

WE ARE THE PEOPLE
WE SERVE.



**WHOLE
WOMAN
WHOLE
WORLD**
Centering
Women & Girls



PEOPLE

**MARCH 2026
FROM THE DESK
OF THE CEO**



**Women Have Led the Way:
Centering Women & Girls**

March invites us to pause and recognize a truth that history continues to affirm: women have always led the way. As we honor Women's History Month and National Women & Girls HIV/AIDS Awareness Day, SisterReach centers women and girls as leaders, visionaries, and protectors of community health, family well-being, and democracy itself.

Women—particularly Black women—have long been the architects of movements for justice, care, and liberation. From the 16 women who shaped the reproductive freedom framework to the 12 Black women who advanced and defined reproductive justice, women have offered the analysis, courage, and strategy that continue to guide our work today. Their leadership reminds us that reproductive autonomy, maternal health equity, and access to HIV prevention and care are not side issues—they are foundational to a just society.

In this political climate, women are also sustaining democracy. We organize, vote, educate, nurture, and resist policies that seek to control our bodies and silence our voices. At SisterReach, Black women's leadership is not symbolic—it is operational, strategic, and transformative. It shapes how we deliver care, reduce HIV stigma, protect bodily autonomy, and build power for future generations.

This month, we honor women's leadership past and present—and recommit to ensuring that women and girls not only survive, but lead, thrive, and shape the world ahead.

Cherisse Scott
Founder & CEO, SisterReach

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MEMPHIS LET'S TALK!

Nine Reasons Black Women Must Think Differently about Sex



Hey Sis! Let's talk.

HIV infections are surging in Shelby County, Tennessee, with rates nearly three times the national average. The Memphis metropolitan area ranks number one in the U.S. for new HIV incidence, and Black women are disproportionately impacted. Approximately 30% of new infections in the county occur among heterosexual women, according to the Shelby County Health Department.

Sis, we have to begin thinking differently about our sexuality.

Black women continue to be marginalized and disproportionately impacted not only by HIV and other sexually transmitted infections, but also by racial discrimination, medical apartheid, low wages, food and housing insecurity, and other systemic barriers that affect our ability to be well and whole. Sexual health does not exist in a vacuum. It is shaped by history, economics, policy, faith traditions, media narratives, and the stories we carry in our bodies.

And our story is complicated.

What happened on the auction block centuries ago is not ancient history. The psycho-sexual trauma of slavery still reverberates. Enslaved African women were treated as chattel property, bred, coerced, and assaulted. Families were torn apart. Legal marriages were often prohibited. Black women were forced to endure sexual humiliation and degradation that distorted how our bodies and sexuality were understood—by others and eventually by ourselves. We were left to negotiate the “burden” and trauma of our sexuality.

That trauma did not disappear; it became embedded. Shame, stigma, silence, and distorted narratives about Black women's sexuality were passed down through generations. Those inherited scripts still shape how many of us experience desire, intimacy, power, and protection.



<https://encyclopediavirginia.org/entries/sexual-exploitation-of-the-enslaved/>

Find out the nine reasons we must think differently about sexuality:





Here are Nine Reasons Black Women Must Think Differently about Sexuality:

1. The Labels Placed on Us

The white imagination has long produced toxic caricatures of Black womanhood. As echoed in *Four Women* by Nina Simone, our identities have been flattened into types that were easily digested by white patriarchy. Jezebel. Mammy. Baby mama. Siren. “Hottentot.” Madonna - these labels restrict exploration and celebration of our sexuality while reinforcing fear and control.

When a community is told repeatedly that its women are hypersexual, irresponsible, or morally loose, it creates internalized shame and self-policing. Some of us shrink. Some over perform. Some detach. Either way, we are navigating scripts we did not write. Overtime, Black women have bought into this notion that we are no more than our bodies or erotic capital that has built and continues to build this country.

2. Music and Media Exploitation

Popular culture often places Black women’s bodies back on the auction block—this time disguised as entertainment. Hypersexualized images become normalized. They influence how others see us and how we see ourselves. These these degenerative images of women have become the defining factor of Black women’s sexuality and relationships. When our worth is reduced to erotic capital, we pay a steep price: diminished safety, distorted relationship expectations, and increased vulnerability to sexual violence.

Hypersexualization also feeds rape culture and the premature sexualization of young Black girls. When society consumes our bodies as spectacle, it becomes harder to advocate for our protection and pleasure.

