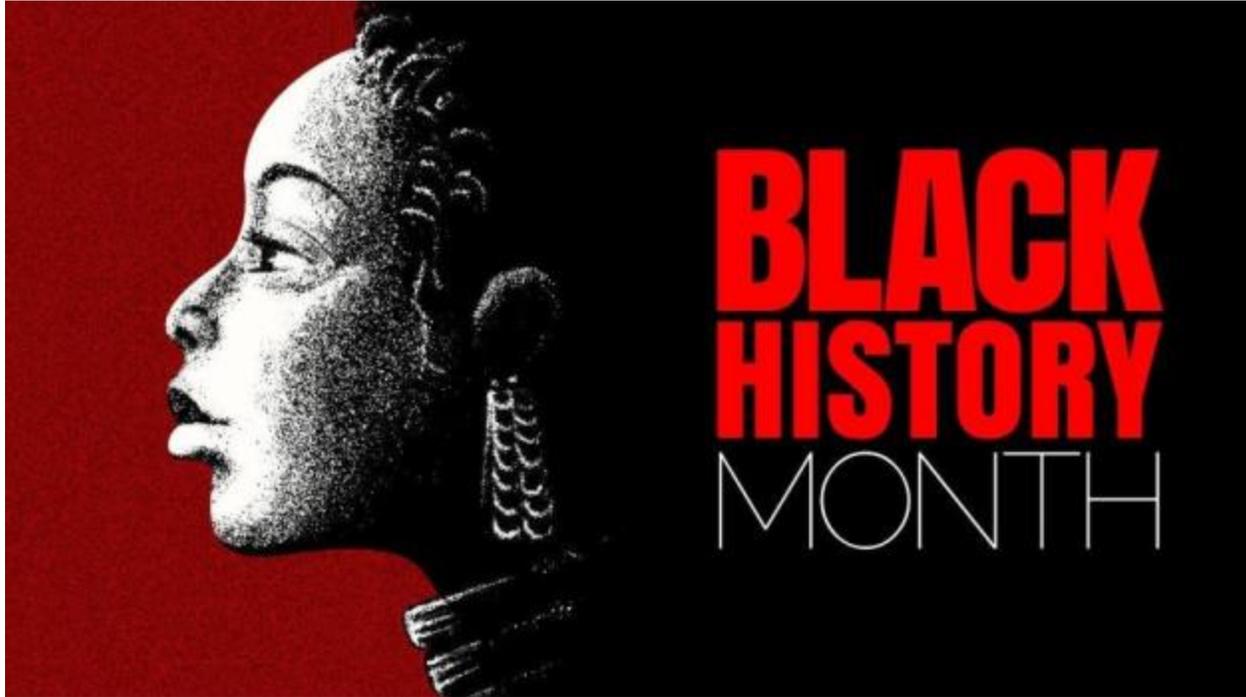


Black History Month Edition

## *A Statement from the CEO/Founder*



*1 - Dr. Debra Maddox*

In the spirit of celebrating Black Mental Health and Wellness, I would like to highlight several individuals who have greatly impacted mental health services for Black and Brown populations in Worcester, MA. These local heroes provided counseling support to countless youth and families in the Worcester community. I am honored to celebrate their work and share their backgrounds with you. Although I may not have known all of them personally, their commitment, strength, and vision paved the way for the current cultural framework for the Multicultural Wellness Center. Let's give these mental health pioneers their long overdue recognition for their work and accomplishments in our community.

**Dorothea Simmons, MD** was a Black psychiatrist who served many youths in Worcester through her work at the Worcester Youth Guidance Center. When I was a young social worker, working with DCF, I recall hearing her name. It was not until she retired in the 1990's that I came to meet her and observe her commitment to the Worcester Community. During that time, I would see her at Kwanzaa

celebrations as well as events within the Black Worcester community. Her presentation was unassuming, as she took classes at a local college and blended in without anyone knowing her background.

**Dorista Goldsberry, MD**, A graduate of Howard University School of Medicine spent much of her career as a psychiatrist who worked at Worcester Youth Center in Worcester. During her tenure at the Youth Guidance Center, she served many youth from diverse cultural backgrounds.

**Dr. John Scott, PhD**, was a Black psychologist who worked as the director of Worcester Youth Guidance Center. He also provided training for the Worcester Police Department. When I entered my doctorate program, I was told that in order to understand the clinical experience of clients, one must also engage in therapy. I chose Dr. John Scott who provided me with the support I needed to balance being a mother, student, and worker. Dr. Scott had a unique style and engaged well in meeting my needs. He helped to motivate me toward the completion of my clinical program. During his career, he served on many boards and was involved in various organizations.

**Dr. Ogretta McNeil** was a psychologist who graduated from Clark University and taught at College of the Holy Cross until retiring. She also served on the Worcester School Committee for many years. One of my fondest memories of Dr. McNeil was while working as a school psychologist in the Worcester Public Schools, and watching her work as a Title I tutor, teaching children how to read.

