Voices in the Hill: Stories of Trauma and Inspiration

Susan G. Goldberg and Camille O’Connor

Abstract
Narrative interviews documenting individual and community trauma in the Hill District of Pittsburgh emerged from a capstone undergraduate community engagement psychology course that was a joint project between Duquesne University and FOCUS Pittsburgh. The interview project, which we gave the name Voices in the Hill, sought life stories and existential meaning-making of people involved with the Hill District of Pittsburgh, a formerly flourishing African-American community now mired in poverty due to a juncture of sociological, historical, and political forces. Themes that emerged from the interviews included abuse, mental health issues, and failures of the larger society. With the facilitation of FOCUS Pittsburgh, we discuss how these traumatized people created existential meaning and empowerment in their lives. We explore how their individual stories emerged from larger societal processes such as racism, discrimination, and loss of community, as well as other impacts of “root shock.” We also share the moving impact of the work on students.

Introduction
The ongoing loss of African-American life and potential to violence, incarceration, police brutality, and racist terrorism is again bringing America’s deep racial wounds to the forefront of cultural consciousness. African-Americans are crying out, “Black lives matter,” and an increasing awareness among the mainstream of how much Americans need to hear this anguished plea. Fifty years after the Civil Rights Movement, inequality, while less overt, is ever more insidious (Alter, Stern, Granot, & Balcetis, 2016; Deitch, Barsky, Butz, Chan-Seferin, Brief & Bradley 2016; Hodson, Dovidio, & Gaertner, 2002). And yet the dominant American narrative often fails to name and address the ongoing symptoms that tell us that the injustices of past years are not gone, but have taken new forms. Media satirist and critic Jon Stewart in his critique of news coverage of the Baltimore riots following Freddie Gray’s death, noted criticisms that the mayor’s declaration of a state of emergency was delayed, but added that—considering the city’s high rates of poverty, unemployment, drug and crime issues, and lack of accessible education, housing, and resources—probably the emergency should have been declared in the 1970s: “…And this seems to indicate the issue in our city emergency alert systems. There appear to be only two points on the scale: normal and on fire” (retrieved from https://www.vox.com/2015/4/29/8515405/baltimore-riots-jon-stewart). A long-growing and long-unspoken discontent builds in many American cities; we are ready to burst. As we face this harsh truth of visions unfulfilled, Langston Hughes’s poetic contemplation “What Happens to a Dream Deferred?” speaks anew with brilliant and brutal prescience:

Does it dry up
Like a raisin in the sun?
Or fester like a sore—
And then run?
Does it stink like rotten meat?
Or crust and sugar over—
Like a syrupy sweet?
Maybe it just sags
Like a heavy load.
Or does it explode? (Hughes, 1990).

This paper joins this context and conversation through an exploration of stories told by women and men, largely African-American, who grew up in or have some meaningful connection to the Hill District community, a collection of neighborhoods in Pittsburgh. “The Hill” has been home to working-class immigrants from various backgrounds and eventually became a residential and cultural center of Pittsburgh’s African-American population. The stories come from interviews conducted by Dr. Goldberg, along with students in her senior undergraduate Psychology and Community Engagement course in 2014, in collaboration with a community agency, FOCUS Pittsburgh, and its director, Father Paul Abernathy.
History

This work must be understood taking into consideration the major shifts in African-American life in the 20th century, and those shifts’ far-reaching impacts: The Great Migration, the Civil Rights Movement, and so-called urban renewal. The Great Migration, a gradual mass exodus of African-Americans from their ancestral South to northern cities, occurred between 1915 and 1970. Isabel Wilkerson (2010) refers to it as “perhaps the biggest underreported story of the twentieth century” (p. 9). They moved because, after the failed promises of the Civil War and Reconstruction, many African-Americans in the South had poor and demoralizing prospects for earning a living (either sharecropping, a situation often not much freer than slavery, or the inability to pursue their skills and professions due to segregation), and they also literally feared for their lives under the constant threat of lynching. Under the brutality of Jim Crow laws of segregation, the South was “a caste system as hard and unyielding as the red Georgia clay” (Wilkerson, p. 8).

So many African-Americans left, six million of them, radically altering the demographic, social, political, and cultural landscape of America along with their own individual lives. Wilkerson notes that we can see the Great Migration’s massive impact in terms of urban geography (the configuration of cities, the structure of black and white neighborhoods, suburbanization and white flight, etc.). We also see its impact in terms of culture, from the influence of jazz and the blues on American popular music to the influence of African-American intellectuals, artists, activists, and other anonymous artists, workers, and professionals that likely would not have existed without this major cultural shift.

Pittsburgh was one such northern city to which African-Americans emigrated, and the Hill District was one such community in which they settled and began to build their new social and cultural lives. The Hill District had been a community of various marginalized groups, including African-Americans, immigrants, Jewish-Americans, and Lebanese-Americans. With segregation limiting where African-Americans could live, the Hill became a self-sufficient world for African-Americans. While this unfortunately prevented a mingling of cultures, it also allowed for a powerful Hill neighborhood cohesiveness and functionality. Between the 1920s and 1950s, the Hill District was one of the most vibrant African-American neighborhoods in the United States, considered to be a place a traveler must see between Chicago and Harlem. People came from far and wide to see the jazz performances. One of the great American playwrights, August Wilson, grew up in the Hill and wrote extensively about its world. The neighborhood had a prominent newspaper and a Negro League baseball team (Fullilove, 2016). Harlem Renaissance poet Claude McKay even famously called the Hill “The Crossroads of the World” (Klein, 2015).

Yet life in the neighborhood changed dramatically with urban renewal in the 1950s, when federal money was available to “improve” neighborhoods (Fullilove, 2016; Pritchett, 2003). Urban renewal began in full force in the United States with the passage of the Housing Act of 1949 and the Housing Act of 1954, which gave cities federal funds to acquire perceived slums, which were then given to private developers for housing redevelopment, eventually with the incentive of Federal Housing Authority-backed mortgages.

