

Religious Trauma: How Religious Trauma has unjustly silenced Black women living with HIV in the Southeast Region of the US South and how religious trauma affects relationships with their faith communities

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Advisor: Dr. Angela Yarber

(Mia Hash Sloan)

Drew University

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ABSTRACT

Religious Trauma: How Religious Trauma has unjustly silenced Black women living with HIV in the Southeast Region of the US South and how religious trauma affects relationships with their faith communities

Mia Hash Sloan

Transformations Healing Project, Winston-Salem, NC

HIV remains an epidemic within the Black community most pervasively in the US Southeast Region. This paper provides an opportunity to explore fundamental and historical causes as to why this virus remains an epidemic within the Black community. There are several factors to this matter. Historically this virus has always been stigmatized. In addition to it being stigmatized, it quickly became racialized. Due to HIV being racialized, health inequity and inaccessibility resulted in extremely high mortality rates for Black persons living with HIV/AIDS. This public health crisis was quickly stigmatized as a moral crisis. Many were unjustly marginalized. Black faith communities remain a cornerstone within the Black American diaspora community. Therefore, in the early 1980s the CDC developed faith initiatives for Black faith communities to begin to be a resource for HIV prevention and education. Over the years Black faith communities who lived into their prophetic witness became instrumental for persons living with HIV to find out their status and to be a resource that provided link to care. HIV remains stigmatized and persons living with HIV are deeply traumatized as a result. In addition to the stigma, Black women living with HIV have disproportionately become marginalized, invisible, and silenced in HIV advocacy and within their faith communities. This project aims to highlight how religious trauma is one of the root causes for the stigma and bias

that persons living with HIV are contending with. The source of this collective religious trauma can historically be traced back to colonization. Colonization weaponized religion and used it as a tool to debilitate the Black psyche. Consequently, the spiritual and psychological impact and effect has caused a great divide within Black faith. This project aims to be a tool and guide to address the collective, unconscious religious trauma that Black diasporans contend with. Therefore, this project focuses on how Black women's ministries are powerful spaces to heal the collective intergenerational trauma that most unconsciously live with. A customized curriculum was created with inclusive pedagogical practices that will collectively heal Black women and amplify the voice of Black women living with HIV.

DEDICATION

I would like to dedicate this paper to my ancestors who are a guiding light for me, who paved a beautiful path for me. They opened doors for me that I did not conceive nor perceive to be possible. To the ancestors who called me to be a voice, an advocate for and with those who have been unjustly cast to the margins. May my life's work, may my vocation be reflective of pointing people to the way. To the way that they see their light, their truth, and their way.

This is the place that God dwells, when we are enlightened and come into the awakening of our divinity. Divinity meets divinity. For this, I am able to declare that there are no margins. May we all be set free to defy the margins, they are not ours to own.

Be free Black Divinity! We are children of The Sun.

This paper is dedicated to every person living with HIV. Thank you for allowing me to do this work for and with you. May your voices resound and be amplified in my research and work. It is a complete honor to be a faith leader advocating in God's good work. May Black women living with HIV no longer be silenced in their faith communities.

Ase' and Amen

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INTRODUCTION

This paper delves into the intricate relationship between religion, trauma, and queerness within African and African diaspora Black communities in the United States. Historically, the Black church has served as an anchor to the collective Black community, but African diasporans have nevertheless suffered historical generational trauma due to religion, and religion has been used as a tool to traumatize African and African diaspora Black communities in the United States. There has been insufficient awareness of and attention to religious trauma as one of the root causes of bias and stigma in the Black community, particularly concerning the HIV/AIDS epidemic. In this context, Black women living with HIV find themselves disproportionately marginalized within their faith communities, their voices silenced and their struggles overlooked. This paper will explore the pervasive influence of religious trauma on the lives of Black women, especially those living with HIV, within their faith communities. It underscores the need for these communities to confront and address the stigma and marginalization experienced by their members in order to foster safe environments for transformative healing.

Research examining the intersection of religion and HIV stigma reveals concerning associations between religious beliefs and shame-based stigmatization. The research study “Religion and HIV in Tanzania” surveyed faith communities and found “that shame-related HIV stigma is strongly associated with religious beliefs such as the belief that HIV is a punishment from God ($p < 0.01$) or that people living with HIV/AIDS

(PLWHA) have not followed the Word of God ($p < 0.001$).”¹ Due to this stigma, Black churches have been prevented from adequately advocating for, educating, and bringing awareness to the epidemic of HIV. In my thesis, I shall examine the stigmas connected to HIV. I will also delineate the potential of Black faith communities, and women’s ministries in particular, to utilize nonconventional and trauma-informed healing practices. Black faith communities are powerful, well-resourced tools which have abundant opportunity to curate intentional, radical, healing, and inclusive spaces *if* they are willing to be adequately equipped on how to incorporate conventional and non-conventional modalities to heal trauma.

Trauma does not define the lives of Black women. However, due to Black women’s sociohistorical placement and positionality in this world, the liberative agency of Black women has often been met with great challenges that have caused them a great deal of harm and impacted their overall wellbeing. Black women’s strength often precludes them from realizing their full, dynamic selves and potential. The Black woman is known to be otherworldly strong as She has required a resilience which should be both lauded and healed. To heal, the collective Black woman needs intentional curated care. This research will amplify how this care is most needed and immediate for Black women living with HIV.

Religious trauma is not the sole source of Black women’s pain and marginalization, but as a noteworthy factor, it is important to understand how it operates at the root and partial source of Black humanity's trauma. Black faith has healed a great

¹ Zou, J., Yamanaka, Y., John, M. *et al.* Religion and HIV in Tanzania: influence of religious beliefs on HIV stigma, disclosure, and treatment attitudes. *BMC Public Health* **9**, 75 (2009). <https://doi.org/10.1186/1471-2458-9-75>

deal of religious trauma and has been a fertile ground for Black community building, but the potent seed of Black faith carries a challenge: the necessity of disentangling itself from the tentacles of religious colonization, a precursor to white supremacy. The colonial arm of Christianity, as it has operated historically, has the Black church in an existential crisis, throwing into chaos the tenets which made the institution of the Black church one of the most powerful global entities. The future of the Black church is fragile. Indeed, there is a death rattle within the Protestant church as a whole. Black faith, especially in the United States, must grapple with how white supremacist and colonial practices shaped Protestantism which influenced a great deal of Black Christianity. This colonized Christianity was the segue to the divisiveness that crept into the Black church.

Within this framework, Black men muted the voices of Black women within the Black church because they conceded to an oppressive theological framework that marginalizes and mutes women. Womanist theologian Jacquelyn Grant states, “Black men must ask themselves a difficult question. How can a white society characterized by Black enslavement, colonialism, and imperialism provide the normative conception of women for Black women in society? Black men have accepted without question the patriarchal structures of the white society as normative for the Black community.”² Historically, from the continent of Africa to The Americas, Black women have always been primary and instrumental to Black humanity and civilization. Black women have been the backbone of the institution of the Black church. Consequently, Black women have been the sacrificial lamb that bears all of the burdens, indiscretions, and sins of their

² Grant, Jacquelyn. "Black theology and the Black woman." *The Black studies reader* (2004): 421-34.

communities, including the faith community itself. Many Black women have given their entire lives to their faith communities. Their faith community is the rock not just to their well-being but to their very *being*. Despite their unwavering dedication, Black women have not always received reciprocal love and support from their faith communities. Time is overdue for Black faith communities to show intentional care for all women in the community, especially those suffering in silence.

It is important to note that a number of Black faith spaces comprise the truest integrity of what women's ministries should ultimately be for women within their congregations and local communities. Unfortunately many ministries are complicit in and have subjugated themselves to toxic hegemonic heteronormativity. Black women within these faith spaces must be empowered! Yet many women in these spaces are unaware of, or even averse to, the need for empowerment, which is essential for their ultimate holistic well-being. Womanist theologian Rev. Dr. Katie Geneva Canon devoted her scholarship to unlocking what women who remain in patriarchal systems need to access empowerment: a “debunk- ing, unmasking, and disentangling” of systems of oppression that compromise our (Black women's) birthright to be communal and free; gently excavating boulders of oppression from the surface, in order to unearth “the work that their souls must have.”³ This quote underscores the vital importance of dismantling oppressive structures to empower Black women, highlighting the necessity of excavating deeply rooted oppression to pave the way for the soul-nourishing work essential for their liberation.

³ Alison Gise Johnson. “Dancing Redemption's Song, Across Generations: An Interview with Katie G. Cannon.” *Journal of Feminist Studies in Religion* 34, no. 2 (2018): 75–88. <https://doi.org/10.2979/jfemistudreli.34.2.07>.

Black faith communities should be integral spaces that provide holistic rehabilitation plans and pathways for Black women. In order to do this, the Black church must realize that it is at a crossroads with itself and its relationship to Black women - and it has been for a long time. This existential crisis is not reflective of the Black souls that constructed these institutions but reflects the experience of a group of people who have been cut off from themselves. When souls are cut off from themselves, they are disconnected from their individual and collective identities, and that results in trauma. This trauma was born into the veins of our enslaved ancestors as Black men and Black women were cut off from each other and from themselves by the institution of slavery. Delroy Hal states, “Existential crucifixion occurred as the enslaved were forced to renounce their name, culture and ultimately, their identity. This act of dehumanization was an attempt to annihilate the self, distorting the ‘Imago Dei,’ thereby reinforcing the notion that Black people could never be human beings.”⁴ Unfortunately, due to a lack of self-knowledge and understanding of our collective history, it is extremely difficult for the Black church to articulate the underlying causes of this existential crisis, which continues to tighten its hold on the spiritual essence of a community that historically depended on each other's divinity for survival.

The collective Black community has, historically, often been marginalized by a religion - that is, “the belief in and worship of a *superhuman* power or powers, especially a God or gods”⁵ - that has cut them off from itself, forcing and coercing individuals to serve a God they did not choose and adhere to a religion that they did not identify with. It

⁴ Delroy Hall, “The Middle Passage as Existential Crucifixion,” *Black Theology* 7, no. 1 (2009): 47.

⁵ <https://languages.oup.com/google-dictionary-en/>

is vital to understand that Blackness, Black faith, and the Black church are not a monolith, although they do share some influences and contexts. Therefore, my argument cannot be generalized. However, it is important to understand this shared context before we can identify solutions for this collective existential crisis and before addressing HIV stigmas that are entrapped in religious trauma. To address the issue, there must first be an informed awareness of the causes and effects of religious trauma and its extremely harmful tactics. Religious traumatization has served as a significant factor in the disconnection experienced by Black communities, disconnecting Black humanity from many parts of itself.

There are distinct integrative spiritual practices that will always travel with the Black soul even as attempts from white oppressors endeavor to disconnect them from themselves. Michael Gomez, author of “Africans, Religion, and African Religion through the Nineteenth Century” states, “Africans trafficked into the New World brought with them their own beliefs, beliefs rarely frontally challenged by an insistence upon conversion.”⁶ Colonization dismissed native generational spiritual beliefs and catechized Africans into a Christianity that ultimately attempted to rob them of the very essence of who and what they were, their beliefs, and their cultural and religious practices. Beliefs typically reflect the values and norms of society, shaped by factors like environment, family upbringing, and cultural traditions. Beliefs are contextual: they make sense and have value in a particular context. Thus, as Preston N. Williams explains, “On the basis of present day anthropological studies of Africa, we can conclude that it [religion] was

⁶ Michael A. Gomez. “Africans, Religion, and African Religion through the Nineteenth Century.” *Journal of Africana Religions* 1, no. 1 (2013): 78–90. <https://doi.org/10.5325/jafrireli.1.1.0078>.

the cohesive force of society; it provided an interpretation of ultimate reality and supplied meaning for every phase of the life cycle. It had its own theology, ritual, faith, and lifestyle. It was in short a complete religious system.”⁷ When a dissociation from religious traditions, rituals, and practices occurs, the faith of a community or village is fragmented and could eventually be lost. Colonization did just that - using religion as a tool that deeply fractured those who were colonized, and as a result, caused pervasive religious trauma to Africans and the Black diaspora.

What is Religious Trauma?

Alison Downie states, “Religious trauma is a specific form of trauma tied to a lived experience of a given religion, whether or not this experience also includes abuse or violence.”⁸ Trauma is often associated with several mental, physical, emotional, and social determinants but has not been widely associated with religion. Dr. Marlene Winnel, PhD. states, “The study of religious trauma is still very young. I have been doing this work for many years now but the professional and academic world of psychology has not gotten very far with it.”⁹ Downie explains, “Religious trauma occurs within a religious context.”¹⁰ Given that religious trauma is a particular type of trauma, it warrants a specific language, treatment, and rehabilitation. At present, research into religious trauma is relatively new, but there is a growing trend of research that can assist mental health clinicians and draws on the knowledge of ministers, theologians, and those with lived experiences to contribute to this scholarship. Unfortunately, there is a notable

⁷ Preston N. Williams, “Black Church Origins, History, Present Dilemmas,” *Andover Newton Quarterly* 9, no. 2 (1968): 113

⁸ Alison Downie, “Christian Shame and Religious Trauma,” *Religions* 13, no. 10 (2022):9

⁹ <https://www.journeyfree.org/review-of-religious-trauma-syndrome/>

¹⁰ *Ibid.*, 9

lack of extensive research and scholarship on religious trauma, with existing studies primarily driven by white academic discourse. Marlene Winell, a leading scholar in the field of religious trauma, provides a place to better understand how religious trauma has impacted people of color across generations. Coining the term ‘Religious Trauma Syndrome,’ Winell states:

Religious Trauma Syndrome [RTS] is the condition experienced by people who are struggling with leaving an authoritarian, dogmatic religion and coping with the damage of indoctrination. They may be going through the shattering of a personally meaningful faith and/or breaking away from a controlling community and lifestyle. RTS is a function of both the chronic abuses of harmful religion and the impact of severing one’s connection with one’s faith.¹¹

Winell’s definition is specific in its intent, showing how religion unjustly treats (and traumatizes) native people differently from their white counterparts. For example, white colonialists in Africa often cited the idea of the “white man’s burden,”¹² a term popularized by Rudyard Kipling’s poem of the same name, to morally justify imperialist expansion. The philosophy underpinning the concept of the ‘white man’s burden’ consisted of the “Three C’s of Colonialism: Civilization, Christianity, and Commerce.”¹³ Europeans crafted ideologies that conditioned Black people to believe that they needed “saving” and “civilization,” indoctrinating them that “reason” should be developed “not only in the constitutional, political, and administrative domains, but in the moral, religious, and intellectual spheres.”¹⁴ As a result, Black people were dehumanized into believing we needed to become something better than what we already were.

¹¹ <https://www.journeyfree.org/rts/>

¹² <https://historymatters.gmu.edu/d/5478/>

¹³ “The Philosophy of Colonialism: Civilization, Christianity, and Commerce,” Violence in Twentieth Century Africa, accessed March 14, 2023, <https://scholarblogs.emory.edu/violenceinafrica/sample-page/the-philosophy-of-colonialism-civilization-christianity-and-commerce/>.

¹⁴ Ibid.

The legacy of these primitive, dehumanizing ideas remains deeply seated in the soul of much of the Black African diaspora. Additionally, many Black Christians remain committed to a colonized religion that never considered any aspects of our wellbeing. In the mind of the colonizer, the Euro-Christian conversion of enslaved Africans mollified, and even justified, the commodification of the Black body. Eurocentric Christianity thought the Black body savage and in need of redemption. The controlled and subjugated Black Christian mind was taught to see itself similarly. The mentality of the oppressor often became perceived as truth in the mind of the oppressed. In turn, today's Black Christians often look at other groups—not like them—as in need of Christian civilization and redemption. These same signs and symptoms of colonized Christianity remain pervasively and aggressively at work in and by those who were unjustly made victims of such treacherous work, perpetuating a sense of alienation and existential uncertainty. Every week, Black people sit physically amongst their very own communities in the pews of their churches, while being mentally disconnected from both self and community. The communal-minded Zulu phrase, “Ubuntu—‘I am, because you are’” has long left the souls of Black folks and Black faith. In the past, there was no separatism. This is not to suggest that African culture did not have its problems prior to colonization. However, it is to assert that the impact of colonialism still yokes the Black soul which in turn impacts Black faith communities.

Because of religious colonialism, it is extremely difficult for Black faith communities to understand what true justice is. Historically, religious colonialism was a method by which colonizers were able to destroy indigenous nations, cultures, and communities. Spiritual and cultural practices that were antithetical to the constructed

Christian identity were judged problematic and in need of change. Additionally, colonizers used religion as a tool and source of mental and spiritual slavery, which in turn compounded the religious trauma the colonized and enslaved experienced.

However, I firmly believe that any meaningful discussion must begin with introspection. I am a Black woman of Black traditional, southern faith. I am a descendant of the Black Southern church. This faith is complex. It was born out of necessity for our sacred care. The *"Invisible Church"* of 'hush harbors' was the birthplace of the Southern Black church. This space is filled with much celebration, jubilation, sorrow, pain, depth, and identity-making. But it is important to name what lurks in the shadows and corners of most Black souls of the African diaspora. This journey ultimately begins with the self and will lead back to the collective. Before I can address collective Black religious trauma, I had to first name and continue to address my own. As a Black, queer woman of the Black church, it has been difficult to both love and critique the structure that formed me and my ancestors. My personal healing journey has revealed how necessary it is to name the things that have harmed the Black community, personally and collectively. Part of the personal and collective trauma response was to condition us to believe that ancestral trauma is a thing of the past which really has no bearing on us in the present at all. When I began to address religious trauma in my life, it fostered empathy with and for my ancestors whose faith was shaped in multiple ways by many influences - some of which were sacred and profound and some which, unfortunately, were not.

It is important to understand how colonization affected our ancestors' spirituality. Their spirituality was informed both by divine strength and trauma. It was and is their spiritual DNA that empowered me and many others who take this journey to confront the

religious trauma that greatly impacted our lives. I would like to name this religious trauma: Black religious trauma. *Black Religious Trauma - trauma shaped by religion and race.*

The Evolution of Black Religious Trauma:

The Black church has burdened itself with owning and accepting religious practices and ideologies that were psychologically, emotionally, and spiritually abusive and violent to the Black psyche. Preston N. Williams states,

”The nature of slavery . . . completely disrupted [the indigenous] religious system. The slave was deprived not only of freedom, dignity, and property; he was also deprived of his gods. In this strange land his gods no longer had any power, their rituals could not be celebrated, their theology was torn asunder by the persistent and undeniable presence of a new cultural setting and their faith of necessity languished.”¹⁵

Thus, due to the Transatlantic Slave trade, generations have been forced to renounce and physically removed from the markers of their spiritual identities which—in all their guises— were and are fundamental to their ancestral and cultural identity. When people marked by certain spiritual beliefs and practices are subjected to hegemonic heteronormative systems, their beliefs and practices become distorted. The distortion within the Black church shows up in stigma and bias about who is God’s child and who is not. Who is ‘in’ the group and who is ‘out.’ What is right and what is wrong? *Who* is right and *who* is wrong? This distorted belief showed up in me and those who have been marginalized over a long period of time. The same disconnection that our ancestors had to contend with became present in our realities. A distorted religious system told us that our very existence was wrong, that it was *savage* and in need of salvation or redemption. Unhealed collective trauma manifests itself in deeply wounded individuals. Some of our

¹⁵ Williams, “Black Church Origins,” 113.

ancestors, who were enslaved, internalized these teachings, believing themselves to be anything but divine, in need of salvation and redemption. When queerness emerged within them or their loved ones, they swiftly condemned anything they perceived as endangering their beliefs - and their salvation.

Black queerness transcends sexual orientation. To be Black and Christian in the United States of America suggests that someone in our ancestral line queered their spiritual reality and defied the odds of a Christianity that was complicit to their enslavement. Our ancestors were forced into a conversation with a God who upheld the institution of slavery even as they clung to the divine as hope amidst the realities of their enslavement. They had to reconcile a God who oppressed and upheld oppression with a God whom they experienced as caring for them within their oppression. They alchemized a God on the souls who sought to kill their existence and humanity. This is the same God that deeply loves the queer soul in all forms and realities.

