Transnational Feminism in the Context of Intimate Partner Violence in Ghana

Cynthia Grant Bowman†

Introduction ..................................................... 2
I. The Study of IPV in Ghana in the Early 21st Century .... 4
II. The Dramatic Increase in Transnational Feminist Research on IPV in Ghana in the 21st Century ..................... 8
A. “Fact-finding” Studies by U.S. Students of IPV in Africa .......................... 8
B. Research on IPV by African Scholars Who Study Abroad .......................... 10
   1. The Rise of Statistics in the Study of IPV in Ghana . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 12
   2. The Incorporation of Masculinities Theory and Psychoanalytic Analysis into the Understanding of IPV in Africa .......................... 16
   3. The Increase in Transnational Collaborative Research on IPV in Africa .......................... 20
III. The Impact of Transnational Feminist Work about IPV in Ghana .......................... 21
A. Passage of the Domestic Violence Act in Ghana and Experience Under It .......................... 21
B. Analysis and Writing about IPV in Ghana in the Last Decade .......................... 24
C. The Turn to a Public Health Approach to the Problem of IPV .......................... 28
D. A Focus on Non-Legal Interventions to Address IPV .... 31

† Dorothea S. Clarke Professor of Feminist Jurisprudence, Cornell Law School. I am grateful to so many people, both in the U.S. and in Ghana, for their contributions to this Article. Many thanks are due to Dorcas Coker-Appiah for bringing me up to date on developments on the ground in Ghana and for sending me materials, to Angela Dwamene-Obaegye for sharing her story and that of The Ark Foundation, and to the following Ghanaian scholars who told me about their intellectual journeys: Mensah Adinkrah, Stephen Balfour Adjei, Margaret Ivy Amoakohene, Elizabeth Archampong, Christobel Asiedu, Adobea Yaa Owusu, and Eric Y. Tenkorang. My colleague, Elizabeth Brundige, made numerous helpful suggestions for improving the Article, as did other participants at the March 2018 symposium on Transnational Legal Feminisms: Challenges and Opportunities, sponsored by the Cornell International Law Journal. My thanks as well to Amy Emerson, then of the Cornell Law School Law Library, and to my research assistant, David Eichert, for their research help, and to the Dorothea S. Clarke Program in Feminist Jurisprudence at Cornell Law School, which has supported my work.

52 CORNELL INT’L L.J. 1 (2019)
IV. The “Feedback Loop”: Insights for U.S. Scholars and Activists from Africa ................................. 33
Conclusion ...................................................... 36

This [feminist] solidarity perspective requires understanding the historical and experiential specificities and differences of women’s lives as well as the historical and experiential connections between women from different national, racial, and cultural communities . . . . [It] potentially counters this [Eurocentric and relativist or postmodernist] logic by setting up a paradigm of historically and culturally specific “common differences” as the basis for analysis and solidarity . . . . The differences and borders of each of our identities connect us to each other, more than they sever. So the enterprise here is to forge informed, self-reflexive solidarities among ourselves.¹

— Chandra Talpade Mohanty

Spring 1991: Growth. Germs of ideas, buds of awareness begin to grow. Small, fragile plants, some sickly yellow, others a striking green. I would not let the sickly yellow buds develop—the fear that the work about to be done was a “flight of fancy” and not “law,” the criticism that I was trying to incorporate what was essentially a Western phenomenon into the Ghanaian culture. . . . But the strong green buds, those were the changes in me: looking at social conditioning from a different perspective, replaying and observing old cultural patterns with new insight. The time was right for me to address domestic violence issues in Ghana.²

— Rosemary Ofeibea Ofei-Aboagye

Introduction

In this Article, I am concerned not so much with a definition of transnational feminism as with how it is accomplished. In particular, I am interested in the specific ways in which legal scholars and activists in the United States and Africa concerned with intimate partner violence (“IPV”) in Africa have interacted, influenced one another, and worked together to try to effect remedies for this substantial problem. In other words, I focus on how transnational feminism is done. I examine the development of thinking about IPV in Ghana as a case study. My argument is that the current state of domestic violence law in Ghana, as well as scholarship and opinions about appropriate remedies for IPV, reflect this process of transnational feminism, involving exchanges of information and experience, both personally and through the publication of studies, scholarly collaboration, and international support of research and activist projects. I conclude from this case study that transnational feminism is carried out by talking to one another, listening to one another, learning from, supporting, and working with one another around topics that affect women in different

¹. CHANDRA TALPADE MOHANTY, FEMINISM WITHOUT BORDERS: DECOLONIZING THEORY, PRACTICING SOLIDARITY 242, 244, 250-51 (2003).
areas of the globe, but with deep sensitivity to the importance of differing contexts.

IPV is a problem of great magnitude throughout the world, including the U.S., and is thought to be especially prominent on the African continent, where 36.6 percent of women are estimated to experience it during their lifetimes.3 IPV has attracted a great deal of attention from feminist scholars and activists in the U.S. since the resuscitation of the women’s movement in the 1960s and 1970s, while scholarly writing and activism on the subject in Africa have largely taken place since 1990. Recognition of the relationship of IPV to both economic development and other major issues such as HIV/AIDS expanded the range of scholars and policymakers interested in studying it in the African context.4

I have selected Ghana for my case study for two reasons. First, Ghana is emerging as a pioneer in the study of IPV in sub-Saharan Africa outside of South Africa,5 with a very early (1999) empirical study on the topic and a Domestic Violence Act passed after a lengthy period of activism in 2007.6 Second, I am personally familiar with Ghana and the development of the law on IPV there, having entered into a transnational partnership with the University of Ghana at Legon from 1999 to 2004, with a focus on gender law and domestic violence.7

This Article will describe and assess various sorts of communications and collaborations between scholars in Africa and the Global North and strive to show where these interactions have gotten us in the last decade with respect to a more comprehensive analysis of IPV and an understanding of how to address this transnational problem. In Part I below, I discuss where we were in the early 21st century with respect to the study of IPV in Ghana. In Part II, I describe and evaluate a variety of transnational studies and exchanges that have taken place since that time. In Part III, I assess where we are now as a result of these transnational interchanges, with


5. South Africa has a long history of work on this issue, has many well-resourced universities and scholars both of social science and medicine studying IPV, and many activist non-governmental organizations (“NGOs”) engaged with this problem. South Africa passed the first Domestic Violence Code in Africa in 1993. See note 25, infra.


7. The multi-year partnership I co-directed with Akua Kuenyehia was between Northwestern University School of Law, where I was then a Professor of Law and Gender Studies, and the University of Ghana Faculty of Law at Legon, where Kuenyehia then served as Dean, and was funded by the U.S. Department of State.
I respect to a more nuanced understanding of IPV in the African context and how to attack it. I discuss in Part IV how these interactions have contributed or can contribute to U.S. scholars’ understanding of IPV in the U.S. context as well.

1. The Study of IPV in Ghana in the Early 21st Century

In 2003, I published two articles on domestic violence in Africa. As I did research at that time, very little academic literature was available about IPV by African authors outside of South Africa. There was some, however, beginning in the 1990s with a pioneering article based on research in Ghana by Rosemary Ofei-Aboagye, who was a graduate in law from Ghana working on an LL.M. at Queens University in Canada. She chose domestic violence in Ghana as the topic of her thesis, even though there were no studies available and in face of the fear that publicizing the topic “would expose African traditions as backward, and that this would validate some Western perceptions of Africa.” To obtain data, she asked permission from the Ghana branch of the International Federation of Women Lawyers (FIDA) to administer a questionnaire to women coming to FIDA’s legal assistance office in Accra. Most of the women responding said that it was acceptable for a husband to beat his wife so long as it did not cause a scar or serious injury. Ofei-Aboagye published articles about her study in the feminist journal *Signs* and in the *Columbia Journal of Gender and Law* in 1994. The problem, previously unnamed, had been named. The task of documenting it on a larger scale remained.

To this end, inspired by her participation at the 1993 World Conference on Human Rights in Vienna, Dorcas Coker-Appiah and a small group of other Ghanaian women lawyers founded the Gender Studies and Human Rights Documentation Centre in Accra in 1995, which still exists. In line with the call of the Fourth World Conference on Women in Beijing, which she also attended, to collect data to support policymaking to combat violence against women, the Centre’s first major publication was a large-scale study of physical and sexual violence against women in Ghana. The study reported on the results of an extensive survey in all regions of Ghana.

---

undertaken from 1993 to 1997, which asked about various types of violence against women; it revealed, among other things, that one in three respondents had been beaten, slapped, or physically punished by a current or recent partner, over half within the immediately preceding year. Large numbers reported various forms of psychological, sexual, and economic violence as well. Yet only about five percent of the victims of physical violence had reported their injuries to any official agency. This study provided the first empirical evidence that IPV was widespread in Ghana. It was pathbreaking in its ambition to go out and collect statistics where none existed. The report was supported by various international sources and co-authored by Canadian scholar-activist Kathy Cusack, but it was primarily the product of a relatively small group of committed Ghanaian women.

During 1998 and 1999, moreover, discussions took place about passing a domestic violence code in Ghana; at the time, the only African countries with such legislation were South Africa and Mauritius. The drafting of the Ghanaian Domestic Violence Act owed a good deal to international collaboration, specifically with the Georgetown Law Center’s International Women’s Human Rights Clinic, founded by Susan Deller Ross in 1998. Ross herself had spent her life on women’s rights issues in the U.S. Under the auspices of the clinic’s Leadership and Advocacy for Women in Africa (“LAWA”) program, women lawyers in Africa spent a 14-month fellowship at the clinic, during which they not only earned an LL.M. degree but also developed strategies to attack gender inequitable practices back at home. Graduates of the program formed groups of LAWA alumnae in

15. *Breaking the Silence*, supra note 6, at 65.
16. *Id.* at 63-73.
17. *Id.* at 95-98.
18. See *id.* at vii-viii (acknowledging funding sources). Cusack came to Ghana as a volunteer with a Canadian NGO but left it to work with the Gender Documentation Centre on the 1999 report and worked there from 1998-2005 and thereafter for the Canadian government’s Project Support Unit in Ghana. E-mails from Dorcas Coker-Appiah to author (Dec. 11, 2017) (on file with author).
20. Ross was one of the founders of the NYU Women’s Law Caucus, a member of the first feminist law firm in NYC, and one of the first women attorneys at the EEOC; she also worked at the ACLU Women’s Rights Project and was Special Counsel for Sex Discrimination Litigation at the Department of Justice Civil Rights Division. See Cynthia Grant Bowman, *The Entry of Women into Wall Street Law Firms: The Story of Blank v. Sullivan & Cromwell*, in *WOMEN AND THE LAW STORIES* 415, 421-22 (Elizabeth M. Schneider & Stephanie M. Wildman eds., 2011). See also Susan Deller Ross, *Georgetown Law*, https://www.law.georgetown.edu/faculty/ross-susan-deller.cfm# (last visited Apr. 5, 2019) (describing Susan Deller Ross’s career in women’s rights).
their home countries, and the LAWA group in Ghana worked with the 
Georgetown clinic to draft a domestic violence code, which was then 
picked up as a cause by FIDA-Ghana.22 Although it was a long time to 
passage of the bill in 2007, the campaign to do so was under way.