**Shirley Williams, MSW, LICSW** is a Black clinician who has worked for many years servicing youth through the Black outreach program at Worcester Youth Guidance Center, the Cultural Competence Coordinator at University of Massachusetts and now in private practice. Ms. Williams has impacted many lives.

**Carlton Watson, MSW, LICSW** has devoted many years of service to the Worcester Community as a clinician, agency executive, mentor, and community leader. He is presently working as a consultant and trainer.

It is incumbent upon service providers of color to continue the legacy of those who came before us, and to work towards strengthening individuals and families in communities of need with culture centered services.

Yours in Wellness,

Debra Maddox, Psy.D.

## The State of Black Mental Health in Massachusetts : Voices of Black Clinicians



*This Newsletter, marketing associate Nyia Anderson had a special opportunity to interview three Black therapists in Massachusetts as well as CEO Dr. Maddox. During these interviews we got input on their experiences and challenges as Black therapists in the mental health field.*

The first interview was with Kristine Shaw, a therapist at Wellness For The Culture, a culture-centered clinic located in Springfield, MA.



<https://sway.office.com/ECqOiosAc4eRdF6P#content=E8dFdQI1rV20JU>

---

The second interview was with Clinical Social Work/Therapist Robin Woods. She runs Robin Woods Psychotherapy, located in Quincy, MA.



<https://sway.office.com/ECqOiosAc4eRdF6P#content=fi0cL6VOy26yLY>

---

The third interview was with Clinical Social Work/Therapist Tracey Taldon, she is located in Randolph, MA.



<https://sway.office.com/ECqOiosAc4eRdF6P#content=kt6Xus1VBPTGqD>

---

The fourth and final interview was with CEO Dr. Debra Maddox.



<https://sway.office.com/ECqOiosAc4eRdF6P#content=jA43Z9NI1xm1DQ>

---

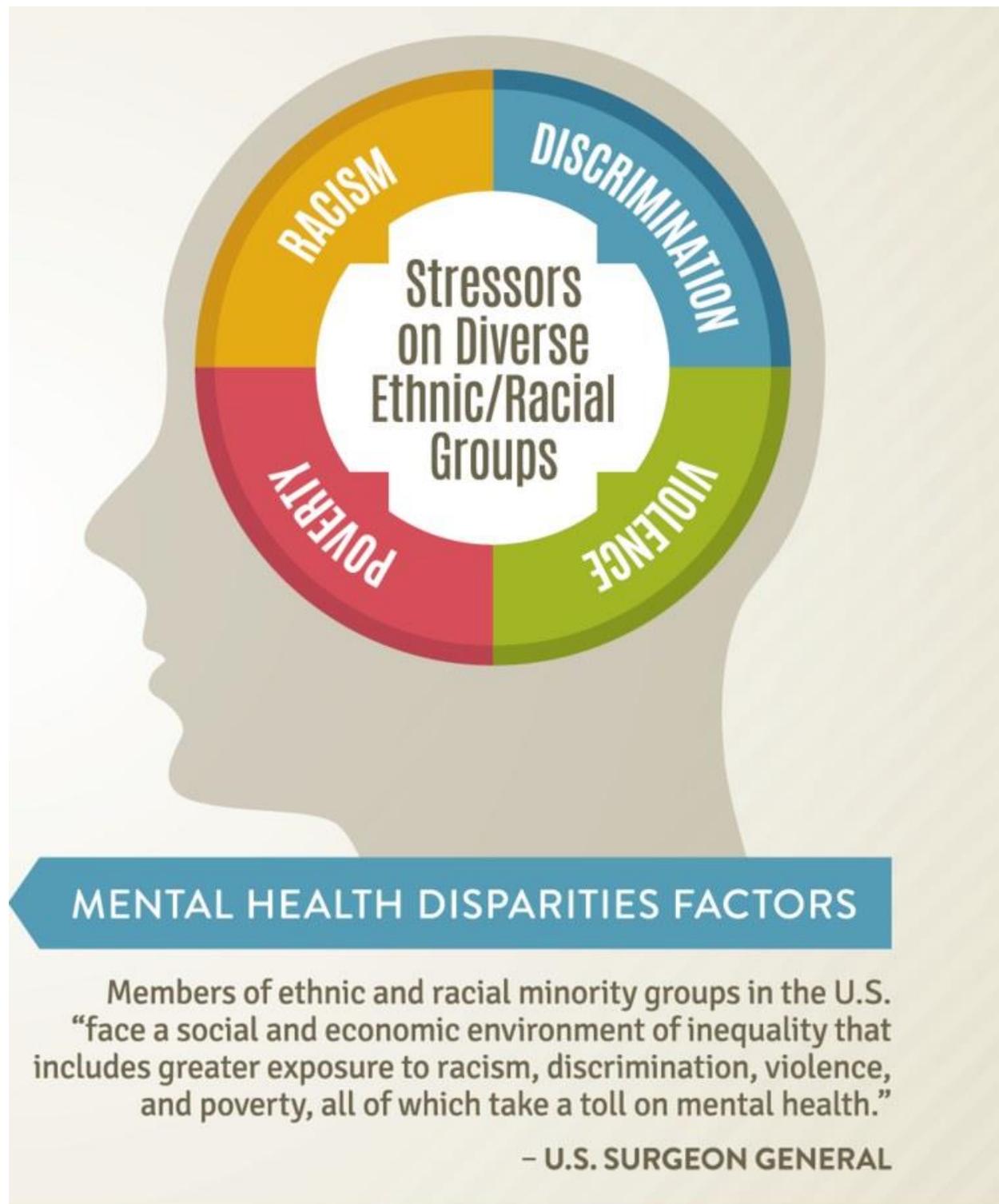
*The rest of each interview can be found on both our Instagram and Facebook pages, @multiculturalwellness and Multicultural Wellness Center, respectively.*

