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**Promotion and protection of all human rights, civil,
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including the right to development**

Report of the Independent Expert on the enjoyment of human rights by persons with albinism

Note by the Secretariat

The Secretariat has the honour to transmit to the Human Rights Council the report of the Independent Expert on the enjoyment of human rights by persons with albinism pursuant to Council resolution 28/6. In her report the Independent Expert provides a brief account of activities undertaken in fulfilment of the mandate in 2016. She also discusses witchcraft as a root cause of attacks against persons with albinism, the impact of witchcraft on the enjoyment of human rights by persons with albinism and ways forward.

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Report of the Independent Expert on the enjoyment of human rights by persons with albinism

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I. Introduction

1. The present report is submitted pursuant to Human Rights Council resolution 28/6, in which the Council established the mandate of the Independent Expert on the enjoyment of human rights by persons with albinism.

2. In section II of her report, the Independent Expert provides an overview of activities undertaken since March 2016 and of the progress made in the priority areas identified in her previous report (A/HRC/31/63), in particular, attacks and discrimination against persons with albinism. In section III, she focuses on witchcraft as a key root cause of attacks, with the goal of adding to the information contained in her report to the General Assembly (A/71/255). Her ultimate purpose is to contribute to the understanding of witchcraft as it relates to persons with albinism, grasping its implications and identifying adequate protection and prevention measures.

II. Activities of the Independent Expert

A. Engagement with countries and stakeholders

Country visits

3. In 2016, the Independent Expert conducted country visits to Malawi (A/HRC/34/59/Add.1) from 18 to 29 April 2016 and to Mozambique (A/HRC/34/59/Add.2) from 21 August to 3 September 2016. Both countries had recently been affected by a significant increase in attacks against persons with albinism.

4. Despite the lack of comprehensive data on the exact pattern of attacks and information on the masterminds behind those crimes, it is believed that there is often a cross-border element in the attacks. In addition, many of the issues that Malawi is facing regarding persons with albinism, including violence, discrimination and challenges in providing protection, preventing violence and ensuring accountability, are also present in Mozambique. The Independent Expert believes that regional cooperation and joint action through regional and subregional institutions and mechanisms are fundamental for long-term solutions.

Engagement with stakeholders

5. The Independent Expert participated in numerous public engagements, including interventions in a multiplicity of local and international media, as well as conferences and expert meetings, which allowed her to raise awareness among an extensive audience, share information and promote good practices with regard to the enjoyment of human rights by persons with albinism. These events included participation in the sixteenth national conference of the National Organization for Albinism and Hypopigmentation of the United States of America; the regional expert meeting on support services for persons with disabilities, held in Addis Ababa; the fifth international workshop on enhancing cooperation between the United Nations and regional human rights mechanisms for the promotion and protection of human rights; and the fourth Annual Conference on Disability Rights in Africa, organized by the Centre for Human Rights of the University of Pretoria, South Africa. The Independent Expert also celebrated International Albinism Awareness Day (13 June) in Dar es Salaam with high-level officials of Government, international missions and civil society.

6. In addition, the Independent Expert organized a side event, with the United Nations Interregional Crime and Justice Research Institute, on the margins of the thirty-first session of the Human Rights Council on the root causes of attacks against persons with albinism, in particular the subject witchcraft and health, and took part in other side events, including in the margins of the General Assembly to mark the tenth anniversary of the Convention on the Rights of Persons with Disabilities.

Communications

7. Summaries of allegation letters sent during the period covered by the present report are available in the communications reports of special procedures (A/HRC/33/32 and A/HRC/34/75).

8. The Independent Expert focuses on earnest, constructive dialogue with States through formal and informal channels, including bilateral meetings, promotion of best practices and ongoing exchanges of information.

B. Towards a regional action plan to address attacks against persons with albinism

9. Various recommendations to address violence and discrimination against persons with albinism have been made by international bodies, including the Office of the United Nations High Commissioner for Human Rights (A/HRC/24/57), the Human Rights Council Advisory Committee (A/HRC/28/75), the International Organization of la Francophonie,¹ the African Commission on Human and Peoples' Rights (resolution 263), the Human Rights Council (resolution 23/13), human rights treaty bodies² and the universal periodic review mechanism.

10. In June 2016, in cooperation with the Government of the United Republic of Tanzania and various partners,³ the Independent Expert organized a consultative forum titled "Action on albinism in Africa" in Dar es Salaam. More than 150 participants from 26 countries in the region representing civil society, Governments, national human rights institutions, regional and international governmental organizations and academia took part. Participants started drafting an action plan in which they identified specific measures to implement the recommendations mentioned in the previous paragraph, and also pledged to take various actions through their respective organizations. The action plan was developed around four main clusters: prevention measures, protection measures, accountability measures and measures to combat discrimination. The forum also elected a "think tank" to pursue its deliberations.

¹ Office of the United Nations High Commissioner for Human Rights (OHCHR) and International Organization of la Francophonie, outcome report of the expert meeting titled "Persons with albinism: violence, discrimination and the way forward", Geneva, 24 September 2014 (unpublished).

² Including the Committee against Torture, the Committee on Economic, Social and Cultural Rights, the Committee on the Elimination of Discrimination against Women, the Committee on the Elimination of Racial Discrimination, the Committee on the Rights of Persons with Disabilities, the Committee on the Rights of the Child and the Human Rights Committee.

³ The United Nations country team, the Commission on Human Rights and Good Governance, the World Bank, OHCHR, the non-governmental organizations Standing Voice and Under the Same Sun, the embassies of Norway, Ireland and the United States of America and the High Commission of Canada.

11. In November, the Independent Expert convened a high-level meeting in Pretoria,⁴ to consult with representatives from the United Nations, the African Union, Governments and civil society organizations on the draft action plan discussed in June in Dar es Salaam. Also in November, the think tank, along with selected experts, convened in Nairobi,⁵ to refine the measures identified in the action plan and to build them into an effective road map containing concrete and achievable time-bound measures designed for the African context.

12. The Independent Expert intends to organize another high-level meeting in 2017 to finalize the action plan.

III. Witchcraft and the human rights of persons with albinism

13. In her report to the General Assembly (A/71/255), in which she provided a preliminary overview of the root causes of attacks and discrimination against persons with albinism, the Independent Expert showed how interrelated factors, including the mythologization of albinism and a related lack of understanding of the scientific bases of the condition, poverty, witchcraft practices and other aggravating factors all contributed to ongoing outbreaks of attacks and discrimination against persons with albinism. In the present report, the Independent Expert refers to “witchcraft” as “phenomena”, to reflect the plurality of concepts, terms, practices and beliefs encompassed by the term.