In short, by the end of the 20th century, transnational feminist efforts 
to address the issue of IPV in Ghana included work carried out as part of 
LL.M. programs in North America, resulting in publication of Ofei-
Aboagye’s very early article on IPV in Ghana and the initial drafts of a 
domestic violence code worked out in cooperation with an American legal 
clinic. The influence of participation in international conferences such as 
those in Vienna and Beijing and of the exchanges of information and commit-
ment among the women attending was clear. Studies of IPV were begin-
ning to appear in other African countries as well,23 especially in South 
Africa.24

Yet outside of South Africa, few remedies were available. Very early in 
the post-Apartheid era, South Africa adopted a Domestic Violence Act,25 
and feminist activists formed many nongovernmental organizations 
(“NGOs”) to offer supportive services to women who were victims of vio-
lence, including shelters.26 In Ghana the first shelter for women and chil-
dren was opened by The Ark Foundation, which was founded by a LAWA 
graduate of the Georgetown LL.M. program soon after she returned to

---

22. Id. at 48; Akosua Adomako Ampofo, Collective Activism: The Domestic Violence 
Bill Becoming Law in Ghana, 7 AFR. & ASIAN STUD. 395, 408 (2008).
23. See, e.g., Alice Armstrong, Culture and Choice: Lessons from Survivors of 
Gender Violence in Zimbabwe (1998); WILDAF TANZANIA, REPORT OF A PILOT STUDY OF 
INTIMATE FEMICIDE IN TANZANIA (1996); Women in Nigeria, Breaking the Silence: Women 
Against Violence (Elsbeth Robson ed., 1993); Mary Mahoreke, Violence Against Wives: A 
Crime Sui Generis, 4 ZIM. L. REV. 88 (1986); Lisa Vetten, “Man Shoots Wife”: Intimate 
Femicide in Gauteng, South Africa, 6 CRIME & CONFLICT 1 (1996).
24. Human Rights Watch published a major study about legal response to IPV in 
Safricawm-02.htm [https://perma.cc/3T8V-RFDF].
25. A Prevention of Family Violence Act was passed in 1993, under which orders of 
protection (interdicts) became available; the Act was revised after a thorough review of 
both international and domestic experience with such remedies was carried out by the 
South African Law Review Commission; and the superseding Domestic Violence Act of 
1998 was passed, including reforms that reflected that experience. See Domestic Vio-
L. COMM’N, DISCUSSION PAPER 70, PROJECT 100, DOMESTIC VIOLENCE (1997), http://www 
group and legal aid organizations also campaigned against femicide and woman abuse 
in 1996. See WILDAF TANZANIA, supra note 23, at 4. An NGO called the Musasa Project 
in Zimbabwe offered not only counseling and legal aid to victims of violence but also 
establi shed a quite successful program to train police and prosecutors about IPV. Shee-
lagh Stewart, Working the System: Sensitizing the Police to the Plight of Women in 
Zimbabwe, in FREEDOM FROM VIOLENCE: WOMEN’S STRATEGIES FROM AROUND THE WORLD 
137, 160-67, 170 (Margaret Schuler ed., 1992). It has expanded its services and still 
er=27427-55204].
Ghana in 1995 and was funded by many international sources.27 A specialized unit of the police, the Women’s and Juvenile Unit, or WAJU, was established in 1998 to respond to complaints of violence against women and children, modelled on a similar unit set up in South Africa in 1995, but WAJU was soon overwhelmed with complaints and without the resources to expand beyond the two main cities, Accra and Kumasi.28

In sum, by the year 2000, the first steps to document the existence of IPV in Ghana had been taken. An issue that had previously been invisible due to massive under-reporting thus became visible, was publicized, and was thereby constructed as a social problem to be addressed by the government. But the only major initiative in this direction was the drafting of a Domestic Violence Act, which was submitted to the Attorney General of Ghana in 2001.29 However, given the reluctance to contact the police expressed by women responding to the nationwide survey, Dorcas Coker-Appiah, co-author of the empirical study described above, expressed doubt that legislation would provide an adequate response.30 Commenting in a 2001 address on the topic sponsored by the United States Information Service in Accra,31 she opined that customary law remedies would need to be developed for any approach to IPV to be effective. While also supporting the provision of legal remedies for those who could take advantage of them, she recommended building upon traditional remedies, involving mediation led by chiefs and elders, combined with the work of community action teams, because these were the only groups to which most women would be willing to turn.32 In her words:

I ask myself, if contemporary strategies including legislation, in more advanced countries such as the United States have not succeeded in eliminating violence, should we not look at other strategies and other systems with . . . [their] imperfections . . . [?] Should we ignore women’s voices, as we are wont to do as “experts”? Should we ignore the realities on the ground, in a society where marriage is considered so vital to women . . . and promote strategies that could lead to a divorce?33

27. See The Ark Foundation, http://arkfoundationghana.org/founder.php (describing funding); e-mails from Angela Dwamene-Aboagye to author (July 31, 2018) (on file with author) (describing opening the shelter in her home and using her car for transport, involving local volunteers, and then later writing grant proposals to access donor funds locally and internationally). Note that shelters may be less useful in countries where women suffer great stigma if they live outside the family and which lack social resources to assist them in living on their own. See Uma Narayan, Cross-Cultural Connections, Border-Crossings, and “Death by Culture”: Thinking About Dowry-Murders in India and Domestic Violence Murders in the United States, in UMA NARAYAN, DISLOCATING CULTURES: IDENTITIES, TRADITIONS, AND THIRD-WORLD FEMINISM 93-94 (1997).

28. See Nancy Cantalupo et al., Domestic Violence in Ghana: The Open Secret, 7 GEO. J. GENDER & L. 531, 552, 565 (2006); HUMAN RIGHTS WATCH/AFRICA, supra note 24, at 83.


31. The author of this Article spoke at the same forum about methods of responding to domestic violence in the U.S.; the room was packed, demonstrating the interest in the issue at that time.

32. Coker-Appiah, supra note 13, at 17.

33. Id.
The questions Coker-Appiah posed proved central to the deepening insights that emerged from the transnational dialogue in the years to follow.

II. The Dramatic Increase in Transnational Feminist Research on IPV in Ghana in the 21st Century

In the early part of the 21st century, interest in IPV in Ghana rose sharply. Stimulated by a series of murders of women in 2000 and a group of spousal killings and attempted killings within a brief period in 2002, which were highly publicized by the media, public attention to IPV and activism about it increased.\textsuperscript{34} Transnational dialogue on the subject contributed to this activity in a number of ways. Those I highlight in this section took the form of (1) “fact-finding” studies by U.S. scholars collaborating with scholars and activists in Ghana, (2) scholarly work by Ghanaian scholars who studied or worked in the U.S., Canada, and other Northern countries, work that included numerous statistical studies based on newly available data, as well as articles displaying understandings derived from “Western” theories of masculinity and psychoanalysis, and (3) collaborative work between African scholars and those from the Global North, often funded by sources from the more developed countries.

A. “Fact-finding” Studies by U.S. Students of IPV in Africa

For some time, American universities, including law schools, have been attempting to “globalize” their curricula. Among other things, this has led to the inclusion of a variety of courses involving study of a foreign legal system followed by a field trip to the country under study for research.\textsuperscript{35} Some of these might be characterized, to borrow Chandra Mohanty’s terminology, as “student as tourist or explorer models,” in which foreign cultures are observed by Eurocentric eyes without attention to the economic, political, and ideological connections and interdependencies between the North and South.\textsuperscript{36} As a result, that which is common is lost, while at the same time remedies for one context may be presumed appropriate for the other.

What I am calling “fact-finding” studies by Western feminist students of Africa may partake of some of these deficiencies, although some at least partly transcend them. One such project was undertaken by the

\textsuperscript{34} A series of wife murders—13 murders and six attempted murders—took place between February 12 and April 27, 2002, eliciting a great deal of publicity and public outcry and a call to Ghanaian social scientists to conduct research relevant to understanding the events and making recommendations for redress. Mensah Adinkrah, Spousal Homicides in Contemporary Ghana, 36 J. Crim. Just. 209, 210 (2008).

\textsuperscript{35} I have taught such courses myself at the two law schools at which I have served, for example, a seminar entitled “International Team Project: Ghana” at Northwestern University Law School in 1999, which culminated in a two-week trip with 16 students to Ghana, where they did group research projects, including studies of market women, of street children, and of programs for ex-prostitutes.

\textsuperscript{36} Mohanty, supra note 1, at 239-40.
Georgetown International Women’s Rights Clinic in collaboration with LAWA-Ghana; four Georgetown law students and their professor, a LAWA attorney in Ghana, and four Ghanaian law students formed the team doing the field research.\(^{37}\) The in-country research took place in 2003, the year after the publicity and activism occasioned by the IPV murders mentioned above.\(^{38}\) While in Ghana, the team interviewed police, medical personnel, prosecutors, religious and community leaders, and women’s rights advocates, among others, about the state’s response to IPV.\(^{39}\) In their report, they highlighted the widespread acceptance in Ghana of stereotypical gender roles and of the right of a husband to physically discipline his wife, especially when she failed to fulfill traditional gender roles and thus threatened the presumed superiority of her husband.\(^{40}\) These views were shared, the report said, by traditional leaders such as chiefs, Queen Mothers, traditional healers, and religious leaders, who would respond to complaints of IPV by urging the victim to conform.\(^{41}\) Complaining to public rather than private authorities was taboo, and in fact the police prosecuted fewer than ten percent of cases reported to them, with virtually none of them remaining in the justice system until sentencing.\(^{42}\)

As for the governmental bodies that were supposed to provide remedies to IPV survivors, the fact-finding study concluded that they were not working very well:

- WAJU often referred IPV cases for counseling rather than prosecution, and non-WAJU police did not take IPV seriously;
- most judges assumed IPV was provoked by the woman and encouraged settlement;
- the Commission on Human Rights and Administrative Justice encouraged non-binding mediation rather than addressing IPV cases through its formal complaint procedure;
- traditional leaders proceeded through mediation rather than referring serious cases to the police;
- traditional healers told women to be more submissive; and
- the medical community was both expensive to access and focused solely on treating physical injuries.\(^{43}\)

The only bodies responding effectively to IPV, in the team’s opinion, were NGOs, which provided services to survivors and public education about the issue, education that was starting to change community attitudes to IPV.\(^{44}\)

