

Health-related Beliefs and Practices towards Witchcraft in Tach Gayint District, northwest Ethiopia: A Qualitative Study

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Abstract

Introduction: Socio-cultural beliefs heavily influence individuals' perceptions of health and illness, with witchcraft notably shaping how causation is attributed and impacting healthcare-seeking behavior and health outcomes.

Objective: The purpose of this study was to delve into the health-related beliefs and practices surrounding witchcraft in the Tach Gayint district of northwest Ethiopia.

Methods: A qualitative study with a phenomenological approach was conducted in Tach Gayint district from April 15 to May 25, 2021. A purposive sampling technique was employed to select individuals who have ever been witches, consulted witches for health-related problems, and community and religious leaders. The collected data was transcribed in Amharic language, and translated to English. It was then critically reviewed, combined into themes, and finally thematic analysis was done.

Results: Health-related beliefs and practices towards witchcraft are very common, especially in the rural sub-districts. The strong belief in ill health caused by supernatural forces like ancestor spirits, evil eye, jinnee, and the act of witches themselves derives individuals from seeking treatment from witches. Witches try to manage health problems by instructing patients to make the spirits that possessed them happy, animal sacrifice, and prayer ceremonies.

Conclusion: Witchcraft is affecting the health care-seeking behavior of individuals, delaying medical treatment, and ultimately contributing to permanent sequelae and death. Therefore, policymakers, healthcare authorities and providers, community and religious leaders, and other sectors must struggle for it. [*Ethiop. J. Health Dev.* 2023; 37(3) 000-000]

Keywords: witchcraft, health, belief, practice

Introduction

Diverse socio-cultural beliefs and practices heavily influence the way individuals perceive health and illness. These socio-cultural norms play a vital role in shaping behaviors, from the choice of seeking traditional healers to the adoption of particular remedies or rituals. Among these factors, witchcraft stands out as a significant influencer of how people attribute causation to ill health and approach healthcare-seeking behaviors, ultimately impacting health outcomes (1–5).

Witchcraft is a broad concept that varies in belief and practice in different societies. It is highly related and commonly used interchangeably with sorcery and magic in that it seeks the aid of supernatural force to cause sickness or damage others' properties (6,7). While the historical practice of executing witches at various points significantly reduced beliefs and activities related to witchcraft, it remains a tangible threat to various African communities (7, 8).

The association between healing and witchcraft is prevalent in African societies, where illnesses, death, and misfortune are often attributed to the intentional actions of individuals wielding supernatural powers. Many believe that they or their family members fall ill due to displeasing supernatural entities or being targeted by witches. Consequently, they turn to witch doctors for remedies or resort to harming individuals suspected of having ties to evil spirits (2,8,9).

Disease conditions like mental health illnesses, HIV/AIDS, malaria, and the like were also believed to be related to witchcraft. These beliefs and practices, in general, were found to affect health care-seeking behaviors, delay medical treatment, and complicate health problems (10–12).

Research conducted to explore indigenous beliefs regarding the causes of illness in northeastern Ethiopia unveiled that diseases are frequently attributed to supernatural entities such as evil spirits. The study highlighted that the absence of healthcare strategies tailored to meet patients' needs results in delays in

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accessing modern medical services, prompting individuals to seek religious treatments or turn to witchcraft for assistance (5).

There is an insufficient amount of data concerning health-related beliefs and practices regarding witchcraft in Ethiopia, with no previous studies conducted in this specific area. Hence, this study aimed to assess health-related beliefs and practices towards witchcraft in the Tach Gayint District.

Methods

Study Design and Setting

A qualitative study with a phenomenological approach was conducted in the Tach Gayint district from April 15 to May 25, 2021. Tach Gayint is located in the northwest part of Ethiopia. The vast majority of the residents depend on agriculture, and poverty is endemic in the area (13). The district is subdivided into two urban and eighteen rural sub-districts. Data was collected from one urban and four rural sub-districts.