Black Church's Historical Bias to Queerness:

When did the institution of the Black church become antithetical to difference? The origin of the institution of the Black church has always been centered in protest. Our protest came with us to the shores of America. Inherently, there was a knowing and understanding that the God that was being placed before us was not the God that we knew inherently. Therefore, our ancestors curated intentional space for the collective community, which in turn became a "clearing" for the community, indifferent to obvious differences. This is seen clearly in the film version of Toni Morrison's *Beloved*, wherein Baby Suggs curated intentional space for the Black body to heal and restore itself from the abuse inflicted at the plantation. To be part of this space was risky, yet it served as a

site of resistance and protest for Black people to reclaim their native communal traditions. This gathering also underscored the deep resistance to the enslavement imposed upon them. It is evidence that enslaved people were at deep odds with the enslavement that was exacted upon them.

Is it safe to say that to be awake to and fully aware of one's Blackness is to be queer? I believe this is a safe assertion based upon bell hooks definition of queer. Moreover, queerness is not new to the Black community. Over time, and for no clear reason, a contentious relationship arose between normative society and those who displayed obvious differences and were unafraid to push the margins of the status quo of oppression that was placed upon Black people. Resistance against white oppression was fraught with risks. As a result, collective religious homogeneity arose as a trauma response.

To see that *difference* has historically been made to conform to norms, often willfully and brutally imposed, has provided me insight for the years that I wrestled with my queerness and identity, particularly how my relationship with God contributed to part of an identity that had been judged "non-conforming." As a young girl, I was keenly aware of my *difference*, although I did not understand and could not place my finger on my unique *differences*. The one place that difference manifested most prominently was through my queerness. At the time, I did not understand what queerness was, other than having an attraction to the same gender. However, embracing the Womanism defined by Alice Walker, which advocates for "Black women [to be] deeply committed to the wholeness and well-being of all of humanity, male and female,"¹⁶ I now recognize the

¹⁶ Robert Longley, "Womanist: Definition and Examples," ThoughtCo., September 11, 2020, <https://www.thoughtco.com/womanist-feminism-definition-3528993>

Womanish girl that I was to be one that was shaped by women who embodied Womanism and who was surrounded by those who knew what it meant to be womanist. Surrounded by individuals who understood the essence of Womanism, I grew up in an environment where queerness extended beyond mere sexual orientation. I was oriented to resist, shaped by robust, magnetic, charming, appealing, and deeply spiritual women who fearlessly traversed paths others feared to tread. This immediately placed me in the margins of my own community. Difference is observed and shunned in the Black church. This is most obviously witnessed through the lives of gay men in the Black church, who are often the most courageous, expressing themselves in the music department or other creative church ministries. However, like women, gay men are forced to separate, or even deny, parts of themselves as a means of survival in the Black church community.

bell hooks defines queer as “not as being about who you’re having sex with [though that can be a dimension of it]; but queer as being about the self that is at odds with everything around it and has to invent, create and find a place to speak and to thrive and to live.”¹⁷ Black women embody more queerness than many would ever admit. If they did not, hegemonic religious systems would have overtaken the collective community. By this definition alone, I believe that I am able to define Black women as unequivocally queer, beyond the notion of sexual orientation. Black women are the epicenter of the Black church and community, even while being denied positions of power within these institutions. They have no choice but to be at odds with the structures and systems that oppress and silence them. The positioning of this was personified from

¹⁷<https://www.goodreads.com/quotes/11193993-queer-not-as-being-about-who-you-re-having-sex-with>

the Usher Board to the Mothers Board. These Black queer women changed the trajectory of the Black church.

Nonetheless, it is important to note that Black women's queerness expressed in sexuality was not visible in ways similar to Black gay men. Growing up, if there were Black gay women within the congregation, we never knew of or acknowledged them. This suggests that their dance of brilliance and oppression was powerful. Black gay women in the church knew how to survive in a structure that placed no value on them at all. Regardless of sexual preference and identity, they were forced to conceal their queerness by any means necessary. Without any other gay, queer women in the Black church to serve as an example for me, I was indirectly taught to be silent, to be invisible, and to be quiet about who and what you are, conforming to hyper heteronormativity at any cost. Now that my understanding has evolved, I think about the blank stares and harsh looks of the elders I experienced in my youth. No doubt I was "marked" in their eyes. I was marked with the "venom" of queerness. It is easy to believe that queerness is about sexuality, but it is, as bell hooks points out, in fact to be at odds with everything and everyone around you. As a child, I experienced this. My personal experience supports my framework and amplifies why the marginalization of women, LGBTQIA+, and those living with HIV must be properly advocated for within the Black church. To live in oppressive silence in faith communities has become a learned behavior as a means of survival.

In many ways, I did everything within my power to conceal my identity. Although, at times, I also thrived because of my difference. It made me feel special in a unique yet odd and disconcerting way (which is, in fact, the definition of queerness). I

was fueled by a persistent discomfort, a sense of discord that resonated not only within myself but among others as well. Yet, fear shackled our tongues, binding us in silence. Therefore, our rebellion started manifesting in nebulous ways. The dogma, the confines of religion, and the unspoken societal rules burdened our bodies and souls every day, but we were taught to endure the silence, endure the repression, suppression, and oppression of who we truly were. In Dr. Melva Sampson's sermon, "Rekindle the Gift" she astutely asserts, "Conformity is a trauma response!" If we dare to admit this, then we recognize that such conformity is not just a queer issue, but a moral issue for Black people as a whole. The over-policing of morality forces queer persons like myself into fractured, broken relationships with God, self, and others. It was not until later in life, after acknowledging my complex identity, that I realized that suicidal ideation had been present with me for a great portion of my life. I recall asking God to take me off this earth before I returned to homosexuality. As Renee Skedel notes, this is passive suicide: "Passive suicidal ideation describes when someone has thoughts about death or a desire for death, but they are not making plans to harm themselves. While passive, these thoughts are still dangerous and coping can be difficult."¹⁸ Self-hatred fueled this passive suicide ideation, and such self-hatred was in large measure a conditioned response, the result of an instilled belief that God would rather I die than to be a continual abomination and disappointment as a child of God. This weight, shame and condemnation has always been a part of my journey. Yet, as a result of addressing my own religious trauma, my lived experience, processing and healing has provided me the necessary tools to address

¹⁸ Renee Skedel, "Passive Suicidal Ideation: Definition, Treatments, & How to Get Help," Choosing Therapy, January 18, 2022, <https://www.choosingtherapy.com/passive-suicidal-ideation/>

the roots of my religious trauma. It's evident that this trauma is not merely personal but collective, affecting many others within our community as well.

Collectively Healing Black Women, Including those Living with HIV:

Through this thesis project, I utilize research and my own unfolding beliefs to recall and reclaim the concept of village and community that Black people are instinctually acclimated to, to do the much-needed work for the collective community, particularly for Black women who are living with HIV. Sobonfu Some states, “Community is the spirit, the guiding light of the tribe, whereby people come together in order to fulfill a specific purpose, to help others fulfill their purpose, and to take care of one another.”¹⁹ This West African principle can and will serve as a guiding light for the Black church returning home to its core spiritual identity. The historical and present Black church is the epicenter of Black Christianity and community; unfortunately it has been shaped by ideologies that permeate Eurocentric theology. This critique is not intended to blame Black Christianity, but my critique does aim to highlight the unfortunate outcomes of involuntary and shame-based conversion. Williams states that there is now a schism in many Black houses of faith which are discriminating, excluding, and marginalizing anyone who does not fall in line with a Eurocentric Christian framework. Therefore, we have moved away from the center of who and what we once were—that is, a community who live in Ubuntu (a Nguni Bantu term meaning “I am because we are”).²⁰

¹⁹ Sobonfu Some, *The Spirit of Intimacy: Ancient Teachings in the Ways of Relationships* (New York: William Morrow and Co., 1999), page number?.

²⁰ <https://www.thecollector.com/ubuntu-philosophy-introduction/>

However, I strive to show how important it is for Black churches to curate intentional space and an environment to care for the collective, most particularly for the souls of Black women, a group historically marginalized. Black women's existence has always been essential for the vitality of their communities. Black women remain a source of life and inspiration for the collective Black community, particularly the Black church. Black women have historically been instrumental in the development of rituals and traditions that anchor past, present, and future generations. They remain integral in what is known as Black Christianity, Black Church, religion and spirituality. Rosalyn F.T.

Murphy states:

In 2005, while women represented 62 per cent of all regular church-goers in the Church of England, they represented only 12 percent of all ordained clergy. When ethnicity is factored in the figure of ordained minority females the percentage drops to less than 2 per cent. This stands in comparison to figures which suggest that nearly three-quarters of the Anglican Communion worldwide are Black or people of color (47 million). Further, should the trend of female church-goers hold, in that they surpass male church-goers, then we can conclude that the average Anglican worldwide is Black and female.²¹

This is significant to understanding that the development and work in what we know as the church has often left Black women invisible, unseen, and muted. Black women were and are integral to building faith structures that uplift the Black spirit and soul. Black women have been the sacrificial lamb for most faith communities. To be Black, to be a woman, is not a monolith, but it is to suggest that there can be a silver lining in Black women's wellbeing if the Black church is able and willing to make the last, first.

²¹ Rosalyn F.T. Murphy, "Gender Legacies. Black women in the Early Church—An Ethno-Historical Reconstruction," *Black Theology* 7, no. 1 (2009): 12

Understanding the roots of the Black Church and the legacy of colonialism, slavery, and the imposition of conformity is an important but difficult endeavor. It is also crucial to addressing issues of identity and sexuality as well as a major epidemic within the Black community: HIV. HIV remains an epidemic within the Black community, and accompanying it is rampant stigmatization—of both Black men and Black women. My hope is to address the source of the stigma, addressing Black women, specifically, in order to curate healing spaces for Black women living with HIV, their families, and their faith communities. I believe that healthy faith communities should have the capacity to hold all of one's truth. Ultimately, these curated spaces that we know as women's ministries should have the capacity to uplift, educate, advocate and bring awareness for those who identify as women, in particular for Black heterosexual women who are one of the highest groups of women living with HIV.

Some years back, while reading *In Search of our Mother's Garden* by Alice Walker, I became keenly aware of trauma. Much of the trauma that I bumped against, I soon realized was more than mine; it was a shared burden. Understanding the collective nature of this trauma gave me a greater ability to see trauma for what it is. Our ancestors lacked the language to fully understand and communicate the depth of their struggles and experience. Religious language employing terms such as "sin," "generational sin," and "curses" has been standard in the Church, but unfortunately such language places the blame on the victim rather than on the systems of oppression that have been unduly placed upon the Black body. This victim-blaming language leads to the shame and paralysis that exists in the minds, psyche, and bones of the Black body, as well as the communities in which Black bodies move.

HIV within the Black community continues as an epidemic that many institutions have attempted to solve and rectify. Unfortunately, because HIV has been so heavily stigmatized, the LGBTQIA+ community has been negatively targeted, as well as sex workers and intravenous drug users. Within the Church, stigma against HIV and people with HIV is also rampant, and the command to love seems to have been forgotten. Thus, this state of spiritual paralysis must be identified and addressed.

Black women occupying leadership positions in the Church have often been deeply revered within the collective community. The fact that many were either married or occupied the status of single or widowed women made them no apparent threat at all. However, Black women in the Church were and are forced to repress all aspects of their sensuality and sexuality as the mechanism of repression is taught relatively early to girls and women. Additionally, another mechanism of intergenerational Black religious trauma that is taught at an early age is what God likes and what God does not like. We profess and we often express the deep and abiding love of God but are afraid to admit that we never believe we are worthy of love that was being preached.

Therefore, it is important that we provide education and awareness to Black faith communities with women's ministries in mind. In developing my research related to religious trauma, I hope to provide insight to faith leaders which emphasizes their moral responsibility to understand the necessity and power of Sankofa. The term "Sankofa" comes from the Akan tribe in Ghana. The literal translation of the word and the symbol is *'it is not taboo to fetch what is at risk of being left behind.'*²² In other words, we need to retrieve the wisdom, knowledge, and lessons of the past in order to move forward with

²² "The Power of Sankofa: Know History," Carter G. Woodson Center, Berea College, accessed March 14, 2023, <https://www.berea.edu/cgwc/the-power-of-sankofa/>

strength and understanding. Sankofa reminds us of the importance of honoring our history and ancestors, recognizing that our present and future are deeply connected.

From my personal lived experience as a Black queer woman who has been forced to hide in the closet for the greatest portion of my life, I am committed to helping women living with HIV and collective trauma.

Black Religious Trauma: Healing our Faith through Conventional and NonConventional Healing Modalities

As previously mentioned, the principle of Sankofa asserts “it is not taboo to fetch what is at risk of being left behind.” In the Black church, there are parts of ourselves that we must reclaim. I do not dare to suggest that a Black person should not become or identify as Christian, but I do believe it is important that Black Christians should know their past and the historical context of their faith. In other words, achieving Black liberation requires achieving freedom from practices, ideologies, and dogmas that condition the Black mind to hate itself. In order to do this, this project will invite women’s ministries to become radical healing spaces to heal intergenerational trauma in an informed and mindful way. Addressing collective trauma through and in the spirit of Ubuntu, “I am, because you are,” will provide the necessary capacity for women living with HIV to be a part of this radical healing space that will call them from the shadows that they have been cast in.

Romans 12:1-2 (NRSV) states, “I appeal to you therefore, brothers and sisters, on the basis of God’s mercy, to present your bodies as a living sacrifice, holy and acceptable to God, which is your reasonable act of worship. Do not be conformed to this age, but be

transformed by the renewing of the mind, so that you may discern what is the will of God—what is good and acceptable and perfect.” Traditional Christianity uses such texts to call us into a place of purity and sanctification and to sacrifice our living bodies on the altar of God. In sacrificing our bodies, however, we sacrifice ourselves, a way of knowing and understanding that is encoded in our DNA. Our bodies need to be reclaimed. In order to heal them, we must call them back from the damnation. The principle of Sankofa teaches us to go and *fetch that which is at risk of being left behind*. Our bodies are the temple that houses our souls that may be at risk for being left behind. This letter, amongst other of Paul’s teachings, can be identified as *paraenesis*, “a species of moral exhortation that encourages people to continue in a particular way of life. The purpose of paraenesis, then, is not so much to provide new instruction as it is to encourage people to do what they already know they ought to do.”²³ The notion of Sankofa falls within the ideology of what paraenesis encourages people to do. In the reclamation of the body, we are then empowered to go back and fetch ourselves, our souls, to help women to remember what they already know. In remembering, our collective minds and ways of being will nurture healing to Black women. Moreover, through native teachings we are able to grapple with what liberated Christianity calls us to do. My research will never suggest that Christianity is not the religion for Black people, but I do suggest that as restorative practitioners, we are responsible for reconnecting our holistic paradigms to native practices that have the power to heal ancestral and future lineages.

²³ Frank J. Matera, *Romans, Paideia: Commentaries on the New Testament* (Grand Rapids, MI: Baker Academic, 2010), 283.

Re-introducing and reclaiming African and Black diaspora traditions and spiritual practices that truly belong to Black spirituality is essential—for the present, the future, and even for a better understanding of the past. Africans and Black diasporans must come home to themselves; this will, in turn, return them home spiritually, after centuries of disconnection. Unfortunately, there are those who are skeptical and afraid of this powerful spiritual movement.

Providing holistic awareness that will address collective trauma for Black women will be paramount in the present healing and wellbeing of our communities. By offering transformative, healing modules that address the individual and collective trauma of Black women can bring both joy and pain. I would like to embrace both the joy and pain but excavate parts of ourselves that we were conditioned to bury and hide in the name of being good standing Christian women. Before Black women can be anything else to others, we must step back, care and rehabilitate ourselves and ancestors into lifegiving prosperity and health.

Questions to Use in Healing Modules:

Healing work:

- What is trauma?
- What is religious trauma?
- What impact did such trauma have on our spiritual psyche and our ways of being and historically understanding?
- What is healing?
- Why is healing important? Why is intergenerational trauma?
- How do you heal generational trauma?

- What strategies should we use to heal trauma?
- Introduce different healing modalities to do this:

It is important to provide a curriculum that will serve as a guide for Black women's ministries to utilize to assist in creating an intentional, radical healing space for women to heal. This curriculum will introduce traditional and non traditional healing modalities supported by research that reveals that such practices are highly beneficial. The aim of this curriculum is to aid those over women's ministries to do the collective work with women, particularly those living with HIV.

In order to do this, this curriculum will include:

1. Sacred teachings from texts other than the Bible, sacred African centered principles, and indigenous practices (i.e. Ancestor veneration - bringing well elevated ancestors on the journey, understanding ceremony and ritual)
2. Introduction to the methodology of the healing circle and why it is a powerful tool to assist Black women to unpack trauma.
3. HIV faith leader toolkit that will help ministry group leaders to include safe, hospitable language.
4. Mental health awareness - understanding why caring for one's mental health is important in this journey.
5. Somatic restorative practices
6. Naturopathic integrative medicine - understanding our bodies beyond Western traditional medicine. (Chakra alignment)
7. Nutrition - eating high vibrational foods to heal our bodies holistically.

8. Mindfulness and meditation
9. Sound therapy
10. Dance therapy
11. Art therapy.

In closing, it is important to understand the premise of this restorative work and the building of this curriculum is and will be upheld with and by Nguzo Saba, the seven principles of Kwanzaa.

- What is a Nguzo Saba?

1. ***“Umoja (Unity)***

*To strive for and maintain unity in the family, community, nation and race.”*²⁴

2. ***“Kujichagulia (Self-Determination)***

*To define ourselves, name ourselves, create for ourselves and speak for ourselves.”*²⁵

3. ***Ujima (Collective Work and Responsibility)***

*To build and maintain our community together and make our brother's and sister's problems our problems and to solve them together.*²⁶

4. ***Ujamaa (Cooperative Economics)***

*To build and maintain our own stores, shops and other businesses and to profit from them together.*²⁷

5. ***Nia (Purpose)***

²⁴ <https://aabc.com/content.php?title=Nguzo+Saba%3A+The+Seven+Principles+of+Kwanzaa>

²⁵ Ibid.

²⁶ Ibid.

²⁷ Ibid.

To make our collective vocation the building and developing of our community in order to restore our people to their traditional greatness.²⁸

6. **Kuumba** (*Creativity*)

To always do as much as we can, in the way we can, in order to leave our community more beautiful and beneficial than we inherited it.²⁹

7. **Imani** (*Faith*)

To believe with all our heart in our people, our parents, our teachers, our leaders and the righteousness and victory of our struggle.³⁰

This final principle of *Imani* is the glue that will hold us together now and forever. This project will heal and continue to uplift Black faith that has been the anchor to our soul in the midst of oppression in this country. Our reclaimed faith will restore us to rituals, ceremonies, and practices that will continue to strengthen our faith in this fight against systemic oppression and the stigma towards others that it created. Black faith needs to be believed in again. The Black church is not the gatekeeper to Black faith but it is a place that embodies the resilience and strength of our faith.

In closing, the seven principles of Kwanzaa must be gradually but intentionally grafted into the fabrication of what holds Black people, yet along Black women together. HIV remains an epidemic and a crisis. Highlighting how Black women are unjustly advocated for in this work is a goal that I would like to help Black faith communities to better understand and make the commitment to collectively do the work.

²⁸ Ibid.

²⁹ Ibid.

³⁰ Ibid.

Chapter 1: HIV in the Black Community

Addressing the Historical Framework that racialized the virus:

In regard to the issue of HIV, we can see that this virus has disproportionately impacted the Black community for a number of reasons. HIV remains a persistent global epidemic within the Black community, particularly within the American South. According to the Kaiser Family Foundation, “Black Americans have been disproportionately affected by HIV/AIDS since the epidemic’s beginning, and that disparity has deepened over time.”³¹ The virus has been stabilized within most racial/ethnic communities with the notable exception of the Black community. This enduring crisis is perpetuated by various economic and cultural disparities, including those related to race, class, and gender. Race stands out as a significant determinant of social and health inequities faced by Black individuals living with HIV. According to the CDC,

“African Americans, more than any other race, have the highest rates of HIV infection in the nation. Although just 14% of the U.S. population, blacks account for nearly half of those living and dying with HIV and AIDS. Among African Americans, gay and bisexual men are the most affected, followed by heterosexual women. AIDS is the third leading cause of death among black women aged 25–34 and 35–44 and among black men aged 35–44*”³²

These alarming statistics underscore the worrying disparity in HIV infection rates among African Americans compared to other racial groups in the United States, highlighting the urgent need for targeted interventions and support.