After reciting all the ways in which Ghana was failing to address the problem of IPV and thus violating its obligations under international law, the team concluded with just three recommendations. One was to employ
a screening mechanism for mediation and to add measures to protect victims in the mediation process; an appendix provided model rules based on the American Bar Association’s Family Law Section standards and other U.S. sources.\footnote{Id. at 576-78, 584-91.} (Another appendix included model police procedures based on those in Illinois, New Jersey, California, and Wisconsin.\footnote{Id. at 592-97.}) The other two recommendations were to build the capacity of the state and NGOs to respond to IPV,\footnote{Id. at 578-79.} without any suggestion as to where the funds were to come from, and to pass the pending Domestic Violence Act.\footnote{Id. at 579-83.} The purpose of the Georgetown group was primarily to examine the Ghanaian government’s response to IPV and the current state of Ghanaian law,\footnote{Id. at 535-36.} but the remedies suggested appear, at least in retrospect, inadequate, in part because they were overly based on a U.S. model and somewhat insensitive to context.\footnote{Cf. Tracy E. Higgins et al., Gender Equity and Customary Marriage: Bargaining in the Shadow of Post-Apartheid Legal Pluralism, 30 Fordham Int’l L.J. 1653, 1675-1703, 1705-08 (2007) (describing a Human Rights Project at Fordham Law School to examine the effect of the 1998 Registration of Customary Marriages Act, with its decree of spousal equity in marriage, upon the status of South African women in customary marriages; the report, which included a substantial discussion of IPV concluded that any further progress in this area would depend on gaining the support of traditional leaders, perhaps through integrating their tribunals into the formal legal system in some way that would produce an educational interchange with the civil courts and suggested adding more women as traditional leaders).}

B. Research on IPV by African Scholars Who Study Abroad

Another obvious transmission belt for transnational feminist work is the large number of African scholars who pursue graduate study in the Global North, some of whom stay on to teach there yet continue to do research on the countries from which they came.\footnote{This pattern continues. See, e.g., Flora Peter Myamba, Domestic Violence Rights Movement in Tanzania: An Exploration, Dissertations (2009) (unpublished Ph.D. dissertation, Western Michigan University), http://scholarworks.wmich.edu/dissertations/674 [https://perma.cc/WZP6-32JK].} In the blossoming of literature about IPV in Ghana over the last decade, I noticed this pattern and contacted ten of the authors to find out more about their intellectual odysseys. Among the seven who responded, all of whom had received M.A. and Ph.D. degrees abroad after initial degrees in Ghana, three had done their post-graduate work in the U.S., two in Canada, one in both Canada and the U.S., and one in the U.K. The authors came from different disciplines, with law and sociology the most common. Although three of the seven respondents had returned to work in universities in Ghana, two were tenured at universities in the U.S. and at least one in Canada, but they continued to focus on Ghana in their research and returned there regularly to do fieldwork. Their comments about how they became interested in IPV were enlightening:

\footnote{45. Id. at 576-78, 584-91.} \footnote{46. Id. at 592-97.} \footnote{47. Id. at 578-79.} \footnote{48. Id. at 579-83.} \footnote{49. Id. at 535-36.} \footnote{50. Cf. Tracy E. Higgins et al., Gender Equity and Customary Marriage: Bargaining in the Shadow of Post-Apartheid Legal Pluralism, 30 Fordham Int’l L.J. 1653, 1675-1703, 1705-08 (2007) (describing a Human Rights Project at Fordham Law School to examine the effect of the 1998 Registration of Customary Marriages Act, with its decree of spousal equity in marriage, upon the status of South African women in customary marriages; the report, which included a substantial discussion of IPV concluded that any further progress in this area would depend on gaining the support of traditional leaders, perhaps through integrating their tribunals into the formal legal system in some way that would produce an educational interchange with the civil courts and suggested adding more women as traditional leaders).}
My work in reproductive health led to the interest in domestic violence. I had completed some work that examined sexual coercion among married women in Ghana and was quite surprised at the level of sexual violence endured by my study participants. This really sparked my interest. I thought something had to be done about the problem, but it can only begin with sound robust research.52

I’m originally from Ghana, and interested broadly in gender and development issues . . . . I specifically got interested in pursuing research in this area when I conducted studies on HIV rates in some African countries, and saw some correlations with domestic violence as well.53

I studied outside Ghana, however my interest in women’s rights issues dates back to my university years in Ghana. My legal feminism studies in Canada deepened my interest in advancing women and girls’ rights in Africa.54

I did my PhD at the University of Leicester, UK. My interest in the topic of domestic violence stemmed mainly from experiences around me in Ghana and especially from accounts of women who would normally not be described as vulnerable or economically/financially challenged.55

Moreover, one female scholar, whom I will not identify, confessed that her interest in IPV stemmed at least in part from direct personal experience: “I am a very big victim of domestic violence (husband violence) myself and I will not wish it for anyone.”56

In short, the insights offered by the research of these and other scholars were the product of a combination of transnational influences. Personal experiences or observations in Ghana had sparked the interest of some of the authors, especially those who were women, but their understanding was deepened by studies of gender abroad. Others had focused their scholarship on other issues, such as H.I.V. and women’s reproductive health more generally, but then had been struck by the important causal connections between that topic and IPV. Moreover, their research in Ghana was supported by a variety of international funding sources, including a Fulbright Fellowship, faculty research funds from U.S. and Canadian universities, and presumably fellowships from those institutions as well.

In the subsections that follow, I discuss a number of interesting theories and themes derived from non-African foreign assistance or scholarship that have enriched the research of these and other transnational scholars when adapted to their own contexts and purposes. I discuss, in particular, (1) a focus on statistical research made possible by the availability of new statistical data, (2) the incorporation of masculinities theory, and (3) the addition of a psychoanalytic approach to the study of IPV. In this discussion, the scope of transnational exchange is widened somewhat, as some of

52. E-mail from Eric Y. Tenkorang to author (Dec. 7, 2017) (on file with author).
54. E-mail from Elizabeth Archampong to author (Dec. 10, 2017) (on file with author).
55. E-mail from Margaret Ivy Amoakohene to author (Dec. 7, 2017) (on file with author).
56. E-mail from confidential source to author (Dec. 11, 2017) (on file with author).
these theories first took root in South Africa and were then transmitted from there to Ghana. I also note the increase in internationally collaborative work on IPV, typically financed by sources available to the non-African collaborator.

1. The Rise of Statistics in the Study of IPV in Ghana

For reasons I do not fully understand (some of which may have to do with what types of publication are rewarded by their home institutions), most of the new articles by Ghanaian authors about IPV are statistical studies. This may have something to do with the acquisition of statistical analysis skills by Ghanaian scholars, but it is more likely a result of the availability of new and easily accessible statistical data. Since at least 1988, a nationally representative Demographic and Health Survey (DHS) has been administered by the Ghana Statistical Service, the results of which are available online.57 The Ghana DHS (GDHS) is one of a number of similar surveys carried out in other African countries with support (both financial and logistical) from USAID and various UN agencies.58 In 2003, for the first time, questions about attitudes to IPV were added to the survey, asking, for example, whether it was acceptable for a husband to hit or beat his wife if she burned the food, argued with him, went out without telling him, neglected the children, or refused to have sex with him.59 Responses showed that about 50 percent of women and 32 percent of men thought this conduct was justified for at least one of the reasons given, 30 to 37 percent of women thought it was justified for arguing, going out without telling her husband, or neglecting the children, 14 percent for burning the food, and 20 percent for refusing sex.60 The statistics provided allowed researchers to cross-tabulate these attitudes with social and demographic information about the respondents to the survey.

A Ghanaian scholar who began his educational career in Ghana, followed up with M.A. and Ph.D. degrees in the U.S., and is now a full professor in a university sociology department in Ohio,61 used this data in an article he co-authored with an American lawyer about IPV in Ghana.62 Relying upon various U.S. scholars’ work on domestic violence as a phenomenon of dominance and power, as well as literature to the effect that male control of household decision-making was a predictor of IPV, they hypothesized that egalitarian decision-making between husband and wife

58. For surveys of other African countries, see https://dhsprogram.com/topics/gender-Corner/index.cfm [https://perma.cc/X37S-EJ3Q].
59. GHANA STATISTICAL SERVICE ET AL., supra note 57, at 46.
60. GHANA STATISTICAL SERVICE ET AL., supra note 57, at 47-48 Tables 3.12.1 & 3.12.2.
would reduce abuse-supporting ideologies among both men and women.\textsuperscript{63} They concluded that the data supported their hypothesis and theorized that this was because men who saw their wives as equal in decisions were less likely to believe that abuse was justified and wives who believed they were contributing economically to the household were less likely to believe abuse was acceptable.\textsuperscript{64} They also pointed out that the majority of Ghanaian men did not think IPV was acceptable, questioning why they didn’t campaign to stop it, and recommended education to reduce abuse-supporting ideologies, especially programs aimed at influencing household decision-making processes.\textsuperscript{65} The same two authors published another article using the same data, in which they pointed again to the importance of power dynamics within the home and noted with discouragement that younger, never married men were more supportive of violence within marriage than men who were married.\textsuperscript{66}

There are obvious discrepancies between attitudes and conduct if only a minority of Ghanaian men believe that it is justified to hit a woman yet so many women report IPV. What is the relationship between attitudes and behavior? Moreover, the correlations noted in these two articles may not be causative in any sense, but simply reflective of deeper patterns in Ghanaian gender relations—that is, if men’s attitudes were more egalitarian overall, decision-making would be more egalitarian as well.

The addition to the 2008 GDHS of questions inquiring about the actual incidence of IPV, rather than just attitudes to it, made more penetrating analysis possible. Women were asked:

Does/did your (last) husband/partner ever do any of the following things to you?

a) Slap you?
b) Twist your arm or pull your hair?
c) Push you, shake you, or throw something at you?
d) Punch you with his fist or with something that could hurt you?
e) Kick you, drag you or beat you up?
f) Try to choke you or burn you on purpose?
g) Threaten or attack you with a knife, gun, or any other weapon?
h) Physically force you to have sexual intercourse with him even when you did not want to?
i) Force you to perform any sexual acts you did not want to?\textsuperscript{67}

\textsuperscript{63} Id. at 325, 332-33.
\textsuperscript{64} Id. at 332-33.
\textsuperscript{65} Id. at 333.
There were also questions about emotional violence:

Does/did your (last) husband ever:

a) Say or do something to humiliate you in front of others?

b) Threaten to hurt or harm you or someone close to you?

c) Insult you or make you feel bad about yourself?68

The 2008 survey showed that 39 percent of married women in Ghana had experienced some form of violence—physical, sexual, or emotional—at the hands of their partners; 36 percent of them had never told anyone about it, and only five percent reported it to the police.69 The 2008 GDHS also contained a good deal of detail about the forms of control exercised within marriage, with very high proportions of female respondents reporting that their partners limited their contact with friends, frequently accused them of infidelity, insisted on knowing where they were at all times, and were jealous or angry if they talked to other men.70

Much of the recent scholarship on IPV in Ghana is based on the data about IPV and other demographic information available from the 2008 survey. Two interesting articles, for example, correlated the rate of IPV experienced with whether a woman was a member of a patrilineal or matrilineal ethnic group.71 In matrilineal societies in Ghana, women have more economic leverage because of favorable rules about inheritance, are better educated, and are likely to be better off economically.72 Both financial and emotional support by their matrilineal kin protects them and gives them bargaining power in domestic negotiations; they also have greater autonomy and decision-making power over reproductive matters.73 Data from the 2008 survey show that women from patrilineal societies were 1.4 times more likely to experience IPV than women from matrilineal groups.74 In Ghana, matrilineal groups are primarily Akan, who also had access to education and economic opportunities that other groups did not have.75 Yet

68. Id.

69. Id. at 315, 328-30, 328 Table 15.16.1, 330 Table 15.17.

70. Id. at 310-12. Interestingly, men also reported similar controlling behavior by their wives. Id. at 313 Table 15.9.2.


