects on the individual: generate Fear, generate Curiosity or generate Anxiety;

(impression) of the crisis contents delivered by his various ICT tools;

- **9:** This Mental-state are framed by some external factors such as Age (younger people tend to be more ICT interested), Digital literacy (those who are closer to ICT tend to be more dependent than those who are not), Financial Power (Those with better financial means tend to be more surrounded with a digital gadget than those who have less, and therefore happen to show more maturity in managing content because of constant usage and habit to see variety of content);
- **10:** The individual attitude will be somehow permanent after a Risk Assessment process where he will evaluate which of the two crises is more relevant to his psychological balance. Depending on each individual, this balance is appreciated by parameters such as the contribution of these tools to provide deterministic information to remain safe, to acquire basics necessity for his survival, etc.
- **11:** The output of the risk assessment will determine if the individual should continue with the usage of digital technology for the update of information concerning the crisis or not. He must have the conviction required to stay connected and continue in following up update through his digital tools. This is the Divide Point. At this point, depending on how much the effect the digital content affected the user, he will either choose to continue using these digital tools by Requesting More (:13) contents or will rather decide to stop/ change the way he uses his digital tools. In the latter case, there will be a kind of disconnection (14) that takes place from using these identified digital sources of trauma (ICT digital services or applications like Facebook, what app, etc). In the study, for example, the identified source of trauma is the Anglophone crisis. Some participants stopped using their social media to follow those events, meanwhile, others kept requesting for more contents no matter how violent it is because, from their assessment, it makes them conscious of their immediate environment.
- **15:** From the Divided point, the individual who from his risk assessment feels that usage of digital services is nefarious to his wellbeing, enter in a kind of a loop (turning around 8,14,15) where the only exit condition is the result of risk assessment been equal to digital content acceptance (conviction). It means for reasons like positive changes occurring in the ongoing crisis development, he will feel safe to start following back the crisis events. From that acceptance, he will therefore reconnect his mind to start using back digital tools, and request more digital content of the crisis of interest. This behavior is practically perceived in this study looking at how people who initially had the main attention focus on the Anglophone crisis while neglecting COVID-19, noticed a change of behavior when they heard there is a second vague of COVID-19 that is more dangerous. Attention shifted and they reconnected their mind in looking for more contents related to COVID-19 with their Digital tools.
- **16:** perception of the main source trauma defines if yes or no ICT usage contributes to safety and survival. Upon

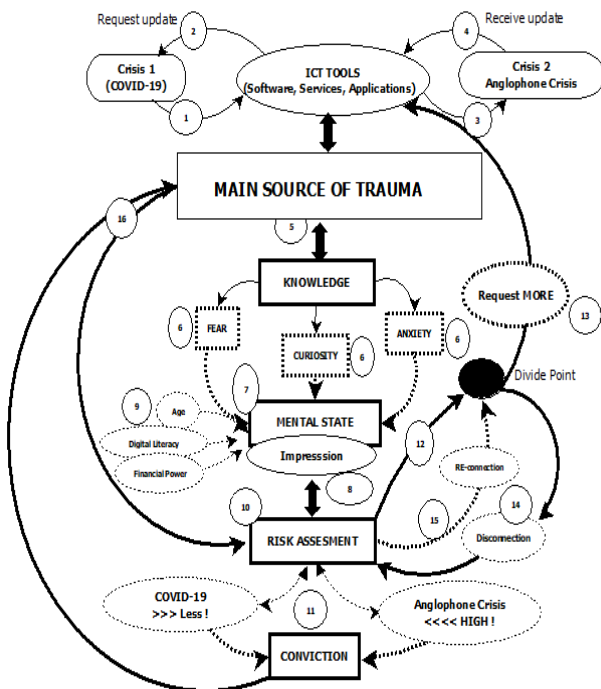


Figure 3: A conceptual grounded theory of people of Bamenda's ICT communication tools and social media acceptance in a dual crisis environment

- **7, 8:** Based on the perception of this effect on each individual, there must be certain behavioral change from the way the individual was initially using his ICT tool. For example, The Fear of seeing violent pictures showing the level of violence in the Anglophone crisis will make the individual not to find about the crisis using his digital gadget. Meanwhile, someone else may instead be anxious to look for more information that may satisfy his anxiety and procure a certain sense of safety; this condition put the individual in a temporal and specific mental state, that may evolve after proper evaluation of risk associated to each crisis and his level of acceptance

conviction, individual always look at the level of trauma caused by the content. So he is always in a Cycle where the Main source of Trauma in relation to digital containment content happened to be the entry point. However the case, individual do not definitely cease usage of digital tools, but rather continuously assess the usefulness.