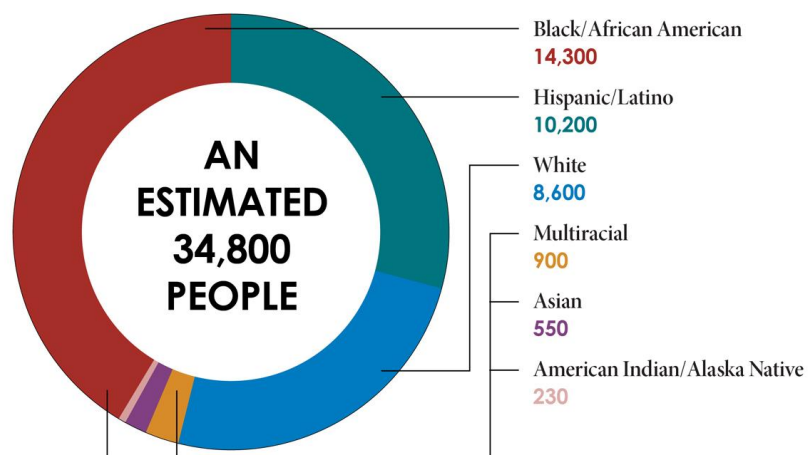
³¹ “Black Americans and HIV/AIDS: The Basics,” KFF, February 7, 2020, <https://www.kff.org/hivaids/fact-sheet/black-americans-and-hivaids-the-basics/>

³² <https://www.cdc.gov/nchhstp/newsroom/docs/timeline-30years-hiv-african-american-community-508.pdf>

From its earliest detection in the United States, Black communities have consistently been impacted by HIV at disproportionate rates. The impact of HIV on Black community is a social, racial, and health justice concern that warrants comprehensive, intersectional attention across socio-political, religious, healthcare domains.

MORE THAN 40% OF NEW HIV INFECTIONS IN THE UNITED STATES OCCUR AMONG BLACK PEOPLE

NEW HIV INFECTIONS IN THE U.S., BY RACE/ETHNICITY, 2019



*The HIV incidence estimate for Native Hawaiian/other Pacific Islanders was statistically unreliable, and therefore not included

One factor contributing to the disproportionate harm of HIV on the black community is systemic racism which creates barriers for Black persons living with HIV. This growing group needs advocacy, awareness, and education about what the virus is and ways to manage an HIV diagnosis. Stigma and bias against persons living with HIV often delays their access to holistic care and wellbeing. Before the stigma and bias can be addressed, it is vital to understand social determinants of health and their implications on the Black community, in particular those living with HIV. The Centers for Disease Control and Prevention explains social determinants of health in the following excerpt:

“Social determinants of health (SDOH) are the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems. Centers for Disease Control and Prevention (CDC) has adopted this SDOH definition from the [World Health Organization](#)”³³

Consequently, due to systemic poverty, health inequity related to persons living with HIV is and has become increasingly pervasive. The persistence of HIV as an epidemic within the Black community, particularly in the South, defies common assumptions and false narratives that often burden Black individuals living with HIV. Historically, the alarming fatality of the virus and death rate that swept the United States obscured the fact that Black persons living with HIV were not receiving adequate or equitable health care. Health inequities and social determinants affecting the Black community can be traced back to the Transatlantic slave trade and persist to the present day. Historically, the Black body is no stranger to dehumanization. Movements spanning from Emancipation, resistance against Jim Crow laws, to the Civil Rights era have vigorously fought to advance the rights of the Black community in the United States. Historical and systemic poverty has impacted equitable healthcare for the Black community. This legacy of inequality persists today and has had crippling effects on the Black community, particular in the context of the HIV epidemic.

In 2018, The National Library of Medicine reported

Table 1

³³ <https://www.cdc.gov/about/sdoh/index.html>

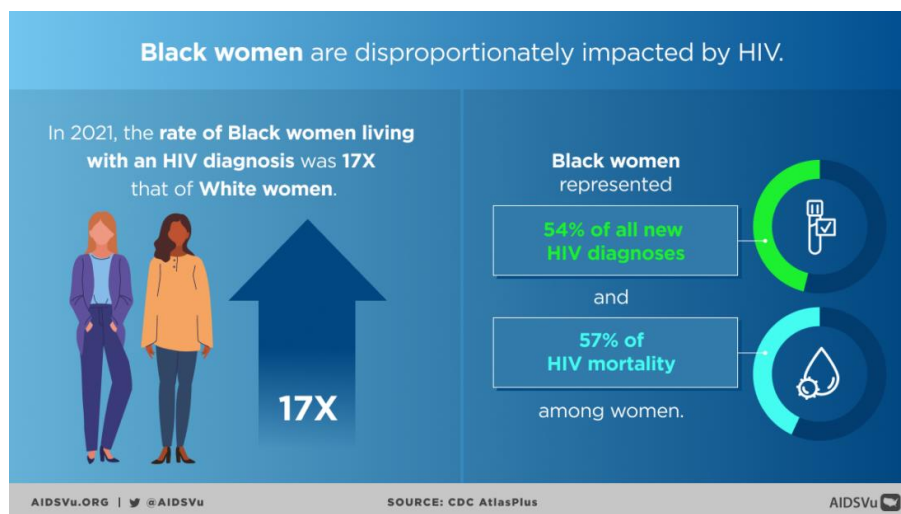
Reasons given for Racial/Ethnic Disparities in HIV/AIDS and Health Care in the United States by Focus Group Participants.

	Percent
Race	8
	5.6
Health Insurance	8
	3.0
Unequal access to quality health care facilities	7
	5.0
Poverty	7
	7.0
Not enough medical practitioners in black communities	8
	5.0
Unhealthy eating habits	8
	0.0
Dieting, Exercise, and Lifestyle Choices	8
	8.0
Environmental Racism	5
	6.7
Under-Representation of Blacks in Health Care Fields	8
	5.0
Unemployment	7
	3.3 ³⁴

This table reflects the complex web of factors contributing to racial and ethnic disparities in HIV/AIDS healthcare, encompassing systemic inequalities, socioeconomic challenges, and individual lifestyle choices that are highly reflective of systemic and institutional racism.

³⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9930484/>

HIV and Black Women:



As demonstrated in the above infographic, Black women are disproportionately impacted by HIV. Amongst women living with HIV, Black women are leading in the number of new diagnoses with Sexually Transmitted Infections. AIDSvU reported, “Black women continue to be disproportionately impacted by HIV, **accounting for 54% of new HIV infections in U.S. women**, despite making up less than 15% of the female population. Among Black women, 91% of new HIV infections were attributed to heterosexual contact. The HIV infection rate among Black women was the highest compared to women of all other races and ethnicities.”³⁵

Unfortunately, Black women living with HIV are experiencing levels of institutional discrimination. Due to a lack of education and awareness, one automatically assumes that HIV diagnosis is a result of high risk behaviors that warranted their diagnosis. Racism is a driving factor to the leading causes of social and health disparities that are highly impacting Black women. Medical distrust, gender inequity, equitable

³⁵ <https://aidsvu.org/resources/deeper-look-hiv-in-black-communities/>

access to healthcare, poverty, substance abuse, drug abuse are contributing factors to this matter.

Black women deserve the same advocacy that other groups who are living with virus receive. Initial efforts for HIV advocacy and funding have primarily targeted men having sex with men. The JAMA network reported, “Most of the recent biomedical and non biomedical HIV prevention efforts in the US have focused on men who have sex with men and transgender women, groups who have the highest new HIV and STI diagnosis rates in this country, not cisgender women, despite their ongoing disease burden.”³⁶ Black women living with the virus have been marginalized in HIV advocacy, adequate support, and care. The time is past due for Black women to be prioritized while ending the HIV epidemic.

Chapter 2: Black Faith Communities Responsibility Ending the HIV Epidemic:
Re-Constructing, Reclaiming the Revival of the Invisible Church, Hush Harbor

Addressing HIV in the Black South, in the heart of the Bible Belt, is a major step to addressing the growing crisis. Given that faith and faith communities remain at the epicenter of the Black community, particularly in the American South, the Black church can play a major role in addressing HIV and the stigma around HIV. However, there are challenges for the collective Black community if the Black church refuses to address the primitive racist, sexist, homophobic reasons that prevent the Black church from properly educating, preventing, bringing awareness and advocacy of HIV stigma. In order to

³⁶ <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2778348>

facilitate health and healing, the Black faith community needs to hark back to its roots in the ‘invisible church’ or ‘hush harbor.’

The invisible church - the hush harbor - is the place where the Black spirit and soul could not be broken. Hush harbors are defined as,

“Hush harbors, sometimes also referred to as brush harbors or bush arbors, were the secret meeting places of enslaved Africans. These sacred meeting places were usually nestled in wooded areas cleared either by nature or by the hands of my enslaved ancestors. These meeting places were buried deep in the woods out of the sight and earshot of their slave masters and were our places of worship.

It was in these spaces that enslaved Africans would steal away so that they might be free to worship, authentically. In these spaces, they were free to express African Christian worship practices and to show up authentically as who God created them to be. In the hush harbors, religious freedoms began to come alive for enslaved Africans.”³⁷

Hush harbors were spaces that anointed the Black body each and every day that it was downtrodden from the dehumanizing, volatile acts of slavery that was heavily influenced and established through colonized Christianity. European colonizers made a global endeavor to Christianize Black and Brown bodies. Colonizers scripted and created a narrative about BIPOC (Black, Indigenous, and People of Color) bodies with an otheredness that European colonizers felt was in need of salvific redemption. This was their justification for enslaving the African.

“Slave Religion: The 'Invisible Institution’ in the Antebellum South explains,

“From the very beginning the Atlantic slave trade, conversion of the slaves to Christianity was viewed by the emerging nations of Western Christendom as a justification for enslavement of Africans. Gomes Eannes De Azurara, a chronicler, observed that “the greater benefit” belonged not to the Portuguese adventurers but to the captive Africans. “For though their bodies were now

³⁷ <https://christiancitizen.us/it-was-in-the-clearing-hush-harbors-and-soul-freedom-past-and-present/>

brought into some subjection, that was a small matter in comparison to their souls, which now possess true freedom for evermore.”³⁸

Africans carried their redemption song with them, it was belted from the soul of the enslaved, and most expressed while holding space in the Invisible Institution. The Invisible Institution - the hush harbor - was a holistic gathering that relieved the enslaved. It was the place that the African could fully *be*. It was the place that was most reflective of their native land and was the container for their native spiritual practices. It was the place where religious divisiveness could not exist. Fear for their lives daily gripped them. Raboteau states, “Slaves faced severe punishment if caught attending secret prayer meetings.”³⁹ The Invisible Institution or hush harbor provided the space for the captives to be set free. Praise, worship, dance, ritual, ceremony - all sacred rites were upheld and passed down to present and future generations. This meeting place was sacred and had to be congregated in strict silence. Raboteau states. “Slaves devised several techniques to avoid detection of their meetings. One practice was to meet in secluded places - woods, gullies, ravines, and thickets (aptly called “hush harbors”).”⁴⁰ For the enslaved was a collective. These places are conceptual historical landmarks that birthed the powerful institution and structure that is known as the Southern Black church. Black spirituality looks to their places of faith as space that supports their overall wellbeing.

³⁸ Albert J. Raboteau. 2004. *Slave Religion: The “Invisible Institution” in the Antebellum South*. Vol. Updated ed. Oxford: Oxford University Press.
<https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=nlebk&AN=179928&site=eds-live&scope=site>.

³⁹ Albert J. Raboteau. 2004. *Slave Religion: The “Invisible Institution” in the Antebellum South*. Vol. Updated ed. Oxford: Oxford University Press.
<https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=nlebk&AN=179928&site=eds-live&scope=site>.

⁴⁰ Albert J. Raboteau. 2004. *Slave Religion: The “Invisible Institution” in the Antebellum South*. Vol. Updated ed. Oxford: Oxford University Press.
<https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=nlebk&AN=179928&site=eds-live&scope=site>.

This historically has been the case. *The Negro's Church*, Benjamin Mays and Joseph Nicholson argued that “not finding the opportunity that is given to members of other racial groups in civic and political life, in business enterprises and social agencies, the Negro through the years has turned to the church for self-expression, recognition, and leadership.”⁴¹

The Invisible Institution which became the Black church remains a sacred space for Black folk to continue to be radical with their healing, thought, spirituality, education, and culture. Black people came to the United States with a profound spirituality and depth of soul that inclined them to be deeply attuned to the rhythms and rumblings of the earth. The Invisible Institution held space for slave revolts and rebellions to be devised and executed. It is the place that uplifted the creation that awaited the manifestations of liberation for the children of God. Reclaiming the essence of what the Invisible Institution created is essential to the vitality of Black spirituality and liberation for the Black soul. Our spirituality forms our faith, and our faith influences how we engage with one another. Unfortunately, as a result of assimilation and colonization, faith became a catalyst of division. Optimistically, African diasporans can realize and reclaim our power for the posterity of Black faith and spirituality. My research is invested in reclaiming the essence of the Invisible Institution to do this.

There is significance in how Diasporans convened in hush harbors, showcasing radical collective unity and advocacy. The slave owner deeply despised and feared the power that would erode from the gathering of the enslaved. They instinctively knew this invisible space unleashed a power that led to slave revolts and rebellions. It would be safe

⁴¹ Hayes, John. "Hard, Hard Religion: The Invisible Institution of the New South." *Journal of Southern Religion* 10 (2007): 2

to assume that the enslaved who occupied these sacred spaces had some disagreements but the cry for collective liberation that the Black soul was calling for overcame their differences and ultimately led to their freedom. It is this divine liberation and collective advocacy that Black faith communities must reclaim in order to debunk harmful narratives and theologies that prevents us from collectively standing against the sexism, homophobia, hypermasculinity that marginalized communities are contending with. There are many within the Black church that have become victims of internalized oppression. Oppression from white oppression is what drives the oppression that Black faith leaders and communities attempt to place on those who have been othered. The oppressor that did everything within their power to silence Black liberation, is the same spirit of oppression that has Black women living HIV silenced in their faith communities. These women have been marginalized within their own communities. As a people, we must understand our historical landscape to ensure that we are not reproducing and spewing venom that continues to divide rather than unify. As Black faith leaders, it will be helpful to have historical context that religion has played into Black people's spiritual development. Much of this process has been shaped by spiritual abuse that faith communities should be healing versus exacerbating.

Although HIV stigma needs to be addressed collectively, women's ministries can play an important role in trauma-informed care ministry for Black women and Black trans women who live with HIV. This is especially true in that:

Among all women, Black women account for the largest share of new HIV diagnoses (4,114, or 58% in 2018), and the rate of new diagnoses among Black women (23.1) is 14 times the rate among white women and almost 5 times the rate among Latinas. Black women also accounted for the largest share of women living with an HIV diagnosis at the end of 2017. Although new HIV diagnoses continue to occur disproportionately among Black women, data show a 43%

decrease in new diagnoses for Black women between 2008 and 2018. In 2018, Black women represented about one quarter (26%) of new HIV diagnoses among all Black people – a higher share than Latina women and White women (who represented 12% and 16% of new diagnoses among their respective groups).⁴²

Black women and transwomen are sitting within their faith communities in deafening silence, stigma and shame—largely the result, as I have argued, of historical, generational, and religious trauma. However, the method of Sankofa, with its seven principles of Kwanzaa, can be used to educate Black Southern Christian women in our collective responsibility to curate space for women and transwomen living with HIV and other personal challenges and trauma. It is proven that healing in a community is radically transformative. When a woman is healed, a nation and community can be healed.

The Invisible Institution, the Hush Harbor, the space that Educated the Enslaved:

The invisible institution is the birthplace of the Black Southern church. This space, also referred to as the hush harbor, arose out of necessity to become a safe haven for the collective community. Religion is a domain rife for conflict as it involves deeply held existential beliefs. The evolution of the post Antebellum Black community is reflective of a community of people united to pursue a common good cause: their liberation. This was most exemplified in the Invisible Institution, a space that encouraged the community's moral compass to be driven by the concept of liberation rather than getting caught up in different religious beliefs. The Invisible Institution was representative of many things, education was primary. It was a space that provided instruction about ways to commemorate and practice rituals that were native to them, thereby preserving them. It was a space that conjured the Spirit and revealed great

⁴² Ibid.

revolts. It was a space which threatened white structures of power. This was the space that subverted white hegemony and lessened the grips of white oppression. Colonized Christianity breeds hatred and contempt amongst humankind when people dare to be different. Hush harbors were places that kept family, loved ones, and other members of the beloved community connected to the rituals and practices of the Motherland. It is safe to say that African religious traditions show up all over the world. Despite oppression and displacement, these traditions have followed us to this day and must carry on. It was these places that offered a sense of hope for their humanity.

The Hush Harbors provides the then African community and present Black American community to preserve what is left and must be sustained for future Black generations. Addressing the systemic issues which have been readily set against the Black body in America requires an interfaith/multifaith strategy. The hush harbor was representative of this tolerance of difference - religious intolerance or a reluctance to participate was antithetical to the agenda of Black liberation that ultimately led to Emancipation. To make a difference, we must reclaim such a tolerance in Black faith communities in America and the global community. There are a number of debilitating disparities that are facing the Black community. Both the extended American and global Black community rely on Black faith communities, and vice versa. There exists an interdependence between them which requires the cultivation of intersectionality and mutual understanding.

Reclaiming our faith communities to be agents of change that are highly driven and motivated by education is a tenet of the Principle of Sankofa and Ubuntu (reclaiming Nguzo Saba - all seven principles apply in the reformation of Black faith community).

Ujima (*Collective Work and Responsibility*)

“To build and maintain our community together and make our brother's and sister's problems our problems and to solve them together.”⁴³

Applying the principle of Ujima evokes collective work and responsibility that can galvanize and unify the collective for one common goal for the Black faith community and that is Black liberation. This is not to suggest that there has been no progress towards liberation, however, there must be a remembrance of what Dr. Maya Angelou states, “The truth is, no one of us can be free until everybody's free.” The hush harbor was reflective of this idea. The enslaved had a common goal that superseded their religion. Present Black faith communities are not reflective of that which they derive from. Black liberation for all was the collective vision and relented into it came into manifestation. The current Black church, with particular focus on the Black American southern faith community, has become inundated with white theological frameworks that have wreaked chaos on the Black body in this country.

The hush harbor was a place that offered education of every kind for the enslaved. Elaine B. Richardson and Ronald L. Jackson, II explains how the hush harbors were utilized in multiplicative ways that supported the enslaved. Richardson and Jackson states, “In hush harbors slaves did not only address sacred and esoteric issues. The Hush harbors' spaces enabled enslaved Africans in America to address the secular as well as sacred concerns. Fredrick Douglas taught slaves to read and provided instructions in politics. Nat Turner and Denmark Vesey are believed to have their rebellions in such

⁴³ <https://aalbc.com/tc/topic/2452-ujima/>

spaces.”⁴⁴ It was the place to teach. It was the place that affirmed all aspects of their humanity that were otherwise denied on lands that would allow them to access their freedom. Enslavers feared and refused for the enslaved to be educated. The hush harbor offered access to education that set the course to their liberation and freedom. “The Future is Black: Afro Pessimism, Fugitivity, and Radical Hope in Education” states, “Black people strove toward learning letters (education) in the hush harbors of slave quarters and from stolen glances at words on printed pages. Self-teaching was a form of protest, resistance, and hope (Williams, 2007). Education was enslaved, segregated, and so-called ‘freed Black people’s spark of radical hope as they struggled against social and political death.”⁴⁵

The same education that the hush harbor provided is the same space of liberation and education that Black faith communities must reclaim and return to. Black faith communities have always provided access to credible education and awareness that provokes a cultural competency and curiosity that can assist in ending the HIV epidemic if utilized alongside other health and social determinants. This project aims to work with faith communities to recall healing movements that will educate and increase their capacity for organizational resilience. As a result, this will radically heal the land of the heart, mind, and body of Black congregations to do the work that it is historically known and proved capable of doing. Black faith communities have been instrumental in providing this healing for its members. In the heart of Sankofa, may we return and

⁴⁴ Nunley, Vorris L. "From the harbor to da academic hood: Hush harbors and an African American rhetorical tradition." *African American rhetoric (s): Interdisciplinary perspectives* (2004): 221-241.