14. In continuation of that report, the following analysis seeks to further understanding of the broader issue of root causes by looking specifically at witchcraft. Of all identified root causes, witchcraft is one of the most challenging, owing to the complexity and the inherent barriers to the conceptualization of the phenomena. Yet addressing witchcraft remains a priority, as it is at the crux of attacks against persons with albinism.

A. A word on albinism

15. Albinism is a relatively rare, non-contagious, genetically inherited condition that affects people worldwide regardless of ethnicity or gender. It results from a significant deficit in the production of melanin and is characterized by the partial or complete absence of pigment in the skin, hair and eyes. Persons with albinism therefore often appear pale in comparison to members of their family and their communities. For a person to be affected by albinism, both parents must carry the gene, and in such cases there is a 25 per cent chance at each pregnancy that a child will be born with albinism. The frequency of albinism varies by region. In Europe and North America, the reported frequency is 1 in 17,000 to 1 in 20,000 births. The frequency in certain parts of the Pacific is reported to be 1 in 700. Among some indigenous peoples in South America, the reported frequency is 1 in 70 to 1 in 125. In sub-Saharan Africa, the reported frequency ranges from 1 in 5,000 to 1 in 15,000, with prevalence rates of 1 in 1,000 to 1 in 1,500 for selected populations. An important caveat is that some studies of the frequency of albinism often lack objectivity in their methodology or are incomplete, rendering estimates as best guesses in most instances.

16. There are different types of albinism. The most common and visible type is oculocutaneous albinism, which affects the skin, hair and eyes. Within this type are subtypes that may reflect varying degrees of melanin deficiency in an individual. Lack of melanin in the eyes results in high sensitivity to bright light and significant vision impairment, with the level of severity varying from one person to another. This vision

⁴ With the support of Open Society Foundation.

⁵ With the support of Open Society Initiative of South Africa and Open Society Initiative of East Africa.

impairment often cannot be completely corrected. In addition, one of the most serious health implications of albinism is vulnerability to skin cancer, which remains a life-threatening condition for most persons with albinism. All human rights issues relating to albinism reported to date — attacks, mutilation and trafficking of body parts, among others — have been linked to its oculocutaneous form, which is also the most visible type of albinism.

17. In the international human rights framework, persons with albinism have normative protection in the International Bill of Rights covering all their fundamental human rights, including the rights to life, physical integrity, liberty, security, the highest attainable standard of physical and mental health and an adequate standard of living. Further protection can be found in specific instruments, including the Convention on the Rights of Persons with Disabilities and the International Convention on the Elimination of All Forms of Racial Discrimination, which proscribes “racial discrimination” based on colour.

B. Delineation, conceptualization and impact of witchcraft on the human rights of persons with albinism

What is witchcraft?

18. The United Nations Special Rapporteur on extrajudicial, summary or arbitrary executions, in a 2009 report (A/HRC/11/2), stated that witchcraft “has not featured prominently on the radar screen of human rights monitors” and that “this may be due partly to the difficulty of defining ‘witches’ and ‘witchcraft’ across cultures — terms that, quite apart from their connotations in popular culture, may include an array of traditional or faith healing practices that are not easily defined”.

19. The phenomena have many connotations and are subject to many interpretations, such that objective definitions are unsatisfactory; “[the] real meaning derives from relationships, shared experiences and individual feelings”. Consequently the “meanings ... are so varied because the concept is so versatile”.⁶

20. In a 2011 report, HelpAge International reviewed legislation adopted to address accusations of witchcraft and related violence in nine countries and came to similar conclusions.⁷ One of the key findings of the study was the difficulty, both nationally and regionally, encountered by these countries in defining witchcraft.

21. According to a study undertaken by the United Nations Children’s Fund (UNICEF), the French notion of “sorcery” and the English notion of “witchcraft” were introduced to Africa by the first Europeans explorers, colonialists and missionaries and, strongly influenced by European history, were pejorative. These concepts were employed to translate the terms used in vernacular languages for local realities. The notion of witchcraft, as used in the present report, therefore refers to multiple concepts covered by a variety of different terms referring to various phenomena whose interpretation relies on their context. It is nevertheless generally agreed that in all cultural contexts, witchcraft refers to negative occult or mystical forces,⁸ although it has been — albeit less frequently — associated with positive connotations such as empowerment and cleansing.

⁶ Malcolm Gaskill, *Witchcraft: A Very Short Introduction* (Oxford University Press, 2010).

⁷ *Using the Law to Tackle Accusations of Witchcraft: HelpAge International’s Position* (London, 2011). The publication covers Burkina Faso, Cameroon, Côte d’Ivoire, India, Kenya, Malawi, Senegal, South Africa and the United Republic of Tanzania.

⁸ United Nations Children’s Fund (UNICEF), *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa* (Dakar, 2010). Available from

22. Evans-Pritchard distinguishes between “witchcraft” and “sorcery”.⁹ According to his definition, witches have supernatural powers and operate in secret, in order to harm victims by devouring their life essence. In contrast, a sorcerer is someone who does harm by using plant substances and rituals. The use of body parts of persons with albinism in amulets, charms, potions or other preparations could arguably fall under either category. Therefore, in the present report, the Independent Expert will use the term “witchcraft” to denote both concepts. She will not use the term “magic”, which has been employed in some cases to describe attacks against persons with albinism, because it seems to have a dual quality of both benevolence and malevolence, and may therefore be misunderstood. Since the report intends to capture witchcraft in the broader sense and its negative impact on persons with albinism, the term “magic” — in its malevolent form — will be understood to be subsumed by the term “witchcraft”.

23. From the sociological and anthropological perspectives, the following definition for witchcraft has been proposed by Marc Augé: witchcraft is “a set of beliefs, structured and shared by a given population that addresses the origin of misfortune, illness and death, and the set of practices for detection, treatment and punishment that corresponds to these beliefs”.¹⁰ Often, the diagnostic aspect of witchcraft often pinpoints an individual person as the source of the misfortune within the family, place of employment or community.

24. UNICEF extends this definition by adding that “witchcraft is a theory that explains and justifies a conception of the universe”.¹¹ With both conceptualizations, witchcraft could also be described as a religion or belief. In various countries affected by attacks against persons with albinism, witchcraft beliefs and practices are widespread. Adherents are found across various strata of society, transcending socioeconomic class, the urban-rural divide and levels of education.