73. Asiedu, supra note 71, at 2353-34. In a matriarchal society, the family of origin may also remove their daughter from an abusive household to make sure their lineage will not be destroyed. Akosua Adomako Ampofo & Mansah Prah, “You may beat your wife, but not too much”: The Cultural Context of Violence against Women in Ghana, in GENDER STUDIES & HUMAN RIGHTS DOCUMENTATION CENTRE, THE ARCHITECTURE OF VIOLENCE AGAINST WOMEN IN GHANA 93, 97-98 (Kathy Cusack & Takyiwaa Manuh eds., 2009) [hereinafter ARCHITECTURE OF VIOLENCE].

74. Ampofo & Prah, supra note 73, at 2354.

75. The Akan played a special role historically in Ghana, with fierce resistance to colonialism by the Ashanti Kingdom, which was the last to be subdued. Their central location may have given them access to advancement that other groups did not have.
violence cut across socioeconomic groups for both patrilineal and matrilineal societies and was highly correlated with the husband’s consumption of alcohol in each.\textsuperscript{76} Citing U.S. sources to the effect that male power and superiority are at the heart of IPV, the authors of one of the two studies concluded that higher respect for women in matrilineal societies was important to lower rates of physical violence against them, but that they were still subject to high levels of emotional violence, implying that IPV may have simply taken a different form.\textsuperscript{77}

In contrast to the more nuanced understanding evident in the article about lineage groups, another study based on the 2008 DGHS illustrates how one can go wrong in interpreting the significance of statistical relationships.\textsuperscript{78} Its authors demonstrated statistically that: (1) women who thought IPV was justified were 14 to 26 percent more likely to experience it;\textsuperscript{79} (2) women who reported higher levels of control by their husbands were 60 percent more likely to have experienced physical abuse and 85 percent more likely to have experienced sexual abuse;\textsuperscript{80} (3) women who saw their fathers beat their wives were 2.7 times more likely to have experienced both physical and sexual abuse;\textsuperscript{81} and (4) women whose husbands drank alcohol were 2.5 to 2.9 percent more likely to experience both types of violence.\textsuperscript{82} After presenting these correlations, the authors suggested that women who saw IPV as legitimate may have sought conditions that attract such acts; in addition, if these women saw their fathers beat their wives, they themselves “may have learned and imported violent attitudes into their marital unions attracting violent response from their spouses.”\textsuperscript{83} Their policy recommendation was to train women in skills that would enable them to negotiate conflict in their homes.\textsuperscript{84} This analysis strikes me as improperly placing the responsibility for both IPV and its cessation upon the women who suffer from it.

Finally, one of the authors working with statistics from Ghana used them in a collaborative and comparative study with scholars of gender in Latin America.\textsuperscript{85} The goal of the study was to assess the role of women’s

---

They also played a key role in the 20th-century independence movement. See generally \textsc{Jean Marie Allman}, \textit{The Quills of the Porcupine: Asante Nationalism in an Emergent Ghana} (1993). As a result, the position of women in this group and their susceptibility to IPV may be more complicated than a simple ethnographic explanation suggests.

\textsuperscript{76} Sedziafa & Tenkorang, supra note 71, at 504-05.
\textsuperscript{77} Id. at 500, 502, 504.
\textsuperscript{78} Eric Y. Tenkorang et al., \textit{Factors Influencing Domestic and Marital Violence against Women in Ghana}, 28 J. Fam. Violence 771 (2013).
\textsuperscript{79} Id. at 775.
\textsuperscript{80} Id.
\textsuperscript{81} Id.
\textsuperscript{82} Id.
\textsuperscript{83} Id. at 779.
\textsuperscript{84} Id.
asset ownership in reducing the likelihood of IPV in Ghana and Ecuador.\(^{86}\) The Ghanaian statistics used were those provided by the 2010 Ghana Household Asset Survey, a nationally representative survey carried out as part of a comparative project with India funded by the Dutch government.\(^{87}\) While the results showed that a woman’s share of couple wealth did not bear a significant relationship to physical violence in Ghana,\(^ {88}\) the study is important because it shines a light on the centrality of context. As the Ghanaian author noted, whether female asset ownership challenges gender norms relates to how common it is, as well as to the prevailing marital property and inheritance schemes in a country.\(^ {89}\) Ghanaian law, unlike that of Ecuador, has a separate rather than community property regime during marriage, and women have long played a substantial role in market work in Ghana. In short, the same factors are at work in quite different ways in the two countries, and their relationship to the incidence of IPV is complex as a result. Comparative analyses like this help to make more complex, and thus deepen, our understanding of the dynamics of IPV.

2. The Incorporation of Masculinities Theory and Psychoanalytic Analysis into the Understanding of IPV in Africa

When I did the research for my 2003 articles on IPV in Africa, there were no references to masculinities theory as an attempt to understand it, and I specifically noted that psychoanalytic explanations of IPV were lacking.\(^ {90}\) This has changed in the course of the last decade, but the transmission belt for the importation of these theories into Ghana appears to run through South Africa, a transnational exchange internal to Africa. In 2011, South African authors publishing in the literature of criminology began to propose analyses of IPV there directly based on theories of masculinity.\(^ {91}\) Masculinities literature sees male gendered identities as socially constructed by the interplay of culture, family, social environment, class, and race.\(^ {92}\) Applying this to South Africa, the authors of one article, based on interviews with 20 men incarcerated for killing their partners, added the impact of Apartheid, with its consequences of absent fathers, exposure to violence, gangs, and various types of neglect of children, and the impact such abuse can have on brain development and cognitive and psychosocial adjustment.\(^ {93}\) In some African families, children did not receive enough positive attention from their (probably also traumatized) mothers to counter the effects of traumatic childhood experiences; and if the father

---

86. Id.
87. Id. at 7.
88. Id. at 18.
89. Id. at 6.
90. Bowman, Theories of Domestic Violence, supra note 8, at 858.
92. Id.
93. Id. at 961-62.
was around, children may have been exposed to extreme physical discipline and witnessed violence directed towards their mothers. Male children often sought refuge in criminal activities and gangs, where they were socialized into anti-social masculinities and risk-taking behavior.

A second article by the same authors, based on the same data, echoed American psychoanalytic analyses of IPV offenders. Its authors emphasized the central emotional importance of the women killed to their killers and their consequent need to control them, with killing them as the ultimate outcome. The lack of self-esteem and insecurity from their childhood experiences had damaged the men’s ability to trust an intimate partner, and IPV offered a way to deal with the resultant anxiety, transformed into rage. This explanation of offenders’ violence was similar to those offered by U.S. scholars who root IPV in individual psychology or family dysfunction and, more particularly, in a batterer’s personal insecurity combined with deep psychological dependence on the partners they abused. The men interviewed by Mathews and colleagues all externalized the blame for their crimes, seeing the murders as caused by their partners (about half of whom were separated or about to leave at the time of the killing; half also had orders of protection) rather than the result of the man’s own agency.

The authors adapted the “Western” theories to the South African context—including not only the impact of Apartheid but also the consequences of post-traumatic stress disorder (“PTSD”) from experience in the armed forces, exposure to atrocities, and the systemic inability of African men to fulfill the economic expectations incumbent upon their traditional role within the family because of poverty. The murders were thus, they concluded, the result of a complex interrelationship between gender norms and psychological vulnerabilities in a context where “[s]ocial and structural inequalities . . . limit men’s ability to attain a traditionally successful masculinity.” As a result, these murders were seen not as an instance of the elevated violence and homicide in South Africa in general but rather as a consequence of IPV. The authors’ recommendation was no short order: to change the “constructions of masculinity in South Africa that

---

94. Id. at 964-66.
95. Id. at 971-72. Although also related to childhood trauma, typically caused by parental death or divorce, the pathway of white South African boys to adopting similarly violent masculinities was different. Id. at 968.
97. Id. at 111-117, 120.
98. Id. at 112, 120-21.
100. Mathews et al., supra note 96, at 117-18.
101. Id. at 113, 115.
102. Id. at 120.
103. Id. at 121-22.
emphasize control of women by men, as well as shifting social norms of female acquiescence.” They offered no suggestions about how this was to be accomplished.

This highly contextualized and nuanced approach to IPV was nonetheless a vast improvement on seeing it simply as the result of African culture and its gender norms. It was also instructive about what kinds of interventions may be successful in the African context. One study, for example, examined the suitability of the “Duluth model,” a U.S. feminist-inspired intervention that involves reeducating men in more gender-egalitarian and peaceful attitudes. Attempting to do this without seeing the connection of their attitudes to deeper individual psychological and sociocultural factors, the South African authors concluded, was unlikely to be successful in South Africa, where both class and social background are vital to men’s understanding of masculinity and its relationship to IPV.

The authors of this study used discourse theory to analyze the discourses of masculinity emerging from the authors’ interviews with South African men in IPV perpetrator treatment groups. Their finding—that the men constructed the performance of violence as a central component of their masculinity and themselves as victims of a new politics of women’s rights that caused their partners to resist traditional gender roles—led to a conclusion that the Westernized theory of masculinity embodied in the Duluth model would not work in South Africa because the Duluth model conflicted with a model of masculinity valuable in the participants’ communities. The article recommended involving religious institutions, schools, and influential community leaders in a vaguely-conceived campaign to encourage men to acknowledge and own their violence and to develop empathic attitudes to their female partners.