Study Population

The study population consists of individuals aged 18 and older who fall into one of the following categories: individuals who have ever been witches. These individuals have sought consultations with witches for health-related issues, as well as community leaders and religious leaders.

Sample Size Determination and Sampling Technique

The sample size was determined based on theoretical saturation. Data was collected until new data no longer brought additional insights to the research questions. Key informants, who were community leaders, religious leaders, and elderly individuals, were selected purposely. Individuals who had ever visited witches for health-related issues and one respondent who had been a witch were contacted using the snowball sampling technique.

Data Collection Tool and Procedure

Data was collected using an open-ended interview guide prepared in Amharic language. The tool was adapted from related studies conducted previously (4,14). The tool encompassed questions regarding participants' views on witchcraft practices in the area, reasons behind the preference for consulting witches for health-related issues, methods employed by witches for diagnosis and treatment, and opinions on the necessity of witchcraft beliefs. In the data collection process, the principal investigator (PI) was solely responsible for conducting the interviews and recording the data. To ensure accuracy and reliability, the PI in this study was supported by an assistant. This collaboration helped in maintaining the quality of the research process.

Before conducting interviews, selected participants were provided with a comprehensive introduction to the study. The purpose, objectives, and importance of the research were clearly explained. Special emphasis was placed on the voluntary nature of their involvement, and explicit consent was obtained from each participant. This ensured that they fully

understood their rights and had the freedom to choose whether or not to participate.

The interviews were conducted individually in private spaces adjacent to the participants' residences. These private settings allowed for a comfortable and confidential environment, facilitating more open and honest discussions. To capture the exchanges accurately, audio recordings were made during the interviews. These recordings served as a valuable source of data for analysis and interpretation.

In addition to the audio recordings, the PI also took detailed notes throughout the interviews. These notes served as supplementary information to complement the recorded data, providing additional context and insights. By combining both audio recordings and written notes, the research team aimed to ensure a comprehensive and thorough understanding of the participants' perspectives and experiences.

By following these rigorous procedures, the study aimed to uphold the principles of accuracy, reliability, and ethical research practices, ultimately contributing to the validity and trustworthiness of the findings.

Data Processing and Analysis

The data processing and analysis procedure began with a thorough transcription of recorded interviews in Amharic, followed by careful translation to English to maintain fidelity to participants' expressions. Researchers then immersed themselves in the translated data, recording initial impressions and notable observations, which were subsequently critically reviewed and coded into themes based on shared meaning. Through repetitive refinement and consensus-building among the research team, these themes were systematically developed, and thematic analysis was conducted.

Operational Definitions

Witch: an individual, regardless of gender, who either self-identifies as a witch or is recognized as such within the community, who uses evil spirits, specific books, animals, and the like with the intention of hurting or benefiting others (14–16).

Witchcraft: the utilization of supernatural or magical powers through rituals, spells, spiritual consultation, and incantations aimed at solving or causing problems (14–16).

Ethics Statement

Ethical clearance was taken from Debre Tabor University College of Health Sciences. Permission to conduct the study was also obtained from the Tach Gayint District Health Office. Lastly, consent was obtained from each participant before the interview.

Results

Five distinct themes emerged from the analysis of participants' perspectives on health-related beliefs and practices toward witchcraft. Firstly, the theme of "presence of witchcraft and types of witches" elucidates the belief in witchcraft and the varying types of witches practicing in the area. Secondly, 'health problems for which witches are preferably consulted' highlights the health issues for which witches are

commonly consulted and the reasons behind them. Thirdly, "Methods Recommended and Used by Witches to Manage Health Problems" explores the diverse range of practices employed by witches. Fourthly, "Respondents' Perception on health-related effects of witchcraft" examines how individuals perceive the health effects attributed to witchcraft. Additionally, "respondents' desire for the elimination of witchcraft" emerged as another theme, exploring the perspectives regarding the role of witchcraft in the community, ranging from calls for its elimination due to perceived negative consequences to the recognition of its significance.