25. Witchcraft beliefs and related practices are not simply the repetition of ancient traditional practices; they can change or develop. While some beliefs and practices appear to have ancient origins that have been both preserved and adapted to contemporary contexts, other practices, such as the use of body parts from persons with albinism, are apparently of recent origin. In that regard, it would constitute a “new tradition” or an “invented tradition” that has been adapted or is adaptable to contemporary society. Some stakeholders suggest that attacks against persons with albinism are a recent phenomenon because of the rapid spread of the problem across multiple countries in the last 10 years. For example, stakeholders in Malawi and in Mozambique repeatedly stated that the use of body parts of persons with albinism was not a traditional practice in their respective countries and that it had developed recently, influenced by practices in other countries. However, there are insufficient data to support this assertion. In addition, even if it were substantiated, attacks and the use of body parts linked to witchcraft practices could not take hold so quickly in a country unless there was already a context facilitative of witchcraft beliefs and practices.

26. Although belief in, and practice of, witchcraft can be associated in certain cases with empowerment, healing and cleansing, attacks and use of body parts of persons with albinism, regardless of the purpose for which they are used, cannot under any circumstances be considered an elemental part of any legitimate practice, whether linked to witchcraft or to traditional medicine, because such acts inherently constitute criminal

www.unicef.org/wcaro/wcaro_children-accused-of-witchcraft-in-Africa.pdf.

⁹ E.E. Evans-Pritchard, *Witchcraft, Oracles, and Magic among the Azande* (Oxford University Press, 1976).

¹⁰ *La construction du monde* (Paris, Maspero, 1974), quoted in UNICEF, *Children Accused of Witchcraft*.

¹¹ UNICEF, p. 10.

activity and other human rights violations. Consequently, they cannot be justified on the basis of tradition, traditional medicine, or any other ground.

Muti or juju

27. Muti is a Zulu word used in southern Africa that refers to types of traditional medicine, magical charms, potions or amulets. It has also been defined as a substance fabricated from plants, animals or minerals by a person possessing expert knowledge and skill.¹² In West Africa, the term “juju” is used to refer to a similar practice. It is sometimes believed that the muti or juju will be more effective if it contains human body parts, in particular those of persons with albinism, as these are believed to be intrinsically magical or powerful, with the ability to produce wealth and confer good luck. “Muti murder”, “medicine murder” and “juju” are therefore the terms most commonly associated with ritual attacks to produce charms, potions or amulets that involve the use of human body parts. In this context, muti and juju seem to be related to witchcraft and are therefore subsumed by the term “witchcraft” in the present report. In particular, witchcraft-related beliefs, rituals and practices seem to give energy and meaning to muti and juju. Even if in some cases witchcraft-related beliefs are described as superstitions unaffiliated with any religious systems, they can be harnessed by witchcraft practitioners to the detriment of various victims, including persons with albinism.

28. Persons with albinism are victims of ritual attacks. It is believed that their body parts can bring, inter alia, wealth and good luck when used in potions made by practitioners of witchcraft, referred to as witchdoctors. Persons with albinism who are victims of such attacks are often dismembered and their body parts stolen, including limbs, genitals and hair. In addition, body parts are often taken from live victims because of the related belief that the intensity of their screams while being dismembered enhances the potency of the muti or juju.

29. Although both children and adults are victims of attacks for the removal of body parts, civil society reports that children constitute the majority of victims. The apparent targeting of children is reportedly linked to the pursuit of innocence, which is believed to enhance the potency of the muti or juju. Further, children are more vulnerable to attacks because they are easy to find and capture and do not have the physical strength to fend off attackers.

30. Civil society and other reliable sources have reported more than 600 cases of attacks against persons with albinism across 26 countries, the majority of them in the last eight years. These are only the known cases. The frequency of family involvement in attacks against persons with albinism and the lack of comprehensive monitoring of attacks have an impact on the gathering of complete data.

31. Attacks against persons with albinism often involve three types of perpetrators: persons who hunt, attack, kill and dismember persons with albinism and transport their body parts; persons, often presenting themselves as witchdoctors, who prepare the muti or juju using the body parts; and persons who obtain or purchase the muti or juju. Each of these actions constitutes a crime and should therefore be investigated and prosecuted under relevant criminal law provisions, irrespective of whether they are connected to muti, juju or witchcraft.

32. However, one of the major challenges in prosecuting attacks has been the inability to identify and prosecute the last two categories of perpetrators. The collection of evidence on

¹² Adam Ashforth, “Witchcraft, justice, and human rights in Africa: cases from Malawi”, *African Studies Review*, vol. 58, No. 1 (April 2015).

the entire chain of criminal command of attacks against persons with albinism is often hindered by the secrecy surrounding witchcraft practice, the participation of family members in perpetrating attacks, the inability or fear of victims and their families to report attacks, as well as the limited financial, human and technical resources at the disposal of law enforcement agents in the concerned countries.

Trafficking of body parts for muti/juju

33. The Independent Expert has received reports that demand for body parts for the purpose of muti or juju has led to the existence of a black market, at the national, regional and international levels, for body parts of persons with albinism. While there is often evidence of trafficking and attempted trafficking of body parts, evidence of the market for the parts is more indicative than substantive at present. It is therefore important to conduct further investigative studies and research to map patterns of trafficking of body parts, including on the alleged markets or points of sale, and on the international networks that may be involved.

Witchcraft accusations

34. Accusations of witchcraft and related violence are one of the most visible and reported manifestations of belief in witchcraft. While reports indicate that persons with albinism are mainly affected by the muti and juju forms of witchcraft-related violence, mothers of children with albinism and children born with albinism have also reportedly been accused of witchcraft.

35. Philip Alston has noted that reports from a surprisingly large number of countries in different regions of the world indicate that the intentional killing of individuals labelled as witches remains a significant and very troubling phenomenon; such killings are by no means a practice of the past.¹³

36. In the report of her mission to Papua New Guinea (A/HRC/23/49/Add.2), the Special Rapporteur on violence against women, its causes and consequences stated that she had witnessed brutal assaults perpetrated against suspected sorcerers, which in many cases included torture, rape, mutilation and murder. Similarly, in the report of her mission to India (A/HRC/26/38/Add.1), she explained that the stigma attached to women who were labelled “witches” and the rejection they experienced within their communities led not only to various human rights violations but constituted an obstacle to gaining access to justice. She also noted that such labelling affected family members across generations. Further, the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, in the report of his mission to Ghana (A/HRC/25/60/Add.1), invited special procedure mandate holders to follow up on practices in “witch camps” where, it was reported, women — particularly elderly women — were banished once they had been labelled as witches.

