

African Spiritual Methods of Healing: The Use of Candomblé in Traumatic Response

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Abstract: In this article, the authors will present findings from a phenomenological study exploring the healing experiences of favela residents who utilize Candomblé as a psychospiritual intervention for traumatic response to neocolonial conditions. Findings have transnational implications for understanding Afro-Brazilian spiritual methods of resisting colonialism and the cultural genocide that plagues Diasporic Africans.

Keywords: Diasporic Africans, Candomblé, Favelas, Spiritual Healing, Trauma

The traumas of the Ma'afa (African Holocaust) and continued living under neocolonial conditions have been discussed widely (see for example Larson, 1999; Buckley-Zistel, 2009; Pollock, 1996; Matory, 2007). The effects of these conditions continue even in the “age of Obama” as demonstrated through the continued suffering of African people with disproportionate rates of many chronic and fatal health conditions such as HIV/AIDS, diabetes, and asthma. We continue to experience high rates of police brutality, homicide, psychic violence, underemployment, and struggle collectively on numerous social and economic indicators of wellness. The healing of African people throughout the Diaspora is a necessity as Africans continue to resist the thriving cultural genocide of contemporary colonial conditions.

Increased media attention to specific traumatic events such as school and community violence within the ‘inner city’ has led to recent attention given to trauma within African American communities (Bastide, 1978; Daniel, 2005; Harding 2000). The international trauma field specifically, has given increased attention to indigenous approaches to healing (Krippner, 2008; Miles, 2008; Pollock, 1996; Van de Port, 2005; and Voeks, 1997). Yet, there is little empirical literature investigating indigenous approaches to trauma interventions such as African spiritual pathways to healing even within African centered psychological discourse. Instead, there has been a reliance predominantly on western-oriented trauma models.

As African psychology moves toward a state of greater articulation, it must consider the ways of most effectively responding to the decimating effects of the continued traumatic conditions of neocolonial life for Africans in the Diaspora without unduly privileging the experiences of Africans in the U.S. Toward this end, the purpose of this article is to utilize an Afro-Brazilian community as a case study focusing on its employment of a traditional African spiritual system – Candomblé’ - to individually and collectively heal from and resist colonization. We believe that there is much for African centered psychology to learn about trauma intervention and cultural resistance from devotees of Brazilian Candomblé’. Thus, we will begin with an overview of Candomblé’, followed by an understanding of Afro-Brazilian lived experiences particularly within the *favelas*, and indigenous spiritual approaches to healing to provide an introduction to the present study. It is our hope that the shared Pan-African narratives of both trauma and resistance emerge as a result of the healing experiences of participants in this study.

Background of Candomblé

Candomblé is an Afro-Brazilian religion brought to Brazil by enslaved Africans primarily from West and West Central Africa (i.e. Yoruba, Aja-Fon, and Bantu) and was largely influenced by the chattel slavery and mercantilistic context from which it emerged during the fifteenth to nineteenth centuries (Harding, 2000; Krippner, 2008; Van De Port, 2005). Candomblé' has been erroneously defined as polytheistic within the (predominantly White) anthropological literature, although there is worship of one Creator and veneration of the Orixas (Orishas) as manifestations of the Creator (Van De Port, 2005, Harding 2000, 2006). As is customary in traditional African religions, veneration of the Ancestors and the Orixas is integral which is reflected in primary rituals, ceremonies, and daily practice. Additionally, embodiment or incorporation of Spirit (often referred to in the literature as *spiritualism*) is highly valued.

The nature of Brazilian slavery is critical to an understanding of Candomblé because it was in response to the dehumanization of enslavement that the religion emerged (Harding, 2000). Despite Brazil's independence from Portugal in 1822, the system of slavery continued to be used in order to ensure the progression of Brazil's social and economic structures. The use of such oppressive structures directly impacted the status of Afro-Brazilians and further solidified their subjugated status within the larger Brazilian society for a generation later than slavery in the U.S. Because enslaved Africans were denied the right to religious autonomy, were forcibly converted to Catholicism and required to worship Catholic saints, Africans paired the saints to their Orixas and used the saints as a way to conceal their continued practice of indigenous beliefs and therefore out of necessity became a syncretistic religion at that time¹ (Prata, 1983).

Largely matrilineal as a result of being established primarily by women, its leadership remains largely female particularly in the oldest *tereirros* (sacred ritual grounds). The model of leadership and ritual organization (Nagô) in Candomblé mirrors that of Yoruba traditions. Harding outlines the hierarchical organization of Candomblé as being constructed around

“the spiritual and temporal leadership of a mother or father of the saint (*mãe or pai de santo*); honorary protectors and defenders of the community (*ogãs*); and initiates, daughters and sons of the saint (*filhas and filhos de santo*), who incorporated in their bodies the living presence of the deities” (p. 48).

We see that the religion served multiple spiritual and social functions. Namely, it provided a culturally based meaning system for people of African descent beyond the social and physical limitations placed upon them by dominant social structures of the time by providing “a means of re-membering and (re)creating an identity of value and connectedness—to Spirit, to a pre-slavery past, to ancestors, to community” (Harding, 2000, p. xvi). Yet, it is important to note that Candomblé' was practiced by enslaved Africans, *crioulos* (Brazilian born Africans), *libertos* (*freed Africans*), and some 'mulattoes' as well demonstrating its spiritual function across these sectors.

Secondly, the *terreiro*, or place of worship, was a physical location of refuge but also a space created in active resistance against the social and cultural structures, which denied their very humanity (Harding, 2000). These gathering spaces were places in which Africans had power and agency and could spiritually if not physically transcend their abject conditions. They were able to “(re)create spaces where blacks were no longer ‘slave’ or ‘subaltern,’ but where they in fact called into being prior and new meanings of themselves and reshaped these to help survive the jeopardous situations of the New World” (Harding, 2003, p. xv).

