

## Stigmatization and Social Reintegration of Liberated Trokosi Women in Ghana

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### Abstract

The study examined the subject of stigma and social reintegration of liberated Trokosi women in Mafi traditional area of the North Tongu District of the Volta region. One hundred (100) liberated trokosi slaves aged between 10 and 41 years were randomly selected from international Needs Vocational Training Centre at Adidome to answer the questionnaires for the study. The results showed that there was no significant relationship between age and type of stigma experienced, however there was a significant statistical relationship between self-esteem and physical isolation but not for loss of identity, verbal stigma and loss of access to resources. Forced entry regression of self-esteem on physical isolation, loss of identity, verbal stigma and loss of access to resources showed that physical isolation was the best predictor of self-esteem. Findings are discussed in the light of how stigmatization and self-esteem affect social reintegration of liberated Trokosi women. Recommendations have been given on what needs to be done to completely end the practice and how the liberated Trokosi women can be integrated into their communities.

**Keywords:** stigma, reintegration, Trokosi, loss of identity, verbal stigma, physical isolation.

### 1. Introduction

The term stigma has many definitions. In general, stigma refers to a brand or mark that turns a person into a different one because of its negative connotation. Modern American usage of the words “stigma” and “stigmatization” refers to invisible signs of disapproval which permits “insiders” to draw a line around the “outsiders” in order to demarcate the limit of inclusion in any group (Falk, 2001). According to the author, the demarcation permits “insiders” to know who is “in” and who is “out” and allow the group to maintain its solidarity by demonstrating what happens to those who deviate from accepted norms of conduct. Stigma can also be referred to as an issue of disempowerment and social injustice (Scheyett, 2007), a personal characteristic that is contrary to any social rule (Stafford and Scott, 1986). Crocker, Major, & Steel (1998) assert that stigmatized persons have or are believed to have a sort of attribute that is depreciative in a social context.

The forms and expressions of stigma have been divided into four loosely defined groups by Ogden and Nyblade (2005). They are Social stigma, Physical stigma, Verbal stigma and Institutionalised stigma. Social stigma consists of being isolated from the community, loss of social role/identity, loss of standing and respect. Physical stigma involves being isolated, shunned, abandoned, not being allowed to participate in family activities; Verbal stigma involves gossip, taunting, scolding, labeling, and use of derogatory words, and finally Institutionalized stigma is loss of livelihood, employment, loss of customers, refusal of services such as health services.

Although the specific social categories that become stigmatized can vary across times and places, these four forms and expressions of stigma mentioned above are found in most cultures and time periods like that of Mafi in the North Tongu District of the Volta Region of Ghana where the Trokosi system is practised.

### 2. The Trokosi System

According to oral tradition supported by Trokosi priests and elders in some parts of Ghana, the origin of the Trokosi system could be traced to the practice of paying deities for services rendered (Nukunya, 2003). According to this view, clients who consulted deities for one reason or the other were made to pay for the services in cash and kind. Those who were satisfied with the work of these deities started to offer their children, usually, girls to serve the gods in appreciation for the work done. On other occasions, people who were about to undertake very important ventures or needed something very badly would promise to offer their daughters to the deities if they were successful (Nukunya, 2003). Furthermore, barren couples also approached the deities with the promise to offer their daughters as servants or wives should the deities help them to conceive and have children of their own (Mark, 2001).

Although the initial offer by clients to these deities was voluntary, eventually, some compulsion started to creep in and has remained till present; the voluntary aspect has thus virtually disappeared. In the recent past it has

become a social device which is aimed at controlling bad behaviours such as thefts, rape, abortion, murder and covetousness, to mention but a few of the vices which are prevalent within any given Ewe community in Ghana (Amoah, 1996). These vices may be found in other Ghanaian communities as well, but the Ewes view them as abominable, and therefore adopted measures such as mentioned above to control them.

Families then give a young girl to a shrine in reparation for a wrong committed by a close relative of theirs either in the present or the past. The young girl according to Amoah (1996) is restricted; denied formal education, introduced to early sex by the traditional priest and made to work for the traditional priest (Tromua), who does not even look after the children he bears with the young vestal virgins. The reason why girls and not boys are sent to the shrine to atone for the sins of their relatives is because, the deity who is believed to be a man and his representative; the fetish priest is a man, needs wives to give birth to as many children as he desires to serve him in the shrine.