Pittsburgh began this process in 1950. While the city had some success from these changes, especially to improve its reputation as a dirty and economically depressed city in the wake of decades of industry, some aspects of urban redevelopment were disastrously unsuccessful.

The all-white Pittsburgh City Council deemed the Hill inadequate and radically altered it. It demolished the entire lower Hill, the area where most of the retail existed. The bulldozing of the Lower Hill in 1955, for the building of the Civic Arena for the Penguins hockey team (completed in 1961 and now demolished), displaced 8,000 people and 400 businesses and destroyed a whole neighborhood in one fell swoop. The position of this arena and traffic rerouting also left the Hill even more isolated from the rest of Pittsburgh, and this isolation continues, though official segregation has ended.

As in Pittsburgh, throughout the country, urban renewal most often damaged and displaced the neighborhoods of poor minorities, leading novelist James Baldwin to rename urban renewal “Negro Removal” (Fullilove, 2016; Graham, 2008; Mossman, 1989). Mindy Fullilove (2016), a psychiatrist who has studied and worked extensively with struggling African-American urban neighborhoods, estimates that 1,600 African-American communities were similarly and catastrophically bulldozed throughout the peak years of urban renewal. While this restructuring was supposed to remove “blight,” much of what was destroyed were vital and functioning communities, thriving in
unique ways and home to rich cultural lives (Scott, 2004). With the process of urban renewal and changing attitudes toward other minorities, the minority Hill residents who could move (e.g., Jews, Italians, Irish, Syrians) left the Hill and moved elsewhere. Some displaced people were moved into housing projects, which became crime-filled and without the social threads that used to tie the Hill together.

After the displacements and loss of people, the Hill culture was decimated. Retail had mostly disappeared. The 1968 riots following the assassination of Dr. Martin Luther King, Jr. seemed to be an explosion of anger and frustration by those left behind. They resulted in property damage and a high arrest toll. As did African-Americans in hundreds of other U.S. cities, Hill residents turned to violence and looting that left parts of the Hill in ruins, as if offering the loudest cry of anger, grief, and despair from a shattered community that knew what had been done to it and many others, and that felt powerless in the face of lost dreams. The hopelessness was not without foresight: Clay Risen (2009) describes how the riots signaled an already-shifting tide and the end of the liberal visions of the 1960s. He notes that inner-city America, while “once a problem to be solved,” after the riots “became a threat to be contained.” White flight steadily occurred, and “security for the suburbs replaced opportunity for blacks” (p. 250). The Pittsburgh riots resulted in the closure of the remaining retail establishments in the Hill and it becoming a food desert (no grocery store) for the next 30 years (Dubowitz, Ghosh-Dastidar, Cohen, Beckman, Steiner, Hunter, Flórez, Huang, Vaughan, Sloan, Zenk, Cummins, & Collins, 2015), the destruction following the riots became the nail in the coffin for the Hill District.

Understandably, these dramatic and devastating changes have a significant psychological effect on those whom they shake. Fullilove developed the concept of “root shock” to capture the traumatic response that people experience when their world is torn down around them, as in a tree falling down and its roots being pulled up. In the words of Fullilove (2016), root shock is “the traumatic stress reaction to the destruction of all or part of one’s emotional ecosystem” (p. 11). Her concept of root shock situates our psychological lives within meaningful places, revealing the intimate ways we extend into and are impacted by our environments; it disrupts the mainstream American sense of people as independent actors who, if sick, are ill only with problems within themselves. By repositioning our understanding of sickness and health, root shock illuminates the profound interconnectedness of individuals and their communities and society.

The trauma from being so uprooted can last for a person’s lifetime and even can span generations. Fullilove (2016) argues that the contemporary crises within African-American inner cities—“drug addiction, the collapse of the black family, and the rise in incarceration of black men” (p. 20)—all cannot be understood without understanding the far-reaching and devastating impact of those urban renewal bulldozers in the 1950s. In the media in recent years, we especially have seen issues of police violence and racist attacks, and the rage and grief of protesters and rioters. These are all expressions of this long-brewing trauma, as well as the pleas by the African-American community and others for understanding of and collaboration with African-American communities, considering the sociohistorical, economic, political, cultural, and emotional context.

The Hill is a painful example of this community trauma and root shock. The breakdown of community that followed the destruction of its neighborhoods has been devastating. In her own interviews with people who grew up in the Hill District, Duquesne University psychology faculty member Eva Simms (2008) documents this decline, noting the full functionality of the neighborhood prior to urban renewal: While it was segregated and residents still struggled with poverty and darker aspects of culture like drugs, violence, and prostitution, these realities were “held in check by the neighborhood community” (p. 84). There was a sense of interpersonal reliance, a network of adults who shared supportive and meaningful relationships and who watched out for all of the children. With urban renewal, though, the neighborhood experienced adverse effects from displacement and loss of connecting relationships. Families moved often, and the sense of safe belonging was replaced by turf wars between residents of various areas. Public life became associated with unsettledness, danger, and violence. The wide circle of adults watching out for each other and their children deteriorated, leaving an experience of “every man for himself” (Simms, 2008, pp. 85–86). Although large-scale organized gang activity has declined since the 1980s, poverty, drug use, and crime—including higher rates of gun violence and murder due to smaller-scale turf wars—continue to make residents feel unsafe in this new world, bereft of a stable intergenerational community.
Research Process

The research project was a joint project of FOCUS Pittsburgh and Dr. Goldberg, with the support of Duquesne University. It was completed in a senior-level semester-long seminar, a community engagement course required for psychology majors before graduation.

In the first half of the semester, the students read and studied how to be present with another human being and how to witness and honor each person’s story. They read about interviews of Holocaust survivors and earlier Voices in the Hill interviews. They practiced how to be a “vulnerable observer,” someone who brings affect into the sharing of research (Behar, 1996; Goodman & Meyers, 2012; Greenspan, 1998; Josselson, 2013). The process of teaching reflexivity to the undergraduate students through this course is being addressed in another article (Goldberg & Abrams, in preparation).