The level of acceptance of a given ICT communication tools and social media in the context of this study by individual are dependent on two mains elements: The ability of the tools to provide some sense of safety to the individual (emotional balance, survival means); and the individual perception of risk a given crisis has over the other and how much that constitute a serious threat to his or her life.

Core category - Main Source of Trauma

The Main Source of Trauma under COVID-19 and Anglophone may be understood as a situation given by the new circumstances where the dual COVID-19 Anglophone conflicts have triggered a general regional transformation affecting the behavioral change experience in particular. Behavioral change experience is a person's contextualization of fear, curiosity or anxiety. The trauma here is perceived at multiple levels based on data codified from participant's contributions. Emotional (e.g. Gr1P1: "IT HAS AFFECTED ME SO MUCH! I have become a widow because of this war..."), Family Disruption (e.g. Gr5P5: "My daughter is not by me today because of this crisis especially with the shutdown of schools...") or Gr3P3: "I was based in the south-west region and I later had to move in Bamenda as an Internal Displace People (IDP) with all my children..."), Economic and Financial Challenge (e.g. Gr2P2: " I have been so affected by this crisis both psychologically and financially. I am always afraid and my business is down, goods take longer period to finish" or Gr4P4: "I lost my job in the course of these crises. My organization has to reduce people in order to minimize payment load.), Health Challenge (e.g. Gr2P2: "I seriously feel trapped because when I or my child is sick, I am scared to go to the hospital because of fear of contracting the disease while the war is also a serious threat" or Gr2P2: " in fact this situation is horrible. A moment I had hope that because of the Anglophone crisis, I can run to the francophone areas for safety. Now because of COVID-19, I am just trapped. Don't even know what next...")

Individual Knowledge for achieving the core category

This knowledge represents knowledge acquired through usage of ICT communication tools and social media fundamentally. Constitute the sum of information received through exploitation of digital tools and social networks. This information will reinforce the individual's knowledge of the crises. Analysis of questionnaire, individual interview, and focus group data revealed that the knowledge generated by the usage of ICT communication tools and social media in the context of the dual Anglophone socio-political crisis and COVID-19 global health crisis tends to generate feelings of fear, anxiety or curiosity. There is constant individual strong desire to know more about a given crisis with constant worry of the unknown. Anxiety,

fear, and curiosity are major indicators of psychological distress and well-being that require careful assessment. Each is known to have powerful effects on thoughts and behavior. The personal view of anxiety, fear and or curiosity affects the desires to acquire new dual Anglophone or COVID-19 severity and mitigation knowledge that motivates exploratory behavioral change experience.

Based on the type of feelings this knowledge generated, the individual develop a certain mindset. For example, participants Gr5P5 manifested remarkable sign of anxiety from knowledge acquired from using his digital tools. He said "some of the things I see in the course of using my digital phone are instead making me more imbalances. Seeing so much blood or hearing about these crises is making me so sick." Meanwhile, Participant Gr1P1 is very curious to know more about the crisis; he said: "The fact I can have real time information greatly help me in managing the related stress. Without these tools, especially for the case of the Anglophone crisis, it could have been worst." Some participants like GR3P3 instead manifested the feeling of fear of knowledge acquired "Though it is of help, it can really cause depression due to the killings."

Mental State for achieving the core category

This is the temporal state of mind of an individual which is influenced by the initial feeling perceived from the individual knowledge acquired from digital platforms and media. The individual at this point will have global impression of the crises. This means no specific mindset is built at this stage until. This impression is influence by external factors such as the individual Age (his level of maturity), his level of digital literacy (how much verse the individual is in the exploitation of digital tools and media) and his financials power (ability to acquire and use updated technology). Code GRxH of Table 4 shows themes generated from participants who believe that COVID-19 act as a distraction to the Anglophone crisis as well as participants feel trapped in-between the crisis. It is only a risk assessment that will define final mindset of individuals and their behavior towards usage of digital tools and social media to follow related update. If the knowledge acquired created fear as feeling, the individual will have the impression of been afraid to access crisis related content. "Curiosity" will instead stimulate the state of mind to request more. This is therefore a temporal state that will become final after a risk assessment.

