

Disability Inclusion Helpdesk Report No: 81

Query title	Evidence review on people accused of witchcraft in Ghana and Sub-Saharan Africa
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Query	<ul style="list-style-type: none"> > What is the situation for people accused of witchcraft in Ghana and Sub-Saharan Africa? > What efforts have been made to support women accused of witchcraft? Including programme best practice. > Are there global/regional frameworks/conventions relating to accusations of witchcraft?
Enquirer	British High Commission, Accra.

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Summary

Belief in witchcraft is widespread across Sub-Saharan Africa (Tortora, 2010). When people have no explanation for a misfortune, such as ill health or loss of a job, they may blame the supernatural and accuse someone they know of witchcraft. Those accused tend to be poor older women, particularly widows or women with disabilities, and sometimes children, including children with disabilities who are at particular risk of accusations. Those accused often face human rights abuses, such as violence, sometimes resulting in death, and denial of justice (Venhoeven 2013). In northern Ghana, people who are accused are likely to be sent to ‘witch-camps’, where the living conditions are poor. Those living in witch-camps are more likely to have depression, and face a lack of access to key services, and increased risks of abuse and food insecurity.

There are several different ways in which organisations have been responding to accusations of witchcraft. In Ghana, a key issue is whether to close the ‘witch-camps’. Recent research has found that the majority of witch-camp residents (73.3%) want to return to their families and be reintegrated into their communities (Songtaba, 2022). However, any closure of the witch-camps would need to be accompanied by support for women to reintegrate into society, including addressing the risk of violence and renewed accusations. Improved access to justice and enforcement of relevant laws is necessary for

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successful reintegration, to deter further accusations, and to prosecute those which do occur (Songtaba, 2022). To make a sustainable change, the root causes of the poverty and exclusion of people at risk need to be addressed for reintegration to be successful and to prevent further witchcraft accusations. An example of good practice is the 2015 Sorcery and Witchcraft Accusation Related Violence National Action Plan in Papua New Guinea which takes a holistic approach, covering services (counselling, health sector and child protection), prevention through advocacy and communications, research, and legal protection and prosecution.

There is a lack of specific conventions and frameworks on witchcraft accusations, but existing conventions such as CEDAW do cover harm from witchcraft accusations. The Human Rights Council has recently adopted a resolution on the elimination of harmful practices related to accusations of witchcraft and ritual attacks (HPAWR). This is the first resolution of its kind, calling for a more a holistic approach in addressing harm resulting from accusations of witchcraft and ritual attacks (OHCHR, 2021). At the regional level, the Pan-African Parliament has validated proposed guidelines on concrete actions to end harmful practices related to witchcraft. The guidelines do not seem to be publicly available, but are said to include the legal framework within the African human rights system and the UN human rights framework for combating harmful practices and legal measures that could be adopted by member's states of the African Union to tackle the issue in regards to prevention, protection, accountability and non-discrimination.

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1. Introduction

This report gives an overview of the situation for people accused of witchcraft, good practice in responding to accusations of witchcraft, and relevant international and regional conventions. It is primarily focussed on Ghana and sub-Saharan Africa but also includes some global evidence to address evidence gaps or provide more examples of good practice. In the context of an anti-witchcraft bill in Ghana which is in the early stages of preparation, this report aims to give FCDO Ghana, as well as wider FCDO sub-Saharan Africa teams, information on the main issues involved with witchcraft accusations and how others have responded. It is based on 6 days of research split between the two co-authors, and inputs from two expert contributors who were interviewed for this query.

Accusations of witchcraft often lead to severe human rights violations including violence, which in worst cases can result in murder (Venhoeven 2013; ActionAid 2012). Those accused are often some of the most socially excluded: older women (particularly widows), children and adults with mental health conditions and psychosocial disabilities. There is some evidence that globally, accusations of witchcraft may have increased during the COVID-19 pandemic (OHCHR, 2021). There is a lack of reliable data on witchcraft accusations, but we know that they do occur with some frequency in sub-Saharan Africa. It is important to respond effectively to witchcraft accusations, to ensure that the most socially excluded groups are not left behind.