FOCUS Pittsburgh recruited participants, people currently or previously involved with FOCUS Pittsburgh in some way, even as minor a connection as coming in for a cup of coffee. Many people volunteered to be interviewed by a group of strangers to share stories of their lives. The interview teams consisted of two to three students, along with either Dr. Goldberg or a teaching assistant. Each interviewee met with the team and signed an Informed Consent form before participating in the one- to two-hour tape-recorded interview. Each student had a role in the interview, some asking introductory questions, others asking more in-depth questions. The interviewers used an Interview Guide with open-ended questions; the goal was to learn about participants’ most meaningful life experiences. The focus on meaning-making is based on theories of existentialism, which argue that there is no inherent meaning and we as humans must create meaning in our lives (Sartre, 1943/1993; Yalom, 1980). All participants’ names in these and other articles are pseudonyms chosen by participants, students, or Dr. Goldberg.

The study was conducted utilizing a narrative research approach, with an underlying existential epistemology (McAdams, Josselson, & Lieblich, 2006; van Manen, 2014). The goal of the research was to understand the stories and experiences of the people interviewed (their narratives), while seeking to understand their life worlds in a deep and powerful way. The leisurely pace of the interview process was to provide interviewees space to tell their stories of meaning and trauma in their own time and in their own way. Some life stories were chronological; others moved from the most traumatic experiences through other traumas. By using participants’ actual words, rather than our interpretation of their words, we capture their worlds, in a “hermeneutics of faith” (Josselson, 2004; Orange, 2011).

The interview teams recorded the interviews, which the student teams transcribed. The class then chose important excerpts, arranged according to these themes: childhood, individual and family suffering and trauma, societal suffering, how people found meaning, those still struggling to find meaning, and the role of FOCUS Pittsburgh. The class then presented excerpts by theme as a performance, in a public reading of the stories at an open space near FOCUS Pittsburgh, with a variety of people attending, including some interviewees, other Hill District community members, and members of the Duquesne University community. The hope for the public reading was to make the stories real, alive, and transformative. It was hoped to be even more powerful when the readers were people who looked different from the original storytellers. Performative research seeks to take research out of the academic world and bring it directly to the public in a live, creatively developed performance (Denzin, 2010; Gergen & Gergen, 2011).

The reading was presented on a rainy April evening. Students, audience members, and the FOCUS Pittsburgh volunteers helped set up the late-arriving tent and chairs, and the reading took place with grass turning into mud amid a noisy cacophony of hammering (setting up the tent) and pouring rain. Nonetheless, witnessing the public reading—in the rain—was intensely moving for both the Hill District and Duquesne University communities and an experience that bonded the diverse communities together.

This project was supported by Duquesne University, with significant attendance by university members at the public reading, extensive contributions of food to food drives for FOCUS Pittsburgh, and important financial assistance. The interviews and public reading are part of Duquesne University’s increasing emphasis on community engagement, particularly with the Hill District. This process reflects national trends of university engagement with the greater community of which universities are a part. Duquesne University is situated between downtown Pittsburgh and the Hill. Duquesne’s increasing efforts to foster meaningful community relationships with its Hill neighbors recognizes how the needs of communities have become ever more undeniable, and the isolation of universities ever more untenable. Conducted with the sensitivities
of the methods of phenomenological and qualitative inquiry, these interviews are a vital example of the process of getting to know the life worlds and experiences of Duquesne’s neighbors: the interviews foster entry into the intimate lives of individuals who grew up and made their lives in the Hill District across several decades. Yet, when heard within sociohistorical contexts, like a Greek chorus, they also reach beyond the level of individual African-American lives—they speak to the lives of African-Americans in Pittsburgh, and they speak to the lives of African-American communities throughout America. They are a celebration and honoring of black voices, both their anguish and their resilience. Ultimately, they express the dynamic shapes and textures of a community as it emerges through personal narratives. They also point a way forward for cities seeking healing and the creation of vibrant urban spaces that honor history and community.

Trauma-Informed Community Development

FOCUS Pittsburgh and the Hill community had been concerned about individual and community trauma. Dr. Goldberg and Father Abernathy, the director of FOCUS Pittsburgh, developed this community engagement project to hear stories of individual and community trauma as well as themes, if they emerged, of healing. The findings were then shared with the community in writing and performance. Another goal was to involve the students in a community engagement project that would seek to understand deeply the lives of people in the Hill.

We understood that the Hill community as a whole and those like it are traumatized, and that trauma must be appreciated as a group wound if we ever truly hope to address our social problems. The interviews were conducted to start to understand, hear, and honor the trauma. While the interview process was underway, FOCUS Pittsburgh developed the concept of Trauma-Informed Community Development and started implementing it in the Hill. It focuses on developing a neighborhood, taking into account the community members’ needs for healing on many levels: health, emotional, physical, educational, relational, and spiritual. Development under this model is not just about creating buildings but about healing a community.

The Narratives of the Hill

This larger context of African-American history in this country and in Pittsburgh speaks through the individual life stories people shared with us and the students. These individual narratives speak several major themes: relational trauma within the African-American community created by drug abuse and violent and violating interpersonal relationships, mental health issues and mental health care in the lives of traumatized African-Americans, a larger sociohistorical failure of Pittsburgh and America to African-American communities, and the possibility of empowerment for disenfranchised people through engaging with the community and making their own meanings. The participants’ names have been changed, in addition to some details of their lives, in order to protect their privacy.