37. In its study on children accused of witchcraft, UNICEF reported that, in many African societies, births considered “abnormal” were generally surrounded by a complex system of representations and rituals.¹⁴ Such births included twins, “badly born” children and persons with albinism. Cases have been reported of parents killing their babies born with albinism for being witches. Where these children are not killed at birth, they are often taken to a spiritual leader or traditional healer to be “healed” through various forms of violent exorcism. Similarly, in a report published by the Office of the Special

¹³ Philip Alston, “Of witches and robots: the diverse challenges of responding to unlawful killings in the twenty-first century”, *Macalester International*, vol. 28 (2012).

¹⁴ UNICEF, *Children Accused of Witchcraft*.

Representative of the Secretary General on Violence Against Children in 2012, it is stressed that vulnerable children such as children with disabilities, children with albinism, premature babies or specially gifted children are often the target of witchcraft accusations.¹⁵ The link between witchcraft and persons with albinism was also noted in western Sudan where persons with albinism were accused of taking part in “strange and dangerous practices” related to witchcraft.¹⁶

38. In addition, the common belief that persons with albinism are a bad omen or a curse on their family or on the community, although not, *stricto sensu*, a witchcraft accusation, does attribute evil qualities to a newborn, with an impact on the mothers and family members in a manner that is strongly analogous to the impact stemming from witchcraft accusations. Consequently, infanticide, abandonment of children with albinism and exclusion of the children and their mothers from community life (either structural expulsion or exclusion from participation) have been reported to the Independent Expert.

Criminalization of witchcraft

39. The question of whether to criminalize acts of witchcraft was examined by Philip Alston.¹⁷ After considering various arguments in favour of criminalization, including that local customs should be reflected in national law; that criminal law should protect against all types of violence, including violence committed by occult means; and that the failure of criminal law to address such acts leads individuals to take the law into their own hands to achieve what is popularly considered to be a just and fair result, he concluded that the weight of the arguments against criminalization was superior. Criminalization would reinforce the social stigmatization of those accused, and such a prohibition of witchcraft might be socially perceived as providing legitimacy to the killing and ill-treatment of alleged witches. In addition, the very subjective nature of witchcraft, illustrated by the difficulty of finding a clear definition of the concept and the impossibility of identifying objective factors as evidence to be weighed in a court of law were sufficient bases on which to conclude that acts of witchcraft as such should not be criminalized. This does not mean that criminal action becomes legitimate when committed for witchcraft purposes, but rather that a licit action should not be considered a criminal act because it is conducted for witchcraft purposes. Objective criminal acts should be prosecuted, regardless of their (mere or inextricable) link to witchcraft.

40. Similarly, the Special Rapporteur on freedom of religion or belief stated in the report of his mission to Sierra Leone (A/HRC/25/58/Add.1) that freedom of religion or belief, while allowing for legally defined limitations to protect the rights and freedoms of others, must be broadly understood. Witchcraft-related beliefs, whether in their ancient or modern form, are protected under the freedom of belief, as are actions related to such beliefs, as long as they do not violate the rights of others. However, he also stressed that “the serious harm inflicted on persons accused of witchcraft can never be justified”, and that “if someone were to invoke the right to freedom of religion or belief in order to support harmful practices, such as the persecution and punishment of alleged witches, this would be a clear case for limiting the application of freedom of religion or belief”. The same

¹⁵ Office of the Special Representative of the Secretary General on Violence against Children and Plan International, *Protecting Children from Harmful Practices in Plural Legal Systems* (New York, 2012). Available from http://srsg.violenceagainstchildren.org/sites/default/files/publications_final/SRSG_Plan_harmful_practices_report_final.pdf.

¹⁶ H. Labouret, “La sorcellerie au Soudan occidental”, *Journal of the International African Institute*, quoted in UNICEF, *Children Accused of Witchcraft*.

¹⁷ Alston, “Of witches and robots”.

reasoning applies to other harmful practices, including attacks against persons with albinism: harmful practices can never be justified.

41. Article 18 of the International Covenant on Civil and Political Rights distinguishes the freedom of thought, conscience, religion or belief from the freedom to manifest religion or belief. On the one hand, it does not permit any limitations whatsoever on the freedom of thought and conscience or on the freedom to have or adopt a religion or belief of one's choice. These freedoms are protected unconditionally. On the other hand, restrictions on the freedom to manifest religion or belief are permitted if limitations are prescribed by law and are necessary to protect public safety, order, health or morals, or the fundamental rights and freedoms of others.¹⁸ In joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child (2014) on harmful practices, the committees recognize that harmful practices are deeply rooted and that there are often attempts to justify them by invoking sociocultural and religious customs and values. However, harmful practices can never be justified and must be eliminated, including by challenging sociocultural norms and attitudes that underlie them. In addition, States cannot justify any delay in taking action on any grounds, including cultural and religious grounds.

42. Despite these considerations, it appears that various countries with records of attacks do criminalize witchcraft, using a definition of the phenomena in their legislation. However, most of these laws were inherited from the colonial period and are often out of touch with present reality. They bear a limited understanding of witchcraft — its extent, scope, flexibility and evolution — and proffer a definition of the phenomena that is difficult to enforce.

43. It is important to reiterate that although witchcraft per se should not be criminalized, any killing of persons for the use of body parts in witchcraft-related practices such as muti or juju should be prosecuted. To do so, it is necessary to ensure that legal provisions criminalize a broad range of attacks and assaults, as well as criminalize the possession and trafficking of body parts. Linking such a criminal action to muti and juju would be challenging, given the difficulty in establishing objective evidentiary standards. Nonetheless, where evidence substantially supports the proposition that muti and juju were the purpose of the criminal activity, States could consider including that factor as an aggravating circumstance leading to a heavier sentence and ultimately deter crime incentivized by witchcraft. Non-legal tools such as public education and sociocultural interventions with stakeholders would also be necessary to complement such legal practice in dissuading muti, juju and all crimes related to witchcraft.

44. While defining witchcraft as an element of crime raises issues, witchcraft accusations could be objectively defined without defining witchcraft. Therefore, to suppress witchcraft accusations, they could be proscribed with legislation, enforceable with relative ease.

