In this paper, I will present a reflection on my journey of decolonizing my relationship to holding space for healing trauma, and co-creating communities around wellness. I start with the specific way that I was trained in U.S.-based social work mental health practices and end with the insight I gained through the co-creation of a wellness studio for Black, Indigenous, and people of color (BIPOC). My story will begin with what I began to unlearn and the ancestral wisdom and technologies that I tapped into to transform my approach to healing-in-community. As a healer of mixed race (Black-Caribbean; Haitian and white), I explore the depth and breadth of my healing work as I connect to ancestral knowledge through my relationship to my lineage. This occurred after unlearning much of what was taught to me in my master of social work program, so that I could remember ways of co-creating safety, connection, and community that do not reinforce patterns of colonization. I will use my experience co-creating a safe and sacred physical space: a wellness studio in the South End of Albany centered around BIPOC, as a case study illuminating how centering BIPOC in the creation of spaces for BIPOC creates safety, connection, and community.

Keywords: decolonization; healing; BIPOC; wellness; well-being; race; identity; culture; spirituality
When we live outside ourselves . . . on external directives only rather than from our internal knowledge and needs, when we live away from those erotic guides from within ourselves, then our lives are limited by external and alien forms, and we conform to the needs of a structure that is not based on human need, let alone an individual’s. But when we begin to live from within outward, in touch with the power of the erotic within ourselves, and allowing that power to inform and illuminate our actions upon the world around us...our acts against oppression become integral with self, motivated and empowered from within (Lorde 2017, p. 12).

Lorde (2017) posits the foundational perspective for unlearning colonized teachings that create additional cycles of harm by instructing us to come back to the guide within ourselves. She describes the process of conforming, and how this can disconnect us from our inner knowing, which is needed to create empowered action against oppression.

As I pursued higher education to become the helping professional that I desired to be, I learned very quickly that the answers to any questions I had about human behavior and suffering were outside of myself. Attaining an undergraduate degree in Psychology and a master’s degree in Social Work with Individuals and Families, I studied many theories that helped me to understand an individual’s thoughts, emotions, and their context within the greater society. This manuscript details my journey in decolonizing my work, and I use italics to indicate phrases or terms that, through my process, I learned are unjust and maintain colonization.

When I use the terms “decolonization” and “colonization”, I am referencing both external and internal colonialism: “External colonialism (also called exogenous or exploitation colonization) denotes the expropriation of fragments of Indigenous worlds, animals, plants and human beings, extracting them in order to transport them to—and build the wealth, the privilege, or feed the appetites of—the colonizers, who get marked as the first world . . . In external colonialism, all things Native become recast as ‘natural resources’—bodies and earth for war, bodies and earth for chattel . . . internal colonialism, the biopolitical and geopolitical management of people, land, flora and fauna within the ‘domestic’ borders of the imperial nation. This involves the use of particularized modes of control—prisons, ghettos, minoritizing, schooling, policing—to ensure the ascendancy of a nation and its white elite.” (Tuck and Yang 2012, p. 4).

When I discuss my process of decolonizing my work and my learning, I am referencing the “internal colonialism” (Tuck and Yang 2012) present in academia and the Western medical system that was inherently a part of my professional training. When I reference the Western medical model and system, I am referencing the medical model in the West that screens for disease by focusing on symptoms and seeks to pathologize based on symptoms. I use italics to identify words that were used in the professional and academic settings I was in that actually uphold elitism and oppression. The learnings I acquired in school trained me to have analytical language for the people I desired to help, and these external guides informed how I would build rapport, how I would think about the people I was helping, the language I was encouraged to use in my notes and treatment plans for my clients, and any interventions I might explore with the people I was helping. I was taught that if I experienced any emotional attachment to my clients or vice versa, that it should be labeled and analyzed as well: transference and countertransference.

At the start of my career, I first worked with adults and families in the Bronx, New York at an outpatient mental health clinic, which led me to specializing in trauma work with adults. I share my professional background to demonstrate my trajectory of internal colonization through my professional training, how this colonized mindset was reinforced during my work experience, and how it directly impacted my work and my clients. The framework that I learned in my schooling gave me a breadth of language to analyze and conceptualize my clients at the outset of my career, keeping me in an intellectualized state; as if healing was happening in a linear analytical fashion, and did not include me and my relationship to my client as well. As a professional, boundaries were encouraged, so much
so that I saw my personal process as a helping professional as very different from my client’s process.