Candomblé’ and Healing: Cultural Continuity

Scholars have identified a number of ways in which Candomblé’ has been germane in Afro-Brazilian life (Harding, 2000; Rodrigues, 2009; Sodre’, 1988). However, for the present discussion there are four primary waysⁱⁱ in which Candomblé’ has been utilized in the process of individual and collective healing, transformation, and resistance. These particular ways are: 1) establishing cultural continuity; 2) providing a means and a model for holistic health; 3) spiritual intervention and restoration; and 4) by acting as a community of resistance. These merit further elucidation to illustrate the ways in which these might inform African centered psychology.

One of the most significant functions Candomblé’ served was as a bearer of cultural norms; it allowed a continued platform for an authentic African identity to emerge even in the face of active genocide. As mentioned previously, *terreiros* served multiple functions including the creation of space and community. Even the leadership structure of the *terreiro* reflected a re-establishment of kinship networks. In addition, Candomblé’ brought together various ethnic groups and deities that had previously worshipped separately and thereby created a spiritual community that was able to transcend previous geographic and ethnic boundaries and move toward a shared identity as African in a particular Brazilian context.

The Candomblé’ community, particularly its leadership continues to serve as transmitters of cultural values and norms. This is demonstrated in the historical and continued integration of Yoruba language in the practice of Candomblé’, which can be seen in popular Brazilian culture as well. The leadership has also challenged Afro-Brazilians to evolve and become more publicly African. For instance, while Candomblé’ had to be a syncretized religion during times of enslavement, in 1983 in public declarations made to the popular media many of the most powerful *maes-de-santos* or *Iyalorixas* (mother of saints or priestesses) noted that Candomblé’ would no longer be a syncretized religion (Prata, 1983). They noted that the Ancestors had to syncretize to prevent being massacred, but this practice was deemed disrespectful of the African origins and that they would no longer hide behind Catholicism. In this way, Candomblé’ leaders modeled ways in which Afro-Brazilians can and *should* embrace their authentic African heritage and resist the continued cultural domination and recent exploitation of African customs. It is clear that from its inception Candomblé’ was utilized at once as a vehicle of healing and protection but also a means of maintaining cultural continuity.

Model of Holistic Health

Candomblé' also provided a model and a means for understanding and treating the physical, psychological, and spiritual health of its devotees (Harding, 2000). Adherents of the faith sought medical and spiritual counsel for ailments suffered largely as a result of colonial life and the transition to the foreign context. Harding (2000) outlines the specific use of healing rituals as central to Candomblé: a) drums and drum-dances; b) ritual paraphernalia, such as other musical instruments (especially percussion instruments and metal bells or gongs), figurative representations of the deities, votive offerings, specially constructed clothing and accouterments of the deities, beads and cowrie shells, and magio-pharmacopoeic elements such as herbs, roots, bones, and medicinal decoctions; c) divination; d) healing; and e) seclusion (p. 69). The similar terrain in northeastern Brazil allowed continued access to the same plant based herbs and medicines utilized in Africa which assisted healers in continuing indigenous health care.

Spiritual Intervention and Restoration

Africans were clear that enslavement did not represent right order, which underscored the necessity of spiritual intervention and the need to practice their own religions to fight such forces. Indeed, Africans utilized their religious and spiritual practices in response to the colonial conditions of the time.

Ritual and healing. The use of ritual is an essential way in which healing and transcendence occur in Candomblé'. Harding describes Candomblé as a "ceremony, a performance of the *reclamation* of the body by a pan-African collectivity, a circle of Spirits and New World kin" (2000, p.154). The process of initiation, for example is the process of joining with the cosmic energy of one's Orixá; a process of mutual acceptance. Other processes such as prayer, offerings, and adherence to one's Orixá's prohibitions were spiritual pathways to communion with the Divine while maintaining cultural connectedness.

Such spiritual practices also served as a way of increasing spiritual protection against the prevailing dominant forces. Scholars have argued that there are increased numbers of individuals who experience spirit incorporation in African religions in the Americas. It is speculated that the particular violence and trauma endured may have required increased spiritual protection and guidance (Harding, 2000; Krippner, 2008). Specifically, the use of ritual, magico-pharmacopoeic processes was a primary means of exacting power and employing resistance within the most extreme of dehumanizing existences. Moreover, the use of cosmic forces and the material manifestations assisted in redressing the inequality defined by slavery (Harding, 2000). Spiritual restoration was achieved within the sacred spaces of African spiritual practice, which fueled joyful resistance within many slave-based societies. Researchers emphasize the renewable resources that spiritual energy possesses and the critical role this played in the cultivation of *axé* and overall transformation for slave-based societies (Harding, 2000; Matory, 2007; Selka, 2007).

Cultivation of Axe'

Arguably, the most significant type of power for Afro-Brazilians during this time was that of Spirit. Axe' refers to that life force, spiritual power or energy that binds people with the natural and Divine worlds. Sodre' argues that Axe'

“is the basic cosmovision which places the force of the universe, the power of realization and transformation, at the center of the natural order of things. This cosmic or universal force is known by many names: for Bantus it is *mntu*, for Yorubas it is *ase'*, among the Congos it is *ngolo*, and the Nyanga call it *karamaro*” (1988, p. 121).

Axe' is seen as an essential element of spiritual life in the material world, particularly in enduring traumatic conditions.