3. The Institutional Breakdown of Black Love

In *Post Traumatic Slave Syndrome*, Joy DeGruy describes how the trauma of slavery fractured trust between Black men and women. Enslaved women were repeatedly assaulted while Black men were often powerless to intervene without risking death or family separation. Intellectual understanding did not erase emotional pain. Distrust took root on both sides.

That inherited mistrust has echoed across generations, contributing to strained relationships, gender conflict, and shifts in family structures. While love persists, unhealed trauma complicates trust, intimacy and wellness.



Here are Nine Reasons Black Women Must Think Differently about Sexuality: (cont.)

4. Conflicting Spiritual Messages

Many of us were raised in church spaces that preached abstinence yet practiced silence while hiding sexual activities. Sexual behavior was condemned publicly but discussed rarely and honestly. Female congregants are often held to a standard of purity while males are often overlooked regarding their sexual prowess.

Bible beating with scriptures, religious guilt-tripping and sin shaming forms a barrier and creates a double standard reinforcing the virgin/whore dichotomy. It teaches girls to hide, lie, and carry sexual shame. It does not equip them with tools to navigate consent, desire, abuse prevention, or healthy marital intimacy. Silence becomes dangerous. This type of learned silence, shame and stigma that makes us vulnerable and puts us at higher risk for unintended consequences of sexuality. In addition, it does not equip us with the tools we need to protect ourselves from sexual abuse – inside or outside of the church.

5. The “Good Girls Don’t” Myth

Abstinence can be a choice, but pretending that all girls will abstain is unrealistic. When we teach that “good girls don’t have sex,” we equate morality with sexual inactivity and pleasure with wrongdoing. Girls internalize the message that desire is shameful.

As those girls grow into women—married or partnered—they may struggle to experience pleasure without guilt. Some develop anxiety, dysfunction, or aversion rooted not in biology but in belief. Healthy sexuality requires accurate information, bodily autonomy, and space for pleasure without condemnation.

6. Misogyny and Patriarchal Scripts

Boys are often socialized to celebrate sexual conquest, while girls are shamed for the same behaviors. “Locker room banter” normalizes the objectification of women. Patriarchal systems—rooted in white, male, heteronormative privilege—continue to shape how society responds to Black women’s sexuality.

This imbalance echoes slavery’s abuse of power, when white men claimed ownership over Black women’s bodies. That legacy still influences politics, modern attitudes about consent, entitlement, and whose pleasure matters.



Here are Nine Reasons Black Women Must Think Differently about Sexuality: (cont.)

7. “Keep Your Panties Up” Culture

Older abstinence-only messages often relied on fear and secrecy rather than education. Girls who became pregnant were hidden away at grandma’s house down south. Some sought unsafe abortions in “back alleys” to preserve familial reputations. Others grew up confused about family structures built on concealment.

Shame-based messaging did not prevent sex; it prevented honest conversation. Without comprehensive education about protection, pleasure, consent, and boundaries, young women were left navigating sexuality alone.

8. The “Nasty Woman” Narrative

There are countless commercials and products on the market that help perpetuate and support this myth of the “unclean” woman. Even dating back to the Old Testament biblical times, there was the woman with the issue of blood who was ostracized.

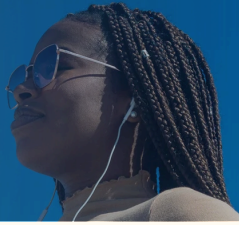
Many women have been taught that our bodies are dirty. Menstruation is stigmatized. Vaginal odor is medicalized in commercials. Natural anatomy is altered to meet narrow beauty standards. Some women risk their health pursuing a socially approved body.

When we internalize the idea that our bodies are unclean, we disconnect from them. Disconnection reduces self-touch, self-knowledge, and the ability to advocate for pleasure or notice health changes. Embodiment is protective; shame is not.

9. The Intersecting “Isms”

Racism, sexism, classism, and economic exploitation intersect to shape Black women’s sexual health outcomes. Limited access to healthcare, insurance gaps, underemployment, housing instability, food instability and distrust of medical systems all increase vulnerability to HIV and other health challenges.

These systemic and structural barriers at the various intersections of lives help to sustain domination and oppression while reinforcing silence and stigma - further exacerbating access to care and culturally humility.



Here are Nine Reasons Black Women Must Think Differently about Sexuality: (cont.)