This lens I inherited from my studies in institutions was also modeled by my professional mentors. My supervision sessions were often centered on finding what was wrong with my clients, with eloquent phrases to describe what was faulty. The Diagnostic and Statistical Manual of Mental Disorders (DSM) from the American Psychological Association (APA) guided my understanding of a client’s diagnosis, the intervention they needed, and how I referenced them in supervision, case presentations, and in writing my notes. As I learned more about how trauma functions individually and collectively, and noticed the way myself and my clients experienced the world around us as BIPOC, I began seeing the DSM differently. It seemed that I was using a reference point that labeled symptoms of disorders that really seemed more often like necessary survival mechanisms as a response to daily violence at the hands of oppressive systems, poverty, and generations of trauma. Within my professional role, even in a field like social work that is labeled as being an agent of change, I saw that I was reinforcing the same systems of oppression that we were trying to support our clients in navigating. My coworkers and I often had the best of intentions and truly cared for our clients. Even with the best of intentions, every time we used a diagnosis from a Eurocentric model of individualism (i.e., the DSM), our treatment was colonized and thus we became agents of oppression, knowingly or unknowingly. We spoke about people and their ailments as if we and the system we were working for were separate from the clients we were intending to serve.

Noticing these patterns of oppression became quite confusing to me. As a social worker at that time, I still subscribed to the illusion that I was an agent for change! This was something I desired strongly—this was why I chose the path I did—change was necessary and I wanted to be part of it. What I found after seven years working in hospital systems was that I actually was reinforcing systems of oppression.

2. Unlearning Pathologizing as an Intervention

Trauma is the common experience of most humans on this planet. Love too often perpetuates trauma, repeating patterns of intimacy and pain so many of us experienced growing up in racist and/or hetero-patriarchal environments. Shame might be the only thing more prevalent, which leads to trauma being hidden, silenced, or relegated to a certain body of people. If we can’t carry our trauma and act normal, if we have a breakdown or lose our jobs/homes/children, there is something wrong with us (Brown 2019, p. 62).

Brown (2019) speaks to what happens when the collective trauma of our society manifests in those who are oppressed by societal structures. The Western medical model has many helpful aspects, and yet can still be a mechanism of transmitting society’s trauma and shame onto those of us who are on the margins of oppressive systems. These are the echoes of colonization, the split between professionals who are here to help and people who are oppressed and need the help. If we are not careful and aware, we continue these echoes of colonization into the present day and the future.

I witnessed several instances of emotional harm towards BIPOC clients because of the colonized practices of the Western medical model in mental health treatment settings. I witnessed many of my clients misdiagnosed with diagnoses like attention deficit hyperactivity disorder, borderline personality disorder, and antisocial personality disorder, when, in a non-pathologizing reality, they were exhibiting symptoms of trauma exposure. Much of what we were seeing show up in our clients was actually an expression of collective pain, of historical trauma, or what African spiritual practices like Vodoun might see as a disconnection with the soul (Gilles and Gilles 2009). Using the DSM to label these expressions as a disorder impacted these clients’ sense of self, the medications that were prescribed, and the way in which professionals thought and talked about BIPOC clients, which has an impact beyond what many of us in the Western medical world may realize. The way that we think and feel towards the people we are serving has an incredible impact that can lead towards healing or harming. For example, if a practitioner is thinking of, talking about in
case conferences, and writing notes about their BIPOC client as if their client is incapable of making changes, or has something inherently wrong with them, this can directly impact their clients’ ability to make changes and potentially impact their self-image. Similarly, if a practitioner has an understanding of decolonizing their healing work and sees their BIPOC client as capable of healing themselves, this will improve their client’s outcome.

I saw and felt the mistrust between many of my BIPOC clients and the system I worked within, and I saw the ways this mistrust was pathologized by some professionals (“this person is withdrawn; they have a flat affect; they do not demonstrate empathy”). I worked in hospital systems for nearly a decade and continued witnessing patterns of pathologizing Black clients’ reactions to oppression, state sanctioned violence, poverty, and other trauma. These realizations led me to question everything I learned in school and in my professional development.

2.1. Exploring Spiritual Practices

I began my own spiritual exploration, which added a new way of understanding and asking questions. This required a deep inner listening and a listening to Elders and ancient teachings. As I listened, I saw that it was required for me to release the illusion of knowing what is best for anyone else. I saw how previous patterns of colonizers coming in and civilizing my Ancestors was being repeated right in front of me, around me, and inside me. I had to ask, who is benefiting from these power dynamics? When I look at the clients we are supposedly serving, do they seem to be benefiting in a sustainable way? The answers I received led me to the ways of my Ancestors, and to sitting with what had been colonized inside my mind. Although this did not lead to any short-term solutions, it did begin to show me a sense of clarity I could have in the choices I made to either contribute to colonization or to decolonize healing in myself and in my work with others. Lorde (2017) speaks to the inevitability of internalized implicit bias and the urgent need for each of us to do the inner work so that we can contribute to the solution rather than repeating more of the problem:

Racism and homophobia are real conditions of all our lives in this place and time. I urge each one of us to reach down into that deep place of knowledge inside herself and touch that terror and loathing of any difference that lives there. See whose face it wears. Then the personal as the political can begin to illuminate all our choices (Lorde 2017, p. 21).