Communities of Resistance

Throughout history there have been many movements and communities that have resisted the dehumanizing forces present in the dominant culture (Watkins & Shulman, 2008, p. 209). The Candomblé' community serves as such an example for the Afro-Brazilian community. Candomblé' and its leaders served as a community of resistance in a number of ways. First, the ability to maintain and reclaim an African identity resisting cultural and religious hegemony over time is demonstrable. Second, Candomblé' has served as a community led predominantly by African women within a largely patriarchal culture resisting dominant gendered norms as well. Moreover, Candomblé' leaders in Bahia have been lauded for their role in movements such as the Black Power Movement, green movement, and fighting for the rights of indigenous and landless people (Reis, 1980).

Afro-Brazilians, Trauma, and Human Rights Violations

As previously indicated, since Africans were forcibly brought to Brazil, they have had a subjugated existence at best. Like Africans in other parts of the Americas, this subjugated status continues to date. Colonialism thrives in Brazil despite indicators of social 'progress'; Brazilian society continues to profit from Afro-Brazilians' subjugated status. Although Brazil continues to have one of the largest African populations outside of the continent, its census hosts more than 135 different racial categories which obscure racial data and make a common Afro-Brazilian identity a challenge (McLucas, 2005). Generally, Afro-Brazilians tend to have lower access to formal education (illiteracy rates tend to be twice as high) and therefore are permanently rendered to the lowest economic groups. Indeed, eighty percent of Afro-Brazilian women continue to work in the lowest paid positions in the country such as domestic servants (Nascimento and Nascimento, 2001, p. 114).

The quality of life for Afro-Brazilians continues to fall far below that of white Brazilians. According to a 1996 national survey the infant mortality rates, salary disparities, and incidents of police brutality further exacerbate the “White-Black gap” in Brazil (Vargas, 2005, p. 282). Barely fifty percent of Black households are connected to a sewage system, while the rate is 73.6 percent for white households. It is noteworthy that when Vargas (2005) applied the United Nations Index of Human Development, which was utilized as a measure of life quality on a scale of 0-1, the findings were “0.796 for the Brazilian population as a whole and 0.573 for Afro-Brazilians” (p. 282). Consequently, Afro-Brazilians are increasingly “victims of preventable diseases, malnutrition, joblessness, AIDS/HIV infection, and clinical depression” (p. 279).

Systematic exclusion from the education system and access to primary resources makes poverty pervasive in the Afro-Brazilian community. Approximately 40% of favela residents are Black (Vargas, 2003). Like the ghettos and housing tenements of the U.S., favela life is marked with crime and violence perpetrated largely by gangs and abusive police. Consequently, some of the most frequent traumas experienced by Afro-Brazilians include but are not limited to police brutality, community violence, extortion, torture, kidnappings, and gang violence (HR Watch, 2010; Vargas, 2005). Yet this impacts African and indigenous people in rural Brazil as well. Indigenous and landless peoples face threats, violence, and forced labor particularly in rural conflicts over land distribution. Approximately 26,000 workers deemed to be working in conditions analogous to slavery have been liberated since 1995 (Vargas, 2003).

Human Rights Violation

It is important that these chronic experiences with violence, abject poverty, and the like be understood within a colonial context in which: (1) these conditions do not impact all and (2) the continued suffering of African people serve a larger sociopolitical and economic function. Toward this end, the experiences of Africans in Brazil and other parts of the Americas have been deemed human rights violations. A recent summary of human rights violations in Brazil (HR Watch 2010) indicate mass state-sanctioned murder. Police were responsible for 561 killings in the state of Rio de Janeiro alone in the first six months of 2009 in situations described as “resistance followed by death” (HR Watch, 2010, n.p.). Additionally, there were over 40,000 intentional homicides in Brazil in 2008 and at least 171 neighborhoods in Rio de Janeiro are controlled by militias. Clearly, these are environments that can be traumatizing at best.

Certainly there are glaring similarities between Brazilian experiences and that of the prison industrial complex, gang violence, police repression, and the like in the U.S. Specifically, police brutality also plagues Africans and low income communities in the U.S. In addition, the rate of incarceration of Black men and women are soaring. A recent human rights report found that in every year from 1980 to 2007, blacks were arrested on drug charges at rates that were 2.8 to 5.5 times higher than white arrest rates, despite the fact that blacks and whites engaged in illegal drug behavior at similar rates.

Health indicators also demonstrate shared health factors. African American women face grossly disproportionate rates of HIV/AIDS infection and death, and are now the leading cause of death among African-American women ages 25 to 34. For young African American men, more deaths are caused by homicide than any other cause.

Trauma Intervention

Despite clear patterns of chronic traumatization of African people, there is little research focusing specifically on this population. Even less research focuses on prevention of trauma for African people or on culturally centered interventions. Yet, the analysis of trauma can be a daunting task for numerous reasons. First, the trauma is subjective and generally based largely on the nomenclature for the post traumatic stress disorder diagnosis. The subjectivity of trauma experiences is primarily studied via quantitative methods that often raise challenges in capturing the totality of the effects of complex trauma on individuals. Most of the trauma experienced by Africans throughout the Diaspora such as those previously mentioned are not discrete events generally discussed within the trauma literature on which the PTSD diagnosis is based. These experiences are better described as complex trauma which refers to “a type of trauma that occurs repeatedly and cumulatively, usually over a period of time and within specific relationships and contexts” (Courtois, 2008, p. 86). Recent discussions about trauma have expanded this definition to also include varying catastrophic events and acute and chronic illness which can all result in deleterious psychological sequelae. Moreover, “cultural trauma occurs when members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocable ways (Alexander, 2004, p. 1). Certainly the traumas of the Ma’afa are demonstrable of such harm.