Demographic Characteristics of Respondents

Twenty-two individuals responded to the interview. About 12 interviewees were female, 17 were from rural areas, and the ages of the participants ranged from 19 to 74 years. The livelihoods of 16 respondents depended on farming, and 12 respondents were unable to read or write. Each interview lasted from 28 to 67 minutes.

Presence of witchcraft and types of witches

Tinkulna (ጥንቁልጥ) is the general Amharic name for any act of witchcraft, whereas *tenkuay* (ጠንቁይ) is the general Amharic term for any witch. In the study area, a person who uses evil spirits, specific books, animals, and the like with the intention of hurting or benefiting others is labeled to be a witch. Any act done by witches using evil spirits, books, animals, or others is considered to be witchcraft. Witchcraft is a common practice, especially in the rural areas of the district. Although urban dwellers do not commonly consult witches for health-related problems, they do it for wealth or to hurt others.

Witchcraft is a very common bad practice that we failed to eliminate in this area. Many are still visiting witches against their religious principles. (P-3, M, 52 years)

Witches are consulted for many reasons officially or secretly. A witchcraft practice targeted at hurting someone is always done secretly and is revealed when the intended outcome is seen in the targeted person. Witches are commonly consulted for health, wealth, protection, marriage, education, to get a child, and to hurt others.

...A patient to regain his health, a merchant to be profitable, a student to be clever, a thief not to be caught or to be protected from bullet injury... (P-2, M, 66 years)

Witches of the area are grouped into three based on their way of practice. The first group of witches are men who use books for their activities. Their knowledge and skill of witchcraft are mainly based on religious education. The second group of witches are those who are believed to be possessed by an ancestor spirit locally called *zar spirit*. The evil spirit is believed to be the one that makes them a witch and tells them what to say or to do to their visitors. The last group of witches who are not commonly consulted are individuals who try to watch someone's health problem or fortune using a coffee cup.

Health problems for which Witches are Preferably Consulted

Witches are preferably consulted for health problems that are believed to be caused by evil spirits or acts of witches. Individuals possessed by ancestor spirits are believed to develop psychotic symptoms like shouting, standing on or holding fire, speaking about the spirit, or developing other non-specific symptoms. A respondent who believed to have been possessed by an ancestor spirit expressed the manifestations in the following way:

... When the spirit controls us, we fail to control and know what we are doing. When we become conscious, they tell us that we are dancing, standing on fire, or holding fire by our hand or mouth. No burned skin is seen in our body. However, we feel very tired. (P-9, F, 56 years)

Jinne is another type of evil spirit believed to cause severe acute manifestations like alteration of mental status, body swelling, aphasia, paralysis, and mouth deviation. Suspecting attack by evil eye and evil spirit of bad luck, locally called *ayne tila* are the other reasons to prefer to consult witches than health care workers.

It is believed that when a patient attacked or possessed by an evil spirit is taken to a healthcare institution, the evil spirit exposes the patient to complications and leads to death. Community members believe that health care workers can't diagnose these problems. Witches also warn patients and family members not to seek modern health care for such problems.

...If a patient possessed by the zar spirit is injected with a drug, the spirit becomes angry. The zar may cause the patient to be wounded or dead. (P-11, F, 58 years)

Taking a patient attacked by an evil eye to a hospital is dangerous. Because the patient dies if an injection is administered. (P-15, F, 52 years)

When I was a witch, I had never recommended patients to go to a health care institution. ...Even though my son had been suffering from health problems for many years, I never allowed him to go to a healthcare institution. (P-4, F, 70 years)

Methods Recommended and used by Witches to Manage Health Problems

There are many ways used by witches to treat health problems. However, all witches cannot provide all types of interventions. Many of the interventions are about glorifying the evil spirit believed to cause health problems. Local names are given for the interventions, and some of them are described below.