If Black women are to be fully empowered in our sexuality, we must have honest, raw conversations rooted in reproductive and sexual justice. That means addressing not only disease prevention but also economic stability, housing security, healthcare access, ancestral trauma, racism, sexism, and the affirmation of diverse sexual identities and orientations.

It also means shifting our framework.

For too long, conversations about Black women's sexuality have centered disease, death, and danger. While prevention matters deeply—especially amid rising HIV rates—it cannot be the only lens. We must also center safety, pleasure, agency, consent, and joy.

Sexual pleasure-centered education does not ignore risk; it strengthens protection. When women feel safe in their bodies, knowledgeable about their anatomy, and worthy of pleasure, they are more likely to advocate for condoms, testing, boundaries, and healthy partnerships.

“It also means shifting our framework.”

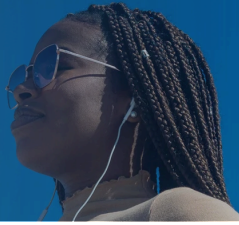
We deserve programs that teach skills, not shame. We deserve interventions that address poverty and power dynamics alongside prevention. We deserve spaces where sexuality is discussed without whispers.

Sis, this is not just about behavior. It is about healing historical and ancestral trauma, dismantling harmful narratives, and reclaiming our bodies as sites of power rather than pathology.

When we reimagine Black women's sexuality as sacred, embodied, informed, and pleasure-centered, we shift the paradigm. We move from survival to sovereignty. From silence to strategy. From stigma to self-love. From absence to abundance....Rooted and Rising!

And when we're ready for THAT conversation, sis—I'm here.

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THIS MONTH'S
ANNOUNCEMENTS

PROTECTING
HUMANITY
STANDING IN
Sacred
AUTHORITY

**FAITH ADVOCACY
& RELIGION
SYMPOSIUM**
A PROGRAM OF
SisterReach

OCT 14-17
MEMPHIS

FOR MORE INFO, VISIT SISTERREACH.ORG
SAVE THE DATE

SAVE THE DATE FOR FARS 2026!



OCTOBER 14-17, 2026!
MORE DETAILS COMING SOON!

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EMPLOYEE SPOTLIGHT

Say hello to
LATRENDAJOHNSON

HARM REDUCTION AND EDUCATION MANAGER



LaTrenda Johnson, first of her name, breaker of barriers and defender of dignity, hails from Mobile, Alabama, the true birthplace of Mardi Gras, where resilience, culture, and celebration run deep. Forged in the halls of healthcare administration and fluent in the language of data and community, she brings more than six years of experience advancing public health with both strategy and heart. Armed with a Master of Public Administration from Troy University, with a concentration in Healthcare Administration, and grounded in Health Informatics, she moves seamlessly between systems and the communities she serves.

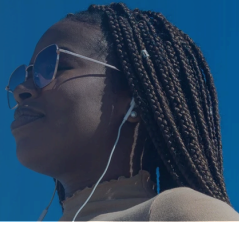
As the Harm Reduction and Education Manager at SisterReach, LaTrenda leads initiatives that expand equitable access to life-saving resources, reduce stigma, and strengthen community partnerships. A devoted wife and proud mother of three, she leads not only in her profession but in her home, guided by faith, compassion, and an unwavering commitment to legacy. She is a champion of harm reduction, a guardian of confidentiality, and an architect of equitable access. Where stigma rises, she answers with compassion. Where systems falter, she builds bridges.

Her work spans HIV risk reduction, clinical operations, community engagement, and program development rooted in the belief that dignity is not a privilege but a right.

Let it be known: her mission is clear...to expand access, restore hope, and strengthen communities.

You are Appreciated!

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SPECIAL ANNOUNCEMENT FROM OUR CEO

SisterReach

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WATCH VIDEO

CHERRISSE SCOTT
CEO AND FOUNDER OF SISTERREACH

[GIVE NOW](#)

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SisterReach

4,000 FAMILIES SERVED

2025 marked a year of growth, impact, and renewed commitment to our community.

We served more than 4,000 families through Pearl's Pantry and expanded harm-reduction efforts by increasing distribution of Narcan, HIV tests, emergency contraception, and other essential supplies.

We also completed a new strategic plan to guide the next three years of our work in an ever-changing political and social climate. Your continued support makes this work possible and moves us closer to a future where healthcare, safety, and equity are not privileges — but a right for all.



Join The Reach Collective:

Become a monthly donor and double your impact thanks to our \$150,000 Shelby County match.

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VIEW OUR 2025 IMPACT

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