At a point in the course of history, the Ewe community became dissatisfied with the irresponsible behaviours of the traditional priests, who had sex with almost all the Trokosi girls in the shrine but failed to cater for their needs and the needs of the offspring (Mark, 2001).

### *2.1 Government and other agencies' efforts in the liberation of Trokosi women*

Following the public outcry against the Trokosi system attempts have been made to liberate some of the Trokosi victims. Mr. Mark Wisdom, a native of Adidome in the North Tongu District, through his Fetish Slaves Liberation Movement (FESLIM) led the way in the liberation exercise (Nukunya, 2003). In addition to the effort of Mr. Mark Wisdom and the above mentioned organization, the Government of Ghana and other statutory bodies have taken interest in the problem. The commission of Human Rights and Administrative Justice (CHRAJ) and the Ghana National Commission on Children (GNCC) have initiated moves towards a solution. The commission on Human Rights and Administrative Justice (CHRAG) in collaboration with the Ministry of Women and Children Affairs (MOWAC) has also taken a strong stance against the practice of Trokosi system (Mark, 2001).

At the instance of the latter, the Presidency has also thrown its immense weight behind efforts at eradicating the practice. For example, in June 1995, the President of the Republic of Ghana ordered the Parliament of Ghana to speed up the passage of the criminal code amendment act which virtually proscribed the Trokosi system. Specifically, the Act provides that whoever:

*“sends to or receives at any place any persons or participates or concerned with any ritual or customary activity with the purpose of subjecting that person to any form of ritual or customary servitude is guilty of a Second Degree Felony”.*

Such persons would be sentenced to an initial term of not less than three (3) years imprisonment (Nukunya, 2003). Subsequently, a number of Trokosi women were liberated, however this move was not without its attendant problems; the collateral effects of the liberation of the women was discrimination and stigmatization.

### *2.2 Stigmatization of Trokosi women*

Liberated Trokosis are stigmatized as a result of many factors. In the first place, they are stigmatized due to their sexual relationship with the priests and the fear that they are the wives of the gods and therefore owned by the gods. According to Mark Wisdom (2001) in his book “The Trokosi system” girls aged between five (5) and twenty (20) years are accepted in the shrine. Those who reach the age of puberty are raped by the fetish priests soon after.

Furthermore, Nukunya (2003) noted that the code of dress is one of the factors that make them stigmatized. Trokosis coming into confinement are expected to bring along their own items for personal use. These include clothes, grey-baft or calico, cooking utensils, buckets, combs and sleeping mats. As a taboo, Trokosis are not allowed to use ordinary clothes. Their new cloth is grey-baft or calico with a raffia leaf (la) around their necks. According to Nukunya (2003), Trokosi is forbidden to wear shoes and clothes other than those prescribed for the Trokosis status.

Although liberated, many of the Trokosi victims are forced to pay frequent visit to the shrine with calico and raffia around their necks. They are easily identified by their code of dress. Most of the community members including some relatives of the Trokosis tease and castigate them when they appear in these clothes (Mark, 1982). The liberated Trokosis are sometimes excluded from social gatherings such as wedding, funeral, party and community associations. All these attitudes towards Trokosi victims are forms of stigmatization. People stigmatized the liberated Trokosis in order to distance themselves from the victims both physically and mentally (Mark, 1982) and also because of the fear of offending the gods if they get involved with the victims.

### *2.3 Stigmatization and Self Esteem*

Self-esteem can be considered as the overall sense of self-worth individuals use to appraise their traits and abilities (Myers, 2010). This means that when individuals appraise their traits and abilities favorably and also receive a favorable feedback from others, it enhances their self-esteem. Similarly when individuals receive negative feedback such as stigmatization it may reduce their self-esteem. Bruce & Phelan (2001) revealed in

their research that stigmatized groups have lower self-esteem than those of non-stigmatized groups. Link, Struening, Neese-Todd, Asmussen and Phelan(2002) in their study to determine whether stigma affects self-esteem of persons who have serious mental illnesses or whether stigma has few, if any, effect on self-esteem, revealed that two measures of perceptions of stigma strongly predicted self-esteem, thus participants whose scores on the measure of stigma were at the 90<sup>th</sup> percentile were seven to nine times as likely as those with scores at the 10<sup>th</sup> percentile to have low self-esteem at follow-up. Werner, Aviv, and Barak (2008) in their study among 86 schizophrenics found a relatively strong association between self-stigma and self-esteem.

