

## **Witchcraft Branding Against the Elderly: Implications on the Wellbeing of the Aged**

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### **Abstract**

Witchcraft branding remains a pervasive, yet historically under-examined, human rights and public health crisis affecting vulnerable populations, particularly the elderly. This seminar paper provides a comprehensive examination of the phenomenon of witchcraft accusations directed at the aged and its profound, multi-dimensional implications for their physical, psychological, and socio-economic wellbeing. To deconstruct this phenomenon, the paper rigorously applies Scapegoat Theory and Labeling Theory. Scapegoat Theory illuminates how communities facing severe socio-economic frustrations displace their aggression onto defenceless elders, while Labelling Theory elucidates the irreversible social death that occurs once an elder is branded a witch. Furthermore, the paper provides a thematic literature review highlighting the intersection of ageism, poverty, and religious extremism. Ultimately, the paper concludes that witchcraft branding constitutes a severe form of elder abuse. It calls for targeted gerontological policies, the integration of behavioural health education into primary care to demystify the aging process, and the strict legal enforcement of human rights protections for the elderly in Nigeria.

**Key words:** *Witchcraft branding, elder abuse, human rights.*

### **Introduction**

Aging is a universal biological process traditionally associated with the accumulation of wisdom, respect, and communal reverence, particularly within the African socio-cultural context. However, in contemporary times, the sanctity of old age is increasingly being threatened by a severe human rights and public health crisis: witchcraft branding. In highly religious and resource-constrained environments, socio-economic hardships such as poverty, sudden deaths, and unemployment are frequently attributed to supernatural forces. Tragically, the elderly due to their declining physical strength, reduced economic productivity, and social

isolation have become the primary targets of these supernatural accusations. The belief in witchcraft and the subsequent persecution of alleged witches is not a relic of the medieval past; rather, it is a contemporary global phenomenon that frequently intersects with the vulnerabilities of aging. Globally, these accusations frequently surface in communities experiencing severe social, economic, or environmental strain. Witchcraft acts as a culturally sanctioned, epistemological framework to explain the unexplainable such as sudden deaths, incurable diseases, crop failures, or financial ruin (Miguel, 2005). In modern times, across parts of Asia, South America, and Oceania, the elderly remains disproportionately targeted. As individuals age, their physical and cognitive changes, coupled with a decrease in economic productivity and social power, make them easily identifiable targets for communities seeking supernatural explanations for natural misfortunes.

In Sub-Saharan Africa, the discourse surrounding witchcraft has taken on complex dimensions in the post-colonial era. Scholars have consistently noted that rather than disappearing with urbanization and modern education, witchcraft beliefs have adapted to modernity. They often serve as a localized mechanism to explain the extreme inequalities and sudden misfortunes brought about by modern capitalism and failing state infrastructures (Geschiere, 1997). In traditional African societies, the elderly was universally revered as custodians of ancestral wisdom, oral history, and moral authority. However, shifting family dynamics have disrupted this safety net. Where adequate social welfare systems are absent, the burden of elder care falls squarely on the extended family. When economic resources become drastically scarce, the elderly are increasingly and tragically viewed as economic burdens. This shift creates a fertile ground for witchcraft accusations. In countries like Ghana, Tanzania, and South Africa, elderly women and men are frequently driven from their homes into isolated “witch camps” or subjected to mob justice following accusations of causing local tragedies (Igwe, 2017).

In Nigeria, witchcraft branding represents a significant, yet largely silent, public health and human rights challenge. The nation's socio-economic volatilities marked by high youth unemployment, inadequate healthcare, inflation, and high mortality rates create a high-stress, low-resource environment. In such environments, citizens frequently seek supernatural explanations for structural hardships. This cognitive dissonance is heavily compounded by the proliferation of radical, independent religious movements, particularly certain charismatic and prophetic churches that monetize "deliverance" and exorcism ministries. Spiritual leaders sometimes validate communal suspicions by pointing out specific individuals as the spiritual architects of a family's lack of progress (Eboiyehi, 2017). For the Nigerian elderly, this spiritualized worldview is exceptionally dangerous. Normal physiological and cognitive changes associated with aging are rapidly criminalized.