Recent trauma research indicates empirical support for exposure therapies (Briere & Scott, 2006; Foa, Dancu, Hembree, Joaycox, Meadows & Street, 1999), cognitive restructuring (Bisson, 2005), EMDR (Bradley, et al., 2005; Van Etten & Taylor, 1998), and pharmacotherapy (Opler, Grennan & Ford, 2009). While this research is noteworthy, it should be interpreted with caution. Much of what is known about trauma intervention is based upon a biomedical model with treatments devised for individuals diagnosed with PTSD, which is largely based on a culturally narrow understanding of trauma as a discrete event that results in a particular set of categorical responses. Thus, research tends to be inconclusive about treatment effectiveness with clients who demonstrate non-traditional symptom constellations, such as altered life schemas or those with complex or cultural trauma (see for example Opler, Grennan & Ford, 2009).

This reliance on Western psychiatric nomenclature, instruments, and treatment approaches reflect the belief that fundamental symptoms of trauma and their respective causal mechanisms are in essence culturally and contextually invariant (Miller, et al., 2006). Although, many now recognize that the current PTSD diagnosis does not capture the complexity of traumatic experiences for all individuals or communities.

For example, it neglects the ways in which social forces such as colonialism, political disenfranchisement, and economic oppression can be chronically traumatizing and the culturally specific responses to such forces. If the diagnostic criteria for posttraumatic stress disorder do not optimally capture the range of traumatic experiences or its effects, then efficacy studies which operationalize effectiveness as solely symptom-reduction may not fully assess treatment effectiveness as a whole. Moreover, symptom reduction does not address healing and restoration of a people to optimal functioning. Such is a goal of African-centered psychology. Let us then briefly consider recent attention to understanding indigenous approaches to healing.

Spiritual Pathways to Healing and Resistance

Spirituality has been a topic of critical discourse and analysis for some time among African-centered psychologists (see for example Fu-kiau 2001; Nobles, 2006 among others). There has been increased interest in spiritually or culturally-based explanatory beliefs of illness or disorder. Johnson, Mayanja, Bangirana, & Kizito (2009) conducted a mixed-methods study with 246 Ugandan adults aimed at eliciting their explanatory belief models (EMs) about the root causes of depression. Findings revealed a western oriented view of depression mixed with Ugandan contextual variables. For instance, participants emphasized the role of poverty, the strong association with HIV/AIDS, reliance on social supports, stigmatization, and the use of traditional and herbal medicines in treatment (p. 286).

It is noteworthy that the researchers found that the Ugandan government has recognized the role of traditional healers in meeting the mental health needs of Ugandans since they provide a wider range of services than professionals in the formal mental health sector. One psychiatrist, describing the importance of healers, stated, “it is the healing component of their work, with its associations to the meanings of sickness, that is important” (p. 287). These findings indicated the importance of understanding culturally based explanatory models of health and illness, a value on the range of services offered by traditional healers, and that improving mental health services in Uganda will depend on improved collaboration and better integration of services.

In an ethnographic study of communities in Côte d’Ivoire and Afro-Brazilians in Bahia, Brazil, Caprara (1998) found that Western and non-Western concepts of health and illness vary drastically. Within the Afro-Brazilian culture, “disease transmission is considered within a framework of relationships between analogical thinking and empirical experience, symbolic classifications and social organization and individuals and body conceptions” (p. 998).

Beyond this work, energy psychologists have begun building upon ancient Eastern knowledge of the body’s energy and chakra systems to challenge what we know about trauma and healing. Specifically, energy psychology utilizes imaginal exposure in combination with stimulation of or physical intervention with acupressure or meridian points of the body to effect psychological change – namely reduction of hyperarousal states (Feinstein, 2008).

To date, energy psychology has been utilized with high success rates following mass disaster or crises with African populations, including the Congo, Kenya, Nairobi, Rwanda, South Africa, and Tanzania. While empirical research is still in its infancy for energy psychology, findings are promising and merit further consideration particularly given the centrality of spirit and energy for persons of African ancestry.

Present Study

The continued psychospiritual and physical assault upon African people is a shared experience. Trauma theory fails to adequately account for the severity and continued nature of the Ma'afa. While traditional models of intervention with trauma provide guidelines and tools that may help reduce some clinical symptoms, the healing and restoration of the African Spirit remains the task of serious African centered healer-psychologists. Increased attention to trauma intervention is warranted within African centered psychological discourse. Specifically, our discussions and interventions of trauma must incorporate the shared Pan-African struggle for liberation and healing. Toward this end, the purpose of the present study was to explore the healing experiences of Afro-Brazilian trauma survivors who utilize Candomblé'.

Research Paradigm

This study utilized a phenomenological research design that incorporates the core tenants of African-centered psychology. Specifically, phenomenological research is concerned with the lived experience of a group with a phenomenon of interest. The primary goal of this research is to increase understanding of the nature and lived experience of leaders and devotees of Candomblé particularly in regard to trauma intervention. Thus, a phenomenological methodology was utilized in order to create space for a holistic understanding of Afro-Brazilians' own perceptions of their healing experiences with Candomblé.

Wimpenny & Gass (2000) propose that in-depth interviews are vital in phenomenological research because they allow the research to probe into the individuals' subjective experiences (p. 1486). This assumption supports the use of semi-structured interviews as the primary data collection procedure for the present study. Therefore, this study has two main components: participant observation and individual interviews. The researcher and research assistant served as participant-observers to Candomblé rituals, ceremonies, and worship practices. This enhanced the collaborative approach that is recommended in liberation research (Watkins and Shulman, 2008).

Participants

Ten interviews were conducted in the Salvador da Bahia community of Brazil with devotees and priests/priestesses of Candomblé'. The sample was predominantly male (n=7) but had an equal representation of priests (n=5) and devotees (n=5). Participants were otherwise demographically diverse, ranging in age, years of practice, and gender. All participants identified with the Afro-Brazilian community, resided in a *favela*, and were involved with the Candomblé community.

