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Re-envisioning Community-Engaged Healing for Black Women

By Reanae McNeal, Marqua Harris, and Vanessa Oliphant

Abstract

Black women in the United States continue to face multilayered forms of anti-Black gendered oppression leading to severe health disparities and inequities that have a dire impact on their well-being. This paper recognizes the urgency to attend to Black women’s health and healing in the pursuit of creating health equity. The authors call for the creation of sacred spaces for Black women to participate in embodied and community-engaged healing, grounded in a gender justice that is inextricably tied to racial justice. This research is inspired by the long, rich line of Black American women activist-healers that have called for the radical healing of Black women. Therefore, the authors root their work in an ethical health justice ethos, honoring the humanity of Black women through a recognition of their sacredness, guided by the principles of justice, truth-telling, love, and respect that emphasizes that Black women’s lives matter. Using an interdisciplinary approach, the authors braid together healing narratives from the fields of Public Health, Black Psychology, Africana Studies, and Gender, Women’s, and Sexuality Studies. Underscoring the importance of Black women reclaiming their radical healing, this paper at the same time underlines resisting anti-Black gendered racism and interlocking forms of oppression. The authors emphasize gender and racial justice while endorsing collectivistic orientations, grounded in an African-centered worldview, that support Black women’s embodied and community-engaged healing. As a result, the authors also draw from healing narratives in their fields that include cultural paradigms, socially engaged spirituality, and generational and gendered wisdom. Connecting historical to present-day medical/mental health encounters, the authors underscore inhumane, racist, and sexist pseudoscience, medical treatment, and research experiments on Black women’s bodies. The authors also address social injustices, isolation, and

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(dis)ease while foregrounding gender and racial justice in the creation of health equity for Black women.

**Keywords:** Black Womanism, Black Feminism, Public health, Black Psychology, Black women, Healing, Health justice

**Introduction**

Rarely, if ever, are any of us healed in isolation. Healing is an act of communion. ~bell hooks, *All About Love*

Due to the current backlash of anti-Black gendered oppression and the severe health disparities and inequities, the need to attend to Black women’s health and healing is urgent in the United States. Black women have increased maternal mortality rates that are three times that of white women, disparities in hypertension rates that are 2.4 times that of other women, and diabetes rates of 12.1% (Hoyert, 2023). Nationally, there has also been a notable increase in Black female youth suicide rates from 2013 to 2019 (Ramchand et al., 2022) and a rise in emergency hospital visits for suicide ideation or attempts by Black young women (15 to 19 years old) between 2008 and 2015 (Xiao et al., 2021). The rise in suicide rates, health disparities, premature deaths, and the impact of anti-Black gendered trauma testifies to the need for more attention to Black women’s health. Black women’s constant exposure and experiences with multifaceted layers of gendered racial violence necessitate the creation of sacred healing spaces that cater to the culturally specific needs of Black women.

As Black American women activist-scholar-practitioners of healing in the academy, the authors’ objective is to call for the creation of sacred spaces for Black women to engage in embodied and community-engaged healing. The authors situate this research on Black women’s health justice within Black American women’s long and rich activist-healing legacy that promotes a gender justice that is inextricably tied to racial justice in facilitating health equity for Black women. This rich ancestral lineage includes activist-healers such as womanists and feminists bell hooks, Alice Walker, Audre Lorde, Ntozake Shange, and Katie Cannon. They have laid a strong foundation of contributions to the wellness of Black women via their advocacy and literary healing narratives that address the mental, physical, emotional, and spiritual well-being of Black women. In the tradition of these activist-healers, the authors affirm in their community-engaged research that Black women’s lives matter.