2. What is the situation for people accused of witchcraft in Ghana and Sub-Saharan Africa?

Data on witchcraft in Sub-Saharan Africa

Belief in witchcraft is widespread across Sub-Saharan Africa. The terms “witchcraft” and “witches” can mean different things in different countries and to different ethnic groups and communities across Sub-Saharan Africa (Owusu, 2020). Generally, it tends to mean the use of supernatural powers to cause harm to other people. According to a 2009 survey on belief in witchcraft across Sub-Saharan Africa, 77% of people in Ghana believe in witchcraft, with higher rates in Ivory Coast (95%) and Senegal (80%), and lower rates in Nigeria (45%), South Africa (46%) and Kenya (26%) (Tortora, 2010). People who are older and with fewer years of formal education are more likely to believe in witchcraft (Tortora, 2010). Two additional surveys undertaken in Ghana with different methods, one in 2009 and the other in 2010, found that 52% and 89% of people believe in witchcraft (Owusu, 2020). One of them, a 2010 National Commission for Civic Education (NCCE) survey, interviewed 310 alleged witches in Ghana and found that 47.4% of those accused believed in witchcraft, with 22 of them stating that they were witches themselves (Owusu, 2020).

There is very little data available on witchcraft accusations. No international organisation is monitoring and recording accusations in a systematic and consolidated way. Accusations are often done in a secretive manner and not reported to authorities, leading to underreporting (UN Independent Expert, 2020). The difficulty in defining witchcraft leads to further difficulties in recording cases and has led to accusations of witchcraft not featuring prominently in human rights monitoring (UN Independent Expert, 2020). Some human rights

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non-government organisations (NGOs) and police departments at the national or sub-national level do collect data on witchcraft accusations, but different methodologies are used across countries making data difficult to collate and compare. The media often report on particularly violent cases or trials.

Recent data found on accusations of witchcraft across sub-Saharan Africa includes:

Country	Dates	Data	Recorded by
Democratic Republic of Congo	June - September 2021	324 accusations of witchcraft	An NGO: Association of Women in the Media (The Guardian, 2021)
Kenya	October 2021	4 women killed after a witchcraft accusation	Police (Kenya Human Rights Commission, 2021)
Mozambique	2020	At least 17 people killed in Inhambane province	Police (Club of Mozambique, 2022)
South Africa	2018 – 2021	10 incidents of violence (including killings) against people accused of witchcraft	An NGO: South African Pagan Rights Alliance (2021)
Tanzania	2021	155 witch-craft suspicion incidents (including killings)	Police (LHRC, 2021)

In Ghana, data was not found on the number of accusations or violence related to accusations. Instead, there is data on the number of people living in ‘witch-camps’: settlements outside of towns where alleged witches can find some refuge from violence perpetrated by those accusing them, albeit with very low living standards and away from their families and communities. A 2012 ActionAid Ghana report estimated that 8 witch-camps in the northern region were home to around 800 women and 500 children (ActionAid, 2012). Since then, numbers at the witch-camps have been decreasing: as of 2020, there were 4 camps hosting around 300 women and 250 children (Songtaba, 2020).

However, more recently, due to increasing economic hardships from the COVID-19 pandemic and climate change, accusations of witchcraft have been on the rise in Ghana.¹ This is consistent with increasing accusations of witchcraft globally and historically (OHCHR, 2021). The links between harmful practices arising from accusations of witchcraft

¹ Expert contribution (Lamnatu Adam)

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and ritual attacks (HPAWR) and periods of uncertainty and fear throughout history, including the HIV pandemic and Ebola outbreaks, have been well documented (e.g. Ripoll et al. 2018; Joselow 2012; Thomas 2007). In these periods, people often look for someone to blame, leading to increased 'witch-hunting'. In particular, ritual attacks against people with albinism rose during the pandemic, due to beliefs in the healing properties of their bodies to prevent against disease (UN, 2021).

Who is being accused and why?

Witchcraft accusations in sub-Saharan Africa are made after all kinds of unexplained misfortunes or coincidences, including illnesses and deaths, a job loss, fires, droughts or even after events in dreams (ActionAid, 2012; Adinkrah, 2017; Badoe, 2005; NCCE, 2010; Owusu, 2020). Accusations may happen instantly following unexplained misfortunes or following months or years of rumours and gossip. Accusations may be accompanied with threats and violence from the community, which may drive the accused person away from the community.

Witchcraft accusations are often triggered by competition for scarce resources, power and domination (Sambe et al., 2014). There are sometimes financial incentives behind accusations; with an accused person gone, their property and land can be seized by their family or wider community (Ajiambo, 2020; Sambe et al., 2014). Accusations also occur in the context of polygamous marriages, due to jealousies and competition amongst co-wives and other siblings for the family's assets after a husband dies (Federici 2013; Songtaba 2022).

