



UNESCO Slave Route Project and Guerrand-Hermès Foundation for Peace

International Symposium Healing the Wounds of Slavery: Towards Mutual Recovery

18-19 October 2018
Berkley Centre, Georgetown University, Washington DC

UNESCO Slave Route Project and Guerrand-Hermès Foundation for Peace co-organised an international symposium hosted by the Berkley Center at Georgetown University, Washington, D.C. on 18/19 October 2018. The Symposium aimed at healing the wounds of slavery and addressing the root causes of racial prejudices and discrimination derived from slavery, both past and present. It was structured around a set of questions given in the concept note. This report intends to capture some of the key points in the contributors' presentations and significant learnings from the two-day conversations. Brief summaries of group discussions and outlines of proposals for action that groups put forward are found in the *Appendices*.

VOICES FROM THE CO-ORGANISERS

Professor Thomas Banchoff, Vice President for Global Engagement of Georgetown University welcomed the Symposium participants to the Berkley Centre for Religion, Peace and World Affairs where he also served as the founding director in 2006-2017. Prof Banchoff appreciated the timeliness of the Symposium and highlighted Georgetown's commitment to promoting racial justice and deepening Georgetown's understanding of and response to its history.

Dr Ali Moussa Iye, Chief of UNESCO Slave Route Project, pointed out that the colonial mindset has caused a wall of silence around the greatest crime in human history and imprisoned humanity in a set of reactions. To break this silence, it is necessary to investigate the history of slavery and research the psycho-social consequences of this wound and trauma. Such effort can, in turn, promote healing, health, well-being and social harmony. Above all, we need healing to overcome deeply seated institutionalised racism and prejudices and seek ways to flourish together. He emphasised that this Symposium was set within the framework of the 70th Anniversary of the UN's Universal Declaration of Human Rights and the International Decade for People of African Descent (2015-2024).

Professor Garrett Thomson, CEO of GHFP, continued to underline the importance of healing the wounds of slavery. He also expressed the GHFP's intention for the Symposium to encourage more research and exploration of the myriad meaningful approaches to healing, such as narrative sharing, compassionate listening, and deep dialogue.

SUMMARIES OF CONTRIBUTORS' PRESENTATIONS AND DISCUSSIONS

Session I: Historical Contexts

The first session heard four expert historians who provided well-researched historical contexts of the trans-Atlantic slave trade and slavery. They illustrated the extent of trans-Atlantic slave trade, the different narrative resources, including socio-economic, philosophical, cultural, religious and mythical, applied to legitimise unimaginable dehumanisation. To heal the wounds from this history, it requires us to challenge all assumptions.

John Franklin referred to two maps of African American people's movement to show that only five percent of the enslaved people were sent to North America, the rest were in the Caribbean and South America. He reminded us that more research is needed to gauge the impact of these people's departure upon those who continued to live in Africa.

Terrance Johnson used Dubois's question "How does it feel to be a problem?" as a springboard to pursue three other questions: (1) probing the problem of blackness with regard to Enlightenment thought; (2) a question on the role of religions with respect to black bodies; (3) a question about reconciliation that tends to assume equality and the requirement of the transformation of economic systems.

Nelly Schmidt showed that the abolition periods were, everywhere, followed by politics of forgetting the past and of social control. She pointed out that there was a systematic attempt to "manipulate" the history of slavery and of the processes of abolition. The economic analysis and histories are insufficient to understand the process the people went through. Historical and political myths were elaborated, transmitted by the governing, religious bodies and by the press to submit the "new free" populations to social and political order and to a process of oppression and marginalization.

Ibrahima Seck showed parallels between the demonising stories about African people, the Jim Crow Laws, the colonisation of Africa, and racial profiling, all contributing to the same social phenomenon – racism. The history of people who were enslaved was not only one of their enslavement and being physically deported from Africa but one that banished these people's agency (and identity).

From this session, we learned that it is important to challenge assumptions and deconstruct trans-Atlantic slave history. Without deconstruction, there cannot be reconstruction of this history in such a way that is also healing. An example of reconstruction is found in the reconstruction of scripture as a talking book, (re)producing knowledge that allowed people to have hope for a different afterlife after slavery. Indeed, history can provide a basis for reconciliation which is only possible if there is an engaged process where trans-Atlantic slavery and its dehumanising effects are formally acknowledged at a political level. Similarly, education, defined broadly can also play an important part in helping the society recognise the traumas left by the wounds of slavery.