Stigmatization can affect the self-esteem of persons who have been victims of the Trokosi system. Rejection, discrimination, vituperation and social isolation by members of the community can lead to perceptions of being negatively evaluated which could lead to feelings of shame and loss of self-worth and subsequently diminished self-esteem. Corrigan (2004) assert that stigmatization diminishes self-esteem and robs people of social opportunities such as employment or accommodation, the very challenges that ex-Trokosis are experiencing in their communities.

### 3. Social Reintegration

Social integration in sociology and other social sciences, is the movement of minority groups such as ethnic minorities refugees and under privileged sections of the society into the mainstream of the society (Howard, 1992). In the view of the author, members of the minority groups thus gain full access to the opportunities, rights and services available to the members of the mainstream. However for the purpose of this study, the term reintegration is used in the sense that the victim of the Trokosi system were already integrated into their community before their departure to serve in the shrines, thus their re-entry or re-settlement is what is being referred to as re-integration which is a process and not as an intervention as defined in sociology to mean, 'any social intervention with the aim of integrating former or current problems of individuals into the community/society (Howard, 1992).

#### 3.1 How Liberated Trokosis are rehabilitated before Reintegrating into the society.

One of the agents of rehabilitation and reintegration of liberated Trokosi women is the International Needs Ghana (ING) Non-Governmental Organisation which has set up a Vocational Training Center to train the liberated victims in different vocations, a school for the children of Trokosis and for Trokosis who are children and also a micro-credit program.

Investigations indicate that a liberated Trokosi can spend three months to three years at the training centre at Adidome. Among the facilities are dormitories, classrooms, kitchens and other facilities. The training courses at the centre include sewing, bakery, tie and dye, literacy, catering, batik and kente weaving. A liberated Trokosi can take part in more than one training program if she so desire (Gillespie, 2002). However, after training the Trokosis are provided with tools for the skills they are trained in. For example those trained in kente weaving are given a loom upon their departure. An investigation indicated that the centre gives the ex-Trokosis a chance to bond together and adjust to their new freedom before embarking on their new lives.

Lastly, International Needs Ghana has introduced micro-credit program. According to the Principal, the loans are given to groups, but each member of the group is responsible for his or her own payment. Usually the starting loan ranges from GH¢100.00 to GH¢ 150.00 and is paid back within a year. Payments can be made weekly or monthly in a lump sum. 'Susu' a term for petty money savings is also encouraged among the group in an effort to make the loan taker self-sufficient.

### 4.Statement of the Problem

Due to the stigma and fear generated by the Trokosi system, people do not normally wish to associate themselves with the liberated Trokosis. As a result, though liberated they are shunned by their own communities including friends and neighbours. They are forced to leave for big towns and cities where their anonymity could guarantee them a better life. Unfortunately, their identities soon become known and the problem of stigmatization reoccurs. Also, the fear and stigma mean that they cannot engage in any meaningful economic and commercial activities. Those who engage in petty trading or selling cooked food receive little or no patronage once their identity as former Trokosis are known (Nukunya, 2003). On the other hand, their marital life is also affected. According to Nukunya (2003), fear and stigma prevent suitors from approaching them. Even those bold enough to make proposals to them are ridiculed by friends and relations and are persuaded to abandon them eventually.

More so, most of the liberated Trokosis still believe that despite their new status, their former shrines and priests could still harm them. As a result some of them return to the shrine after liberation. Others pay frequent visits to the shrine to render some of their regular services. The attitudes of some parents and relatives are also not helpful in this regard. According to Nukunya (2003) most parents fear the consequences of this premature release of the Trokosis girls from the shrine, what they consider to be their legitimate responsibility.

The present study seeks to find out if there is a relationship between age and the type of stigma experienced.

Also, if there is a relationship between stigmatization and self-esteem and which of the types of stigmatization can predict the victims' self-esteem.

In view of this, the following hypotheses guided the study

1. There will be no relationship between age and type of stigma experienced.
2. There will be no relationship between type of stigma and self esteem
3. Types of stigmatization will predict the self-esteem of the Trokosi women.