Recruitment

Upon approval from the Institutional Review Board at the host academic institution, a Portuguese language and cultural interpreter was contacted to assist in recruitment for participation in the research study. Convenience sampling was used to gain participants due to the limited time the researchers had in the community of interest. The criteria for this study required that participants identified themselves as being a part of the Afro-Brazilian community who, by self-report, stated that they participated in Candomblé practices as a priest, priestess, or practitioner. Participants were recruited at various Bahian Candomblé *terreiros* and throughout a large *favela* in Salvador da Bahia. Participants were offered R\$10 (local currency) as a donation to the *terreiro* for agreeing to participate in the study and as a demonstration of the researchers' appreciation of their time and openness.

Participant Observation

Participant observation was an important component to this study and further enhanced the cultural understanding of the researchers towards the phenomenon of interest. Two researchers were present for each interview and the non-interviewing researcher was responsible for taking detailed process and observation notes. Additionally, Candomblé ceremonies and ritual preparation activities were observed, in order to increase the collaboration of the research process between the researchers and the participants (Watkins & Shulman, 2008).

Interviews

In addition to the participant observational research, a semi-structured interview was conducted with each participant. An interview guide was developed to increase consistency and credibility across each interview. The interviews began with an introduction of the researchers and the research study. The interview questions followed the research descriptions and focused on the participants' lived experiences while practicing Candomblé, subjective trauma experiences, and their experience of the healing aspects of Candomblé. While standard questions were asked, the semi-structured interview format provided the flexibility to follow up and probe for greater depth and breadth of response.

Prior to each interview, the participants were given an oral description of the study in Portuguese (by the aid of an interpreter) and the researchers obtained informed consent, while the participants were given an opportunity to ask questions about the study. Interviews were held inside of the participants' *terreiros* or homes. This ensured that the interviewing environment was familiar and comfortable for the participants to ensure that they felt safe to participate in the process. Interviews were audio taped and transcribed verbatim in English with the help of an additional research assistant who was not present for the fieldwork. The interviews lasted between 30-45 minutes. Particular attention was placed taking process and field notes. Lastly, the researchers recorded their own personal notes and reactions following every interview. This was critical to the research because it enabled the researchers to more fully integrate our own observations and experiences, in order to understand how we may have influenced the interview and findings.

Credibility of Research

Several verification strategies were employed in the study to increase trustworthiness and rigor of the research process. Detailed field, observation and process notes were transcribed and used to triangulate with interview and narrative data. Specifically, data triangulation using the data from the interview responses and a research assistant made way for a more comprehensive understanding of the phenomenon of interest. Furthermore, peer debriefing, reflective journaling, and the use of qualitative data software (NVivo) was utilized to increase the reliability and accuracy of data analysis.

The Self of the Researcher

Liberatory research does not take the stance that it is absolute and it is careful not to overgeneralize its results. Liberatory research is careful to acknowledge the local context of its efforts. Watkins & Shulman (2008) assert that “[liberatory research] is a humble enterprise, self-conscious, self-correcting, and confessing of limitation” (p. 297). The implementation of research via this theory forces the researcher to become vulnerable to being proven wrong and having his or her life changed as a result of the process. Specifically, in this study it was critical that the researchers engaged in discussions of race, social class, and spirituality throughout the entire research process. We were particularly aware of the nationality and linguistic differences in our work with research participants. Notably, both researchers phenotypically blended into the Afro-Brazilian community, which appeared to aid in physical conformity with the community. Although neither researcher spoke Portuguese, they were proficient in Spanish which helped to lessen the language barrier due to the similarities between the Portuguese and Spanish languages. These factors were considered in process notes and in data triangulation discussed above.

Data Analysis

All interviews and process notes were transcribed verbatim in English for data analysis. Narrative data was analyzed by content and grouped into themes using the structured method by Paul Colaizzi outlined by Spinelli (2005). The data analysis software NVivo was used to assist in data categorization and content analysis (Stemler, 2001). The ten steps of the structured Colaizzi method of analysis of phenomenological data identified by Spinelli (2005) are as follows:

- *Step 1:* The researcher designs a brief unbiased statement or research questions whose purpose is to specify the focus of the investigation.
- *Step 2:* The research engages in a structured, focused inquiry with each co-researcher (participant).
- *Step 3:* The interviews are transcribed verbatim.
- *Step 4:* The researcher reads each of the transcribed interviews ('protocols') several times in order to gain a 'feel' for their content.
- *Step 5:* The researcher returns to each individual protocol and extracts those phrases or sentences that directly pertain to the investigated phenomenon so that by the end of this step the researcher has collected a list of *significant statements* from each protocol.
- *Step 6:* The researcher seeks to extract or spell out the meanings contained in each significant statement. This step is the most precarious interpretative part of the phenomenological research process.
- *Step 7:* After the research formulates meanings from all of the significant statements derived from all of the protocols, the research now organizes the formulated meanings into clusters of themes that may be shared by one, some or all of the co-researchers. There may be formulated meanings that do not fall into clusters of themes in that they stand alone. These are also added to the final list of thematic elements.
- *Step 8:* The list of thematic elements is integrated into an exhaustive description of the investigated phenomenon.

- *Step 9:* The researcher returns to each co-researcher with the exhaustive description so that the co-researcher can respond to it in terms of its verifiability.
- *Step 10:* On the basis of the co-researchers' comments, amendments, corrections, novel additions, if any, the researcher produces a further, usually final, exhaustive description of the phenomenon (p. 136).