Cross River State presents a unique socio-cultural and historical tapestry regarding the occult. Historically celebrated for the cessation of the killing of twins, the state still grapples with deeply entrenched beliefs in supernatural agency. While significant international and national attention in Cross River State has rightly focused on the tragic phenomenon of "child witches," the elderly represents a heavily targeted, yet largely ignored, demographic in both urban centers like Calabar and rural enclaves across the state. In many communities within the state, older adults, particularly widows who lack the protection of influential male relatives, are highly susceptible to branding. Physical attributes associated with aging such as bloodshot eyes from years of exposure to cooking smoke, kyphosis (stooped posture), wrinkled skin, or the solitary mumbling and confusion associated with Alzheimer's disease and other dementias are culturally misinterpreted as evidence of nocturnal, malevolent activities (Ifot).

The core problem is that this branding triggers a horrific cascade of elder abuse. Once labeled a witch, the elderly is stripped of their fundamental human rights. They face severe physical violence, mob justice, banishment to isolated forests, psychological torture, and

complete economic disenfranchisement. This crisis forces society to confront a profound contradiction: “We describe old age as a blessing and a gift. Yet in communities where witchcraft branding against the elderly is rampant, that ‘blessing’ is met with stigma, exclusion, and violence. If dignity is removed from aging, can we honestly still call it a gift?”

Despite the severity of this phenomenon, witchcraft branding against the elderly remains a largely silent and under-researched area within social work discourse in Nigeria. Therefore, the primary objective of this paper is to critically examine the phenomenon of witchcraft branding directed at the aged. Specifically, this paper will utilize sociological theories to deconstruct why the elderly are targeted and thoroughly analyze the profound implications of this branding on their physical, psychological, and socio-economic wellbeing, ultimately proposing targeted social work and policy interventions.

## **Literature Review**

The erosion of the traditional African extended family has increased the vulnerability of the elderly, Aboderin (2018) argues that modernization, rural-urban migration, and deepening poverty have strained intergenerational obligations in Nigeria. As younger generations move to urban centers like Calabar or Port Harcourt in search of employment, the rural elderly is left isolated. When these youths face economic failure, the resulting frustration is often directed back at the village. According to Silvia Federici (2020), witchcraft accusations against the elderly are fundamentally tied to the primitive accumulation of wealth and property. By branding an elderly person especially a widow as a witch, relatives and community members can legitimize the confiscation of her land and assets, while simultaneously absolving themselves of the financial responsibility of caring for her.

Brooke and Ojo, (2021) explored how the symptoms of neurocognitive disorders (such as dementia, Alzheimer's, or delirium caused by simple infections) are consistently misinterpreted in highly religious, low-literacy environments. Symptoms like wandering at night, speaking to unseen people (hallucinations), memory loss, and personality changes are clinically understood as manifestations of brain disease. However, in many Cross-River communities, these exact symptoms are interpreted as a "confession" of witchcraft or active engagement with the spirit world. Because behavioral health and geriatric psychiatric care are severely underfunded and inaccessible to the rural poor, these medical conditions are exclusively managed through a spiritual lens, invariably leading to abuse rather than medical intervention.

Leo Igwe (2012) and Peter Geschiere (1997) have extensively documented the role of religious actors in facilitating witchcraft accusations. In Nigeria, the shift toward Pentecostalism that heavily emphasizes "spiritual warfare" has inadvertently fueled the crisis. Foxcroft (2014) notes that some religious leaders act as "witch-finders," utilizing their authority to legitimize the suspicions of families. Families pay these leaders for deliverance sessions to cure their misfortunes, creating a profitable economy built on the scapegoating of the vulnerable. The literature asserts that without the validation of these spiritual authorities, many communal suspicions would not escalate to physical violence or permanent ostracization. According to Obeten et.al (2024), branding of the aged as witches severely diminishes their quality of life and results in severe psychological trauma and human rights violations.

To theoretically ground these documented socio-cultural dynamics, the literature frequently relies on Scapegoat Theory, rooted in the Frustration-Aggression hypothesis developed by Dollard et al. (1939), Scapegoat Theory posits that when individuals or groups experience systemic frustration, hardship, or blocked goals that they cannot easily resolve, they displace their aggression onto a vulnerable, marginalized, and relatively powerless out-group

(Glick, 2002). In contexts like Cross River State, where structural frustrations such as chronic youth unemployment, high infant mortality, sudden deaths from preventable diseases, inflation, and inescapable poverty are rampant, citizens are subjected to immense, continuous psychological strain. Because it is structurally impossible for an individual to physically fight or punish abstract macro-economic failures, systemic corruption, or failing state infrastructures, human psychology demands a tangible, localized antagonist.