## *History about Mental Health in the Black Community: Past and Present*



*The following are sections taken from two articles: "MENTAL ILLNESS IN BLACK COMMUNITY, 1700-2019: A SHORT HISTORY" and "**Black and African American Communities and Mental Illness**" from Dr. Uchenna Umeh and **Mental Health America**, respectively.*

*"MENTAL ILLNESS IN BLACK COMMUNITY, 1700-2019: A SHORT HISTORY"*



Members of ethnic and racial minority groups in the U.S. “face a social and economic environment of inequality that includes greater exposure to racism, discrimination, violence, and poverty, all of which take a toll on mental health.”

– U.S. SURGEON GENERAL

*In the article below, Dr. Uchenna Umeh, a former San Antonio, Texas physician, briefly describes how mental health among African Americans was viewed and treated by the American medical community from the antebellum period until today.*

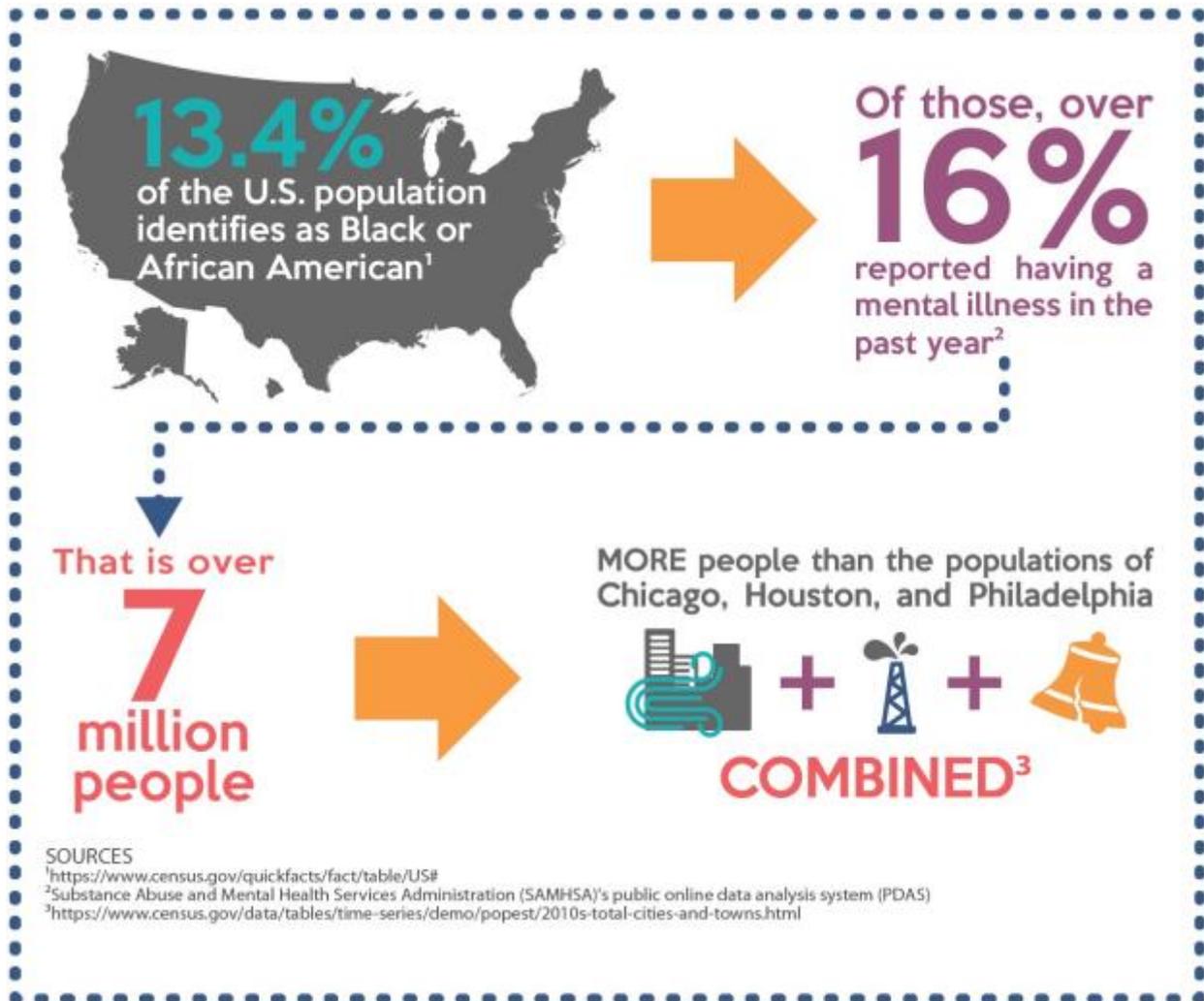
- Mental illness has been in existence as long as humans have inhabited the earth, but for people of African descent, little or no references are available about this condition before the 1700s.
- In 1848 John Galt, a physician and medical director of the Eastern Lunatic Asylum in Williamsburg, Virginia, offered that “blacks are immune to mental illness.” Galt hypothesized that enslaved Africans could not develop mental illness because as enslaved people, they did not own property, engage in commerce, or participate in civic affairs such as voting or holding office. This immunity hypothesis assumed according to Galt and others at that time that the risk of “lunacy” would be highest in those populations who were emotionally exposed to the stress of profit making, principally wealthy white men. Unfortunately, we of African ancestry have subconsciously embraced and propagated this narrative much to our detriment believing as if this problem does not exist in our race.
- Dr. Benjamin Rush, the leading medical authority in the nation during the years immediately following the American Revolution, was also the most prominent medical practitioner to disagree with John Galt’s ideas about the absence of mental illness among black slaves, when he wrote that many of the enslaved suffered from “abnormal behaviors” including “negritude,” which he described as the irrational desire by blacks to become white. Other antebellum medical researchers promoted conditions such as Drapetomania, a disease that caused enslaved blacks to flee their plantations, or Dysaesthesia Aethiopia, a disease that purportedly caused a state of dullness and lethargy, which would now be considered depression. Modern historians of slavery have described both conditions as understandable responses to enslavement, but white medical practitioners at the time assumed they were manifestations of mental illness.
- Dr. Samuel Cartwright, a pro-slavery physician who worked with enslaved people in Louisiana, argued that severe whipping was the typically the best “treatment” for both conditions. Cartwright and others often reported that Drapetomania and Dysaesthesia Aethiopia were often accompanied by skin lesions, which historians now argue were most likely scars from the whippings. In other words, these physicians failed to recognize the connection between the emotional states of the enslaved and the treatment they recommended for their condition.
- Most pre-Civil War mental health facilities in the South usually barred the enslaved for treatment. Apparently mental health experts believed that housing blacks and whites in the same facilities would detrimentally affect the healing of the whites.
- In 1895, Dr. T.O. Powell, the superintendent of the Georgia Lunatic Asylum observed an alarming increase in insanity and consumption (tuberculosis) among blacks in his state which he attributed to three decades of freedom. Powell argued that when the former slaves got their freedom, it caused them to have little or no control over their appetites and passions and thus led to excesses and vices which in turn generated a rise in insanity.
- At the beginning of the 20th century African Americans who were said to have mental deficiencies faced a new, more dangerous threat to their well-being, the eugenics movement.