Due to cost, steps nine and ten were modified in this present study. However, a local Brazilian cultural and language interpreter was enlisted to assist the researchers in final interpretation and any questions regarding cultural or linguistic translation. In addition, the co-researcher and research assistant served as triangulating analysts and reviewed transcripts and observational data, validated emerging themes, made corrections, and discussed any discrepancies in order to further establish inter-rater reliability

Participant Demographics

Ten interviews were conducted in Salvador da Bahia, Brazil. The sample of male and female Candomblé practitioners was solely Afro-Brazilian (n=10). Two women and three men identified themselves as priestesses and priests. The remaining four men and one woman identified themselves solely as practitioners of Candomblé. Due to language barriers and the complexity of Brazilian ethnic identification, there were no demographic questionnaires administered to the participants. Rather, participants were asked questions essential to identity during the interview. It is noteworthy that the majority of participants began practicing Candomblé in their adolescence.

Results indicate a few prominent themes across interviews which are categorized as follows: 1) sense of community and connectedness; 2) trauma experiences; and 3) health and healing. First, participants described a profound sense of community and connectedness within the Candomblé faith. They described a dynamic relationship; that their faith in Candomblé was central to their physical and spiritual healing and that as a result of healing their faith often deepened. Many participants reported a number of positive experiences with Candomblé and also attributed their participation in healing rituals to their overall health. Lastly, participants voiced several particular aspects of Candomblé that were central to their healing experiences. The themes give rise to the importance of community connectedness within the Afro-Brazilian community and lend further support to the power of Spirit and community within a healing experience.

Sense of Community and Connectedness

Participants noted the importance of community and connectedness to the practice of their faith. Particularly, they discussed Candomblé *terreiros* as being central to their healing experiences in that this was the location where healing takes place and where they most experience the *Orixas*. One participant stated:

Participant 4: And if you come to be part of something like Candomblé, you most like it first. It is okay to stop by the house to see what is going on. You are not gonna see everything at once. You gradually add Candomblé activities to your life, slowly you start to know more about it. And day by day you learn something new. Like you guys, if you ask me to take you there, and see everything, I won't. I can show you some of it, and talk about others, but once you reach this door here (referring to a house's door), there is nothing to do with me, it is the *Orixa*.

One participant discussed Candomblé's influence and connection throughout the African Diaspora:

Participant (2): There are a lot of people from Bahia, El Salvador in US spreading Can out, a lot of Americans that enjoy Can as well, they dance, they think it is beautiful. And if you guys had a chance to see the parties and celebrations you would take pictures, and would love that.

Candomblé' clearly served to promote cultural connectedness. The sense of community also expands beyond the *terreiro* walls and includes generations of resistance to and protection from neo-colonial conditions that Afro-Brazilians have endured for centuries.

Participant (9): I would say that everybody should know, learn more about Candomblé and the practices, just for the fact that Candomblé is a new belief as a fresh fruit, Candomblé was born in Africa and expanded his activities around the world; came to Brazil brought through the Africans slaves, what helped to make Brazil, as many other things, a diverse country, like one of the cultural influences in Brazil. And if you can, read something about the Candomblé, you can watch the ceremonies to know the real truth of Candomblé.

Trauma Experiences

There were many themes that emerged in regards to participant's trauma experiences. Participants reported that they utilized Candomblé' in response to many presenting issues. Across interviews, however, the primary theme that emerged for the participants' trauma experiences was physical illness. Some men and women discussed seeking medical care for their physical illnesses but ultimately did not find healing from their treatments in the hospitals. Therefore, Candomblé was seen as a complement to medical care:

Participant 3: Well, it was a very complicated experience, because I came up with this health problem, and not only Candomblé could help me, but also the physicians were taking care of my physical problems. The spiritual side made a fantastic difference to me, because it seemed all the problems I had so far at that time, step by step I was finding all the solutions.

Individuals reported focusing on psychological concerns as well. One priest described one of his healing cases that was particularly difficult.

Participant (6): I believe the most traumatized person that I took care of is actually the lady that I am working lately, she is 56 years old, and she has a mental problem. I've been working with her to see if I bring her back, her old behavior, her personality back. The doctors believe her problem is spiritual, emotional and it is making totally effect of her mind, driving her crazy. I've been working with her on the last three months and she is showing progress.

Another priest indicated that many individuals come for healing for various reasons.

Participant (1): No. The way is the same, it helps in all ways. All ways. The traumas, the spiritual side, the relationship problems. The husbands leave their wives to be with other women. And the wives stay home suffering, married for 10, 15 years, and they would like to have their husbands back. And they come to the *terreiro* to have some work done, seeking to have their husbands back, because he is the husband, he is their children's father, you know, and they have been together for many years in that relationship, and then it comes this other woman to break that family. So Candomblé comes to help.

Health and Healing

The healing experienced by participants resonated in the narratives across interviews. Many of the participants identified the intimate relationship between physical and spiritual health, which provided rich examples of their intimate relationships with the Divine and particular cultural idioms of health and healing. Interestingly, the healing narratives of the majority of the priests and priestesses mirrored that of the five practitioners in that they all attributed “having faith” and the importance of the *Orixas* as vital to their healing. One priest shared:

Participant (3): Well, the way I believe that helped me I think it was we cannot stop moving forward in life, look for progress, following what you really have faith for and fight for it, and with all that “orixas”, seem that we are really looking for help, they help us to find the light, the solution, they can show us the right path to be followed to be successful, so I think this is the way to be, you know.

Another participant remarked upon the importance of the faith and ritual as “spiritual defense”:

Participant (2): ...before I decide being part of the terreiro community, I was part of a different one, and always wanted to learn...do the work with the community, spiritual defense.