Scapegoat theory details how this communal aggression is pathologically channeled toward those who possess the least capacity to fight back. The elderly, experiencing age-related physical frailty, cognitive decline, a decrease in economic productivity, and a lack of political or social leverage, become the perfect, defenseless targets for displacement. Within this high-stress environment, normal physiological and cognitive changes associated with aging such as bloodshot eyes from years of exposure to cooking smoke, a stooped posture (kyphosis), wrinkled skin, or the solitary mumbling and confusion caused by Alzheimer's disease and other dementias are culturally misinterpreted as evidence of nocturnal, malevolent activities.

Consequently, when a younger relative fall ill, experiences a sudden financial ruin, or faces a tragedy in the city, the rural elderly relative is rapidly scapegoated. Blaming an elderly person's presumed "witchcraft" for complex structural hardships provides a powerful, immediate psychological coping mechanism for the community. It effectively transforms an uncontrollable macro-level failure into a tangible, interpersonal conflict that can be interrogated, managed, and penalized. By attacking, banishing, or sacrificing the elder, the community artificially restores its internal psychological equilibrium, gaining a false sense of control over their chaotic environment while completely avoiding the true, systemic socio-economic causes of their destitution.

Once an elder is targeted as a scapegoat, “Labeling Theory” developed by sociologist Howard Becker (1963), explains the irreversible social death that immediately follows. The theory suggests that self-identity and the subsequent behavior of individuals are profoundly determined or influenced by the terms used by society to describe and classify them. It emphasizes that deviance is not an inherent quality of an act itself, but is rather a consequence of the societal reaction, definition, and application of a stigma to an individual. Within the dynamic of witchcraft branding, when an elderly person is officially labeled a “witch” by family members, community peers, or religious authorities, an abrupt and devastating sociological shift occurs. This label immediately functions as a “master status”—a dominant, all-encompassing identifying characteristic that aggressively overrides all of their previous identities, historical roles, and lifelong societal contributions. The individual is instantly stripped of their status as a mother, grandfather, respected elder, or custodian of ancestral wisdom; they are reduced entirely and solely to a malevolent force.

Once this master status is successfully applied, it initiates what sociologists term a communal “degradation ceremony”. Because the label carries a supernatural and existential threat, the surrounding community feels morally justified, and often spiritually obligated, to completely withdraw empathy, familial care, and basic human rights from the individual. This initiates an irreversible social death before physical death even occurs, legitimizing horrific abuses, physical banishment, and the confiscation of the elder's property or land.

Furthermore, Labeling Theory deeply addresses the internalization of this external stigma, a phenomenon known as secondary deviance. When an elder particularly one already experiencing mild neurocognitive impairment or dementia is abruptly isolated, subjected to physical violence, and cut off from all supportive human contact, they experience severe sensory deprivation and cognitive confusion. When they are repeatedly beaten, interrogated, and told by their own children or trusted religious leaders that they fly at night to cause local

tragedies or eat the souls of children, the elder's psychological reality is shattered. Out of profound emotional trauma, disorientation, and absolute psychological exhaustion, the elderly victim may eventually begin to question their own memory and falsely confess to the alleged acts of witchcraft simply to make the torture stop. This tragic self-fulfilling prophecy permanently cements their status as a social pariah, demonstrating how the social application of the label itself acts as the definitive instrument of their destruction.

### **Implications for the Wellbeing of the Aged**

Witchcraft branding of an elderly person is not merely a social stigma or a passing rumor; it is a catalyst for multidimensional, severe abuse that aggressively deteriorates every facet of their wellbeing. Below are some of these implications.

#### **Physical Wellbeing**

The most immediate and visible implication of witchcraft branding is the absolute violation of physical safety. Accused elders in Nigeria are routinely subjected to horrific forms of mob justice. This includes severe beatings with sticks and machetes, being tied up and left in the sun, or being forced to ingest toxic herbal concoctions intended to "prove" their innocence or cleanse them of dark magic (Igwe, 2012). Tragically, instances of accused elders being burned alive or lynched remain a reality. Even when they escape direct physical violence, the secondary physical implications are fatal. Accused elders are often banished from their ancestral homes. Forced to live in isolation, frequently in makeshift, dilapidated huts at the edges of the village or in the forest, they are deprived of adequate nutrition, safe drinking water, and basic hygiene. Consequently, underlying geriatric conditions such as arthritis, hypertension, diabetes, and cardiovascular diseases, are left entirely untreated. Minor infections become life-threatening. The physical trauma of assault combined with the neglect of chronic illnesses ensures a rapid, painful decline in physical health and premature mortality.