Starting in Great Britain, the movement quickly spread to the United States by the 1920s. Eugenics was based on two parallel principles, the encouragement of births among people who were considered “good” genetic stock, and the sterilization of people deemed unfit for reproduction including individuals with mental illness, those who were poor, and those accused of sexual promiscuity and sexual criminality.

- Sterilization in the US quickly focused on African Americans. In California alone in the 1930s African Americans who comprised 1% of the population, made up 4% of the victims of legal sterilization. Eventually eighteen states eventually passed laws allowing for the widespread sterilization of the institutionalized including many who were black, misdiagnosed, and falsely accused of crimes.
- By the 1970s some states in the South, including notably North Carolina and Alabama, still sterilized disproportionate numbers of black women who were declared by courts to be mentally defective. In North Carolina in the 1960s, for example, more than 85% of those legally sterilized were black women.
- African Americans were also victimized by psychosurgery from the 1930s to the 1960s, a process of surgically removing parts of the brain (lobotomy) to treat mental illnesses. Started in Europe, it quickly gained acceptance in the US for reasons that were finally ruled as sociopolitical rather than medical by the late 1970s. Psychosurgery was promoted as a treatment for “brain dysfunction,” a diagnosis claimed to have led to widespread urban violence and inner-city uprisings.
- Postpartum depression (PPD), aka Baby Blues, characterized by feelings of sadness, crying, and hormonal mood swings that happen after birth, also can sometimes be severe and result in anxiety, depression, or rarely, psychosis. Although rarely mentioned in the mainstream news, PPD is another manifestation of mental illness in African American women.
- In 1983, one in two black children lived in poverty compared to one in seven white children. Today the ratio for black children is still one in three and for white children it is an average of one in ten; Latinos have an average of one in four. Racism, systematic oppression and discrimination, police brutality, low socioeconomic status, untreated parental psychopathology, and disruptive family dynamics all influence mental illness in children.
- Cultural beliefs among African Americans also impact attitudes toward and treatment of mental health in black communities. Myths like “it does not happen to us,” “we are strong and therefore do not get depressed,” “our God is able,” “it is not our portion,” and “we can pray it away” are not simply misleading beliefs, they often create unnecessary barriers and stigmas to recognizing and treating mental illness among African Americans.
- While low socioeconomic status can fuel the prevalence of mental illness, even amongst the more affluent African Americans, stigma remains a strong deterrent to the acknowledgement and acceptance of its presence. Additionally, we are often not treated equally by medical practitioners even when we do seek care and have the resources to pay for that care.
- Today [suicide rates in African American children aged 5-11 years](#) have increased steadily since the 1980s and are now double those of their Caucasian counterparts. Black men made up 80%