### 5. Significance of the study

The study will therefore, help reveal pertinent information concerning the techniques and strategies that need to be put in place to help the NGOs reintegrate the liberated Trokosis' into the society. The study will assist policy makers to put measures in place to control the Trokosi system which is found to be retarding progress of its victims since it is an infringement of their human rights and dignity. Again, the information that will be brought to light will help solicit the sympathy and assistance from other NGOs and benevolent individuals to speed up the reintegration process already started by the Fetish Liberation Movement and International Needs Ghana and to liberate other Trokosis still in some of the shrines. It will also add to the existing literature on stigmatization of Trokosi victims.

### 6. Methodology

The quantitative survey model with the cross sectional design was employed because the study aimed at finding the effect of stigma on the social reintegration of a representative subset of liberated Trokosi women, in Mafi Traditional area in North Tongu District of the Volta Region at one specific point in time.

The study site for this research was the International Needs Vocational Training Centre at Adidome. Adidome is located on the banks of the River Volta in the North Tongu District. The town is located on Ho-Sogakope road. It is about 61 Kilometers from Ho (the regional capital) and 20 kilometers from Sogakope on Accra-Aflao road in Ghana. The main occupation of the people of Adidome are farming, fishing and trading. The target group was the liberated Trokosi women at the International Needs Vocational Training Centre at the Volta Region in Ghana. The simple random sampling technique was used to select one hundred (100) participants out of the 200 women at the International Needs Vocational Training Centre. Two hundred pieces of paper were used in selecting the respondents. One hundred (100) of these papers were labelled "YES" and the rest had "NO". Those who picked the pieces of paper labelled 'YES' were selected as respondents for the study.

All the respondents were women, 38% were between 10 and 20 years, 37 % between 21 and 30 years, 21 % between 31 and 40 years and 4% were 41 and above years. Seventy-seven percent (77%) had primary school education, 22% Junior High School and 1% Senior High School education. Furthermore, 90% indicated that they were single and 10% were divorced.

#### 6.1 Measures

The Stigmatization Scale consisted of 16 items with four subscales namely, physical isolation, loss of identity, verbal stigma and loss of access to resources. Some of the items within the subscale were 'I am treated differently or shunned at a social gathering', 'I am teased, insulted, or sworn at', 'I lost customers/ they refuse to buy my goods' and 'lost respect within the family'. The Self Esteem scale consisted of nine items. Some of the items are 'I work hard to keep my state a secret', 'I feel guilty because I am associated with the stigma'. It was a four (4) point likert scale ranging from strongly Disagree to strongly Agree. Respondents were asked to circle responses appropriate to their feelings about people released from the Trokosi shrine. The items were adapted from the International Centre for Research on Women (ICRW) literature on Enacted Stigma; what do we learn about measuring it? How to reduce the stigma of AIDS, Toronto, 2006.

Another section consisted of two open-ended questions soliciting suggestions on how the victims think the stigma can be reduced for ease of their reintegration.

The cronbach alpha reliability statistics for the items are Physical isolation 0.69, Loss of identity 0.70, Verbal Stigma 0.73, Loss of access to resources 0.65, Self Esteem 0.75.

#### 6.2 Procedure

Permission was sought from the principal of the International Needs Vocational Training Centre at Adidome. However further approval was required from the National office of the institute in Accra in the Greater Accra region of Ghana before the study could be carried out. The director in charge of the Accra office, gave a letter of approval for the data collection. The researchers were introduced to the students by the Principal at the center, and the purpose of the visit was explained to the participants. They were encouraged to cooperate with the researchers for an effective data collection. General information about anonymity and confidentiality was explained to the participants. They were also told their rights not to answer any question they felt uncomfortable to answer. The questionnaires were distributed to the respondents and how each section was to be answered. The third author who is a native of that region and therefore speaks the language translated some of the statements to

participants who due to their level of education had difficulty in comprehending the statements in the questionnaire. The data collected were processed and analysed with the use of the Statistical Package for Social Sciences (SPSS) Version 16 software. Hypotheses one and two were analysed using bivariate correlations and multiple regression was used to analyse hypothesis three.