Shona and Hawza

Shona and hawza are ordered by witches for an individual who is believed to be possessed by an ancestor spirit. These ceremonies that take place in the patient's home to glorify and give an ancestor spirit. In both ceremonies, the witch gives the patient who sits in a bed screened by a cloth, food, and drinks by begging the evil spirits to make the patient healthy. In *Hawza* chat is used to prepare the drink, but not in *Shona*.

... The witch gives the prepared foods and drinks by begging the zar to make the person healthy. The next day, the person leaves the bed after washing the body and starts to live as usual... (P-5, F, 54 years)

... In Hawza a chat is immersed in water for seven or nine days. On the seventh or ninth day, the water is filtered and mixed with honey. (P-20, F, 47 years)

Wedaja

Wedaja is a local term for a communal prayer ceremony. The prayer is believed to help the patient regain his/her health.

...I do it (the ceremony) every one or two years. I invite kindhearted individuals to my home. The invited individuals come to my home at night and bless me overnight. (P-22, F, 41 years)

Spending a night in a Witch's Home

Although witches who are possessed by ancestor spirits can be visited at any time, they set one specific day on which many individuals come to their home, commonly after the sun sets, and spend the night together. Individuals participate in this program mainly to make the spirit that possessed them happy. Going there repeatedly is believed to be beneficial.

...The witch prepares his/her home for the ceremony and wears clothes specifically used for this day. We go to the witch's home after the sun sets. The zar makes us shout, talk, and dance overnight. ...We return to our home in the morning... (P-12, F, 53 years)

... I was attending for the repeated abortion I was having. One night, the witch told me that I was going to have a child. He was right; I got children. (P-15, F, 52 years)

Visiting a place where a well-known witch is buried

Visiting a place where a known, respected witch who had lived with zar spirit is buried is believed to help regain health or stay healthy. These places are visited only at specific times like on the week or month of death of the witch.

...I was there one time to regain my health. ...I took burial soil from the place, diluted it with water, and drank it. (P-11, F, 58 years)

Slaughtering animals or blood sacrifice

Black goat or chicken is commonly slaughtered to manage repeated abortion. If the abortion is happening during early pregnancy, black chicken is slaughtered. Whereas a black goat is slaughtered if the abortion is happening during late pregnancy. The first reproductive-aged girl who meets a girl who received an intervention from a witch for abortion or other pregnancy-related problems is believed to take that girl's problem or get an unhealthy child. A girl who aborted four times and still did not visit a healthcare institution expressed her experience in this way:

...We went to a valley area. The witch slaughtered the goat, skinned it he applied the goat's stomach content on my skin, and washed it with water. Lastly, the meat was roasted; we ate from that and left the area

immediately. ... I did everything as ordered, but the problem recurred. (P-10, F, 24 years)

Another participant who believed that she got children with this intervention said this:

... Holding the chicken on my head, the witch starts to speak alone in a language that I cannot understand. The chicken then became dead without being slaughtered. The witch slaughtered the dead chicken and marked my forehead with blood. We left the slaughtered chicken in the area and went to the marketplace. ...I got children after that intervention. (P-14, F, 42 years)

Patients may also spill the blood of animals in their homes. Chickens are commonly slaughtered.

... I slaughter chickens, begging the zar to keep me healthy. I make stew from slaughtered chickens and I eat from that with my family members... (P-22, F, 41 years)

Labeling and preserving an animal for an evil spirit

A chicken, goat, or sheep is labeled and preserved to ancestor spirits. It is believed to be one of the ways of respect for the spirit. The color of the chicken, goat, or sheep is based on the order of the witch. The labeled animal could not be slaughtered for eating purposes.

...A labeled goat was slaughtered for a girl after she gave birth. The girl ate that animal's meat. The baby died in a few days. ...The zar spirit is believed to be the one that killed the baby... (P-6, M, 74 years)

Respondents' perception of health-related effects of witchcraft

Some respondents perceive that witchcraft is solving the health problems of the community, while others oppose it. Respondents supporting witchcraft think that witches are solving health problems that cannot be identified and managed by healthcare professionals. Some of them put the cost and distance as additional benefits especially for those who can't afford modern health care.