of attempted suicides among African Americans in 2015, and in the US, black males are three times more likely to complete suicide than black women. These numbers are on the rise.

## Black And African American Communities And Mental Health



### Demographics/Societal Issues

- **13.4 percent** of the U.S. population, or nearly **46 million people**, identify themselves as Black or African American and another **2.7 percent** identified as multiracial. [1]
- According to the most recent Census data available, **55 percent** of all Black and African American people lived in the South, **18 percent** lived in the Midwest, **17 percent** in the Northeast, and **10 percent** in the West. [2]
- Historical adversity, which includes slavery, sharecropping, and race-based exclusion from health, educational, social, and economic resources, translates into socioeconomic disparities experienced by Black and African American people today. Socioeconomic status, in turn, is

linked to mental health: people who are impoverished, homeless, incarcerated, or have substance use problems are at higher risk for poor mental health.

- Despite progress made over the years, racism continues to have an impact on the mental health of Black and African American people. Negative stereotypes and attitudes of rejection have decreased, but continue to occur with measurable, adverse consequences. Historical and contemporary instances of negative treatment have led to a mistrust of authorities, many of whom are not seen as having the best interests of Black and African Americans in mind.

#### Prevalence

- Black and African American people living below poverty are twice as likely to report serious psychological distress than those living over 2x the poverty level. [6]

According to SAMHSA's 2018 National Survey on Drug Use and Health [10]:

- Suicidal thoughts, plans, and attempts are also rising among Black and African American young adults. While still lower than the overall U.S. population aged 18-25, 9.5 percent (439,000) of Black and African American 18-25-year-olds had serious thoughts of suicide in 2018, compared to 6 percent (277,000) in 2008. 3.6 percent (166,000) made a plan in 2018, compared to 2.1 percent (96,000) in 2008, and 2.4 percent (111,000) made an attempt in 2018, compared to 1.5 percent (70,000) in 2008.
- Binge drinking, smoking (cigarettes and marijuana), illicit drug use and prescription pain reliever misuse are more frequent among Black and African American adults with mental illnesses.

#### Attitudes

According to a study conducted by Ward, Wiltshire, Detry, and Brown in 2013 [11]:

- Black and African American hold beliefs related to stigma, psychological openness, and help-seeking, which in turn affects their coping behaviors. The participants in this study were not very open to acknowledging psychological problems, but they were somewhat open to seek mental health services.
- Thirty percent of participants reported having a mental illness or receiving treatment for a mental illness
- Black and African American men are particularly concerned about stigma.

#### Treatment Issues

- Black and African American people are more often diagnosed with schizophrenia and less often diagnosed with mood disorders compared to white people with the same symptoms. Additionally, they are offered medication or therapy at the lower rates than the general population. [5]
- Because less than 2 percent of American Psychological Association members are Black or African American, some may worry that mental health care practitioners are not culturally competent enough to treat their specific issues. [14]

- Stigma and judgment prevent Black and African American people from seeking treatment for their mental illnesses. Research indicates that Blacks and African Americans believe that mild depression or anxiety would be considered “crazy” in their social circles. Furthermore, many believe that discussions about mental illness would not be appropriate even among family. [15]

#### Access/Insurance

Disparities in access to care and treatment for Black and African American people have also persisted over time.

- While the implementation of the Affordable Care Act has helped to close the gap in uninsured individuals, 11.5 percent of Black and African Americans, versus 7.5 percent of white Americans were still uninsured in 2018. [16]
- In 2018, 58.2 percent of Black and African American young adults 18-25 and 50.1 percent of adults 26-49 with serious mental illness did NOT receive treatment. [7]
- Nearly 90 percent of Black and African American people over the age of 12 with a substance use disorder did NOT receive treatment. [7]
- In 2016, 12.3 percent of Black and African American adults who had a doctor’s office or clinic visit over the past year had difficulty getting needed care, tests or treatment compared to 6.8 percent of white adults. [17]