⁴⁵ Grant, Carl A. "Radical hope, education and humanity." In *The Future is Black*, pp. 65-71. Routledge, 2020, 65

“fetch” the tenets and principles that will help us to properly and carefully care for one another, in particular for the least of these or those that society has cast down and turned away. May the place that we know to be the epicenter of Black faith and power become one of the key institutions to end the HIV epidemic!

Chapter 3: Healing the African Diaspora, Let the Healing Begin
HEALING CIRCLES - An indigenous collective healing modalities.

Healing circles are a healing modality that has been widely utilized within Indigenous communities. Although healing circles are practiced within diverse race and ethnic groups, it is essential to understand that African centered and indigenous across the globe reserve the cultural right to preserve traditions that are most revered amongst their own. It is important for the healing movement to revere modalities that derive from ancient practices that arise from the ethos of the people. My personal spiritual transformation and journey has been greatly impacted by healing circles. I was led to explore the modality from my personal healing journey. I was in need of a space that could hold all of the truth of who I was and was becoming. As a faith leader, I had a deep understanding that there were parts of myself that were not safe in faith communities. There were times that I shared my truth about things that I genuinely desired help in, things that I believed that I needed salvation and deliverance from. Harmful religious indoctrination did this to me. Unsafe religion begets unsafe people and spaces. Therefore, the things that I secretly struggled were no longer safe to share in my then context. I was unsafe and to share and offer my vulnerabilities.

Consequently, the Transformations Healing Project has become my life’s work and mission in curating open and affirming multi-faith healing spaces with an intentional

focus for Black women to access healing their intergenerational traumas to make room for reception of ancestral wisdom and gifts. The foundation of my work will always prioritize holistic intergenerational healing for Black women. I believe Black women returning to native and indigenous practices are powerful tools for our intergenerational healing. There are practices that would be beneficial to return to. Ebony Janice in “All The Black Girls Are Activists” states, “In order to heal our bloodline forward, we have to ask questions to our elders and our ancestors about the who, what, where, why and how.”⁴⁶ Healing circles are an ancient practice that can serve as a portal to do that. These experiences are opportunities to introduce and connect participants to ancestral veneration. Ancestral veneration is often stigmatized in colonized Christianity. The profound sense of displacement and existential inquiry that is seated within the souls of those of African descent often leaves them confused and unsure of where to start to heal their bloodline. Much of the ancestral and generational trauma of African diasporans originated due to the Transatlantic slave trade due to the dehumanizing and disorienting conditions that were unjustly placed upon them from plantation to plantation. Healing Circles serve as a conduit to recenter Black people, orienting them back to native practices which reflect the concept of the village, talking circles, intentional talk and counsel from the elders. In addition, healing circles serve as an opportunity for soft introductions to ancient non-conventional healing modalities that were primary to the wellbeing of previous generations. They provide an opportunity to return to methods and modalities that were once used but which became stigmatized over time. A return to these practices provides an opportunity for practitioners, like myself, to do the work to engage

⁴⁶ Janice, Ebony “”All The Black Girls Are Activists” Row House Publishing, United States p.105-107.

in decolonizing spiritual practices with traditional Black faith communities. Healing circles in faith context can serve as an entry point and portal to Black women's holistic wellbeing. They provide an opportunity to foster space for education, awareness, and advocacy of spiritual practices that have otherwise been marginalized.

Timothy H. Gailey describes healing circles saying, "Circles in the form used in these examples arose from Native American and First Nations experiences. Their use dates back to long before any living or recorded memory. They are employed in a variety of contexts as divergent as community disagreements, personal relationships, criminal behavior, dysfunctional families, family businesses, workplace issues and substance abuse (including alcoholism)."⁴⁷ The power of word and voice is the vehicle that activates liberation. Women have long been silenced which has inconsequentially deactivated one of their most powerful tools of agency and freedom. The human body is designed to heal itself. Unfortunately, systemic oppression, including religious oppression, has traumatized and deactivated the body from accessing things that have been built into the human body to heal thyself. Awareness about the functions of the Chakra system and its relationship to healing and homeostasis of the body is vital for healing activation. The body has over 100+ Chakras. Amit Ray, Indian author and spiritual master states, "There are 114 chakras in our body. They can enhance our spiritual, mental, emotional and physical wellbeing, when they are balanced and clear."⁴⁸ Chakras are, "spinning vortexes of vital energy or Prana. When translated literally, the

⁴⁷ Gailey, Timothy H. "Healing Circles and Restorative Justice: Learning from Non-Anglo American Traditions." *Anthropology Now* 7, no. 2 (2015): 1–7. <https://www.jstor.org/stable/26775121>.

⁴⁸ Ray, Amit. *The Science of 114 Chakras in the Human Body: A Guidebook*. Inner Light Publishers, 2015.

Sanskrit word Chakra means “wheel”. This energy flows in our body through a network of 72,000 channels, known as Nadis, going to and from the 114 chakras.”⁴⁹ Primarily, energy healers focus on the twelve chakra systems that are made up of the seven primary ones which are most utilized in healing and energetic work. Understanding the chakra system is important in this work because the ultimate goal is to work with women to regulate their bodies to a state of homeostasis. Once the body is properly regulated, several of the life disparities with which Black women are faced will equalize and hopefully serve as a healthy guide for present and future generations. The preeminent focus of the Transformation Healing Project is total holistic wellbeing. In positioning the healing circle as a central modality to do this transformative work, it is essential to activate and heal the fifth chakra, the throat chakra or *Vishuddha*. As previously discussed, religion has historically been utilized as an oppressive tool to silence the voices and spirits of marginalized and oppressed women. There are many generational narratives that our ancestors have passed on and dedicated their lives to preserving, and these untold stories have the potential to unlock generational healing. In addition, truths that have yet to be spoken are stirring in the souls of many women who remain afraid to speak their truth, considering their being and shame to be things to wrestle with privately between them and God. Dogmatic religion has scripted a God that appears solely interested in the betterment and wellbeing of the male seed. Acquiring knowledge and understanding the totality of the human body is instrumental in this work. Activating the fifth chakra in healing circles is a revolutionary act of healing for women. The Chakra

⁴⁹<https://chakrapractice.com/what-is-the-114-chakras-map/#:~:text=Among%20the%20114%20chakras%2C%20112,sixteen%20aspects%20in%20each%20dimension.>

practice defines the *fifth chakra, Voice chakra* as, “often associated with self-expression, communication, creativity, and truth-telling wisdom.”⁵⁰

Throat Chakra Summary

- **Sanskrit name:** Vishuddha Chakra
- **Location:** The base of the throat
- **Signs of a balanced Throat Chakra:** Authentic self expression and confident communication.
- **Signs of an imbalanced Throat Chakra:** Problems speaking the truth, sharing your views and anxiety around communication which can lead to negative outbursts and stress. Physical symptoms include a sore throat, painful jaw, mouth issues like ulcers.”⁵¹

This chakra summary provides an epistemological overview of throat chakra and it being a key component for intergenerational trauma. Historically, women have been silenced, muted and marginalized. This notion is exacerbated for Black women. There is a systemic need to silence the voice of Black women so that truths are not told, especially truth hidden. The intersectionality of race, gender and class have long silenced Black women. The church has been a primary place that continues to silence women in their faith communities. Healing, activating, and balancing the throat chakra can be a leading

⁵⁰ <https://chakrapractice.com/the-throat-chakra-how-to-balance-the-fifth-chakra/>

⁵¹ <https://chakrapractice.com/the-throat-chakra-how-to-balance-the-fifth-chakra/>

portal to healing generations of Black women. There are narratives to be told and shared. Uplifting Black women's voices through chakra healing is radical, revolutionary and necessary.

Healing circles have served and can continue to serve as a tool to heal the powerful gift of women: their voices. Healing circles are an ancient, sacred practice to uplift they are more than just spaces for venting. They are an ancient practice and tool for individuals to connect with the truth of their being and to use their voices as an instrument to articulate their freedom and all of the cycles and barriers that have prevented them from living into their agency. Circles decentralize power in the sense that the facilitator is there to only guide the conversation. In addition, participants are reminded that healing circles do not serve as a replacement for therapy, nor do the participants play into the role of providing answers to each other. The primary mission of the Transformations Healing project is to curate healing circles designed to meet the needs of Black women to feed into the larger context and purpose of the circles to help people address personal and collective/cultural trauma. Circles are not designed to exclude anyone. However, there should be a vigilance to decentralize white privilege that threatened to take a lot of space.

Why Black Healing must be Trauma Informed:

This project aims to create space intentionally and specifically for Black women who are living with HIV. The purpose of this intention is to ensure that HIV awareness, advocacy and education is included into the collective healing project for Black women's ministries. This project must be employed through a trauma-informed care lens.

Historically, Black women in America have been marginalized, causing a great deal of

intergenerational trauma that must be addressed and healed. The discourse of addressing intergenerational trauma does not imply that trauma is the primary narrative of Black Americans. However, it is a life threatening matter that is pervasive in our community, and is particularly rampant in the religious context. There are skeptical religious theories and debates related to inheriting generational trauma. There are questions if generational trauma is valid or is it a *sin*? Religious trauma imbued sin consciousness deep into the Black psyche. In a warped way, religious trauma has informed the way that we perceive ourselves. Therefore, terms like intergenerational trauma appear to be preposterous for descendants of slavery. Religious dogma has conditioned the psyche to see trauma and sin as interchangeable. Ancient Wisdom Seekers wrote the article, “*Original Sin or Intergenerational Trauma?*” This article states, “Sin is not a part of who we are, rather it is something we have accumulated throughout our lives partially by our own choices but also largely from the people around us. Our families and cultures are the primary sources of our sin and we have the ability (as difficult as it may be) to overcome those influences.” A great number of Black Christians continue to believe that our lineage or collective community is at fault and that is the result of our trauma or sin. The mission of my work believes that addressing the historical religious trauma of our ancestors empowers us to address our present realities and contexts. While historical and intergenerational trauma have been caused by other religions, this project highlights the religious trauma of the colonized Christianity which justified the Transatlantic slave trade.

Dr. Joy DeGruy, a Black American psychologist and author, coined the term ‘Post Traumatic Slavery Syndrome.’ Dr. DeGruy explains that there is, “a line of

causation from the hostilities that white people enacted on their Black slaves to behaviors present in the Black community today.” De Gruy argues, "have been passed down through the generations, sometimes intentionally to help the next generation survive, but sometimes in ways that are unintentionally.”⁵²

Certain generational behaviors, including religious trauma, require greater awareness. Imposing historical biases and stigmas on marginalized groups, particularly those expelled from their communities due to harmful theological frameworks, perpetuates toxic behavior that must end to break these cycles. The stigmatization of the HIV virus is deeply rooted in bias and stigma which is perpetuated by faith communities. Adding insult to injury, advocacy for Black women living with HIV has become an anomaly. Black women with HIV are suffering in deep silence, leaving them not properly ministered to and cared for by their faith communities. The stigma and bias sparked my curiosity to delve deeper into the root causes that continue to divide Black people and Black faith communities. This endeavor is not intended to attack but to raise awareness, catalyzing collective radical healing within faith communities.

Trauma-informed care is a framework that faith communities, in particular Black faith communities, must integrate into their ministry and programming. Many behaviors passed down through generations, often attributed to "sin," actually reflect underlying trauma. Unfortunately, HIV and persons living with it are treated as victims of a virus wrought as a consequence of sin. However, HIV transmission can occur in other ways than sexual transmission. Furthermore, regardless of how one contracts HIV, the impact of the trauma that persons living with the virus (and their loved ones) have to

⁵² Noah Chen, “Inherited Trauma: Is it REal? Clues to Post-traumatic Slave Syndrome

contend with is often overlooked. For this reason, it is important to do this work through a trauma informed care lens. When an organization is trauma informed, it is highly aware of the trauma of those seeking help or services and takes that into account in their treatment or assistance.

What does it mean to be trauma informed? The Encyclopedia of Social Work defines trauma informed care as, “Trauma-informed organizations, programs, and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.”⁵³ (National Center for Trauma-Informed Care, 2012). Faith communities are often compared to hospitals. People come to faith spaces for various reasons. However, a common thread in ministry are the wounds that individuals bring to faith spaces. The wounds most often seen in faith communities are frequently rooted in childhood experiences. Therefore, it is crucial for faith communities, and in particular Black faith communities, to center and integrate their work, ministry, and programming through a trauma informed lens. American Black faith communities have been addressing trauma well before the present day. Historically - through slavery, post slavery, and into the present - faith communities created space that would care for the Black body in a country that aimed to annihilate and exploit it through merciless greed and capitalism. Faith communities gaining a deeper understanding of trauma will facilitate the recognition of its manifestations and enable the development of programs and safe spaces for Black individuals to heal from the

⁵³ Classen, Catherine C., and Carrie S. Clark. “Trauma-Informed Care.” In *APA Handbook of Trauma Psychology: Trauma Practice*, Vol. 2., edited by Steven N. Gold, 515–41. APA Handbooks in Psychology®. Washington, DC: American Psychological Association, 2017. doi:10.1037/0000020-025.

intergenerational trauma carried within their lineage. Resmaa Menakem, author of *My Grandmother's Hands*, explained trauma as, "Trauma is not primarily an emotional response. Trauma always happens in the body. Trauma is not a flaw or a weakness. It is a highly effective tool of safety and survival. Trauma is not an event. Trauma is the body's protective response to an events- that it perceives as potentially dangerous."⁵⁴ There has been and continues to be unexamined causes and effects to the manifestations of trauma living in the Black body.

What is Trauma Informed Care?

Before integrating trauma-informed care ministry into the structures of the communities, it is essential that allocated, designated time is devoted to laying the proper educated foundation to build this work upon. Trauma-informed care is described with four R's: Realization, Recognize, Respond, and Resist. Identifying Black trauma-informed care clinicians and practitioners who have experience working with Black faith communities remains a challenge and is primary to healing. Many generations have misdiagnosed and mislanguaged trauma, often characterizing manifestations of trauma as sin or generational curses. In addition to trusted trauma-informed care clinicians providing proper training, theologians who are doing the work of liberation are essential to this process. There are seminary trained, life experience practitioners who are willing to carefully walk faith communities through this social justice work.

Trauma-informed care is essential to supporting pastoral, programming and social justice work services for the community. It presents an opportunity for

⁵⁴ Resmaa Menakem, *My Grandmother's Hands*, p. 7

collective care and communal responsibility, urging the Black community to embrace Sankofa, meaning "to return, to fetch," as we integrate trauma-informed care practices into our structural framework. Trauma education for the senior faith leaders, clergy, staff, and lay caretakers of faith communities serves a gateway to introduce trauma-informed care ministry in the larger community. Trauma-informed care is a leading methodology in human service fields which are steadily gaining momentum in faith-based organizations.

“The Substance Abuse and Mental Health Service Administration best describes trauma-informed care with four R’s:

- **Realization**: Realization means that all people at all levels of the organization or system have a basic awareness about trauma and understand how trauma can affect families, groups, organizations, and communities as well as individuals.
- **Recognize**: Recognize means people in the organization or system are also able to identify the signs of trauma,
- **Respond**: Respond means the facility responds by applying the principles of a trauma-informed approach to all areas of functioning. All staff change their language, behavior, and policies to consider traumatic experiences of residents.
- **Resist**: Resist means the organization seeks to resist re-traumatization from unintentionally interfering with the recovery of clients, the well-being of staff, and the fulfillment of the organizational mission.”⁵⁵

Embracing the four R's outlined by the Substance Abuse and Mental Health Service Administration is paramount to providing trauma-informed care for Black women and communities struggling with religious trauma and HIV stigmatization. This approach integrates trauma-informed principles across all facets of care, thereby fostering a supportive environment for healing and empowerment.

⁵⁵ <https://psychosocialconsultants.com/blog/the-four-rs-of-trauma-informed-care/>

Laying the groundwork for trauma-informed care is crucial to ensuring the safety of the space and the participants. Faith communities have garnered a historical trust that has been compromised over the years and must be restored. The relationship between faith communities and its members should continue to be properly assessed to ensure that the alignment remains to continue to grow with its members. There is a wide variety of people that faith communities serve. This project highlights the high possibility of persons being unintentionally overlooked or intentionally silenced regarding their true needs. When community members encounter unsafe spaces, they more than likely retreat from help. When one retreats in this way, they gradually become invisible in the rubble of stigma, and they are more likely re-traumatized each time they engage in that particular faith community. HIV remains an epidemic in the Black community with higher rates in the American south. Therefore, this project is creating opportunities for persons living with HIV - along with other Black women who are and have experienced trauma of all sorts. In curating this space, it will serve as a model for Black faith communities with Black women's ministries as the aim and focus that will aid in the radical healing and care for the collective Black woman. To do this work, Black faith communities must know who is in their community. Data collection by surveying is, I believe, the best measure to put into place that will retrieve the best data and protect the anonymity of the community members.

REALIZATION

Realization: Realization means that all people at all levels of the organization or system have a basic awareness about trauma and understand how trauma can affect families, groups, organizations, and communities as well as individuals.

Realization, one of the four R's of trauma informed, will highlight the high probability of trauma being prominently present within the community. Once the Senior faith leader and their team can analyze the data, it will best inform how to address historical trauma that most African Americans contend with. Resmaa Menakem explains, "If you're African American, you'll explore the trauma that is likely internalized and embedded in it. You'll see how multiple forces - genes, history, culture, laws and family - have created a long bloodline of trauma in African American bodies."⁵⁶ When there is a basic awareness of the collective trauma that sits in the body of most Black Americans, it will hopefully inform our faith leaders, their staff/team to best identify the necessity to heal our community. In addressing the collective historical trauma, it provides an opportunity to bring awareness to all of the social determinants that drive our community including HIV awareness, advocacy, and education. Utilizing qualitative data as a guide to implementing trauma-informed principles and practices into the structure and programming for faith communities will serve as a safeguard to ensure the safety and well being of the collective community. The data can serve as a guide to inform the faith leaders of their given community the trauma that is within their faith community, this is realization that will bring awareness for the trauma informed care ministry that will need to be developed.

In faith communities developing their trauma informed care it will be beneficial for the faith leaders and their delegated staff to identify and build a team of key trusted, medical, holistic, mental health providers, community and non-profit organizations, and

⁵⁶ Resmaa Menakem, p. 11

community healers who will collaborate for partnership to ensure that the trauma is properly diagnosed, healed and transmuted.

RECOGNIZE:

Recognize: Recognize means people in the organization or system are also able to identify the signs of trauma.

Recognize is one of the four R's of trauma informed care that is a segway after the education and training from Realization that provides an insight and understanding to what trauma is. In faith communities it is vital that the leadership and laity team members are properly trained to have a better understanding of what the signs of trauma and what are. In the context of ministry, faith leaders and communities often address dysfunction, harmful behaviors and patterns as sin, when in fact trauma/trauma response may very well be present. The lack of recognizing what trauma is actually exacerbates trauma that is present. Providing faith leaders and communities with the basic frameworks on how to *recognize* trauma and how to respond to it with the best spiritual care, in addition to having keen discernment and knowledge on therapeutic and rehabilitative practices that individuals may need for their personal and collective care is paramount.

RESPOND:

Respond: Respond means the facility responds by applying the principles of a trauma-informed approach to all areas of functioning. All staff change their language, behavior, and policies to consider traumatic experiences of residents.

Outlining a basic and comprehensive framework for faith leaders and communities will enhance their ability to realize, recognize, and respond to the trauma at hand. Ministry essentially engages in trauma in high percentages in its daily functions. In presenting

healing modalities as Transformations Healing Project, it is primary that a trauma informed care approach and practice is highly prioritized before doing such work. It is normalized for faith communities to have in depth programming for its congregations and communities engaged with little to no knowledge of trauma informed care and practices. Therefore, there has been overall negligence in proper care for individuals and their overall wellbeing. In better understanding trauma informed approaches it will shift the culture of how church is done. It will shift the language and treatment thereof that will dramatically impact the overall environment.

RESIST:

Resist: Resist means the organization seeks to resist re-traumatization from unintentionally interfering with the recovery of clients, the well-being of staff, and the fulfillment of the organizational mission.”