It is important to notice and acknowledge the trauma of colonization and how it shows up in the absence of spirit-centered practices in Western models of healing, which focus on the individual- and diagnosis-centered treatment resulting from the labeling clusters of symptoms. This awareness informs how we decolonize healing. Duncan and Kain (2019) elaborate on the limitations of the Western medical model, particularly in regards to trauma:

The fixed criteria in the DSM-5’s definition of PTSD does not reflect the full range of client presentations. Providers need a more accurate and complete representation of the depth, extent, and diversity of psychological, biological, and even spiritual effects that can arise from experiences of danger or a life-threatening situation (Duncan and Kain 2019, p. 13).

2.2. Spiritual Practices from My Haitian Lineage

To provide an example of what the process of decolonizing one’s personal beliefs and healing may look like, I will share the beginning of my journey, which included questioning and letting go of much of my education around mental health, and learning the cultural and spiritual beliefs of my Haitian Ancestors. My experience of having to learn and shed previously conditioned beliefs in order to remember ancestral wisdom and decolonize healing work is not a unique experience. The history of my Afro-Caribbean lineage and my Welsh and European ancestry all hold spiritual beliefs, honoring of the Ancestors, and reverence for nature. However, in both of my ancestral lines, spiritual practices and rituals were not continued by any of my family members that I met in my lifetime.
My Haitian Ancestors are the descendants of Africans taken from Ginen to be enslaved in Haiti. For many Black people living in America, the specifics of family lineage and cultural and spiritual practices are unknown as a result of slavery and the intentional stripping of identity and historical narratives of Black families in America. However, descendents of the African diaspora do not need to know the details of their family history to still connect with these practices; this knowing is in their bloodline.

When we speak of African Traditional Religion, we mean the indigenous religion of the Africans. It is the religion that has been handed down from generation to generation by the forebears of the present generation of Africans. It is not a fossil religion (a thing of the past), but a religion that Africans today have made theirs by living it and practicing it. This is a religion that has no written literature, yet it is ‘written’ everywhere for those who care to see and read. It is largely written in the peoples’ myths and folktales, in their songs and dances, in their liturgies, and shrines, and in their proverbs and pithy sayings. It is a religion whose historical founder is neither known nor worshipped; it is a religion that has no zeal for membership, yet it offers persistent fascination for Africans, young and old (Awolalu 1976, p. 275).

These practices are timeless, living and breathing, and always available for us to connect with. In order to open our minds, hearts, and spirits to the wisdom of these practices, it is likely that there is a process of taking inventory of the knowledge we have acquired and where it has come from (and for many, simultaneously a grieving process) that has to occur to decolonize our beliefs and practices around healing.

It is important to understand the motivating factors behind the colonization of spirituality and healing practices. Many healing practices that were inherent in the culture of my Ancestors were colonized in an attempt to control and commodify people by separating them from their source of power and identity. Systems that continue to have an absence of community healing and spirit centered healing perpetuate this control and commodify narrative. “For a while, the course of history was dictated by the greed of those involved in the commerce of people as slaves. This group unleashed the power of words against the cultural and religious practices of the people of Ginen. Quite frequently, instead of defining Vodou as a religion, they defined it as a cult. The term religion was not used because that term is perceived as having a higher status”. (Gilles and Gilles 2009).

It is no surprise then that incorporating African-centered spirituality, ancestral reverence, the use of our relationship to nature and intuition, is the key to reclaiming this power that comes from within and is not something any helper can bestow on anyone else. By decolonizing our healing, we are healing our Ancestors, ourselves, and our descendants. To decolonize and unlearn, we must look critically at where we have been disconnected from these ways of being, and understand why that disconnect originated.