Session II: Psycho-Social Effects of Trans-Atlantic Slave History

The psycho-social effects of trans-Atlantic slave history were illustrated by six internationally renowned experts. Their research and experiences working with traumatised populations provided strong evidence that the unhealed wounds and traumas that result from slavery have had significant long-term health, psychological and social impacts on the populations of African descent across the Americas. In fact, findings from similar research were already presented in the UNESCO Slave Route Project's conferences that aimed to explore the history of trans-Atlantic slave trade. The first one was held in Toronto and the 2nd and 3rd in Martinique. The third one in Martinique concentrated on sharing research about the psycho-social consequences of slavery and consequently, two anthologies on the topic were published, one in English and one in French. These research findings pointed out that history does not merely lie in the past: history of the slave trade and its consequences are with us still, here and now.

Benjamin Bowser summarised the psycho-social consequences of slavery, including both the impacts on the African American populations, and on those who are the descendants of the former slave owners. Particularly notable in the African American population are the phenomena of colourisation, systemic racism, denial of slavery, fundamental spiritualism, beatings as discipline within families, black-on-black violence and displacement of trauma through music and ritual. All these are in part the consequences of unhealed traumas being transmitted transgenerationally following slavery. Similarly, in the descendants of slave owners, research has identified manifested consequences, such as distorted authenticity, indifference to the plight of others, justification for black inferiority and white supremacy, and the displacement of fears and anxieties onto blacks.

Arienne Giacobino spoke about the epigenetic trauma that can be measured and that such traumatic effects can be transmitted intergenerationally (up to 4 generations). Research in epigenetics suggests that enslavement can cause psychological and health vulnerabilities across the generations. However, if these kinds of traumas can be passed on epigenetically, so can they be reversed. In other words, environments that are no longer hostile can prevent the further transmission of traumas.

Aimé Charles-Nicholas explored slavery as a root cause of why a whole group of people became deprived, marginalised and underprivileged, being placed at the bottom of the society. In the heart of the slave system there was humiliation and it left behind obvious and subtle sequelae today, like contempt and self-blame. Racialisation of the thought is behind the colonial mentality today, but taboos prevent this diagnosis, mainly due to the privileges of some and the internalization of the inferiority of the others. Thus,

Jim Crow Laws were terribly destructive for the Black self-esteem. So there is a continuity between slavery mentality, colonial mentality and our current mentality. The racial hierarchy is in everybody's psyche. Mutual recovery needs efforts from both sides but more courage to renounce privileges of whiteness than to heal black self-esteem.

Joy DeGruy looked at post-traumatic slave syndrome (PTSS) in particular in four areas. (a) PTSS is a form of vicarious and learned helplessness, transmitted from one generation to another; (b) PTSS is not caused by just an event (unlike PTSD), instead, PTSS is more structural and systemic hence curing/treatment requires social healing and social justice. (c) White populations have to face the fact that the total white population is decreasing, and white supremacy makes such a decline a threat. (d) One way to heal PTSS is through a psychodynamic model that draws on PTSS genetics, values and ecology and is relation-focused. Therefore, healing of PTSS must integrate interpersonal relationships.

Erica Wilkins defined the residual effects of slavery as the positive and negative ways in which the racist treatment of African Americans, during and after slavery, have affected many generations of African American individuals, couples, and families. It was asserted that we think systematically about healing the residual effects of slavery, with the inclusion of ourselves. To be a healer, we must ask questions such as "What sort of healing do we need?" It is common for African American clinicians in training, who are descendants of enslaved Africans, to be challenged with the myth of inferiority and Black superwomanism. Therefore, she proposes that those who are engaged in the work of healing of the residual effects of slavery must first understand the ways in which this trauma has influenced the way that they view themselves as well as the populations that they aim to treat.