It is essential that organizations draft plans of safety for all constituents involved in ministry work. Trauma informed care and practices ensure that all that are involved in ministry work are considered in program development and implementation. As curriculum creator and designer, prioritizing continual recovery, restoration and care is vital as a practitioner. In healing work, the client becomes the primary person. The end goal of healing work is to hold space with individuals/clients as they access their healing. However, as a practitioner, the well-being of the staff, the facilitator is often overlooked and this could propose a direct and indirect threat to all persons involved well-being. Therefore, the model of training the trainer should best be utilized in this approach. This approach ensures before “we” meaning facilitators, staff, leadership teams must be offered healing services and work that addresses our trauma in the same manner as the

client. This work is collective work that “resist” all opportunities to re-traumatize those that are offering help and for those that are receiving the services.

Chapter 4: Integrating Non Conventional Healing modalities:

Why is this important for Black women?

Black women utilizing non conventional healing modalities as a part of her self-care wellbeing plan preserve native and indigenous sacred ancestral practices that were often carried down through oral tradition and practice. The National Health Institute conducted a study that examined, “*Women's Reasons for Complementary and Alternative Medicine Use: Racial/Ethnic Differences*” it concludes, “For minority women, use of alternative remedies by family members when growing up was a common reason for CAM use, as indicated by nearly half of Mexican-American women (48%) and 42% of African- and Chinese-American women ([Table 2](#)).”⁵⁷ It is important for individuals, particularly Black women in this case, to curate a team of traditional, non-traditional clinicians, healing practitioners, and faith based leaders that they can integrate to aid in their overall holistic well-being. Black women are not linear beings - our beings are complex and our experience transcends the present. Therefore, non-conventional healing modalities are essential for our wellbeing and greater self-knowledge. Non-conventional healing practices offer an opportunity for the whole self - spirit, mind, body, and soul - to be healed. Contemporary Alternative Medicines (CAM) uniquely provides women the opportunity to be seen, heard, and valued by clinicians and practitioners in a distinct way

⁵⁷ Chao MT, Wade C, Kronenberg F, Kalmuss D, Cushman LF. Women's reasons for complementary and alternative medicine use: racial/ethnic differences. *J Altern Complement Med.* 2006 Oct;12(8):719-22. doi: 10.1089/acm.2006.12.719. PMID: 17034277; PMCID: PMC2673532.

that caters to gender, taking their individual needs into account. The gender sensitivities that women inherently possess can be desensitized by patriarchal systems. Research highlights why CAM is essential for women: CAM provides women an opportunity to express and lean to their agency.

“The ‘gender puzzle’ of alternative medicine and holistic spirituality: A literature review” explains,

“Patients’ expectations to claim greater authority over their bodies is intertwined with CAM practitioners’ commitment to egalitarian relationships (Nissen, 2011). Many CAM modalities are characterized by individualizing treatment by means of obtaining diverse information from each patient regarding diet, lifestyle, and social and personal relationships. This contextualizes healthcare within the patient’s life, and allows patients to feel like an expert and an active partner in their treatment. Studies demonstrate the importance to women patients of being listened to, spending more time with the practitioner than in biomedical consultations, and enjoying the emotional support offered by women practitioners (Sointu, 2006; Nissen, 2008). Thus, CAM practitioners relinquish a degree of control and recognize patients’ authority, which potentially reduces power asymmetries (Nissen, 2011).”⁵⁸

There are several unconventional modalities that can assist Black women to address the trauma that this project suggests needs to be addressed for the collective community. Historically, Black women have been stigmatized and marginalized within healthcare systems, leaving them with insufficient care. Empowering Black women to access comprehensive conventional and non-conventional healthcare providers will address this systemic issue and contribute to more equitable care. I do not venture to suggest that one modality is more important than the other. However, I believe that both are vital to promoting the overall health of Black women and thereby Black communities.

⁵⁸ Yael Keshet, Dalit Simchai,

The ‘gender puzzle’ of alternative medicine and holistic spirituality: A literature review, *Social Science & Medicine*, Volume 113, 2014, Pages 77-86, ISSN 0277-9536, <https://www.sciencedirect.com/science/article/pii/S0277953614002883?via%3Dihub>

Conventional medical practices are considered the more traditional and are the type that are most utilized by Westerners. “People use conventional medicine to prevent, diagnose, and treat symptoms and conditions,”⁵⁹ and can be best defined as:

“Conventional medicine, also called Western medicine or modern medicine, is when healthcare professionals such as doctors, nurses, and therapists use scientific research to diagnose and treat symptoms and conditions. Examples of conventional medicine include:

- pharmaceutical medications
- physical rehabilitation
- psychotherapy
- radiation therapy
- surgery”⁶⁰

Conventional medicine now recognizes the importance of including Non Conventional healing modalities in care practice, normalizing integrative therapies in traditional healthcare systems. There are several non-conventional healing modalities, the three most identified are: complementary, alternative, and integrative. The Merck Manual explains each as:

“Complementary, alternative, and integrative medicine are terms often used interchangeably, but their meanings are different.

- **Complementary medicine** refers to non-conventional practices used *together with* conventional (mainstream) medicine.
- **Alternative medicine** refers to non-conventional practices used *instead of* conventional medicine.

⁵⁹<https://www.medicalnewstoday.com/articles/difference-between-conventional-and-complementary-medicine#conventional>

⁶⁰<https://www.medicalnewstoday.com/articles/difference-between-conventional-and-complementary-medicine#conventional>

- **Integrative medicine** is health care that uses all appropriate therapeutic approaches—conventional and non-conventional—within a framework that focuses on health, the therapeutic relationship, and the whole person.”⁶¹

Non-conventional practices could be identified as most culturally diverse considering most derive from global native practices and are now being efficiently integrated into modern medicine. In partnership with modern conventional medicine, non-conventional practices provide an opportunity to responsibly include unconventional healing modes into one’s faith journey. Faith remains the epicenter of the Black community in America. The Black woman remains the epicenter of the Black faith community. Therefore, in order for the Black community to thrive, the Black woman must be holistically cared for. In the integration of complementary medicine or non-conventional healing modalities into Black women’s healing journey, it is vital to understand that this can serve as a vehicle to addressing intergenerational trauma that is very much at play in the experience and perpetuation of religious trauma. Unconventional healing modalities introduce Black women to ways to reconnect and reclaim spiritual rituals and practices that African diasporans lost along the way. Moreover, it gives diasporans permission to understand and practice ancestor veneration in a way that was lost and has long been looked down upon.

This paper includes, identifies, and defines complementary medicine modalities that are believed best for this healing project. Complementary medicine is defined as:

”treatments that people use in addition to conventional medicine. These treatments are not part of standard medicine. Common types of complementary medicine best utilized for this project include:

- aromatherapy

⁶¹<https://www.merckmanuals.com/home/special-subjects/integrative-complementary-and-alternative-medicine/overview-of-integrative-complementary-and-alternative-medicine>

- acupuncture
- herbal medicine
- visualization
- Yoga
- naturopathy
- Reiki
- relaxation
- tai chi”⁶²

Integrating non-conventional healing modalities into the healthcare and healing practices of Black women is a strategic aim to promote the intergenerational health of Black communities and as a medium to heal all sorts of intergenerational traumas, including religious trauma. Traditional Christian healing practices include praying, fasting, petitioning, laying of hands normally at an altar call are ways that Black faith communities approach healing. These remain important but complementary healing methods can be used in addition to traditional ones, in faith and healthcare settings, to remedy health disparities that have negatively impacted generations of African diasporas. As 3 John 1:2 (KJV) states, ”Beloved, I wish above all things that thou mayest prosper and be in health, even as thy soul prospereth.”

⁶²<https://www.medicalnewstoday.com/articles/difference-between-bconventional-and-complementary-medicine#conventional>

Although several of the non-conventional practices derived from native, indigenous practices, the majority of these modalities are most participated and engaged by predominantly white audiences. Many of these practices have been monetized in various ways for the socially-economically privileged. Due to a lack of knowledge of these practices, Black communities view these practices as being outside of their religious, social, and cultural norms. Therefore, many such practices are often shunned even when they are most needed for healing. This project will present and provide in depth knowledge that can aid to Black women's vibrant healing and holistic wellbeing. For example:

- **Acupuncture** may help ease types of pain that are often chronic, such as low-back pain, neck pain, and osteoarthritis/knee pain. Acupuncture may also help reduce the frequency of tension headaches and prevent migraine headaches.

- **Meditation** may help reduce blood pressure, symptoms of anxiety and depression, and symptoms of irritable bowel syndrome and flare-ups in people with ulcerative colitis. Meditation may also benefit people with insomnia.

- **Tai chi** appears to help improve balance and stability, reduce back pain and pain from knee osteoarthritis, and improve quality of life in people with heart disease, cancer, and other chronic illnesses.

- **Yoga** may benefit people’s general wellness by relieving stress, supporting good health habits, and improving mental/emotional health, sleep, and balance. Yoga may also help with low-back pain and neck pain, anxiety or depressive symptoms associated with difficult life situations, quitting smoking, and quality of life for people with chronic diseases.⁶³

Integrating non-conventional healing modalities into the healthcare and healing practices of Black women is crucial for promoting the health and healing of Black communities. These practices are not new, but they remain largely underutilized by Black women and the broader Black community. This project aims to bridge this gap by providing in-depth knowledge and resources to empower Black women in accessing these modalities for vibrant healing and holistic wellbeing. By highlighting the benefits of practices such as acupuncture, meditation, tai chi, and yoga, we strive to support Black women in reclaiming their health and flourishing in mind, body, and spirit.

Chapter 5: Curriculum:

OUTLINE FOR TRANSFORMATIONS HEALING PROJECT

TRANSFORMATIONS HEALING PROJECT

*Forward: THP: centered in trauma informed care aims to assist Black faith communities in reclaiming the foundations of the hush harbor to curate radical healing space for Black women, in particular those living with HIV *Trauma Informed Care -*

⁶³ <https://www.nccih.nih.gov/health/complementary-alternative-or-integrative-health-whats-in-a-name>

identifying healing modalities that will address intergenerational trauma Healing in safe space , How to curate safe space.

- **Forward: An Opening Letter to Black Women**
- ***The Seven Principles of Kwanzaa* - establishing the work on the principles.**
- **Centering the Circle**
- **Lessons:**
 - Lesson 1: The State of The Black Woman
 - Lesson 2: Black women living with HIV - why our sisters should have our advocacy
 - Lesson 3: Why is our collective healing important?
 - Lesson 4: Inside My Body, Somatic Practices:
 - Lesson 5: (Reiki exercise) energy healing
 - Lesson 6: Heal Your Money addressing the financial legacy of and for Black girls and women
 - Lesson 7: Sexual/Reproductive Health: addressing and restoring a healthy sexual ethics for ALL Black women.
 - Lesson 8: Nutritional Counseling: Address healthy body positive conversations that will aid Black women in eating high vibration foods for their wellbeing.
- **Closing Ceremony and Reflection**

Transformations Healing Project

- **Transformations Healing Project:** is a radical healing, sustaining movement for women. This healing project is designed to create healthy radical, transformative healing and care for women.
- **Healing Circles:** are a central indigenous healing modality that the Transformations Healing Project utilizes to be a welcoming, safe, affirming space where all can be Divinely free!

- **The mission of Transformations Healing Circle:** To forever burn the flame where all can gather to learn from the other. We do this by committing to deep listening, sharing our stories, daring to be courageous to ask the questions, and most importantly to make meaningful spiritual connections with others on their transformative journey.

Forward: *An Opening Letter to Black Women*

Transformations Healing Project aims to partner with Black faith communities to specifically work with Black women's ministries. This curriculum is designed to address and collectively heal intergenerational trauma for Black women. Collective healing is a powerful tool that this project will utilize. It is safe and fair to say that Black women are powerful beings at the same rate, we have trauma to heal. This particular project will do just that, it is designed to begin an aid in the holistic healing process that will restore and rehabilitate nervous system regulation for Black women. The course and center of this work will always emphasize the invisibility and silencing that Black women living with HIV have contended with in their faith communities. There is often an unaware historical trauma that Black Americans of the African diaspora live with. However, due to undealt with religious trauma, we have allowed a divide to become in between us. Therefore, women who are facing certain health and social disparities that are stigmatized have prevented us from the collective advocacy that we should provide for one another.

This project is centered in trauma informed care to assist Black faith communities in reclaiming the foundations of the hush harbor to curate radical inclusive healing space for Black women, in particular those living with HIV.

This curriculum was modeled after the problem-centered curriculum design.

Problem-centered curriculum design is,

“a type of curriculum model where students are encouraged to seek answers to real-world problems. This model promotes transferable soft skills such as critical thinking, collaboration and communication to prepare students. Problem-centered curriculum design refers to using activities to hone the skills that students will need. Students continue to learn key skills and knowledge associated with their area of study, but lessons are designed around application and relevance.”⁶⁴

This curriculum will curate safe, confidential space to draw upon the lived experiences of Black women to garner healing for one another. As a Black American woman of the African diaspora, there are a number of things that I bring to the table. There is strength, there is divine grace, beauty, and intellect that is reflective of the beautiful women that I come from. My lineage is beautifully complex. I came to the age that I wanted a deeper understanding of self. As this exploration began, I realized that this was deeper than me. As Alice Walker explains in, “In Search of our Mothers Gardens, she found her own.” This was reversed for me, I began to search in my own garden and then discovered my mother and grandmother’s garden. I realized immediately that I hail from Artisans who were forced to repress their artistry for the sake of what it is to be what we traditionally woman. My context did provide space nor autonomy for a woman to be an artist, yet along an artist within her own right.

My curiosity about the women in my family became very strong and pronounced. I began to know and see my mother and the women of my klan in deeper ways. There are some things that were never discussed but somehow we knew that things were not quite right. Now that I have a better understanding of trauma, I better understand how silence became a trauma response. Silence is a trauma response of most women. Historically women have been conditioned to be muted and silenced. There is the mere silence of

⁶⁴ <https://tophat.com/glossary/p/problem-centered-curriculum-design/>

fearing the unknown, therefore we never garnered the courage to ask. We just stayed in a child's place. There are conversations that should have been had with us to help us on our journey. There again, who really knows what is really going on in the village. Due to this crippling silence, there are complex histories and pasts interlocked into family secrets that must be unlocked and healed for present and future generations.

This has fueled my tenacity towards intergenerational healing. I am healing for more than myself, this is for past, present, and future generations. My ancestors have provided many gifts but "things" have gotten in our way in believing that we are worthy enough to receive. The aim of the Transformations Healing Project is to help curate radical healing space for Black women in Black faith communities to holistically heal. Black faith communities contain powerful agents and entities known as the Black woman. Black women have and remain to be the epicenter of their faith communities. Therefore, her faith community has a responsibility to her holistic wellbeing. This curriculum will help the Black woman individually and collectively. We have a shared responsibility for each other.

My healing journey invited me to address intergenerational trauma and the healing modalities that will support this lifetime process. This curriculum will explore conventional and non conventional healing modalities. From my personal experience the inclusion of traditional and non traditional approaches towards my healing have been highly beneficial. I desire the same for Black women. We are not a monolith, therefore there is not a singular approach to our healing and wellbeing. Nevertheless, this is an invitation to explore healing modalities that may expand our capacity. Unfortunately religion most informed by trauma has colonized many native healing modalities. With

great anticipation, I pray this project will enlighten you in deeper and more profound ways for self and others.

In calling forth radical healing spaces for Black women, I am calling forth rituals and spiritual practices that healed our ancestors. We will reclaim things that were taken from them, therefore they were taken from us. We will journey into distant lands that are familiar and unfamiliar. THP joins efforts with your faith community to heal Black women.

Happy Healing,

Mia Hash Sloan

Transformation Healing Project

The Seven Principles of Kwanzaa - establishing the work on the principles.

The Seven Principles of Kwanzaa: Nguzo Saba

The Seven principles of Kwanzaa: Nguzo Saba are tenets by which our collective work must be guided by. Reclaiming African centered practices are essential as we are mending the net to be the foundation of a radical healing space crafted and established in Black faith community for Black women. Each of the seven principles serve as the guiding light that will center one's personal healing for more than self, but for their fellow siblings that they are in community with.

What is a Nguzo Saba?

“The Nguzo Saba is a value system developed by Maulana Karenga in the 1960s for African Americans. It is relevant here as an example of borrowing African traditional cultural traits and utilizing them for people of African descent in the diaspora. Beginning with a brief explanation of Kawaïda, the doctrine from which

the Nguzo Saba was derived, the entry continues with a discussion of the meaning and utilization of the Nguzo Saba, including its use as a part of the African American celebration of Kwanzaa. In the mid-1960s, Karenga developed a philosophy and doctrine—a way of life—called Kawaida. *Kawaida* is a Kiswahili word that means “tradition.” Kawaida is a social, political, and cultural construction designed specifically to address the African American struggle for freedom, justice, and equality. Karenga redefined Kawaida to mean tradition and reason for the purposes of African Americans. Karenga explored traditional African cultures and extracted selected elements that he believed would be appropriate for African Americans in the 1960s and beyond. He asserted that he did not blindly select aspects of African cultures; instead, using reason, he chose those that seemed most appropriate for African Americans. A fundamental aspect of the doctrine of Kawaida is the Nguzo Saba. This Kiswahili phrase translates into English as “Seven Principles.” Here again, Karenga studied African traditional cultures and selected those principles, or values, that he believed are most appropriate for African Americans. He chose these particular values in part because of their prevalence in many African cultural groups and because of their pertinence to the social, political, and cultural circumstances of African Americans today.”⁶⁵

“Umoja (Unity)

To strive for and maintain unity in the family, community, nation and race.”⁶⁶

There is often critique about the state, the lack of cohesion and collective vision for the Black community. The Black community includes a wide reach. As wide as the reach is, the Black community is not a monolith. There is not one answer for the range of things that must and should be addressed in order to have a thriving, functioning community. The Black church at the core of the community. To address the bias and stigma that Black women are often faced with will take a collaborative effort of all in the community and to actually deem it important and necessary. Sexism, patriarchy, and internalized racism have stained and fragmented the unity within the Black community.

⁶⁵ Lomotey, Kofi, ed. *The SAGE Encyclopedia of African Cultural Heritage in North America*. 2 vols. Thousand Oaks, CA: SAGE Publications, Inc., 2015. <https://doi.org/10.4135/9781483346373>.

⁶⁶ <https://aalbc.com/content.php?title=Nguzo+Saba%3A+The+Seven+Principles+of+Kwanzaa>

Understanding a macrovision for unity in the Black community will provide insight that will empower strategy for faith communities in how to achieve Umoja. Before we can fully reclaim Umoja, reconnecting the community to embracing our effort(s) to be more extensive and expansive than our personal pursuits, purpose, and passion. Our minds must transform and return to the basis of acquiring our emancipation in this country and across the world. The enslaved made a deep dive into their sacred for liberation. When all of the odds were against them, they garnered all of their efforts towards collective liberation. Those who chose to remain in bondage to slavery in their commitments to the slave owners, or from the paralysis of fear were too invited to think and imagine the possibilities of their freedom. In the collective effort there will some who will come and some who will not. Focusing on those who do not come are useless at this juncture of moving our liberation further ahead.

Teaching Umoja, will spark the creativity for Black people to think about all of our freedom void of exclusion and stigma. The work of Gilead Compass Initiative at The Faith Coordinating Center at Wake Forest School of Divinity has created a vision and mission that is offering tools and resources for faith communities to address stigma that has created trauma for persons living with HIV by shifting predominant harmful cultural narratives about HIV/AIDS toward narratives of justice, healing, and hope, and to provide needed resources to faith communities and faith-based organizations to address HIV in the South. This mission helps Black faith spaces to strive together in unity to maintain the wellness of the community. Umoja will recall the unity that has been lost in the rubble of white assimilation that breeds and teaches individuating and caring for self. We are to

keep the unity individually and collectively in our race to justly advocate for one another again. We are each other's keeper.

“Kujichagulia (Self-Determination)

To define ourselves, name ourselves, create for ourselves and speak for ourselves.”⁶⁷

A true gift for diasporans is to take ownership of the very thing that was taken, their identity. Psalm 46:10(NRSV) states, ““Be still, and know that I am God. I will be honored among the nations. I will be honored in the earth.” Stillness evokes the Black soul, it is calling the Black soul home to itself. Trauma was and remains a huge source of the disconnection that the Black soul contends with. Black houses of worship could be instrumental spaces to assist one with reconnecting to their personal and collective self-determination. Stillness beckons the collective community to sit, to ponder, to meditate the expressed divinity that is imprinted within the soul that was unjustly taken from them. There will take a collaborative self determination to reclaim and discover who we truly are as a people. In addition, this is primarily imperative for Black women to reclaim, reimagine and rediscover their identity that has been defined by everyone but them. Unfortunately, Black men have become increasingly susceptible to misogyny that is a result of racist systems. Invoking Kugichagulia will empower Black faith to confront ‘*intra*’ sexist constructs within the Black community.