#### Mental Health Resources For Black And African American Communities

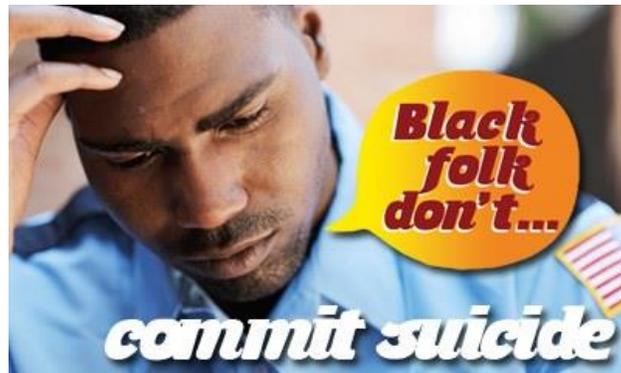
- [Black Emotional and Mental Health \(BEAM\)](#): BEAM is a training, movement building and grant making organization dedicated to the healing, wellness, and liberation of Black communities. BEAM envisions a world where there are no barriers to Black Healing. [Toolkits & Education](#): graphics on accountability, self-control, and emotional awareness; journal prompts; articles on Black mental health [Videos](#): trainings and webinars, recorded and available for free
- [The Boris Lawrence Henson Foundation](#): changing the perception of mental illness in the African-American community by encouraging people to get the help they need; focuses on stigma/self-stigma reduction and building trust between Black people and the mental health field. [Resource Guide](#): directory of mental health providers and programs that serve the Black community; includes therapists, support groups, etc, but also digital content, faith-based programs, educational programs, etc

#### Work Cited

Umeh, Uchenna. “Mental Illness in Black Community, 1700-2019: A Short History •.” •, 12 Sept. 2019, <https://www.blackpast.org/african-american-history/mental-illness-in-black-community-1700-2019-a-short-history/>.

“Black and African American Communities and Mental Health.” *Mental Health America*,  
<https://www.mhanational.org/issues/black-and-african-american-communities-and-mental-health>.

## Suicide in the Black Community



*Over the past couple of weeks there have been a number of suicides in the black community. Academy Award winning actress Regina King's son, Ian Alexander jr., committed suicide on January 21 at the age of 26. A little over a week later on January 30th, 2019 Miss USA winner Cheslie Kryst committed suicide by jumping off a NYC high-rise. With the pandemic heading into its 2nd year, police brutality/other hate crimes, and societal problems as a whole, black peoples mental health has become very fragile. These feelings of depression and hopelessness are one of the main reasons why suicide rates in the Black community have increased over 30% in the past 8 years. Below are some statistics on suicide in 2019 comparing black and white Americans:*

### **Mental and Behavioral Health - African Americans**

- In 2019, suicide was the second leading cause of death for blacks or African Americans, ages 15 to 24.<sup>[1](#)</sup>
- The death rate from suicide for black or African American men was four times greater than for African American women, in 2018.
- The overall suicide rate for black or African Americans was 60 percent lower than that of the non-Hispanic white population, in 2018.
- Black females, grades 9-12, were 60 percent more likely to attempt suicide in 2019, as compared to non-Hispanic white females of the same age.
- Poverty level affects mental health status. Black or African Americans living below the poverty level, as compared to those over twice the poverty level, are twice as likely to report serious psychological distress.
- A report from the U.S. Surgeon General found that from 1980 - 1995, the suicide rate among African Americans ages 10 to 14 increased 233 percentage, as compared to 120 percent of non-Hispanic whites.<sup>[2](#)</sup>

### **MENTAL HEALTH STATUS**

**Serious psychological distress in the past year among adults 18 years of age and over, percentage, 2019**

Non-Hispanic Black	Non-Hispanic White	Non-Hispanic Black/White Ratio
11.9	12.7	0.9

Source: SAMHSA, 2020. Results from the 2019 National Survey on Drug Use and Health: Mental Health Detailed Tables. Table 10.43B

<https://www.samhsa.gov/data/report/2019-nsduh-detailed-tables> [PDF | 10.22MB]

**Percentage of population with feelings of sadness, hopelessness, worthlessness, or that everything is an effort, all or most of the time, among persons 18 years of age and over, 2018**

	Non-Hispanic Black	Non-Hispanic White	Non-Hispanic Black/White Ratio
Sadness	4.2	2.6	1.6
Hopelessness	1.8	2.2	0.8
Worthlessness	1.8	2.3	0.7
Everything is an effort	11.0	6.6	1.7

is an effort

Source: CDC 2021. Summary Health Statistics: National Health Interview Survey: 2018. Table A-7.

<https://www.cdc.gov/nchs/nhis/shs/tables.htm>

**Percentage of population with serious psychological distress among persons 18 years of age and over, 2018**

	Non-Hispanic Black	Non-Hispanic White	Non-Hispanic Black/White Ratio
Men	2.5	2.8	0.9
Women	4.7	4.8	1.0
Total	3.7	3.8	1.0

Source: CDC 2021. Summary Health Statistics: National Health Interview Survey: 2018. Table A-8.