The studies discussed above, all of which drew upon U.S. masculinities and psychoanalytic theory, were carried out by South African scholars and targeted at the South African context. In 2016, this type of analysis made its way into the study of IPV in Ghana in a sophisticated form. Citing the masculinities literature coming out of South Africa, one Ghanaian author applied discourse analysis to his interviews with 16 IPV perpetrators referred by the Domestic Violence and Victims’ Support Unit (“DOVVSU”), the renamed (so as to be gender-neutral) successor to

104. Id. at 122.
106. Id. at 272-73.
107. Id. at 274-75.
108. Id. at 279-85.
109. Id. at 286-87.
110. “Masculinities” was adverted to by Ampofo and Prah in an article published in 2009, but not in the developed philosophical and psychological version present in the South African literature. See Ampofo & Prah, supra note 73, at 95-96, 101, 109, 119 (describing, based on data in the 1999 survey, how the construction of masculinity in Ghana legitimates violence against women and pointing out that deviating from gender role was the single most important reason given for having been beaten).
WAJU.\textsuperscript{111} He refined the masculinities analysis he found in the South African literature by combining it with what he called the “communalist ontology of personhood in Ghana,” according to which an individual’s identity is understood only in relation to the social group to which he or she belongs.\textsuperscript{112} Thus, IPV in Ghana must be seen as the result of a “complex and dynamic relationship between cultural/social constructions of masculinity and men’s relational sense of personhood.”\textsuperscript{113} The interaction of the two arises from what he termed the homosocial enactment of masculinity—that is, a man’s sense of himself was derived from enacting it in front of other males, with a key part of that performance being a demonstration of his authority and control over his wife.\textsuperscript{114}

With this theoretical background, the Ghanaian author described the discourses of the perpetrators he interviewed as those of masculine anxiety and disappointment and of spousal abuse as punishment for gender norm violation.\textsuperscript{115} The anxiety and disappointment arose out of the man’s need to validate himself as male in the eyes of others; thus when his wife threatened the discourse of male sovereignty, he was required to act violently to control the source of threat and demonstrate his authority.\textsuperscript{116} This discourse also allowed him to attribute his violence to her by reference to his collective identity and to diffuse personal accountability for his acts.\textsuperscript{117} The second discursive pattern noted in the perpetrators’ interviews was one that also located the blame for IPV externally: the construction of the wife as a usurper of gender power and thus culturally illegitimate and deserving of the educative punishment he inflicted.\textsuperscript{118}

This article, by uncovering the deep context of IPV in Ghana, deepened and also made more complex our understanding of it. In its author’s words:

Discursive constructions of masculine authority in marriage and its relationship to spousal violence in Ghana should be understood both as reflecting participants’ interactional needs in here-and-now social discourse and as embodied historical and sociocultural non-discursive dimensions of gender relations.\textsuperscript{119}

This insight adds important layers to the complex understanding of IPV in Ghana, with its attention to context, culture, and their historical (and perhaps economic) foundations. Interestingly, although its author was a psychologist, he did not reflect these influences through a psychoanalytic lens.

\footnotesize
\textsuperscript{112} \textit{Id.} at 413.
\textsuperscript{113} \textit{Id.} at 417.
\textsuperscript{114} \textit{Id.}
\textsuperscript{115} \textit{Id.}
\textsuperscript{116} \textit{Id.} at 416-17.
\textsuperscript{117} \textit{Id.} at 416.
\textsuperscript{118} \textit{Id.} at 417.
\textsuperscript{119} \textit{Id.} at 420.
3. **The Increase in Transnational Collaborative Research on IPV in Africa**

Finally, I note briefly the large amount of research on IPV in Africa that is carried out through collaborations between African scholars and those from the North. The collaboration often has significant consequences for funding the research by institutions from the North.\(^{120}\) As described in connection with the fact-finding studies discussed above, the collaboration often includes participation by an NGO in the field of IPV as well.\(^{121}\) Collaboration also takes place between individual authors who “click” personally with one another, such as the co-authorship by Akua Kuenyehia and myself of a book on women and law in Africa which includes a lengthy section on IPV and was made possible by funding from my own institution in the U.S. and by the George Soros-funded Open Society Institute for West Africa.\(^{122}\) Another interesting collaboration in this field, transnational both in its authorship (by a Ghanian and a Canadian author) and its subject matter, was a study of the law of marital rape in Ghana, in which they used two judicial decisions, one from Canada and one from Niger, to suggest ways in which Ghanaian law on this subject might be challenged by similar litigation.\(^{123}\) Doubtless other examples are available. In closing, I note the insights gleaned from work on IPV that is simultaneously collaborative and comparative. One article, for example, by Swedish and Nigerian authors, compared and analyzed the results with respect to attitudes to IPV from the Demographic and Health Surveys administered in 17 African countries; it informs us that Ghana is neither the best nor the worst of the pack.\(^{124}\)

---

\(^{120}\) See, e.g., Emily C. Davis et al., *Patterns of Alcohol Abuse, Depression, and Intimate Partner Violence Among Township Mothers in South Africa Over 5 Years*, 21 AIDS BEHAV. 174 (2017) (collaboration by psychiatrists at UCLA and psychologist at Stellenbosch listing funding sources as the U.S. National Institutes of Mental Health, UCLA, and the National Institute on Alcohol Abuse and Alcoholism, among others); Courtenay Sprague et al., *How Nurses in Johannesburg Address Intimate Partner Violence in Female Patients: Understanding IPV Responses in Low- and Middle-Income Country Health Systems*, 32 J. INTERPERSONAL VIOLENCE 1591 (2017) (a collaborative study between researchers at the University of Massachusetts, the University of San Francisco, and the University of Witwatersrand).

\(^{121}\) See supra text accompanying note 37. See also Ashley M. Fox et al., *In Their Own Voices: A Qualitative Study of Women’s Risk for Intimate Partner Violence and HIV in South Africa*, 13 VIOLENCE AGAINST WOMEN 583 (2007) (collaborative study by U.S. authors at Yale University and Columbia University with South African authors at the University of Pretoria and the Development Bank of South Africa, collaborating with People Opposing Women Abuse (POWA) in Johannesburg, and funded by the World AIDS Foundation and the National Institutes of Mental Health).


III. The Impact of Transnational Feminist Work about IPV in Ghana

Where are we now as a result of more than two decades of transnational research and activism about IPV in Ghana? First, Ghana does now have a Domestic Violence Act (“DVA”), passed on February 21, 2007. Second, significant academic writing and analysis about IPV in Ghana was published soon after passage of the DVA. Third, a trend to envision IPV more as a public health problem than one susceptible to legal solution has emerged recently. Fourth, the focus on non-legal interventions has given rise to many creative attempts to address IPV throughout Africa, which may suggest routes to follow in Ghana. I discuss each of these changes below.

A. Passage of the Domestic Violence Act in Ghana and Experience Under It

After its transnational feminist origins, described in Part I above, the domestic violence bill was submitted to the Ghana Law Reform Commission in 2002 and then subjected to extensive outreach and consultation in all regions of the country in 2003 and 2005, in the course of which 2,270 participants were involved in meetings presided over by district chief executives, presidents of regional assemblies, or traditional rulers. As a result, the section that would have prohibited marital rape was excised from the bill, allegedly as incompatible with Ghanaian custom, although the particular code section at issue was in fact inherited from British law during the colonial period. That provision was deleted in a subsequent reform of the criminal law, but there is still a presumption of consent to sex in marriage unless the woman can somehow prove that her consent was revoked prior to the attack.

Despite their disappointment about the failure to include the marital rape provision, supporters of the bill, organized into a National Domestic Violence Coalition in 2003, campaigned vigorously for passage by organizing a pictorial campaign called “Faces of Violence,” lobbying members of parliament, increasing coverage in the press and other media, mobilizing public support by making a documentary on domestic violence, and running sensitization programs in markets and truck stations, trade unions, professional bodies, and among students, religious leaders, and traditional rulers. Those who opposed the bill based on calls to Ghanaian tradition were characterized by one Ghanaian feminist scholar as having “appealed
to essentialist notions of so-called ‘authentic’ and ‘pure’ African identities, reducing a discussion about women’s well-being, indeed women’s very lives, to one of cultural relativism.”

So today women in Ghana who are victims of IPV theoretically can avail themselves of the provisions of the DVA, which specifies and criminalizes offenses between household members or former partners, provides for warrantless arrest of the offender, and offers both criminal and civil protection orders, including ex parte interim orders, which can not only prohibit further abuse but also, among other things, forbid contact, order the offender to go into counseling, pay damages to his victim, and/or vacate the marital premises; violations of a protection order are criminal offenses.131 There are currently at least three dedicated domestic violence courts in Ghana.132 The DVA also provided for the establishment of a Victims of Domestic Violence Support Fund for victim support, construction of shelters, training, capacity building, and the like; even though the funding was to be primarily by voluntary donations, the fund was not established until 2016 according to Dorcas Coker-Appiah.

In 2011, a report was published concerning DOVVSU, the specialized police unit that is the primary entry point into the legal system for IPV complaints; it was written by a British intern at DOVVSU supported by the UK Voluntary Service Overseas program.134 By that time, there were 87 DOVVSU offices throughout Ghana, and the number was still growing, with plans for a national headquarters that would provide a one-stop shopping model of service delivery.135 According to the 2011 report, reporting of domestic violence had increased substantially, peaking at the time of the debates over the DVA.136 Reports of violence were listened to and documented; complaints were accepted, and about one half of the perpetrators were arrested.137 Thereafter, however, substantial obstacles confronted victims in their quest for justice. Despite provisions in the DVA for referral for court proceedings, very little happened in the way of formal legal remedy; there were few prosecutions and virtually no convictions, and protec-

130. Id. at 414.
131. Domestic Violence Act, 2007, Act 732 (Ghana), §§ 3(2) (criminalizing domestic violence); 9 (providing for warrantless arrest); 14 (providing for interim protection orders); 15 (listing remedies that can be sought in a protection order); 17 (authorizing court to order respondent into counseling and pay compensation); 20 (authorizing court to enter an occupation order for the marital home); 22 (criminalizing violation of protection order).
135. Id. at 5, 10.
136. Id. at 24.
137. Id. at 19, 23.
tive orders were not issued.138 This was due, but only in part, to the lack of resources for investigation at DOVVSU, as well as a more general lack of counseling, legal, medical, and other support services to which complainants could be referred.139

The primary reason for the lack of recourse to the system of legal rights provided in the DVA, according to the author of the 2011 report, was what she called a “family values” perspective on the part of both service users and DOVVSU personnel, under which “interests and rights of the family are above those of any individual member . . . . [C]entral priority [is given] to family unity. Women are ascribed the role and responsibility for maintaining that unity.”140 Consistent with this shared belief, women did not come to DOVVSU intending to leave the household, seek shelter, and pursue legal remedies but instead simply wanting to stop their partner’s violence by some kind of informal procedure.141 Responding to this, DOVVSU had begun, even before passage of the DVA, to offer arbitration meetings at their offices, presided over by DOVVSU personnel and attended by the complainant, perpetrator, and family members.142 About 70 percent of all cases were dealt with in this way, resulting in informal sanctions such as an apology, letter of warning, or follow-up meeting, and both service providers and DOVVSU officers had very favorable impressions of the process.143 In this way, survivors of violence enlisted the authority of the formal legal system to emphasize the seriousness of their complaints in the hope of stopping the violence; they were also relieved to have been listened to by a source outside the family and grew in self-confidence as a result.144 But this is a perversion of the appropriate legal process.