Relational Trauma: Violence, Substance Abuse

Many people in the Hill District have experienced multiple traumas, beginning at a young age, due to gang and drug activity; domestic violence; and sexual, physical, and emotional abuse. One participant, a woman in her thirties we call Amanda, captured this pervasive and ongoing traumatic context when she said: “My life is hard. My life has been hard. I don’t know when it’s gonna become happy.” Tragically, these traumas often seem first to occur at the hands of primary caregivers, creating lasting wounds and ongoing issues of trust. Additionally, all of the participants’ traumas were influenced by the abuse of alcohol and other drugs. A middle-aged man we call Gerald provides a potent example of this chronic prevalence of substance abuse and its impact. His father drank heavily; he himself is an alcoholic and said he once went to jail countless times in one year for fighting with girlfriends. His son is now in prison for selling drugs.

Many of the male participants experienced trauma due to economic and cultural pressures to participate in gangs and drug dealing, leading to high rates of incarceration and failures in fatherhood, first from their own fathers and later as fathers themselves. In describing men’s traumas, a young man, Matthew, explained that the desperate conditions of life in the Hill leave men looking for extra help: “And when it’s not there, you’re forced to go find it. Sometimes when you find it, it’s not the good find, it’s a bad find. And then when you get the bad find, you get incarcerated.” In his own situation, Matthew experienced the trauma of being in prison at the time that one of his children died (even more tragically, he was incarcerated for a crime he claimed he did not commit). It was excruciating for him not to be able to attend her
funeral. Matthew never knew his own father, and his stepfather committed suicide. Despite the seeming hopelessness of this situation, Matthew added: “But you live and you learn and you make mistakes to be the man.” Wendell, another young male participant who also participated in gangs, similarly described a narrative of some hope, as he stopped using and selling drugs when he learned he was having a child.

Male and female participants described the traumas in women’s lives around them as stories interwoven with men’s pain. Some participants described watching their mothers undergo severe beatings and other forms of abuse, or experiencing their own abuse as women in relationships. Tragically, some also described their traumatized mothers then turning and abusing their own children. The trauma was overwhelming and many of these women seemed to be so injured—emotionally and physically—that it was challenging for them at times to care for their own children or protect them from the violent men in their (mother and children’s) lives.

Josiah, a young man, described growing up with domestic violence fueled by his father’s alcohol and drug use. (His father was eventually jailed.) Josiah repeatedly feared for his mother’s life, finding her again and again rendered unconscious by his father’s choking. She lost many jobs because “you can’t go to work with black eyes and lips all swollen.” As she was forced to work all day in an effort to provide for her children, and because of her frequent job loss and the family’s poor living conditions, one of their neighbors called Children and Youth Services, and Josiah and his siblings ended up in foster care. The attacks left his mother without her singing voice. She died at a young age. Amanda also described the fear, pain, and instability of being exposed to domestic violence.

Some participants described experiences of physical and sexual abuse in their childhood homes. Sherry, a middle-aged woman, disclosed for the first time that she had experienced sexual abuse at the hands of her “gangster” father, a man she deeply admired. Other participants described childhood emotional abuse and/or chronic instability. Amanda recounted an erratic schedule and sometimes neglect due to her parents’ excessive drinking. Her mother was verbally abusive. Her father died young. Her brothers were subjected to gang violence. Miranda, a middle-aged woman, also experienced emotional trauma in an unstable family: She had four siblings, all from different fathers. Her own father was addicted to gambling and alcohol. He died when she was 14 years old. Her mother also was an alcoholic. Miranda described herself as “conceived from alcohol,” and her origin story expresses the challenges of people who were meant to love her: Immediately after Miranda was born, her mother tried to give her up for adoption at the hospital. (She was rescued by her grandmother, who brought her home and raised her.) Patti, a middle-aged woman, described her mother’s cruel stance toward her when she became pregnant as a teenager. At her mother’s insistence, Patti underwent a late-term abortion she did not want, during which her mother chastised and shamed her. Patti also described being sexually harassed by her mother’s boyfriends, while her mother never believed her when she told her that they were not good men.

Other participants also described traumatic experiences reoccurring in new forms in their adult lives, expressing the tragedy of traumatic repetition that can make change so difficult. Following her victimization at the hands of her father, Sherry experienced domestic violence in her adult partner relationship. She stayed for 11 years because she wanted her children all to have the same father. But when the man began hitting her children and calling them cruel names, she decided to change her life. She obtained protection from abuse orders, yet endured continued attempts at violence and harassment, including nearly being killed by her ex-husband in front of her son. Sherry also stayed with abusive men at various points to support her, her children, and her drug addiction. Reflecting on her line of relationships with men, beginning with her father, Sherry said, “I was looking for love in all the wrong men.” Miranda’s trauma also continued, as she was raped and, during another traumatic experience, almost murdered when she was spending considerable time around heavy drug and alcohol users. Amanda’s childhood traumas also took new forms in her adulthood: She became an alcoholic like her parents and was sexually assaulted while living at a halfway house. Later she also was violently attacked and left for dead by a friend while they were high on cocaine. Miraculously, a compassionate stranger found her and saved her life.

Some women turned to desperate and painful ways of life as they attempted to support themselves. Sherry worked in prostitution to support her crack addiction, eventually contracting HIV. She said, “My addiction took me places I said I would never go.” Miranda shared a similar story about staying in abusive relationships due to her
need for drugs and alcohol: Men would seem caring and then want to act as her pimp. She also eventually worked as a prostitute.

The traumas of Patti’s life continued into her adulthood, as well. She had her first child at age 19, and her mother proceeded to kick her out to the streets even though the temperature was below zero degrees. Patti lived in abandoned cars and on convenience store snacks for a month, then walked door to door trying to find someone to feed at least her child, even if not her. Nonetheless, Patti tried to continue relating to her mother with integrity and compassion: “I just tried to love my mom regardless of the way she treated me. Just love her the way she is.” Their relationship concluded with trauma as well. Fifteen years ago her mother was murdered by her husband, a man Patti had never trusted, yet she had stayed silent due to her mother’s years of denying his harassment of Patti. Patti’s description of the way he buried her mother’s body, in pieces, and her family’s relief when her mother’s body was found and given proper rest, seems to capture her life’s violence, fragmentation, and longing for peace.