The authors recognize that creating health equity for Black women necessitates making sacred spaces that allow Black women to participate in embodied and community-engaged healing by way of sharing and interacting with knowledge found within ancestral, personal, and gendered healing narratives. Healing narratives can manifest in such forms as oral histories, prayers, stories, affirmations, poetry, testimonies, and songs. Black womanist/feminist (Phillips, 2006) activist-

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4 In her book on Womanism, Layli Phillips (Maparyan) explains, “Womanism is a social change perspective rooted in Black women’s and other women of color’s everyday experiences and everyday methods of problem solving in everyday spaces, extended to the problem of ending all forms of oppression for all people, restoring the balance between people and the environment/nature, and reconciling human life with the spiritual dimension. I take the perspective that womanism is not feminism. Its relationships to feminism (including Black feminism) are important, but its relationships to other critical theories and social-justice movements are equally important, despite being less frequently discussed or acknowledged. Unlike feminism, and despite its name, womanism does not emphasize or
healers have centralized Black women’s health and wellness in literary works that are examples of healing narratives. For instance, *For Colored Girls Who Considered Suicide/ When the Rainbow Was Enuf* by Ntozake Shange (1977) tackles the struggles of Black women, including suicide and their healing journeys, and *The Cancer Journals* by Audre Lorde (1980) documents her experience with breast cancer, a mastectomy, healing, and resistance to dominant narratives about women’s bodies. The authors argue that healing narratives can also be found within intellectual traditions, grounded in humanizing Black women’s lived experiences. Thus, the authors contend that healing narratives can maintain and support an individual’s holistic well-being (mentally, physically, emotionally, and spiritually), even while promoting the holistic well-being of the collective community.

Understanding gender and racial justice as essential components of Black women’s embodied and community-engaged healing process, the authors also draw from cultural and socially engaged spiritual paradigms in their proposals for radical healing in the lives of Black women. An interdisciplinary approach is employed to identify practical, accessible, culturally specific, and socially engaged spiritual strategies that Black women can utilize to participate in community-engaged healing. Coming from our disciplines and expertise, we are drawing from our particular fields of study in Public Health, Black Psychology, Africana Studies, and Gender, Women’s, and Sexuality Studies (GWST) because there is a need to more holistically address Black women’s healing in interdisciplinary ways. From each discipline, the authors take away culturally specific healing narratives that underscore healing practices, strategies, and methods that can invite the participation of Black women in healing described in detail further in this article. Departing from singular approaches and generalizations, the authors centralize Black women in intersectional ways that prioritize their unique positionality in healing narratives across disciplines. At the same time, we synthesize culturally specific approaches to meet the holistic needs of Black women through addressing their mental, physical, emotional, and spiritual health needs within medical and mental health institutions as well as within grassroots communities. Thus, our interdisciplinary, community-engaged research prioritizes gender and racial justice as part of advancing Black women’s participation in healing.

As a result, the authors highlight healing narratives across their disciplines while accentuating gender and racial justice as necessary components of health equity for Black women as a bold re-envisioning of holistic, community-engaged healing for Black women. This paper is also an invitation to other activist-scholars globally to build on our research in a continuance of solidarity in filling in the problematic research gaps on the lives, health, and healing of marginalized women. In short, our lives matter.

**Public Health Narratives**

Black women in the United States have experienced some improvements in their health in the previous century (Chinn et al., 2021). Notable improvements include advancements in healthcare access, reproductive rights, and increased awareness in health disparities. Efforts to address inequalities in healthcare, expand access to affordable health services, and increased representation in healthcare have contributed to these improvements. Efforts to address health
disparities are gaining momentum. Investments in community-based healthcare programs, initiatives to improve access to preventative care, and efforts to address social determinants of health hold promise for reducing inequities and improving overall health for Black women.

However, due to historical practices and current biases, there are still health disparities in maternal mortality, obesity rates, and chronic conditions. Gaps in health are differences in burden of disease, violence, and injury that are suffered by communities of people that have been at a disadvantage due to their income, education, and environment (Office of Health Equity, 2022). The history of gynecological experimentation on enslaved Black women in the United States, the use of Black women’s bodies for medical research without their consent, racial bias in medical diagnosis and treatment, and the impact of anti-Black gendered racism on overall health have contributed to these disparities (Byrd & Clayton, 2001). These disturbing practices are still being felt today in various forms as Black women interact with healthcare systems (Mohatt et al., 2014).

