Witchcraft in Transkei Region of South African: case report

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Abstract:
Witchcraft and witch-hunt have been practiced widely almost all over the world. It is known as magic in Europe, maleficium (wrong-doing) in Latin America, and superpower in Asia. In Africa those accused of being witches often face execution. A range of accusations are leveled against witches such as causing impotence, turning milk sour, causing disease and death.

Three cases are presented here to highlight the issues related to witchcraft in Transkei area. The information was given by the next of kin at the time of autopsy. All were elderly women over 50 years of age. The first was related to tuberculosis of the brother of the perpetrator the second, death of the culprit’s relative and third the death of culprits brother in Johannesburg. The first and third victims were brutally chopped by axe and in the second it was a firearm injury. The case history, the type of wounds, and medico-legal aspects of death are discussed in these reports. There law related to witchcraft and their implementations to prevent such deaths are discussed.

Keywords: Witchcraft, unnatural deaths, homicide.

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Introduction
The old liberal view of European Witchcraft holds that witchcraft never existed at all, but was invented by the Catholic Church and other authorities to gain power and prestige. Witchcraft has never existed, but blames widespread composite superstitions collected across the centuries. In Kazakhstan and Tajikistan, it is believed that once humans die the witches that murdered them own their souls. The ordinary people view witches in a different light. They are females and maligned magic workers. They fall into two broad categories, those that explain the occurrence of misfortune and are thus grounded in real events and those that are wholly fantasized. The first category includes powers that prevent cows from giving milk, hens from laying eggs, cause diseases and death. The second includes powers such as flying and changing into hare.

When misfortune occurs, it is believed to be caused by a fellow tribesman in a position of standing in the community. In Swaziland, witchcraft emanates typically from a jealous co-wife. The most prolific single source of witchcraft is the conflict of co-wives, reflecting tensions in the polygamous household. There is a general belief that illness and other bad occurrences are related to witchcraft. The elderly women who are identified as witches are therefore at risk of being murdered as a result. However, it is mostly dominated in rural areas where poverty usually leads to strained human and in-law relations, and where most illnesses cannot be explained.

Witchcraft and witches are not always considered as bad in some parts of the world. Japanese women’s national volleyball team, which won a gold medal at the Tokyo Olympics, is known in Japan as “Toyo no Majo” or “Oriental Witches.” Real witchcraft is a field of adventure and exploration into realms of fantasy offering a secret knowledge that some use to their own advantage.

The purpose of these case reports is to highlight the issues of witchcraft in Transkei, South Africa, and to provide some insight into solving the problem.

Case 1
In June 2000, a post mortem examination was conducted on a 70-year-old woman. She had been accused of witchcraft. The alleged perpetrator’s cousin brother, who was a neighbor of the victim, had been admitted with pulmonary tuberculosis in hospital and the victim was accused of bewitching him. The perpetrator had been consuming alcohol in a shebeen until early hours of the morning, and then came to the old woman’s house. He knocked the door. She had opened the door when called as he was related to her. On entering the house, he had questioned her and begun to assault mercilessly. A young woman who had been sleeping with her was also assaulted but sustained only minor injuries. A child who had been with them had been dispatched to call for assistance and the patient was transferred to the referral hospital in Mthatha but succumbed to injuries the same afternoon (Photograph 1).

The perpetrator was an unemployed, illiterate, junior school drop out of about 25 years of age with no siblings. He was an alcoholic and a cigarette smoker. His father was employed in a Cape Town hotel and the mother had been dead for a long time. He stayed with the old lady he murdered.
Case 2
In June 2000, a 51-year-old woman was gunned down in her house around 18h00. She had been in a room when a man had come to the house and had a conversation with her. A daughter had been with her at that time. However after a while when the daughter left she heard a gun shot in the room. When she returned the mother lay dead in a pool of blood. The conversation has been that she is engaged in witchcraft, and as a result of it, he met an accident, and lost his son.

The perpetrator was a distance relative of the victim. He was uneducated and school drop out of about 30 years of age. He was an alcoholic and a cigarette smoker. His parents died when he was very young.

Case 3
In May 2000, a body of a 70 year old woman was brought to Umtata Hospital mortuary with extensive multiple injuries. She was alleged to have been involved in witchcraft. The perpetrator has been a close family member who had accused her of being responsible for his brother’s death in Johannesburg. She had been assaulted with an axe (photography 2)

The perpetrator was an illiterate, smoke, and drink alcohol regularly. His mother had died long back, and father is working at mine.