Harmful practices

45. In joint general recommendation No. 31/general comment No. 18, the Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child have provided guidance on what constitutes harmful practices, which are defined as “persistent practices and forms of behaviour that are grounded in discrimination on the basis of, among other things, sex, gender and age, in addition to multiple and/or intersecting

¹⁸ Human Rights Committee, general comment No. 22 (1993) on freedom of thought, conscience and religion.

forms of discrimination that often involve violence and cause physical and/or psychological harm or suffering”.

46. Accordingly, to be regarded as harmful, practices should meet any or a combination of the following criteria:

(a) They constitute a denial of the dignity and/or integrity of the individual and a violation of the human rights and fundamental freedoms enshrined in the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child;

(b) They constitute discrimination against women or children and are harmful insofar as they result in negative consequences for them as individuals or groups, including physical, psychological, economic and social harm and/or violence and limitations on their capacity to participate fully in society or develop and reach their full potential;

(c) They are traditional, re-emerging or emerging practices that are prescribed and/or kept in place by social norms that perpetuate male dominance and inequality of women and children, on the basis of sex, gender, age and other intersecting factors;

(d) They are imposed on women and children by family members, community members or society at large, regardless of whether the victim provides, or is able to provide, full, free and informed consent.

47. Attacks against persons with albinism for the purpose of obtaining and using body parts in muti or juju as well as accusations of witchcraft match these criteria for harmful practices. In the publication on harmful practices issued by her Office, the Special Representative of the Secretary-General on Violence against Children, quoting the UNICEF study, reported that “discrimination, violence and harmful practices against children with albinism have reached alarming proportions”.¹⁹ She added that there were no cultural or religious justifications for such practices.

48. In addition, the Special Rapporteur on freedom of religion or belief has stated that persecution and punishment of alleged witches would be a clear case for limiting the application of freedom of religion or belief, in accordance with the criteria under article 18 of the International Covenant on Civil and Political Rights (see A/HRC/25/58/Add.1, paragraph 42).

Traditional medicine

49. The right to the enjoyment of the highest attainable standard of physical and mental health was first articulated in the 1946 Constitution of the World Health Organization (WHO), whose preamble states that “the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition”. Similarly, article 25 of the Universal Declaration of Human Rights mentions health as part of the right to an adequate standard of living. Article 12 of the International Covenant on Economic, Social and Cultural Rights provides the most comprehensive normative framework on the right to the highest attainable standard of health. The article has been interpreted as inclusive of specific entitlements, including the right to an adequate system of health protection, the right to prevention and treatment of illnesses, the right to access essential medicines, the provision of health-related education and information, as well as participation of those concerned in health-related decisions.²⁰

¹⁹ *Protecting Children from Harmful Practices*, p. 35.

²⁰ Committee on Economic Social and Cultural Rights, general comment No. 14 (2000) on the right to

50. Article 24 of the United Nations Declaration on the Rights of Indigenous Peoples recognizes the right of indigenous peoples to their traditional medicines, to maintain their health practices and to access social and health services without discrimination.

51. In its global study on the legal status of traditional medicine and complementary/alternative medicine, WHO recognized both mainstream medical care (allopathic medicine) and complementary/alternative medicine, terms that were used interchangeably with “traditional medicine” in some countries.²¹ Given the broadness of the term “traditional medicine” and the wide range of practices it encompassed, traditional medicine was difficult to define with a finite list of objective criteria. However, WHO provided a helpful list of what might be included: a diversity of health practices, approaches, knowledge, and beliefs incorporating plant, animal and/or mineral-based medicines; spiritual therapies; manual techniques; and exercises, applied singly or in combination, to maintain well-being, as well as to treat, diagnose or prevent illness.

52. One third of the world’s population and over half of the populations of the poorest parts of Asia and Africa do not have regular access to allopathic drugs, including essential medicines. In its global study, WHO reported that the most commonly reported reasons for using traditional medicine were that it was more affordable and accessible, less paternalistic than allopathic medicine and consequently often closer to the patient’s ideology. During the visit of the Independent Expert to Mozambique, the very high number of traditional medicine practitioners registered with the main association of traditional healers suggested that resort to traditional medicine was popular.

53. WHO suggested that regardless of the reason why an individual used it, traditional medicine provided an important health-care service to persons without geographic or financial access to health care. The Special Rapporteur on the right of everyone to enjoyment of the highest attainable standard of physical and mental health, in his report to the Human Rights Council in 2008, echoed general comment No. 14, stating that “a health system is required to take into account traditional preventive care, healing practices and medicines” (see A/HRC/7/11, paragraph 44). In addition, he also stated, in his 2006 report to the General Assembly (A/61/338), in which he examined the right to health and maternal mortality, that all medicines had to be culturally acceptable and respectful of medical ethics. He suggested, for example, that national measures should support the proper use of traditional medicine and its integration into health-care systems, while clinical trials must obtain the informed consent of research subjects.

54. Further, it is important to have standards in place to ensure that health care provided by traditional medicine practitioners is safe and reliable. These would include standards for the safety, efficacy and quality control of products and therapies, and regulations that ensure that practitioners have the qualifications they profess.²²

Traditional medicine and witchcraft-related practices

55. The present report does not question the necessity, complementarity or usefulness of traditional medicine. However, the broad definition of the concept has led to situations where the difference between witchcraft practitioners and traditional doctors is difficult to establish in practice. For example, the Independent Expert has seen advertisements in newspapers posted by “traditional healers” offering to make clients richer, cure incurable

the highest attainable standard of health.

²¹ World Health Organization (WHO), “Legal status of traditional medicine and complementary/alternative medicine: a worldwide review”, 2001. Available from <http://apps.who.int/medicinedocs/en/d/Jh2943e/>.

²² Ibid.

diseases, secure release from prison, and making other claims that are more suggestive of witchcraft than traditional medicine. In this context, the ideological affinity found between patients and traditional medicine could facilitate witchcraft as a harmful practice because witchcraft can have a diagnostic objective that could implicate innocent third parties — for example, persons known to and disliked by the patient — as the source of a patient's problem.

56. Countries with records of attacks against persons with albinism, including both countries visited this year by the Independent Expert, demonstrated the challenge of the ambiguity between the two practices. This problem has already been identified by the Independent Expert as a root cause of attacks. The issue is further complicated by the lack of effective oversight over the practice of traditional healers, the secrecy that often surrounds witchcraft practice and the absence of a clear national policy position on the issue.