To ameliorate the impact of these interactions, a multifaceted healing narrative should be implemented. Intersectionality is a healing narrative that has been used to advocate for reproductive justice for Black women (Ross & Solinger, 2017) and to promote their dignity and access to rights. In the 19th century, many white doctors conducted medical experiments on enslaved Black women without their consent to advance medical research (Washington, 2010). These experiments included surgeries that were often administered without anesthesia because the physician decided that Black people did not feel pain in the same way as white people (Byrd & Clayton, 2001). These claims were often refuted in the many personal journals that recorded such events (Wall, 2006). One such researcher, J. Marion Sims, conducted numerous surgeries on Black women without their consent to develop new surgical techniques (Washington, 2010). These racist pseudoscience practices have persisted throughout history, contributing to the aversion and anxiety that some Black women have with the United States healthcare system, underscoring the need for health equity for Black women.

Racial bias in medical diagnosis and treatment has historically perpetuated harmful stereotypes and false beliefs about Black people, which have been used to justify medical discrimination and mistreatment (Roberts, 1999). Historically, people of color have been underrepresented in clinical trials and other research studies leading to a lack of diverse representation. This has perpetuated biases in medical decision-making and contributed to disparities in healthcare access and outcomes (Office of Health Equity, 2022). The stress of experiencing racism and discrimination has a profound impact on black women’s physical and mental health (Blount, 2018). Black feminism recognizes that individuals’ experiences are shaped by their intersecting identities, including race, gender, and class (Crenshaw, 2022). Black women often face unique challenges within the healthcare system in the United States due to the confounding effects of racism and sexism. Taking the unique positionality of Black women into account, contemporary Black feminism continues to work toward health care reform, ethical practices, and gender and racial justice within the medical field.

Black women are more likely to experience racism and discrimination in various aspects of their lives, which can contribute to higher rates of chronic conditions such as high blood pressure, depression, and some cancers (Blount, 2018). Consequently, the discussion around Black women’s health is in desperate need of a shift to one that includes healing narratives grounded in gender and racial justice, self-love, self-care, and community support (hooks, 2018). Healing narratives for Black women involve recognizing the impact of historical and present-day issues on the health and wellness of Black women and working to create more equitable and culturally sensitive healthcare practices (Barlow & Dill, 2018). Gender and racial justice-oriented healing
narratives for Black women within the U.S. healthcare systems are essential to addressing ongoing disparities and anti-Black gendered racism. Some examples of healing narratives include community-based care models (Zephyrin et al., 2021) that prioritize the health and wellness of the community. They are effective because they involve partnerships between healthcare providers, community members, and community organizations (Zephyrin et al., 2021). These models can be particularly effective for Black women, as they prioritize a holistic approach to healthcare and focus on the conditions that impact health.

Healing narratives must also center the lived experiences and voices of Black women themselves. This means actively listening to their concerns and working to incorporate their perspectives into healthcare practices and policies (Kumanyika, 2018). A recent survey of 3,800 Black women conducted by the Black Women’s Health Imperative revealed that the participants believe that health is best exemplified by a concordance of physical health, mental health, and stable finances (Blount, 2018). It is important for researchers to listen to Black women when creating interventions. Additionally, connecting with other Black women who have had similar experiences can be a powerful way to find support and healing (Kumanyika, 2018). This can include joining support groups, sister circles, or online communities, or simply talking with trusted friends and family members (Barlow & Dill, 2018). Recognizing the trauma that Black women may have experienced as a result of historical and present-day healthcare interactions is critical to providing effective care (Blount, 2018). In this fashion, multiple culturally appropriate healing options, grounded in gender and racial justice, can serve to support Black women.

Black Psychology Healing Narratives

Within the discipline of Black Psychology, scholars such as Kambon (2012), Akbar (1991), Nobles (2000), and Myers (1993) all emphasize the need for African/Black communities to endorse an Afrocentric perspective (also described as African centeredness). An Afrocentric perspective is fundamentally grounded in African values, traditions, and cultural practices unique to people of African descent throughout the diaspora (Belgrave & Allison, 2014). We collectively lean into the wisdom of African-centered epistemology to pull together two key distinct characteristics embedded within this cultural paradigm with the intention to provide culturally relevant support for Black women as they engage in radical healing. The two strategies of what we call “Black Psychology healing narratives” include: 1) utilizing a collectivistic orientation and 2) understanding one’s self-healing power.