People who are socially excluded are most likely to be accused of witchcraft; the vast majority of those accused are women, particularly older women. Rainmakers Development Associates (RDA) carried out a survey at two witch-camps in northern Ghana in 2021 and recorded 259 out of 277 residents to be female, 83.7% to be over 65 years old and only 1.5% younger than 50 years old (RDA, 2021). Widows are heavily overrepresented in witch-camps (AWID, 2015; ActionAid, 2012). An ActionAid survey of witch camps in 2008 found that in 1 camp, more than 70% of residents were accused and banished as witches after their husband had died (ActionAid, 2012). The RDA survey found that 71.9% of residents were widowed, whilst 27.8% of them were divorced due to the accusation of witchcraft (RDA, 2021). Neither survey collected data on disability status.

Widows and older women are the most likely to be accused due to discrimination based on their gender, age and marital status. In a patriarchal society, widows, childless or unmarried women do not fulfil the expected gender stereotype of a wife and mother, and are at increased risk of discrimination, social exclusion and accusations of witchcraft (AWID, 2015; ActionAid, 2012). These women also do not have an influential man to support them, which increases the risk of the community turning on them (AWID, 2015; ActionAid, 2012). In this way, witchcraft accusations are based on misogynistic views and serve to keep the patriarchal order in communities (ActionAid, 2012; Adinkrah, 2017; Ajiambo, 2020). Occasionally successful businesswomen, or wealthy widowed women, are accused, which may be a way of taking away their power to conform with society's expectations of women having a lower status (ActionAid, 2012; Badoe, 2005; Songtaba 2022). Women with disabilities are at increased risk of being accused of witchcraft due to the additional discrimination and stigma people with disabilities face.

The gendered nature of witchcraft accusations is further illustrated by the different

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way in which men accused of witchcraft are treated. Far fewer men are accused of witchcraft and those who are often continue to live amongst their community and do not face the same mistreatment as women (Songtaba, 2022). If a man is believed to have magical powers, they are less likely to be accused as the community may be afraid of them. As they have more power in the community, a belief that they also have a magical power is not so irreconcilable with their community role (Songtaba, 2022).

Historically held beliefs that disabilities are caused by witchcraft, increase the risks of social exclusion and accusations of witchcraft for people with disabilities (Groce and McGeown, 2013). The belief that people with disabilities have been cursed can lead families isolate children and adults with disabilities at home, preventing them from accessing education, services and community, or to seek support from spiritual healers rather than healthcare providers (Adeosun et al. 2013; Groce and McGeown, 2013; Iberase & Okogbenin 2017; Songtaba, 2022). Children with intellectual disabilities in countries including Tanzania, Uganda and Zambia can face increased stigma due to perceptions that their families have used witchcraft to trade their child's intellect for their gain (Groce and McGeown, 2013). People with albinism are at particular risk of witchcraft accusations (Rohwerder, 2018).

People with mental health conditions and psychosocial disabilities are at increased risk of being accused of witchcraft. Witchcraft accusations can sometimes stem from a lack of recognition or support for mental health conditions and psychosocial disabilities such as depression, schizophrenia or dementia (ActionAid, 2012; Brooke, 2019). People with mental health conditions and psychosocial disabilities may face stigma and discrimination if people perceive the way that they act as abnormal (ActionAid 2012). They are also at higher risk of mistakenly or falsely confessing, or being manipulated into confessing, to crimes or actions that are associated with witchcraft (ActionAid 2012).

Children are also at increased risk of being accused of witchcraft due to their lower status in the community. Various studies found that multiple groups of children are at increased risk of accusations, including children with disabilities, children whose births are viewed as abnormal (i.e. those born prematurely), children whose parents died just after their birth or who have lost one or both parents, children whose families experienced some form of calamity soon after their births, those who exhibit unusual or challenging behaviour; and gifted children (Adinkrah, 2011; Osuwu, 2020). An analysis of cases of child witchcraft accusations in Ghana found that the children primarily live in poorer and rural areas (Adinkrah 2011).