C. Promising practices and subsisting challenges

1. National policies and action plans on witchcraft

Action plan to address violence related to witchcraft

57. The Government of Papua New Guinea has taken notable steps since 2013 to address sorcery-related violence. Although there are no recorded cases of attacks against persons with albinism in Papua New Guinea, measures were taken to address violence and killings related to witchcraft accusations, which are usually levied against women or members of other vulnerable groups.

58. As noted during the universal periodic review of Papua New Guinea, the National Action Plan against Sorcery- and Witchcraft-related Violence was approved in 2015 (A/HRC/33/10). The Action Plan is supported by the national and provincial committees, which serve to ensure its implementation to complement existing laws that address sorcery and witchcraft-related killings and violence. The Action Plan, which puts emphasis on strengthening partnerships between relevant stakeholders, has five core areas: legal reforms and protection; health; advocacy and communication; care and counselling; and research. Each area contains a few key recommendations and sets out concrete activities to be implemented. It also allocates specific responsibilities to particular departments and organizations, establishes time frames, and highlights the human and financial resources necessary to implement them.

59. While the effectiveness of such a plan has yet to be evaluated, it is a promising solution. It ensures national conversation on the issue, which in turn feeds into conceptualization and delineation. It also sharpens legal tools for addressing the issues, while identifying pertinent non-legal tools as well as key stakeholders to enlist in the process.

Action plan on albinism

60. Action plans and policies that are currently being used and developed in countries such as Malawi and Mozambique to address attacks against persons with albinism include tools for addressing the root causes of attacks, including witchcraft.

61. Malawi adopted a response plan in March 2015. It includes developing an education and awareness programme; strengthening community policing structures and the allocation of adequate police forces in the districts most affected by attacks; undertaking research to understand the root causes of attacks and trafficking in body parts; expediting prosecution

of attacks; providing psychosocial support to victims; and the review, amendment and enactment of legislation where necessary to ensure the protection of persons with albinism.

62. Similarly, on 24 November 2015, Mozambique adopted an action plan to respond to attacks, with concrete, time-bound measures. The action plan is based on a preliminary socio-anthropological study on albinism conducted by the Institute of Social-Cultural Research. The main areas of the action plan are promoting education on albinism, public education and awareness-raising on the issue among families and communities; guaranteeing protection and social assistance to persons with albinism; ensuring prevention of attacks, legal assistance and procedural celerity; sharing and publication of judicial decisions as a means of deterrence; and conducting further research to improve measures identified in the plan and to support evidence-based policymaking.

63. Both plans adopt a multisectoral approach intended to address albinism as a cross-cutting issue. This approach is necessary to expedite integration of the issue into existing departments while harnessing the varied expertise of stakeholders in the development of specific programmes aimed at persons with albinism.

Regional action plan

64. In 2016, the Independent Expert, in collaboration with regional human rights mechanisms, launched a process towards the development of a regional action plan to address attacks against persons with albinism in sub-Saharan Africa. The action plan seeks to identify concrete measures for implementing recommendations made by various human rights and other bodies and to translate them into a concrete road map for action with time-bound measures.

65. The Independent Expert emphasizes the need to incorporate in the plan, as in all initiatives on the issue, a dual or twin-track approach. This includes, on the one hand, an emergency and priority response in the area of protection against and prevention of attacks and, on the other hand, the adoption of long-term policies to fight discrimination; address rampant myths, dangerous misconceptions, stigma and witchcraft practices affecting persons with albinism; and ensure full enjoyment by those persons of their socioeconomic rights, among others.

66. Measures identified can be implemented by integrating them into existing, broader frameworks, including laws and policies to implement the rights of persons with disabilities, on access to health, on the rights of women and children, on access to justice services, on victim support services and to eliminate racial discrimination (including discrimination based on colour). Such measures should be extended to the family members of persons with albinism and, in particular, to mothers of children with albinism and women generally. At the same time, specific measures of protection and anti-discrimination for persons with albinism should also be carried out where possible, particularly in countries affected by attacks against persons with albinism and where neglect of this group has been historical and dire.

2. Best practices and other considerations for the way forward

Repealing outdated witchcraft legislation

67. In 2013, the Parliament of Papua New Guinea repealed the Sorcery Act (1971) in total. The Act, whose objective was “to prevent and punish evil practices of sorcery and other similar evil practices”, acknowledged the existence of sorcery and criminalized its practice, including attacks against people accused of sorcery. In 2014, new legislation criminalizing killings related to sorcery was enacted.

68. The repeal of the Sorcery Act followed a nationwide consultation and review by the Constitutional Law Reform Commission. The Commission found that the law, although rarely used, contained various contradictions and inconsistencies, and was difficult to enforce. The Commission also found that the Act used ambiguous terminology. For example, it referred to the difference between “innocent” and “forbidden” sorcery, but did not clearly specify what those acts constituted. The Commission also reflected on the technical difficulty of identifying the consequences of sorcery in a court procedure and on linking sorcery to a given consequence, as it was practically impossible to provide evidence that would prove its use. Further, the Commission found that the Act focused principally on the sorcerer as the perpetrator and did not adequately address violence perpetrated against persons accused of sorcery or of being a sorcerer. The Commission also found that the existence of the Act itself could perpetuate belief in sorcery as a means of harming or killing another person. Finally, the Commission found that sorcery as such was not a matter falling under the jurisdiction of courts and tribunals, but was to be dealt with by religious and spiritual leaders. However, any violence related to witchcraft, including murders and attacks, was a criminal offence that should be treated as such by the courts and tribunals (see A/HRC/23/49/Add.2, paras. 64-66).

69. It is likely that similar laws, including those inherited from the colonial era, when examined in the light of the principles of human rights, including the rule of law and the right to a fair trial, would lead to outcomes similar to the ones prescribed by the Commission. They include repealing outdated legislation on witchcraft, while emphasizing the necessity of sanctioning persons who accuse others of witchcraft; making it generally known that harmful practices related to witchcraft would be prosecuted; and ensuring that mere belief in witchcraft is not criminalized. However, as witchcraft in general has yet to feature prominently on the radar of human rights mechanisms, the initiation of a system-wide approach, beginning with a scaled-up version of the exercise conducted in Papua New Guinea, including an exercise in definition, is timely.

