

Discussion Note:

Witchcraft as a Public Health Issue

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Witchcraft accusations and witchcraft-related violence are international human rights problems stretching into at least eighty nations, almost all in the developing world. Bantu Africa, India, New Guinea, Indonesia, the Philippines, the Andean nations, and parts of Mexico and the Caribbean are only some of the regions (see map). Victims of this violence include women, children, elders, refugees, internally displaced individuals and special needs people, including albinos, the mentally ill, the disabled, and in some areas, homosexual populations.

A great deal of writing attempts to explain witchcraft in terms of its “causes,” that is, the metaphysics or the philosophies behind the ideas. A more pragmatic, educational approach starts with the concrete “effects” that can be seen: court cases, economic realities, market commodities, political effects, and so on. This approach could ultimately help national leaders reduce the problems associated with witchcraft.

Not all social problems can be *medicalized*, but there may be value in exploring witchcraft as a broad public health issue that involves village leaders, village teachers and traditional healers. First the modern context:

Contemporary Witchcraft Realities. Witchcraft beliefs are a way of thinking that provides explanations for unfathomable events. It is a local-level, individual ideology, a basic psychological and social psychological reality. *At the core, it is an individual’s conviction that some humans have unseen power to do evil.* It is often a reaction to a tragic event. Witchcraft is based on fears of supernatural powers, of a spirit realm, of ghosts, ancestors, shades, disembodied entities, or unseen things. The ideology allows for the naming of scapegoats, the projection of fear, and the manipulation of terror. Many of these activities are for economic gain. The idea of witchcraft is flexible, elastic and adaptable to modern themes. Its effects reach into every sector of African life.

Modern witchcraft ideas have lost many of their folk images and local coloration. The beliefs have evolved, particularly in urban areas, into a generic form: the broad idea that some living individuals have unseen powers to do harm. Witchcraft has been urbanized and commercialized and adapted to numerous situations, including a variety of inter-personal conflicts, election politics, and office conflicts. The venues vary and include sports situations, police investigations, courtrooms, bars, tea-houses and marketplaces. People who use witchcraft ideas for their own ends include co-wives in conflicts over property and status, political candidates contesting an election (witchcraft-based

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accusations against opponents), and refugees and internally displaced people settling conflicts. The results of these activities are many. People are stigmatized, defamed, often attacked, banished, or beaten. Reputations may be ruined, divorce may follow, and a daughter or daughters may become unmarriageable. These are the relatively benign effects.

More serious cases can lead to fatalities. These cases are often vigilante or mob-style killings of suspected witches. Recent videos from Kisii, Kenya, show six people being burned alive. Albinos are still killed for witchcraft purposes in Tanzania, and in Uganda, child-sacrifice cases, more than thirty, were recently linked to witchcraft practices paid for by rich men in order to get richer. Other cases involve lynching, hangings, panga or machete attacks, and burnings. Self-appointed militias, such as the *sungusungu* in Tanzania, hold local trials and beat, banish, or kill people as witches. Elsewhere, evangelical religious zealots engage in witch-hunts to recruit new membership to their prophet-led churches. The Kisii, Kenya, killings may have an evangelical background.

Perhaps most astounding today are the thousands of children rejected by their parents and abandoned as “witches.” Often beaten and maimed, these youths are forced to live on the streets as economic outcasts from families that cannot afford to feed them. One UNICEF report refers to more than 10,000 children on the streets of Kinshasa.

Public Health as an Approach to Witchcraft Mitigation

Seeing witchcraft accusations and violence as basic public health issues would allow an on the ground, pragmatic approach to the issues. What would happen if these beliefs and practices were treated as new or emerging diseases?

First, one would “map” the disease – that is, the basic epidemiology – for its range, intensity, status, and variation of cases. Witchcraft would be seen as an illness that is geographically episodic, with outbreaks in specific areas. Like a passing thunderstorm, it would move through an area in phases, causing social destruction and devastation to some individuals and families. As in any type of investigation, data needs to be collected from individual case reports, police logs, court records, church reports, press articles, and district-level administrative and clinical reports.