External forces have defined and misspoken for who Black women truly are. *Kujichagulia* can help Black women to be made well. The wholeness of Black women is not to suggest that Black women are broken and fragile. However, it is important to

⁶⁷ Ibid.

understand that the history on the grounds of the United States has not been beneficial nor good to the Black body, in particular the Black woman. Fragmentation became a part of Black women's identity due to the forced servitude that was expected of them to provide for everyone but herself. The positionality of Black women in most societies leaves them empty, leaving them little to nothing for themselves. Women's ministries have a great opportunity to be a refuge for Black women to restore and heal, to leave behind parts of our identity that no longer serve us and future generations.

Ujima (Collective Work and Responsibility)

*To build and maintain our community together and make our brother's and sister's problems our problems and to solve them together.*⁶⁸

Liberation for one, is liberation for all. Invasive socialization has people in each other's business that has become deeply problematic. We selectively choose the problems that we deem important and those that need advocacy and attention. If there is something that was built from nothing to something, the diasporan community is reflective of this. The collective unity to build and to continue to maintain community and institutions that have been the pinnacle of the power that the Black global community holds. Unfortunately, turning our backs on the other due to stigma and poor judgment of what problems are deemed worthy of solving together. HIV, poverty, unemployment, food insecurity, amongst other things remain an epidemic within our community because of the moral failure of individuating. The individuating, creation of silos due to

⁶⁸ Ibid.

socioeconomics, socio religious have caused a great divide within our systems and communities.

This principle has been the backbone to the Black community. Once the beloved enslaved were emancipated they had nothing. No structure, nothing they had. If there was not an interdependence upon the other, it would have been virtually impossible for the structure of community that we sit upon today. Our problems were the other problems. We did not see ourselves separate from each other. This does not mean that controversy and conflict were not present but it is to suggest that there were larger matters to be agreed on that would be predicated on their unity. That same premise remains relevant today. Upward economic, education, mobility all shaped by patriarchy made ones within the community susceptible to a divide. In addition to religion contributing to a clear divide. This evident divide has potential to be removed once we reconcile and understand how great the divide religion has had upon us. There are sacred texts that perpetuate stigma that prevents the other from seeing the other as each other's responsibility.

Ujamaa (*Cooperative Economics*)

*To build and maintain our own stores, shops and other businesses and to profit from them together.*⁶⁹

Poverty is a global systemic issue that continues to be a social determinant that has our community vulnerable to its grips generation after generation. Black poverty in America is highly rated amongst other ethnic groups. The US Census states, “In 2019, the share of Blacks in poverty was 1.8 times greater than their share among the general population. Blacks represented 13.2% of the total population in the United States, but 23.8% of the poverty population.”⁷⁰ Although the poverty rate is decreasing for Black Americans, we remain the highest. In Black Americans pour their money into every race and ethnic group in ways that are not reciprocated. It is quite insulting to the Black American community to be compared to other ethnic communities who come to America and amass the American dream. After emancipation, the enslaved had nowhere to go. Many migrated, many remained. Black commerce has kept and will continue to keep the economy moving and be the basis for immigrant wealth development. Ujamaa invites us to maintain the power of our commerce fluidly through our own community. Historically this has been proven to be true and remains to be true.

Systemic poverty in the Black community is an offset of a system who had no other plans but to enslave Black people for the rest of their lives. This system is not only set to keep Black people financially marginalized and behind, it is set to continue to build and generate wealth off of the Black body, in particular the Black women. Black women

⁶⁹ Ibid.

⁷⁰<https://www.census.gov/library/stories/2020/09/poverty-rates-for-blacks-and-hispanics-reached-historic-lows-in-2019.html>

have been commodified and receive nothing in return for the wealth that has been accumulated off their backs. This commodification has burdened her body with unspoken trauma that her body is accounting for. Poverty remains an economic determinant that makes Black women susceptible to health and living disparities. In prioritizing Ujamaa, it helps Black women to take their power back. A devised generational financial plan will mend a strong safety net for Black girls and women in the future to come. Chief Dr. Oyenike Monica Okundaye, known as “Momma Nike.” Momma Nike who resides in Lagos, Nigeria owns Africa’s largest privately owned collection of traditional and contemporary arts. Nike is a philanthropist who lives by the principle of Ujamaa. She is known, “principally a social entrepreneur and a well-known philanthropist championing the cause of the neglected Nigerian rural women using art as a tool to accomplish these noble missions.”⁷¹

In addressing the issues related to Black women living with HIV, addressing financial literacy and growth is essential for the collective community. This principle will assist Black women in generating their own wealth and sustaining it through their own community. Consequently, Black women living with HIV are faced with a number of threats, finances being a major one. This teaching will provoke Black women to dream and envision entrepreneurship, close the generational wealth gap and develop financial plans that will restore rest to Black women’s bodies who have been unjustly commodified for years too long.

⁷¹<https://www.nikeartfoundation.com/chief-mrs-oyenike-monica-okundaye/>

Nia (Purpose)

To make our collective vocation the building and developing of our community in order to restore our people to their traditional greatness.⁷²

In addition to having clarity for our individual purpose, it is essential that our ambitions and purpose have the capacity to build, develop our collective community to empower all in the community, not denigrate to self and a select few. We are called into this earth to fulfill individual purposes but offering our gifts for humankind's ultimate wellbeing should be our aim. Our purpose should point back to the betterment of all, thus exceeding the lure of personal, isolated gain. In keeping our Nia aligned for a greater good and cause will help to eliminate the barriers of the have and have nots, the sense of elitism that has viscously torn the community apart. The consequences of individuating impedes our vision and ideation that can create a sustainability that is not over reliant on a system that does not care for Black bodies. In my suggested claim, I believe it will be benevolent for a distinct purpose to be strategized for Black women. Black women are not the saviors and caregivers for the entire community. Nonetheless, a specific plan and purpose for Black women will always ensure the viable sustainability for the posterity of the global Black community. In order to do this the Black women must be restored in developing Nia that is reflective of holistic wellbeing for all women who identify as women. Economic development is often left out of holistic wellbeing plans. In the same manner that health disparities are advantageously being addressed related to the Black community, economic disparity must and should have intentional Nia. Intentional Nia

⁷² Ibid.

will lessen generational poverty. Calling forth this Nia will empower all, most importantly the least of these. We are looking high and low for things that will restore our community. One would like to argue that the pandemic placed faith communities in a peril pertaining to its purpose. The Black church in particular in all of its power, has been in a deep struggle in understanding the fundamental Nia of this structure. Life keeps happening in various forms. In advocating for HIV, in particular for Black women living with it, it recalibrates the essential purpose of faith community. When one's spirit is kept alive, revived and offered a sense of hope in the midst of adversity, a generation can be liberated.

Kuumba (*Creativity*)

*To do always as much as we can, in the way we can, in order to leave our community more beautiful and beneficial than we inherited it.*⁷³

The Black soul has been kissed with Divine Beauty, including the profound beauty of creativity. Creativity offers an opportunity to participate in a sacred dance with the Divine soul, the Creator. It is one that humankind should be eternally grateful for which prevents us from getting caught in the mundane of life. Beauty is a fundamental principle of life that is often denigrated to vanity. To be beautiful is to imitate God in one of Her highest expressions. For a woman to ignite her soul's creativity, which often lies dormant, is a brazen woman. We have seen this creativity and purpose of **Kuumba** (*Creativity*) most expressed through the women in our family's and direct communities. There was an intentional effort to bless each space that they occupied with the beauty of

⁷³ Ibid.

life. The beauty was exemplified in the detail of how they curated divine beauty in the midst of external adversity. This intentionality imprinted and imparted the intricacies of beauty. How to capture the essence of beauty in the intricate details of life. Black women adorn themselves in the most prophetic ways. Each part of their lives reveals a unique beauty that must be persevered. It teaches Black girls to carve out a space of beauty in their lives amidst a world that does everything in its power to steal, kill and destroy the beauty of Black women's souls.

To discover the beauty of life and to bequeath that beauty as an inheritance requires a profound intentionality. Carving out beauty is actually sacred and divine, particularly amidst a world which seems to be full of systems that do everything within their power to break our souls. We are in a pivotal time that is beckoning for creativity. I once heard a profound saying, "the arts are how we express our humanity." In other words, creativity is a sort of necessity. When we express ourselves and our experience, we reveal the many acts of God. This current dispensation is crying for what Romans 8:19 (KJV) explains, "For the earnest expectation of the creature waiteth for the manifestation of the sons of God." Kuumba invites us in thinking and observing ways in which our ancestors did this. In her book of essays *In Search of our Mother's Gardens*, Alice Walker eloquently explains how the women in her family were innovative artisans. Walker explains how most Black women are artisans but many have been unable to artistically express themselves in traditional ways. To be Black and a woman often left our ancestors suppressed, repressed, and oppressed. Therefore, they had no other choice but to creatively, artistically express their unique beings in the everyday mediums available to them. The principle of Kuumba invites us to do the same. Kuumba invites us

to create with a defiant indifference to the systems of oppression which cannot penetrate our collective creativity - a creativity exemplified through generations of Black creative souls. Our collective creativity imprints and leaves an impression that will leave things more beautiful than when we inherited it.

Imani (*Faith*)

*To believe with all our heart in our people, our parents, our teachers, our leaders and the righteousness and victory of our struggle.*⁷⁴

Throughout centuries of oppression, Black people have sustained the essence and vitality of who we are through our faith. Our Imani has long persevered and continues to persevere beyond the injustices that have attempted to brand the Black soul for centuries on end. Our sustaining faith will always carry Black people through adversity. This Black faith is not in crisis or peril. Black faith remains strong. However, the Black community is at a theological crossroads - we must acknowledge long-held frameworks that have never been worked for our faith or our people. Imani is the glue that holds us together now and forever. We must stop defending perverse, oppressive principles and practices which debilitate the faith of many in our communities. My ultimate goal for this project is to journey with Black faith communities to reconnect home to their sense of who *they* authentically are. This is a personal and collective journey. Each person must have the autonomy to access, heal themselves in the way that their soul is calling them to do. In working with Black faith communities, the mission of this project is to prioritize and curate safe faith spaces for Black people, specifically promoting safe places for Black

⁷⁴ Ibid.

women to heal aspects of their being that have been wounded. Moreover, this project aims to help faith communities to heal in a way such that we become tolerant of difference while also returning to the base of a collective identity which invites and celebrates creativity and uniqueness. This work can best be evaluated by the participants of the program and will also be assessed through a “healthy faith community” survey to measure the health and safety of the faith community.

In closing, the seven principles of Kwanzaa must be gradually but intentionally grafted into the fabrication of what holds Black people, yet along Black women together. HIV remains an epidemic and a crisis. Highlighting how Black women are unjustly advocated for in this work is a goal that I would like to help Black faith communities to better understand and make the commitment to collectively do the work.

CENTERING THE CIRCE:

TRANSFORMATIONS HEALING CIRCLE GUIDE

Explain the ritual and symbol of the circle:

In the circle we include:

- **Centerpiece:** The **centerpiece** represents the collective gaze. It is a centralized place the participants can place their gaze when in deep thought and reflection.
- **Incense/Sage:** continual ascending prayers to Most High. Equally, the smoke represents the Spirit that is always present, not absent from us. Also, cleansing the space that we dwell in.

- **Fruit Offering:** An ancestral offering for our ancestors. This food serves as an act of serving, nurturing, and nourishing our ancestors who work on our behalf.
- **Water:** Setting out glasses of clean cool water on an ancestral altar is an age old tradition in Afro Diaspora spiritualities. The water serves as a conduit for spirit communication. The clear water ensures our communication is not muffled with them so we can be confident the connection with them is authentic.
- **White Candle:** We carry the light of the Divine and we light the candle as an offering and commemoration of our ancestors.

- **EXPLAIN CENTERING-**

What is centering: it is a time to go in with interior silence to build an internal altar. A time to BE STILL and know that Divine is divine and you are too.

Now let's practice:

Get in a comfortable place

We will take three cleansing breaths:

Close your eyes:

- **1 Breath in**
Breath out
- **2 Breath in**
Breath out
- **3 Breath in**

Breath out

Keep your eyes closed:

We will move through centering phrases:

Repeat after me:

I am worthy! I am enough!

In this space we honor the presence of the Divine, a presence that is never absent.

I honor myself, I honor how magnificent and unique that I am. I am a unique expression of a divine cosmic unfolding.

I honor my neighbor, I honor those that I hold space with in this circle. May this circle light the flame to each of our purposes.

- Now Let's sit in the stillness for a moment::;
- Now we can open our eyes

Again, Welcome to Transformations Healing circle 

A curated community for ALL. It is a place to forever burn the flame where all can gather to learn from the other. We do this by committing to deep listening, sharing our stories, daring to be courageous to ask the questions, and most importantly to make meaningful spiritual connections with others on their transformative journey.

This is a place where:

- We treat each other with kindness and respect.

- We are open and affirming space, we are multifaith, we are a space where one can come and discover, enhance, cultivate, wrestle, honor and confidentially share their sacred truth.
- We listen deeply and intently.
- We honor each other. We all have a way that we derive to resolution. We hold space as this happens.
- We honor and trust the guidance of the Beloved Spirit to lead us through our silence to get to our answer.
- We will hold each other through our healing personally and collectively.
- Let's heal magically, spiritually together.
- I invite each of you to set an intention that you desire to give and receive from this community while you are here?

Topic of today:

**COLLECTIVE HEALING FOR BLACK WOMEN - UPLIFTING BLACK
WOMEN LIVING WITH HIV**

Our body is not an apology! Sonya Renee Taylor

Brene' Brown , an expert on vulnerability and shame says, “ If we can share our story with someone who responds with empathy and understanding, shame cannot survive.”

LESSON 1: The State of The Black Woman

The Black woman is not a monolith. Our ethos is beautifully complex, uniquely different, but somewhere in the midst of it all, there is often a silver line in our narratives. The state of the Black woman can be addressed through a global lens. Nonetheless, the state of the Black American woman is one that this project aims to highlight and to care for. Black women are known to have an otherworldly strength and resilience that are in fact true but not presented in a way that is uplifting to her overall wellbeing. Black women have suffered and unjustly endured generations upon generations of dehumanizing systemic traumas that unfortunately remain in the bones and marrow of the present generation. Her body has endured abuse of all sorts that resulted in intergenerational trauma that often left her. silences Black women have often been prevented from speaking truth about the harm, the pain, and the abuse that they were conditioned to endure. This most manifests itself in the way that we ignore our pain, physically, emotionally, Dr. Thema Byrant, PhD. states, “ Black people in America have necessitated the mastery of masking emotions of discontent in particular. While survival is important, the suppression of our feelings comes with a cost.”⁷⁵This calls for an unlearning for Black women. We are reclaiming our health and wellbeing and we need Black faith communities to do just that!

Black faith communities have been both the refuge and the storm to this with Black women, However, we do wish to admonish the historical credibility of Black faith communities being a primary space where the Black body could find reprieve from a world that detests the site of Blackness.

⁷⁵ Dr. Thema Bryant, HomecomingP. 15 (A TarcherPerigree Book Printed in the United

This project focuses on Black faith communities reclaiming their full selves and doing away with what no longer serves us individually and collectively!! This project aims to provide balm for Black women who have been most overlooked. If not for the Black woman, the institution of Black faith community would be little to no existence. This is not to suggest animosity between Black men and Black women but it is to suggest what the Black woman has been to her faith community. Black women have been the base and structure from which this country and most institutions gain strength from. This placement has positioned Black women's backs against the wall. Black women have been fighting and resisting the burdens and chains of bondage that the systems of this country yet along her faith community continue to try and exact upon her. Black women have broken shackle after shackle that has been placed upon her. Yes, she is strong, yes she is resilient, but she and her ancestors are exhausted. Black women's bodies carry so much. There is joy but there is also pain. She carries the joys and pains of the women in her life. She carries the grief and trauma of her grandmothers, mothers, aunties, and wellbeing must be prioritized in houses of faith. Most notably, Black houses of faith. She has given and sacrificed her entire life and often wellbeing for her faith community. It is time that we place accountability upon these structures of faith and reclaim the Black woman's body back.

Question to participants:

- *What do you think about the state of the Black woman?*

- *Reflect on the women in your life. In which ways have you witnessed them sacrifice themselves for their families, for others? How has that shown up in your life?*
- *Take a moment to reflect on your life. In what ways would you like to see your faith community show up for the Black women?*

Exercise:

Close your eyes, breath, inhale and exhale:

Prayer of acknowledgment: In this moment, I reflect, I think about all that I bring to this moment. I think about myself, my mother, my grandmother, for the guardian that has brought me to this moment. May I allow the gifts that desire to flow through me, may I agree to let it flow through me, for my ancestors, and for that is to come. I am a divine portal of healing for Black women and for humankind. I must be in agreement with that which I Am and from here may I be at service to humankind. I no longer sacrifice myself for the greater good but I get out the way and know that I am enough, every Black woman deserves to be radically whole and healed!

Lesson 2: Black women living with HIV - why they need our advocacy

Audre Lorde states, “I am not free while any woman is unfree, even when her shackles are very different from my own.” Black women living with HIV are not shackled nor oppressed because of their diagnosis. Early diagnosis that links treatment to care is the ultimate goal in HIV awareness and education. There are a number of Black women living the virus who are thriving and there are those who this work is calling forth to come out of the shadows of shame and invisibility to be holistically cared for.

Unfortunately, Black women living with HIV have been marginalized within the framework of HIV advocacy. There is an abundance of resources and support for other groups living with the virus. There is a growing network of those living with the virus and those who advocate for the matter that are curating intentional, safe spaces for Black women who need the support. Patricia Hill Collins states in “Sisterhood Heals, The Transformative Power of healing in community, “In the comfort of daily conversation and humor, African American women as sisters and friends affirm one another’s humanity, specialness, and right to exist.”⁷⁶ Black women are leading in numbers for women living with HIV. The Centers for Disease Control and Prevention states, “FOR BLACK WOMEN, 91% of new HIV infections were attributed to heterosexual contact while the HIV infection rate among Black women was the highest compared to women of all other races and ethnicities.”⁷⁷ Black women living with HIV deserve the support and care of their sisters in their faith community. Black faith based organizations are a central institution for this advocacy, prevention, and care. The Black church is a primary source to address these social injustices and determinants that are greatly impacting the Black women. The National Institutes of Health states,

“One largely untapped prevention resource is the Black Church. This institution—which refers to the collective body of diverse Christian congregations with which African Americans are connected [5]—has long provided a platform for African American civic engagement on social injustices [6]. Since slavery, the Black Church has provided social support to cope with myriad forms of racism [7]. Its preaching, prayer, and music have sparked community-level actions to meet African Americans’ physical and mental health needs [8]. This suggests that the Black Church has considerable potential to influence how African Americans think about and address health problems [5].”⁷⁸

⁷⁶ Joy Harden Bradford, *Sisterhood Heals, The Transformative Power of Healing in Community*, p. 51

⁷⁷ <https://www.cdc.gov/nchstp/newsroom/fact-sheets/hiv/black-african-american-factsheet.html>

⁷⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5481215/>

Questions:

1. Do you know of a Black woman living with HIV?
2. As a Black woman how do you offer her support and care?
3. Does your faith community offer support and care for Black women living with HIV?

Exercise: Embodied Writing:

Writing is a powerful tool that opens the gateway of our hearts. In this exercise you are invited to use your imaginations. Close your eyes, imagine yourself in the presence of your mother, grandmother, a guardian, the women in your lineage if you know them. Imagine yourself asking all of the questions that you always wanted to ask and have not for various reasons. Write a letter to yourself after recently finding out your diagnosis. Take note of how you feel in your body as you are writing this letter.

Part Two of Exercise: How will you tell your faith leader about your diagnosis, In your current context do you believe it is safe to disclose your status?

LESSON 3: Why is our collective healing important?

3 John 1:2 - “Beloved, I pray that all may go well with you and that you may be in good health, as it goes well with your soul.” Healing is an inherent human right to every person that is a part of humankind.