Regulating traditional medicine

70. In certain countries, organizations of traditional healers have established oversight systems to control the practice of their members. This is the case in Mozambique, where oversight takes the form of voluntary registration in the association of traditional healers.

71. However, these efforts provide only limited control owing to several factors. First is the absence of a normative framework and legislative clarity on the difference between traditional medicine and witchcraft. This ambiguity is being abused by criminals posing as traditional healers, but also by genuine traditional healers who go beyond using herbs and animal body parts to using body parts of persons with albinism to attract a higher price for their services.

72. Second are the inherent limits of self-regulation, weak law enforcement and the absence of a far-reaching oversight mechanism for both urban and rural areas. Further, self-regulation by organizations of traditional healers have done little to prevent purported practitioners of traditional medicine from establishing themselves on their own, with no oversight at all. Weak enforcement of government licensing systems has also led to similar situations.

73. WHO, in its study on the legal status of traditional medicine, details the status of traditional medicine in 123 countries around the world, showing the diverse approaches taken by States with respect to the practice. In sub-Saharan Africa, some States recognize traditional medicine as part of the national health system while others are silent on the issue. There are also variations between States in the level of regulation of traditional medicine practitioners. Some countries have established registers of practitioners, or exercise control by issuing government licences at the central level; in others, local officials

are able to authorize the practice of traditional medicine in their administrative and/or health subdivisions. In certain countries, unlicensed practising of traditional medicine is a punishable offence. In other countries, including those with records of attacks, there is no licensing or registration process for practitioners of traditional medicine.

74. The adoption of regulatory measures regarding traditional medicine would benefit from a Government-enforced monitoring mechanism that reaches rural, remote and border areas, particularly where attacks against persons with albinism have been reported. It is also critical that any legislation enacted regarding the practice of traditional medicine be accompanied by public education campaigns explaining the criminal nature of witchcraft-related attacks and violence. In addition, efforts should be made to ensure that relevant legislative developments are communicated to practitioners of traditional medicine and that the new provisions are effective and enforced.

75. This does not mean that there is no role for the organizations of traditional healers in the process. On the contrary, their task is fundamental in complementing the actions taken by the State. For example, they could, in collaboration with the Government, develop internal rules of practice and clarify the impact of law and policy on the details of their practice. In this regard, good practices include cooperation among such organizations and between the organizations and the ministries of health, including through exchange of information and referrals.

76. In the public interest, it is also important that States ensure adequate standards for traditional medicine. There must be minimum requirements for all practitioners, regardless of whether they are affiliated with an organization. The standards must be in line with established human rights norms, without compromising the core principles of availability, accessibility, acceptability and quality of goods and services. The obligation on States also extends to ensuring that practitioners do not conduct harmful practices, including the use of body parts of persons with albinism for muti or juju.

Trafficking of body parts

77. Attacks against persons with albinism are characterized by the hacking off of body parts. This appears to be the primary purpose of a majority of attacks. Body parts such as limbs are removed from the body and transported to alleged witchdoctors for the purpose of concocting muti or juju medicines and potions.

78. The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime defines trafficking as “the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation”. A similar definition is used in most legislation addressing trafficking in persons.

79. In 2008, the United Nations Global Initiative to Fight Human Trafficking convened a workshop on human trafficking for the removal of organs and body parts, at which it was stressed that the Protocol does not take trafficking in human organs into full consideration: it addresses trafficking in organs only for the purpose of organ removal. It does not cover the transfer of organs (for profit) alone, a situation that is analogous to the trafficking of body parts of persons with albinism.

80. The Special Rapporteur on trafficking in persons, especially women and children, in her 2013 report to the General Assembly (A/68/256), stated that the difference between trafficking in organs and trafficking in persons for the removal of organs was largely semantic, given that organs were not moved or traded independently of their source,

because the victim was moved or positioned in such a way as to make transplantation possible. However, the hypothesis regarding attacks against persons with albinism suggests a different context. Here the purpose is not the transplantation of a functional organ, but the collection of a body part for muti or juju. Although some cases of trafficking of persons with albinism have been reported, in the majority of the cases, the victims are attacked in their homes or while carrying out their ordinary activities, and their body parts hacked off their living or dead bodies at the place of the attack, or close by. In such cases, it cannot be considered that the victims are trafficked, yet their body parts are being harvested, transported and sold.

81. In addition, it is not certain that body parts, such as limbs hacked off, seized and transported for the sake of muti or juju, would fall under the definition of “organ” in both international and national trafficking laws. Neither the Protocol nor other global instruments addressing trafficking for the removal and sale of organs, such as the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography or the WHO Guiding Principles on Human Organ Transplantation, defines “organ”. However, a definition of “organ” is provided by a specific regional instrument on the issue, namely the Council of Europe Convention against Trafficking in Human Organs, which defines “human organ” as “a differentiated part of the human body formed by different tissues, that maintains its structure, vascularisation and capacity to develop physiological functions with a significant level of autonomy”.

82. In the absence of specific legislation covering trafficking of body parts, some States have been confronted with a legal gap when they arrest persons for trafficking body parts of persons with albinism such as bones, hair and limbs. In response to this situation, in Malawi for example, the judiciary has made creative use of the Anatomy Act, which was not drafted with the horrendous crimes perpetrated against persons with albinism in mind. The Act, which was drafted for a medical context, carries relatively light penalties but was, until recent reforms, the only instrument available to prosecute cases of possession of body parts of persons with albinism.

83. In addition to the problem of the legal gap, it is particularly difficult to establish that any body parts found are linked to an attack, given that such crimes are often not reported and the limited technical and financial means of law enforcement, particularly in the area of forensics, as well as the time and distance between the place where the alleged attack occurred and the place where the body parts were found. As a result, barring clear evidence that the body part was obtained from an attack or a graveyard robbery, affected States have resorted to laws that address mere illicit possession of body parts that, however, tend to carry penalties perceived to be too weak and fail to encompass the overall context of the crimes.

84. To address the specificities of the use of body parts in muti and juju, it is fundamental to ensure that there is adequate legislation to prosecute the trafficking and sale of body parts, including in non-medical contexts and when they do not meet the requirements of the definition of “organs”.

Research and data

85. Information on albinism, particularly on attacks and trafficking of body parts, requires further clarification and, in some cases, verification. Statistics, including disaggregated data, are fundamental to improving and strategically enabling the implementation of policies and action plans.