...Witches are treating many diseases that cannot be treated in hospitals. Many individuals may have died if witches were not available... (P-12, F, 53 years)

On the other hand, the negative health-related effects of witchcraft have been raised. These groups of respondents think that witchcraft is delaying medical treatment and complicating health problems. Diseases are mistakenly given names, and every disease is associated with evil spirits. A respondent who had medical reports indicating chronic uveitis expressed his feelings in the following way:

I am suffering from an eye problem that started 15 years ago. A witch was consulted and told me that the problem was associated with the zar spirit that had possessed me since childhood. ... I continued glorifying the zar spirit. When I lost hope in the witches' recommendation, I went to a healthcare institution. However, it was too late for my eyes to be treated. (P-8, M, 38 years)

Another victim of witchcraft practice respondent who grew up in the area added the following:

...I remember when I was having a periodic joint problem. My parents consulted a witch about my problem. ...Currently, I am living with a heart problem. If I was taken to a healthcare institution at that time, I may not have this problem now. (P-7, M, 29 years)

Respondents desire on elimination of witchcraft.

Two opposing ideas are raised by the respondents regarding the elimination of witchcraft. The first group of respondents classify witchcraft into bad and not bad. They considered consulting witches for health problems to be not bad and hurting others through witchcraft to be bad. They need the bad ones to be eliminated.

...Consulting witches for health is not bad. I will continue consulting witches when I get sick But, I will be happy if the practice of harming others using witchcraft is eliminated. ...I would rather die than ask a witch to hurt someone for me... (P-5, F, 54 years)

The second group of respondents support the elimination of any witchcraft. They believe that any type of witchcraft is bad.

Witchcraft is absolutely bad. It is causing individuals to hurt each other, inhibiting patients from getting modern health care services... (P-19, M, 55 years)

...If witchcraft were eliminated, farmers would be productive, merchants would be profitable, children would grow healthy, and patients would go to hospitals. (P-1, M, 72 years)

"...After I confessed to being a witch, I tried to counsel many individuals and witches. However, they refused me, and some of them hated me. (P-4, F, 70 years)

Although many respondents supported the elimination of witchcraft, they thought that it was impossible to eliminate witchcraft in the area. Because the community customized it, and some were afraid to stop consulting witches. Witches also make it business, and the local authority is not taking action.

...If in case a person who stopped glorifying a zar spirit gets severely sick or dies, the zar is believed to be doing that. (P-16, M, 67years)

During the Dergue regime (the previous military government that ruled Ethiopia from 1974 to 1987), any witchcraft practice was banned. At that time witchcraft practice was greatly decreased. However, the current government is not controlling them. Witchcraft became common, and witches are now respected persons.... (P-1, M, 72 years)

Discussion

Witchcraft is a bad belief and practice that many African communities failed to eliminate. This study also revealed the existence of witchcraft in the Tach Gayint district with a detailed explanation of the health-related beliefs and practices towards it.

This study revealed that witchcraft is very common, especially in the rural sub-districts. There are different groups of witches in the area acting to benefit or hurt

others. Witches are consulted for health, wealth, marriage, education, protection, or to hurt others. Witches living in the study area are believed to hurt others directly by targeting someone or indirectly when they recommend patients to go to a place where many individuals are collected to transfer the problem to someone. A study done in Basoga of Uganda reported that although witchcraft is mostly done to harm others, there are "tolerable acts of witchcraft" in the area (17). However, studies done in South Africa, Nigeria, Papua New Guinea, Ghana, and Nepal indicated that witches' acts are always intended to hurt others. According to these studies, individuals who are consulted for a problem believed to be caused by the act of witches or others are named witch doctors or healers, not witches (15,18–20).

This study found that witches are respected persons in the community. Witchcraft is one of the sources of income for them. Moreover, witches are not executed by victims and their family members. Although witches are feared by other communities as well, they are not respected. Rather, they are hated. Execution of witches is very common in areas where witchcraft is believed to be an evil act (15,18–20).