I will share what I have learned about Vodoun and how the foundational tenet of ancestral reverence and reverence for nature has helped to decolonize my understanding of my own healing journey, as these are the beliefs and practices that are in my Haitian ancestral lineage. I am describing Vodoun practices because of my ancestral connection to these practices and the generational disconnection I encountered when diving deeper into my spirituality. These practices are not necessarily centric to what I share with my clients, but they do inform my own understanding of how important connecting to ancestral practices are for any individual, as well as questioning any learned secrecy or stigma around accessing and sharing spiritual practices as legitimate healing allies. Some people of the African Diaspora experience shame or stigma when exploring Afrocentric spirituality, rooted in the history of colonization. This can show up as an upholding of Christian and Catholic belief systems and practices, and a shunning or secrecy (or calling these beliefs “superstitions”) around nature-based practices that originated in Africa (herbal remedies for spiritual ailments, lighting candles and incorporating the nature elements, while practicing spirituality, honoring specific deities that honor the different nature elements). “Disrespect for Vodou is rooted in the intolerance that many Christian leaders had for faiths other than their own . . . countless people were sentenced to death and to torture for disagreeing
with the Vatican” (Gilles and Gilles 2009). Colonization divorces many of us from the sacred, from ancient learnings, and from the wisdom of our Ancestors. In my case and that of my family, we tend to then center the relationship with the very system that alienates us from our roots in an attempt to fill this void of what was lost. Thriving academically, financially, and ascending through class statuses aligns with safety and is therefore prioritized. Conforming to these institutions’ standards of enoughness is what helped my Ancestors survive and ensure survival of their descendants. In my personal experience and the experience of many people I know, particularly descendants of the African diaspora, suppressing our connection to our inner magic, our wisdom, the ancient knowledge of nature and that which is carried in our bodies’ inherent wisdom, was the way to survive colonization and systemic violence and oppression. I do not talk about decolonizing our healing as a way to shame the way in which these patterns of colonization have been passed down. I value and honor my Ancestors ability to survive by any means possible. In my honoring, I also step into the safety their survival afforded me. Because of my Ancestors’ survival, I now have the capacity and space to shed generational fear, and to learn by listening to those old voices of my lineage. This wisdom can then be brought into my work and most importantly my expressions of life. Because of them, we now have the space to unlearn, and come back to ancient wisdom. This shedding and remembering gives us flexibility in how we respond to expressions of trauma in our communities. When we access ancient knowledge, we see that the rigidity of the Western medical model is helpful at times, but is not the only way. I will reference “spirit” often in this paper as the connection between each of us, between us and what is unseen, between us and our Ancestors. There are several pathways to connecting to our ancestral roots and bringing spirit into how we show up in the world; my entryway into experiencing spirit practices outside of my ancestral lineage through yoga.

2.3. Yoga and Reiki

For the first time I could remember, while laying in a resting position after a sweaty yoga flow, I experienced a quieting of the mind. This was such a contrast to my normal state of mental chatter. I was inspired to learn this experience the best I could to share it with others. I am grateful to this door opening, and see now that it was the gateway available to spirit before I even knew consciously what spirit was. At the time, my mind was still colonized; I saw it as a modality to collect and share with others, still operating within the illusion that this power and presence was something outside of myself and outside of the people I was serving. I was not yet aware of the internal transformation that was required of me to bring spirit into all the things I create. After opening this doorway to the metaphysical properties of healing, I was introduced to another ancient healing practice that originated in Japan called Reiki, a form of hands-on energy healing. This opened me further to the ways that what is unseen can help us move through our “reasons to be scared of the dark” (Brown 2019) and the traumas stored in our bodies. I learned through experience how traumas are also stored in our energetic bodies and disconnect us from our soul, leading to a variety of physical and emotional ailments. I went on to attend several healing retreats and workshops where I continued to operate from a colonized mindset that others had the answer to my union with spirit, demonstrating that “when we live away from those erotic guides from within ourselves, then our lives are limited by external and alien forms” (Lorde 2017, p. 12).

The learning of other cultures’ healing practices was a necessary part of my process for me to see and feel the bigger picture. There was too much generational fear of returning to spirit in my lineage for me to land there right away. I am grateful for the well documented and widespread dissemination of ancient practices like yoga and Reiki that helped lead me back in union with my own spirit. I do acknowledge that for this information to be available to me in this way it was colonized, at times divorced from the sacred lineage and truth of the peoples it originally came through. To truly decolonize healing, we must be intentional about how we engage with ideas, healing practices, and our own hearts.
and spirits, and acknowledge the truth of how knowledge is acquired and shared. We do not have room to overlook the ways that colonization has seeped into so much of our Westernized practices, into our thought processes, or our approaches we use in serving others.

2.4. Remembrance and Application of Wisdom

“Despite ongoing persecution, Agwe may well continue to exist until such time as the Atlantic can be emptied. This makes it possible for Sévité to say *kay papa m boule, badji a la*- my father’s home has been burned, but the altar remains” (Gilles and Gilles 2009).

After leaving my job working for the mental health system, I began seeking community around healing through a lens that centered community, spirit, and social justice. This seeking unveiled the importance and urgent need for spaces designated specifically for BIPOC. “A community is a place of self-definition. Any group of people meeting with the intention of connecting to the power within is a community. People who regroup under a different banner to take care of themselves are attracted to indigenous culture. In these new formations, people seek to explore what has frustrated, betrayed and constituted a deep wound in their hearts. What they are trying to do is restore their inner power, which has been tarnished” (Somé 1993).

The history of colonization and oppression has left a collective wound so deep that impacts BIPOC in a very specific way, therefore warranting a specific space(s) to tend to this pain and to create community around restoring power. This is a stark difference from the Western medical model that uses individualism as a lens to practice healing, ignoring the root of the wound that lives in relationship, in the collective. How can I and my fellow humans find true healing isolated from the root of the trauma itself, which has happened and is happening in a relationship? We must have space to heal what has been ruptured in the relationship by returning to the relationship. Creating relationships and co-creating community is what birthed Root3d, a wellness studio in the South End of Albany, NY. I will describe the foundational elements of Root3d to demonstrate the importance of spaces centered on communal healing, ancestral reverence, and addressing our collective wounds with the intention that it will serve as a resource for additional spaces (physical or virtual) that decolonize healing.