86. Similarly, research on the root causes of attacks, including witchcraft, is necessary to refine prevention and protection measures. As specific witchcraft-related beliefs and practices tend to arise from specific contexts, supported by different concepts and described

by a diversity of terms, research has to be undertaken with particular attention to the specific sociocultural context.

Public education

87. Public education, including awareness-raising on the scientific explanations for albinism, is one of the most fundamental tools for changing myths and erroneous beliefs that trigger violence against persons with albinism. For example, in a pilot project carried out in 2015-2016, the United Nations Educational, Scientific and Cultural Organization country office in the United Republic of Tanzania undertook community sensitization using community radio and employing the sociocultural approach by empowering key community stakeholders such as teachers, health workers, traditional leaders, traditional healers and family members of persons with albinism to in turn mobilize their communities to protect and promote the well-being and rights of people with albinism. The project was a marked success. A post-project evaluation report revealed a quantifiable increase — in the double digits — in the percentage of people claiming knowledge about albinism, including its genetic basis and that it is not a curse.

88. The project illustrated the value of such campaigns and associated post-project evaluation not only for the dissemination of information and changing of attitudes and behaviour but also to gather data, as they revealed instructive patterns in the targeted communities. For example, the belief that body parts of a person with albinism have magical powers was found among respondents adhering to various religious groups: Christians, Muslims and traditional believers. In the context of the survey, the latter group had the highest number of believers in that myth. This type of information is helpful for understanding the character of the problem and grounding solutions such as working with all religious leaders. It also identifies areas where increased public education efforts or more targeted projects might be warranted. The evaluation found that youth and women were more likely to have misconceived notions about albinism than men. This suggests that the project did not reach women and youth to the same extent as it did men and that it is necessary to plan and implement further interventions that target these groups in particular.²³

89. The Independent Expert recommends the implementation of similar projects in all countries affected by any or all of the phenomena of attacks, discrimination and stigma against persons with albinism. Such projects should not be interrupted and last for a minimum of two years. Content should be accessible, including through the use of vernacular languages. Social media, mobile phone technology, community radio, rural cinema and television programmes have also proven to be particularly useful for awareness-raising. Creative awareness-raising methodologies and new ways of presenting information, including through community theatre and celebrity ambassadors, have also been successful.

90. Finally, campaigns should engage faith-based organizations, traditional leaders, persons with albinism and their families. They should address witchcraft and related beliefs, as well as fundamental topics involving albinism, including biological and scientific information on the genetic origins of the condition and other objective facts to debunk myths and misbeliefs surrounding the condition.

²³ United Nations Educational, Scientific and Cultural Organization (UNESCO), “Evaluation of the impact of the UNESCO intervention relating to people with albinism carried out within the framework of the UN Development Assistance Plan (UNDAP 2011-2016) in Tanzania”, 2016, unpublished.

IV. Conclusions and recommendations

91. Witchcraft practice, in particular the use of body parts of persons with albinism for muti or juju, is undeniably one of the main root causes of attacks against persons with albinism. However, owing to challenges in conceptualizing “witchcraft” using objective elements, attempts at establishing clear legal boundaries around such practices — including to deter related harmful practices — have been elusive. One key exception is witchcraft accusations, an aspect of witchcraft practice that can be, and has been, legally captured with objective elements because there is no need to define “witchcraft” itself to achieve the purpose of preventing accusations and related violence.

92. That being said, given the extent of witchcraft practices and the diversity of victims of related harmful practices, including persons with albinism, a transversal approach is timely. This could be in the form of a guiding document that takes into account the several recommendations made to date, including by the Special Rapporteur on extrajudicial, summary or arbitrary executions, the Constitutional Law Reform Commission of Papua New Guinea and the preliminary conclusions of the Independent Expert.

93. Meanwhile, strategies such as action plans designed to address witchcraft and attacks against persons with albinism should encompass a variety of measures, inter alia, to reinforce the existing legal framework, enhance the protection of persons with albinism, ensure awareness-raising and strengthen research and data collection.

94. It is important to ensure that all stakeholders are closely associated with the development and implementations of any strategies, including all relevant government entities, academia and civil society, in particular, traditional healers, faith-based organizations, organizations of persons with albinism and human rights organizations.

95. Addressing deeply rooted beliefs and practices such as witchcraft necessitates efforts in public education, which ought to be sustained even when the most visible aspects of the consequences of witchcraft on persons with albinism, namely the attacks against persons with albinism, appear to be decreasing.

96. Further, in addressing the issue of attacks against persons with albinism, all initiatives are best taken using a dual or twin-track approach. Such an approach would, on the one hand, urgently deal with attacks and trafficking of body parts for muti and juju; on the other hand, measures employed should go beyond the emergency of attacks, inter alia, to address root causes of attacks including, and particularly, harmful practices linked to witchcraft.

97. Accordingly, the Independent Expert recommends that Governments:

(a) Review with a human rights approach, and repeal if necessary, outdated legislation on witchcraft;

(b) Develop, adopt and implement action plans or strategies addressing, from a multisectoral approach, harmful practices linked to witchcraft and their impact on all victims, including persons with albinism, in consultation with civil society;

(c) Regulate the practice of traditional medicine, including through mechanisms such as a Government-led licensing and monitoring regime in both urban and rural areas, and establish adequate standards for traditional medicine;

(d) Review and adapt legal frameworks as needed to ensure that they encompass all aspects of attacks against persons with albinism, including with regard to trafficking of body parts;

(e) Ensure prompt investigation and prosecution of cases of attacks against persons with albinism as well as trafficking of body parts for muti or juju;

(f) Ensure the systematic collection of disaggregated data on persons with albinism, including through birth and death registers, as well as on attacks against persons with albinism, trafficking in body parts and accusations of witchcraft.

98. The Independent Expert recommends that Governments, together with civil society and academia:

(a) Conduct in-depth research on root causes of attacks against persons with albinism, including on harmful practices related to witchcraft;

(b) Develop and implement long-lasting awareness-raising campaigns, as they are critical to addressing harmful practices and rampant myths affecting the enjoyment of human rights by persons with albinism.

99. The Independent Expert recommends that the international community:

(a) Advocate for victims of witchcraft practice, including persons with albinism, by including the phenomena in all discussions and reports on harmful practices;

(b) Continue to work to:

(i) Clarify the international human rights framework that is particularly relevant to trafficking in body parts;

(ii) Advance the discourse on witchcraft to improve understanding on the phenomena, both generally and in the context of harmful practices, to ultimately ensure the enjoyment of human rights by all victims, including persons with albinism.