To know that our healing is important to Most High consoles the hearts, minds, and bodies of a suffering world. Healing of some sort will always be a part of the human condition. The need of healing reveals our humanity. Therefore it is important to place

the necessary healing tools in one's life journey. Indifferent of what type of healing that one is in need of, forgiveness is a consistent theme that normally applies to all. As Black women, how do we reckon with spaces that essentially give no damn about us! Each must come to their own place of reconciliation.

As we embrace our journeys, the meaning of healing is quickly demystified and best understood as one being provided the opportunity to practice forgiveness over and over again. The Biblical texts states in Matthew 18:22 (KJV), "Jesus saith unto him, I say not unto thee, Until seven times: but, Until seventy times seven." This implies that we will need to forgive ourselves, and others over and over again. The difference in this healing journey is unpacking and debunking harmful ideologies of forgiveness. This journey of healing is calling us to unlearn and relearn healthy boundaries that uplift our overall well being.

Healing is a word that is often associated with physical or health disparities. Understanding and possessing the knowledge of healing as it relates to one's inner journey is a discourse that is rarely addressed in faith communities. The discourse related to healing often shows up when discussing mental and emotional wellbeing. Our mental and emotions are vitally important to vitality, health and wholeness. This is fundamentally one of the main reasons for healing.

As Black women of the Diaspora, there are traumas that we hold in our DNA that dates back several generations ago. Our healing journey is a gateway to intergenerational healing. In reclaiming our Black agency, we reclaim our rights to be made whole and well.

Healing in isolation is not therapeutic. Collective healing is a powerful tool for humanity. We are to draw strength from one another. To hold space for another in the midst of one working through their trauma and to hold space with them with delicate care as they respond to the trauma that comes up. Joy Harden in “Sisterhood Heals, The Transformative Power of Healing in Community” explains, “Holding space refers to creating a figurative container for others to share openly and honestly. It is creating an environment that feels safe and supportive enough to share the whole story.”⁷⁹

Questions:

1. *Why is our collective healing important to you?*
2. *You are the daughter of who? She is the daughter of who?*
3. *Alice Walker mentions when we are In Search of our Mothers Gardens that we often find our own. How has knowing and understanding the story of your mother, grandmother helped you to better understand yourself?*

Exercise: In this exercise, we will utilize materials from The National AIDS Memorial Quilt. This project is “Changing the Narrative” by ensuring that untold stories by African Americans who transitioned from complications of AIDS are included in this monumental project. As women of the African Diaspora, we are not a monolithic group. However, there is a silver lining in all of our stories. This exercise will be a collaborative activity with the other women at your table. Imagine an interwoven story that each of you would like to narrate through your quilt. Let the quilting begin!

Art therapy: Quilting

⁷⁹ Joy Harden Bradford, Sisterhood Heals, The Transformative Power of Healing in Community, p. 67

Ecclesiastes 3:7(Wycliffe) Time to cut, and time to sew together; time to be still, and time to speak (time to be silent, and time to speak).

Quilting is an art medium that has vibrantly been used within the Black community for story telling for several generations . Quilting provides an opportunity to weave our fragmented stories together. Imani Bashir explains the history of the quilt,

“The history of quilting in Black American culture began as early as the 17th century, with enslaved women threading, sewing, and quilting together patchwork blankets made with scraps of fabric from slave owners’ households. Quilts not only as bedding but as messengers that could be enlisted in their collective journey toward liberation. Quilts featured certain patterns to outline escape routes and mark places of refuge on **the Underground Railroad**. They became unspoken yet sophisticated mnemonic devices.”⁸⁰

Lesson 4: Inside My Body, Somatic Practices:

1 Corinthians 6:19 (NIV) Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God?

Trauma disconnects us from ourselves, most importantly from our bodies. As a Black woman of the African diaspora, your body remembers. Your body not only remembers your trauma but it stores the memory of 14 generations. Science has proven that.

Signe Dean states, “Scientists Have Observed Epigenetic Memories Being Passed Down For 14 Generations. The most important set of genetic instructions we all get comes from **our DNA**, passed down through generations. But the environment we live in **can make genetic changes**, too.”⁸¹ Consequently, within the African diasporan body

⁸⁰<https://www.sleep.com/sleep-design/history-black-quilting#:~:text=The%20history%20of%20quilting%20in,families%20warm%20throughout%20the%20nigh>

⁸¹<https://www.sciencealert.com/scientists-observe-epigenetic-memories-passed-down-for-14-generations-most->

are 14 generations of stored memory from our ancestors who were enslaved through the TransAtlantic Slave Trade. The memory of being sold from their home, the passage, the disconnection from family and loved ones, sexual violation, physical, mental, emotional, and impoverished abuse flows through the blood from one generation to the next.

Unfortunately, religion has been a major source to intergeneration trauma that remains within the Black body. Somatic practices, therapies and rehabilitation serve as great tools for us to heal. Define somatic - Resmaa Menakem states,

“Few skills are more essential than the ability to settle your body. If you can settle your body, you are more likely to be calm, alert and fully present, no matter what is going on around you. A settled body enables you to harmonize and connect with the other bodies around you, while encouraging those bodies to settle as well. Gather together a large group of unsettled bodies—or assemble a group of bodies and then unsettle them—and you get a mob or riot. But bring a large group of settled bodies together and you have a potential movement—and a potential force for tremendous good in the world.”⁸²

Exercise: AUTHENTIC MOVEMENT:

“Authentic Movements include therapeutic, spiritual, and artistic applications (Bacon 2015; Pallaro 2010). A popular element of the Authentic Movement is the dyad form (Adler, 2007). The dyad form involves a mover and a witness working on a one-to-one basis. During this process, the mover closes their eyes and allows their movement to arise in the presence of the witness. Following a dyad session, a space for reflection is

[animal#:~:text=Scientists%20Have%20Observed%20Epigenetic%20Memories%20Being%20Passed%20Down%20For%2014%20Generations,-Nature27%20April&text=The%20most%20important%20set%20of,DNA%2C%20passed%20down%20through%20generations.](#)

⁸² Resmaa Menakem, *My Grandmother’s Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies* (Las Vegas, NV: Central Recovery Press, 2017), 151.

opened, and the mover and witness articulate their experiences through language.”⁸³

FIND A PARTNER: The fire of dance, Find you a partner and move through the dyad form, “where the mover closes their eyes and allows their movement to arise in the presence of the witness.” The exercise calls for both participating as the mover and witness.”

Reflection: *15 minute discussion of experience.*

Lesson 5: (Reiki exercise) energy healing

Mark 16:17-18 New King James Version, “*And these signs will follow those who [a]believe: In My name they will cast out demons; they will speak with new tongues; 18 they [b] will take up serpents; and if they drink anything deadly, it will by no means hurt them; they will lay hands on the sick, and they will recover.*”

Reiki is a healing modality that helps move through stagnated energy in the body. Reiki is not FDA approved, however, it is an ancient Japanese practice that has revolutionized the healing of many. Scripture explains how we are to “*lay hands on the sick and they shall recover.*” Reiki carries the same technicalities. Reiki practitioners should be trained and certified to help individuals who are emotionally, physically sick. This exercise encourages us to integrate an effective healing modality into faith spaces.

⁸³ Fae Wolfe (2023): Women of colour and somatic movement: an emerging narrative, *Body, Movement and Dance in Psychotherapy*, DOI: 10.1080/17432979.2023.2249516

Reiki is an effective tool to help Black women to holistically heal. Reiki has the ability to open women to an array of healing that can radically expand their capacity to include healing modalities that are otherwise demonized. **Reiki**, “Healing through the laying on of hands **Reiki** is a form of laying on of hands that works on a physical, mental and spiritual level. **Reiki** is primarily about strengthening the self-healing powers and showing the body the right way to harmonise. **Reiki** can be integrated into everyday life and how one can increase health and well-being and maintain or regain inner balance.”⁸⁴

Exercise:

Questions:

1. *Do you feel that your religious beliefs support Reiki?*
2. *What are examples of self-care and healing that you employ in your life?*

Reiki practitioner - lead group through a series of reiki exercises

Lesson 6: Heal your money: addressing the financial legacy of and for Black girls and women

When discussing Black intergenerational trauma, finances are often left of the conversation. Historically, the Black community has not had an economic advantage. Economic injustice continues to be a polarizing systemic matter within the United States for Black Americans. Economic injustice continues to be a disparaging matter for

⁸⁴ Dr. Angela Fetzner. 2023. *Reiki : Healing Through Hands-On Therapy*. [N.p.]: Babelcube Inc. <https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=edsebk&AN=3689773&site=eds-live&scope=site>.

women, most particularly for Black girls and women. *The Other America: African American Women Living In Poverty* article reported, “The economic injustice of poverty continues to influence the discrimination and inequality of women rights across the nation, specifically African American women.”⁸⁵ Economic injustice offers an opportunity for Black women to join arms to critically and strategically think of ways to improve their economic well being in the face of a system that does not care about their economic well being. In this lesson, we will explore conversations with leading Black women financial advisors and experts who can provide practical knowledge that will impact generations to come. In doing this, there will be an interplay in how Black women’s financial wellbeing will largely impact their social and health wellbeing.

Exercise:

1. What is your relationship to finances?
2. What has been your familial/generation relationship with finances
3. Do you think of establishing a financial legacy for yourself? What prevents you from doing this?
4. Do you feel that you have the tools to do what you desire?

Lesson 7: Sexual/Reproductive Health: addressing and restoring a healthy sexual ethic for ALL Black women.

Our womb is one of the most powerful portals on this earth. In better understanding the full power that our reproductive system contains, this serves as

⁸⁵ Randle, Brenda A., and Sandra L. Combs. “The Other America: African American Women Living in Poverty.” *Race, Gender & Class* 23, no. 1–2 (2016): 108–17. <https://www.jstor.org/stable/26529192>.

an opportunity to draw from ancestral knowledge and wisdom to guide us home. Black women's bodies have endured a lot of pain and trauma. Epigenetics covers the span of 13 generations. You do the math. We can only account for the atrocity that we know slavery did to our ancestors. Our ancestors' bodies were used as breeding machines and a means to appeal to the sadistic, vile nature of slave oppressors. Our wombs carry energy. Black women's reproductive health serves as an opportunity to embrace holistic health. Conventional health - have a working relationship with OB/GYN, primary care doctor to care for your reproductive health. In addition, our nutrition is vital in this process as well. Queen Afua, Sacred Woman: A Guide to Healing the Feminine Body, Mind, and Spirit, has committed years as a holistic womb practitioner and healer. She has devoted her work in guiding Black women into their holistic health journey with special emphasis on reproductive care. It is important to have the conversation centered around reproductive health. Black women living with HIV are often misappropriated as being high risk, highly promiscuous women. Informed Sex education must become a part of healthy dialogue for Black women. We should continue to educate and practice sexual health, responsibility and care for ourselves and others.

Questions:

1. How would you rate your reproductive health and care on a scale from 1 to 5 (1 being the lowest, 5 being the highest)?

- 1

- 2

- 3

- 4

- 5

1. Do you think that reproductive health should be a part of our discourse in faith communities?
2. Do you think faith leaders and communities are open to reproductive clinicians, sex educators collaborating for credible education opportunities for all groups?
3. Do you feel that you have access to credible resources for reproductive and sexual health education?

Queen Afua's Womb prayer:

Sacred Woman as Holistic Medicine/Woman as Healer/The Gateways as Holistic

Medicine

I Am a Woman of Womb Enlightenment
I Am a Woman of Divine Intelligence
I AM a Nature Woman

I AM a Woman of Sacred Spirit Dance
 I AM a Woman of Grace and Beauty
 I AM a Woman of Intuitive Skill
 I AM a Woman of Natural Medicine
 I AM a Woman of Harmony and Balance
 I AM a Woman Supreme Love
 I AM a Woman Vision
 I AM a Woman of Cosmic Time
 I AM a Woman on Purpose⁸⁶

Resources:

- **Black Women and Reproductive Health: Fast Facts**
<http://blackrj.org/wp-content/uploads/2015/10/BlackWomen-andReproductiveHealthFS.pdf>
- **Reframing Sexual Health for Black Girls and Women in HIV/STI Prevention Work: Highlighting the Role of Identity and Interpersonal Relationships**
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8621381/>

Lesson 8: Nutritional Counseling: Licensed Black Dieticians address healthy body positive conversations that will aid Black women in eating high vibration foods that aid on holistic well being

Black women must have fair representation and definition of what it means to be healthy. Due to a lack of equitable research, comprehension of Black women's bodies have been castigated into the shadows of the Eurocentric body. Dietician Jessica Wilson states,

“As training was limited, it was easy to adopt the common perception in the field that all women adopt disordered eating patterns for a sense of control and a desire

⁸⁶ Afua, Queen. *Sacred woman: A guide to healing the feminine body, mind, and spirit*. One World, 2012. xx

for thinness, visibility, status, and the male gaze. Eating disorders in Black women and other folks whose bodies don't conform to societal requirements are often different — and more harmful — quests. White women, by virtue of being white, are closer to this culture's racist body ideal, and therefore closer to feeling safe and seen, even as they may also hold marginalized identities. Black women will never come close to the body ideal that whiteness upholds — thin will never be thin enough to tame a Black woman's body.”⁸⁷

Unfortunately food that is most associated with the Black American community has been criminalized to be unhealthy, or othered to something less than. Food access, food security, and affordability are social and health determinants that are impacting the overall nutritional health for Black women. Black women deserve proper representation and education about the state of their bodies. Related states of trauma, stress, socioeconomics impact the holistic health of Black women. Heal the trauma and you will heal Black women's relationship to nutrition. This does not suggest that all Black women have poor nutritional health, however, it is to suggest that comprehending our intrinsic motivating factors that informs our nutrition choices is vital for our holistic health. In this exercise, we engage in discourse and praxis with Black dieticians that will provide practical nutritional knowledge that will aid Black women in eating higher vibrational foods that will holistically heal them.

Exercise:


1. What is your relationship to food?
2. What frames your daily food choices? (tradition, stress, affordability?)
3. Do you consider yourself an emotional eater?
4. Do you feel that you have a well balanced diet?

⁸⁷ <https://www.thecut.com/article/book-excerpt-jessica-wilson.html>

5. Eating disorders can be disguised as many things. Do you feel that you have had one in your lifetime?
6. Do you find yourself secretly shaming yourself for your food choices?
7. Is your food reflective of your high vibratory life?

Lesson 10: Closing exercise/closing letter


MAĀT



- **Seven virtues** that are key to human perfectibility
- **Unlock** the latent power of spirit.
- When **adhered to** will reveal their inherent wisdom to us
- Living references for behavior that reflect our ability to **live with intelligence**
- **Powerful tools** for strengthening, protecting and sustaining the relationships, institutions and structures necessary for the well being of our people

TRUTH that you espouse
JUSTICE that you support
RIGHTEOUSNESS/Propriety that you do
HARMONY that you bring
BALANCE in your personality
ORDER that you establish
RECIPROCITY in your relationships

THE ASSOCIATION OF BLACK PSYCHOLOGIST INC.



- Reflecting on the journey of the healing circle
- Sharing personal growth and insights
- Closing ceremony with gratitude and celebration

Chapter 6: Conclusion:

Transformations Healing Project Retreat Analysis - From theory to practice

As a healing certified Sawubona healing circle facilitator, I entered this retreat with the overall purpose to increase capacity skills and provide cultural competency to traditional Black faith communities about their responsibility to provide holistic healing care to Black women. This retreat curated a safe, sacred space for Black women to collectively heal. In curating this radical healing space for Black women, the intention was to design a trauma informed curriculum/ module for the collective Black woman ensuring focus on Black women living with HIV.

I facilitated a one day workshop at my father's church. This was a testament within itself as I exiled this space due to religious trauma. To re-enter this space to do radical inclusive healing justice work including non-conventional healing modalities was healing in itself. I entered this space with six Black women from two Black Southern faith communities. One community was a traditional Christian non-denominational congregation and the other was from a local traditional Sunni Masjid. It was important to situate this project and curriculum with the ability for multi-faiths to move through it together. HIV amongst other social and health disparities are not targeted to a specific faith. The epidemic is impacting the entire community, indifferent to one's religion. Having the opportunity for two faith communities to come together with different religions highlights how religious trauma is not an issue and matter of one religion. The propensity and opportunity for abuse and miscarriage within a spiritual community can easily happen. Bias, discrimination, stigma are very informed from harmful religious texts, rhetorics, and traditions that often others and marginalizes

persons who do not operate within the absolute dualities that rigid, harmful religions often present.

Social and behavioral changes towards social and health determinants like HIV are essential for faith communities. Unfortunately, a matter that is a public health crisis has unjustly become a moral crisis. As a result, HIV advocacy is often approached with a long arm approach. The majority of faith leaders are unaware how spewing theological venom is very harmful and has sadly shaped the behaviors of the majority sitting within congregations. Unjustly, this has unfair consequences for persons living with HIV who may be silent and invisible within many of their faith communities. The retreat is a case study that provides insight for all persons who will move this healing, restorative justice work forward.

How To Compose An Analysis Section states, “The analysis section of an academic essay is concerned with analyzing the results you have achieved through your research. The analysis should aim to answer questions such as:

- What do these results show?
- What are the possible consequences of these results?
- Has my thesis statement been satisfied by my research? If not, why not?

What do these results show?

The results of this retreat revealed that women in faith communities are far more interested in engaging in critical conversations that will increase their capacity and

reliability to social and health determinants that are largely impacting the Black community. This gathering revealed several of the women had family members who have transitioned due to complications of HIV/AIDS. Many of the women had similar stories of their families experiencing high levels of shame and trauma in losing loved ones who have transitioned from the complications of this virus. Each of them witnessed their loved ones who lived with HIV/AIDS be deeply stigmatized because of the virus. Another common theme and message that most in the Black community find themselves saying is that they did not know that HIV/AIDS remains a public health crisis. They assumed that it was no longer an issue and mysteriously went away. This finding highlights how this public health crisis has been racialized. This virus has been silenced because it has been stabilized in communities that most matter within US society. If white people are no longer dying, then a matter is no longer a matter. Therefore, the results of the retreat identified that Black women are less rigid about HIV advocacy, support, and care than assumed. Once the curriculum was covered and the women participated in the exercises and discussed their reflections and experiences, the majority left ready to do the necessary work to end this epidemic. In addition, the results show that future retreats should have a balanced representation of women living with HIV for participation. Initially, the retreat included having one Black woman living with HIV to be present to share their lived experience with the virus and their personal experience and engagement with their faith community. Results revealed having only one woman living with HIV present in the group may not reflect safety and trauma informed care. The overall results reflected a group of Black women who were willing and ready to come in space for collective healing. Collective healing provided an opportunity to uplift storytelling as a

gateway to see how ultimately we are interwoven in the same fabric of life. Therefore, the enlightenment and awareness came that they are ultimately each other's keeper.

What are the possible consequences of these results?

The consequences of these results reveal that the assumption of doctrinal intolerance that is often associated with conservative faith groups can be stigmatized. Stigma is a bias that we all have to face and confront. Each of the retreat participants, including myself as the facilitator, have our own biases. In doing justice work, it is easy to discriminate and judge those that we have righteous discontent with. It was through facilitating this group and introspectively assessing my own biases that I am able to critique that we all stigmatize ideologies that are not in full agreement with our theological and social framework. In having this insight, the decentralization of power is immediately centralized. In this moment we all understood that we came to do the work together. The results of the retreat provided insight into how vital it is to have a curriculum designed that lays the foundation for the healing work and purpose to begin. It was through observational learning and active listening, I was able to determine that to effectively expand the capacity for cultural competency for women who do not live with HIV will take additional modalities for support. Therefore, a pre-evaluation and post-evaluation will be pivotal. To effectively move the needle forward, will take time. The opportunity for all Black women to come into space to heal collectively is there. However, these spaces will need to work with skilled and credentialed practitioners to safely do this work.

Has my thesis statement been satisfied by my research? If not, why not?