## 7. Results

**Table 1**  
**Correlation Matrix of Age and Type of Stigma**

	Physical isolation	Loss of identity	Verbal Stigma	Loss of access to resources
Age correlation	-.059	-.040	.015	.040
Significance	.555	.877	.691	.690

Table one shows the results of a two-tailed hypothesis that there will be a relationship between age and type of stigma experienced. A spearman's rho correlation method was used. The test revealed that there was no statistically significant correlation between age and type of stigma experienced i.e. physical isolation, loss of identity, verbal stigma and loss of access to resources ( $r = .059$ ,  $p > 0.05$ , NS;  $r = -.040$ ,  $p > 0.05$ , NS;  $r = .015$ ,  $p > 0.5$ , NS;  $r = .040$ ,  $p > 0.05$ , NS respectively). The result is consistent with the study hypothesis by suggesting that there will be no relationship between age and type of stigma experienced.

**Table 2**  
**Correlation Matrix of Self-Esteem with Types of Stigma (N=100).**

	Physical isolation	Loss of identity	Verbal Stigma	Loss of access to resources
Self-esteem	-.1345	.027	.161	.133
Significance	.001	.789	.106	.182

Table 2 shows the results of the test of hypothesis which states that there will be no relationship between stigmatization and self-esteem. Pearson's correlation was used to test the significance. The test revealed that there was a highly statistically significant correlation between self-esteem and physical isolation ( $r = -.345$ ,  $p < 0.01$ ). In other words, there was a relationship between physical isolation and self-esteem. Being a negative correlation also implies that as the woman becomes less isolated to friends, family and society, the more her self-esteem increases or as her self-esteem decreases, the more physically isolated she becomes.

Also, the test revealed that there was no relationship between loss of identity, verbal stigma and loss of access to resources ( $r = .027$ ,  $p > 0.05$ , NS;  $r = .161$ ,  $p > 0.05$ , NS;  $r = .133$ ,  $P > 0.005$ , NS). The results then mean that physical isolation's stigmatization was consistent with the hypothesis but verbal stigma, loss of access to resources and loss of identity were not consistent with the hypothesis.

**Table 3**  
**Forced Entry Regression of Self-Esteem on Physical Isolation, Loss of Identity, Verbal Stigma and Loss of Access to Resources (N=100)**

Variable	b	Beta (B)	R	R <sup>2</sup>	t	Sig
<b>Step 1</b>						
Constant	2.810				23.871	.000
Physical isolation	0.190	.317			3.015	.003
Verbal stigma	.035	.102			1.006	.317
Loss of access to resources	.015	.024			.231	.818
Loss of identify	.000	.002			-.023	.981
			0.36	0.093		

Table 3 shows the test hypothesis which stats that the types of stigma will predict the self-esteem of the Trokosi women. Regression analysis using the forced entry method was performed using SPSS to assess the prediction of physical isolation, verbal stigma, loss of access to resources and loss of identity in the self-esteem of Trokosi women. Table 3 displays unstandardized (b) and standardized (beta) regression coefficients, the multiple correlation coefficients (R), adjusted R<sup>2</sup> and the volume of t and its associated p-value for each variable that entered into the equation. As shown in table 3, physical isolation, verbal stigma, loss of access to resources and loss of identity collectively explained 9.3% (adjusted R<sup>2</sup> = 0.093) of the variance in self-esteem. This would suggest that there are other factors which play greater part in the self-esteem of the Trokosi women. Based upon

the order of entry chosen for the present sample, it would appear that physical isolation explained the bulk of the variance in self-esteem (beta = .317,  $t = 3.015$ ,  $p < 0.001$ ) and was the best predictor of self-esteem. As can be seen in the table, the contributions of verbal stigma, loss of access to resources and loss of identity to the variance in self-esteem was not statistically significant at the 0.05 level. In summary it would appear that physical isolation emerged as the single best predictor of self-esteem of the Trokosi women.

### 7.1 Suggestions given for their social reintegration

Table 4 below shows the distribution of the suggestions given by ex-Trokosi women for their social reintegration. As shown in the table 5, 73% suggested that the public should be educated as to the need of accepting and reintegrating Trokosi women in the society and 27% of the ex-Trokosi women suggested that efforts should be made by parties involved to socialize with the society or families should allow the victims the opportunity to participate in their activities to aid in their reintegration.