Children with disabilities are at particular risk of accusations of witchcraft; studies and surveys in Angola and Nigeria identified children with physical disabilities, children with epilepsy, autistic children and children with Down Syndrome as being of increased risk (d'Haeyer, 2004 and Molina, 2005 in Cimpric, 2010). Children, including babies, with disabilities who are accused of witchcraft are at risk of being killed or abandoned. One orphanage in Northern Ghana estimated that at least half of the children they care for were abandoned due to accusations of witchcraft, with some family members hoping that this would protect the child from being killed by the community (Igwe, 2013). In Rwanda there are reports of families hiding children with disabilities due to concerns over potential witchcraft accusations (Groce and McGeown, 2013).

Even if not accused of witchcraft themselves, children can be negatively impacted by witchcraft accusations. The children of parents who have been accused are sometimes

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disinherited from the community, often ending up on the streets where they are highly vulnerable to human trafficking, child labour and other human rights violations (HelpAge, 2021). In Ghana, when an older woman is accused and banished to a witch-camp, sometimes her family send a young girl, often a granddaughter, with her for company and help with household chores. The ActionAid 2008 survey counted around 500 children living in the witch-camps in northern Ghana (ActionAid, 2012). Most of these children never go to school, face substandard conditions in the witch-camps, and face stigma and discrimination due to growing up in a witch-camp (ActionAid, 2012).

Poverty is a key driver for witchcraft accusations, which are more likely to be made in rural and poorer areas. In Ghana, witch camps are only found in northern region, which is one of the poorest regions of the country with a lower education rate (Songtaba, 2022; ActionAid, 2012). There are several reasons for this: spiritual beliefs tend to be stronger in rural communities and poverty leads to enhanced competition over scarce resources, which can lead to an increased number of accusations when combined with the harmful perception that poor older women, especially those who are not mothers or wives, do not contribute to society (ActionAid, 2012). A 2008 ActionAid survey found that almost a third of the women in Kukuo witch-camp were not engaged in any form of economic activity before they were banished there (ActionAid, 2012). A recent survey of people living in witch-camps found that 274 of 277 (99%) had no formal education (RDA, 2021), whilst interviewees in a separate study held the view that poverty and lack of economic resources have often fuelled the accusation of women as witches (Songtaba, 2022).

What are the impacts for those accused?

People accused of witchcraft face several types of human rights violations including violence, lack of access to a fair trial, and forced exile to witches' camps with poor living standards (Venhoeven 2013). Violence, such as being beaten, maimed, burned or mutilated, have been used to try to force a confession, as a form of exorcism, or to kill the accused person in order to eliminate the perceived source of the community's suffering (Venhoeven, 2013). Accused women are much more likely than accused men to face this type of violence (Songtaba, 2022). Due to the gendered nature of accusations of witchcraft, it can be seen as a form of gender-based violence (Roxburgh, 2018). Women may also be at higher risk of violence due to discrimination based on other aspects of their identity, such as their age or disability status.

Those accused of witchcraft are not given a fair trial and face barriers to accessing justice. Following accusations of witchcraft, 80% of Ghana witch-camp residents interviewed by NCCE said they had been sent to 'witch identifiers' (NCCE 2010). These witch identifiers use methods such as slaughtering a chicken to see which way it faces when it dies to determine whether someone is a witch. Those accused have no means to prove their innocence and, due to their low status in society, their protestations are not heard. In the RDA 2021 survey, 63.7% of witch-camp residents said that they did not seek justice because they were not given the opportunity. People with disabilities in Ghana face additional barriers to accessing justice, including lack of funds, inaccessible physical environments, language and communication barriers, and negative attitudes toward persons with disabilities (Owusu et al., 2022). The RDA survey found that 94.8% of the residents were only aware of the community chief palace as an avenue to seeking justice and knew little about other avenues such as the police station or the courts. Whilst 63.7% of the residents did not seek justice, 20% went to the community chief palace and were denied

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justice (RDA, 2021). In most situations they were instead told that they had to rectify whatever misfortune the accusation was based on (e.g. cure someone who had become ill), in order to be allowed back into the community. There is no data available on the number of accused who manage to successfully fend off the allegation, but it is likely to be very low for women who are accused (Owusu 2020; Venhoeven 2013).