2.5. Co-Creating Root3d: A Healing Space Centering BIPOC

Root3d (see Figure 1) opened its doors in May 2019 with 10 weekly classes, including movement (West African drum and dance, Kemetic yoga, therapeutic theater exercises) and community discussions about what healing means in community (healing in masculinity groups, emotional support groups, and nutrition-based discussion groups). Individual healing sessions were available for people who wanted a more personalized exploration of what healing looks like for them with Reiki practitioners, therapists of color, and intuitive healers that used other tools to divine ancestral guidance.

“A true community begins in the hearts of the people involved. It is not a place of distraction but a place of being. It is not a place where you reform, but a place you go home to” (Somé 1993). As we continued to create community around healing, the need for ancestral connection became evident. Folks were looking for a way to connect with their roots, with a deep part of themselves, that they could not acknowledge or tune into in many other spaces in their lives. Sasha Baxter, who taught a Kemetic yoga class (ancient African teachings of body, mind, and spirit), began honoring the Ancestors before every class began with those who participated. Jordan Taylor Hill, who taught West African drum and dance from his learnings of intensive drum and dance in Guinea Conakry, shared the history and intention of each dance, which country in Africa these dances came from, and the spirit of each dance. Leah Penniman began offering a weekly Orisha circle, sharing practices honoring Ifá and Vodoun practices, which are centered around Ancestral reverence.

Our community grew naturally, with our teachers being as diverse culturally as those that came to practice healing in the Root3d space. We did not see those who entered Root3d
as “students”, as they often had much to share with the facilitators of classes and were teachers themselves; all those who were in the space of Root3d were both teachers and students, connecting with community, healing, and spirit. After six months, we transitioned to a “pay what you can” financial model, as we recognized the inherent connection between colonization and capitalism, and the disproportionate impact both of these structures have in oppressing BIPOC. What may be surprising to some is financially, our business did better when we encouraged a sharing of financial resources amongst those who connected with Root3d rather than required payment for participating in sessions. I am sharing the story of Root3d, not because this business is an anomaly or an idealistic utopia, but to demonstrate that we are all hungry for community, communal healing, and a reintroduction of spirit into the healing realm that connects us to our lineage, and that is why this works for Root3d and can work in other spaces. Not only does this show to be effective in creating community relationships, improving communal emotional health, and putting the power in people’s hands to heal themselves, but it is also sustainable as a business model. When we acknowledge that nothing is actually separate, as many institutions depict things to be, we see that by redistributing financial access and resources in our pricing structure, we also contribute to an environment that supports us healing as a whole; the financial, emotional, and spiritual are all interconnected.

**Figure 1.** Photos of Root3d, a community healing space centered around black people, indigenous people, and people of color (BIPOC). **Photos of Root3d.** (a) Root3d facilitators practicing ceremony to determine the intention for their classes; photo by Jamel Mosely; (b) Local artist Rae Frasier creating a mural that represents communal healing; photo by Jamel Mosely; (c) Co-founders Jamel Mosely and Rachelle Pean; photo by Kiki Vassilakis. (d) Completed mural by Rae Frasier and Kimberli Gaillard for Root3d, using color, words, symbols, and images to convey community and safety; photo by Kiki Vassilakis.
Our classes transitioned into virtual offerings with some small in-person classes, and we hear often how this ongoing sense of community has given a sense of stability for both the facilitators at Root3d and those that attend classes. Stability, community, and healing are the antidotes for the destabilizing impact of COVID-19 and the massive changes that we are undergoing as a society because of it. The pandemic illuminated this want for community and created a greater need for communal healing and connection. Our reach has grown, bringing the co-creation of community around healing to a national space. With the pandemic disproportionately impacting BIPOC communities and the emotional impact of witnessing or experiencing violence towards BIPOC during this time, this community has been a needed safe space for BIPOC to connect, process emotions, and heal.

What one acknowledges in the formation of the community is the possibility of doing together what is impossible to do alone. This acknowledgment is also an objection against the isolations of individuals and individualism by a society in service of the Machine. What we want is to create a community that meets the intrinsic need of every individual. The individual can finally discover within the community something to relate to, because deep down inside each of us is a craving for an honoring of our individualism (Somé 1993, p. 49).

2.6. Standards for Co-Creating a Safe Community for BIPOC

Using the framework for community based on the Dagara tribe in West Africa as described by Malidoma Patrice Somé (1993), I will demonstrate the foundational tenets of Root3d and the practices we share in the space. These principles can serve as a framework for additional spaces created for community healing that include ancestral reverence and honoring of the intrinsic power of BIPOC to co-create their healing spaces.