**Table 5**  
**A Frequency Distribution of Suggestions Given for Social Reintegration**

	Frequency (f)	Percent (%)
Public Education	73	73
Socialization	27	27
Total	100	100

## 8. Discussion and Conclusion

Liberated Trokosi women often face discrimination and stigmatization which have consequences on their self-esteem. Using data of 100 liberated Trokosi women from the INGVTC, we studied the relationship between the forms/types of stigmatization, self-esteem and reintegration. The results of the study showed that there was no significant relationship between age and type of stigma experienced. Though literature on age with stigma was scarce in Ghana the probable reason may be that whether one advances in age or not, as far as she has experienced Trokosi, some kind of stigmatization may exist or may not exist.

Also there was a statistically significant correlation between self-esteem and physical isolation, that is rejection and non-participation in family activities. These findings are consistent with that of Link & Phelan (2001) who found that individuals who experience stigmatization have lower self-esteem than that of the non-stigmatized groups, similarly, Gershon, Tschann, Jemerin (1999) assert that adolescents who perceived more stigmas had lower self-esteem than those who perceive fewer stigmas and Gross (2005) revealed that stigmatization can affect how an individual value himself or upon his overall judgment. A probable reason for these findings may be due to the fact that the Trokosi women have lower self-esteem because they experience sexual abuse from the fetish priest, and other forms of maltreatment. Also societal perception and discrimination due to their association with the shrines, impose low self-esteem on the Trokosi women. The inconsistency in correlation between the loss of identity, verbal stigma, loss of access to resources with self-esteem could be as a result of the perceived idea that once the Trokosi women have been engaged in the Trokosi system they might have acquired some supernatural powers which should rather boost their self-esteem from person who have never been exposed to the system.

The hypothesis that the types of stigmatization will predict the self-esteem revealed that physical isolation emerged as the best predictor of the victim's self-esteem. As presented in the results, loss of identity, verbal stigma and loss of access to resources did not predict self-esteem in the study. However, it can be explained that a victim losing her identity both in the family and society, being at the receiving end of invectives and loss of access to resources may contribute to the victim's feeling physically isolated. The contribution of physical isolation as a form of stigmatization on self-esteem is made clear as Maslow (1987) stated in his work that stigmatization impact a check on a person's level of status and acceptance in one's social group. Maslow added that self-esteem has the capacity of serving as a protective function and reduces anxiety about life and death. Ravish (1985) for instance stated that stigmatized people who experience social isolation through the loss of family, friends and associated position are inclined to feelings of rejection, worthlessness and loss of self-esteem, these feelings of rejection are said to be magnified by the client's culture if that culture values community (Litwin & Zoabi, 2002, Siplic & Kadis, 2002). In fact to a large extent, it is for the preservation and survival of the family and the community that the Trokosi system is practised because of the value for community especially in a collectivist society like Ghana.

### 8.1 Counselling Implication

Trokosi system seem to have come to stay with the societies where the system is practiced. In fact Lamptey

(2011) asserts that in 2011, about 6 girls were sent to some of these shrines to atone for the sins committed by their relatives. Over decades, much has not been achieved in terms of social reintegration of liberated Trokosi women as far as stigmatization and discrimination are concerned. A number of Trokosi victims suffered divorce and others could not marry at all. From the findings of the study, a multidimensional approach involving victims, their families, perpetrators, chiefs, members of parliament, the media as well as Governmental agencies may be needed to reduce the of stigmatization and in effect help in the social reintegration of the liberated Trokosis. According to Rogers (1990), counselling provided within the case management is more effective when focused on information sharing and problem solving resulting in reality treatment and socialization skills. Counselling should therefore be given on how liberated Trokosis should be treated fairly in order to live a normal and happy life within the family members and the society in which they live. Counsellors and psychologists should encourage parents to send their ex-Trokosi girls back to school since through their continuous interaction with non-Trokosi children it could lead to a reduction of the stigma and subsequently successful reintegration.

### 8.2 Recommendation

Based on the findings the researchers made the following recommendations:

1. The family members as well as the society should be educated on the need to accept the Liberated Trokosis women as part of the society and be treated as such.
2. The liberated Trokosis should be made to understand that their liberation is total and that they no longer own any obligation to their formal shrines, their priests and other functionaries.
3. More rehabilitation centres should be set up within the region so as to help reduce pressure on the rehabilitation center at Adidome
4. Last but not the least, it is recommended that legal action should be taken against shrine owners to released Trokosi women/girls who are still under their custody.