Katrina Browne focused on the psychological legacies of slavery for white Americans, based on her family story recounted in her PBS film "Traces of the Trade" and all that she has observed in doing public screenings/events for 10 years. She suggested that in addition to attitudes of internalized superiority, unconscious bias, blinders, and lack of empathy, white Americans also carry what could be called "vulnerable emotions" in regard to issues of race: defensiveness, shame, anxiety, fear. The desire to avoid feelings of shame and collective responsibility should not be underestimated. When you combine vulnerable emotions with structural power, it means many white people chose to avoid these conversations or exit when they get hard, or push back aggressively. To address this it can be helpful to think of applying Elisabeth Kubler-Ross's five stages of grief to white people as they are facing the history and legacy of slavery: denial; anger; bargaining; depression; acceptance. White people's emotional needs should not dominate interracial spaces, but that doesn't mean they don't need to be attended to in some way; hence the value of "white affinity" spaces, and the value of modalities like film, the arts, and spiritual/religious settings that attend to the heart and call forth people's best selves.

This session concluded that research on the psycho-social effects of slavery is truly cutting edge, and we need to encourage continued investigation as the existing findings are merely a tip of the iceberg. For instance, the epigenetic research has shown that the descendants' physical resilience is reduced following the trauma of trans-Atlantic slavery. Grief is a process of reckoning from both sides of those involved in slavery. At the same time, it is important to note that over the last few decades there has been a huge increase in the understanding of different categories and kinds of mental illness, from 10 to 350 categories. We need to be careful that it is not actually creating forms of woundedness. Furthermore, it is necessary to gauge the different values with which cultures tend to anchor their healing. Above all, we need to map out healing practices that truly make a difference and really reach people. We also need to understand how people from different cultures respond to healing approaches.

Session III: Questions emergent from other similar dehumanising tragedies in history

The intention of this session was to draw on learnings from other large-scale human tragedies and identify good questions for us to explore with regard to healing. There are the tensions between the healing intention and the social justice agenda. Is the former merely restorative and hence more intimately connected to health and relationship? Is the latter moral and legal and hence requires political will and actions? Dehumanisation implies division between the victims/the enslaved and victimisers/oppressors, and the idea of moral evil in the victimisers/oppressor can make healing difficult. Seeking social justice can imply revenge and the fears of blame and retribution and the guilt of past wrongs can mean that those who are in the position of power continue to silence and deny slavery and its history.

Vincent DeForest pointed out that historic sites are enduring memories of our past. However, in the U.S., attention went primarily to enslavement rather than the enslaved. This must be changed because “*dead people talk today*”. Next year is the commemoration of 400th Anniversary of the arrival of the first enslaved Africans and the question: How to mark this important date, taking into account the challenges of healing and reparations?

Kenneth Gergen proposed that historical accounts are a (re)creation of the past, owing to the assumptions and categories we use to describe and explain. Thus we have multiple histories, such as the history of economics, the history of arts, or the history of the family - all with different facts and values. In our project, we are interested in particular aspects of history, especially the history of dehumanisation and the history of the wounded and traumatised. In writing such a history we make the past intelligible to us, thus providing a shared language, understanding, and sense of value. In this sharing relationship we become a We. Thus, while healing the past requires that we start from this sharing, it is insufficient. From here we must construct a narrative for the future. To construct such a narrative, we need to explore what is already working to improve our life conditions. In other words, healing requires a process of recreating the past in order to set in motion a vision of a future toward which we can build. The question we now confront is “How do we do this? And “what might support, sustain, and inspire actions toward reaching this vision.

Dr. Fatimah Jackson suggested that in order to understand solutions and healing processes, it is important to recognize the nuance of population substructure in African-descended peoples. Comprehensive genetic and epigenetic studies could show, for example, the mix of African groups in the Diaspora; the diversity in the enslaved population; provide evidence of genetic drift among the African-Americans in North America, evidence for new selective pressures, and more. Slavery encompassed 11-16 generations of New World Africans, so we need to study the microbiomes of the descendants of these New World Africans to understand the forces influencing gene expression patterns. The genome, the epigenome, and the microbiome form the biological foundations for current disparities in health between groups. The question remains: “What are the longstanding biological implications of the transAtlantic slave trade and how are they manifest among contemporary descendants?”