1. “Unity of spirit. The community feels an indivisible sense of unity. Each member is like a cell in a body. The group needs the individual, and vice versa.” (Somé 1993)

At the onset of creating a space for healing, we determined that everything mattered, down to the way we think, speak and behave when setting the space for this community, particularly the way in which we look at and name “the cells” of our community: are there teachers and students? Were we “owners” and are there then “employees”? We explored through the lens of unity of spirit and came to see that every cell of Root3d: “teacher”, “student”, “owner”, and those that live around the physical space of Root3d may have not yet come inside our doors but are unified. Unity of spirit is a concept that begins in the way you think about those involved in community. We released the savior complex that insidiously makes its way into many helping organizations’ language, outlook, and energy, because we know that all of our healing offerings are really about healing ourselves and not about saving anyone else (as individual cells, and collectively, as our community body). We also were aware of how paternalism can be another form of oppression and used a curious and open lens to acknowledge what we don’t know and to learn from our community that we were opening a space with.

We understand that those who come into the Root3d space bring value to the space, and their presence both inside Root3d and outside of Root3d adds a layer of context that supports any “teacher” who is offering a healing modality. One simple example of this is: If I am teaching a healing movement practice, and you practice alongside me and open up space in your hips that releases a trauma response that had been locked in as a survival response, this will energetically open something in me as a teacher also and create more space for co-regulation. In the same way, if I am teaching and connect with what I need to care for myself, regulating my nervous system and maintaining a grounded presence, I am able to share that healing just in my presence without saying a thing with those that come into the healing space with me. We carry healing in our energy, in our aura, and when we acknowledge and set the intention that there is a unity of spirit we are able to transmit that healing in a way that uplifts the whole instead of diminishing the power of some to uphold the authority of others. Unity of spirit encourages resource sharing (spiritual and material), which helps to offset the dissociation and disconnection that is a trauma response of generations of oppression.
This standard of sharing goes beyond language used for labels; one could very well say they are “client-centered” and still carry a perspective of hierarchy and disconnection that makes its way into every interaction they have. Because of this, it is very important that everyone who shares a healing practice is also engaging in healing themselves; this helps to address the illusion that a healer is on a pedestal and reinforces the truth that we are all figuring these things out together. When starting the healing space, it became a standard that anyone who is sharing healing practices in Root3d must have a reverence for community, be an active participant in their own healing journey, and not see themselves as an expert. This allows a healthy flow of individual healing within a collective that is not muddied by a sense of hierarchy. This unity of spirit extends to the relationship of the “owners” of Root3d: through a spiritual lens of understanding, we see that we were in a position to help Root3d come to fruition not through our own individual will, but through the collective need for a space of healing. This removes any egoic illusion of ownership or expertise, and allows us to exchange information and wisdom with the teachers and those that come to Root3d offerings. In this way, Root3d becomes an umbrella of community, a holder of intention for the unity of our community spirit, that we each serve and are served by.

2. “Trust. Everyone is moved to trust everyone else by principle. There is no sense of discrimination or elitism. This trust assumes that everyone is innately well intentioned.” (Somé 1993)

To trust others’ intentions also means to give space for creativity in healing. What this has meant at Root3d is that each teacher who shares a healing offering at Root3d is completely trusted to determine what material they’d like to share. This is a trust given to that person, as well as a trust in the spirit of whoever attends their class that day, as every class is unique and a co-creation between the facilitator and whatever the people who attend the class bring into the space. We build a sense of trust amongst teachers and the structure of Root3d, as well as with students, by acknowledging that nobody knows it all. Teachers get to be fully present to themselves and the needs and contributions of people who attend their classes, and it would be challenging for them to do that if they felt that the structure that they worked within did not trust their intuition and skillset. For this reason, once we know a teacher’s purpose aligns with the mission of Root3d, we ask that teachers only share what they are passionate about and feeling connected to. This develops a trusting relationship that says you are not here to produce, you are a human being sharing in this intention of healing, and it is meant to be healing to you as well. This also develops a sense of vulnerable and intimate connection within the healing community: when you share what you are most passionate about, you also share your wounds and what you are healing. When we begin to see who the other person is beyond labels and with vulnerability, trust and intimacy are created; we encourage a space where it is safe, and people can show who they are at a pace that feels right for them. It is impossible to fully heal in a space where you do not feel safe and seen. Creating the circumstances for safe intimacy and vulnerability allows the natural healing process to unfold at its right pace. What we have seen from this sense of trust is that it is extended to people who attend classes; teachers are then taken off a pedestal, seen as fully flawed humans sharing a healing practice, and students are able to see themselves as the authority of their healing, rather than teachers being a part of an “elite” group.