This spiritual defense and connectedness between physical and psychological health is central to many African-centered belief systems, such as, Yoruba, Orisa, Candomblé, and Shango (Cervantes & Pahram, 2005). Another priest explicitly describes the range of problems for which people seek healing, particularly around relationships and negative energies, and his experiences as a healer.

Participant (1): Diseases, people who have sleep problems, the sun rises and they have tossing all night in bed, and they take medicine and do not get results with these drugs. People who are with their husbands, their sons and daughters here and suddenly they start arguing for no reason, looking for trouble with their daughter, you know. And then, the daughter has to bear with all that, and it is not the mother, it is some negative spirit, some spirit that was sent, some demoniac force from the other side, from black magic, you know. So the people come to here, that witchcraft, that black magic, that “ebó”, to be free from that witchcraft that was done, spirits from the dead, spirits of people that died hit by car, spirits of people that died from drugs, you know. So we will do everything for that person be able to have a better life, to be able to sleep, to have harmony, to have happiness. I handle many problems like that here, I really handle it, and I can call people to give their testimonials.

Similarly, one participant remarked about the connection with previous generations and the multiple ways in which Candomblé and the multiple *Orixas* are healing based upon individual or collective need:

Participant (9): I started being part of the Candomblé activities about 29 to 30 years ago. I came to look for Can because I was having some family issues, related with my past generations property's separation of land. Candomblé never stopped; it is an inheritance from generation to generation, passed on through families. There are many ways to study Candomblé, and you are able to improve yourself spiritual and physical. It all depends which Orixá is going to immunize. There exist many saints; saints that are responsible for protect us for all different purposes, health problems, relationships. We can find saints like Ishu, Shango, Ungu, Oxumarei, many Iamanjá', Oxum, Nanam and Oxalás. They are divided by families of Orixás; Olodums. There is one that takes care of kids spirits; Eres, and many others.

Many participants remarked that the ritual, ceremonial drumming and dancing were the most healing aspects of the religion:

Participant 2: I like the ritual, the drumming, I like everything.

Many other participants' healing narratives highlighted that their faith grew after receiving healing. Many participants acknowledged Candomblé as saving their lives. During one participant's healing narrative he went into detail about the physical trauma he experienced.

Participant (4): I always had faith on Candomblé, but especially after the accident it brought me into a full belief in life and hope. After the accident I was immobilized, because the injury was related with my spine, my back, and the doctors said I wasn't going to walk anymore, so it was very hard for me to hear that. In the Hospital you only smell things, you don't see anything other than your room. The doctors injected needle on my skin and I wasn't able to feel anything at all. So I called the "saint's dad", the one responsible for "our house" at the community, and I told him everything. So he called my mom and my wife and said that he wasn't God, but he believe that he could help me, and he was going to do anything possible to get my movements back. And it really worked. He worked with the community, my family, everybody was there for me. But I have faith in God.

This participant indicated that it was the results he experienced after being involved in Candomblé that made him believe in it more.

Participant (4): When I came here I met the “saint’s dad” (a person responsible for incorporate peoples’ spirits), I was 17 at that time, today I am 32 years old. I had a lot of experiences with him, even though he is older than me, already made for saints, so his knowledge is more [inaudible] and for me, I know that he is a good person, he knows Candomblé so much, the people that I met, everything is good for me. I want to talk about the accident I was involved, it made me believe more in Candomblé. The saint’s dad saved me, first I believe it was a touch of God in my life, pretty much he gave my life back. So I am thankful for all help the house gave me, you won’t see mess around, neither negative approach; we only see peaceful things, love, prosperity and the most important thing of all, success! If you don’t get results, you won’t believe anymore, you are not going to have faith, beliefs, which is not the point.

This participant emotionally explained his gratitude for healing and the profound impact that Candomblé has had on his life. This particular participant had lived at the *terreiro* for some time and was nursed back to health following a serious accident. It is noteworthy to emphasize the influence that the Candomblé *terreiro* environment, including members of the community, had on this participant’s overall healing experience.

Remarkably, Candomblé reportedly impacted multiple areas of participants’ lives including their overall health, education, and success. One participant remarked about his increased knowledge in African history and natural healing.

Participant (9): The Candomblé influenced on my education, it helped me to choose go for Literature studies and Afro-history. I have Candomblé as a cultural learning value, like a religion, and I was involved with it all the time. So I started to get interested about the power of the leaves and herbs, I searched, then I decided to write about the powerful results and why it was so successful. I founded a catalog about the cure of the leaves, so I got into this field of biology and the plants, what plants can help to relief and relax the person, so everything sounded so interesting that I wanted to know more and more. The culture, the knowledge, the human being and their behavior, all subjects that I love to learn more about it.

Participant (3): It influenced me in many different ways, especially related with the spirituality, with the balance between parts (reality and spirituality), peace, prosperity, love in life, the care for others, what you can help other people, everything is related at some point.

These participants' healing narratives illustrate the influences that Candomblé has on their identity development and cultural connectedness. Specifically, Candomblé increased their insight into how all aspects of their lives are connected on a level that supercedes any subjugative social status they might have.

Although it is often difficult to articulate transcendent experiences, it is apparent from the healing narratives of the participants' that Candomblé allows many Afro-Brazilians to transcend the physical limitations placed on them by neo-colonialism conditions. Healing and resistance are alive with the Afro-Brazilian community and the narratives that were shared within this study attest to the vibrant spirit within continental and Diasporic Africans. Perhaps the best way to summarize the sacredness, healing, and hope that many experience utilizing Candomblé is one participants' statement:

Participant (3): I would like to share a saying that for those who do not believe or know about it, that Candomblé is a religion that exists, one that has a person responsible for, good energies, and in my opinion particularly, what makes us successful is the faith that we have on it, that you can find a cure or a solution for anything. Whenever rainbows exist, hope exists.