Conditions in the witch camps in northern Ghana are very poor and women and girls are at increased risk being further abused. According to the RDA 2021 study of 4 witch camps, over 97% of witch-camp residents have a low or extremely low quality of life whilst none have a high or excellent quality of life. Whilst 84% of residents indicated that they had access to health services, only 38% had access to markets, 20% had access to accessible roads, 38% had access to water facilities and 30% had access to toilet facilities (RDA, 2021). A lack of accessible facilities disproportionately affects older women and women and girls with disabilities, who may have additional access needs. None of the residents had access to electricity or community centres (RDA, 2021). Some of the residents are also subject to extortion and sexual abuse by the caretakers of the camps who abuse their positions of power (RDA, 2021). 97% of the residents felt that they rarely participate in decisions affecting their lives and in rare cases of consultations, it is usually the camp caretakers who speak for them (RDA, 2021). As above, the RDA survey did not collect disability disaggregated data, but women and girls with disabilities are likely to face increased risks due to double discrimination.

The residents of witch-camps have few options available to support their livelihoods. The results of the RDA 2021 survey found that 92% relied on philanthropy (from NGOs, churches and individuals), 64% on the Livelihood Empowerment Against Poverty (LEAP) cash transfers, 34% on family remittances, 14% on daily wage informal labour, 12% are engaged in some form of petty trading, and 10% on subsistence farming. None of the witchcraft residents were in formal employment (RDA, 2021). Residents indicated that they rarely received sufficient income through one of these sources alone, but instead needed to make the most of whatever they were offered (RDA, 2021). Food security is a challenge in the witch-camps, with residents often unable to eat three times a day (Azongo et al., 2020; RDA, 2021). Access to livelihoods and food insecurity worsened during the COVID-19 pandemic, when philanthropist assistance dwindled and families were not able to visit to bring food (Azongo et al., 2020; RDA, 2021). People with disabilities in Ghana have few options available to them to support their livelihoods, this is likely to be exacerbated for women with disabilities living in witch-camps (Asuman et al. 2021; Ocran 2019).

Living in witch-camps negatively affects residents mental health: around half of witch-camp residents have depression. The Songtaba (2022) survey found the prevalence of depression amongst the participants to be high (52.7%) with 23.5% experiencing mild depression, 37.2% experiencing moderate depression, 7.2% experiencing moderately severe depression whilst 2.9% experiencing severe depression. More women than men experienced depression and the differences was statistically significant. The severity of depression was found to increase with age, having a low income, widowed or divorced, and not having children (Songtaba, 2022). Marginalisation faced by alleged witches was seen to contribute to increased levels of depression, whilst also leading to behaviours which may be a trigger for witchcraft accusations (Songtaba, 2022). Participants recognised that better access to psychological support services would improve their wellbeing and the report recommends that Ghana Health Service expands mental health services and periodic screening for the witch-camp residents (Songtaba, 2022).

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3. What efforts have been made to support women accused of witchcraft? Including programme best practice

Gaps in addressing prevention and response

Recent research has found that the majority of witch-camp residents (73.3%) want to return back to their families and reintegrate into their communities (Songtaba, 2022). The alternative options in the survey, which received less than 20% of the vote each were: being relocated to a different community; being given rented accommodation in the community; a home for older persons being built; the camps to be improved. Those who did not want to be reintegrated were concerned for their safety (Songtaba, 2022). Interviews with key stakeholders, including camp caretakers, were unanimous that the witch-camps should be shut down and the residents should be reintegrated (Songtaba, 2022). The findings of this study contrast to earlier research in 2010 which found that 68.7% of witch-camp residents did not want to go back home for fear of their lives (NCCE, 2010). In the same study, 61% of community members revealed that they were unwilling to accept the alleged witches in their community (NCCE, 2010). There is no clear reason on why these attitudes have changed, which could be an area for further research.

Closing witch-camps could increase risks of violence if communities are not supportive. As detailed above, there are serious issues with the camps, with residents facing several human rights abuses. However, some residents view the witch-camps as a safe haven from violence, and potential death (ActionAid, 2012). The closure of witch-camps could send them back to communities where they are not welcomed, and may face violence and even threats to their lives (Songtaba, 2022; Crampton, 2013; ActionAid, 2012).

Any closure of the witch-camps would need to be accompanied by support for the women to reintegrate into society and an improved response to the risk of violence. There is a need for community sensitisation to ensure that the witch-camp residents are not rejected by their community upon their return (ActionAid, 2012). ActionAid's 2008 survey found that 40% of women who were reintegrated returned to the camps within a year, because they had been accused again (ActionAid, 2012). If the witch-camps are closed there will be nowhere to flee after any new accusations, highlighting the need for an improved response to the risk of violence from witchcraft accusations.