Risk Assessment for achieving the core category

Risk assessment is the deterministic phase of each individual assessment of parameters such as what is needed for survival, which crises is more relevant or more dangerous and which ICTs and social media are more relevant. Invariably these individuals end up adopting an understanding of reality based on their risk assessment weight. It define the ability of the individual to evaluate the level of risk a given crises has over the other. At this point, individuals tend to ask fundamental question such as what will help me to survive this situation. How can my social media be of help? How much have I been affected by this crisis? For example, participant Gr2P2 from the assessment

of the crisis risk said *"I have been so affected by this crisis both psychologically and financially. I am always afraid and my business is down, goods takes longer period to finish."* Such assessments help in building a certain level of conviction on what to do next and preventive measures to take in order to survive. This evaluation put the individual in a kind of loop whereby he will choose either to follow related crisis event using ICT or disconnect temporary from it until he has the conviction of how much useful it is.

Conviction for achieving the core category

This is the final state of mind where the individual is convinced that: (a) *ICT tools and social media are relevant*, (b) *following this or that crisis is compulsory for effective survival* (c) *update receive contribute in providing psychological balance*. At this point, the individual exit from the divide point (loop where individual is kind of confuse if yes or no should him use ICT and follow update to keep safe) and start requesting more crisis related content of his choice. This behavior can change at any time based on new perception of new knowledge acquired, new feeling generated and the result of assessing these crises based on new impressions and convictions. GR4P4 for example had the conviction of the existence of COVID-19 and contributed that *"through the television because every day at 8pm we were watching television, they were giving statistics and it was impacting on my behavior because at that time I was even doing internship so I stop internship and I was staying at home"*. Participant GR4P4 said: *"Any planned atrocity is been uploaded by my phone. When you even browse, you will see for examples the planned ghost town and the rest, they send it online. In fact that is their main source of informing the people of their plan of action so we already aware that on that day no body moves so I think the digital tool have informed me to stay clear"*.

V. CONCLUSION

The notion of crisis cannot be distinguished from people's behavioral changes in response to a crisis. With Anglophone war and COVID-19 pandemic, the people of Bamenda are facing challenges and opportunities of a global health crisis and socio-political crisis at a scale that requires therapeutic relationships. When people believe there is a crisis, they are likely to behave differently than they would in so-called normal times (Sellnow and Seeger 2013). In conclusion, the Bamenda people appears to have important misconceptions about COVID-19 pandemic and Anglophone crisis containment measures. Correcting these misconceptions should be targeted in information campaigns organized by relevant government agencies, information provision by relevant agencies to the citizens, and media coverage. COVID-19 has changed the context for ICT communication tools and social media use globally and combined with ongoing Anglophone crisis; it has changed the understanding and appreciation of severity and mitigation measures for people of Bamenda. The present study aimed to build a broad conceptual theory by applying the grounded theory approach to investigate or explain behavioral posture of people towards ICT communication tools and social media usage in COVID-19 and Anglophone

crisis containment. A conceptual Grounded Theory of ICT Communication Tools and Social Media Acceptance in Crisis Context (GT-IACC) is generated able to explain what happened, predict what will happen, and interpret what is happening in our area of formal inquiry. For the people of Bamenda, it appears that survival from hunger, injury or even death from armed attack is more important than avoiding death from an invisible disease. The lack of an effective response to the pandemic in Bamenda may not necessarily be due to a lack of resources but due to the ongoing Anglophone war

Despite the applied importance of the results of the current study, this study is not without limitations. The application of the conclusions of the study may be limited by time, size of the participants and geographical location. Also, the results of this study should not be considered widely general, but researchers can use these results presented to them as a baseline and hypotheses for other qualitative and quantitative studies on the topic of crisis management. There is also a fear that the manual clustering of themes poses a risk that conclusions would be over-reliant on the researcher's "often unsystematic views about what is significant and important" (Bryman, 2016). The response given by respondents might also be influenced by what he or she thinks a particular situation requires (Gomm 2008). People might also react differently depending on how they perceive the researchers (Denscombe 2014).

To the best of our knowledge, no academic research or studies is conducted focusing on the ICT interventions in the COVID-19 pandemic in the context of Anglophone crisis in Cameroon; thus, the outcome of this research would contribute as an eye opener to researchers, practitioners and policy makers to take necessary further initiatives to deploy and develop adaptable ICT based technology interventions to combat with the pandemic spread of future pandemics and contain the Anglophone war fallouts.

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