One participant, concerned about the well-being of her young sons growing up in a such a place, poignantly said, “It’s crazy now in this world.”

**Mental Health Issues**

These experiences of chronic traumatic stress contributed to mental health issues for many participants, whether or not they explicitly referred to emotional suffering as mental illness. Many described years fraught with neglect, abandonment, violation, and loneliness, which explained in some way that their later abuse of alcohol and drugs and their tempestuous and violent relationships were means of coping with devastating wounds and losses.

Five participants described experiences of mental health issues, ranging from severe depression and anxiety to psychotic states. Josiah described his experience as a recurring “deep depression.” He periodically pursues psychiatric services and takes medication. He related his depression to his experience of terrifying domestic violence in his childhood household. Miranda spent time in a mental institution to address her mental health issues and drug abuse. Amanda described experiences of chronic stress and anxiety that at one point felt so intense that she attempted suicide. Matthew also described himself as “having mental health issues.” He shared that he often calls a local crisis network to talk to someone and tries not to have knives in his house out of fear of harming himself. He has felt suicidal and experienced seemingly psychotic or dissociative states, during which he acts without awareness and ends up involuntarily committed and disoriented. He described his experiences in the hospital as being “like jail” and often somewhat frightening. He seems to have felt helped by medication at times but also has disliked its effects. After Sherry experienced abusive situations with men, she sometimes would become so overwhelmed that she also checked herself into Western Psychiatric Hospital, Pittsburgh’s primary mental health institution, leaving her children with their father even though he was abusive and dangerous. She characterized these hospitalizations as being for “psychotic episodes.” Like other participants, she disliked her experiences of the hospital (as much as it also served as a source of necessary peace for her), feeling that she was given too much medication that left her “like a zombie.”

Participants also described family members who have experienced mental health crises and these experiences’ impact on them. Amanda’s sister suffers from schizophrenia, which is difficult for Amanda as she sometimes cares for her. A young man named Taylor told how his mother committed suicide after a failed relationship, a tragedy that almost drove Taylor himself to suicide, and which did lead his brother to “go crazy.” Matthew’s stepfather committed suicide.

Some participants also were explicitly aware of and articulate about ways in which the psychiatric field, in diagnosing and treating their symptoms, misses the larger context of the community trauma of urban African-American life. While diagnoses, medication, and the medicalizing of psychological experience may mean to be helpful to suffering people, ultimately it only offers a small piece of the picture. At its most problematic, it can overlook and even perpetuate core issues of isolation, loneliness, and shame.

Of all the participants, Quentin, a middle-aged man, spoke most explicitly about these failures of the mental health system and its medical model in addressing the heart of his suffering and the suffering of others in the Hill community. Quentin is the only white participant in these interviews and he did not grow up in the Hill District. However, in his adulthood he has chosen to spend a great deal of time there. While he has a different sociocultural experience than other participants, his position illuminates a great deal about trauma as a part of the human family, and a great deal about the gifts
and grace that a traumatized community can share when residents recognize and support each other. His interview included powerful descriptions about his choice to devote much of his life to an African-American community. He described how he feels connected to the Hill District, even at home there, because the suffering that he has experienced in his own life resonates with the suffering of many community members. For example, like many participants Quentin described how he “grew up in a very very unstable household” and how he was physically abused by his alcoholic father. He feels deeply supported by the awareness of trauma in the Hill community and the presence of sensitivity and compassion, a kind of attunement that is often absent in other and white American cultural spaces, even though trauma often still exists behind closed doors.

Quentin described these themes of community trauma and social connection poignantly and powerfully as reflected on people’s mental health problems. Quentin has experienced depression for 30 years. He has utilized Western Psychiatric periodically and is on disability. He watched his brother have a nervous breakdown after being drafted for the Vietnam War. Quentin commented on how mental health care is “inadequate to deal with the isolation a lot of us experience,” adding that while medication may help some people manage their pain, “there’s not a cure for loneliness. … Everybody needs love. Everybody needs companionship,” he elaborated. Sherry shared related comments, noting that her most helpful mental health care experience has been psychotherapy, as it offers her the opportunity to talk to and connect with another person meaningfully and tell the painful stories of her life.

In addition to mental health issues, participants also described some physical health issues common to African-American communities, shaped and aggravated by community suffering. Both Nicholas, a man in his fifties, and Amanda talked about diabetes running in their families, with deadly consequences. Amanda also has a sister who suffers from HIV, and Sherry herself contracted HIV.

Failures of Pittsburgh and America Toward African-American Communities

In an even broader sense, some participants also noted that we must understand a sociohistorical context of trauma to appreciate the individual, familial, intergenerational, and cultural traumas of these African-American lives. They described the ways in which Pittsburgh and the larger country have failed African Americans. Some participants, especially older ones, recounted experiences of overt racism. Others described subtler, yet no less traumatic, failures that have devastated them and other African Americans around them and cut off their options. Participants spoke explicitly about these failures as they impacted the Hill District.

Gerald, a middle-aged man, described the pain he felt when he had to move out of the Hill because of urban renewal when he was 13 years old. As he described the trauma that the Hill community experienced during this time, he powerfully said, “They crucified the Hill.” Christopher, an older man, also described the impact of urban renewal on the Hill. Older than Gerald, he lived in the Hill for some years prior to the demolition, displacements, and forced migrations and was able to share memories of how life used to be. He described how:

You had the community that was involved; you had your neighbor down the street [and] the person across the street from your family. If you were in need, they helped you. They helped each other. Today, people don’t even know each other across the street. When I came up, the preachers walked the streets. They knew people.

