BRITISH COUNCIL- LANGUAGE AND DEVELOPMENT CONFERENCE, 2017

DAKAR, SENEGAL

LANGUAGE AND THE SUSTAINABLE DEVELOPMENT GOALS

THE LANGUAGE CHALLENGE OF DIABETES INFORMATION AND EDUCATION IN NIGERIA'S MULTI-LINGUAL SETTING

CHINYERE AZUKA MBAKA

INTRODUCTION

- The role of language in development cannot be over-emphasized.
- Development information given through appropriate channels using a generally acceptable and inclusive language produces the required result among the target audience.
- This study is situated in health communication for development.

BACKGROUND

- Diabetes is a major health challenge in the world today.
- Countries in Africa, especially Nigeria are affected daily by the financial burdens and human capital loses brought about by the debilitating

FACTS ABOUT TYPE 2 DIABETES

- Mostly a disease of life-style or personal behaviours
- Can also be hereditary
- No permanent cure yet
- Can be prevented or effectively managed without leading to morbidity or mortality.

THE ROLE OF INFORMATION & EDUCATION IN DIABETES SELF-MANAGEMENT

- Knowledge has been identified as a very powerful asset in the fight against diabetes (Moodley & Rambiritch, 2007).
- It helps people assess their risk level.
- It motivates them to seek for and adhere to proper treatment and care.
- It inspires them to be in control of the disease throughout their lifetime.
- This kind of knowledge can only be gained through diabetes information and education given in a language that is mutually intelligible and culturally acceptable to the audience.

THE PROBLEM

- Knowledge gained through diabetes education and information is said to be key to effective diabetes management.
- Language of any education is as important as the education itself.
- However, so far, the focus has been on the communication media and strategies used by the diabetes educators and the clinical and selfmanagement methods they advice.
- The language of the education needs to be examined and its overall influence on the effectiveness or otherwise of the diabetes education needs to be measured especially in a multi-lingual nation such as Nigeria

STUDY OBJECTIVES

- I. To determine the extent the local languages are used for diabetes education in Nigerian urban and semi-urban centres.
- 2. To establish the knowledge level about diabetes and its management among study participants.
- 3. To determine the extent the local language use for diabetes education can influence improved diabetes knowledge and positive attitude to diabetes selfmanagement practices among PLWD.

METHODOLOGY

- Qualitative study
- Focus Group Discussion (FGD), In-depth Interview and personal observation were methods used.
- •Data were coded and analysed using the thematic approach and explanation building for qualitative content analysis.

STUDY LOCATION & PARTICIPANTS

- Three Diabetes Clinics in Nigeria
- Two in Ogun state (a rural and semi-urban area) OOUTH and TDC
- One in Lagos state (an urban centre) LASUTH
- Study participants are made up of Persons Living With Diabetes (PLWD) from different tribes and social classes in Nigeria

SAMPLE SIZE AND SAMPLING TECHNIQUE

- Systematic sampling technique using the clinics' register was adopted.
- 40 Persons Living With Diabetes (PLWD) were selected from each study centre for the FGD (total = 120).
- 3 health professionals from each centre were purposefully selected.

- The indigenous languages are rarely used for DE in all the centres.
- ❖Reasons adduced by the educators and health personnel include – a heterogeneous audience, an enlightened population and the lack of information, education and communication materials (IEC) in the local languages.
- ❖Talabi Diabetes Centre TDC -(located in a rural community) is the only location where the local language is used for DE

FINDINGS - OBJECTIVE I

To determine the extent the indigenous languages are used for diabetes education in Nigerian urban and semiurban centres.

- Low level of diabetes knowledge found among study participants in the key areas of diabetes management
- Various misconceptions about diabetes were found in the study population (mostly emanating from the difference between the language of presentation and the indigenous language)

FINDINGS - OBJECTIVE 2

To establish the knowledge level about diabetes and its management among study participants.

- Better understanding of diabetes self-management activities especially food types was observed.
- A feeling of exclusion and disenchantment was found among participants from other indigenous language groups.
- ❖ Most participants preferred DE sessions in their native tongues and are more willing to accept and adopt self-management activities explained to them in their native tongue.

FINDINGS – OBJECTIVE 3

To determine the extent the indigenous language use for diabetes education can influence improved diabetes knowledge and positive attitude to diabetes selfmanagement practices among PLWD.

GENERAL FINDINGS

- Diabetes education is a challenging activity in Nigeria because of Nigeria's multi-lingual nature.
- English language sessions flawed by lack of clarity in explaining some concepts and conditions in diabetes and diabetes management.
- Local language sessions run the risk of causing division among the many tribes present and rousing ethnic sentiments.
- Majority of the diabetes educators interviewed preferred using the English language for reason of ease, availability of teaching aids and to avoid generating ethnic bias and sentiments.

CONCLUSION

 Nigeria is a multi-lingual nation and diabetes education has been found to be provided in the English language in majority of the centres studied. Although this hampers the effectiveness of the DE in engendering positive diabetes health outcome, educators see it as the only way to avoid some of the identified challenges of local language use in Nigeria's multi-lingual setting.

•The question is: Is that the only way? Are there other ways? Future research should point towards this direction.

RECOMMENDATIONS

- There is need for IEC materials to be produced in the local languages to assist the diabetes educators.
- Interpreters/Translators should be employed and trained in the major ethnic languages to assist diabetes educators at the sessions.
- There should be a profiling of the PLWD in every centre. Their language of education and other preferences should be taken and arrangement made to meet them in the interest of inclusiveness.

THANK YOU FOR LISTENING