Discussion

While this study was exploratory in nature, much was learned from participants' narratives of faith and healing. Participants sought spiritual solace in Candomblé' for a wide range of reported issues that often form misdiagnosed or unsuccessfully treated medical issues. However, participants utilized their faith community for relational, familial, and work concerns as well. Participant narratives demonstrate a resonating pride in their Afro-Brazilian identity, largely as a function of their participation in Candomblé'. This pride is remarkable considering the societally encouraged ethnic ambiguity around racial and ethnic classification in Brazil. Moreover, participants' knowledge and pride in the African origins of Candomblé' was also noteworthy and seemed to strongly impact their sense of identity and Ancestral connectedness as well. This is consistent with Harding's documentation of the long standing cultural role of Candomblé' for African descent people in Brazil and underscores its continued role as a community of resistance.

While the particular aspects of Candomblé' that were experienced as healing were subjective and seemingly influenced by type the issue presented, there were some consistencies. First, the sense of community and connectedness reinforced a strong sense of African identity and a connection to the Divine and one's Ancestors. In addition, the role of relationship and ritual were clearly important to participants. Participants indicated consistently that the *terreiro* consistently served as place of refuge. This was remarkable for a number of reasons.

The participants interviewed resided in a local *favela* and most also were part of a *terreiro* also located within the same community. This underscores the need for not only physical space, but a spiritual arena even within the same geographical confines that can offer solace and emotional respite. This may be particularly important given the rampant violence and crime of the area. Lastly, it underscores the degree of involvement and contact that *terreiro* members have being community based.

Other aspects of ritual emphasized by participants were ceremonial drumming and dancing. Again, this is consistent with previous research given the centrality of spirit incorporation which generally occurs during these events (Krippner, 2008). This underscores the importance of understanding African spirituals, music, and dance as a Divine ritualistic connection to and as an instrument of healing sound and movement. This is consistent with African traditional religious practices elsewhere. Like Candomblé' in Brazil, Africans in the United States have long utilized the power of Spirit through various religious vehicles, namely Christianity to empower and connect. Harding discusses the role of the spirituals in the cultivation of divine energy:

“Spirituals, like rooms consecrated to the African divinities, are vessels of the sacred – imbued with a dynamic, holy life-force that strengthens, blesses and animates being. The spirituals, the traditional songs of African American religion, were created by enslaved Africans and their descendants in nineteenth century America, and hold generations of trauma and transcendence in their tones. They are the religious form that has most faithfully nourished the link to ancestors and ancestral traditions among African Americans and they continue to be a source of great cultural and spiritual sustenance for all people who experience them.” (n.p.)

Harding's notion that a primary aspect of ritual is to be imbued with holy life-force reinforces the notion of Axe' as germane to transcendence. Because the trauma of colonial life is fundamentally dehumanizing – alienating from culture, community, and one's own divinity – healing must necessarily include the restoration and cultivation of Axe'. Arguably, it is Axe', that will most allow us the strength to resist continued domination while remaining connected to the Creator (restoration). Thus, there appears to be a dynamic relationship between resistance and restoration. There are multiple ways in which African people might be able to restore and cultivate that inner life force as demonstrated by participants in the present study. While the participants did not name “Axe'” as that which they were seeking or had experienced in their healing, certainly their narratives of restoration and process of Divine engagement eludes to this as an ultimate goal. Toward this end, participant's continued connection with culture, community, and the Divine seemed to be the primary ways in which they sought to cultivate and restore Axe' following trauma.

Thus, for African centered psychology we must begin to ask ourselves questions such as: 1) how do our interventions further clients' resistance to cultural domination; 2) how to we cultivate and restore *Axe'*; and 3) how do we connect clients to culture, community, and the Divine, *particularly* given the Pan-African context of dehumanization? Thus, it becomes increasingly important in any effective African centered approach to ensure that we consider the ways in which we *embody* both trauma and healing. Certainly Spirit and restoration remain central to African centered psychology as well as forms of resistance. Obasi notes that "In searching for an African-centered psychological theory that can be used in the therapeutic healing process for people of African descent, it is clear that anything short of the illumination of one's divine soul, thus motivating one's life force to become more actualized, is unacceptable" (Obasi, 2002. p.53).

Limitations

This was an exploratory study with a small sample size, relying solely upon a phenomenological qualitative design and was intended to explore the lived experiences of a particular group. As such, the results should be interpreted with caution and are not intended to be generalized to all Afro-Brazilians or those who practice Candomblé'. The present sample was also predominantly male despite the large number of female devotees. Future research should seek greater efforts at better gender representation. Language served as an additional limitation to the present study in that an interpreter needed to be utilized. As such, some culturally based constructs may have been lost in translation. Additionally, we did not screen for exposure to particular types of trauma, traumatic response, or symptom severity. As such, the range of experiences may have varied in these areas; future research may want to screen for these variables.

Recommendations for Future Research

As African centered psychology advances, further intervention studies are needed, particularly those integrating traditional African spiritual practices and focused on trauma. In addition, further research on multiple methods of resistance and impact on healing and wellness might further inform and connect our politics and healing interventions. Moreover, we must continue to remain global in our understanding of the range of Pan-African experiences. Certainly, the shared experiences of both trauma and healing were clear from the experiences of Afro-Brazilians. In so doing, we grow closer to solidarity in healing and resistance.

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Notes

¹Note that in 1983 in public declarations made to the popular media many of the most powerful *maes-de-santos* professed that Candomblé would no longer be a syncretized religion. They noted that the Ancestors had to syncretize to prevent being massacred, but this practice was deemed disrespectful of the African origins and that they would no longer hide behind Catholicism.

² See Harding (2000) for an historical analysis and more comprehensive listing.