As he described how the neighborhood has changed, he recalled gradually seeing fewer people taking part in the community of front porches and streets while witnessing the deterioration of housing. Tragically, he noted that festivities and parades and the mood of creativity and celebration that had flourished in the Hill also disappeared. This unique vitality, functionality, and resilience of the neighborhood was lost when politicians made decisions about the community, missing its integrity and value. Patti also talked about how the Hill changed drastically in the decades after the displacements and bulldozing. She commented on how there used to be many things to do in the Hill, but now such activities are lacking; children end up in trouble due to this void. Businesses and centers of community began shutting down, and “they didn’t rebuild nothing for the kids and that’s when the kids got wild and out of hand.” She added that she wished that developers had built more centers for the community rather than homes because people
in the neighborhood cannot afford to pay for camp or other recreational activities for their children, and spaces where children and adults can gather are so crucial to community cohesiveness and health. Christopher, an older gentleman, shared painful aspects of the earlier years of segregation, contextualizing the breakdown that was to come. He shared a poignant story of both segregation and kindness:

I remember as a kid something meaningful—I had busted my hand, split it open on a bottle of Coke…. And Passavant Hospital didn't accept blacks, but you were in a black neighborhood. The cops came. My hand was all messed up and they actually took me up there and told them 'You will stabilize or work on this here boy….' And they wind up sewing my hand. Not knowing that I was supposed to be kept there, they told my mom to take me home. Well, I catch an infection and the whole nine yards….

The heart of Christopher's memories is pain from the harsh discriminatory treatment against African Americans: first, segregation, then urban renewal, and the dismissive attitudes toward the health of African-American communities that permitted urban renewal's destruction to take place in the first place. A younger participant, Wendell, described racism as an ongoing issue for African Americans, as he even recently experienced racial harassment in public schools.

A few older participants additionally described the 1968 riots, following the assassination of Dr. Martin Luther King, Jr. They were children then and explored the confusion in their understanding of themselves and their world as they grappled with questions of “who” destroyed the Hill District. Their stories waver between us/them language, ultimately holding a painful tension between the government's destructive and abandoning behavior and the self-sabotaging, despairing response of a traumatized community. This is consistent with the findings of Fullilove (2016) and Simms (2008). This tension continues as we face the shattering pain, rage, and hopelessness behind contemporary riots and looting.

In describing the 1968 riots, Christopher talked about the fear and powerlessness that he and others felt as they watched the community descend into chaos and the harsh control of Martial law. He said: “The whole Hill was lit up. They was burning buildings,” and added “You hear ‘America, the free’ and all this they taught in school, but you seen when Martial law steps in that they have the power over you regardless and you have no rights.” Touching on a part of the painful paradox, he said: “We became savages in a sense, as far as I was concerned, because we were the ones doing this to our own self.” At the same time, Christopher spoke of America’s failures to its African-American communities. As the Hill declined, suffering increased. He talked about some older people who were eating cat and dog food to survive. “This happened in a country that has everything. This happens in a country that provides the world with everything. But we could not provide our own people with a decent way of living.” Christopher similarly felt this anger during the Vietnam War and his service. He asked of the U.S. government at the time: “How can you have me fight your war if you are hanging my people and not doing nothing about it?” Nicholas, who was 8 years old at the time of the riots, also commented on the situation's horror and destruction. He said, “I seen when this Hill went down in flames.” Echoing Christopher's description of the paradox, he added: “The community never recovered. We hurt ourselves so bad. Anger does that. Frustration….We hurt the community but I believe that the government had hurt our state of living so much.”

Despite this clear awareness of the suffering that was inflicted on their community, participants continued to express anguished ambivalence about responsibility as they talked about their own individual lives and the lives of their loved ones. In describing the failures of his son's life, who is in prison for selling drugs, Gerald described all of the things he did for his son to help him live a clean, good life: buying him clothes, helping him learn to read and write, sending him to private school. Reflecting on his son's falling into risky behaviors nonetheless, Gerald said: “Something didn’t work with that guy. Maybe it was me. That's the hardest thing—blaming myself for his ills.” In light of everything that many participants, and Gerald himself, so eloquently said about the sociocultural trauma of life in the Hill District, Gerald's return to self-blame is heartbreaking. Perhaps it is easier to blame yourself in a situation that is so out of personal control; that begins with the cards so formidably stacked against you. The tragedy of Gerald's son's life must be understood in the context of sociohistorical forces larger than any single person or relationship.
Empowerment and Creation of Meaning

While participants shared their experiences of trauma and suffering, their interviews also highlighted the possibility of empowerment through community support and love and the opportunity to help others and make one’s own, new meanings. As people who are involved with FOCUS Pittsburgh, many of the participants spoke highly of the nourishing, invigorating, and empowering space that FOCUS Pittsburgh has provided for them. It has allowed them to create chosen family and chosen meanings, even when biological family is broken or nonexistent and larger social and cultural structures are similarly devastated. Their stories highlight how this creative work of empowerment and love facilitates healing at both individual and community levels.

Participants characterized FOCUS Pittsburgh as healing in two major ways: as a source of sanctuary during times of darkness and strife, and as a chance to work and give back to the community. Christopher said that being involved with FOCUS Pittsburgh “gives you some sort of stability within your life.” Taylor referred to it as “the FOCUS Pittsburgh family.” In further redefining family beyond blood ties, he added: “My version of family is people who is there no matter what the situation. No matter what you hear you still give a person a chance. You could trust them, you could bond with them. You could do anything with them, for real. They don’t judge you.”

Amanda spoke simply and beautifully of FOCUS Pittsburgh’s impact on her life as a place of loving peace, and her story shows the power of a welcoming space where one can bring the fullness of oneself and have that held in compassion:

I have many brothers and sisters and I can’t find no support anywhere….I walked past this place one day [FOCUS Pittsburgh] and I was just in so much stress and everything and I walked in and asked what kind of place this was and they told me. And they told me I could come in and sit down for awhile. People were volunteering. People came in donating. They gave me food. They gave me coffee. And they kept me warm. And they had an open ear for me. And I’m grateful that I came here.