Annick Thédia-Melsan read from the poems of Aimé Césaire who proposed that Negritude is a reply to the insult of being dehumanised. She recalled that during the meeting of the World Week for Indigenous People, the question was asked “What is progress?” but the meeting itself was a festival of tragedy. The meeting was tragedy because historically the idea was that when Africa was free of colonisation it would become healed. This was like a paradigm of tragedy because there was a stain across humanity which has never been healed after the process of colonisation and the slave trade. The process of healing involves an interrelationship between the particular and the universal. The question is: “In practice, how might such interrelationships look?”

George Woods suggested that to study the effects of the slave trade means that we need to broaden our methodology to go beyond the traditional disciplines. There are 3 common approaches – the familial genetic history approach, the environmental approach and the psychological/medical approach. When we offer psycho-therapy, it is necessary to visit the person’s home to understand the traumas and difficulties they are facing. Afro-American people are like the Canary people of our culture because of the history of the slave trade and its health/medical effects will show the early warnings of health/medical problems to come. Despite its importance, medical studies of black Afro-American people will not receive funding from a white majority culture. Here lie questions such as: “What counts as (good) health?” and “What is healing?” and “What counts towards healing the wounds of slavery?”

From these discussions, it became clear that we cannot dichotomise the genetic and the social; nor the biological and the psychological. Likewise, we do not want to continue operating within the dichotomy of the perpetrators versus the wounded. We must learn to talk about the need for healing without creating more divisions or reinforcing existing divisions. Healing processes require the collaboration amongst the following people: those who have been traumatised and are continuing to live the psycho-social effects of the trauma, those who have offended in some way directly and indirectly, those who are dead (but alive in our memories or through their narratives and stories), and the whole of humanity. Although healing involves these different groups, it was suggested that some work may need to be done together, other work separately. The question is “How might we draw people towards healing work?” More importantly, the traumas of trans-Atlantic slavery, the colonisations in different continents, and the decimation of indigenous people can all be seen as operating under one (dehumanising) system. So the question could also be: “How might we heal the wounds of slavery from a systemic level?”

Session IV: Proposals Towards Healing and Recovering

The intention of the final presentations was to share strategies for the effective communication of these legacies and to discuss how key stakeholders might support dialogues and other healing processes.

Khatharya Um noted that transatlantic slavery, Khmer Rouge forced labour camps, and modern-day enslavement of migrants and trafficked individuals are all rooted in the notion of disposable life – the idea that some people are less than human, thus less deserving of life, hence disposable. In Cambodia, this dehumanizing ideology spawned genocidal policies that resulted in the death of a quarter to a third of the population in less than 4 years. Genocide, she argued, wounds the nation not just structurally but culturally, spiritually, and metaphysically. For physical death, particularly generational death, in a culture based on orality, amounts to a rupture of memory. Trauma also has its own temporality, extending beyond the genocidal moment into the genocidal afterlife. Though justice, reconciliation and healing are often spoken of as if they are interchangeable, they may in fact be conflictual, for the quest for justice may interfere with reconciliation, and reconciliation may compel the burying of trauma that impedes healing. Given that trauma is perpetuated by disavowal, repair (if not actual healing) necessarily begins with acknowledgement. The teaching of this history is a way of breaking the cycle of violence born of this absence of acknowledgement.

John Cummings described the opening-up of the (metaphorical) mines where the slaves worked. It was an emotional experience, but it is something we can do to acknowledge the debt. In every state in the USA, there already exist oral histories. We can propose, as part of the anniversary, a yearlong march to get the oral histories into the open with the help of the churches. If we formed voters' leagues, we could encourage the acknowledgement of the debt of the slave trade. If everyone were a registered voter, this would be power.

Prinny Anderson shared her experiences of working in three different settings at the individual and family levels, intended to promote healing and specific approaches she and her colleagues have found to be most effective. Working with a community of descendants of enslaved and their enslavers, what was effective was creating a resource space to share family histories, eating together, worshipping together, and having the enslavers' descendants offer an apology, asking forgiveness from those descended from the enslaved. A national organization, Coming to the Table (CTTT), has developed tools for sensitive conversations about slavery, race and racism, and encourages everyone to become trained in dialogue and circle processes. As part of the Slave Dwelling Project's overnights in slave cabins, what promotes more open conversation about slavery includes campfire light, lantern light or candle light, and having a meal together.