First, we elucidate the protective nature of embodying a collectivistic orientation. Prior research suggests that a collectivistic orientation involves an intentional prioritization of interdependence, cooperation, and survival of the group (Belgrave & Allison, 2014). Traditionally, Western cultures are often individualistic and competitive; however, collectivistic cultures strive to embody the essence of Ubuntu, “I am because we are, and because we are I am” (Mbiti, 1990, p. 197). Previous scholars have found that feelings of loneliness and hopelessness are often associated with negative psychological outcomes such as thoughts of suicide (Joiner, 2005). As a result, the authors argue that a collectivistic orientation may serve as a protective factor for Black women as they undergo their healing processes. Finding safe spaces to participate in community-engaged healing can promote the use of a collectivistic orientation. Black women supporting other Black women can protect against feelings of loneliness and provide the opportunity to share healing narratives. Primary physical locations to participate in embodied and collective healing may include the church, beauty salons, and therapeutic treatment received in group settings.
The second strategy within the field of Black Psychology includes understanding one’s self-healing power. According to Fu-Kiau (1991), everyone is born with a healing power within them; however, the strength of this power is varied among individuals and dependent upon their ability to be in balance with themselves, their environment, and the universe. Also, the strength of one’s self-healing power is dependent on what we are taught, what we see, what we eat, and what we believe in (Fu-Kiau, 1991). To activate higher levels of self-healing power, it is imperative to be cognizant of the foods allowed in the body, the media consumed, and the external messages that are internalized. This type of awareness for Black women to activate higher levels of self-healing power becomes particularly important due to Black women’s unique positionality in society and the anti-Black gendered racism that they experience in their daily lived experiences. Essentially, both strategies informed by healing narratives in the field of Black Psychology are interconnected. Operating from an African-centered worldview will encourage a collectivistic orientation and being surrounded by community can influence individuals to tap into their self-healing power.

**Healing Narratives in Africana Studies and Gender, Women’s, and Sexuality Studies**

The fields of Africana Studies and GWST offer three innovative medicinal approaches for re-envisioning healing for Black women: affirmative statements, bearing witness, and consciousness-raising questions. These medicinal approaches come in the form of Black womanist/feminist healing narratives that are distinct restorative wisdom systems for Black women’s health and wellness. These culturally specific, generational, and gendered healing narratives are grounded in socially engaged spirituality that interweave spirituality with social justice activism. Examples of Black womanist/feminist healing narratives can be found in multiple forms, especially in literature. Some examples of these healing narratives include *In Search of Our Mother’s Garden: Womanist Prose* by Alice Walker (1983), *Sisters of the Yam: Black Women and Self-Recovery* by bell hooks (2014), and *Katie’s Canon: Womanism and the Soul of the Black Community* by Katie Geneva Cannon (2021). These healing narratives are medicinal approaches cultivated through the lens of Black women’s lived experiences, culturally specific frameworks, and socially engaged spirituality.

Built from the collective generational and gendered wisdom systems of Black women in the context of navigating the hostile landscape of anti-Black misogyny and interlocking oppression, these healing narratives are popular and powerful interventions in Black women’s health. As a result, the healing narratives derived from interventions by Black womanists/feminists, anchored in gender and racial justice, have high levels of credence among Black women.