Improved access to justice and enforcement of relevant laws is necessary for successful reintegration, to deter further accusations, and to prosecute those which do occur (Songtaba, 2022). A major gap in the response to witchcraft accusations is that judicial systems do not act to prevent, investigate or prosecute human rights abuses linked to beliefs in witchcraft (OHCHR, 2021). This can be due to an unwillingness to investigate by law enforcement officials who share a belief in witchcraft, a fear of reprisal, poorly resourced legal systems or a lack of access to the legal system by those accused (HelpAge International, 2011). Inheritance and property laws must also be enforced to ensure women, particularly widows, can claim their rights. HelpAge International (2011) have summarised the legislative approach to witchcraft and its limitations in nine countries including Kenya, Malawi, and Tanzania. They find that legislation criminalising accusations is less successful when belief in witchcraft is widely held across society, and advocate for community-based

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interventions working directly with people making accusations and those accused (HelpAge International, 2011).

Improved healthcare and awareness, particularly of mental health conditions and psychosocial disabilities, may reduce the number of witchcraft accusations made. Improved healthcare would lead to fewer premature deaths and more knowledge on causes of the deaths, which may deter belief in supernatural causes (Venhoeven, 2013). An improved understanding of, and support for, people with mental health conditions and psychosocial disabilities would also likely reduce the number of witchcraft accusations as communities would be less likely to discriminate against them (Venhoeven 2013).

For a sustainable change, the root causes of the poverty and exclusion of people at risk need to be addressed for reintegration to be successful and to prevent further witchcraft accusations from occurring. Suggestions made by key stakeholders include improved social protection, women's economic empowerment programming or improved girls' education (RDA 2021; Songtaba 2022)². There is also a need for greater awareness and community acceptance of people with disabilities.

Whilst the camps are open, it is critical to ensure that the residents' basic needs are being met.

Some examples of good practice

- > A holistic approach in Papua New Guinea: The government of Papua New Guinea has adopted the 2015 Sorcery and Witchcraft Accusation Related Violence National Action Plan. The four core areas identified in the National Action Plan and supported by development partners are services (counselling, health sector and child protection), prevention through advocacy and communications, research, and legal protection and prosecution. NGOs have established services such as crisis support and repatriation services. Advocacy and communications efforts have included a national campaign (Inap Nau!) which encourages young people to become advocates for change and promote peaceful conflict resolution within the household and their communities. For research, a digital storytelling project has helped communities produce digital stories about witchcraft accusation-related violence, whilst a separate research partnership is examining existing actions to address sorcery accusation-related violence and how responses can be improved. In terms of legal protection and prosecution, the National Action Plan core committee has developed a brochure and poster on sorcery accusation-related violence that explain the laws and provide information on support services (DFAT, 2018).
- > Effective reintegration of people living in witch-camps: The Ghanaian organisation GO Home Project, run by the Presbyterian Church, helps facilitate negotiations between the accused individual and their families, provides mediation services, and financial support for reintegrated individuals, including ongoing follow-up support. This has helped the women to reintegrate into society without violence or facing the fear of further accusations (Roxburgh, 2018). Between 1994 and 2012, it was estimated that the Go Home project facilitated 1,000 women to return home (ActionAid, 2012).

² Expert contribution (Ephraim Kwablah)