Although the DVA encouraged the use of alternative dispute resolution in domestic violence cases,145 there is a serious problem with having cases arbitrated by untrained police officers who share the general cultural valuation of the family over the individual. Mediation is a customary remedy within the family and community in Ghana, but it is often associated with blaming the victim for violence in the household.146 The author of the 2011 report therefore recommended the creation of a new system of alternative dispute resolution “rooted in the values of international standards that challenge victim blaming biases and ensure women’s experiences are

138. Id. at 22-23.
141. Id. at 3, 15.
142. Id. at 27-29.
143. Id. at 27-28.
144. Id. at 26, 33.
145. Id. at 29.
146. See id. at 28.
validated and their agency promoted.” 147 The system should be independent of DOVVSU but easily accessible, and officers there would refer complainants to its services. 148 She also recommended increasing access for service users to orders of protection. 149

B. Analysis and Writing about IPV in Ghana in the Last Decade

In 2009, the Gender Documentation Centre in Accra published a new volume on violence against women in Ghana. 150 Although it relied primarily upon the data produced in its 1999 survey, 151 it was a book of essays, whose contributors were asked to analyze the existing literature and theory on gender-based violence through a lens formed by the Ghanaian context. 152 The authors were primarily social scientists specializing in gender, not lawyers. 153 They discussed a variety of subjects, including the historical, political, economic, social, and cultural context of violence against women in Ghana, 154 the role of religion, 155 an economic analysis of violence, 156 the coverage of IPV in the Ghanaian press, 157 and its health impact. 158

One particularly interesting theme was the authors’ analysis of the unique historical role of the state in Ghana. One of the editors pointed out that the postcolonial state inherited gender (and other) hierarchies from the period of colonial rule, when the British consciously restructured gender relations so as to diminish women’s public roles. 159 Post-independence military regimes then normalized both male authority and coercive practices. 160 The other editor commented that the leaders of the independence movement explicitly favored modernization but also the restoration of “traditional culture,” although no such unitary or fixed culture existed; culture was in fact contested in the interests of different groups, dominant and non-dominant. 161 The postcolonial state valorized and institutionalized the values of certain groups, but was not committed to gender equality. 162 Its failure to implement effective measures against IPV was thus no


147. Id. at 38.
148. Id.
149. Id. at 39.
150. See generally Architecture of Violence, supra note 73.
151. Various authors did apply advanced statistical techniques to analyze the data from 1999. See, e.g., Kawkw Yeboah & Kofe Z. Bate, Prevalence and Predisposing Factors of Violence against Women and Girls, in Architecture of Violence, supra note 73, at 68.
152. Architecture of Violence, supra note 73, at 3.
153. See id. at ix-x.
154. Id. at 3, 19-20.
155. Id. at 129.
156. Id. at 227.
157. Id. at 265.
158. Id. at 286.
160. Id. at 20.
162. Ampofo & Prah, supra note 73, at 103-05.
surprise.

Takyiwaa Manuh, a leading gender scholar at the University of Ghana, pointed to a number of key factors leading to violence against women in Ghana, including poverty, authoritarianism in society and gender relations, acceptance of violence as a means of settling disputes, and contests over women’s autonomy, especially their sexuality.163 Supporting a family was both difficult and stressful under current economic conditions for large portions of the populace, who lived in a state of hunger and crowding, all of which bred family violence.164 Violence against women, she argued, was exacerbated by economic and social conditions, but was largely caused by the inequality of women and their perceived inferiority.165 Gender activists had primarily been attorneys, who saw customary law and culture as the major factors in gender inequality, with law reform and legal literacy the remedy, but a more comprehensive approach was needed.166

The topic of religion had not been the subject of a question on the 1999 survey, but it had come up repeatedly nonetheless, so the 2009 volume included two articles on the relationship between religion and violence against women in Ghana—one about Christianity and one about Islam.167 The chapter on Islam is a particularly interesting addition to the literature about IPV in Ghana, based as it is on an independent study involving interviews in 1998 and 2001 with 30 Muslim women who had either suffered violence personally or knew women who had.168 It concluded that, while the conservative form of Islam in Ghana supported submission of wives to their husbands, it was so intermingled with Ghanaian culture in the areas where it was prevalent that it was difficult to distinguish what was Islam and what was tradition.169

The chapter on the economic dimensions of IPV is an example of how subjecting existing data (from the 1999 study) to new analysis can yield important insights. One economic dimension of IPV is the role household finances may play in producing violence. Denial of economic resources to a spouse is recognized as a form of IPV, but the larger role played by the gendered nature of provisioning is important to recognize as well. The chapter notes that the primary factor reported as leading to marital conflict in the survey was the spending of the husband’s income and links this correlation to the social construction of the provisioning role as male.170

163. Manuh, supra note 161, at 38.
164. Id. at 44.
165. Id. at 58.
166. Id. at 60.
167. Mercy Amba Oduyoye, Catalyst, Resource or Roadblock?: A Critical Examination of the Christian Religion and Violence against Women and Children in Ghana, in ARCHITECTURE OF VIOLENCE, supra note 73, at 129; Rabiatu Ammah-Koney, Violence against Women in Ghanaian Muslim Communities, in ARCHITECTURE OF VIOLENCE, supra note 73, at 159.
169. Id. at 175-78, 185-86.
The authors note that IPV is seasonal, tracking periods when there is less available to provide for the family’s needs; the male head of family is threatened by requests for money and responds with violence.\textsuperscript{171}

It has typically been assumed that poor women are prevented from leaving abusive marriages because of their inability to support themselves, and many anti-violence projects have therefore aimed at the employment and economic empowerment of women. This connection is much more complex, say these authors, upon closer inspection.\textsuperscript{172} The 1999 data showed no significant correlation between IPV and the wife’s employment status; indeed, if a woman makes more than her husband, she is likely to experience increased levels of violence.\textsuperscript{173} Yet her economic circumstances are not what determine whether she leaves or stays; a desire to avoid social stigma, as well as emotional attachment to her husband, home, and children, are far more important.\textsuperscript{174} In short, the relationship between women’s economic empowerment and IPV is complex.

With the publication of this 2009 volume, Ghanaians—most of them well versed in the literature of Western feminism and IPV—returned to the data Ghanaian women had produced a decade earlier and developed an analysis of IPV rooted firmly in local soil. In July 2016, the government of Ghana published a report entitled \textit{Domestic Violence in Ghana: Incidence, Attitudes, Determinants and Consequences} [hereinafter “2016 Report”].\textsuperscript{175} The report paid tribute to those who had done empirical work on this issue in Ghana previously—mentioning, in particular, Dorcas Coker-Appiah and Akosua Adomako Ampofo—and acknowledged taking advantage of their knowledge about how to solicit survey responses from women who lived in remote areas and in male-dominated households.\textsuperscript{176} The 2016 Report began with a review of previous research in both Western and Ghanaian sources, to establish, it said, a conceptual foundation to guide the survey questions.\textsuperscript{177} Strangely, however, given the excellence and recency of the analysis provided in the 2009 volume, there are no citations in that section to the essays found in it, although a reference to the volume as a whole appears in the bibliography at the end of the lengthy report.\textsuperscript{178} Indeed, there are many more Western sources both in the Conceptual Framework chapter and in the bibliography than there are Ghanaian. This is puzzling.

Based on new statistical work funded by the UK, the 2016 Report does contain very reliable statistics on IPV in Ghana.\textsuperscript{179} It combines a good blend of quantitative and qualitative research and is outstanding both in the representativeness of the sample and sensitive interpretation of the survey results. To the usual categories of violence, it adds one called “social

\textsuperscript{171}. \textit{id.} at 243-44.
\textsuperscript{172}. \textit{id.} at 244-45.
\textsuperscript{173}. \textit{id.} at 245-46, 258-59.
\textsuperscript{174}. \textit{id.} at 251-52.
\textsuperscript{175}. 2016 Report, supra note 139.
\textsuperscript{176}. \textit{id.} at 9.
\textsuperscript{177}. \textit{See id.} at 27-43.
\textsuperscript{178}. \textit{id.} at 250.
\textsuperscript{179}. \textit{id.} at 20, 260-62.
violence,” which subsumes “acts of controlling behavior, such as preventing someone from seeing friends or family of birth; stopping someone from leaving the house; requiring to know where someone is at all times; stalking; spreading false information, videos or photos without permission; or forcing women and girls to have an abortion.”

The 2016 Report correlates each type of violence described by respondents with a variety of demographic categories, such as age, employment, geography, education, and marital status. In addition, it contains internationally comparative statistics about IPV as well as comparisons of its results with the data from the 2008 DGHS, showing improvement in Ghana. Physical violence to women had decreased from 17.2 percent in 2008 to 10.3 percent in 2015, and the incidence of women justifying wife beating fell from 36.6 percent in 2008 to 23.1 percent in 2015 and that of men from 21.8 percent to 13.8 percent over the same period. Of particular interest is the report’s assessment of the ways in which the Ghana DVA was adapted to the country’s context and thus unique in many ways—for example, in its use of alternative dispute resolution. (Northern scholars and policymakers have been skeptical about the use of negotiation and mediation in IPV cases because of the disparity of power between the parties.)

The 2016 Report recommended, among other things, that the DVA be amended to include the category of social violence. It also suggested the establishment of a Child Support Unit to reinforce the law on economic maintenance. Non-support cases in fact make up most of those classified as economic violence under the DVA and have required a large amount of the arbitration provided at DOVVSU.

In sum, IPV in Ghana has occasioned a great deal of research and insightful analysis by Ghanaian scholars over the last decade. The issue has effectively been institutionalized, not only with new legislation but also with official statistical monitoring of progress, and some favorable results have been forthcoming. At the same time, it has become clear that legislation will not solve the problem of IPV in Ghana, given victims’ continuing reluctance to make use of formal legal procedures and the persistence of
societal convictions that IPV is a matter to be addressed by families or traditional authorities. In this context, although legal reform is helpful, it is not the solution.