These simple gestures meant the world to her. She felt less alone, more a part of a community, and thus as if her own existence were not only more bearable, but more meaningful. She sees FOCUS Pittsburgh as providing a unique kind of community home. She said that FOCUS Pittsburgh “has been teaching me how to build” and helping her feel a “foundation.” She added: “There ain’t nothing like your own place. If ya’ll have your own place, don’t let no one destroy your foundation.”

Miranda similarly experiences FOCUS Pittsburgh as a nourishing home. She visits there every day to help herself stay on track with her sobriety. Patti also experienced FOCUS Pittsburgh in this way. For a big milestone birthday, people at FOCUS Pittsburgh threw her a surprise party, the first she ever had in her life. She was overjoyed. She said, “FOCUS Pittsburgh did a lot for me. They let the light shine on me. And I just hope I can let it shine back.” For participants who have had limited connection and care in their lives, and who have endured numerous shattering traumas, these seemingly simple gestures uplift profoundly.

FOCUS Pittsburgh’s support also serves as a source of strength and inspiration for people to work with the community in previously unimaginable ways, meaning that the love increases as it is cultivated and shared. A wide network of people can reap the benefits. Patti commented on this richness: that by allowing her to “focus” on herself and her own wounds and needs, and to heal herself, FOCUS Pittsburgh then allows her to be able to consider helping others. Many of the participants talked about finding meaning through giving back to the community. Quentin, who spoke so extensively about his debilitating loneliness, described how his relationship with FOCUS Pittsburgh has provided him with a kind of healing that mental health care could never give.

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talked about the benefits of volunteering at FOCUS Pittsburgh.

Many of the participants noted an appreciation for FOCUS Pittsburgh’s open-minded religious orientation, which is Orthodox Christian and welcoming to people of all backgrounds and spiritual walks of life. Echoing earlier themes, Matthew referred to FOCUS Pittsburgh as a “spiritual family,” and a few participants described members as “brothers and sisters.” Christopher called FOCUS Pittsburgh not only “a stable platform,” but “a spiritual platform.” Matthew said that FOCUS Pittsburgh gives him an opportunity to speak at events and plant God’s seeds for a better community.

One other means of healing, empowerment, and engagement with the community that participants discussed is the power of this interview and the sharing process itself. While it understandably was difficult to share such painful stories with other people—strangers—the act of telling the story, and especially the knowledge that it may create a sense of community connectedness, was a potent positive outcome. It was particularly meaningful for participants to be talking with a group of people, most of whom had come from different cultures and backgrounds. As Quentin noted, isolation is a major problem in this neighborhood. Sherry noted feeling fulfilled through not only the act of telling her story to compassionate interviewers but also through anticipating that her story would be shared with other community members and might be able to help them work with their own lives. Her comments echo her feelings about psychotherapy and the healing in the act of telling another person one’s painful life events and feeling connected to humanity through that sharing.

While survivors of trauma and others struggling to make a life for themselves in a harsh world may feel shame or guilt about their experiences, releasing those experiences from the burden of secrecy, as in this interview process, reveals that in actuality, the most private experiences touch other people and can be healing for both the teller and the listener. Participants can also come to recognize that their stories have a meaningful sociohistorical context and relevance. Thus, they may increasingly be able to politicize their experiences, finding ways to articulate and channel the healing of intergenerational community wounds. With this new information and inspiration, the participants felt they could work together and with the community for healing. As Wendell and others noted, truly “renewing” the Hill District, on its own terms, could be a powerful shared dream toward which to work.

Impact on Students

One student wrote about her experience in the public reading in the journal she was keeping for class. She first described her fears and expectations before the public reading:

I am about to leave for FOCUS Pittsburgh community public reading. This is the event we were told about on the first day of class, and it is truly the climax of the course. It is the moment we have been working up to and practicing hard for within the past few weeks. Our script is a culmination of all of our interviews, yet only gives a taste of the richness we have found when speaking to these individuals. As we were practicing on Wednesday, it was the first time that we were reciting excerpts from the actual transcripts.

While we had told each other the stories in our own words when recounting our perspectives in class, hearing the stories as the interviewees actually told them was ten times more impacting. The rehearsal was when the power of our work and of sharing these stories truly began to sink in for me. Our script has many vivid stories that are so important to share, both of pain and of resilience.... While it will not be easy, I feel [the story I am reading] is one of the stories that deserves to be shared most, as it was one of the most significant moments of impact in my interviewee’s life. I hope to be able to bring honor to her experience as a whole.

She realized the importance of the narratives and how they touched her. After the public reading, she wrote:

The public reading was so much more of a success than I could have anticipated. When we arrived at FOCUS Pittsburgh, it was steadily raining, the tent was beginning to be assembled half an hour before the reading was scheduled to begin, and there were people everywhere. There was chaos and disorganization. However, as a response, we all came together in a way that is characteristic of FOCUS
Pittsburgh and of the Hill District community. We all helped out by bringing chairs from the upstairs and assembling them on the stage and in the audience. There was no separation between our class, the people from outside the Hill community who came to listen, and FOCUS Pittsburgh community members. We all worked to set up the event, and in doing this, we became one as a community, with shared values and a common purpose. I am grateful that the event happened in this way, because it connected all of us in an important way, taking away the formalized boundaries that would normally be automatically put in place.

When Father Abernathy gave his introduction, he said he was grateful for the rain, because it was symbolic of the struggles that the Hill faces, yet rises to meet in its resilience. I think that was a perfect introduction to the stories we were about to share. As we got started, I noticed a unique atmosphere starting to form. The audience was completely attentive and appreciative of us being up on stage. As we spoke, all their eyes were on us, and we could all tell they genuinely wanted to hear what we had to share. I could also tell that our class came together in wanting to share our stories, knowing that this was the big moment. We had the important role of being channels of these stories, not just as they were told to us, but also as they impacted us. We were sharing as vulnerable observers.

