EDITORIAL

A dual language policy for the African Journal of Emergency Medicine

As Africans, we are often asked by foreigners whether we can speak African, as if there is a single language which applies to the whole of the continent. In fact, there are approximately 2035 different languages spoken throughout Africa which is estimated to represent about a third of the world’s languages, making Africa the most linguistically diverse continent on earth. These languages can roughly be grouped into four families, of which three originated on African soil. The other found its way to Africa around the seventh century when the Arabic nations became accepted as part of the linguistic neighbourhood. But despite the diversity and all-inclusive language policy adopted by the African Union, the most widely spoken languages in Africa are in fact not African at all. Arabic might be the largest language of African origin, but it is surpassed by the number of English and French speakers (the first and second most prolific languages in Africa). Both are used mainly as secondary languages and have been adopted by many African states as either a national language or the Lingua Franca.

When deciding on publication, African health researchers have the choice of publishing in a local journal (largely invisible to the international community and sadly often of poor quality) or one of the mainstream international biomedical journals. As research in Africa is almost exclusively driven by academic institutions that aim to improve their own visibility in the international scientific community, researchers tend to aim for the latter. This, unfortunately, often has little benefit in the African context as many journals are not available to African health care workers. Achieving the balance that allows researchers to publish locally in a journal of sufficient quality that is also visible to the international community poses a significant challenge. As African journal editors, we are thus left with the predicament: how to set up a journal that can be both small enough in order to be accessible to local health care providers, yet in the same instance improve submitting authors’ international standing. The key issue relates to a visible quality publication with a robust peer review structure in a recognizable language that can communicate effectively both locally and further afield.

English mainly became the research language of choice following the Second World War, when the United States (US) took the leading role in research (a position it still maintains). Today, the majority of reference databases reside in the US and the most prominent reference journals are almost exclusively English. Even in Europe, where languages such as Spanish and French are widely spoken, most listed journals are English. Whatever one’s opinion on the “Englishness” of research, there can be no doubt that in order to become a more visible author, publication in English (at least in part) is important.

As the second largest African Lingua Franca, French has a key role to play in communicating AFJEM’s original research to our readers. As a journal from Africa, publishing material relevant to Africa, at an international standard, a dual language policy was considered from the start as one of the main strengths of the journal; AFJEM publishes all its original research abstracts in both English and French. Hopefully as our resources increase, we will be able to increase both the number of sections and the amount of full articles translated. And of course, we are an African journal, so readers will notice that our regular sections have Swahili names. Uchunguzi means investigation (journal watch), Ujuzi means skills (practical pearl), Shajara means diary (African diary) and Ajabu means extraordinary (our non-medical section where we publish the poetry, prose and art of our authors and readers).

Africa is an amazingly large and diverse content; its diversity is one of its key strengths, but does render the establishment of a journal language policy challenging. By publishing original papers in English to improve international exposure on the one hand and also making abstracts available in French in order to improve dissemination locally on the other, we hope to have stepped up to the challenge.

In the spirit of diversity, the editors are pleased to publish some of the abstracts to be presented at the forthcoming
Emergency Medicine in the Developing World conference (15–17 November 2011, Cape Town, South Africa). You will notice that some of these papers are from further afield than Africa, but in line with AFJEM’s aims, we believe that they all contribute to the practice of emergency care in Africa.

References