## **Psychological and Mental Wellbeing**

The psychological trauma inflicted by witchcraft branding is catastrophic. Older adults in Nigerian culture place immense psychological value on family continuity, respect from younger generations, and their legacy. When they are accused, humiliated, and attacked by their own children, grandchildren, or neighbors, it results in profound emotional betrayal and moral injury. From a behavioral health perspective, the implications are severe. The psychological trauma inflicted by witchcraft branding is catastrophic. Because conditions like dementia are frequently misinterpreted as witchcraft, accused elders are subjected to profound stigmatization, leading to acute depression, social starvation, and severe psychological distress (Brooke & Ojo, 2020). The isolation brought on by the active enforcement of the “witch” label means these elders suffer from crushing loneliness and social starvation. Furthermore, the constant, pervasive fear of impending attacks keeps their nervous systems in a prolonged state of hyper-arousal. This chronic stress significantly damages the brain, rapidly accelerating the progression of any pre-existing dementias or cognitive decline. Stripped of their dignity and support system, suicidal ideation becomes highly prevalent among the accused, as death is perceived as the only escape from the relentless persecution.

## **Socio-Economic Wellbeing**

Witchcraft branding is frequently and strategically weaponized to strip the elderly of their socio-economic assets. In many patriarchal settings, when a man dies, his relatives may accuse the widow of killing him via witchcraft. This accusation serves a clear economic function: it delegitimizes her standing in the family, allowing the deceased husband's relatives to confidently confiscate her property, farmland, and life savings without communal backlash (Federici, 2020). Stripped of their assets and ostracized by the community, the accused elderly is plunged into absolute, intractable poverty. They become social pariahs. Market women will

refuse to trade with them, neighbors will not speak to them, and no one will offer them charity, for fear of being associated with a witch. This effectively severs their socio-economic support networks, ensuring total financial ruin. They are denied access to whatever meager communal resources might exist, left to die of starvation and exposure.

## **Conclusion and Recommendations**

The branding of the elderly as witches in Cross River State, and Nigeria at large, is a complex socio-cultural pathology fueled by extreme economic desperation, the unchecked proliferation of religious extremism, and deep-seated ageism. As elucidated by Scapegoat and Labelling theories, the elderly, due to their physical frailty and cognitive vulnerabilities, are systematically transformed into vessels for communal anxieties. They are stripped of their humanity, isolated, and subjected to horrific abuses that ravage their physical bodies, destroy their mental health, and plunge them into total economic destitution.

Addressing this crisis requires recognizing witchcraft branding not as a cultural quirk, but as a severe human rights violation and a public health emergency. To protect the wellbeing of the aged, the following interventions are recommended:

1. **Integration of Geriatric and Behavioral Health into Primary Care:** There must be a concerted effort by the Ministry of Health to integrate basic gerontological and psychiatric education into primary healthcare centers in rural areas. When community health workers can diagnose conditions like dementia, Alzheimer's, and delirium, and properly explain these conditions to families as medical not spiritual issues, it severely undercuts the foundation of witchcraft accusations.
2. **Strict Legal Enforcement and Policy Frameworks:** The government must move beyond rhetoric and actively enforce the Violence Against Persons (Prohibition) Act (VAPP) and other human rights laws. Religious leaders, native doctors, and family

members who incite violence or dispossess the elderly of their property through witchcraft accusations must be swiftly prosecuted to serve as a deterrent.

3. **Community Sensitization and Re-education:** Multi-stakeholder campaigns involving the National Orientation Agency, NGOs, and progressive traditional and religious leaders must be launched. These campaigns should focus on demystifying the aging process and re-establishing the cultural value of the elderly.

Protecting the elderly from the terror of witchcraft branding is a fundamental moral and legal imperative. A society's development is ultimately measured by how it treats its most vulnerable individuals in the twilight of their lives.

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