



UK Research  
and Innovation



## Project Report: Demystifying the Public Health Conditions Considered as Signs of ‘Witchcraft’

### Background to the Project

The project was part of the continuation of ongoing work carried out by the UN Independent Expert on the enjoyment of human rights by persons with albinism, Lancaster University and the Witchcraft and Human Rights Information Network. It aimed to facilitate the continued discussion from the UN Expert Meeting on witchcraft and human rights held in Geneva in 2017, as well as implementing the key findings from the 2018 report by the Independent Expert on Albinism. This report highlighted how widespread abuses of human rights across the world are due to harmful practices related to abuse in the belief in witchcraft which are ‘fuelled by misbeliefs in supernatural powers and misconception of public health issues’.

The project also contributed to core components of the Alternative Explanations: Disability and Inclusion Africa project, which is working to improve understandings of the impact of alternative explanations for disability on disabled people, their communities, advocates and policy makers. The project is led by Dr Charlotte Baker (Lancaster) and Dr Elvis Imafidon (SOAS, University of London) and is funded by the AHRC.

### Key Participants

The core group organising activities for this project was made up of Dr Charlotte Baker, Lancaster University, Gary Foxcroft, Executive Director, Witchcraft and Human Rights Information Network and Louise Meincke, Advocacy Director, Witchcraft and Human Rights Information Network. The team were assisted by Project Intern Abdelbaqi Ghorab.

Additionally, the following participants made key contributions to the project in the form of presentations and wider support:

- Ikponwosa Ero, UN Independent Expert on Albinism
- Sarah Snow, Medical Assistance Sierra Leone
- Mary Penn-Timothy, Sierra Leone Autistic Society
- Berrie Holzhausen, Alzheimer’s Dementia Namibia
- Dr Olatunde Ayinde, University of Ibadan, Nigeria

### Activities

Thanks to the UKRI GCRF Growth funding, a series of meetings were held between June and August 2020, which brought together activists, public health practitioners, faith leaders, NGO workers and academics to discuss the issue of public health and witchcraft beliefs. The aim of the meetings was to lay the groundwork for the development of a toolkit for public health practitioners to help them demystify witchcraft beliefs and better support public health interventions, most especially in Africa.

The initial plan of holding face-to-face meetings in Lancaster was affected by the Covid-19 pandemic, which meant that all of the activities took place online, but the advantage was that we were able to involve a wider range of international participants. The key activities carried out were as follows:

Date	Activity
March - June 2020	Research and planning by organising committee to identify and select potential participants for online webinar and workshops
July 2020	1-day webinar with 88 participants from across the world to explore the links between public health conditions such as autism, mental health, dementia and witchcraft beliefs
July and August 2020	2 online workshops with smaller group of participants to identify what the core components of a toolkit on public health and witchcraft beliefs could look like.

### Outcomes from Project Activities

A number of key learning points came out of the workshop with a view to further developing a toolkit for public health practitioners. These were:

- That any effective response has to be grounded in the community, where a number of conversations need to take place before any project can start;
- Starting small and developing key relationships with government and communities, especially community leaders, is key to demystifying beliefs;
- The belief in witchcraft manifests differently in different places and contexts. Researching local contexts before doing anything is essential;
- Tools such as radio, community drama, handouts, posters etc can all be very effective, especially those that give a voice to survivors of abuse;
- Training for healthcare workers is essential, especially around autism, epilepsy, mental health etc.
- Partnerships with often excluded groups, especially traditional healers who are usually the first point of contact, is crucial;
- A toolkit alone, without people having access to public health facilities, is likely to have limited impact;
- The need for more and better data was identified as crucial so that understanding of the scale of the problem can be developed and interventions then targeted effectively;
- It is important to remember the gender dimension, especially when talking about supporting people to take the best decisions. We have to engage specifically with women as primary carers.

### Project Outputs

The key outputs delivered by this project include:

- Greater collaboration between key project partners, leading to increased awareness and understanding of the links between public health conditions and witchcraft beliefs;
- The consolidation of partnerships on which to build a future funding bid to develop and disseminate a public health toolkit;
- Extended reach of the Disability and Inclusion Africa project to include partners in Sierra Leone and Namibia;
- Production of animated sketches to explore the links between witchcraft beliefs, epilepsy and autism, which will be used for advocacy by the partner organisations;
- Press coverage<sup>1</sup> of the events and wider issues that the project focused on.

<sup>1</sup> For example - <https://guardian.ng/news/20000-die-of-witchcraft-beliefs-health-conditions-misconceptions/>