C. The Turn to a Public Health Approach to the Problem of IPV

Accepting the limitations of legal approaches, the scholarly literature on IPV in Africa has shifted to include a public health approach. This is aligned with the call of the World Health Organization to see this and other forms of violence against women as a serious and mainstream health problem. As with other trends described above, the shift to a public health approach was obvious first in South Africa, as scholars of psychology and health became involved in research on IPV. I have already noted the interest in the link between IPV and HIV. The link in fact consists of a number of vicious circles. IPV includes coerced sex, which puts women at risk of HIV, and abusive men are more likely to have HIV. Moreover, discussing condom use or refusing sex are frequent causes of violence, so attempts by women to use risk-reduction strategies make them vulnerable to further abuse. Thus HIV researchers have been compelled to see reduction of IPV as an HIV prevention strategy, yet they are perplexed about how to break these patterns in a society where women are expected to provide sex for men and any attempt to negotiate sex is seen as a challenge to men’s authority. Authors studying alcohol abuse and depression have quickly been confronted by the correlation between IPV and these problem behaviors as well.

Other researchers, both in South Africa and Ghana, have investigated mortality statistics and found IPV embedded in them. Two studies present an interesting contrast in how students of different disciplines may address similar problems. One, by a Ghanaian criminologist, was based on a content analysis of the newspaper articles in Accra about 72 spousal killings over a particular period of time, over 80 percent of them by men. The author focused on motives for the violence as described in the press, which included suspicion that the wife was unfaithful, threats of divorce, challenges to domestic authority, and refusal of sex. He concluded that Ghanaian men were excessively jealous and have trouble accepting separation (indeed, 25 percent of the offenders either committed or attempted

---

190. Fox et al., supra note 121, at 585; see also Loraine Townsend et al., HIV Risk Behaviours and their Relationship to Intimate Partner Violence (IPV) Among Men Who Have Multiple Female Sexual Partners in Cape Town, South Africa, 15 AIDS BEHAV. 132, 139 (2011).
191. Fox et al., supra note 121, at 590-91, 599.
192. Id. at 595, 599.
193. See, e.g., Davis et al., supra note 120, at S177-79.
195. Id. at 214.
suicide after the murder) and that women were now more actively resisting men’s coercive sexual demands.\(^{196}\) In another article based on the same data, he recommended that the government and NGOs carry out public education campaigns about the right to be free of violence (which has already been done) and pointed to the importance of marital therapy and counseling (both of which are virtually unavailable in Ghana).\(^{197}\) By contrast, a medical study carried out in South Africa examined death registers at mortuaries and reported the high mortality rate of young women, especially Colored women, caused by IPV—indeed, more than 50 percent of all female homicides (themselves six times the global rate).\(^{198}\) The authors made very concrete recommendations for how to interrupt and at least reduce the femicide toll: controlling access to firearms, interventions to reduce alcohol abuse, and improving the mental health system.\(^{199}\)

Focusing on IPV as a question of public health leads inexorably to a consideration of the capacity of the health system to address it. IPV survivors are more frequent users of the health care system than other women, not only because of their rate of injury but also because visiting a nurse or hospital is more acceptable culturally than going to the police.\(^{200}\) South African studies have shown the inadequacy of the health system’s response to IPV.\(^{201}\) Nurses—the main source of contact with the health system for most victims of violence—and other health personnel share the general acceptance of IPV in the society in which they live.\(^{202}\)

One South African health study found that most primary care providers had internalized the cultural attitude toward IPV as normal and were untrained in the dynamics of violence within the family; they were also

\begin{quote}
196. Id. at 214-15. Another article on this topic, which looks at articles about femicide in two Accra newspapers over the same period, concludes that the media framing of these crimes as exceptional, or excused, or minimized, or pathological, or romantic, or the victim’s fault—all irrational motivations—totally fails to connect them to the more general and widespread issue of domestic violence and the gender relations in which it is embedded. See Audrey Gadzekpo, ‘She Made Me Do It’: Discursive Frames and Representations of Spousal Murder in the Ghanaian Press, in ARCHITECTURE OF VIOLENCE, supra note 73, at 265.


199. Id. at 553.

200. Sprague et al., supra note 120, at 1609, 1612.

201. See e.g., id. at 1597.

202. The female nurses in one study had themselves experienced IPV in their own marriages; even though professionals, they were under constant scrutiny and jealousy by their own partners. Julia Kim & Mmatshilo Motsei, “Women Enjoy Punishment”: Attitudes and Experiences of Gender-based Violence among PNC Nurses in Rural South Africa, 54 SOC. SCI. & MED. 1243, 1247-51 (2002). None of the nurses interviewed would refer a woman to the police; they said they would instead send her back to deal with the problem within the family. Id. at 1247. Thus, the authors concluded, any educational intervention must begin with the subject’s personal experience, involve a process of growing self-awareness and healing, and be carried out in ways that reflect understanding of local traditions. Id. at 1252-53.
\end{quote}
overwhelmed and burnt out.\textsuperscript{203} An examination of medical records and follow-up interviews revealed that fewer than ten percent of IPV survivors had been identified during their interaction with the health system, all of whom were found by the nurses carrying out the study to need treatment for anxiety, depression, or PTSD.\textsuperscript{204} Even the empathic listening by those nurses during the study appeared to help these survivors.\textsuperscript{205} The conclusion was clear: IPV training should be provided to all primary care providers; it should be compulsory in nurses’ training, and training should focus on a more empathic and patient-centered approach.\textsuperscript{206} One has to wonder how this can be accomplished in a healthcare system that is underfunded and overburdened.

The public health approach to IPV is comparatively new in Ghana, but a Ghanaian scholar with a social work degree from Columbia University and Ph.D. from the University of Toronto published an article in this vein in 2015.\textsuperscript{207} In 2011, he had carried out interviews with women recruited among outpatients at hospitals in Northern Ghana.\textsuperscript{208} He found that seven out of ten of the women interviewed had experienced IPV in the past 12 months—29 percent of them physical abuse, 34 percent sexual abuse, and 62 percent psychological violence.\textsuperscript{209} Statistical analysis of the co-occurrence of these problems with mental health problems showed, for example, that the women who experienced psychological violence were 10.5 times more likely to report suicidal ideation than non-abused women, those who had experienced physical violence were 3.94 times more likely to have had suicidal thoughts, and survivors of sexual violence 2.21 times more likely.\textsuperscript{210} In short, IPV clearly has an important impact on the mental health of its victims.

The study’s author recommended interventions involving both public education and changes in the healthcare system. He specified that educational campaigns should be sustained and community-based, not just carried out by women’s rights NGOs, and should focus on critical questioning of the basis for men’s violence against women.\textsuperscript{211} In addition, he recommended that a protocol be developed and used to screen all women patients for IPV, to diagnose associated mental health problems, and to assess the care and support they required; these topics should also be included in the curriculum of the institutions that train health care profes-

\begin{thebibliography}{100}
\bibitem{203} Kate Joyner & Bob Mash, \textit{Quality of Care for Intimate Partner Violence in South African Primary Care: A Qualitative Study}, 29 \textit{Violence & Victims} 652, 661-65 (2014).
\bibitem{204} Id. at 663, 661.
\bibitem{205} Id. at 665.
\bibitem{206} Id. at 666.
\bibitem{208} Id. at 253-255.
\bibitem{209} Id. at 256 Table 1.
\bibitem{210} Id. at 257.
\bibitem{211} Id. at 261.
\end{thebibliography}
His article noted that, although discussion of the link between IPV and health was common in European and North American literature, the topic was virtually unstudied in Ghana except with respect to homicide and suicide. Its importation into the conversation about IPV in Ghana marked a departure from the more typical focus on legal remedies; and his recommendations for reform in the curriculum for medical training injected some specific ideas for a new strategy to address the problem.

D. A Focus on Non-Legal Interventions to Address IPV

Much of the literature on IPV in Africa has now gone beyond discussion of legal solutions, criminological analysis, and the like. It has also progressed beyond simple documentation of the problem, which has been accomplished, and discussion of the complex interplay of motivations for IPV in the African context. Instead, there is a good deal of research and writing about non-legal interventions and their effectiveness. Activists had long recognized this necessity and been organizing much-needed services for IPV survivors, such as shelters, psychological and occupational counseling, and the like. Ghana now has at least two centers, established by The Ark Foundation and by Women’s Initiative for Self Empowerment, which provide both shelter and a range of other services for victims of IPV. The larger question is how to affect attitudes that may be deeply engrained in the wider society, especially in rural areas, and to interrupt the transmission of violence between generations, as boys who saw their mothers beaten abuse their own wives.

Widespread experimentation is going on in many African countries with various types of community education campaigns, as well as with treatment programs for perpetrators of IPV. In Sierra Leone and Niger, for example, men are enrolled in so-called “husband schools” and attend monthly classes about gender equality, IPV, and sexual and reproductive health. In Senegal, there is interest in starting a “#MeToo” campaign for women who have suffered IPV, similar to the international movement calling attention to sexual harassment. Organizations, such as the Male Norms Initiative in Rwanda, Safe Homes and Respect for Everyone in Uganda, and both Raising Voices and Stepping Stones programs in many African countries, all focus on encouraging critical thought about gender

212. Id.

213. Id. at 251. An exception is Kodjo A. Senah, Coping with the Health Burden of Violence against Women, in ARCHITECTURE OF VIOLENCE, supra note 73, at 286, 298.


norms associated with IPV in a setting that combines group education and community engagement.217 These programs are being studied by qualified researchers for their effectiveness at changing attitudes and reducing the incidence of IPV.218 Study, comparison, and evaluation of anti-IPV programs throughout Africa has revealed that the most effective ones “were initiated with the support of local community leaders in almost all cases,” brought people together to discuss stereotypes, behaviors, and gender-related issues surrounding violence and sexuality (in violation of taboos and norms of secrecy about these matters), and were thus inherently reinforcing because of the social nature of the interaction.219 Unlike the U.S. model of individual or small-group therapy for IPV offenders, these interventions are community-wide and typically involve traditional leaders, despite the risks of importing their patriarchal attitudes.220

One Ghanaian scholar who currently teaches in Canada has proposed a very ambitious program to combat IPV in Ghana, modelled on successful interventions previously used against other public health threats.221 He noted the inherent limitations of a legislative approach to IPV, one that views it simply as a crime, and argued that “only the feminist framework of patriarchy resonates in African and non-Western scholarship on DV.”222 Such a framework would focus not just on punishment of offenders and support of victims, but rather on social transformation through “sustained public/civic education on gender equality and women’s rights, targeted resistance action against woman abuse, socio-economic empowerment of women, and holding traditional and political leaders accountable for social change.”223 His proposal was very concrete:

[T]he creation of a National Task Force on Domestic Violence . . . with representation from traditional rulers, religious leaders, political parties, professional bodies, and the media . . . charged with initiating and coordinating activities within the various bodies represented on it by holding quarterly meetings to deliberate on the way forward for ending DV and to discuss and disseminate what their respective institutions are doing to address the problem.224