The first medicinal approach in re-envisioning community engaged healing for Black women is the spiritual practice of affirmative statements, grounded in the spiritual principle of love, to address the impact of the diseases of hatred, discrimination, and oppression. The spiritual principle of love is an important aspect of the affirmative healing narratives of Black womanists/feminists. Womanist Alice Walker (2001), a visionary writer notes, “My only spiritual gift is love, and I think that out of that love I can heal—heal myself and somebody or something else” (cited in Hull, 2001, p. 97). Walker recognizes the gift of love as an essential tool and catalyst to healing. Affirmations of love, such as Walker’s, can be a highly impactful instrument for Black women’s healing journey both individually and collectively, because love is considered to have the power to work through a person to heal oneself or others. Love affirmations can invite Black women to reflect on and apply love as an integral component of their healing process.
For instance, the following healing narrative by Black feminist bell hooks, a thought-leader, also underscores the embodied holistic ways Black womanists/feminists characterize the inspirational properties of love. hooks (1994) points out: “The moment we choose to love we begin to move towards freedom, to act in ways that liberate ourselves and others” (p. 294). hooks’ social justice-aligned love can invite Black women to reflect on love as a tool to resist oppression and subjugation and to advance freedom and liberation for themselves and others. Love in hooks’ affirmative statement is threefold: action-oriented, freedom-oriented, and liberation-oriented. The love defined in the affirmative statements by Black womanists/feminists promotes both individual and collective healing of Black women.

The second medicinal approach in re-envisioning healing for Black women is the spiritual practice of bearing witness in the form of a cultural kinship model. Black womanists’/feminists’ healing narratives invite other Black women to bear witness to personal healing journeys and communal ancestral (her)stories while demonstrating ways to enact healing in the context of resisting interlocking oppression. For instance, Black feminist Rebecca Hall (2022), an activist-educator, explains how ancestral stories of resistance are essential to Black women’s health: “When we go back and retrieve our past, our legacy of resistance through impossible odds, our way out of no way, we redress the void of origin that would erase us. We empower and bring joy to our present. This is ancestry in progress, and it is our superpower” (para. 1). Black womanists/feminists can inspire and invite truth-telling about lived experiences through testifying about ancestral and individual healing narratives of resistance to interlocking forms of oppression that impact Black women’s health disproportionately. Bearing witness to stories of ancestral resistance, survival, perseverance, and healing can assist Black women. Black feminist Angela Davis, an activist-scholar, emphasizes the power of listening to each other’s stories: “And often we discover that those other stories are actually our own stories” (2016, p. 135). The healing narratives shared by Black womanists/feminists offer Black women an opportunity to bear witness to generational and gendered testimonials that can encourage them, advance their growth in healing, and strengthen their relationships with each other in the healing process. They can be strengthened individually and collectively by participating in a familiar cultural kinship model of healing that underscores the power of listening to each other’s stories while enlarging Black women’s collective wisdom for future generations’ healing. The authors recognize that some gendered stories can also carry with them generational trauma. Depending on each individual Black woman and the level of generational trauma, other trauma-informed healthcare resources and culturally specific practices may need to be done in collaboration with this medicinal approach.

The third medicinal approach in re-envisioning embodied and community-engaged healing for Black women is the spiritual practice of consciousness-raising questions. Black womanist/feminist healing narratives include the creation of consciousness-raising questions that invite Black women into the power of their inner knowing. For instance, womanist Christena Cleveland (2022), a public theologian, asks the following: “What heals my Black female embodied soul? What liberates my Black female embodied soul? What helps my Black female embodied soul love itself and others well?” (p. 60). These questions centralize the embodied souls of Black women and their spiritual needs while assisting them to self-assess and uncover the answers needed for their healing. Making spiritual principles such as healing, liberation, and love into foundational components of the wellness of the “Black female embodied soul,” Black women can embrace holistic healing in culturally specific ways that honor their unique positionality (Cleveland, 2022, p.60). Simultaneously, consciousness-raising questions support Black women in becoming more
deeply aware of their agency in the healing process. These kinds of consciousness-raising questions can empower Black women as they draw answers from a wellspring of knowledge for their own healing needs. Black womanist/feminist healing narratives can be powerful medicinal approaches in supporting the healing needs of Black women.

Conclusion

The purpose of this paper was to identify some practical strategies Black women can utilize to participate in embodied, community-engaged healing, grounded in gender and racial justice, to encourage equitable opportunities to heal. Our research seeks to contribute, complicate, and expand the ways Black women’s healing and health is approached in academia. The authors believe that the strategies across our disciplines, grounded in gender and racial justice, create holistic healing opportunities for Black women individually and collectively. The strategies from healing narratives across our disciplines are also a strong invitation that calls to those across diverse disciplines, the general public, health agencies, clinicians, and grass-root organizations to re-envision Black women’s healing in equitable and humane ways that underscore that Black women’s lives matter. We recognize that in addition to these approaches, some Black women may need other trauma-informed support mechanisms through healthcare systems, other culturally specific approaches, and additional resources as they engage in embodied, community-engaged healing.