Ana Lucia Araujo suggested that the required healing can be possible only when it is also systemic and not just local. For example, the Catholic Church was the largest slave owner and played a huge role in the slave trade, and universities at both sides of the Atlantic were financed by slavery. Within the context of religious organisations, healing may be limited because such processes are not neutral. In addition, churches are politicised because those who benefited from the legacy of the slave trade continue to do so. We need to denounce the persistence of these inequalities and we need to empower marginalised people to play an active part in healing.

Judite Blanc affirmed that the 2010 earthquake in Haiti was a terrible trauma, but it also revealed how the transmission of the traumas of slavery and colonisation was missing from the historical literature about Haiti. The traumas include the cognitive injustices done to Haitian people such as the eradication of local forms of knowledge (eg. Haitian enslaved people overcame French army through Creole language and voodoo practices). All solutions to the problems of traumas need to be evidence based, but we need a campaign based on this evidence, such as her research in health disparities, especially those related to sleep.

Rob Corcoran noted that Richmond, VA, was the largest domestic slave market in the 19th century and the capital of the Confederacy. Since 1993, there has been a sustained effort for healing engaging all sectors. Several important approaches emerged: (1) Be specific; place matters; (2) Hold up a vision that others can share: the place of greatest pain can be the place where healing can begin; (3) Create a space of hospitality where different stories are heard and respected; together create new shared narratives; (4) Facilitate honest, deep dialogue, which can transform enemies into possible allies; it is important to ask who is not at the table, for this might include unexpected allies. (5) Build a bridge of trust strong enough

to bear the weight of the truth you are trying to deliver. For social activists this may require overcoming our own prejudices and biases. Among the examples Rob shared is a 3-part dialogic process through which Richmond began to address poverty: 1st: surveying data on current poverty; 2nd: attending to historical narratives that contextualize the racist roots of poverty; 3rd: discussing strategies for the future. Richmond is now home to the nation's first Office of Community Wealth Building.

Peter Hanes told us that he is a descendant from the Mount Vernon slaves. He discussed the display of the original 13th amendment passed in 1864, in the early 1990's. His mother was involved in this commemorative occasion: she cut the ribbon for this. People who knew her asked "Why do you do this?" and she answered: "This is important for healing". As far as he is concerned, the national archives and all such historical documents can be the basis for healing programmes, and this is why we should be thinking about online learning and media tools, such as films as part of healing processes.

Munyiri Venanzio Mwangi reported on his work in the Escuelas de Perdon y Reconciliacion (ESPERE) in the Afro-communities in Colombia. Often these discussions take place in religious settings and participating stakeholders are usually the victims and the offended. ESPERE workshops engage the poor and they consist in listening, sharing narratives, forgiveness, and empowering people to transform institutions. In particular, we need to remember that our bodies are important in healing and healing processes need to be embodied. The messages of hope can be written in our bodies where there is an invitation to say 'No' to oppression and marginalisation and say 'No' to continued hatred. In this sense, forgiveness is a tool of revolution.

CONCLUSION

At the last session, the organisers expressed deep gratitude to all the contributors to the Symposium whose sharing and input to discussions had resulted in profound learning. Each person's good will, generosity and dedication to doing this work were very inspiring. Ali Moussa Iye, on behalf of the UNESCO Slave Route Project expressed commitment to continue supporting the follow-up ideas from the Symposium. He proposed that the group take the opportunities of the 400th year commemoration of the arrival of African people in North America, and the mid-term celebration of the UN Decade of People of African Descent and make meaningful and implementable recommendations for healing the wounds of slavery.

APPENDICES

The symposium consisted two group-work sessions, and the contributors formed four inter-disciplinary groups in addressing the questions such as what kinds of healing are most meaningful, the challenges involved to start the processes of healing, and how to move forward under the UNESCO's Healing the Wounds of Slavery project.

Appendix I: Summary of key points from group discussions:

- A. *A UNESCO Guide for Healing the Wounds of Slavery.*
- psycho-social consequences of slavery (wounds);
 - rationales for the healing imperative;
 - conceptions of healing;
 - approaches to healing and purposes;
 - processes and practices (familial, communal, socio-economic, political) of healing
 - effects of different existing meaningful healing projects and how are they evaluated;

To develop the Guide, it seems necessary that we start with a mapping exercise bringing together conceptions, methodologies, approaches, experts' reflections, field experiences, case studies on healing the wounds of slavery.