217. See Laura Ann McCloskey et al., Determinants of Intimate Partner Violence in Sub-Saharan Africa: A Review of Prevention and Intervention Programs, 7 PARTNER ABUSE 277, 293-301 (2016).
218. McCloskey et al., supra note 217, is an example of such a review, having chosen only those programs which met the evidence base and scientific standards for the study. Id. at 291. For example, a six-week program called Your Moment of Truth is used with adolescent boys in high schools in slum areas of Nairobi, both to raise their awareness and to promote bystander interventions to domestic violence. The program was shown to have significantly improved the boys’ attitudes to girls and women for up to a year after its conclusion and to have made them more likely to intervene if they witnessed IPV. Id. at 302.
219. Id. at 305.
220. Id. at 304-05.
222. Id. at 70, 73-74.
223. Id. at 74.
224. Id. at 76.
Traditional leaders would be held accountable for campaigning against IPV and sanctioning offenders in their communities, using traditional sanctions such as shaming, if effective; religious leaders in this extremely religious country would be charged with preaching, educating and counseling about the issue; and leaders of professional groups, the media, and political leaders would be expected to make regular public pronouncements in opposition to IPV.\textsuperscript{225} He also advocated setting up a program to establish groups of gender-egalitarian men and women as mentors in local communities and promoting the work of social workers and health care providers throughout the country with respect to IPV.\textsuperscript{226} A somewhat similar public health campaign using village and community volunteers and leadership structures was successful in Ghana in defeating both guinea worm and AIDS, he argued, so a comparable approach should be applied to addressing IPV.\textsuperscript{227} He proposed a tax on cigarettes, soft drinks, and alcohol to pay any associated costs.\textsuperscript{228}

The appearance of articles like this is very encouraging, making use, as it does, of Northern research on IPV, addressing the limitations of a legal approach to it, envisaging it as a public health challenge, taking advantage of experiments in social change attempted in Africa, and adapting them to the Ghanaian context. Rather than a vague call for cultural change, the article's author sets forth a specific and detailed proposal modeled on social change programs that had shown results in Ghana in the past. Of course, the problem of involving traditional and religious leaders is different with respect to IPV: whereas they did not cause guinea worm and were anxious to rid their communities of it, they have been a part of the problem of IPV themselves in the past.\textsuperscript{229} But it is impossible to make the changes necessary to reduce IPV without their involvement, so the suggestion of a national campaign, with political will and support behind it, which would both involve local leaders in its design (perhaps experimenting with different approaches in different areas) and hold them accountable for the results, holds out a good deal of promise.

IV. The “Feedback Loop”: Insights for U.S. Scholars and Activists from Africa

While tracking transnational influences in and out of Africa, it is also important to note the transformative impact of collaborative work in Africa upon scholars and activists in the U.S. Certainly, living and working in Africa and my many interchanges and friendships with African scholars and feminist activists has had a profound influence on my own life, directing the nature of my work and the way I think about women's issues

\textsuperscript{225} Id.
\textsuperscript{226} Id. at 77-78. The University of Ghana has been offering a degree in social work for two decades, although social work is comparatively unknown in West Africa. Id. at 77.
\textsuperscript{227} Id. at 79.
\textsuperscript{228} Id.
\textsuperscript{229} See id. at 76, 79.
in general. Rather than describe my own experience, however, I highlight here that of a colleague who was kind enough to comment on the first draft of this Article and has recently published about the effect of her work in Africa upon her practice in the U.S.\textsuperscript{230} She—Elizabeth Brundige—served as a judicial clerk on the Constitutional Court in South Africa and also, as a law student, lawyer, and law professor, has participated in numerous projects to research solutions for problems faced by women and girls in Africa and other countries.\textsuperscript{231} In her comments at the symposium that elicited this Article, Brundige told of how her work on gender justice in Southern Africa had informed her approach to a current project about domestic violence in Tompkins County, New York, and how she and her collaborators reached conclusions about the way to do IPV work in this context that are consonant with the insights from Ghana reflected above:

[T]he involvement of a Zambian lawyer studying in the U.S. as co-project director for our Tompkins County project and of LLM students from Uganda, the Maldives, India, Pakistan, Mexico, and elsewhere have deeply informed our understanding of local problems and solutions.

For example, one of our local initiatives has involved conducting a "gathering voices campaign" where we have spoken with domestic violence survivors, community service providers, judges, legal professionals, faith leaders, and others about gaps, challenges and solutions in local domestic violence prevention and response.

Similar in some ways to the insights coming from Ghana, our team has become absolutely persuaded that efforts to implement the right to be free from domestic violence cannot just be focused on the law and criminal justice but must be multifaceted and multi-dimensional.\textsuperscript{232}

Brundige went on to describe how service providers had begun thinking about transformative justice remedies\textsuperscript{233} and of the growing conviction that it was necessary:

[to involve community leaders, including within marginalized communities for whom formal justice processes and agencies may not resonate culturally, [and] . . . to include public health approaches, initiatives that focus on public and private employers, work with religious leaders, youth initiatives, and community support groups that are led by survivors themselves.\textsuperscript{234}]


\textsuperscript{232} Notes for Brundige's commentary at the March 15, 2018 conference on transnational feminism (on file with author) [hereinafter Brundige, Notes].

\textsuperscript{233} Transformative justice, which involves meetings between victim, offender, and community members who try to work out an appropriate resolution that both protects and compensates the victim and seeks to rehabilitate the offender in a way that is satisfactory to all parties, bears a resemblance to some forms of traditional African conflict resolution.

\textsuperscript{234} Brundige, Notes, supra note 232.
Reflecting more formally on some of the lessons she had received from the South African justice for whom she had worked, Sandile Ngcobo, in a tribute article following his retirement, Brundige focused on the appeal of human rights law (much more frequently cited in Africa than in the U.S.) and the necessity to interpret and apply it with sensitivity to the local context. She noted that the language of human rights “resonated deeply with our Tompkins County community,” which led her clinic, together with the community groups with which they worked, to introduce a resolution into the county legislature declaring that freedom from domestic violence is a fundamental human right. The campaign for passage included a photographic campaign, in which community members responded to a prompt on a whiteboard: “Freedom from domestic violence is a human right because . . .,” and the implementation phase included a “Gathering Voices Campaign,” in which conversations about the meaning of the right to be free from domestic violence took place:

In interviews and story circles, judges, law-enforcement officials, legislators, service providers, educators, domestic violence survivors and many others identified gaps in our community’s response to domestic violence. They also elaborated upon what they believe it means to say that freedom from domestic violence is a fundamental human right . . . [thus] giving a deeply localised context and texture to the more minimalist international right.

In short, Brundige and her collaborators put into action in the context of an upstate New York town many of the insights articulated by Ghanaians described above: the need for more than a legal approach to IPV, the necessity of a deep attention to local context, the need for widespread dissemination of the conversation about IPV, the involvement of diverse community members in the campaign to eradicate it, and the importance of participation by a variety of groups, especially marginalized groups, within a community in any project for legal change. She attributes many of these insights to the lessons she learned while working on women’s and human rights in Africa.

Not many U.S. scholars appear to have written about their experiences of this “feedback loop.” More should do so. Another line of fruitful

235. See Brundige, supra note 230, at 14.
236. Id.
237. Id. at 14-15.
238. Id. at 15.
239. I note the existence of literature from non-legal disciplines counseling various forms of “staying home.” One author notes that feminists should attempt to “re-inhabit” their own homes “through the lens of the colonized and racially dispossessed.” Shireen Roshanravan, Staying Home While Studying Abroad: Anti-Imperial Praxis for Globalizing Feminist Visions, 2 J. FEMINIST SCHOLARSHIP 1, 2 (2012), http://www.jfsonline.org/issue2/pdfs/Roshanravan.pdf [https://perma.cc/U8RL-2744] (counselling coming to terms with our own indigenous peoples and settler colonial histories and then engaging in coalitional politics transnationally by connecting through non-dominant differences). Id. at 3. Another describes collaborative work between African women’s organizations and Canadian students and community groups, in which the students, after studying transnational feminist critiques of international development, work with local Canadian community groups to draft fund-raising proposals for collaborative projects to support
research might trace intra-African interactions and influences—that is, how transnational feminism operates across African borders—or the influence of Ghanaian writers and activists on the discourse and activity in other African countries and internationally. For example, Amoakohene’s article, cited above, has been cited 167 times on Google Scholar, mostly by scholars in non-Western countries, such as Iran, India, Turkey, and Egypt. How has Ghana’s development of the law, scholarship, and policy on IPV affected developments in Africa and elsewhere, including in the international arena, where Ghana is very active? In short, as Brundige asked at the March 2018 symposium, how does “transnational feminism connect[] the global and local in ways that transform global understandings as well”?

**Conclusion**

This discussion of the development of literature and activism about IPV in Ghana has been intended to show the effects of transnational feminism, a process that learns from itself over time. The idea that something could be done about pervasive IPV was initiated, at least in part, in Ghana by international contacts—at conferences, by studying or doing research in one another’s countries, and reading the literature coming out of each context. U.S. feminists, with all good intentions, could not know what might work in Ghana, just as they have not definitively figured out what works best at home. Thus, the increase in research and publication on IPV by Ghanaians themselves has enriched our understanding of it both in its par-

---

240. Amoakohene, supra note 214. Google Scholar shows that Amoakohene’s article has been cited in 35 studies of other sub-Saharan African countries, including articles that are not necessarily about IPV (including articles on HIV/AIDS and medical sector reform) and in 28 studies of countries outside sub-Saharan Africa, with particular interest in Iranian publications about domestic violence (13 times). Amoakohene: Violence Against Women in Ghana, Google Scholar, https://scholar.google.com/scholar?cites=90614803304242462&as_sdt=5,33&sciodt=0,33&hl=en [https://perma.cc/S6R9-273D] (last visited Apr. 5, 2019).


The insights Africans have gained, in analyzing, theorizing, and experimenting with approaches to IPV, are valuable for feminists writing in the global North as well. Having just read a good deal about IPV in African society as a response to women challenging traditional gender norms, I stumbled across this analysis in an article about misogyny in the allegedly post-patriarchal U.S. at a time of intense attention to sexual harassment in the workplace (the #MeToo movement):

I think most misogynistic behavior is about hostility towards women who violate patriarchal norms and expectations, who aren’t serving male interests in the ways they’re expected to. So there’s this sense that women are doing something wrong; that they’re morally objectionable or have a bad attitude or they’re abrasive or shrill or too pushy. But women only appear that way because we expect them to be otherwise, to be passive.  

I choose to use this quotation in closing this lengthy case study—one which highlights the uniqueness of IPV in a particular context—to recapture the need to remember the similarities that are also present in those particulars—the “common differences” of which Chandra Mohanty wrote in the quotation with which I began. But it would not be complete without also noticing, as did Rosemary Ofeibea Ofei-Aboagye in the quotation that followed, the “germs of ideas, buds of awareness” growing in us all.

243. The production of research by Ghanaian feminists, both men and women, continues apace; I have discovered new articles in press even as I wrote this piece and, with apologies, was unable to include them all.