Second, one would assess the data. As with any new disease, witchcraft cases would be assessed, picked apart, described, analyzed, and reported in concrete terms, without jargon or value-laden criticism.

The third phase would include prevention planning and development of educational materials. The design of local-level campaigns that focus on witchcraft prevention and education would be based on data findings. Culturally sensitive teaching materials, pamphlets, diagrams, slides, videos, films, instructors’ notes, brief essays, three-dimensional objects, photos, maps, etc., would be designed by teachers and public health workers, including those in traditional healing associations (healers, midwives, herbalists, and counselors).

The fourth phase would cover field implementation. The educational initiative against witchcraft violence would be implemented at three levels with appropriate materials and teacher training at each level: (a) local teachers for upper primary school audiences, (b) secondary school teachers, and (c) college-level instruction, including new course development.

Fifth is the evaluation and adjustment phase. Just as the materials in any “stop witchcraft” campaign need to be carefully prepared by African instructors, so too must they be evaluated, critiqued, and adjusted.

To make such a prevention and education campaign viable, it must focus on the grassroots, be culturally sensitive, and start with early education. The key people are parents who are willing to allow “stop witchcraft” discussions to occur, teachers who are willing to study witchcraft issues (including the deep history and roots of witchcraft, the colonial history, the legal issues, and the effects of the beliefs), plus church leaders and traditional healers. Traditional healers who would stop using “witchcraft” as a diagnosis are an exceptionally important group. Cooperation between them and local teachers and village administrators is vital.

I am indebted to the writings of Ivan Karp on African systems of thought, Wolfgang Berhinger on the impact of witchcraft, Peter Geschiere for conceptualizing the modernity of witchcraft, Katherine Luongo for her writing on witchcraft and law, and Charles Good for his work on traditional healing. (See Further Reading and Bibliography, my book, page 218.)

Refugees, the disabled, the mentally ill, the odd and abnormal are attacked. Increasingly, African leaders are waking up to the fact that these acts against women, children, and elders are violations of basic human rights. Since the colonial era, governments, both the colonial and independent regimes, churches, and more recently NGOs have worked against witchcraft violence.

Data I have compiled on witchcraft incidents reported in the regional press (600 reports over a 52-year period 1960-2012) give details of periodic government meetings, mass lectures, burning of paraphernalia, and speeches. Daniel Moi in a harangue before a gigantic crowd in the 1980s accused the Colonial British of bringing witchcraft to Africa in order to suppress the people. Nyerere, Kenyatta, Obote, and Musaveni have spoken out repeatedly against witchcraft, and their governments have launched study commissions, parliamentary investigations, and debates over changing anti-witchcraft laws. The Jahaze commission in Kenya lasted nearly two years. Moi's report on devil cults went on for six. For the modern period, these efforts are too little and too late. These beliefs are deeply ingrained, taught early in life by grandparents at the hearthside. In fact, what we have is widespread periodic violence, exploitation, and intimidation in some 40 African nations, mainly in Bantu populations.

Urban and rural areas can be mapped in some countries. For East Africa, the stress zones are seen in vast areas of western Tanzania, among rural coastal peoples in both Kenya and Tanzania, among the Kisii, Kamba, and Tharaka of Kenya as well as the coast. There are pockets of witchcraft-driven de.....in Uganda, easily demarked evangelical witch-hunting and for central Kenya, easily mapped "oathing" areas that rely on witchcraft-based intimidation. My book tries to map some of these occurrences, plus the secret societies that rely on witchcraft ideology (page 127).

Let me make some judgments. Witchcraft violence is endemic in many African nations, Thousands are suffering, governments are largely ineffectual, and for a lot of complex reasons do not have the political will to attack the problem. Current laws, the anti-witchcraft ordinances, are ineffectual, government commissions are equally so. As Katherine Luongo's excellent book points out, the laws have been very unevenly applied in Kenya. Politicians in fact use witchcraft threats in election struggles, as the Kenya

courts in recent years have illustrated with several elections overturned due to witchcraft intimidation.

An issue so culturally sensitive and complicated must be dealt with from within. African leaders must address *uchawi*, *juju*, *muti*, the work of the *maribou*, *sorceries*, the *songosongo* in the Congo.