### 8.3 Limitations of the study

The uncooperative nature of the respondents for fear of exposure to the public criticisms may have influenced their responses to the questionnaire. This may have caused the non-significance of some of the types of stigma. Also, some of the semi-literates were not able to answer the questionnaire and so the help of the researcher in aiding them to respond to the questionnaire may have influenced their responses.

## References

- Amoah, A. E. (1995). *Short louds Change in practice*; Ardent Press.
- Amoah, A. E (1996). *Trokosis in Retrospect*, Accra; Ardent press
- Bruce, G. & Phelan, J.C. (2001). Conceptualizing Stigma. *Annual Review of Sociology* 27: 363 – 385.
- Corrigan, P., et al. (2010). Prejudice, social distance, and familiarity with mental illness. *Schizophrenia Bulletin*; 27:219-226.
- Crocker, J., Major, B., & Steele, C. M. (1998). Social stigma. In D. Gilbert, S. T. Fiske, & G. Lindzey (Eds.), *The handbook of social psychology* (4th ed., Vol. 2, pp. 504-553). New York: McGraw Hill.
- Falk, G. (2001). *Stigma: How We Treat Outsiders*. New York: Prometheus Books.
- Gershon, T. D., Tschann, J. M. & Jemerin, J. M. (1999). Stigmatization, self-esteem, and coping among the adolescent children of lesbian mothers. *Journal of Adolescent Health*, 24:437-445.
- Gillespie, G. (2002). [http://digitalcollection.sit.edu/African-diaspor\\_isp/60](http://digitalcollection.sit.edu/African-diaspor_isp/60)
- Howard, R. (1992). *Social Interaction Reading in Sociology*. 4<sup>th</sup> edition. St. Martines Press, Inc. New York.
- Lampsey, V.(2011). CHRAJ is keen to stop Trokosi. General News, Thursdy, August 11, 2011. GNA, Accra.
- Link, B. G. & Phelan, J. C. (2001). Conceptualizing Stigma. *Annual Review of Sociology*, 27, 363-385.
- Link, B. G., Struening, E.L., Neese-Todd, S., & Phelan, J. C. (2001). Stigma as a barrier to recovery: the consequences of stigma for the self-esteem of people with mental illness. *Psychiatr Serv.* 52(12):1621-6.
- Litwin, H., & Zoabi, S (2002). Mordenization and elder abuse in an Arab-Israeli context. *Research on Aging*. 25(3), 224-246.
- Mark, W. (2001). *The Trokosi System*, Mercury Press Ltd Accra – North.
- Mark, W. (1982) *Abolition of Outmoded Customs*, Accra; City Press.
- Mark, W. (1994) Trokosi virgines of the gods or concubines of the fetish priests, mercury Pres Ltd Accra – North.
- Maslow, A.H. (1987). *Motivation and Personality* (3<sup>rd</sup> edition). New York
- Nukunya, G.K. (2003). *Tradition and Change in Ghana* (2<sup>nd</sup> edition) University press. Accra.
- Ogden, J., & Nyblade, L. (2005). *Common at its core: HIV-related stigma across contexts*. Washington, DC: International Centre for Research on Women.
- Phelan, J.C, Link, B.G, Stueve, A, Pescosolido, B. (2000). “Public conceptions of mental illness in 1950 and 1996: What is mental illness and is it to be feared.” *Journal of Health and Social Behavior* 41:188-207.
- Ravish, T. (1985). Prevent isolation before it starts. *Journal of Gerontological Nursing*, 11(10),10-13

- Scheyett, A. (2007). The Mark of Madness: Stigma, Serious Mental Illnesses, and Social Work *Social Work in Mental Health*, 3(4), 2005, pp.79-97.
- Siplic, F., & Kadis, H. (2002). The psychosocial aspect of aging. *Socialno Delno*, 41(5),295-300.
- Stafford, M.C, Scott, R.R. (1986). "Stigma deviance and social control: Some conceptual issues." in *The Dilemma of Difference*, edited by S. C. Ainlay, G. Becker, and L. M. Coleman. New York: Plenum.
- Werner, P., Aviv, A., Barak, Y.(2008). Self-stigma, self-esteem and age in persons with schizophrenia. *Int. psychogeriatr.* 20(1):174-87.

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