B. Truth(s) and Recognition:

- More voices to acknowledge the crimes of the trans-Atlantic slave trade and slavery;
- More public spaces for listening and sharing Afro-Americans' narratives and for honouring memories of slave history;
- Mobilising all sectors of society in participating in truth-telling and recognition;
- Memory work to be financed and published and disseminated through education.
- Formal political processes within governments across the Americas to recognise the wounds of this history and its psycho-social effects, as well as providing a concerted effort towards holistic healing;

C. Research dedicated to healing the wounds of slavery and systemic transformation

- Research into the narratives and histories of slave trade and enslavement
- Trans-disciplinary research into the consequences (psychological, physical, health, social, cultural and political) of the north-Atlantic slave history
- Being mindful of the differentiation between what works in the U.S. and what may work elsewhere, such as the Francophone world.
- 'Health' needs to be defined holistically without academic 'silos'
- Research will be powerful when it is linked to the stories and lives of communities.

D. Dialogue

- Avoiding perpetrator vs victim divides; avoiding over-emphasis on victimhood; need more energising narratives.
- Remembering that blackness is not a monolith may help avoid encouraging division.
- Need to be aware of the differences between various kinds of dialogue
- Reinforce bonding that has already occurred, reconciliation that has already started.
- Need a paradigm shift so that our self-identity is not wedded to Western conceptions.
- Who should come to the table? It can be better initially to be racially separate. Dialogues between blacks and among whites can be helpful before those between blacks and whites.
- Black communities need to be able to control their own dialogue. Afro-Americans need discussions among themselves, as do white people.
- Dialogues have to embrace intergenerational groups.
- Intra-family discussions in white communities needs to be stressed.
- The formation of discussion circles is already a part of many cultures.

E. Forgiveness

- Forgiveness – for whose benefit?
- Need for forgiveness, but forgiveness must not exclude social justice.
- Forgiveness should not be thought about as an event but rather as a process by which one would gain one's own humanity first.
- Instead of forgiveness, we might work towards transcendence or *dépassement* – moving beyond.

F. Engagement

- Need to work more with younger people in actual communities, eg. campus dialogue
- Define topics that can draw people into discussions of slave trade narratives.
- Overcoming of racism requires white allies, and we need best practices to engage with our potential allies, eg. Toolkit that help talk to sceptics about racism.
- Developing a common programme to be funded by larger foundations, eg. Ford Foundation, Gates Foundation, and others with the help of Kellogg Foundation.
- Need personal work on ourselves for ourselves.
- We need psychological healing processes that stop war and hate.
- Wide dissemination across all media of a few themes, such as a training module
- We need to build a bridge of trust that is strong enough to bear the weight of truths. Recommended:

Appendix II: Summary of group proposals

Group 1:

- Follow through on the recommendations from the earlier UNESCO meetings in Martinique, and help and support UNESCO to promote the messages about trans-Atlantic slavery legacies;
- Follow the successes of the AIDS programme and translate the main messages into a language that everyone could understand and disseminate them widely.
- Communicate about the proposed curriculum and philosophy.

Group 3:

- Build a matrix that defines the parameters for a web-based resource.
- Empower and mobilise students and others to help build this matrix.
- Involve other UN institutions such as WHO;
- Disseminate these resources through our professional associations.

Group 4:

- Need comparative research on the history of different healing experiences, such as healing processes in the African continent and the Middle East.
- Outline all the arguments for the need for such healing processes
- Encourage Film Directors to produce audio-visual guide on healing processes for the general public
- Organise community dialogues which need to start with a recognition of existing inequalities and poverty experienced by Afro-Americans.

Group 5:

- Form 8 working groups from within us: (1) public health, (2) helping professions, (3) faiths and religions, (4) legal and public policy, (5) technology and media, (6) public history, (7) education, (8) fundraising.
- Each group would be responsible for defining its own agenda and goals.
- Include components pertaining to research, healing and operations.
- Each group would work towards a result, such as recommendations, to repeat in one year this kind of meeting that we are having now.
- Each group would be responsible for defining its own agenda and goals re: how to heal legacies of slavery in their sector.