My thesis statement has been satisfied by my research. Through my research, praxis, and qualitative research it has been discovered that Black women living with HIV have experienced religious trauma, and some not all have been silenced in their faith community. My research can be extended and supported by discovering that 6 out of 6 retreat participants when asked the question, “*Would you feel comfortable telling your clergy about your status?*” Each participant conveyed if diagnosed with HIV they would not feel comfortable telling their clergy about their new diagnosis because their clergy identify as male. The intent of my thesis was to provide awareness to Black faith communities about how Black women are disproportionately impacted by HIV in very pervasive ways and to provide insight in ways that Black women living with HIV and other health disparities need intentional support and care. This research is a means to bring them out of the shadows of invisibility and silencing. Consequently, the findings of this research have added another layer to be addressed. Black faith spaces must ensure the representation and engagement of female pastorship and leadership for those who identify as women. Black women not feeling comfortable sharing their health status with their male clergy is highly problematic. Sexism continues to show up in most subtle ways through institutions, and powers of structures that we are fundamentally reliant upon. **The Limited Empowerment of Women in Spiritual Churches: An Alternative Vehicle to Religious Leadership** explains, “Despite their active religious involvement, women in American society historically have been denied access or faced severe restrictions on positions of religious leadership, particularly clerical ones. Even in recent years, as many mainstream denominations have ordained an increasing number of women ministers, organizational barriers tend to place an “invisible ceiling” on their

opportunities to obtain either pastorates in larger congregations or higher-echelon ecclesiastical positions (Lehman, 1985).”⁸⁸

In closing, Black faith continues to be the bedrock for the Black community. In order to end the HIV epidemic, it must end in the US South. The US South historically and continues to be the Bible belt of the United States of America. The Bible weaponized the enslaved and continues to do the same for the descendants of the enslaved. Ending the HIV epidemic in the US South is a segue way to embrace a new theological landscape and frameworks and to place aside those that continue to be harmful and ultimately divide. This project proves and will continue to prove that once the problem is identified, discussed, and assessed. The potential and power lies in collectively healing, ensuring that our justice work amplifies the voice of the least of these and those who have been cast to the margins and isolated from loved ones and their faith communities.

⁸⁸ Baer, Hans A. “The Limited Empowerment of Women in Black Spiritual Churches: An Alternative Vehicle to Religious Leadership.” *Sociology of Religion* 54, no. 1 (1993): 65–82. <https://doi.org/10.2307/3711842>.

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APPENDIX:

This section is quantitative research where I conducted 3 interviews with Black women living with HIV. Each interview highlights the lived experience of Black women living with HIV and the impact that religion, social, and health determinants have affected their journey and experience. Each Black woman lives in the US South. Each interviewee has a unique experience and point of view that uplifts and amplifies the aim and focus of this research process. Each interviewee has an experience with religion and clergy that can better inform faith leaders, faith communities, on best trauma informed practices and care that they can offer persons living with HIV.

Interview 1: 40 year old Black woman living with HIV

Interview 2: 65 year old Black woman living with HIV

Interview 3: 47 year old Black woman living with HIV

Question 1: Please share how you found out about your status:

Interviewee 1: 40 year old Black woman living with HIV

Sure. It was after a second kidney failure. I was in the hospital and they were running a lot of different tests, trying to figure out why my kidneys kept failing, and one of the tests was for HIV, and I didn't know it at the time.

Wow. How was it for you when you found out?

Life changing. I remember my mom was in my room when I found out. They didn't ask, "Is it okay if we talk in front of her?" Or anything like that. The doctor just blurted it out, and I looked at my mom and my mom looked at me, and the lady just walked out the door.

Interviewee 2: 65 year old Black woman living with HIV

Yes. I was in New York at the time. I think it was about 30, I'm 62 now.

And the family doctor, and I kept getting yeast infections, acting out, very promiscuous. I was looking for love in all the wrong places.

I was always experimenting and didn't realize at the time that I was an addict. So I kept getting yeast infections. And so my family doctor suggested that I get an HIV test and I'm like, I don't have HIV. Because at that time, it was in the nineties and they kept showing it on TV that it was gay white men that got it. So I know I didn't mess with no gay white man. So I didn't have to worry about it. But I said, "Go ahead." He has been my family doctor for years. I said, "Go ahead, you could give me the test." So at that time, the test took two weeks for you to get the results back.

So I remember them calling me in and my doctor did not see me. It was the nurse. I remember her bringing me in a room and she just put the paper in front of me and she left. So I'm looking at this paper and I see where it says reactive And I must have stayed in that room for a couple of hours and nobody came in. My doctor didn't come back in,

the nurse didn't come back in. So I just started crying and then I said, "Well, I'm going to die and if I'm going to die, I'm going to turn it up." That's what I said to myself. And I left and I continued. I started using real, real bad because I started thinking about who gave it to me and didn't tell me? How did I get it? All this kind of stuff. And then for the doctor just to leave me there. Nobody checked on me.

Interviewee 3: 47 year old Black woman living with HIV

Okay. My mom and I went to donate blood at the Red Cross, and I decided to schedule more donations. But whenever I went into their app, it kept giving me some wild date of October 2189 or something like that would be the next time I could donate. So I called thinking something was wrong with the app, and I kept getting the runaround. And I knew something was a little off because one of the times that I called, the lady I spoke to said, "Well, have you been having risky sex?" And I'm like, "No. And what does that have to do with me donating blood?" And so she said that she was going to have their social worker come, social worker, case manager or somebody to give me a call.

So one day the case manager called me, asked me was I sitting. I was driving, so technically I was sitting. So I was like, "Yeah." And she told me that I either had HIV or I had, it just left me. Oh goodness. What type of cancer is that my dad had? Leukemia. And so she was like, "You either have HIV or leukemia." It's inconclusive, so you need to go have a second opinion done. So I went to a doctor, my primary care physician, and she did the exam and said that I was positive. Yeah.

Question 2: Were you afraid to share with anyone?

Interviewee 1: 40 year old Black woman living with HIV

No, I wasn't afraid. I was more ashamed and afraid because I wasn't sure how people would receive it or how they would treat me, just afraid that they would treat me differently, but everybody that I've told, they never treated me any differently. Treated me as the same person I've always been.

That's good. That's good.

So have you ever experienced any levels of stigma from anyone?

Just once. When I was applying for my disability, my lawyer, he just assumed that I was gay because I had HIV. And I'm like, "No." Well, how do you know where you got it from? Because I know.

Were you partnered at the time when you found out your status?

No, I was in Barton at the time. It was someone that I had known for over 20 years, and we had been on and off again.

Did that hurt you even more because you knew them for the time that you knew them?

Yes.

So your trust was violated?

Yes, very much so.

How did you have the discussion with them?

Well, when I found out at first I waited to see if the person was going to say something to me about it, because they knew I had been going back and forth to the doctor, and always was like, "Well, what are the doctors saying? What are the doctors saying? What are the doctors saying?" And I was like, "Why do you keep asking me that?" Oh, no reason, just trying to see. And when I finally told him, he was like, "Oh, okay, well thank you for telling me. I'm glad I found out from you instead of someone else."

So did he know his status?

He's saying no, so I have to go by that. I don't think so, because of the history we had, but I was like, "Okay, I can't focus on that. I have to focus on myself. I have to take care of me now."

That's good, which is very true. Wow.

So you haven't talked with him since then?

Every now and then I'll get a phone call to see how I'm doing and everything, but they still say that they're negative.

Wow. Wow

Oh, that's even worse.

Interviewee 2: 65 year old Black woman living with HIV

Yes. Because at that time I managed to have a job. I worked at Rikers Island, and all I kept remembering when I worked there, I lost a job because of my drug use. But before I left, I was put in charge of a particular unit that these individuals weren't coming out of. They had to stay locked in their cell. And I remember putting on all this garb, face... you know how you do when you go for radiation? You got to put on the head mask, you got to cover your body, you gotta put the foot stuff on. I was like, well, what is this that they're doing that they got to dress up like this? So I was given a tray, they opened the door and they told me to go in and give this person the tray. So I did that. And I said, "Good morning. Here's your tray." And the person started crying and I said, "Well, what's the matter?" He said, "Nobody has talked to me for the six months I've been here."

So that always stayed in my mind. At that time, he was a transsexual. That's what they called them back then. And she was arrested in between getting her shots. So if you didn't complete the series, I remember her being so deformed. She was getting shots in her face, that was deformed. She got shots in her chest that were deformed. And I just kept remembering. I didn't know years later that I would... And I asked, I said, "Well, what is going on?..." And they told me that she had AIDS. So that was my first experience with that. And I was like, I didn't understand that, but it stuck with me. So now I have it and all I could think of is don't tell anybody. Don't tell nobody because that's how they're going to treat you.

Don't tell anybody. I didn't even tell my family. I kept it to myself for about, I think a good eight years.

Wow.

I didn't tell anybody.

I went to treatment in Florida, I got clean and I still didn't tell. I stayed out in Florida for a while, got into a relationship. I'm having sex and I ain't telling nobody. I'm not going to the doctor. I just act like I ain't having it, to be honest. I act like I ain't having it.

So after having three years clean, I end up moving in with this guy right from treatment and we move in together. And then he started using it and I started using it again with him. I ended up coming back to New York and I stayed in my addiction for about 10 years. And then I finally surrendered and I went to... I had an accident on the train in New York. My body went into convulsions and then from the hospital, I'll never forget her, the doctor's name was Dr. Jane Doe. And she said, "You got a drug problem, you got a drug problem." And all my life I was saying, "No, I don't have a drug problem." But this accident really, I almost got run over by a train in New York. And I was taking so much drugs that my body just went into convulsions.

And she said I was in a coma for a couple of days, it could have been weeks. When I came to, she said, "Do you have a drug problem?" And I said yes. At that point she sent me to a place called Bethesda Thyrisen Mental Health Services. And I met a social worker, She saved my life.

Interviewee 3: 47 year old Black woman living with HIV

At first, no. First person I told was my best friend. She's a nurse. Well, now she's a nurse practitioner, but she's a nurse. And then I told my mom, and then I told my children. And once they were supportive of me, it made me not afraid to share. So if I ever met someone, if I was interested in dating them, I let them know from very early in the conversation..

But after a while it got to the point where it's like, well, just about everybody in the world knows my status and there are conversations being had about me that probably aren't so pretty. And so I stopped sharing so freely. And then of course, when the law changed here in North Carolina saying that as long as I'm undetectable, I didn't have to share, I just stopped altogether. But then it became a thing of paranoia because if they run across somebody that does know my status and they tell them something that I hadn't shared with them, then they're going to think, like the other guy thought that I'm trying to do something underhanded.

Question 3: Do you feel like you experienced religious trauma through this?

Interviewee 1: 40 year old Black woman living with HIV

No.

When I told my pastor at first he was like, "How do you know that?" And I told him about the test and everything consistent. He has been wonderful.

He actually is the one that pushed me into telling my story to other people.

Good. So that was your individual pastor.

Do you feel like from a more broader point of view, concerning religion, do you feel like religion in this period has traumatized you as a person living with HIV?

No, because any church that I've gone to, I haven't had any stigma.

I know some people that have, but I haven't experienced it.

So you have other peers who have experienced that kind of trauma?

Yes.

But you individually, you have not?

No.

Interviewee 2: 65 year old Black woman living with HIV

Yes. I've been to a lot of places and the response that I got when I shared my status was a couple of things. One was they didn't want me in the kitchen helping out with the food. That was one.

And I mean, they made it very clear that they thought that I can give them HIV through food handling. And then I started noticing, I had told my pastor, my pastor was very supportive. Him and his wife were very supportive. But the congregation, some of them were right mean

Yeah, they were very mean. They were just like... I'm very friendly and I would come in and say hello to everybody and if somebody would talk to me, they would come grab the person and take them away. "Don't talk to her." Like, she's damaged goods. Don't talk to her. But my pastor was really good and I remember sharing it in Bible study and some of the mothers of the church said, "Baby, you don't have to tell anybody. You don't look like you have it, so you don't have to tell anybody you got it."

They said you don't look like you got it.

"Keep it to yourself." And then I would share not only my HIV, but my substance abuse, substance use and my mental health because in the Black community we don't talk about it.

And this is something I promise God, I say, "God, if you help me feel... you let me know that you love me-

"... I'll do whatever you tell me to do."

And so it's my promise to him because I look nothing like I looked when... I went down to 99 pounds. I still looked like a broken crackhead. And I mean, over the years, God has really lifted me up.

So I have to share my testimony. I can't keep that to myself. I can't do it.

Somebody needs to hear, somebody needs to know, no matter how low you go, God can come get you.

And I have to tell it because there's so many people dying thinking that they done went so low that they can't be reached-

Interviewee 3: 47 year old Black woman living with HIV

I don't know that I would call it religious trauma, but I have seen where you become a poster child. It's easy to become a poster child in a religious setting. And while, I mean when I preach, I use myself as an example all the time anyway. Well, when I was preaching, I don't do any now, but when I would preach, I would use myself as an example anyway. So I was always an open book, but I don't want to be that token. So I saw some of that.

More so than that is on a big scale is something and the thought that I think about sometimes is you go to church and people, the preacher tells you, talks about God being a healer and he could heal you from this, that and the other. And they will be quick to tell you about how God can heal you from cancer or diabetes or anything else, but they never mentioned HIV from the pulpit. Is God not big enough to heal HIV?

Yeah. And so it's like, there's almost this undertone sometimes when being in religious settings that, and not just religious settings, but in the world as general, you get sympathy if you have cancer. You get sympathy if you have diabetes. And the fact of the matter is, even though God forbid anybody has to go through those things, but a lot of times those every disease are based on lifestyle. But if a person gets HIV, they're automatically deemed as having a bad lifestyle.

And it's almost like you got what you deserve. And one of the things that I had to come to that I had to rid myself of was feeling the shame, this is all my fault. It's the recompense from... I can't remember the scripture right offhand, but the scripture where it talks about homosexuality, in the New Testament, it talks about how God gave them... I forget how it reads and I don't want to misquote the Bible, but basically saying they got the reward in their bodies for their actions.

Pretty much being given over to their own lust like that.

Yeah. So I'm going to have to find that scripture now because it's bothering me. But yeah, so the thing was it was like, and before my own diagnosis, I always felt like, well, that is the result of their own actions. And while I don't excuse myself for my own actions, on the same token, this was still something that was done to me.

There was a lot of shadiness. When I came to that church, I was already diagnosed. So I got diagnosed shortly after I moved back to North Carolina. So I wasn't in a church when I got diagnosed. So I came there shortly afterwards. And when I came to that church, I was under the impression because of his actions that he was a single pastor, but his wife was there the whole time. He never acknowledged her. He never-

Yeah. I mean it was pretty bad. I had some conversations in his office with him where I laid him out about how he treated his wife and they

since divorced. He remarried and treated his wife the way that he should have treated his last wife. But, yeah. And then he wonders why I won't come back. But anyway, I digress. But yeah, so it is funny because I disclosed my diagnosis as a way, as kind of like a block, don't-

Do you feel like you are sitting in silence in your faith community due to your HIV status?

That's really hard to say because like I said, right now I am not a member of a church locally. And I do feel like my status has a bit to do with that, not because of anything anybody has done to me, but it's just easier for me. It's just easier. Yeah.

It's self-protection?

Yeah.

I mean, that's real though. Yeah, that's good though. But that is a level of silencing almost. You're having to protect yourself from the possibilities of, just like you said, how you brushed up against stigma immediately, you're having to now have a level of self-advocacy, self-awareness, and self-protection because you know the potential of harm that could happen to you.

Question 4: Is there anything you would like to share with Black women about HIV?

Interviewee 1: 40 year old Black woman living with HIV

HIV is stigmatized. A lot of us don't want to talk about it. We try to push it up under the rug like, "No, that's not me. That can't happen to me." Yes, it can happen to you. It happened to me.

My message to other women...

Get tested.

Get tested.

Don't be afraid to speak up, and make sure someone you can trust first that's not going to go back and tell everybody. You gotta have that personal relationship. Like you have that personal relationship with God, you gotta have that personal relationship with your pastor or clergy so that you know that it's not going to go any farther and they're not going to treat you any differently than they normally have.

Interviewee 2: 65 year old Black woman living with HIV

I would say knowledge is power. Learn about yourself because God did not make junk.

You are a queen daughter of the most high God.

And you have to walk in your anointing. So if you want to walk in your anointing, you're going to have to be and learn and accept the things that's going on around you. And you got to make sure that whatever's going on with you, you know about it. And this thing is not for just you, you may be helping another queen and don't know it.

So don't be scared to learn or to be transparent. "Yeah. You know what, I didn't know that I was at risk. I didn't know this thing. That's right, it doesn't discriminate. I know people that have it and they ain't did nothing. So why am I stigmatizing?" Have them have that internal conversation with them.

But we have to get to a point where they know where to go for that support. They know where to go when I have questions.

They know where to go when... So just have an open door.

So this is you answering what should Black women ministries provide for Black women living with HIV? So are you saying an open door?

An open door policy. Yes.

Because it's hard when you get something stirring in you and you don't have anybody positive to go to that can really talk to you. So you have to have a space where other positive Black women are meeting so that you can go and get that positive energy. Because there's so much negative energy that's out here-

... it can get you to become suicidal.

Because the enemy, that's how he does he is always checking in to see if you want to check out. So you got to stay equipped.

You got to stay equipped. You got to stay on top of stuff. And your job is to help other Black women as well.

So an open door so that they can get positive. And for the women that are positive, we have to continue to learn because that's one thing that... I soak up information because I realize that this is not by my doing. All the information I soak up, I am to share with someone else. That's what my ministry is to share with someone else.

So if I want a healthy community, if I want a healthy family, if I want a healthy... to raise my children in healthy neighborhoods, then I have to start pouring in positive energy so that when they come to that, they'll get what they need.

Is there anything that you would like to leave with women? What do you want to leave this interview? What message do you want to be conveyed?

Never give up. And that you are more than what you... You God's masterpiece.

We're not all the same, but He created us to be masterpieces and He created us for goodness and greatness. And no matter how much... Somebody told me I was a butterfly. I said, "A butterfly is beautiful." They said, "Well, the butterfly ain't started out beautiful. The butterfly started out as a caterpillar crawling in the dirt. And they had to crawl in the dirt and they had to get to a cocoon and they had to stay in that cocoon for a little while. And then while they are in that cocoon, they are learning, they are growing, they are

flourishing, they are getting everything they need. And then they come out with the wings into a beautiful butterfly."

That metamorphosis. Yes. Come on [inaudible 00:54:04]. That's good.

So I got butterflies in the car I got a butterfly on. I got butterflies. I remember that because that keeps me centered, I am a butterfly.

Don't look at the beauty that I have now, that I remember crawling in the dirt, crawling in the street. And I have to remember my humble beginnings. I have to remember that. And I have to let others know, you are a butterfly too. I may be a monarch, but you may be another different kind of butterfly.

So we could fly around. And the butterflies, what they do is they go to different flowers and they help them grow.

That's what we are to do as masterpieces.

As God's masterpiece, we are to let others know, you are a butterfly queen too.

You are a butterfly queen. So that's what I would leave. You want to know what God's masterpiece is? You are a queen butterfly.

Interviewee 3: 47 year old Black woman living with HIV

One of the things that irritated me once I got into the knowledge about HIV after my diagnosis is that there was no reason for me to have the diagnosis. I never should have got HIV. Even if I had kept in my life the lifestyle that I was in, there were protections out there that would've kept me from ever getting HIV. But it's not talked about and unfortunate, not talked about in our community to us.

Like PrEP, I remember when PrEP first came out, and it was touted on the news as something for people with risky sexual behavior. Well, I wasn't a ho. I wasn't a prostitute, so I didn't think it had anything to do with me. Even if you look at the commercials now, the PrEP commercials, it's mostly men who sleep with men rather than a-

... I say this all the time, everything goes where the money is, unfortunately. And the money right now is still with men who sleep with men. And so that's where the commercials show. But just like PrEP can work for them, me personally, I think every Black woman who is having sex that is not with their husband, and I mean, unfortunately, so many women I know got

HIV

from their husbands.

What would you say to that community? What would you say to them?

Unfortunately, we should know this by now, but the onus is on us. We should know this by now. Nobody's taking care of us. We've got to take care of ourselves. And there are ways to take care of ourselves. And just like people take birth control pills, you can take a PrEP pill.

Women who are married who don't think about having to shield and protect themselves, who think that they are covered, What would be your message to that vulnerable group of women?

That is my message. The onus is still on you.

So you feel like even married women should still take PrEP?

I believe that they should.

Because so many of the women that I know that are advocates received their diagnosis from their husbands. You think that he's being faithful because you're being faithful and he's coming home every night. My ex-husband, when he was cheating on me, he was the most attentive that he had ever been. Now, fortunately or unfortunately, he didn't bring me anything home, but his actions still had consequences that led to our demise.

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