There is a strong belief in supernatural causes of illnesses in the Tach Gayint community. Evil spirits are greatly believed to be the cause of illnesses in the area. Specific names are given to the evil spirits associated with illnesses. Other studies also reported the beliefs in spirits and witchcraft as a cause of illnesses in different communities (5,21). Witchcraft is also believed to be one of the causes of illnesses in this study area. Witches are believed to make individuals sick through evil spirits or transfer illnesses from one patient to another. Studies done before also revealed that the strong belief in witchcraft-associated illness and bad luck caused communities to take illegal measures on individuals labeled to be witches (15,22,23).

There is a strong belief in supernatural causes of illnesses in the Tach Gayint community. Mental health illnesses, body swelling, aphasia, paralysis, mouth deviation, and frequent abortion were frequently raised to be some of the effects of an attack by evil spirits or acts of witches. This implies that patients who develop disorders manifested by the above signs and symptoms may not be taken to healthcare institutions. Other authors also stated that mental health illnesses, including malaria, dementia, stroke, and the like, were believed to be related to evil spirits and witchcraft (8,24,25). This interpretation of the supernatural causation of illnesses causes communities to seek religious care or to consult witches. Taking these patients to healthcare institutions is believed to be dangerous. This causes the patient's problem to get complicated, ultimately leading to death. For instance, two respondents who could not get timely treatment due to this belief developed a permanent sequel. Previous studies also revealed that these beliefs and practices affect health care-seeking behaviors, delay medical treatment, and complicate health problems (22,26).

Witches try to treat health problems using different methods. Most of the interventions provided are intended to make the evil spirits believed to cause the problem happy. Patients are recommended to worship the spirit. They also provide protective charms, apply substances, and fumigate patients. A study done in Kenya reported witchcraft practices of blood sacrifice and ancestor worship (16). Another study done in rural areas of North-Eastern Ethiopia revealed the presence of honoring spirits, prayer ceremonies, and animal scarification to the spirits (5).

This study found that there are still community members who oppose the elimination of witchcraft. They believe that witches are solving health problems. Nevertheless, witches' intentional practice of hurting others is not supported by anyone. Studies done in Uganda and Kenya put some positive effects of witchcraft, like wealth and protection. However, its negative effects much more outweigh its advantages (16,17).

The study underscores the need for healthcare providers to recognize and address the deeply ingrained beliefs in witchcraft and supernatural causes of illnesses within communities like Tach Gayint. Healthcare strategies should be designed with an understanding of these beliefs to reach and treat patients effectively. This study also suggests the importance of awareness campaigns aimed at educating community members about the true causes of illnesses and dispelling myths surrounding witchcraft. Policymakers, local authorities, healthcare providers, religious leaders, community leaders, and other community members need to take a stand against harmful practices while supporting efforts to eliminate beliefs in witchcraft as a solution to health problems.

The findings of the study may be specific to the context of the Tach Gayint district in Ethiopia. They may not be directly applicable to other regions or populations with different cultural or socio-economic backgrounds. The use of purposive and snowball sampling techniques could also limit the generalizability of the findings to the broader population of Tach Gayint or similar communities. Therefore, we recommend that future researchers explore health-related beliefs and practices regarding witchcraft using diverse methodologies such as mixed-methods approaches, longitudinal studies, and comparative analyses.

Conclusion

In this region, two primary reasons prompt individuals to turn to witches for assistance. The first reason is a firm belief in nature spirits and supernatural forces as the root of illnesses, while the second reason is the fear that diseases stemming from these sources may become more complex if treated within conventional healthcare settings. Witchcraft beliefs compromise health care-seeking behavior of individuals, which delays medical treatment, ultimately leading to death and permanent sequelae. Even though the elimination of witchcraft is challenging, policymakers, healthcare authorities and providers, community and religious leaders, and other sectors must struggle for it. We also suggest that

researchers delve more deeply into the issue using enhanced methodologies.

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