<https://www.cdc.gov/nchs/nhis/shs/tables.htm>

**DEATH RATES**

**Age-adjusted death rates for suicide, by sex, race and Hispanic origin, 2018**

	Non-Hispanic Black	Non-Hispanic White	Non-Hispanic Black/White Ratio
Male	12.2	28.6	0.4
Female	2.9	8.0	0.4



**Suicidal ideation among students in grades 9–12, 2019 Percentage of students who seriously considered suicide**

	<b>Non-Hispanic Black</b>	<b>Non-Hispanic White</b>	<b>Non-Hispanic Black/White Ratio</b>
<b>Men</b>	<b>10.7</b>	<b>13.8</b>	<b>0.8</b>
<b>Women</b>	<b>23.7</b>	<b>24.3</b>	<b>1.0</b>
<b>Total</b>	<b>6.9</b>	<b>19.1</b>	<b>0.9</b>

Source: CDC 2021. High School Youth Risk Behavior Survey Data. [Accessed 04/21/2021] <https://nccd.cdc.gov/youthonline>

**Suicidal ideation among students in grades 9–12, 2019 Percentage of students who attempted suicide**

	<b>Non-Hispanic Black</b>	<b>Non-Hispanic White</b>	<b>Non-Hispanic Black/White Ratio</b>
<b>Men</b>	<b>8.5</b>	<b>6.4</b>	<b>1.3</b>
<b>Women</b>	<b>15.2</b>	<b>9.4</b>	<b>1.6</b>
<b>Total</b>	<b>11.8</b>	<b>7.9</b>	<b>1.5</b>

Source: CDC 2021. High School Youth Risk Behavior Survey Data. [Accessed 04/21/2021] <https://nccd.cdc.gov/youthonline>.

***ACCESS TO HEALTH CARE***

**Percentage of adults age 18 and over who received mental health services in the past year, 2019**

	<b>Non-Hispanic Black</b>	<b>Non-Hispanic White</b>	<b>Non-Hispanic Black/White Ratio</b>
	<b>9.8</b>	<b>19.8</b>	<b>0.5</b>

SAMHSA, 2020. Results from the 2019 National Survey on Drug Use and Health: Mental Health Detailed Tables. Table 8.17B

<https://www.samhsa.gov/data/report/2019-nsduh-detailed-tables>

**Percentage of adults age 18 and over who received prescription medications for mental health services, 2019**

	<b>Non-Hispanic Black</b>	<b>Non-Hispanic White</b>	<b>Non-Hispanic Black/White Ratio</b>
	<b>6.5</b>	<b>16.6</b>	<b>0.4</b>

SAMHSA, 2020. Results from the 2019 National Survey on Drug Use and Health: Mental Health Detailed Tables. Table 8.21B

<https://www.samhsa.gov/data/report/2019-nsduh-detailed-tables>

**Percentage of adults age 18 and over with past year major depressive episode who received treatment for the depression, 2019**

**Non-Hispanic Black    Non-Hispanic White    Non-Hispanic Black/White Ratio**

**59.6**

**70.2**

**0.8**

SAMHSA, 2020. Results from the 2019 National Survey on Drug Use and Health: Mental Health Detailed Tables. Table 8.39B

<https://www.samhsa.gov/data/report/2019-nsduh-detailed-tables>

*The following video is from a news segment from NBC News on June 20th, 2020. The topic is on the increase in suicide attempts in the Black community, specifically Black children.*



<https://sway.office.com/ECqOiosAc4eRdF6P#content=oq0HVLs33LitBB>

## Black History Month and Mental Health at Colleges



Black organizations (BSU, BSO, etc.) on colleges campuses celebrate BHM (Black History Month) by holding different events throughout the month that focus on Black identity, struggle, and leadership. Mental health should be a focus specifically on college campuses considering the stress and anxiety placed on students. That goes double for Black and other non-White students because they have to go through not only the stress of school work but also the racism that is prevalent on campuses from the administration to other students. Many Black and Brown students are 1st generation college students and they to deal with the pressure of breaking "Generational Curses." So adding all that racism and inequality at the same place that is supposed to be seen as a way to a "successful" life definitely takes a toll on ones mental health.

Worcester State University's Third World Alliance (TWA) is a multicultural organization on campus run by the Office of Multicultural Affairs. The club tackles issues of race and diversity on campus as well as discusses ALANA (Asian, Latino, African, Native American) topics of interest in society. For BHM this year they have centered most of their events around police brutality and segregation which have affected the mental health of Black people for over a hundred years.

Below are some of the events they have planned for BHM:



**Thursday, February 3, 2022 • 10a.m. • Virtual- Zoom Meeting ID: 997 4537 6969**

**Zoom link: <https://worchester.zoom.us/j/99745376969>**

### **Encountering the Police: Race & Law Enforcement Roundtable Discussion**

Join us for a roundtable discussion with Arielle Sharma, Lawyers for Civil Rights, Professor Mary Fowler, Mathematics Department & Diversity and Equity Fellow, and Domingo Guyton, Producer/Filmmaker and Alumn.