We also have noticed the ease in vulnerability and intimate connection within this healing community that arises when people have access to healing practices without having to define themselves by having something wrong with them. This avoids an attachment to limitations or a reinforcing of shame and stigma that often comes when people receive mental health treatment. Instead, a community identity is built around what we are learning together to heal, rather than what one might label as a “disorder”. Reducing areas of shame and stigma allows space for trust, first and foremost with the self: I trust myself to heal myself. We have seen that this sense of trust in the self and setting these intentions for the space carries over to how people relate to others in the space: “If I trust myself to
heal here, I trust that you are here to heal also”. When there is an atmosphere that does not lead with judgment, labels, or hierarchies, we have space for a deeper connection that we all crave.

3. “Openness. People are open to each other unreservedly. This means that individual problems quickly become community problems. Being open to each other depends upon trust.” (Somé 1993)

One of the most important tenets of Root3d is that every aspect of this community space has to be tended to with reverence to create a sense of openness. It does not work well to speak of openness and trust, and then when having a meeting about the logistics of a business there is no intention to cultivate openness and trust. The Western model is steeped in individualism, patriarchy, racism, homophobia, and sexism; if we are creating new spaces that honor social justice and want to destabilize these oppressive forces, we have to be alert in all that we do. We understand that if a teacher is working in a school and feels undervalued by the administration, this will make its way into their work and into their emotional health. Root3d then becomes a space where every interaction is invited to be done with deep presence and reverence. To create a sense of openness and trust, every meeting we have is a ceremony. While some may see this as a waste of time or an idealized version of how to conduct a business, we see it as imperative because of the deep colonized conditioning that we are all brought up within. There is no other way to undo this conditioning than to be deeply present in creating new conditions that support our openness and trust with each other and truly build community around a new way of healing, rather than codependent patterns of victims of reinforced oppression and burnt-out caretakers.

Some of the concrete ways in which we create a sense of openness are in becoming embodied participants of our conversations about Root3d. We do this by becoming present at the onset of our meetings; we breathe and set intentions together. Before we talk about how things are logistically, we check in with each person emotionally, physically, and spiritually. By doing this, our communication changes, particularly when it comes to talking about challenging topics. This sense of trust and openness serves our collective intention in a big way. We hold space for healing circles for our teachers where everyone has a space to share how they are doing, what they might need support in, and what they feel most connected to lately. In this way, we are able to hear themes of those of us needing support, and rather than focusing on outcomes or productivity, we center connection, trust, and community, knowing that outcomes will be nurtured from this foundation.

We also cultivate a sense of openness around resources and money. This is because we understand the way in which colonialism has created attachment between money and personal value, which creates individualism, elitism, and at times secrecy or obscurity when agencies/places of healing talk about money. We share with teachers where resources are going, and how we make decisions about resources to cultivate this relationship of openness, and we learn more and more about how to better circulate resources with this sense of openness.

4. “Love and caring. What you have is for everybody. There is a sense of sharing, which diminishes the sense of egotistic behavior. To have while others don’t is an expression of your making up a society of your own.” (Somé 1993)

Here, Somé demonstrates that love and caring is demonstrated through what you share. We found that by making a “pay what you can” model, we encouraged an atmosphere of sharing resources and set a precedent that what you have is not only for you, and if you do not have financial resources you will also be taken care of by the community. When we initially opened, we had “full fee” classes, and we found that it did not match the mission of community healing to have some people feel that they could explore healing practices and others be deterred because of financial barriers. At Root3d, this sense of sharing is demonstrated by our financial model, however a sharing of resources could look many different ways depending on what serves the community: a bartering of ser-
vices, resource sharing for community supports, or any other modality of having a pool of resources that the collective both puts into and receives from. In this way, Root3d is not the “giver”, but rather a space where the community can gather energy around a specific intention, grow it together, and receive support from the community.

Another way of demonstrating love and caring is the sharing of presence and emotional support. All meetings that we have then become a ritual of checking in on one another. We may have logistical steps that need tending to, however our attention always goes first to doing a check in with everyone in the meeting: how are we doing emotionally? Spiritually? Physically? This allows us to know which one of us needs support, and also strengthens our community care.

5. “Respect for the Elders. They are the pillars and the collective memory of the community. They hold the wisdom that keeps the community together. They initiate the young ones, prescribe the rituals for various occasions and monitor the dynamics of the community.” (Somé 1993)

This is an area that we are still developing. We have not yet developed strong relationships with Elders in the South End of Albany to help guide our healing community. In this area, we learn from a nearby organization, Miracle on Craig Street, which has a meeting with their Elders once a month to gain guidance on how to address community needs, challenges, and for support in shaping the community. This connection with the Elders is something that is necessary for a sustainable space for communal healing that honors and centers around BIPOC; particularly to aid in addressing intergenerational trauma, and to amplify intergenerational resilience and healing in the BIPOC community.