Discussion
Transkei was a former black homeland where illiteracy is high and the people are generally poor. Majority of the inhabitants live in rural areas. Communication infrastructure is poor and the road network is primitive with few transport facilities. There are deep-rooted beliefs in tradition and local customs. Several studies have shown that there is a heavy disease burden and a high mortality rate. In addition, there is widespread belief in witchcraft. A number of deaths have been implicated to witchcraft. These are difficult to be proven in a court of law. Most of the reported killings are from the rural areas. Some elderly women are sometimes found performing rituals in the night which cast suspicion on them. Dark, short and elderly ladies are often labeled witches. When a healthy young person dies suddenly, the common belief is that it is due to witchcraft. Another common association is lightning strike and witchcraft. The desire of the community is often to eliminate them. There is a high incidence of lightning fatalities in the Transkei sub-region of South Africa. People need to be educated to avoid the myths of lightening strike. The issue of witchcraft and counter killing of witches is associated with lack of education.

These case reports demonstrate the deep-rooted beliefs and the fear of witchcraft in Transkei.
are based on the medico-legal history provided by the close relatives of the victims at the time of autopsies.

In the first case, the brother believed that the illness of his sibling was as a result of witchcraft and planned the killing of the implicated woman. He consumed alcohol perhaps to overcome fear and inhibitions before committing the crime. Lightening strike and road traffic accidents are considered as part of witchcraft in Xhosa culture. In this case, like many other cases, the individuals who are usually accused of witchcraft are elderly women. In addition, in this case, the perpetrator was apparently gullible enough to act.

In second case, the son of the perpetrator died in an accident, and he blamed the victim for this tragedy. Most of the time an axe was the weapon for the crime. Belief in witchcraft is still strong. Even rational, literate people do believe in witchcraft especially when events cannot be explained or when people fail to explain the course of events or when people fail to establish causes of complex issues. Regular misfortunes often lead to beliefs in witchcraft. Failure to succeed in life often gives rise to beliefs of being bewitched.

In case three, the brother of the perpetrator was in Johannesburg, far away from the home of the victim, but the belief of the perpetrator was that she had bewitched his brother and caused the death. Witchcraft accusations frequently occur within the kindred group. With the Nguni classificatory kinship systems, witches are not the mothers as such but junior or senior mothers. There are about 50 to 60 bodies of elderly women brought to Umtata General Hospital mortuary every year who had been implicated in witchcraft. There are four characteristic features of this witchcraft related deaths. First, a witch is always a woman, secondly they are elderly (>50 years) thirdly, most of the time the perpetrator is related to the victim or very well known to her fourthly, there is some sort of community consensus or permission to eliminate these witches.

Most of the elderly women are at risk of being murdered. Since a gruesome triple murder in a village, the people have teamed up with the police to form a community-policing forum. In Lusikisiki earlier this year, a mob comprising mostly of young people from the village allegedly accused three family members of bewitching a local councilor who had fallen ill. The three were dragged off to mountainside and brutally murdered. Six people, including a ward committee member, were arrested soon after the incident and a further 22 subsequently. They are all due to appear in court, each charged with three counts of murder. The forum’s deputy chairperson said the formulation of the forum had helped allay fears among the elderly, that they would be the next to be killed.

This belief of witchcraft is more dominant in rural areas where poverty usually leads to strained human and in-law relations, and where most illnesses cannot be explained. There are certain laws that deal with witchcraft but the beliefs are so strong that these laws hardly limit their effect in the community. The issue of witchcraft is seen to be associated with poverty, disease, and ignorance.

There is a prevalence of minor psychiatric disorders in an adult African rural community with a significant association with age, marital status, employment, income and educational level. The traditional healer generally provides therapy for all mental illnesses unless uncontrollable behavior necessitates referral to mental hospital. Usually when clients go to a traditional healers they are told that a witch in the community has cast a spell on them. The tendency is to seek this witch and eliminate from the community. Sometimes the houses are burnt and the family members are harmed. The rural Xhosa people of South Africa have retained social cohesion through traditional custom, purity of language and dominant role of ancestor worship, traditional medicine and witchcraft in lifestyle.

Poverty, unemployables and illiteracy are common factors in all three cases. Lack of parental care while growing up is also evident. Children generally brought by grand parents in Xhosa culture, tend to trifle a lot. As they go through teenage years, there is generally lack of control and there is often no one to give direction as in this case. The perpetrators often have no role models while growing up. The peers around introduce them to many undesirable things such as drugs, alcohol, and tobacco.

In conclusion, beliefs in witchcraft are still strong in rural areas of Transkei. Even rational, literate people do believe in witchcraft especially when events cannot be explained or when people fail to explain the course of events or when people fail to establish causes of complex issues e.g. regular misfortunes, failure to succeed in life etc. Victims of witchcraft accusations, majority of them elderly women, are faced with terrible experiences in these communities. The issue of witchcraft and counter killing of witches is associated with lack of education. People need to be educated to avoid the myths of lightning strike. Traditional healers need to be educated on the laws of South Africa and the right of individuals as enshrined in the bill of rights in
the constitution of South Africa. It is a challenge for the police, social workers, judiciary and local politician in tackling the problem.

**References**