Interactions with law enforcement officers are informed by many factors, including race. On our campus and in the greater Worcester community, there have been countless incidents in which police officers have reacted to people of color in ways that have escalated tensions and fears. In several tragic cases, encounters have resulted in death. How are these encounters with police informed by history? How do local incidents reflect a nationwide concern with the militarization of police units and the arming of campus officers? Worcester State University welcomes experts and activists who have been working closely on bias in policing to teach our community how to better understand race and encounters with the police. For more information, please contact [aokuda@worchester.edu](mailto:aokuda@worchester.edu)

Cosponsors include the Dennis Brutus/Merrill Goldwyn Center for the Study of Human Rights, The Provost Office, Alumni Association, Office of Multicultural Affairs & Third World Alliance

**Wednesday, February 9, 2022 • 10:30a.m • May Street Auditorium**

### **African American Read In Day & ALANA Preview Day with Professor Anthony Walton, 'A Letter to Me at Age Eighteen.'**

Anthony Walton is the author of *Mississippi: An American Journey*, and the editor, with Michael S. Harper, of *The Vintage Anthology of African American Poetry* and *Every Shut-Eye Ain't Asleep: African American Poetry Since World War II*. He is also the author of a chapbook of poems, *Cricket Weather*, and is the co-author, with Kareem Abdul-Jabbar, of the best-selling *Brothers-in Arms: The Epic Story of the 761st Tank Battalion, WWII's Forgotten Heroes*, among other books.

His poems, essays, and reviews have appeared in *The New Yorker*, *The New York Times*, *Harper's*, *Atlantic Monthly*, *Black Scholar*, *Oxford American*, *TLS*, *Poetry Ireland Review*, *Ecotone*, *32 Poems*, *Notre Dame Review*, *Notre Dame Magazine*, *Southword*, *Alaska Quarterly Review*, *Kenyon Review*, and *The Library of America: African American Poetry*, among many other magazines, journals, and anthologies. He has appeared as a commentator on CNN and has written and presented radio documentary for the BBC. The recipient of a Whiting Award, he teaches at Bowdoin College.

To R.S.V.P. your class please email [gaddo@worchester.edu](mailto:gaddo@worchester.edu)

**Tuesday, February 15, 2022 • 2:30p.m • Blue Lounge, Student Center**

**Teach In: Understanding Our Rights When Stopped by the Police**

In the aftermath of George Floyd, Breonna Taylor, Ahmed Arbery, what is the appropriate response when stopped by the police? Join us as Attorney Hector Pinero, will explore our rights, offer strategies in response to police encounters, and share his experiences.

**Thursday February 17, 2022 • 5p.m. • Blue Lounge**

**TWA Annual Poetry Jam: Black Love & Liberation**

The event will feature poetry from WSU poets, and student readings from classic Black and Brown Authors, and from local Worcester poets. If you are interested in reading your poem at the event, please email [tweeden@worchester.edu](mailto:tweeden@worchester.edu) for more information.

**Thursday, February 24, 2022 • 6p.m. Location-Blue Lounge**

**Film Screening: Paris is Burning**

The film, *Paris is Burning*, followed African American and Latino LGBTQ+ in competitions involving fashion runways and vogue dancing battles. This created a time capsule of New York's ballroom subculture in the 80s. The film focuses on race, class, racism, wealth, gender, and beauty standards.

Post discussion with Dr. Tanya Mears, History & Political Science Department and Ethnic Studies.

**Sunday February 27, 2022 • 3p.m. - Science & Technology Room 102 & Hybrid (see below for details)**

**Film Screening & Directors' Discussion- The Nine O'clock Whistle**

For years on Saturday nights, white authorities in Enfield, N.C. blew a siren-like whistle, warning Blacks to clear the downtown streets. This curfew was one of many demeaning practices used to keep the Black population separate and unequal. Through the narratives of Willa Cofield, her former students, and current residents of the town, "The Nine O'clock Whistle" tells the story of a dramatic cultural movement from 1963 to 1965 that rocked the segregated town and changed it forever. Post discussion led by Professor Julian Berrian, Communications Department with the Co-directors Willa Cofield and Karen Riley.

This event is hybrid and will feature a post event network with 'soulfood Sunday' appetizers. To R.S.V.P. for either the zoom link or the in person film screening and network, please email [tweeden@worchester.edu](mailto:tweeden@worchester.edu)

**February 28, 2022 • 3:30p.m. • Blue Lounge • Lecture/Discussion**

## **Maria W. Stewart and the Roots of Black Political Thought**

*Maria W. Stewart and the Roots of Black Political Thought* tells a crucial, almost-forgotten story of African Americans of early nineteenth-century America. In this work of recovery, author Kristin Waters examines the roots of Black political activism in the petition movement, Prince Hall and the creation of the first Black masonic lodges, the Black Baptist movement spearheaded by the brothers Thomas, Benjamin, and Nathaniel Paul, writings, sermons, and the practices of festival days, through the story of this remarkable but largely unheralded woman and pioneering public intellectual.

**Kristin Waters, Ph.D.** is professor emerita at Worcester State University and Resident Scholar at the Women's Studies Research Center at Brandeis University. She is author of *Women and Men Political Theorists: Enlightened Conversations* and coeditor of *Black Women's Intellectual Traditions: Speaking Their Minds*.