The strategies from the healing narratives in the authors’ disciplines of Public Health Studies, Black Psychology, Africana Studies, and GWST underscore the call for the creation of sacred spaces for Black women to participate in these healing practices. These healing narratives foster gender and racial justice by calling for the healthcare system to address the historical and present-day harm done to Black women. They also call for the incorporation of trauma-informed, culturally sensitive, and equitable policies and practices by listening to Black women’s feedback on their healthcare experiences and needs in community circles. Thus, the strategies from the health narratives emphasize the incorporation of culturally specific practices that align with Black women’s positionality in intersectional ways and that center gender and racial justice as key components to Black women’s healing.

For example, Black women-centered community care models, sister circles, and cultural kinship models that create friendly, radically supportive, trauma-informed, and culturally specific vibrant spaces act as a catalyst to their participation in embodied, community-engaged healing. Such community-engaged practices are being done through Sawubona healing circles in The Association of Black Psychologists (Auguste et al., 2022), which has aided in reducing racial stress and increasing access to mental health support through virtual platforms. Another example is Black community-based doulas (Allen et al., 2022; Thomas et al., 2023) such as the Tulsa Birth Equity Initiative in Oklahoma that creates culturally congruent spaces where Black women are seen and heard, resulting in stress reduction during pregnancy while contributing to the decrease in birth complications.

Importantly, the strategies from the healing narratives put emphasis on a collectivistic orientation and African-centered worldview that also educates Black women on their self-healing power. Socially engaged spiritual practices grounded in cultural approaches can center Black women’s gendered and generational wisdom systems through affirmative statements, bearing witness practices, and consciousness-raising questions. The authors recognize that participating in embodied and community-engaged healing can also lead to recognizing other health resources needed to support Black women’s holistic healing process. It is essential to create sacred spaces
where an African-centered worldview is practiced and Black women can come together and see themselves and their gendered wisdom systems reflected for the betterment of their health. Furthermore, based on the healing narratives across disciplines, re-envisioning healing for Black women necessitates sacred spaces to speak truthfully about their experiences and to dream of freedom, and to reimagine their lives, community, and world in liberating and healing ways. Such sacred spaces would include trained healthcare and community advocates informed about the culturally specific and liberation-oriented healthcare needs of Black women. The authors’ research offers the following ways for re-envisioning Black women’s embodied, community-engaged healing:

- Healing narratives across disciplines can assist in more holistic approaches;
- Ancestral, individual, generational, and gendered healing narratives can contribute to healing;
- Restorative practices grounded in gender and racial justice can be used;
- Cultural paradigms (e.g. African worldviews, cultural kinship models, sister circles) and socially engaged spirituality can support embodied and community-engaged healing;
- Collectivistic oriented models can assist towards healing the community across generations;
- Understanding the unique positionality of Black women and their histories, particularly with healthcare systems, can support better care for Black women;
- Culturally specific models of healthcare are essential to Black women’s wellness.

In conclusion, healing narratives must be simultaneously engaged in promoting gender justice that is tied inextricably to racial justice. The cumulative experiences of bias and anti-Black gendered racism in health care and the larger society has negative impacts on Black women’s health. These negative impacts can be neutralized by healing narratives that draw from culturally specific and socially engaged spiritual healing traditions that advance health for Black women while simultaneously highlighting gender and racial justice. This paper is an invitation to other activist-scholars globally to build on our research in a continuance of solidarity by filling in the research gaps in understanding the lives, health, and healing of marginalized women. Our lives matter. The research collected about healing narratives across the authors’ disciplines of Public Health, Black Psychology, Africana Studies, and GWST underscore our call for the creation of sacred spaces for Black women to engage in embodied community healing, so that Black women’s urgent health needs can be adequately met.

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