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- > Funding the response to witchcraft accusations: In 2021, Songtaba, supported by STAR Ghana Foundation, launched the Faako Social Fund. The Fund seeks to mobilize and grow local resources to enable an effective GBV prevention and response in northern Ghana, including for accusations of witchcraft.
- > Access to justice: In Nepal, whilst a bill against witchcraft accusations stalled in 2012, the government acted swiftly to implement existing laws in two cases of murder based on witchcraft accusations. Compensation was provided to the victims and their children, and the perpetrators were identified, tried, and prosecuted, leading to jail time (The Asia Foundation, 2012). The bill, “Witchcraft Allegation (Offence and Punishment) Act”, passed in 2014 to ensure imprisonment of up to 8 years and a fine for those making accusations, but there has still been an average of 37 cases reported annually since, with many more likely to go unreported (Nepal et al. 2021).
- > Addressing the root causes: The Global Fund for Widows (GFW) works with non-profit organisations to empower widows. For example, in Nigeria, GFW provided a grant in July 2018 to Widows Development Organisation (WiDO) for an economic empowerment programme. The small impact investment led to 400 widows in the village of Umuegwu refurbishing a small community palm oil press, planting 1,500 palm trees, digging a well and building a water storage unit to operate the palm oil mill and negate the need to continuously fetch water. This project has led to many of the widows having ownership and income for the first time in their life (Global Fund for Widows, 2020). There is no evidence available on how this programme, or any similar programmes, have impacted witchcraft accusations.
- > A culturally-sensitive psychological response: The Ghana Psychological Association (GPA) has been shortlisted by the American Psychological Association (APA) PsychSolutions competition for an intervention targeted primarily at the women living in witch-camps, as well as the communities who make the accusations. The project will combine expressive art therapy with other psychological interventions and basic needs provisions resulting in a holistic approach to the issue of witchcraft accusations. For the first time in Ghana, the project will use indigenous cultural practices as part of a psychological intervention (APA, 2021).
- > Rapid response to witchcraft accusations and potential violence: The Australian Department of Foreign Affairs and Trade (DFAT) has funded the Reintegration and Repatriation Fund in Papua New Guinea. The Fund provides quarterly grants to civil society organisations (CSOs) to support the basic infrastructure needed for them to operate effectively on the ground. This includes funding the Rapid Response Teams that support those accused of witchcraft as well as repatriating clients. This involves the identification of potential safe locations, organising the transport for those accused and their children as needed, identifying a local stakeholder at the new location who will be the case manager and providing a phone for monitoring purposes (DFAT 2015).
- > Effectively meeting the needs of people living in witch-camps: NGOs such as Songtaba and

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ActionAid, and faith-based organisations such as local churches, provide crucial support and services in the camps in northern Ghana. During COVID-19, they provided the residents with hand sanitisers, face masks, food and clothes. They have also helped the residents to renew their National Health Insurance Cards (NHIS), and medical teams have carried out medical check-ups and administered medicines upon diagnosis (RDA, 2021).

4. Are there global / regional frameworks / conventions relating to accusations of witchcraft?

There is no global convention on witchcraft accusations specifically. However, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and its Optional Protocol is relevant where women are discriminated against. The UN CEDAW Committee categorises human rights violations from witchcraft accusations as a form of violence against women. It has encouraged countries including Ghana, as well as Tanzania, South Africa and Mozambique, to improve their response to witchcraft accusations, such as by challenging traditional views about older women and investigating and prosecuting violence based on witchcraft accusations (Mgbako and Glenn, 2011). The United Nation's Convention on the Rights of Persons with Disabilities (CRPD) and United Nations Convention on the Rights of the Child (CRC) are also relevant where people with disabilities or children are affected.

In July 2021, during the 47th session of the Human Rights Council, a resolution was adopted on the elimination of harmful practices related to accusations of witchcraft and ritual attacks (HPAWR). This is the first resolution of its kind, calling for a more a holistic approach in addressing harm resulting from accusations of witchcraft and ritual attacks (OHCHR, 2021). The resolution includes a call for States to:

- > Condemn harmful practices related to accusations of witchcraft and ritual attacks that result in human rights violations;
- > Bring all perpetrators of violations and abuses of human rights to justice in compliance with applicable international law;
- > Carefully distinguish between harmful practices amounting to human rights violations related to accusations of witchcraft and ritual attacks and the lawful and legitimate exercise of different kinds of religion or beliefs;
- > Compile and share information on harmful practices related to accusations of witchcraft and ritual attacks (UNGA, 2021).

At the regional level, the Pan-African Parliament (PAP) has validated proposed guidelines on concrete actions to end harmful practices related to witchcraft (PAP, 2021). These do not seem to currently be publicly available, but are said to cover:

1. The definition of 'witchcraft' in the context of the guidelines;
2. A discussion and identification of the elements of the two broad classifications of witchcraft accusations and ritual attacks;
3. The magnitude of these practices and how these practices negatively affect various groups (in particular, older persons, women, children, people with disabilities, including people with albinism);

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4. The legal framework within the African human rights system and the UN human rights framework for combating harmful practices; including issue of competing rights: how to balance the freedom of thought, conscience and religion and in some instances the right to culture on the one hand, with the right to life, right to bodily integrity, freedom from torture, cruel, inhuman or degrading treatment or punishment and the right to non-discrimination of victims;
5. Legal measures that could be adopted by member's states of the African Union to tackle the issue in regards to prevention, protection, accountability and non-discrimination;
6. Non-legal measures that governments could adopt to tackle the root causes and to combat the phenomena;
7. The role that parliamentarians (through the PAP and their national parliaments) can play in this regard (Centre for Human Rights, 2021).

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