… As I was speaking, I felt connected to all of the people around me in a very human-to-human way. I began to ease into the moment and appreciate how special this was. I had just enough time to read my interviewee’s painful story of trauma. She was present in the audience, but had left the tent because she could not bear to hear her story being read…. As I began to read my part, I could tell I was becoming emotional, but my will to share the story in a fluent and meaningful way overpowered the emotions I was feeling. I tried to slow down, speak clearly, giving it the affect I was feeling, and to just be in the moment. As I was speaking, the audience was responding, and I knew that they were in the moment with me, as well. When I was done, I paused to let it sink in for all of us, and I felt I had truly done my best to convey the power and meaning of [our interviewee’s] story.

I could tell the audience was deeply impacted by it, and I felt that this was what made all of our work worthwhile—to have this opportunity to share, to move other people by telling another human’s story of meaning. I became very emotional as I sat down, but I was truly grateful for that moment (Stokoski, unpublished manuscript).

This student’s impactful reaction was echoed by the other students. It is hoped that this experience will change their interactions with impoverished, undereducated people, as they will have experienced firsthand the challenges the community members face every day, as well as the resilience FOCUS Pittsburgh and perseverance provide.

The Larger Impact

FOCUS Pittsburgh and Duquesne University are continuing the work of Voices in the Hill. FOCUS Pittsburgh is involved in Trauma-Informed Community Development and its first community development organizer is working street by street in the Hill to hear stories and talk and work with residents as local people develop the block. Emphasis has been on sharing the findings in this article with policymakers and funding agencies to ensure that the voices in the Hill are heard. The university also has several faculty and students doing community-engaged teaching in the Hill in a more reflexive way than in earlier notions of service learning.

The Voices in the Hill lab is part of a larger project involving both academic and community stakeholders. It is part of a multi-disciplinary effort and has inspired other efforts and articles (e.g., Koelsch, Bennett, & Goldberg, in press). Dr. Goldberg and students are currently conducting drop-in focus groups called “Community Talking Circles” at FOCUS Pittsburgh, on topics such as living with trauma, to join in the Hill community’s efforts at a continuing sharing of stories among residents. Students will be presenting the focus group stories to the Hill District community.
shortly. Future projects include participatory action research in which both community and university members will engage with and organize Voices in the Hill studies and make sense of their findings (Khanlou & Peter, 2005; Minkler, 2000) as well as all parties sharing stories with policymakers.

There are many affected communities such as Pittsburgh with blighted neighborhoods that were devastated by urban renewal and other societal inequities. Several other communities and universities are working together in civic engagement in a larger context of community/university partnering (Marriott, Lipus, Choate, Smith, Coppola, Cameron, & Shannon, J., 2015). Other teachers and researchers are participating in community engagement in an effort to improve this legacy (e.g., Reardon, 1998) and as a form of social justice and civic engagement (Howarth, Currie, Morrell, Sorensen, & Bengle, 2017; Weiss & Fine, 2004).

Conclusion

Many white Americans like to think history has no impact on current life (Klein, 2008; Streich, 2002). Yet we can also see that the history that we push away returns to us, demanding to be seen, to be known, to be respected, and to be integrated into the community, the city, and the country’s awareness of itself. This collection of interviews seeks to articulate and thematize this denied history, as a contribution to efforts to contextualize the Hill District in the larger Pittsburgh community. For while Pittsburgh has undergone a renaissance in recent decades, reinventing itself after the collapse of the steel industry, the Hill District largely has been left behind. As much of Pittsburgh attains a new identity, becoming a center for medicine, technology, art, culture, and food, debilitated minority communities cannot be ignored. At the same time, we have learned that these communities do not benefit when they coercively are “improved” by outsiders who think they know best, as what happened with urban renewal in the 1950s. Instead, the unique wisdom of community voices must be honored and respected. These Hill District interviews illustrate the revealing and powerful outcome of inviting community residents to speak for themselves and on their own terms. We hope that these voices from the Hill will educate policymakers, developers, community stakeholders, and others in Pittsburgh—who are seeking to change and revitalize the Hill District—as well as those throughout the country.

Finally, in a more intimate way, as Sherry commented, this project could help to foster increased connectedness among Hill District community members. Experiences of trauma often leave people feeling alone, isolated, needing to hide many secrets, and ashamed. The sharing of stories can heal this alienation by illuminating ways in which suffering is not merely or primarily individual, but shared and a core part of the human condition. In a community like the Hill District, the sharing of stories can help residents see that not only are they not alone, in fact the most profound traumas of their lives are sadly too frequent, as their neighbors also tell stories with similar content and themes.

At the deepest personal level and at a level of understanding the place of the community in larger sociohistorical/political forces, the sharing of stories has great potential to empower the Hill District. Already, through the experience of these interviews, their presentation, and the Trauma-Informed Community Development initiative at FOCUS Pittsburgh, many people have felt empowered to come forward and help their community with this sharing, meaning-making, healing, and energizing process. Thus, these interviews ultimately belong to the people who told the stories, and to their neighbors.

As seen in this article, the work is crucial, transformative, and life-changing for students and faculty. The work must also benefit the community as much as the university (Blouin & Perry, 2009). Ultimately, community healing will come from within (McBride, 2003; Thurman, Plesed, Edwards, Foley, & Burnside, 2003). Until then, we hope this kind of partnering and sharing will benefit both the community and local universities.

References


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**About the Authors**

Susan G. Goldberg is an assistant professor in the Department of Psychology at Dusquesne University and Camille O’Connor is a psychologist at the Western Washington University Counseling Center.

In an oversight, Dr. Camille O’Connor and I did not acknowledge the comprehensive and effective work that Dr. Matthew J. Walsh has done in developing the Trauma Informed Community Development (TICD) initiative with FOCUS Pittsburgh. We wish to correct this oversight and add his citation to our Reference list that appears on the JCES website as follows:


See also:


Signed: Dr. Susan G. Goldberg