6. “Respect for Nature. Nature is the principal book out of which all wisdom is learned. It is the place where initiation happens. It is the place from where medicine comes. It nourishes the entire community.” (Somé 1993)

In all classes, meetings, and rituals, the elements of nature are honored and used as allies. For many movement classes and talking circles, a bowl of water is put out at the onset of class to use for cleansing worries and stress of the community, allowing time for community members to write down what they would like to release. We use fire to burn herbs with spiritual healing properties and use the smoke to bring the intention of healing to members of the community. Breathing practices during healing help us connect to the element of air, the wind of change, and how powerful this element of nature is within each of us. Somatic exercises bring us into our body, a foundational experience to heal oneself, and our body is connected to the element of nature. By acknowledging the role of the elements all around and within us, we access nature’s wisdom and healing. These practices cultivate energy and healing that goes beyond each individual that is a part of the community. We are able to access the medicine of nature from any space: suburban, inner city, or in the middle of the jungle. Nature is something we each need a connection to, and can connect to from anywhere if we take the time and intention to do so.

7. “Cult of the Ancestors. The Ancestors are not dead. They live in the spirits in the community. They are reborn into the trees, the mountains, the rivers, and the stones to guide and inspire the community.” (Somé 1993)

At the onset of any sharing of healing space, we call in our Ancestors. Those that have transitioned who we would like to honor and remember, and also whose guidance we seek. For people whose beliefs do not support this, we also encourage them to think of the qualities their Ancestors possessed and bring those qualities to mind as a way of bringing those Ancestors into the community circle. The belief that our Ancestors energy and support is always present and a resource available to each of us is in many ancient cultures, and one often feels familiar and comforting even to those who did not grow up learning these practices. It is in our blood, in our genetic memory to connect with our Ancestors. It has also been very important to honor the Ancestors of the land that the healing community is located in; in the case of Root3d, we honor the Haudenosaunee people when we use the
space, as they are the indigenous people of the land that we are located on. As stated before, a large part of decolonizing our healing is reinstating this connection with the ancestral realm. It gives us wisdom, strengthens the thread of community, and develops an increased sense of responsibility and foresight with our healing journey, as we then become more aware that we ourselves are and will be Ancestors.

These foundational principles written by Somé have led us to personalized practices that are simple, able to be co-created with community members, and make a profound impact for creating a sense of reverence, community, and a space that both acknowledges colonization and creates something different, something new, where healing can happen.

3. Conclusions: The Urgency of Remembering Our Ancestors and Creating Spaces for Communal Healing

We are living in a time of ongoing destabilization, rapid change, and creation of new patterns. To adapt with these changing times without repeating patterns of the past, it is imperative that we come back to ancestral reverence and center BIPOC in their own healing. BIPOC do not need any saviors, labels, or authorities outside of ourselves. Decentralizing authority, removing labels and stigma to receiving support, and centering communal healing above individualism are all ways to begin decolonizing healing practices.

What has been shared in this paper is from a personal viewpoint because this is the way of decolonizing; it begins internally before it can be shared relationally. We can create spaces that leave space for our collective liberation. Our Ancestors knew that you did nothing without connecting to those that came before you and working with the spiritual realm. It is no coincidence that the historical and current process hoarding of power and resources in colonization, white supremacy, and patriarchy is the exact antithesis of this. Systems that self-identify as spaces of healing for BIPOC that uphold individualism, diagnose those they intend to help, and disregard the generational strength of ancestral connection are continuing cycles of harm. We as a collective are being encouraged to rethink the way we move forward, particularly with the destabilizing nature of the pandemic; now is the time to dissolve what is not working and remember sources of strength and healing for a new way forward.

What we need is a culture where the common experience of trauma leads to a normalization of healing. Being able to say: I have good reasons to be scared of the dark, of raised voices, of being swallowed up by love, of being alone. And being able to offer each other: ‘I know a healer for you.’ ‘I’ll hold your hand in the dark.’ ‘Let’s begin a meditation practice.’ ‘Perhaps talk therapy is not enough.’ We should celebrate love in our community as a measure of healing. The expectation should be: I know we are all in need of healing, so how are we doing our healing work? (Brown 2019, p. 62).

The historical and ongoing impacts of trauma are here and collective reactions to trauma are prevalent, particularly for BIPOC, who are disproportionately impacted by oppression. What is also here within BIPOC communities is a wealth of wisdom, connection, and collective healing. Cynicism, lack, scarcity, shame and control are all tools of colonization. We cannot decolonize our healing by using the same tools that created oppression. This paper does not contain specific instructions, because this work is meant to look different depending on who it comes through. Your role is different from my own. The wisdom in your lineage compliments my own, and is different than my own, which is why this paper is more of an invitation to look within than a measured formula for how to arrive at a destination of healing. This paper is a reminder that healing is an ongoing process of really looking at what you have learned, where it has come from, who benefits from that model of learning, and to go back even further into remembering what healing means for you. This healing will require reverence for ourselves, our Ancestors, and each other; a return to the old ways and to ourselves.

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